

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 1

TO: All Addressed Vendors

FROM: Office of Procurement

DATE: June 6, 2024

SUBJECT: 710-24-076 Medicaid and Other Human Services Procurement Support

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

- ☐ Change of specification(s)
☐ Additional specification(s)
☐ Change of bid opening date and time
☐ Cancellation of bid
☒ Other

OTHER

- Exhibits 1 and 2 – remove and replace with Revised Exhibits 1 and 2
- Add Attachment I – Client History Form

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: Karrie Goodnight, DHS.OP.Solicitations@dhs.arkansas.gov, (501) 320-3906.

Vendor Signature

Date

Company