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

ADDENDUM 6

TO: All Addressed Vendors **FROM:** Office of Procurement

DATE: April 1, 2025

SUBJECT: 710-19-1009 Therapeutic Counseling

The following change(s) to the above referenced RFQ have been made as designated below:		
X	Change of specification(s) Additional specification(s) Change of bid opening date and time Cancellation of bid	
X	Other	

CHANGE OF SPECIFICATION(S)

• Page 1: Delivery of Response Documents:

Response documents may also be emailed to: DHS.OP.Solicitations@dhs.arkansas.gov

• Section 1.1 – Remove the specialty services and populations listed and replace with the following:

Specialty Services List (Must provide certification of documents of specialized training)

- Trauma Focused Cognitive Behavioral Therapy
- Substance Use Disorders Counseling
- Motivational Interviewing
- Acceptance and Commitment Therapy (ACT)
- Parent-Child Interaction Therapy (PCIT)
- Child Parent Psychotherapy (CPP)
- Eye Movement Desensitization Reprocessing (EMDR)
- Dialectical Behavior Therapy (DBT)
- · Other: Describe and provide documentation of certification

Specialty Populations:

- Under four (4) years of age
- Child four (4) through twelve (12) years of age
- Youth twelve (12) through eighteen (18) years of age
- Adult eighteen (18) through fifty-four (54) years of age
- Adult fifty-five years of age and older
- Families
- · Chronically Mentally III
- Co-Occurring Behavioral Health and Developmental Disability/Intellectual Disability (DD/ID)
- Co-Occurring Behavioral Health and Substance Use Disorder (SUD)
- DHS Division of Children and Family Services (DCFS): provided in the home, upon request
- DHS Division of Youth Services (DYS): provided in the home or DYS facility, upon request

• Section 1.9:

All required documents may be delivered by email. If documents are sent via email, the extra copies detailed in Section 1.9(C)(1) (a,b,c) are not required. The redacted copy contemplated in Section 1.9(C)(2) may be delivered by email. DHS reserves the right to require physical copies of all submitted materials at a later date.

OTHER

As a qualified vendor on the Arkansas Department of Human Services (DHS) Qualified Vendor List (QVL) 710-19-1009 for Therapeutic Counseling, this is your notification to please submit a signed copy of addendum six (6) to the email address (DHS.OP.Solicitations@dhs.arkansas.gov), prior to 4:00 pm, April 30, 2024, to be included on the next fiscal year's list starting July 1, 2025, under the same areas of expertise you originally submitted.

Please note the following:

- If you're renewing to be included in the next State Fiscal Year QVL listing, without any additional or new areas of expertise, please sign and return Addendum 6 only (attached for convenience).
- If you're renewing and wish to add one or more of the updated specialty areas and/or populations, complete the Response Packet and provide all supporting documentation that was required in the original submittal document for each new area of expertise, and a signed Addendum 6. Please do not include any additional submittal information as your original submittal documents have already been reviewed and qualified.
- If you have not submitted before, please submit all supporting documents required in the RFQ, the response packet, and a signed Addendum 6. For new submissions and renewals, our office will review the supporting documentation. Confirmation will be provided to you once evaluated.

Please provide these documents to me via email. Physical copies are not required. Please note that the basic attachment on the website has been updated for those who have not submitted before. Please let me know if I may assist you in any way, and I thank you again for your participation.

The specifications by virtue of this addendum beco to return this signed addendum may result in reject	me a permanent addition to the above referenced RFQ. Failure ion of your proposal.
If you have any questions, please contact: Susie Ta	aylor- dhs.op.solicitations@dhs.arkansas.gov , 501-682-9603.
Vendor Signature	Date
Company	