Amendment #10
Issued on: August 3, 2006

Request for Proposal RFP-MQD-2007-002
QUEST Managed Care Plans to Cover Medicaid and Other Eligible Individuals Who Are Not Aged, Blind, or Disabled

#	RFP Section #	RFP Language	Amendment
1.	22.100	3rd to last bullet reads: An offeror's lack of financial stability and viability;	3rd to last bullet shall be amended to read: An offeror's lack of financial stability and viability; **or**
2.	22.100	2nd to last bullet reads: An offeror's failure to complete the Elimination of Barriers to Contracting Between FQHCs/RHCs and Health Plans form provided in Appendix Y (if applicable); or	Delete 2nd to last bullet.
3.	80.230	Item O reads: The Potential Conflicts of Interest with Health Care Providers form provided in Appendix Y (if applicable). This form shall be submitted by each provider of any proposer that is owned or controlled by a provider or providers of health care services as defined in Section 72.400.	Item O is deleted.
4.	New 80.270		Insert the following: Attachment: Appendix Y: Elimination of Barriers to Contracting Between FQHCs/RHCs and Health Plans (is applicable to Health Plans) and Appendix Z: Elimination of Barriers to Contracting Between FQHCs/RHCs and Health Plans (applicable to FQHCs/RHCs) or Explanation of Why These Forms Have Not Been Submitted The offeror shall attach the Elimination of Barriers to Contracting Between

			FQHCs/RHCs and Health Plans form(s) provided in Appendix Y and, if applicable, Appendix Z, or an appropriate explanation of why these forms have not been attached. Appendix Y shall be submitted by each offeror. Appendix Z shall be submitted by any FQHC or RHC that has an ownership or control interest in the offeror, as defined in Section 72.400.
5.	100.300	Item #5 reads: The health plan has completed all requirements, including the narratives and required attachments in Section 80.200.	Item #5 is deleted.
6.	100.300	Item #6	Amend to read Item #5.
7.	100.400	1st row, 1st column reads: 80.200 – Transmittal Letter, Company Background, Other Documentation, Financial Statements, Per Member Financial Data	1st row, 1st column is amended to read: 80.210, 80.220, 80.230, 80.240, 80.250, 80.260 – Transmittal Letter, Company Background, Other Documentation, Financial Statements, Per Member Financial Data, Risk Based Capital
8.	100.400	1st row, 2nd column (Section Number) reads: 80.200 80.210 80.220 80.230 80.240 80.250	1st row (2nd column—Section Number) is amended to read: 80.210 80.220 80.230 80.240 80.250 80.260
9.	100.400		Insert the following as the 2nd row : <u>1st column (Section/Title)</u> 80.270 Appendix Y: Elimination of Barriers to Contracting Between FQHCs/RHCs and Health Plans (applicable to Health Plans) and Appendix Z: Elimination of Barriers to

			Contracting Between FQHCs/RHCs and Health Plans (applicable to FQHCs/RHCs, or Explanation of Why These Forms Have Not Been Submitted 2nd column (Section Number) 80.270 3rd column (Total Points Possible for Section) The State is not assigning points to this required attachment (or narrative), however the State reserves the right to evaluate the impact of a health plan's failure to attach the required document(s) and/or provide a reasonable explanation for its failure, against the State's desire to assure an open and competitive procurement. The State will evaluate the health plan's response to this attachment for its impact on the ability of all health plans to assure access to necessary care for the State's QUEST population. Remedies imposed by the State may include, but not be limited to, limitation on enrollment into the non-responsive health plan or refusal to contract with the non-responsive health plan. 4th column (Points Needed to Pass): Leave empty