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| Oklahoma Pinwheel Logo |  | Amendment of Solicitation |

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| **Date of Issuance:** | | | 11/12/2020 | | | **Solicitation No.** | | | | | | | 8070001235 | | | | | | | | |
| **Requisition No.** | | | 8070001235 | | | **Amendment No.** | | | | | | | | 4 | | | | | | | | |
| Hour and date specified for receipt of offers is changed: | | | | | | | No | | | Yes, to: | | |  | | |  | | |  | CST | | |
| Pursuant to OAC 260:115-7-30(d), this document shall serve as official notice of amendment to the solicitation identified above. Such notice is being provided to all suppliers to which the original solicitation was sent.  Suppliers submitting bids or quotations shall acknowledge receipt of this solicitation amendment prior to the hour and date specified in the solicitation as follows:  (1) Sign and return a copy of this amendment with the solicitation response being submitted; or,  (2) If the supplier has already submitted a response, this acknowledgement must be signed and returned prior to the solicitation deadline. All amendment acknowledgements submitted separately shall have the solicitation number and bid opening date in the subject line of the email. | | | | | | | | | | | | | | | | | | | | |
| **ISSUED FROM:** | | | | | | | | | | | | | | | | | | | | | |
|  | Sheila Killingsworth | | |  |  | | | |  | | procurement@okhca.org | | | | | | |
|  | Contracting Officer | | |  |  | | |  | | | | E-Mail Address | | |
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|  | **RETURN TO:** | procurement@okhca.org | | | | | | | | | | | | | | |
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| **Description of Amendment:** | | | | | | | | | | | | | | | | | | | | | |
| a. This is to incorporate the following: | | | | | | | | | | | | | | | | | | | | | | |
| Changes to Solicitation 8070001235 includes updates to the RFP document, model contract and forms.  SoonerSelect Dental RFP – 8070001235 (Updated 11/06/2020) updates:  (Page 12: Correction from Amendment Two. Form 8070001235C-Proposal Cover Page)  (Page 12: Correction from Amendment Two. 2.1.4 Property of the State is updated distinguishing 2.1.5 Withdrawal from Solicitation.)  Page 13, 2.3.2: Corrected typo.  Page 14, 2.5.1: Deleted reference to hard copy submission.  Page 17, Item 4: Replaced reference to hard copy with electronic copy.  Page 17, Item 5: Resolved duplicative and inconsistent requirements.  Page 17, Item 5: Added clarifying language on actuarially sound rates.  Page 19, Item 9: Made conforming changes with modifications ‘References’.  Pages 20, Item 10: Made conforming changes with modifications to ‘Responses’.  Page 20, Instructions. Clarified that the disclosure of subcontractor litigation applies only to Major health care service Subcontractors.  Page 21, Item 11. Added additional clarification to Item 11.  Page 26, Item 28: Eliminated requirement for actuarial attestation of the value of Value-Added Benefits.  Page 50, 2.7.2.1: Added oral presentation evaluation step.  Page 70, 1.1.18.7: Deleted state review requirement for reinsurance.  Page 76, 1.3.2: Updated accreditation date requirement.  Page 77, 1.3.3: Added “annually” to clarify value threshold for major administrative subcontractor definition.  Page 146, 1.11.3.1: Added a 15-day extension request for processing provider credentialing.  Page 166, 1.14.4.3: Payments to IHCPs. Language is changed.  Forms updates:  Form B: Deleted submission of staff training curriculum; added required diagrams to Item 78 Information Technology.  Form G: Clarified reference requirements.  Form L: Eliminated actuarial attestation requirement.  Form P, Security Specifications Tab, Line 41: Updated to spell out acronym.  Form R, CONTRACTS PERFORMANCE HISTORY: Updated with instructions.  Documents:  SoonerSelect Dental RFP – 8070001235 is replaced with:  **SoonerSelect Dental RFP – 8070001235 (Updated 11/06/2020)**  Form B Word Document is replaced with:  **Form B Bidder Proposal Submission Checklist (Updated 11/06/2020)**  Form G Word Document is replaced with:  **Form G References (Updated 11/06/2020)**  Form L Word Document is replaced with:  **Form L Value Added Benefits (Updated 11/06/2020)**  Form P Excel Spreadsheet is replaced with:  **Form P MCO Security Specifications (Updated 11/06/2020)**  Form R Excel Spreadsheet is replaced with:  **Form R Contractor Performance History (Updated 11/06/2020)** | | | | | | | | | | | | | | | | | | | |
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| b. All other terms and conditions remain unchanged. | | | | | |
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| Supplier Company Name (**PRINT**) | | |  | Date |
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| Authorized Representative Name (**PRINT**) |  | Title |  | Authorized Representative Signature |