



**STATE OF ARKANSAS**  
**OFFICE OF STATE PROCUREMENT**  
 1509 West 7th Street, Room 300  
 Little Rock, Arkansas 72201-4222

## ADDENDUM 1

TO: Vendors Addressed  
 FROM: Heather Bailey, Buyer  
 DATE: September 17, 2019  
 SUBJECT: SP-19-0094 Worker's Compensation Managed Care

The following change(s) to the above-referenced RFP have been made as designated below:

<input type="checkbox"/>	Change of specification(s)
<input checked="" type="checkbox"/>	Additional specification(s)
<input type="checkbox"/>	Change of bid opening time and date
<input type="checkbox"/>	Cancellation of bid
<input checked="" type="checkbox"/>	Other – Replacement Price Sheet

### ADDITIONAL SPECIFICATIONS

- Add the following to Section 1.13.A Pricing:
  1. Contractor **shall** submit pricing to cover all requirements in the RFP in the bid amount in Tables A, B, and C. For any additional services not required in the RFP, but available as optional services relevant to the Scope of Work, Prospective Contractors may submit a service description and pricing in Table E on the REVISED Official Bid Price Sheet. Table E will not be used in allocation of cost points.
- Add to the following Section 2.2 General Requirements:
  - E. Contractor **shall** use a secure file transfer method that meets industry standards for data exchange. PECD has final determination of acceptable methods of data exchange.
- Add the following to Section 2.2.C General Requirements:
  1. At bid submission, Contractor **shall** be a licensed MCO.
  2. In order to meet this qualification, Contractor may partner with another organization which is a licensed MCO as long as the Contractor is in compliance with AWCC Rule 30 and AWCC Rule 33.
- Add the following to Section 2.3 Key Personnel Requirements:
  6. Medical Case Managers **shall** be residents of the State of Arkansas except in cases where the injured lives in a border city or the injured person moves out of State.
- Add the following to Section 2.5.A Utilization Review Program Requirements:
  1. Contractor **shall** perform Utilization Review for the medical services for bills reviewed for fee schedule and PPO repricing at no additional cost.
  2. Contractor **shall** review all inpatient hospital bills and surgical procedures.
  3. Bills **must** be reviewed by personnel who meet the requirements listed in AWCC Rule 30 and AWCC Rule 33.
- Add the following to Section 2.5.F.7 Utilization Review Program Requirements:
  - a. Contractor **shall** review all bills for medical services provided inside the State of Arkansas which are subject to a fee schedule and PPO discounts which have not been pre-negotiated by the PECD.

- b. Bills for medical treatment outside the State will be handled on a case by case basis by PECD.
- Add the following to Section 2.5.G Utilization Review Program Requirements:
    1. Utilization Review for medical services requested by PECD which do not involve bill review may be billed at the Medical Case Management rate.
  - Add the following to Section 2.6.D Professional Bill Review Requirements:
    1. Peer Reviews **must** be sent to the AWCC Claims Analyst or AWCC Claims Specialist in the PECD.
    2. Pre-Certification determinations **must** be sent to the medical provider and the AWCC Claims Analyst or AWCC Claims Specialist in the PECD.
    3. Peer Review and Pre-Certification determinations may be sent via secure email.
    4. Bill Review determinations **must** be sent via SFTP to the PECD.
  - Add the following to Section 2.6.E Professional Bill Review Requirements:
    1. Contractor **shall** pay the eighteen percent (18%) in damages when the penalty is assessed against PECD.
    2. Contractor **shall** pay the eighteen percent (18%) in damages when the Contractor is dilatory in processing multiple bills for which it has sufficient information to process.
  - Add the following to Section 2.7.B Pre-Certification of Medical Procedures and Hospitalization Requirements:
    1. Contractor **shall** conduct pre-certifications during normal business hours.
  - Add the following to Section 2.10.C Medical Case Management:
    1. Contractor **shall** send updates during normal business hours.
  - Add the following to Section 2.10.E.2. Medical Case Management:
    - i. Contractor **shall** complete review within seventy-two (72) hours.
  - Add the following to Section 2.10.E.3.c Medical Case Management:
    2. Contractor **shall** update employees during normal business hours.
  - Add the following to Section 2.10.E.3.d Medical Case Management:
    1. Contractor **shall** update employees during normal business hours.

#### REPLACEMENT PRICE SHEET

- Delete the Official Price Sheet and replace with the REVISED Official Price Sheet dated 9.16.19.

The specifications by virtue of this addendum become a permanent addition to the above referenced RFP. Failure to return this signed addendum may result in rejection of your proposal.

If you have any questions, please contact Heather Bailey at [Heather.Bailey@dfa.arkansas.gov](mailto:Heather.Bailey@dfa.arkansas.gov).

Company: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_