

**Office of Procurement Services**

P.O. Box 7800 • 315 W. Main St., Suite 416 • Tavares, FL 32778

**SOLICTATION:** County Medical Plan for Employees 3/14/2023

Vendors are responsible for the receipt and acknowledgement of all addenda to a solicitation. Confirm acknowledgement by including an electronically completed copy of this addendum with submittal. Failure to acknowledge each addendum may prevent the submittal from being considered for award.

THIS ADDENDUM CHANGES THE DATE FOR RECEIPT OF PROPOSALS.

DUE DATE FOR PROPOSAL SUBMISSION IS NOW **MARCH 23, 2023, 3p.m. Eastern.**

LAST DAY FOR QUESTIONS HAS BEEN EXTENDED UNTIL MARCH 16, 2023**.**

**QUESTIONS/RESPONSES**

Q25. Will County allow exceptions/modifications to Exhibit B – Insurance Requirements?

R25. **Exhibit B – Insurance Requirements has been revised. Refer to Revised Exhibit B – Insurance Requirements v.03.13.23. Revisions in Sections B, D, E, G, and I. (Posted on the website with the solicitation documents).**

Q26. Will the County allow exceptions for Exhibit C – Terms and Conditions?

R26. **The County acknowledges that all of the general terms and conditions may not be fully applicable to the contract resulting from this solicitation. This contract will be drafted and negotiated specifically for this commodity. It is recommended changes, not exclusions, be submitted during the question period for acceptance. Failure to come to an agreement on terms and conditions will result in contract negotiations with the next ranked vendor.**

Q27. Will the County allow exceptions for Exhibit M – Business Associate Agreement HIPPA?

R27. **Exhibit M – Business Associate Agreement HIPPA has been replaced. Refer to Revised Exhibit M – Business Associate Agreement HIPPA v.03.13.23 (Posted to the website with solicitation documents).**

Q28. Addendum 3 references a Revised Attachment 2, please provide.

R28. **Refer to Revised Attachment 2 – Proposal Worksheet 23-500 v.3.14.23 (Posted on the website with solicitation documents).**

**ACKNOWLEDGEMENT**

Firm Name: Click or tap here to enter text.

I hereby certify that my electronic signature has the same legal effect as if made under oath; that I am an authorized representative of this vendor and/or empowered to execute this submittal on their behalf.

Signature of Legal Representative Submitting this Bid: Click or tap here to enter text.

Date: Click or tap to enter a date.

Print Name: Click or tap here to enter text.

Title: Click or tap here to enter text.

Primary E-mail Address: Click or tap here to enter text.