

Amendment II to RFP 2019-LDI-01

4/17/2019

NOTE THE FOLLOWING AND ATTACHED ADDITIONS, DELETIONS AND/OR CHANGES TO THE REQUIREMENTS FOR THE REQUEST FOR PROPOSAL NUMBER: 2019-ACHN-01. THIS AMENDMENT MUST BE INCLUDED IN THE VENDOR'S RESPONSE AND MEET THE REQUIREMENTS AS DEFINED IN THE RFP.

THE VENDOR MUST SIGN AND RETURN THIS AMENDMENT WITH THEIR PROPOSAL.

I. Amendment I, Page 3 change as follows:

Currently reads as:

RFP Number: 2019-LDI-01	RFP Title: Lab Data Integration
RFP Due Date and Time: April 26, 2019 by 5pm Central Time	Number of Pages: 55
PROCUREMENT INFORMATION	
Project Director: Gary Parker	Issue Date: March 6, 2019
E-mail Address: Meaningful.Use@medicaid.alabama.gov Website: http://www.medicaid.alabama.gov	Issuing Division: Health Information Technology
INSTRUCTIONS TO CONTRACTORS	
Return Proposal to: Gary Parker Alabama Medicaid Agency Lurleen B. Wallace Building 501 Dexter Avenue PO Box 5624 Montgomery, AL 36103-5624	Mark Face of Envelope/Package: RFP Number: 2019-LDI-01 RFP Due Date: April 26, 2019 by 5pm CT
	Firm and Fixed Price from Appendix B: \$
CONTRACTOR INFORMATION <i>(Contractor must complete the following and return with RFP response)</i>	
Contractor Name/Address:	Authorized Contractor Signatory: (Please print name and sign in ink)
Contractor Phone Number:	Contractor FAX Number:
Contractor Federal I.D. Number:	Contractor E-mail Address:

Revised as:

RFP Number: 2019-LDI-01	RFP Title: Lab Data Integration
RFP Due Date and Time: May 3, 2019 by 5pm Central Time	Number of Pages: 55
PROCUREMENT INFORMATION	
Project Director: Gary Parker	Issue Date: March 6, 2019
E-mail Address: Meaningful.Use@medicaid.alabama.gov Website: http://www.medicaid.alabama.gov	Issuing Division: Health Information Technology
INSTRUCTIONS TO CONTRACTORS	
Return Proposal to: Gary Parker Alabama Medicaid Agency Lurleen B. Wallace Building 501 Dexter Avenue PO Box 5624 Montgomery, AL 36103-5624	Mark Face of Envelope/Package: RFP Number: 2019-LDI-01 RFP Due Date: May 3, 2019 by 5pm CT Firm and Fixed Price from Appendix B: \$
CONTRACTOR INFORMATION <i>(Contractor must complete the following and return with RFP response)</i>	
Contractor Name/Address:	Authorized Contractor Signatory: (Please print name and sign in ink)
Contractor Phone Number:	Contractor FAX Number:
Contractor Federal I.D. Number:	Contractor E-mail Address:

II. Amendment I, Page 4 change as follows:

Currently reads as:

EVENT	DATE
RFP Issued	March 6, 2019
RFP Questions Due	April 5, 2019
RFP Questions and Answers Posted	April 17, 2019
Proposals Due by 5 pm CT	April 26, 2019
Evaluation Period	May 2-20, 2019
Contract Award Notification	May 31, 2019
**Contract Review Committee	July 11, 2019
Official Contract Award//Begin Work	August 1, 2019

Revised as:

EVENT	DATE
RFP Issued	March 6, 2019
RFP Questions Due	April 5, 2019
RFP Questions and Answers Posted	April 19,2019
Proposals Due by 5 pm CT	May 3, 2019
Evaluation Period	May 9-31, 2019
Contract Award Notification	June 11, 2019
Contract Review Committee Meeting Date	July 11, 2019
Official Contract Award//Begin Work	August 1, 2019

I hereby acknowledge the receipt of Addendum II to RFP 2019-LDI-01.

Authorized Contractor Signature

Date

Contractor Organization