



COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES
600 East Broad Street, Suite 1300
Richmond, VA 23219

August 19, 2014

ADDENDUM No. 1 TO PROVIDERS:

Reference Request for Application: RFA 2014-03

Dated: July 1, 2014

Due: ~~August 6, 2014~~ October 31, 2014

Below are updates that may delete, add, modify or clarify certain aspects of the aforementioned RFA. Please incorporate as necessary.

ATTENTION: Application Due Date as referenced on RFA cover sheet and other sections has been changed. Applications will now be accepted until 2:00 PM E.S.T. on ~~October 31~~ 2014.

A signed acknowledgment of this addendum must be received by this office either prior to the due date and hour required or attached to your application response. Signature on this addendum does not substitute for your signature on the original application document. The original application document must be signed.

Sincerely,

Steve Ankiel

Name of Firm: _____

Signature and Title: _____

Date: _____