

State of Arkansas  
DEPARTMENT OF HUMAN SERVICES  
700 South Main Street  
P.O. Box 1437 / Slot W345  
Little Rock, AR 72203  
501-682-6327

**ADDENDUM 1**

**DATE:** January 12, 2018  
**SUBJECT:** 710-18-1005 Actuarial Services

The following change(s) to the above referenced Invitation for Bid for DHS has been made as designated below:

- Change of specification(s)**  
\_\_\_\_ Additional specification(s)  
 Change of bid opening date and time  
\_\_\_\_ Cancellation of bid  
\_\_\_\_ Other

**BID OPENING DATE AND TIME**

Bid opening date and time **will be extended to**, January 17, 2018 1:00 PM., CST.

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**CHANGE OF SPECIFICATION(S)**

**Section 2.6 Performance Standards** – Delete A, and replace with:

- A. State law requires that all contracts for services include Performance Standards for measuring the overall quality of services provided. Performance Based Contracting identifies expected deliverables, performance measures, or outcomes; and defines the acceptable standards a vendor must meet in order to avoid assessment of damages. See Pages 22 through 31.

**Section 3.3 Conditions of Contact** – Delete C and replace with:

- C. The Contractor agrees to the DHS Standard Terms and Conditions as presented in Attachment D, a pro forma contract as presented in Attachment E, the Business Associate Agreement as presented in Attachment F, and the Organizational or Personal Conflict of Interest policy as presented in Attachment G.

**Delete Attachment C.**

The specifications by virtue of this addendum become a permanent addition to the above referenced Invitation for Bid. FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.

BIDS WILL BE ACCEPTED UNTIL THE TIME AND DATE SPECIFIED. THE BID ENVELOPE MUST BE SEALED AND SHOULD BE PROPERLY MARKED WITH THE BID NUMBER, DATE AND HOUR OF BID OPENING AND BIDDER'S RETURN ADDRESS. IT IS NOT NECESSARY TO RETURN "NO BIDS" TO THE DEPARTMENT OF HUMAN SERVICES.

If you have questions, please contact the buyer at [barry.goldman@dhs.arkansas.gov](mailto:barry.goldman@dhs.arkansas.gov) or 501-537-2446

\_\_\_\_\_  
Vendor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Company