External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: Federal Hearings & Appeals Services		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Re-Submitted Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	X		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”	X		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			

	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		
	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty, Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.			X
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients within the last 5 years, on Attachment G.	X		
	• References scored a total of 18 points combined for each score sheet.	X		
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.	X		
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.	X		
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black for each page that confidential information appears.		X	
	• Copy is in searchable WORD or PDF and not password protected.	X		
	k. Attachment G -References provided and two reference surveys completed within 3 days.	X		
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		

	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: Jeanette Crawford

Date: 1/20/2026

Witness Signature: Kayla J. McKnight

External Medical Review Consulting
Bid Response Checklist
IFB #20251031

Bidder Name: Federal Hearings & Appeals Services		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date December 19, 2025, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.		X	
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	X		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”	X		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty, Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.		X	
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.	X		
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.	X		
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.		X	
	• Copy is in searchable WORD or PDF and not password protected.	X		
	k. Attachment G -References provided and two reference surveys completed within 3 days.			
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 12/19/2025

Witness Signature: 

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: iMPROve Health		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Re-Submitted Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	X		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”	X		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			

	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		
	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty, Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.			X
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients, on Attachment G.	X		
	• References scored a total of 18 points combined for each score sheet.	X		
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.		X	
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.	X		
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 1/20/2026

Witness Signature: Kayla J. McKnight

External Medical Review Consulting
Bid Response Checklist
IFB #20251031

Bidder Name: iMPROve Health		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date December 19, 2025, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:	X		
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	X		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”	X		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.	X		
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.		X	
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.		X	
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.			
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 12/22/2025

Witness Signature: Kayla J. McKnight

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: MCMC Services		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.		X	
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.		X	
	ii) Bid form was not modified, cost only included on appropriate line on bid form.			
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.		X	
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.			
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”		X	
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.		X	
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).		X	
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.			X
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients, within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			X
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.		X	
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.		X	
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.		X	
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.			X
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.		X	
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 1/20/2026

Witness Signature: Kayla J. McKnight

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: MCMC Services		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.		X	
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.		X	
	ii) Bid form was not modified, cost only included on appropriate line on bid form.			
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.		X	
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.			
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	X		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”		X	
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.		X	
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).		X	
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.			X
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients, within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			X
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.		X	
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.		X	
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.		X	
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.			X
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.		X	
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 1/20/2026

Witness Signature: Kayla J. McKnight

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: Physio Solutions dba medlitix		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Re-Submitted Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.	X		
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.		X	
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.			
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.		X	
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type "End of Response"		X	
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.	X		
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.		X	
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			

	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		
	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.		X	
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients within the last 5 years, on Attachment G.	X		
	• References scored a total of 18 points combined for each score sheet.	X		
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.	X		
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.	X		
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.	X		
	• Copy is in searchable WORD or PDF and not password protected.	X		
	k. Attachment G -References provided and two reference surveys completed within 3 days.	X		
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 1/23/2026

Witness Signature: Kayla J. McKnight

MISSISSIPPI DIVISION OF MEDICAID

External Medical Review Consulting
Bid Response Checklist
IFB #20251031

Bidder Name: Physio Solutions dba medlitix		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date December 19, 2025, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.		X	
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.		X	
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.			
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.		X	
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type "End of Response"		X	
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.	X		
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.		X	
	• A list of past and/or current engagements for similar services.		X	
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.		X	
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients ~~within the last 5 years~~, on Attachment G.	X		
	• References scored a total of 18 points combined for each score sheet.			
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.	X		
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.	X		
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.	X		
	• Copy is in searchable WORD or PDF and not password protected.	X		
	k. Attachment G -References provided and two reference surveys completed within 3 days.			
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 12/19/2025

Witness Signature: Kayla J. McKnight

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: MLS Group of Companies		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Re-Submitted Bid was received by due date January 16, 2026 by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	x		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	x		
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	x		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.			
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.	x		
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			x
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	x		
	iv) At the end of each response Bidder should type “End of Response”	x		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.	x		
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	x		
	• A list of past and/or current engagements for similar services.	x		
	2. Bidder Licenses/Certifications provided:			

	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		
	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.		X	
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.		X	
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.	X		
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients, within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.	X		
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.		X	
	• A Redacted submission was provided.			X
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.	X		
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.		X	
4.	No modifications or additions to any portion of the document were made.	X		

Signature of Reviewer: Jeanette Crawford

Date: 1/23/2026

Witness Signature: Kayla J. McKnight

External Medical Review Consulting
Bid Response Checklist
IFB #20251031

Bidder Name: MLS Group of Companies		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date December 19, 2025, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.			
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.		X	
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.		X	
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”		X	
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.	X		
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.		X	
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.		X	
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty , Bidder stated None or 0 years.		X	
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).	X		
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.	X		
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients within the last 5 years, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.		X	
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.			X
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black.			X
	• Copy is in searchable WORD or PDF and not password protected.			X
	k. Attachment G -References provided and two reference surveys completed within 3 days.	X		
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.		X	
4.	No modifications or additions to any portion of the document were made.			

Signature of Reviewer: Jeanette Crawford

Date: 12/19/2025

Witness Signature: Kayla J. McKnight

External Medical Review Consulting – 1/16/2026
Bid Response Checklist
IFB #20251031

Bidder Name: QSource		**Yes**	**No**	**N/A**
1.	Mandatory Letter of Intent (IFB Attachment I) was received by deadline November 14, 2025, at 2:00 p.m. and signed.	X		
2.	Bid was received by due date January 16, 2026, by 2:00 p.m. in SharePoint	X		
	If Answered No to either Requirement - no further review was done.			
3.	Bid package contained:			
	a. Bid package is in one searchable PDF file and not password protected.	X		
	b. Bid Cover sheet (Attachment A) completed.	X		
	c. Bid Form (Attachment B)			
	i) Bid form received and signed.	X		
	ii) Bid form was not modified, cost only included on appropriate line on bid form.	X		
	d. Bid Package submission followed bid submission formats.		X	
	i) A Cover page is required for each subsection. Included IFB#, Bidder name and Attachment Title with the exception of pre-existing documents.	X		
	e. Bid Form (Attachment B) Addendum 1 - Minimum Qualifications Bid Form received.	X		
	i) Each page indicates the corresponding element to which the page is responsive. Each page and all attachments numbered in the footer of each page, centered.		X	
	ii) Additional Supporting documentation (if applicable), format same as header format, but include on the second line the title of the document provided.			X
	iii) Bidder provided written, detailed validation describing their ability to meet each minimum qualification.	X		
	iv) At the end of each response Bidder should type “End of Response”	X		
	f. Bid Form (Attachment B) w/Addendum 1- Minimum Requirements received.			
	1.) Bidder Experience Qualifications provided:			
	• 5 years in external medical review services for a healthcare organization.	X		
	• A list of past and/or current engagements for similar services.	X		
	2. Bidder Licenses/Certifications provided:			
	• Each Medical Provider shall be licensed to practice in MS. If a specialty physician is not licensed in MS, a MS licensed physician must review and sign off on the recommendation.	X		

	• List of participating Medical Providers and attest they meet the licensure and board certification requirements.	X		
	• Include relevant experience in the specialty and detail the number of years of experience. DOM prefers at least 2 years of experience; there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty, Bidder stated None or 0 years.	X		
	• Bidder is to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).		X	
	• In addition, an accreditation by NCQA for Utilization Management is preferred but not required.			X
	3. References provided:			
	• From the list of engagements provided in Section 1.10.2 (3) bidder provided reference contacts from 6-8 clients which should include current and/or past clients, on Attachment G.		X	
	• References scored a total of 18 points combined for each score sheet.			X
	4. Bidders provide written, detailed validation describing their ability to meet each qualification and perform the scope of services. No more than 5 pages.	X		
	g. Attachment C – Contract Draft Acknowledgement signed.	X		
	h. Attachment D - DHHS Certification Drug-Free Workplace received and signed.	X		
	i. Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility matters received and signed.	X		
	j. Attachment F - Proprietary Information Form received and signed.	X		
	• An unredacted submission was provided.	X		
	• A Redacted submission was provided.	X		
	• If a redacted submission was provided it was clearly marked “Public Copy” on cover page.		X	
	• Public Copy marked in upper right-hand corner “Confidential” and related information redacted in black for each page that confidential information appears.		X	
	• Copy is in searchable WORD or PDF and not password protected.	X		
	k. Attachment G -References provided and two reference surveys completed within 3 days.			X
	l. Attachment H – Bidder’s IFB Response Checklist received and signed.	X		
	m. Attachment I - All Amendment Acknowledgements, if applicable.	X		
4.	No modifications or additions to any portion of the document were made.	~~x~~		

Signature of Reviewer: ~~Jeanette Crawford~~

Date: 1/20/2026

Witness Signature: Kayla J. McKnight

Attachment A — Bid Cover Sheet

External Medical Review Consulting

IFB #20251031
RFX #3160007625

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

PUBLIC COPY

Resubmitted: 1/16/2026
Resubmission Due Date: 1/16/2026
By: James Bobeck, Esq., CEO
Federal Hearings and Appeals Services, LLC
40 Coal Street, Wilkes-Barre, PA 18702
Tel: 570-779-5122; **Fax:** 570-719-0306
UEI: XFNHGQ6UPVY1
DUNS: 036982932
FIN: 23-2939573

Attachment A – Bid Cover Sheet IFB #: 20251031

DOM is seeking to establish a contract for External Medical Review Consulting. Bids are to be submitted **Friday, December 12, 2025,** on or before **2:00 p.m., CST**.

Bid Cover Sheet is to be used to accompany your electronic file when submitting bid via SharePoint.

A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site.

File Name: **BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING**

Company Name:	Federal Hearings and Appeals Services, LLC
Company Address:	40 Coal St. 2nd Floor, Wilkes-Barre, PA 18702
Authorized Signature:	
Name and Title:	James L. Bobeck, Esq. CEO
Phone Number:	570-779-5122
Email address:	daigleca@fhas.com
***MAGIC Supplier #**	

*If Bidder does not have a MAGIC Supplier number, Bidder can register in MAGIC after award is made to Contractor.

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Attachment B — Bid Form

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

Note: This page contains redacted confidential information.

Attachment B - Bid Form

GENERAL

Compensation for services shall be in the form of a firm fixed-rate agreement. Through submission of this form and accompanying **Addendum 1: Minimum Qualifications**, the Bidder certifies the following:

1. The Bidder shall accept an award made as a result of the submission.
2. The Bidder is registered to do business in the State of Mississippi as prescribed by the Mississippi Secretary of State, if not already registered Bidder will do so within five (5) business days of being offered an award.
3. The Bidder has not been sanctioned by a state or federal government within the last 10 years.
4. The Bidder has a minimum of five (5) years of experience in contractual services, providing the type of services described in this IFB.
5. The Bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation and is able to provide each required component and deliverable as detailed in the Scope of Services.

The services described in the Scope of Services require Bidders to offer an all-inclusive, fully burdened hourly rate. This rate must encompass all costs of performance, including but not limited to, labor, overhead, administrative expenses, and profit. To assist in determining this pricing, historical usage data has been provided in Appendix 2.

The total number of hours for this contract is not fixed and will vary based on the State's needs. For evaluation purposes, DOM will calculate the average cost across all five years to determine the lowest bid.

The anticipated contract term for the required services is February 9, 2026, through February 8, 2029, with one optional two-year renewal, at the discretion of DOM.

BID FORM – EXTERNAL MEDICAL REVIEW CONSULTING **IFB #20251031**	
BIDDER NAME: Federal Hearings and Appeals Services, LLC (FHAS)	
Service Description: Appeal Review, Hearing and Report Preparation	**Hourly Rate**
Term: Year One	$ [redacted]
Term: Year Two	$
Term: Year Three	$
Optional Term: Year Four	$
Optional Term: Year Five	$

*Bidders shall **not** include any additional charges or additional line items in this bid form. Any additional charges included on a bid form may result in the bid being deemed non-responsive, and the bid will thereby be rejected.*

CERTIFICATIONS:

By signing below, the Company Representative certifies that he/she has authority to bind the company and further acknowledges on behalf of the company:

1. That he/she has thoroughly read and understands this IFB and the attachments thereto;

2. That the company meets all requirements and acknowledges all certifications contained in this IFB and the attachments thereto;

3. That the company agrees to all provisions of this IFB and the attachments thereto, including, but not limited to, the draft contract attached to this IFB, which contains the Required and Optional Clauses as required by the *Mississippi Public Procurement Review Board (PPRB) Office of Personal Service Contract Review (OPSCR) Rules and Regulations*;

4. That the company will perform, without delay, the services required at the prices quoted in this **Attachment B;**

5. That the company has, or will secure, at its own expense, applicable licensed and certified personnel or personnel with requisite credentials who shall be qualified to perform the duties required to be performed under this IFB; and

6. That the company can and will meet all required laws, regulations, and/or procedures related to services and represents that it is licensed, certified and possesses the requisite credentials to perform these services, if required. Further, if the company is the successful bidder and the material, equipment, etc., delivered is subsequently found to be deficient pursuant to any federal and state laws and regulations in effect on the date of delivery, all costs necessary to bring the material, equipment, etc. into compliance with aforementioned requirements shall be borne solely by Company.

NON-DEBARMENT:

By submitting a bid, the Bidder certifies that it is not currently debarred, suspended, or otherwise excluded from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government and that it is not an agent of a person or entity that is currently debarred from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government.

CERTIFICATION OF INDEPENDENT PRICE DETERMINATION:

By submitting a bid, the Bidder certifies that the prices submitted in response to the solicitation have been arrived at independently and without any consultation, communication, or agreement with any other bidder or competitor for the purpose of restricting competition.

BIDDER'S REPRESENTATION REGARDING CONTINGENT FEES:

By responding to the solicitation, Bidder represents that it has not retained any person or agency on a percentage, commission, or other contingent arrangement to secure this contract. If Bidder cannot make such a representation, a full and complete explanation shall be submitted, in writing, with the bid.

REPRESENTATION REGARDING GRATUITIES:

The Bidder represents that is has not, is not, and will not offer, give, or agree to give any employee or former employee of DOM a gratuity or offer of employment in connection with any approval, disapproval, recommendation, development, or any other action or decision related to the solicitation and resulting contract. The Bidder further represents that no employee or former employee of DOM has or is soliciting, demanding, accepting, or agreeing to accept a gratuity or offer of employment for the reasons previously stated; any such action by an employee or former employee in the future, if any, will be rejected by contractor. The Bidder further represents that is it in compliance with the Mississippi Code Annotated §§ 25-4-101 through 25-4-121 and has not solicited any employee or former employee to act in violation of said law.

Signature:	
Date:	12/01/2025
Name and Title:	James L. Bobeck, Esq., CEO
Company Name:	Federal Hearings and Appeals Services, LLC

Note: Failure to sign the bid form may result in the bid being rejected as non-responsive. Modifications or additions to any portion of this bid document may be cause for rejection of the bid.

In addition to providing the above information, please answer the following questions regarding your company. The Bidder must answer questions below in order for their bid to be considered.

1	What year was your company started?	1996	
2	Please provide the physical location and mailing address of your company's home office, principal place of business and place of incorporation.	Physical Location	40 Coal St. 2nd Floor Wilkes-Barre, PA 18702
		Mailing Address	40 Coal St. 2nd Floor Wilkes-Barre, PA 18702
		Principal Place of Business	40 Coal St. 2nd Floor Wilkes-Barre, PA 18702
		Place of Incorporation	Delaware

3	Company structure/organization to include any parent or subsidiary companies. As applicable, please describe the role of any parent and/or subsidiary company in providing the services requested within this IFB.	FHAS is wholly owned by Shepherd Intermediate, LLC at 100% and is member managed. Federal Hearings and Appeals Services is the only company within Shepherd Intermediate, LLC	
4	Is your company currently for sale or involved in any transaction to expand or become acquired by another business entity during either this solicitation or the resultant contract period? If "yes", please provide information regarding such a transaction as it relates to your Company's organization structure (post transaction) and your Company's ability to continue delivery of services (post transaction) as required herein.	No	Yes, please explain.
		No	
5	If your company is not physically located in Mississippi, how will you provide the services set forth in the IFB?	FHAS provides medical review services nationally through a fully electronic/ remote secure business process.	
6	List all licenses, certifications or permits your company possesses that are applicable to performing the services required in this IFB.	- URAC Independent Review Organization (IRO) Comprehensive (Internal & External Review) Accreditation - ISO 9001:2015 Quality Management Certification	

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Attachment B — Minimum Qualifications

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

Note: This page contains redacted confidential information.

Attachment B

Addendum 1: Minimum Qualifications, 1.10.2(1)

Bidder Experience Requirement

Bidder must have a minimum of five (5) years of experience providing independent external medical review services in the administrative appeals process for a healthcare organization as it relates to the services requested in this IFB. To demonstrate this expertise, the Bidder must provide a list of past and/or current engagements for which bidder performed similar services.

FHAS Response: Since 1996, FHAS has been a leading national provider of independent external medical review services holding full URAC Comprehensive Independent Review Organization (IRO) Accreditation, URAC Health Utilization Management Accreditation, and ISO 9001:2015 Certification. Leveraging a diverse medical review team of physicians, non-physician practitioners, and legal experts aligned with the American Board of Medical Specialties (ABMS), FHAS successfully adjudicated over [redacted] external medical reviews in the past year, achieving an average [redacted] timeliness rate, reflecting our commitment to excellence and efficiency.

Clients include [redacted]

As part of FHAS's ongoing 3rd party medical reviews furnished under [redacted], as needed, at appeals hearings.

The following contract examples demonstrate our experience and expertise in providing similar services.

The past performance references provided below highlight relevant examples for which the FHAS medical review team has furnished clinical and non-clinical medical claims reviews and prior authorizations.

Customer (Agency)	Period of Performance	Description of Services/Supplies	Add'l Info
[redacted]	2021-Present	FHAS provides prior authorizations involving Medicare beneficiaries	

Note: This page contains redacted confidential information.

[redacted]		covering Medicare Administrator Contractor (MAC) geographic areas	
[redacted]	2025 - Present	FHAS provides prior authorizations involving Medicare beneficiaries covering Medicare Administrator Contractor (MAC) geographic areas	
[redacted]	2015- Present	FHAS performs Medicare outpatient provider claims adjudications to determine appropriateness of payment and whether coverage criteria have been met for the billed services. FHAS reviews medical supporting documentation, CMS coverage criteria, and whether coding was correct. FHAS issues adjudications based upon its findings.	Continual Service for over 12 Years
[redacted]	2016 – Present	FHAS performs Medicare Part A (inpatient and skilled nursing) provider claims determine appropriateness of payment and whether coverage criteria have been met for the billed services. FHAS reviews medical supporting documentation, CMS coverage criteria, and whether coding was correct. FHAS issues reports based on its findings.	Continual Service for over 10 Years
[redacted]	7/2/2019 – 12/31/2022	FHAS drafts position papers on behalf of CMS for the Office of Medicare Hearings and Appeals (OMHA). FHAS reviews medical claims and supporting documentation to draft position papers including factual summaries, applicable Medicare coverage criteria, and analysis of whether Medicare claims are reimbursable.	
[redacted]	6/1/2019 – 12/31/2023	FHAS drafts position papers on behalf of CMS for the Office of Medicare Hearings and Appeals (OMHA). FHAS reviews medical claims and supporting documentation to draft position papers including factual summaries, applicable Medicare coverage criteria, and analysis whether Medicare claims are reimbursable.	Teaming Agreement Ongoing since 2023

Note: This page contains redacted confidential information.

[redacted]	1999 - Present	FHAS provides medical claims review and prior authorizations involving Medicaid Beneficiaries	Continual Service since 1999 due to excellent performance
[redacted]	2022 - Present	FHAS provides medical claims review and prior authorizations involving commercial insurance beneficiaries.	1 of only 13 companies nationally certified as IDRE.
[redacted]	2017 – Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Continuous Service since 2017
[redacted]	2020 - Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Continuous Service since 2020
[redacted]	2019 – 12/2024	Using over 200 peer review medical specialists, FHAS provides critical peer review expertise by using our vast network of physicians to thoroughly review medical documents related to medical care in the IHS system and in accordance with IHS standards.	Exemplary CPARS
[redacted]	2016 - Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Continuous Service since 2016;
[redacted]	2020 – Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2030

Note: This page contains redacted confidential information.

[redacted]	2019 – Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2026
[redacted]	2019 – Present	FHAS provides medical claims review and prior authorizations involving providers and Disability applicants with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2027
[redacted]	2017 -Present	FHAS provides medical claims review and prior authorizations involving health issuers, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Continuous Service since 2017
[redacted]	2019 - Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2027
[redacted]	2019 - Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2027
[redacted]	2024 – Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	

Note: This page contains redacted confidential information.

[redacted]	2023 – Present	FHAS provides medical claims review and prior authorizations involving health plans, providers and beneficiaries with issues including, but not limited to, prescription drugs, medical necessity, surgery, experimental treatments, out-of-network issues, and correct coding.	Contract Renewed through 2027

[END OF RESPONSE]

Note: This page contains redacted confidential information.

Attachment B

Addendum 1: Minimum Qualifications, 1.10.2(2)

Bidder License/Certifications

Bidder must warrant that all physicians (the "Medical Providers") providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement.

FHAS Response: We fully warrant that every Medical Provider who performs reviews, authors recommendations, or testifies for DOM cases will:

- Hold current board certification by an ABMS or AOA member board in the relevant specialty
- Be actively licensed to practice medicine in Mississippi; for any specialty reviewer not licensed in Mississippi, a Mississippi-licensed, board-certified physician will independently review and co-sign the final recommendation
- Maintain active, unrestricted licensure and certification throughout the contract term, with monthly monitoring and immediate notification/removal if status changes

A complete list of all participating Medical Providers, including name, specialty, board certification(s), Mississippi license number (or designation of Mississippi supervising physician), and years of clinical experience in the listed specialty is provided below.

We attest that every provider meets or exceeds the licensure and certification requirements stated above.

This credentialing and oversight process is identical to that used in our current Medicaid external-review contracts and has maintained 100% compliance with similar state-specific licensure rules.

List of Participating Mississippi-licensed Medical Providers

Last Name	First Name	Professional Credentials	Practice State	Specialty(s)	Board Certified	Years of Experience	Licensed States	License/ Cert. #
[redacted]		MD	LA	Pediatrics Sub: Pediatric Cardiology	Yes	17 years	MS, LA	[redacted]
[redacted]		MD	TN	Neurological Surgery	Yes	13 years	MS, TN, AR, FL, TX,	[redacted]
[redacted]		MD	VT	Psychiatry	Yes	25 years	MS, CA, CT, KY, LA, ME, MD, MA, NH, NJ, NY, NC, SC, TN, TX, VT, IA, MI, DC, IN, KS, NV, OK, UT, WA, AZ, DE, FL, IL, MO, WV	[redacted]

Note: This page contains redacted confidential information.

[redacted]	MD	TN	Thoracic and Cardiac Surgery	Yes	41 years	MS, MN, TN, AZ, NV, MT, NH, DE, MD, TX, VA, CT, LA, ND, OK, KY, AL, WI	[redacted]
[redacted]	MD	TX	Internal Medicine	Yes	23 years	MS, TX, NC, OK, FL, AR, LA	[redacted]
[redacted]	MD	DE	Obstetrics & Gynecology	Yes	22 years	MS, DE, NC, CA, VA, MD, GA, NY, MO, OK, IN, TN, LA, SC	[redacted]
[redacted]	MD	FL	Internal Medicine Hospitalist	Yes	21 years	MS, MN, FL, NC, NM, SC, ID, NV, NJ, NH, MI, CO, DE, MT, AZ, TX, AK, PA, TN, VT, ME, WA, IA, NY, NE, MD, OH, IL, KS, WV, RI, WY, OK, KY, UT, FL, MO, AL, OR, AR, CT, CA, GA, LA, ND, IN, WI, VA	[redacted]
[redacted]	MD	NJ	Radiation Oncology	Yes	37 years	MS, MN, NJ, MD, NV, MT, DE, NH, AZ, LA, TN, AR, ND, TX, OK, KY, FL, AL, WI	[redacted]

To support and supplement any overflow cases for specialty matched reviews, FHAS's panel further includes an **additional 166 board certified physicians** licensed in at least 1 state of the United States. As mentioned above, for any specialty reviewer not licensed in Mississippi, a Mississippi-licensed, board-certified physician will independently review and co-sign the final recommendation.

DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review).

FHAS Response: FHAS holds URAC Accreditation for Independent Review Organization (Comprehensive Review). We have included a copy of the certificate on the following page.

urac

CERTIFICATE OF AWARD

in recognition of

Federal Hearings and Appeals Services, LLC
117 West Main Street
Plymouth, Pennsylvania 18651

For compliance with

Independent Review Organization Accreditation 6.0: Comprehensive Review Accreditation Program

with

is awarded

Full Accreditation

Effective from 01/01/2025 through 01/01/2028

Shawn Griffin MD

Shawn Griffin, MD
President & Chief Executive Officer

Certificate Number: IRC010013-1

urac®
ACCREDITED

URAC accreditation is assigned to the organization and address named in this certificate and is not transferable to subcontractors or other affiliated entities not accredited by URAC.

URAC accreditation is subject to the representations contained in the organization's application for accreditation. URAC must be advised of any changes made after the granting of accreditation. Failure to report changes can affect accreditation status.

This certificate is the property of URAC and shall be returned upon request.

Additionally, FHAS is currently **in-process** to obtain the **NCQA Utilization Management (UM) Accreditation**, with a Survey Date of May 5, 2026.

[END OF RESPONSE]

Addendum 1: Minimum Qualifications, 1.10.2(3)

References

From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for all engagements.

FHAS Response: We have supplied the requested references utilizing the **Attachment G** form included in this proposal.

[END OF RESPONSE]

Note: This page contains redacted confidential information.

Addendum 1: Minimum Qualifications, 1.10.2(4)

Bidder's Narrative

Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services.

FHAS Response: In the table below, we describe our experience with and/or our ability to comply with the General Requirements.

#	2.1.1 General Requirements	FHAS Response
2.1.1.1	Will conduct reviews of medical records, clinical documentation, utilization guidelines, and applicable policies or regulations. The number of reviews vary from month to month. All relevant documentation will be submitted to Contractor via the Contractor's secured portal for review.	[redacted]
2.1.1.2	Provide a written clinical rationale for each determination to the Office of Appeals, that includes a copy of any and all medical criteria or clinical guidelines relied upon in support of the recommendation.	[redacted]
2.1.1.3	Written recommendations shall include a summary of all medical documentation	[redacted]

	reviewed, a summary of the question(s) raised on appeal, a recommendation regarding the question(s) raised on appeal, the reviewer's detailed, supporting rationale for recommendation, and a comprehensive list of any references used to make a recommendation. If references are utilized by the Medical Providers in the recommendations, a copy of or active link to the referenced documents must be provided with the recommendation.	[redacted]
2.1.1.4	Format of the written recommendation shall be subject to the approval of the Office of Appeals Director subsequent to the award.	[redacted]
2.1.1.5	Standard Requests: Written, detailed recommendations shall be provided to DOM seven (7) business days after the initial request and supporting documentation are submitted via the secured portal. If DOM submits additional documentation after the initial request, the Contractor shall provide the detailed recommendations to DOM no later than seven (7) business days following the submission of that additional documentation.	[redacted]
2.1.1.6	Expedited Requests: Written, detailed recommendations for any expedited appeal requests shall be provided to DOM within one (1) business day via the secured portal. If DOM submits additional documentation after the initial expedited request, the Contractor shall provide the detailed recommendations to DOM no later than one (1) business day after expedited request is submitted via the secured portal.	[redacted]
2.1.1.7	When requested by DOM, the Medical Providers must attend telephonic hearings and provide detailed, knowledgeable testimony in support of their written recommendations. Medical Providers must be able to discuss and answer any questions that the parties may have regarding written recommendations in detail.	[redacted]

		[redacted]
2.1.1.8	Medical Providers must be flexible in their availability for hearings related to the case. Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings. Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time.	[redacted]
2.1.1.9	Contractor shall be able to provide a certified biller/coder's review and recommendation for certain cases upon request by the Office of Appeals, on cases that a specialized coding review is necessary.	
2.1.1.10	If a Medical Provider's behavior during a hearing, rises to the level of misconduct, which includes, but is not limited to, rudeness, hostility, inability to provide testimony and/or answer questions related to their written recommendation, the Contractor forfeits full payment from DOM for that hearing and must immediately remove that Medical Provider from DOM's network.	[redacted]
2.1.1.11	The Contractor agrees to submit all recommendations in accordance with the deadlines established in sections 2.1.1.5 and 2.1.1.6. In the event the Contractor fails to submit a recommendation by the required deadline without receiving prior approval from Office of Appeals, the Contractor shall forfeit any right to payment for that specific recommendation. DOM shall have no obligation to pay, in whole or in part, for any untimely submission that fails to meet this approval requirement.	[redacted]

Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the system requirements.

FHAS Response: In the table below, we describe our experience with and/or our ability to comply with the System Requirements.

#	2.2 System Requirements	FHAS Response
2.2.1	Contractor shall be able to provide a Secured Portal with **User Access & Authentication** tool to include but not limited to the following: • Secure Login: DOM Staff, Contractors, or authorized Reviewers log in using secure credentials (username/password, two-factor authentication). • Role-Based Access: Different access levels for users. • HIPAA-Compliant Security: Encryption of all data transmissions and storage to protect PHI (protected health information).	[redacted]
2.2.2	Contractor shall be able to provide a Secured Portal with a **Dashboard / Homepage** to include but not limited to: • Summary of Cases: Displays a list or summary of pending, in-process, on hold, and completed external review requests. • Quick Actions: Buttons to start a new review, search cases, or view detailed case statuses.	[redacted]
2.2.3	Contractor shall be able to provide a Secured Portal with a **Case Intake & Management** tool to include but not limited to: • Case Submission: DOM can submit requests for external review of medically necessary appeals. Submission includes attaching all relevant documentation such as denial notices, medical records, clinical notes, and treatment plans. Ability to submit voluminous medical records for one appeal. • Automated Case Numbering & Tracking: Each case is assigned a unique identifier for easy tracking.	[redacted]

2.2.4	Contractor shall be able to provide a Secured Portal with a **Medical Review Interface** to include but not limited to:
	• Review Assignment: Cases are assigned to qualified external medical reviewers based on specialty and availability. Ability to schedule Reviewer for virtual hearing, if needed.
	• Case Details Display: Reviewers to review all documentation, to include summary of the denial, clinical information, state policy citations, and relevant medical necessity criteria.
	• Reviewer Tools:
	  • Ability to enter detailed recommendations, findings, and conclusions.
	  • Access to guidelines or medical necessity criteria embedded or linked in the portal.
	  • Option to request additional information from DOM.
		[redacted]

2.2.5	Contractor shall be able to provide a Secured Portal with **Communication & Notifications** tool to include but not limited to: • Automated Notifications: Alerts sent to DOM when Reviewers are assigned, completed, or if additional info is requested. • Messaging System: Secure internal messaging for communication between Reviewers, Contractors, and DOM. • Status Updates: Real-time updates on case status accessible to authorized users.	[redacted]

[END OF RESPONSE]

Attachment C — Contract Draft Acknowledgement

External Medical Review Consulting

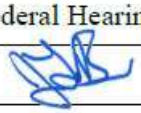
IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

Attachment C – Contract Draft Acknowledgement

The Bidder shall be required to sign and submit this formal acknowledgment confirming that they have received, reviewed, and fully understood the draft contract, Appendix 3. By signing this acknowledgment, the Bidder affirms acceptance of the terms, conditions, and obligations set forth therein, and agrees to be bound by the provisions of the contract as finalized.

Company Name:	Federal Hearings and Appeals Services, LLC
Signature:	
Title:	James L. Bobeck, Esq., CEO
Date:	12/01/2025

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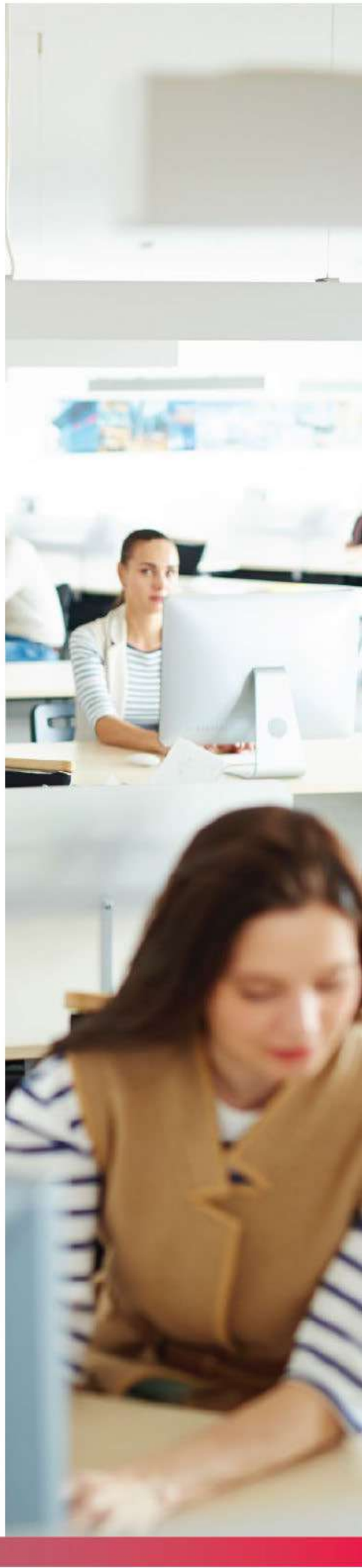
Attachment D — DHHS Certification Drug-Free Workplace

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)



Attachment D - DHHS Certification Drug-Free Workplace

DHHS CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS:

GRANTEES OTHER THAN INDIVIDUALS

Instructions for Certification

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

1) This certification is required by regulations implementing the Drug-Free Act of 1988, 2 CFR Part 382. The regulations require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the DHHS determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.

2) Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee shall keep the identity of the workplace(s) on file in its office and make the information available for federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

3) Workplace identifications shall include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).

4) If the workplace identified to DOM changes during the performance of the grant, the grantee shall inform DOM of the change(s), if it previously identified the workplaces in question (see above).

5) Definitions of terms in the Non-procurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

   - "Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. §812) and as further defined by regulation (21 CFR § 1308.11 through § 1308.15);
   - "Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes;
   - "Criminal drug statute" means a federal or non-federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

6) "Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including (i) all direct charge employees; (ii) all indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent Contractors not on the grantee's payroll; or employees of sub recipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

b) Establishing an ongoing drug-free awareness program to inform employees about:

   1) The dangers of drug abuse in the workplace;
   2) The grantee's policy of maintaining a drug-free workplace;
   3) Any available drug counseling, rehabilitation, and employee assistance programs; and
   4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

   1) Abide by the terms of the statement; and
   2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e) Notifying DOM in writing, within 10 calendar days after receiving notice under paragraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted:

   1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
   2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;

g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

h) Complying with all provisions 2 CFR Part 382.

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments if needed):

a) Place of Performance (street address, city, county, state, zip code)
b) Check if there are workplaces on file that are not identified here.

---->NOTE: Sections 76.630(c) and (d) (2) and 76.635(a)(1) and (b) provide that a federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For HHS, the central receipt point is Division of Grants Management and Oversight, Office of Management and Acquisition, HHS, Room 517-D, 200 Independence Ave, S.W., Washington, D.C. 20201

Company Name:	Federal Hearings and Appeals Services, LLC
Signature:	
Title:	James L. Bobeck, Esq., CEO
Date:	12/01/2025

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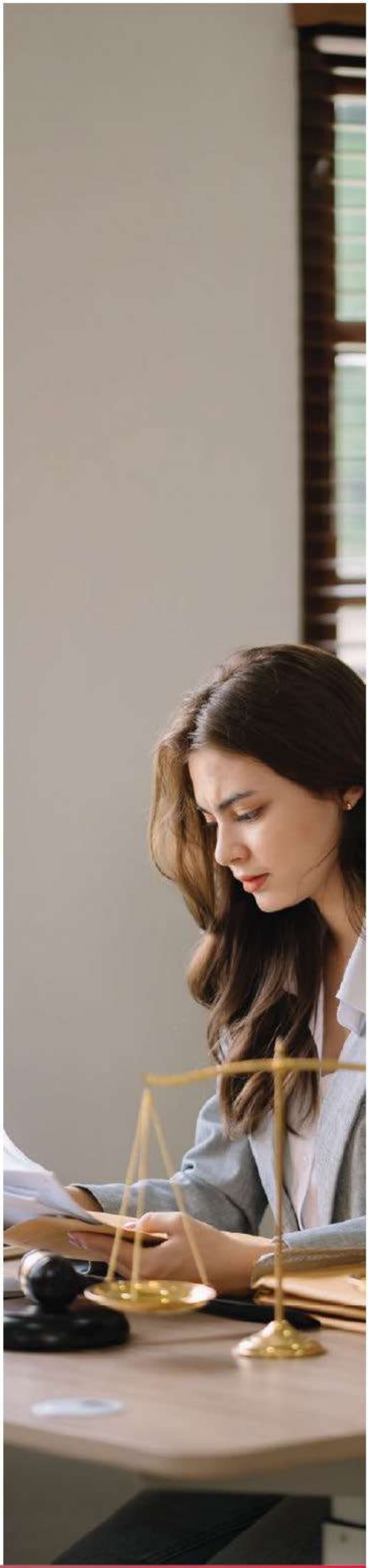
Attachment E — DHHS Certification Debarment, Suspension, and Other Responsibility Matters

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)



Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility Matters

DHHS Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Primary Covered Transactions

2 CFR Part 376,

(1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:

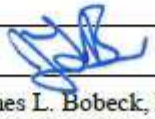
a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;

b. Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and,

d. Have not within a three-year period preceding this bid had one or more public transactions (federal, state or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

Company Name:	Federal Hearings and Appeals Services, LLC
Signature:	
Title:	James L. Bobeck, Esq., CEO
Date:	12/01/2025

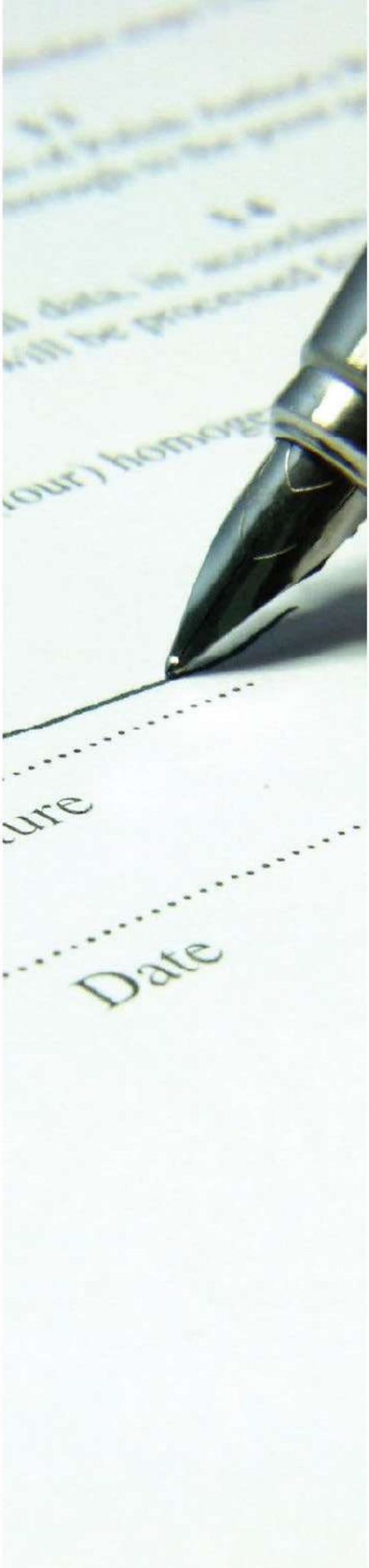
Attachment F — Proprietary Information Form

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)



Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☐	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 through 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.

X	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.

12/01/2025_____

Date

James L. Bobeck, Esq., CEO

Signature of Authorized Official

Federal Hearings and Appeals Services, LLC

Name of Organization

Attachment G #1 — References

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

Note: This page contains redacted confidential information.

Attachment G - #1

References

Bidder Name: Federal Hearings and Appeals Services, LLC (FHAS)

Reference 1
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): [redacted]
Alternate Contact Telephone Number: [redacted]
Alternate Contact Cell Number: N/A
Alternate Contact Email: [redacted]
Reference 2
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): [redacted]
Alternate Contact Telephone Number: [redacted]
Alternate Contact Cell Number: N/A
Alternate Contact Email: [redacted]
Reference 3
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): [redacted]
Alternate Contact Telephone Number: [redacted]
Alternate Contact Cell Number: N/A
Alternate Contact Email: [redacted]

Attachment G #2 — References

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

Note: This page contains redacted confidential information.

Attachment G - #2

References

Bidder Name: Federal Hearings and Appeals Services, LLC (FHAS)

Reference 4
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): [redacted]
Alternate Contact Telephone Number: [redacted]
Alternate Contact Cell Number: N/A
Alternate Contact Email: [redacted]
Reference 5
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): N/A
Alternate Contact Telephone Number: N/A
Alternate Contact Cell Number: N/A
Alternate Contact Email: N/A
Reference 6
Name of Company: [redacted]
Dates of Service: [redacted]
Contact Person: [redacted]
Address: [redacted]
City/State/ZIP: [redacted]
Telephone Number: [redacted]
Cell Number: N/A
Email: [redacted]
Alternate Contact Person (optional): N/A
Alternate Contact Telephone Number: N/A
Alternate Contact Cell Number: N/A
Alternate Contact Email: N/A

[END OF RESPONSE]

Attachment H — Bidder's IFB Response Checklist

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

[END OF RESPONSE]

Attachment I — Admendment #1 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

MISSISSIPPI DIVISION OF MEDICAID

Date: November 26, 2025

Amendment #1 Questions and Answers and Pre-Bid Submission Conference PowerPoint Presentation

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is December 12, 2025 by 2:00 p.m.

Question #	RFP Section #	RFP Page #	Question	DOM Response
1	N/A	N/A	What is the current pricing for this scope of work?	The current incumbent pricing is as follows: • Appeal Review and/or Length of Stay Review: Flat hourly rate of $150 • Medicaid Hearing & Report Preparation: Hourly rate of $155.
2	1.8	7	Does the single fixed hourly rate specified in the bid, cover all aspects of the service, including the detailed medical review, writing the recommendation, and all time associated with preparatin for and attendance at required telephonic hearings?	Yes. The single fixed hourly rate specified in the IFB on the Bid Form is intended to cover all aspects of the required service. As outlined in the Service Description, the hourly rate encompasses Appeal Review, Hearing and Report Preparation.
3	1.10.2	8	What is the most frequently requested medical specialties and percentage of breakdown of reviews by specialty over the past 12 to 24 months?	Please refer to Appendix 2 – Historical Data (pages 40-42) of the IFB for a breakdown of reviews by medical specialties for 2024 and 2025 to date.

4	1.10.2	8	In the event that a specialty physician is not licensed in Mississippi, can the Mississippi licensed physician who must review and sign off on the recommendation be of any specialty?	If the reviewing physician is not of the same specialty as the case, a Mississippi-licensed physician can be of any specialty, however, general practice is preferred to provide the required review and sign-off.
5	1.10.2 and 3.4.14	9 and 20	The text for #4 on Page 9 states, "Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services (no more than 5 pages)." Two questions: 1) Does the Scope of Services include the General Requirements on pages 11-12 AND the System Requirements on pages 13-14, or just the General Requirements? 2) Please clarify the number of pages the bidder has to respond to the Scope of Services section because above it states "no more than five pages," yet Section 3.4.14 - Bid Submission format states: "At the end of each response to an element by the Bidder, the Bidder should type "[END OF RESPONSE]" and leave the remainder of the page blank, beginning the response to the next element on the next page." There are 16 "elements" between the General Requirements (2.1.1.1-2.1.1.11) and System Requirements (2.2.1-.2.2.5), plus four (4) "elements" under Minimum Qualifications (pages 8-9). If the bidder follows the Section 3.4.14 guideline, it would require 20 pages to ensure each response falls/begins on its own page.	1) Yes. For purposes of Item #4 on Page 9, the Scope of Services includes both the General Requirements and the System Requirements. 2) Section 3.4.14 only relates to the items listed at 1.10.2 Minimum Qualifications (Attachment B: Addendum 1) •• 1st Element •• Addendum 1: Minimum Qualifications, 1.10.2(1) Bidders Experience Requirement *add your documentation and then state END OF RESPONSE •• 2nd Element •• Addendum 1: Minimum Qualifications, 1.10.2(2) Bidder Licenses/Certifications * add your documentation and then state END OF RESPONSE •• 3rd Element •• Addendum 1: Minimum Qualifications 1.10.2(4) Bidder's Narrative * add your documentation and then state END OF RESPONSE **The 3rd Element (1.10.2 (4)) is the only element that is limited to no more than 5 pages. **Note**: For Element 1.10.2(3) Minimum Qualifications References. Follow the required documenting format.

6	1.10.2 (1) and (3)	8	Our company is authorized to provide external reviews in 30+ states which we will identify per 1.10.2 (1). Per 1.10.2 (3), are we required to provide reference contacts for all 30+ states where we're licensed/certified/contracted to provide external reviews?	Please provide 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references, will be sufficient.
7	2	11	What is your criteria for extension? How much advance notice is the contracted company given if it is or isn't extended?	1) An extension is based solely on satisfactory performance of the contracted vendor. 2) If performance is satisfactory, the amended contract will proceed through DOM's internal review process before being submitted to our regulatory board, which requires a minimum one-month approval period. If performance is unsatisfactory, DOM will follow the specific termination clauses outlined in the contract.
8	2.1.1.1	11	Are there specific data integration requirements, API protocols or established DOM systems (e.g., for case intake or claims processing) that the Contractor's secured portal must interface with, or is the Contractor expected to provide a fully independent standalone system for all case management and data exchange?	The Contractor is expected to provide an independent, standalone system that DOM personnel will utilize for all case management and data exchange.
9	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide an average number of reviews to be performed per month?	A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.
10	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide a total volume of cases performed in 2024? Total volume of hearings?	A month to month estimate of reviews has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

11	2.1.1.2	12	It is stated "*includes a copy* of any and all medical criteria or clinical guidelines..." Can you elaborate what the expectation is for "including a copy?"	DOM Appeals will give you a policy to review to uphold or overturn the managed care organizations' denials. If you have any additional references that you utilized in making the determination, DOM Appeals would like those listed and on hand in case of a hearing. Our priority is that the policy and criteria provided from the managed care organization is applied properly to the medical case.
12	2.1.1.2	11	Can the DOM provide bidders with a sample of a determination or a sample format expected for a determination?	Yes, A sample format will be provided with Amendment 1, Questions and Answers.
13	2.1.1.3	11	Section 2.1.1.3 states that copies or active links to referenced documents must be incuded with recommendations. Many clinical references are proprietary, require subscripions, and cannot legally be redistributed. Will DOM allow venders to cite these resources without providing full copies due to copyright and royalty restrictions?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
14	2.1.1.4	11	If active links lead to subscription based resources that DOM staff cannot access without a license, will DOM consider alternative documentation methods?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
15	2.1.1.5	11	In situations that extention on the submission deadline is needed, can extensions be granted? If so, what is the length of extension?	Yes, an extension may be granted when necessary; however, such instances are expected to be rare. In general, no more than an additional week should be needed. All determinations are expected to be submitted in a timely manner.
16	2.1.1.5 and 2.1.1.6		What is the historial annual volume of completed reviews by turnaround time? (ie: standard vs expedited).	There are typically only 2-4 expedited requests per year.

17	2.1.1.7	12	Please provide an estimate on the number of telephonic hearings per year and how many there were in 2024 and 2025.	An estimate of review requests vs hearings has been included with Appendix 2 -Historical Data as part of Amendment 1, Questions and Answers.
18	2.1.1.8	12	Please clarify what DOM defines as the "appropriate training by DOM staff" referenced in section 2.1.1.8. What training content is included?	The IFB incorrectly stated that DOM Appeals would conduct training for the Medical Reviewers. This was an error and shall be corrected in Amendment 2. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include: • Appeals and Hearing processes and de corum • Requirements for timely and efficient reviews, including flexibility in scheduling • Confidentiality and HIPAA compliance.
19	2.1.1.8	12	How long does the required DOM training take to complete, and what is the method of delivery?	See answer to number 18.

20	2.1.1.8	12	Given that our reviewers are all active clinical practices and may not always be available at the exact hearing times requested- especially when hearings are scheduled on short notice- will DOM allow reasonable scheduling flexability?	Yes. DOM will make reasonable efforts to accommodate scheduling needs; however, clinical reviewers should maintain sufficient flexibility to ensure hearings are completed in a timely manner. Federal regulations require that beneficiary hearings be concluded within 90 days of receipt by the Office of Appeals, and scheduling must support compliance with these requirements.
21	2.1.1.9	12	Section 2.1.1.9 requires the Contractor to provide a certified biller/coder's review upon request from the Office of Appeals. Our organization performs coding reviews but not billing reviews. Will DOM confirm whether billing review is a mandatory requirement for this contract, or if coding-only reviews are acceptable?	Yes, a certified biller/coder review is required on cases where a specialized biller/coder review is necessary.
22	2.1.1.11	12	What is the formal, written process for obtaining "prior approval" from the Office of Appeals to extend a deadline?	Requests for prior approval must be submitted by email to DOM's Appeal Contact Person. Any such requests must be made promptly, as timeliness in submitting determinations is essential.
23	2.2	12	What are the average frequency and length of telephonic hearings?	The length of the hearings are typically 1 to 1.5 hours with some lasting up to 3 hours on a rare occasion. A medical reviewer may provide the statement and be examined and does not have to attend the full hearing. A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

24	2.2	12	Are all Medical Providers who participate on this contract expected to complete the DOM training for hearings? What is the length of the training, and how is it conducted? Also, can the training be done at any time?	See answer to number 18.
25	2.3	14	What components of this contract require travel, if any?	Travel is not required. All hearings are conducted by telephonic call-in, with video hearings occurring only in very rare occurrence.
26	2.3	14	Will medical providers and/or staff be required to travel to Mississippi or elsewhere for any reason?	See answer to number 25.
27	2.3	14	If DOM requires travel to be included, can DOM clarify typical travel expectations and historical frequency of required in-person attendance?	See answer to number 25.
28	2.3	14	Will DOM allow virtual participation in place of in-person travel when appropriate?	See answer to number 25.
29	3.4	16	What is the current incumbent pricing?	See answer to number 1.
30	Attachment B - Bid Form	25	What are the hourly rates of the current vendor?	See answer to number 1.

31	Attachment B – Bid Form Certifications #5	26	Can the Division confirm what "applicable licenses" will be necessary for the bidder to have or secure? For example: an Independent Review Organization (IRO) license from the Mississippi Department of Insurance. And does this include any accreditations or certifications, such as URAC?	Attachment B - Bid Form Certification #5 refers to applicable licensed and certified personnel who are qualified to perform the duties required under the IFB. For the organization, DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, accreditation by NCQA for Utilization Management is preferred but not required. Amendment 2, will amend this language.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment. This Amendment must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #1 Acknowledged:

_____

Signature

__James L. Bobeck, Esq._____

Printed Name

__CEO_____

Title

__Federal Hearings and Appeals Services, LLC_____

Entity Name

Amendment 1 – Questions and Answers - IFB #20251031

Appendix 2 - Historical Data – UPDATED

MLS Group of Companies, LLC

January 2025 to Date

Total Number of Reviews	67
Estimated Number of Hours	211

Anesthesiology	1
Certified Coder	3
Child & Adolescent Psychiatry	7
Dentistry	1
Internal Medicine	41
Neurological Surgery	2
Obstetrics & Gynecology	1
Occupational Therapist	1
Pediatrics	2
Plastic Surgery	2
Psychiatry	4
Speech-Language Pathologist	2

2024

Total Number of Reviews	130
Estimated Number of Hours	306

Cardiovascular Disease	2
Child & Adolescent Psychiatry	3
Dentistry	13
General Surgery	3
Internal Medicine	60
Neurology Q Child Neurology	3

Occupational Therapist	4
Pain Medicine	1
Pediatrics	20
Physical Medicine & Rehabilitation	4
Plastic Surgery	6
Psychiatry	2
Speech-Language Pathologist	6

Month to Month MLS Reviews vs Hearings

2025	Total Review Request	Member Hearings
January	5	4
February	9	9
March	5	4
April	8	7
May	5	5
June	2	2
July	8	4
August	12	10
September	13	13
October	0	0
November		
December		

2024	Total Review Request	Member Hearings
January	8	8
February	3	3
March	6	6
April	24	24
May	23	23
June	12	12
July	6	6
August	17	17
September	5	4
October	13	13
November	6	5
December	7	7

Amendment 1 – Questions and Answers - IFB #20251031

Attachment – Sample of Determination format

Vendor Name and Logo

11/14/25

RE:	Claimant Name	:	
	Client	:	Mississippi Division of Medicaid
	Referred By	:	DOM Contact Person
	Type of Review	:	Adverse Benefit Determination
	Type of Service	:	State Hearing
	Appeal Level	:	SFH - Appeal

MEDICAL DOCUMENTATION REVIEWED

I have reviewed all of the documents provided.

Referral Document	Name of Document	Party Submitted By	10/14/2025
MSCAN Appeal Acknowledgement Letter	[redacted]	MCO	10/07/2025
Appeal Summary	Appeal Summary[redacted]	MCO	updated
Written Appeal	[redacted]	[redacted]	08/19/2025
Authorized Request Form Letter	[redacted]	MCO	08/19/2025
Notice of Appeal Resolution – Appeal Denied	Final_denial[redacted]	MCO	10/08/2025
MSCAN Appeal Acknowledgement Letter, Member Appeals Authorized Representative Form, POC,	[redacted] Appeal Docs PA.pdf	MCO	08/04/2025 - 10/07/2025
Notification of Adverse Benefit Determination for Requested Services	Initial_PADenial[redacted]	MCO	08/14/2025
Administrative Code: Title 23: Medicaid Part 213 Therapy Services	Policy.pdf	DOM	updated

Email	[redacted]	MCO/DOM	10/13/2025 – 10/14/2025
Member Appeals Authorized Representative Form	[redacted]	MCO	10/06/2025

SUMMARY OF MEDICAL DOCUMENTATION

[redacted]

QUESTION

1. **Do you agree with the original determination to partially deny the request on 8/11/XXXX for coverage of twenty-four (24) Speech Therapy visits for dates of service 8/12/XXXX-10/31/XXXX and approve visits to continue skilled therapy one (1) time per (for each) week with a total of Twelve (12) Speech Therapy visits approved.**

[redacted]

RATIONALE AND DETERMINATION

[redacted]

[redacted]

REFERENCE (S):

[redacted]

[redacted]

CONFLICT OF INTEREST:

[redacted]

Sincerely,

[redacted]

PRE-BID CONFERENCE ON SUBMISSION REQUIREMENTS EXTERNAL MEDICAL REVIEW CONSULTING IFB

MISSISSIPPI DIVISION OF MEDICAID

AGENDA

- Procurement Team
- Housekeeping
- Procurement Overview
- 5-Step Submission Process
- Bid Review Process
- Closing

MISSISSIPPI DIVISION OF MEDICAID

PROCUREMENT TEAM

procurement@medicaid.ms.gov

Kayla McKnight
Procurement Director
601.359.2286

Sharon Clark
Procurement Supervisor
601.359.6153

Jeanette Crawford
Procurement Team Leader
601.359.2664

MISSISSIPPI DIVISION OF MEDICAID

Please place your microphone on mute.

Please refrain from typing questions directly into the chat.

Presentation slides will be posted on DOM's website.

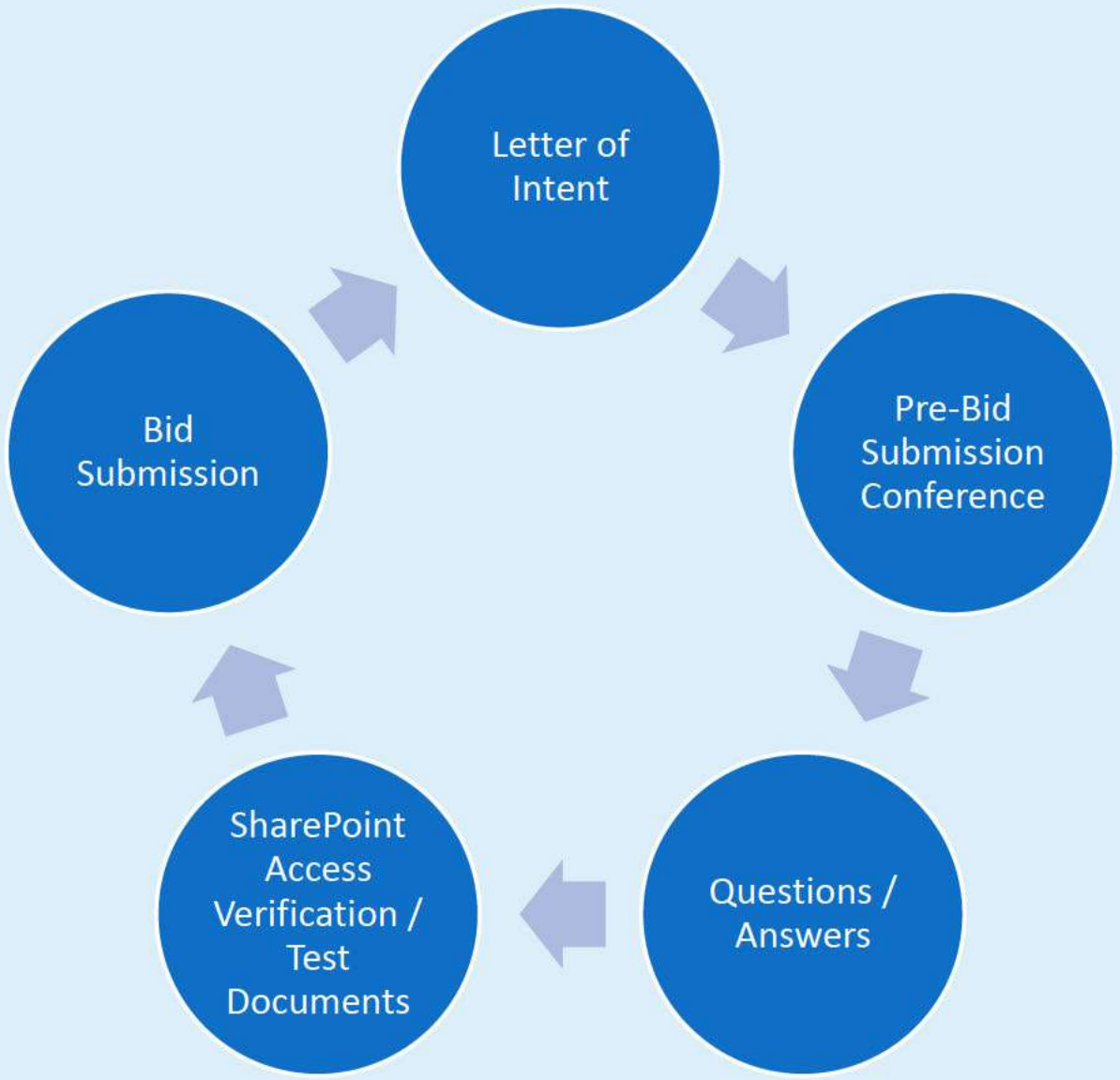
MISSISSIPPI DIVISION OF MEDICAID

OVERVIEW

Understand	• Understand the bid submission process .
Educate	• Educate on the requirements of the submission.
Ensure	• Ensure the procurement process is fair and just to all vendors.

MISSISSIPPI DIVISION OF MEDICAID

FIVE (5) STEP SUBMISSION PROCESS



MISSISSIPPI DIVISION OF MEDICAID

PRE-BID SUBMISSION CONFERENCE

A record of all attendees will be taken.

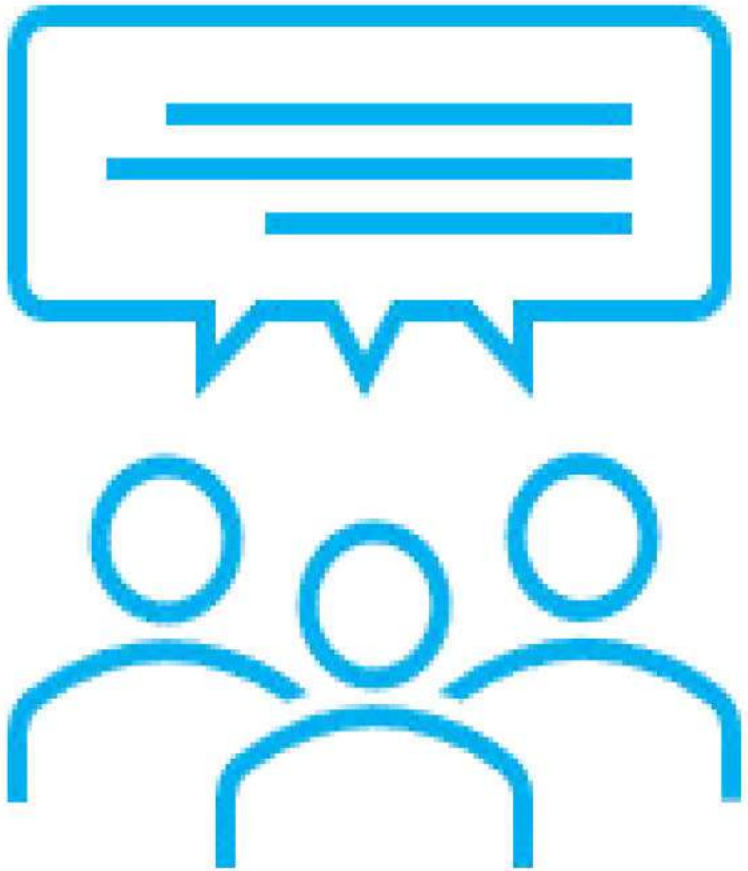
Nothing stated in the Pre-Bid Submission Conference will change the submission requirements. Only an amendment can change submission requirements.

MISSISSIPPI DIVISION OF MEDICAID

QUESTIONS

- Questions are to be submitted using the Question-and-Answer template provided on the Medicaid website found at: https://Medicaid.ms.gov/resources/procurement
- Email questions to: procurement@medicaid.ms.gov with subject line: ***External Medical Review Consulting – Questions***.
- Procurement will email receipt confirmation.
- Questions received after the deadline will NOT be answered.
- A register of questions will be compiled, exactly as submitted.

MISSISSIPPI DIVISION OF MEDICAID



MISSISSIPPI DIVISION OF
MEDICAID

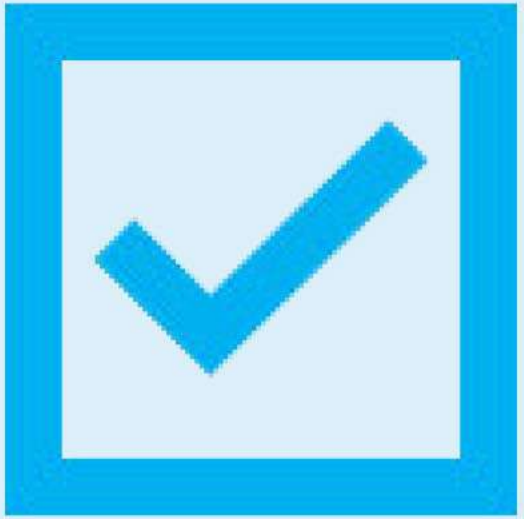
ANSWERS

- Answers will be provided as an Amendment to the procurement.
- Amendment will be emailed directly to all vendors who have submitted a Letter of Intent.
- Amendment will be posted on Medicaid website and on the MS Contract / Procurement Opportunity Search portal website.
- Written answers provided are binding.
- All amendments will become part of the final contract as an attachment.

ACKNOWLEDGEMENT OF AMENDMENT(S)

All amendments issued by DOM must be signed by an authorized representative of the bidder. The signed acknowledgment of each amendment must be submitted with the bidder's response OR by any deadline specified within the amendment. All amendment acknowledgments must be included in submission as Attachment I: Amendment Acknowledgement(s).

Vendors who fail to submit all Amendment Acknowledgements may be deemed non-responsive.



MISSISSIPPI DIVISION OF MEDICAID

SHAREPOINT ACCESS

Bidders will only have access to their company's specific folder within SharePoint.

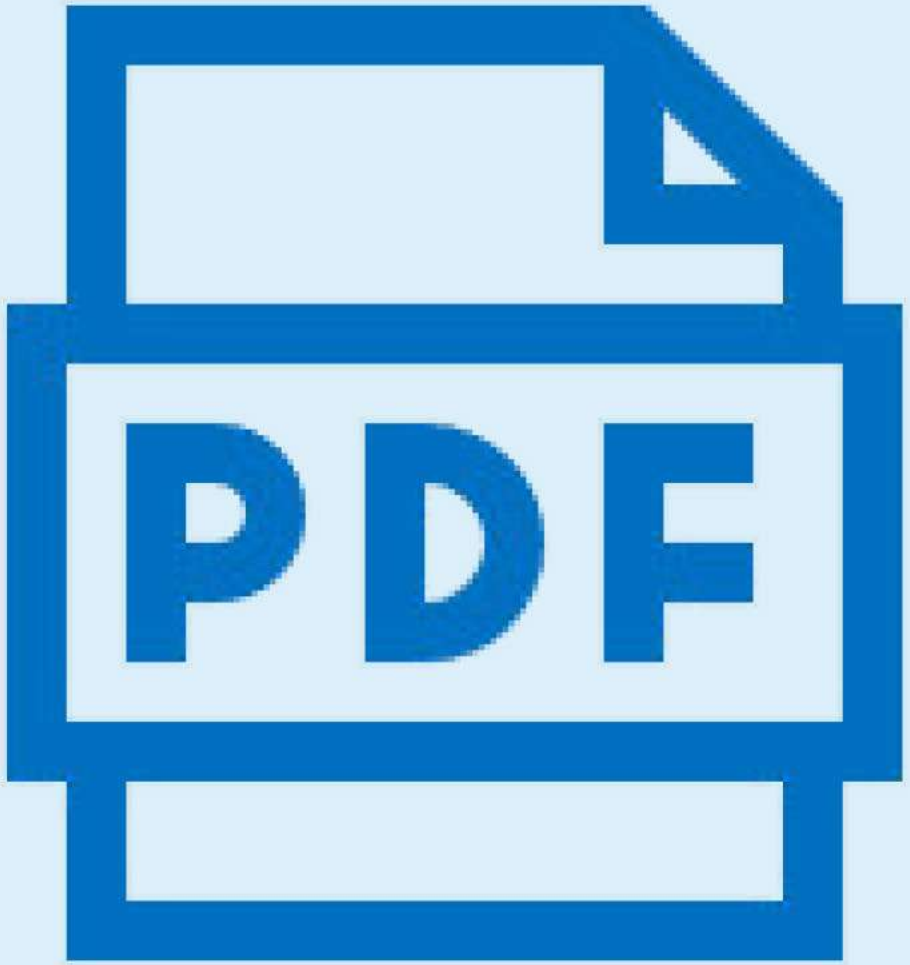
Upload a test document titled, "Test Document".

Email procurement@medicaid.ms.gov for confirmation of receipt of test documents in SharePoint.

Vendors are encouraged to confirm SharePoint access no later than two (2) days prior to the submission deadline to ensure sufficient time to resolve any technical issues. Issues with SharePoint access should be directed to: Sally.Harrison@medicaid.ms.gov and copy the procurement team.

Please do NOT remove the Test Documents from your SharePoint file.

MISSISSIPPI DIVISION OF MEDICAID



BID SUBMISSION REQUIREMENTS

You'll find a Bidder's Response checklist in the procurement documents. This checklist is a guide to help avoid any missing information. Required forms should not be modified. Incomplete submissions may be rejected.

All submissions must be in a single searchable Adobe Acrobat PDF file and must not be password protected.

Each Attachment is required to have a cover sheet and every page should be numbered with page number centered in the footer.

MISSISSIPPI DIVISION OF MEDICAID

IFB
Bidder's Name
Attachment A -Bid Cover Sheet

MISSISSIPPI DIVISION OF MEDICAID

Provide your narrative to the requested information under Bidder Experience Requirement.

END OF RESPONSE

Page Number here

PROPRIETARY INFORMATION FORM
Attachment F

Each vendor must make a selection on this form stating if you are providing both an unredacted and redacted submission or just an unredacted submission.

If your bid submission contains ***no proprietary information***, select the unredacted submission option. The entire document will then be released publicly along with the procurement file and posted on our website.

If you have ***proprietary information*** that will be redacted, select the redacted submission option and provide two copies of your bid submission – one unredacted and one redacted that shall be marked "**Public Copy**." This "**Public Copy**" will be released along with the procurement file and posted on our website.

Each page containing redaction of confidential commercial / financial information should be marked in the upper right-hand corner as "**Confidential**." Please redact the information in accordance with the Mississippi Public Records Act under Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1.

It is the responsibility of the bidder for any errors made in redaction of documents. **Pricing cannot be redacted.**

Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☐	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.
☐	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.

_____ _____

Signature of Authorized Official Date

_____

Name of Organization

Although references are listed as a requirement under Minimum Qualifications, Addendum 1, you will NOT provide references in a narrative format. Bidders should provide references using Attachment G form provided in the IFB.

Bidders must provide a list of past and/or current engagements for which the bidder performed similar services.

The Procurement Team will contact your references randomly until two individuals can be reached within 3 business days from bid due date.

MISSISSIPPI DIVISION OF MEDICAID

REQUIRED DOCUMENTS

Please ensure all documents that require signatures are signed and all applicable form fields are completed.

READY FOR BID SUBMISSION

Submit your bid as a single searchable PDF format and do not include embedded web links.

Only upload the bid in SharePoint. Do not email a copy of the bid to the Procurement Team.

You may email Procurement to verify receipt in SharePoint at: procurement@medicaid.ms.gov

The Procurement Team will not open your bid submission at that time.

Procurement will only verify that the document has been uploaded and visible in SharePoint.

Procurement will email vendor that Submission has been received.

MISSISSIPPI DIVISION OF MEDICAID

BID REVIEW PROCESS

- The Procurement Team will review the Bid Submissions to ensure that all required documents have been provided in accordance with the Bid Response Checklist. Bidders not submitting all the documents may be deemed ***non-responsive***.
- The Procurement Team will review the Bid Submissions to ensure that documents or narratives have been provided in accordance with the Minimum Qualifications section. Bidders not submitting all of the requested information may be deemed ***non-responsible***.
- After the responsive and responsible bidder(s) have been determined, the award will be made to the bidder with the lowest cost on the Bid Form (Attachment B). Remember, required forms, including the Bid Form, CANNOT be modified.
- After review has been completed and an award is made, the ***Notice of Intent to Award*** will be emailed directly to all vendors who submitted bids. The Notice of Intent to Award will also be posted on DOM's website, in the MS Procurement Portal and in MAGIC.

MISSISSIPPI DIVISION OF MEDICAID

CLOSING

Attachment I — Admendment #2 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

Amendment #2 - Clarifications

External Medical Review Consulting

IFB #20251031 RFX #3160007625

Date: November 26, 2025

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

2.1.1.8 (**General Requirements**) Medical Providers must be flexible in their availability for hearings related to the case. ~~Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings.~~ Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include:

- Appeals and Hearing processes and decorum
- Requirements for timely and efficient reviews, including flexibility in scheduling
- Confidentiality and HIPAA compliance.

1.10.2 (3) References

From the list of engagements provided at **IFB Section 1.10.2 (1)**, the Bidder shall provide reference contacts for ~~all engagements .~~6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.

1.10.2 (2) Bidder Licenses/Certifications

Medical Providers

Bidder must warrant that all physicians (the "Medical Providers") providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Each Medical Provider shall be licensed to practice in Mississippi. If a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation. The Bidder must provide a list of all participating Medical Providers and attest that they meet these licensure and board certification requirements. The Bidder must also attest that the Medical Providers have the relevant experience in the specialty and detail the number of years of experience. While DOM prefers at least two (2) years of experience, there is no minimum experience requirement for Medical Providers. If

a Medical Provider has no prior experience in the specialty area, the Bidder should state 'None' or '0' years for that provider.

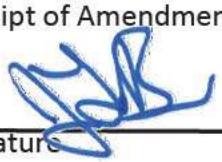
Bidder Company

DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, an accreditation by NCQA for Utilization Management is preferred but not required.

The bid due date remains unchanged: December 12, 2025, by 2:00 p.m.

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #2 Acknowledged:



Signature

James L. Bobeck, Esq.

Printed Name

CEO

Title

Federal Hearings and Appeals Services, LLC

Entity Name

Attachment I — Admendment #3 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #3 – CLARIFICATION

CHANGE TO BID DUE DATE

EXTERNAL MEDICAL REVIEW CONSULTING

IFB #20251031 RFX #3160007625

Date: December 9, 2025

Due to an administrative error, the following sections of IFB #20251031 have been amended.

1. COVER PAGE is modified as follows: Bid Response Deadline: Friday, December ~~12~~19, 2025, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~12/12/2025~~ 12/19/2025	Bid Deadline (by 2:00 p.m.)
1/02/2025	Anticipated Date of Notice of Intent to Award
2/04/2026	Public Procurement Review Board meeting date (proposed)
2/09/2026	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025,** on or before **2:00 p.m., CST**.

5. Attachment H – Bidder's IFB Response Checklist is modified as follows:

			✓	N/A
BIDDER NAME:				
MANDATORY LETTER OF INTENT				
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***			
SHAREPOINT REGISTRATION VERIFICATION				
2	Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)			
BID SUBMISSION PACKET **Due Date Friday, December ~~12~~19, 2025, by 2:00 p.m. CST**				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required)		
	b	Attachment B – Bid Form (Signature Required)		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.		
	d	Attachment C – Contract Draft Acknowledgement		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.		
4	Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December ~~12~~19, 2025, by 2:00 p.m. CST.***			

MISSISSIPPI DIVISION OF
MEDICAID

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #3 Acknowledged:

Signature

James L. Bobeck, Esq.
Printed Name

CEO
Title

Federal Hearings and Appeals Services, LLC
Entity Name

Attachment I — Admendment #4 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #4

External Medical Review Consulting

IFB #20251031

Issued December 24, 2025

Revised IFB – Re-submission of IFB Bids

RE-SUBMISSION DUE DATE: Friday, January 16, 2026, by 2:00 p.m.

This Amendment serves as formal notice that the Mississippi Division of Medicaid (DOM) is providing a new submission deadline for Invitation for Bid (IFB) #20251031 for External Medical Review Consulting services due to various submission deficiencies. Only bidders that submitted a Letter of Intent by the original deadline of November 14, 2025, are eligible for this re-submission of bid allowance.

Pursuant to Section 3.10 of the IFB, DOM expressly reserves the right to reject any and all bids, in whole or in part, when it is determined to be in the best interest of the agency. To ensure fair and open competition, DOM has elected to reject all bids and allow for re-submission of responses to the IFB.

As further clarification, DOM has revised Attachment H, Bidder's IFB Response Checklist to further assist bidders with preparing their bid submission.

To be a responsive and responsible bidder, the following conditions must apply:

- Bidders must adhere to **all** required formats, minimum qualifications, and submission requirements as stated in the IFB and its amendments.

In accordance with PPRB Section 5.7.3, DOM will not retain the original bid submissions in the Agency Procurement files. All original bids will be deleted. Only enough information necessary to support the decision to reject the bids will be retained. Therefore, bidders are free to make any adjustments they would like for the new submission deadline.

Please refer back to IFB and all Amendments before submitting bid responses.

Failure to submit a responsive bid may result in the rejection of the bid.

Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of ***Friday, January 16, 2026, by 2:00 p.m.***

Remainder Of This Page Intentionally Left Blank

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

1. COVER PAGE is modified as follows: Bid Response Deadline: ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~12/12/2025~~ ~~12/19/2025~~ 1/16/2026	Bid Deadline (by 2:00 p.m.)
~~1/02/2025~~ 1/30/2026	Anticipated Date of Notice of Intent to Award
~~2/04/2026~~ 3/4/2026	Public Procurement Review Board meeting date (proposed)
~~2/09/2026~~ 3/9/2026	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025~~ Friday, January 16, 2026.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026.**

5. Attachment H – Bidder's IFB Response Checklist is modified to further clarify submission requirements and emphasize the importance of completing a fully compliant IFB response.

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected due to respondents simply failing to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

	BIDDER NAME:	✓	**N/A**
	MANDATORY LETTER OF INTENT		
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. ~~On or before due date: *Friday, November 14, 2025, by 2:00 p.m. CST*~~ **Only vendors who submitted the Mandatory Letter of Intent by the original deadline are permitted to participate in this re-submission of the IFB.**		
	SHAREPOINT REGISTRATION VERIFICATION		
2	~~Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site.~~ Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of		

		Friday, January 16, 2026, 2:00 p.m. (Assistance must have been requested at least two (2) business days prior to due date.)		
BID SUBMISSION PACKET Due Date Friday, January 16, 2026, by 2:00 p.m. CST				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required) • A cover page is required for each Attachment subsection. The cover page for each subsection of the Bid must include the IFB#, the name of the Bidder and the Attachment letter and title. All information must be presented in the same order and format as described in section 3.4.14 Bid Submission Format.		
	b	Attachment B – Bid Form (Signature Required) • All pages of the Bid Form must be submitted and signed by an authorized person. All six questions regarding your company must be answered and included with Bid response. Refer to pages 25-28 of the IFB.		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format. • For the Minimum Qualifications, the header of each page should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement. • For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). • Ensure that all lists, narratives and/or attestations for each of the four (4) minimum qualification elements are answered or provided.		
	d	Attachment C – Contract Draft Acknowledgement • By signing the acknowledgement to Attachment C, the Bidder affirms acceptance of Appendix 3 – Contract draft; including the terms, conditions, and obligations set forth therein, and agrees to the be bound by the provision on the contract as finalized. As noted in the Bid Form the bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation.		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required) • All pages of Attachment D form must be included in bid response. No modifications are allowed.		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required) • All pages of Attachment E form must be included in bid response. No modifications are allowed.		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release. • Bidder's providing a redacted copy of response must properly answer the questions on this form and provide a separate redacted copy of the bid response adhering to the submission format used for confidential information, as stated on Attachment F.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening. • For Minimum Qualification 1.10.2 (2) Amendment 2 – Clarification: From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required) • Amended. Must be signed and returned with bid re-submission.		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		

		• Acknowledgement to Amendment 1, 2, 3 and 4 must be signed and returned with bid re-submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14. • All required IFB documents must be re-submitted with response.		
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ~~***Friday, December 12, 2025, by 2:00 p.m. CST.***~~ ***Friday, January 16, 2026, by 2:00 p.m.***		

Bid Submitted By: James L. Bobeck, Esq., CEO

Authorized Signature — Date: 01/16/2026

Receipt of Amendment #4 Acknowledged: Printed

Name: James L. Bobeck, Esq.

Signature:

Title: CEO

Company Name: Federal Hearings and Appeals Services, LLC

Attachment I — Admendment #5 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

MISSISSIPPI DIVISION OF MEDICAID

Date: December 30, 2025

Amendment #5 Additional Questions Period **Deadline for Additional Questions shall be Friday, January 2, 2026 by 5:00 p.m. Anticipated date of posting Written Answers shall be Monday, January 5, 2026 by 5:00 p.m.**

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.

Receipt of Amendment #5 Acknowledged:

_____
Signature
James L. Bobeck_____
Printed Name
_CEO_____
Title
_Federal Hearings and Appeals Services, LLC_____
Entity Name

Attachment I — Admendment #6 Acknowledgement

External Medical Review Consulting

IFB #20251031

Mississippi Division of Medicaid

Federal Hearings and Appeals Services, LLC (FHAS)

MISSISSIPPI DIVISION OF MEDICAID

Amendment #6 Additional Questions and Answers Issued: January 5, 2026

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response
1	Attachment A and Section 3.4.14	Page 1 and IFB Page 19	Attachment A states: "A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site. File Name: BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING, and IFB page 19 (Section 3.4.14) states: The one combined searchable PDF file should be uploaded in SharePoint with the file name: IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING." **Question:** Which requirement is correct? Should the file name of the one-combined searchable PDF file include the IFB number or not?	Yes. The file name of the one combined searchable PDF file must include the IFB number when submitted to the SharePoint site. Bidders should follow the naming convention outlined in IFB page 19, Section 3.4.14. IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING.
2	Amendment 4 Revised Attachment H	Page 3 3a	3a states: "A cover page is required for each Attachment subsection." **Question:** The word *subsection* is unclear. Do you mean that before each Attachment, you want the bidder to include a cover page? If so, should the bidder include a cover page for Attachment A or just start the proposal with Attachment A (as the Bid Cover Sheet), and then create a cover page for Attachments B through I?	Yes. Attachments A through I are the Attachment subsections referenced in the IFB. Bidders must include a cover page for Attachment A and each attachment thereafter.
3	Amendment 4 Revised Attachment H	Page 3 3c	The first bullet of 3c states: "For the Minimum Qualifications, the *header of each page* should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement." **Question:** Is the Minimum Qualifications section the only section in which the DOM requires specific wording to be stated in the header of each page? Please clarify if you want specific wording in the header of each page for **any other section** of the proposal. That is, for all the other Attachments, does DOM want the headers to be blank (no logos, no wording)?	Yes. The Minimum Qualifications section is the only section that requires a header identifying the specific element to which the bidder is responding. All other sections of the proposal will include a cover page, and no specific header wording is required for other sections of the proposal.
4	Amendment 4 Revised Attachment H	Page 3 3c	The second bullet of 3c states: "For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review)." **Question:** Do you want the bidder to include a copy of its URAC certificate in this section?	URAC Accreditation is required; however, submission of the URAC certificate is not required at the time of bid response. DOM may request documentation of accreditation at a later time.

5	N/A	N/A	**Question:** Should the bidder change the submission date from December 12, 2025, to January 16, 2026, on any signed documents that are included with its proposal?	Yes. DOM issued Amendment #4, which established a revised bid submission deadline of January 16, 2026. Bidders must ensure that all proposal documents requiring signatures reflect this updated submission date.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment. This Amendment #6 must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #6 Acknowledged:

Signature

__James L. Bobeck, Esq._____

Printed Name

__CEO_____

Title

__Federal Hearings and Appeals Services, LLC_____

Entity Name

Attachment A – Bid Cover Sheet IFB #: 20251031

DOM is seeking to establish a contract for External Medical Review Consulting. Bids are to be submitted **Friday, December 12, 2025,** on or before **2:00 p.m., CST**.

Bid Cover Sheet is to be used to accompany your electronic file when submitting bid via SharePoint.

A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site.

File Name: **BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING**

Company Name:	MCMC Services, LLC
Company Address:	1451 Rockville Pike #440, Rockville MD 20852
Authorized Signature:	Sarah Gorzny Digitally signed by: Sarah Gorzny DN: CN = Sarah Gorzny email = sarah.gorzny@mcmcllc.com C = US O = MCMC Services, LLC OU = General Manager Date: 2025.12.08 15:40:17 -06'00'
Name and Title:	
Phone Number:	
Email address:	
***MAGIC Supplier #**	

*If Bidder does not have a MAGIC Supplier number, Bidder can register in MAGIC after award is made to Contractor.

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment B

Bid Form

Attachment B - Bid Form

GENERAL

Compensation for services shall be in the form of a firm fixed-rate agreement. Through submission of this form and accompanying **Addendum 1: Minimum Qualifications**, the Bidder certifies the following:

1. The Bidder shall accept an award made as a result of the submission.
2. The Bidder is registered to do business in the State of Mississippi as prescribed by the Mississippi Secretary of State, if not already registered Bidder will do so within five (5) business days of being offered an award.
3. The Bidder has not been sanctioned by a state or federal government within the last 10 years.
4. The Bidder has a minimum of five (5) years of experience in contractual services, providing the type of services described in this IFB.
5. The Bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation and is able to provide each required component and deliverable as detailed in the Scope of Services.

The services described in the Scope of Services require Bidders to offer an all-inclusive, fully burdened hourly rate. This rate must encompass all costs of performance, including but not limited to, labor, overhead, administrative expenses, and profit. To assist in determining this pricing, historical usage data has been provided in Appendix 2.

The total number of hours for this contract is not fixed and will vary based on the State's needs. For evaluation purposes, DOM will calculate the average cost across all five years to determine the lowest bid.

The anticipated contract term for the required services is February 9, 2026, through February 8, 2029, with one optional two-year renewal, at the discretion of DOM.

BID FORM – EXTERNAL MEDICAL REVIEW CONSULTING IFB #20251031	
BIDDER NAME:	
Service Description: Appeal Review, Hearing and Report Preparation	**Hourly Rate**
Term: Year One	$ 150.00
Term: Year Two	$ 150.00
Term: Year Three	$ 150.00
Optional Term: Year Four	$ 150.00
Optional Term: Year Five	$ 150.00

*Bidders shall **not** include any additional charges or additional line items in this bid form. Any additional charges included on a bid form may result in the bid being deemed non-responsive, and the bid will thereby be rejected.*

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Experience

MCMC Services, LLC

Addendum 1: Minimum Qualifications,

1.10.2 (1)

Bidder Experience Requirement

MCMC is currently certified as an independent Review Organization by the Mississippi Insurance Department to conduct independent external reviews of adverse determinations and final adverse determinations rendered by health carriers. MCMC has been performing external reviews pursuant to the Mississippi Health Carrier External Review Regulations since 2017.

In addition, MCMC is certified as an independent review organization (IRO) to perform state-administered external reviews in the following states: Arkansas, Colorado, Georgia, Idaho, Illinois, Indiana, Kentucky, Louisiana, Mississippi, Montana, Nevada, New Mexico, New York, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Dakota, Tennessee, Utah, Virginia, West Virginia, Wisconsin, and Wyoming.

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Addendum 1: Minimum Qualifications,

1.10.2 (2)

Bidder Licenses/Certifications with Attestment

MCMC attests that all Medical Providers on our review panel possess the relevant clinical experience in their respective specialties. MCMC Medical Providers must have at least five (5) years of active clinical practice in their specialty.

[END OF RESPONSE]

1451 Rockville Pike, Suite 440
Rockville, MD 20852
T 800-227-1464
F 617-375-7683

www.mcmcllc.com

MCMC Peer Panel

Mississippi

Last Name	First Name	MI	Title	Specialty	License	License Number	License Expiration Date	Years in Clinical Practice (in Speciality)
Anand	Ashish		MD	Orthopaedic Surgery	MO; MS; VA	2009005165; 23668;	2026-01-31; 2026-06-30;	21 years
Ayyar	Siva		MD	Occupational Medicine	CA; CT; FL; IL; LA; MS; NV; NY; OH; OK; TN; TX	A93006; 52661; ME113077; 036136847; MD 208190; 24147;	2027-06-30; 2026-06-30; 2026-01-31; 2026-07-31; 2026-06-30; 2026-06-30;	21 years
Bisnauth	Linda	Devi	MD	Child & Adolescent Psychiatry; Psychiatry	CA; CT; FL; IA; KY; MD; ME; MS; NC; NJ; NY; PA; TN	C 181874; 65227; ME110432; MD-40887; 54134; D0079079; MD19618; 36251; 2020-03511; 25MA09698500; 246390; MD476031;	2026-09-30; 2026-11-30; 2027-01-31; 2026-11-01; 2026-02-28; 2026-09-30; 2026-11-30; 2026-06-30; 2026-11-13; 2027-06-30; 2026-10-31; 2026-12-31;	21 years
Grinman	Lev		MD	Neurology; Sleep Medicine	AK; AL; AR; AZ; CA; CT; DC; DE; FL; GA; HI; IA; ID; IL; IN; KS; KY; LA; MA; MD; ME; MI; MN; MO; MS; MT; NC; ND; NE; NH; NJ; NM; NV; NY; OH; OK; OR; PA; RI; SC; SD; TN; TX; UT; VA; VT; WA; WI; WV; WY	241864; MD.42091; E-10209; 54583; C141677; 51402; MD600001837; C10011139; ME116213; 72207; MD-25467; MD-53367; 3861162; 036144455; 01093969A; 04-44215; 51866; 327451; 273360; D0079596; MD23518; 4301500991; 67593; 2021041060; 28533; 142752; 2017-02025; 19051; CP842; 33381; 25MA08878200; MD2017-0839; 16786; 246396; 35.127157; 31775; MD226573; MD447148; MD20771; 40943; 13871; 51443; R2349; 14031460-1235; 0101259823; 042.0015217;	2026-12-31; 2026-12-31; 2026-01-31; 2026-05-13; 2026-01-31; 2026-01-31; 2026-01-31; 2027-03-31; 2027-01-31; 2026-01-31; 2026-01-31; 2026-01-01; 2026-06-30; 2026-07-31; 2027-10-31; 2026-07-31; 2026-02-28; 2026-01-31; 2027-01-13; 2026-09-30; 2026-01-31; 2028-09-27; 2026-01-31; 2026-01-31; 2026-06-30; 2026-03-31; 2026-01-13; 2026-01-13; 2026-10-01; 2026-07-01; 2027-06-30; 2027-07-01; 2027-06-30; 2026-12-31; 2027-01-01; 2026-08-01; 2027-12-31; 2026-12-31; 2026-06-30; 2027-06-30; 2027-03-01; 2026-01-31; 2027-05-31; 2026-01-31;	20 years
Ivory	Dedri	Markita	MD	Internal Medicine; Rheumatology	MS	21520	2026-06-30	19 years
Koss	Lawrence		MD	Family Medicine	AZ; CA; KY; MD; MS; NC; NY; TN; TX	71254; C-54995; 57511; D0074243; 23291; 2013-02326; 208062; 51747; P8378	2026-04-25; 2027-12-31; 2026-02-28; 2026-09-30; 2026-06-30; 2026-12-25; 2026-11-30; 2027-12-31;	29 years
Patel	Rajesh	Gajendra	MD	Pulmonary Disease	MS	13294	2026-06-30	36 years

MCMC Peer Panel

Mississippi

Last Name	First Name	MI	Title	Specialty	License	License Number	License Expiration Date	Years in Clinical Practice (in Speciality)
Roots	Monika	Drummond	MD	Child & Adolescent Psychiatry; Psychiatry	AK; AL; AR; AZ; CA; CO; CT; DC; DE; FL; GA; GU; IA; ID; IL; IN; KS; KY; LA; MA; MD; ME; MI; MN; MO; MS; MT; NC; ND; NE; NH; NJ; NM; NV; NY; OH; OK; OR; PA; RI; SC; SD; TN; TX; UT; VA; VT; WA; WI; WV; WY	185472; 34647; E-9977; 51339; C 168273; DR.0055801; 072983; MD600001746; C1-0011505; ME171779; 86256; MC-052; MD-48631; MC-0919; 036137102; 01084931A; 04-44764; C0268; MD.207996; 259746; D91773; MD25379; 4301108748; 51934; 2022000406; 28995; 99656; 2015-02185; 14132; 28906; 21606; 25MA09780000; MD2024-0558; 16390; 284394; 35C.000269; 31979; MD208154; MD485819; MD15075; 92408; 12748; 64609; Q6272; 12512507-1235; 0101259631; 042.0015556-COMP;	2026-12-31; 2026-12-31; 2026-06-30; 2026-10-06; 2028-03-31; 2027-04-30; 2026-06-30; 2026-06-30; 2027-03-31; 2027-01-31; 2027-06-30; 2027-12-31; 2026-06-01; 2026-06-30; 2026-07-31; 2027-10-31; 2026-07-31; 2026-02-28; 2026-06-30; 2027-06-06; 2027-09-30; 2026-06-30; 2026-10-05; 2026-06-30; 2027-01-31; 2026-06-30; 2027-03-31; 2026-06-06; 2026-06-06; 2026-10-01; 2027-06-30; 2027-06-30; 2028-07-01; 2027-06-30; 2027-05-31; 2026-08-28; 2026-06-01; 2027-12-31; 2026-12-31; 2026-06-30; 2027-06-30; 2027-03-01; 2026-06-30; 2026-11-30; 2028-01-31; 2026-06-30;	16 years
Smith	Kyle	Anthony	MD	Neurological Surgery	AR; FL; MS; TN; TX	E-12906; ME93775; 26793; 59561; V3115	2026-03-31; 2027-01-31; 2026-06-30; 2027-03-31; 2027-08-31	13 years
Sumas	Mariaelaina	Elaina	MD	Neurological Surgery	CA; FL; MS; NJ; NY; PA; TN	G166953; ME139977; 27144; 25MA06586800; 241543; MD054935L; 59810	2027-12-31; 2027-01-31; 2026-06-30; 2027-06-30; 2027-08-31; 2026-12-31; 2027-09-30	28 years
Terry	Kimberly	Dawn	MD	Neurological Surgery	AR; AZ; CA; CO; CT; FL; GA; HI; ID; IL; KS; KY; LA; MA; MD; MN; MO; MS; NC; NH; NJ; NM; NV; NY; OH; OK; OR; SC; TN; TX; VA	E-13896; 69843; C54305; DR.0049181; 052462; ME143744; 40849; MD-23507; M-15561; 036133943; 04-49118; 46491; MD.204234; 257329; D0076647; 48570; 2006011027; 17366; 2010-01434; 16393; 25MA09390300; MD2013-0633; 14973; 271661; 35.122685; 27655; MD214562; 27189; 46061; M5056;	2026-07-31; 2027-11-23; 2026-07-31; 2027-04-30; 2026-07-31; 2026-01-31; 2027-07-31; 2026-01-31; 2026-06-30; 2026-07-31; 2026-07-31; 2026-02-28; 2026-07-31; 2026-07-23; 2027-09-30; 2026-07-31; 2026-01-31; 2026-06-30; 2026-07-23; 2027-06-30; 2027-06-30; 2026-07-01; 2027-06-30; 2027-06-30; 2027-10-01; 2026-09-01; 2027-12-31; 2027-06-30;	23 years

MCMC Peer Panel

Mississippi

Last Name	First Name	MI	Title	Specialty	License	License Number	License Expiration Date	Years in Clinical Practice (in Speciality)
Vadera	Sumeet		MD	Neurological Surgery	AL; AZ; CA; CO; GA; IL; IN; KS; KY; MA; MD; MI; MN; MS; NC; NJ; NY; OK; TN; TX; VA; WA	MD.45715; 69055; A131921; DR.0070196; 94519; 036159010; 01091282A; 04-50268; C1365; 294702; D0096282; EMC0002893; 78376; 31232; 2022-02020; 25MA12049900; 313428; 44706; 67768; T6063; 0101277560; MD61400180	2026-12-31; 2026-01-15; 2027-11-30; 2027-04-30; 2026-11-30; 2026-07-31; 2027-10-31; 2026-07-31; 2026-02-28; 2027-11-15; 2027-09-30; 2026-01-23; 2026-11-30; 2026-06-30; 2026-11-15; 2027-06-30; 2026-10-31; 2026-11-01; 2027-11-30; 2027-05-31; 2026-11-30; 2027-11-15	18 years
Wood III	James	Edward	MD	Internal Medicine; Nephrology	AZ; CA; CT; FL; GA; IL; IN; KS; KY; LA; MD; MI; MN; MO; MS; NC; NE; NH; NJ; NV; NY; OH; OK; SC; TN; TX; VA; WI; WV	44270; C 130900; 38753; ME118385; 73526; 036137265; 01076806A; 04-38219; 42302; 300399; D0084174; 4301106573; 62363; 2013009632; 21327; 9701663; 28376; 16618; 25MA09897100; 18445; 250551; 35.092862; 31047; 28655; 58461; N3392; 0101258387; 63673 - 20; 24856	2026-06-17; 2026-02-28; 2026-02-28; 2026-01-31; 2027-02-28; 2026-07-31; 2027-10-31; 2026-07-31; 2026-02-28; 2026-02-28; 2027-09-30; 2028-12-09; 2026-02-28; 2026-01-31; 2026-06-30; 2026-02-17; 2026-10-01; 2026-06-30; 2027-06-30; 2027-06-30; 2028-01-31; 2027-10-01; 2026-02-01; 2027-06-30; 2026-02-28; 2026-11-30; 2026-02-28; 2027-10-31;	29 years
Woodson	Linda	Stephens	MD	Dermatology	MS; NV	26565; 7012	2026-06-30; 2027-06-30	35 years

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Addendum 1: Minimum Qualifications,

1.10.2 (4)

Bidder Written, Detailed Validation

Corporate Overview and Scope of Service

Founded in 1984, MCMC Services, LLC (MCMC) specializes in providing independent medical reviews. This includes, but is not limited to, Internal Review, State & Federal External Review, State Fair Hearings and State Administrative Hearings. Our clinical review process involves a rigorous evaluation of medical records, clinical documentation, utilization guidelines, and all applicable statutory or regulatory policies.

Section 1: Clinical Rationale and Deliverables

MCMC will provide the Mississippi Division of Medicaid (DOM) Office of Appeals with comprehensive written clinical rationales for every determination. Each recommendation is supported by specific medical criteria or clinical guidelines utilized during the review. These deliverables include:

- **Reason For Referral:** The specific questions raised on appeal.
- **Clinical Summary:** A concise overview of all medical documentation.
- **Recommendation:** Clear clinical conclusions regarding the merits of the appeal.
- **Rationale:** A detailed, evidence-based justification for the recommendation.
- **Reference:** A comprehensive list of clinical references and direct links to (or copies of) all referenced documents utilized by the Medical Provider.

MCMC acknowledges that the final format of the written recommendation is subject to the approval of the Office of Appeals Director following the contract award.

Section 2: Performance Standards and Timelines

MCMC commits to delivering detailed recommendations via our secured portal in accordance with the following Performance Requirement (PR) timelines:

- **Standard Appeals:** Deliverables will be submitted within seven (7) business days of the initial request and documentation receipt.
- **Expedited Appeals:** Deliverables will be submitted within one (1) business day of the initial request.
- **Supplemental Documentation:** Should DOM submit additional documentation after the initial request, MCMC will provide updated recommendations within seven (7) business days for standard cases and one (1) business day for expedited cases.

MCMC confirms adherence to the deadlines established in sections 2.1.1.5 and 2.1.1.6. MCMC acknowledges that failure to meet these deadlines without prior authorization from the Office of Appeals will result in the forfeiture of payment for the specific recommendation.

Section 3: Expert Testimony and Provider Conduct

At the request of DOM, MCMC Medical Providers will participate in telephonic hearings to provide expert testimony. MCMC ensures that:

- **Availability:** Providers maintain flexible schedules and, for out-of-state reviewers, remain available during Central Standard Time (CST) business hours.
- **Subject Matter Expertise:** Providers will deliver knowledgeable testimony regarding their clinical rationales and maintain professional conduct throughout the proceedings.
- **Specialized Review:** Upon request, MCMC can provide certified biller/coder reviews for cases requiring specialized coding expertise.
- **Quality Assurance:** MCMC acknowledges that any provider misconduct (e.g., hostility, inability to answer questions, or professional negligence) will result in the forfeiture of the hearing fee and the immediate removal of that provider from the DOM network.

Section 4: Information Technology and Security

MCMC utilizes a HIPAA-compliant, encrypted portal to manage the end-to-end review process. Security features include Role-Based Access Control (RBAC), secure credentialing, and full encryption of Protected Health Information (PHI) in transit and at rest.

- **Portal Capabilities:**
    - **Case Management Dashboard:** Real-time tracking of case statuses with search and intake functionality.
    - **High-Volume Intake:** Support for voluminous medical record attachments per individual appeal, with each case assigned a unique tracking identifier.
    - **Reviewer Portal:** An integrated workspace where reviewers access review documents while generating completed reviews within the portal.
    - **Automated Notifications:** Real-time alerts to DOM staff regarding reviewer assignments, requests for additional information, and case completions.

Section 5: Contractual and Financial Terms

- **Operational Costs:** MCMC confirms that all travel-related expenses are included in the operational cost and will not be billed separately to DOM.
- **Sole Responsibility:** MCMC assumes sole responsibility for all contract terms; all payments shall be made exclusively to MCMC Services, LLC.
- **Invoicing:** MCMC will submit monthly itemized invoices at the firm, fixed hourly rate specified in the Cost Proposal. Invoices will include the contract number, invoice number, and a detailed breakdown of services rendered per case.

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment C

Contract Draft Acknowledgement

Attachment C – Contract Draft Acknowledgement

The Bidder shall be required to sign and submit this formal acknowledgment confirming that they have received, reviewed, and fully understood the draft contract, Appendix 3. By signing this acknowledgment, the Bidder affirms acceptance of the terms, conditions, and obligations set forth therein, and agrees to be bound by the provisions of the contract as finalized.

Company Name:	MCMC Services, LLC
Signature:	Sarah Gorzny Digitally signed by: Sarah Gorzny DN: CN = Sarah Gorzny email = sarah.gorzny@mcmcllc.com C = US O = MCMC Services, LLC OU = General Manager Date: 2025.12.08 15:38:36 -06'00'
Title:	
Date:	

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment D

DHHS Certification Drug-Free Workplace

Attachment D - DHHS Certification Drug-Free Workplace

DHHS CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS:

GRANTEES OTHER THAN INDIVIDUALS

Instructions for Certification

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

1) This certification is required by regulations implementing the Drug-Free Act of 1988, 2 CFR Part 382. The regulations require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the DHHS determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.

2) Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify

6) "Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including (i) all direct charge employees; (ii) all indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent Contractors not on the grantee's payroll; or employees of sub recipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

b) Establishing an ongoing drug-free awareness program to inform employees about:

1) The dangers of drug abuse in the workplace;
2) The grantee's policy of maintaining a drug-free workplace;
3) Any available drug counseling, rehabilitation, and employee assistance programs; and
4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

a) Place of Performance (street address, city, county, state, zip code)
b) Check if there are workplaces on file that are not identified here.

---->NOTE: Sections 76.630(c) and (d) (2) and 76.635(a)(1) and (b) provide that a federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For HHS, the central receipt point is Division of Grants Management and Oversight, Office of Management and Acquisition, HHS, Room 517-D, 200 Independence Ave, S.W., Washington, D.C. 20201

Company Name:	MCMC Services, LLC
Signature:	Sarah Gorzny Digitally signed by: Sarah Gorzny DN: CN = Sarah Gorzny email = sarah.gorzny@mcmcllc.com C = US O = MCMC Services, LLC OU = General Manager Date: 2025.12.15 12:12:54 -06'00'
Title:	
Date:	

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment E

DHHS Certification

Debarment, Suspension, and Other Responsibility Matters

Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility Matters

DHHS Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Primary Covered Transactions

2 CFR Part 376,

(1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:

a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;

b. Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and,

d. Have not within a three-year period preceding this bid had one or more public transactions (federal, state or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

Company Name:	MCMC Services, LLC
Signature:	Sarah Gorzny Digitally signed by: Sarah Gorzny DN: CN = Sarah Gorzny email = sarah.gorzny@mcmcllc.com C = US O = MCMC Services, LLC OU = General Manager Date: 2025.12.15 11:43:48 -06'00'
Title:	
Date:	

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment F

Proprietary Information Form

Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☐	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 through 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.

☒	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.

_____ 12/18/2025

Signature of Authorized Official Date

MCMC Services, LLC

Name of Organization

End of Response

IFB # 20251031,

MCMC Services LLC

Attachment G

References

Attachment G – References

BIDDER NAME: MCMC Services, LLC

Reference 1
Name of Company: United Health Care
Dates of Service:
Contact Person: David Vaughn
Address: 9700 Healthcare Lane
City/State/ZIP: Hopkins, Minnesota 55343
Telephone Number: 952-979-6405
Cell Number:
Email: David.j.vaughn@uhc.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 2
Name of Company: Optum
Dates of Service:
Contact Person: Michelle Smith
Address: 13625 Technology Drive
City/State/ZIP: Eden Prairie, Minnesota 55344
Telephone Number: 888-403-3398
Cell Number: 405-201-47652
Email: leah.m.smith@optum.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 3
Name of Company: Blue Cross Blue Shield Florida
Dates of Service:
Contact Person: Sylvia Gibson
Address: 4800 Deerwood Campus Parkway
City/State/ZIP: Jacksonville, Florida 32246
Telephone Number: 954-302-4803
Cell Number:
Email: Sylvia.Gibson@FloridaBlue.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

Attachment G – References

BIDDER NAME: MCMC Services, LLC

Reference 1
Name of Company: Blue Cross Blue Shield Arizona
Dates of Service: 12/1/2005 to Present
Contact Person: Saralynn Parker
Address: 8220 N. 23rd Ave.
City/State/ZIP: Phoenix, Arizona 85021
Telephone Number: 602-916-6934
Cell Number:
Email: Saralynn.Parker@azblue.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 2
Name of Company: Blue Cross Idaho
Dates of Service: 8/18/22 to Present
Contact Person: Emily Heuman
Address: 3000 E. Pine Ave.
City/State/ZIP: Meridian, ID 83642
Telephone Number: 986-224-4804
Cell Number:
Email: Emily.Heuman@bcidaho.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 3
Name of Company: Medica (Dean Health Plan)
Dates of Service: 10/1/2008 to Present
Contact Person: Kathy Bowers
Address: 401 Carlson Parkway
City/State/ZIP: Minnetonka, MN 55305
Telephone Number: 608-554-5494
Cell Number:
Email: Katherine.bowers@deancare.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

Attachment G – References

BIDDER NAME: MCMC Services, LLC

Reference 1
Name of Company: People's Health Network
Dates of Service: 4/11/2003 to Present
Contact Person: Teresita Brown (Terry)
Address: 3838 N. Causeway Blvd.
City/State/ZIP: Metairie, LA 70002
Telephone Number: 504-681-8511
Cell Number:
Email: Teresita.Brown@Peopleshealth.com
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 2
Name of Company:
Dates of Service:
Contact Person:
Address:
City/State/ZIP:
Telephone Number:
Cell Number:
Email:
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:
Reference 3
Name of Company:
Dates of Service:
Contact Person:
Address:
City/State/ZIP:
Telephone Number:
Cell Number:
Email:
Alternate Contact Person (optional):
Alternate Contact Telephone Number:
Alternate Contact Cell Number:
Alternate Contact Email:

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Attachment H

Bidder's Response Checklist

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected because the respondent simply failed to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

BIDDER NAME:		MCMC Services, LLC	✓	**N/A**
MANDATORY LETTER OF INTENT				
1		IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***	X	
SHAREPOINT REGISTRATION VERIFICATION				
2		Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)	X	
BID SUBMISSION PACKET **Due Date Friday, December 12, 2025, by 2:00 p.m. CST**				
3	a	Attachment A Bid Submission Cover Sheet (Signature Required)	X	
	b	Attachment B Bid Form (Signature Required)	X	
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.	X	
	d	Attachment C – Contract Draft Acknowledgement	X	
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)	X	
	f	Attachment E DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)	X	
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.	X	
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.	X	
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)	X	
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.	X	
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.	X	
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December 12, 2025, by 2:00 p.m. CST.***	X	

Bid Submitted By: _____ 12/19/25

Authorized Signature 24 Date

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Amendments 1 and 2

Date: November 26, 2025

Amendment #1 Questions and Answers and Pre-Bid Submission Conference PowerPoint Presentation

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is December 12, 2025 by 2:00 p.m.

Question #	RFP Section #	RFP Page #	Question	DOM Response
1	N/A	N/A	What is the current pricing for this scope of work?	The current incumbent pricing is as follows: • Appeal Review and/or Length of Stay Review: Flat hourly rate of $150 • Medicaid Hearing & Report Preparation: Hourly rate of $155.
2	1.8	7	Does the single fixed hourly rate specified in the bid, cover all aspects of the service, including the detailed medical review, writing the recommendation, and all time associated with preparatin for and attendance at required telephonic hearings?	Yes. The single fixed hourly rate specified in the IFB on the Bid Form is intended to cover all aspects of the required service. As outlined in the Service Description, the hourly rate encompasses Appeal Review, Hearing and Report Preparation.
3	1.10.2	8	What is the most frequently requested medical specialties and percentage of breakdown of reviews by specialty over the past 12 to 24 months?	Please refer to Appendix 2 – Historical Data (pages 40-42) of the IFB for a breakdown of reviews by medical specialties for 2024 and 2025 to date.

4	1.10.2	8	In the event that a specialty physician is not licensed in Mississippi, can the Mississippi licensed physician who must review and sign off on the recommendation be of any specialty?	If the reviewing physician is not of the same specialty as the case, a Mississippi-licensed physician can be of any specialty, however, general practice is preferred to provide the required review and sign-off.
5	1.10.2 and 3.4.14	9 and 20	The text for #4 on Page 9 states, "Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services (no more than 5 pages)." Two questions: 1) Does the Scope of Services include the General Requirements on pages 11-12 AND the System Requirements on pages 13-14, or just the General Requirements? 2) Please clarify the number of pages the bidder has to respond to the Scope of Services section because above it states "no more than five pages," yet Section 3.4.14 - Bid Submission format states: "At the end of each response to an element by the Bidder, the Bidder should type "[END OF RESPONSE]" and leave the remainder of the page blank, beginning the response to the next element on the next page." There are 16 "elements" between the General Requirements (2.1.1.1-2.1.1.11) and System Requirements (2.2.1-.2.2.5), plus four (4) "elements" under Minimum Qualifications (pages 8-9). If the bidder follows the Section 3.4.14 guideline, it would require 20 pages to ensure each response falls/begins on its own page.	1) Yes. For purposes of Item #4 on Page 9, the Scope of Services includes both the General Requirements and the System Requirements. 2) Section 3.4.14 only relates to the items listed at 1.10.2 Minimum Qualifications (Attachment B: Addendum 1) •• 1st Element •• Addendum 1: Minimum Qualifications, 1.10.2(1) Bidders Experience Requirement *add your documentation and then state END OF RESPONSE •• 2nd Element •• Addendum 1: Minimum Qualifications, 1.10.2(2) Bidder Licenses/Certifications * add your documentation and then state END OF RESPONSE •• 3rd Element •• Addendum 1: Minimum Qualifications 1.10.2(4) Bidder's Narrative * add your documentation and then state END OF RESPONSE **The 3rd Element (1.10.2 (4)) is the only element that is limited to no more than 5 pages. **Note**: For Element 1.10.2(3) Minimum Qualifications References. Follow the required documenting format.

6	1.10.2 (1) and (3)	8	Our company is authorized to provide external reviews in 30+ states which we will identify per 1.10.2 (1). Per 1.10.2 (3), are we required to provide reference contacts for all 30+ states where we're licensed/certified/contracted to provide external reviews?	Please provide 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references, will be sufficient.
7	2	11	What is your criteria for extension? How much advance notice is the contracted company given if it is or isn't extended?	1) An extension is based solely on satisfactory performance of the contracted vendor. 2) If performance is satisfactory, the amended contract will proceed through DOM's internal review process before being submitted to our regulatory board, which requires a minimum one-month approval period. If performance is unsatisfactory, DOM will follow the specific termination clauses outlined in the contract.
8	2.1.1.1	11	Are there specific data integration requirements, API protocols or established DOM systems (e.g., for case intake or claims processing) that the Contractor's secured portal must interface with, or is the Contractor expected to provide a fully independent standalone system for all case management and data exchange?	The Contractor is expected to provide an independent, standalone system that DOM personnel will utilize for all case management and data exchange.
9	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide an average number of reviews to be performed per month?	A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.
10	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide a total volume of cases performed in 2024? Total volume of hearings?	A month to month estimate of reviews has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

11	2.1.1.2	12	It is stated "*includes a copy* of any and all medical criteria or clinical guidelines..." Can you elaborate what the expectation is for "including a copy?"	DOM Appeals will give you a policy to review to uphold or overturn the managed care organizations' denials. If you have any additional references that you utilized in making the determination, DOM Appeals would like those listed and on hand in case of a hearing. Our priority is that the policy and criteria provided from the managed care organization is applied properly to the medical case.
12	2.1.1.2	11	Can the DOM provide bidders with a sample of a determination or a sample format expected for a determination?	Yes, A sample format will be provided with Amendment 1, Questions and Answers.
13	2.1.1.3	11	Section 2.1.1.3 states that copies or active links to referenced documents must be incuded with recommendations. Many clinical references are proprietary, require subscripions, and cannot legally be redistributed. Will DOM allow venders to cite these resources without providing full copies due to copyright and royalty restrictions?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
14	2.1.1.4	11	If active links lead to subscription based resources that DOM staff cannot access without a license, will DOM consider alternative documentation methods?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
15	2.1.1.5	11	In situations that extention on the submission deadline is needed, can extensions be granted? If so, what is the length of extension?	Yes, an extension may be granted when necessary; however, such instances are expected to be rare. In general, no more than an additional week should be needed. All determinations are expected to be submitted in a timely manner.
16	2.1.1.5 and 2.1.1.6		What is the historial annual volume of completed reviews by turnaround time? (ie: standard vs expedited).	There are typically only 2-4 expedited requests per year.

17	2.1.1.7	12	Please provide an estimate on the number of telephonic hearings per year and how many there were in 2024 and 2025.	An estimate of review requests vs hearings has been included with Appendix 2 -Historical Data as part of Amendment 1, Questions and Answers.
18	2.1.1.8	12	Please clarify what DOM defines as the "appropriate training by DOM staff" referenced in section 2.1.1.8. What training content is included?	The IFB incorrectly stated that DOM Appeals would conduct training for the Medical Reviewers. This was an error and shall be corrected in Amendment 2. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include: • Appeals and Hearing processes and de corum • Requirements for timely and efficient reviews, including flexibility in scheduling • Confidentiality and HIPAA compliance.
19	2.1.1.8	12	How long does the required DOM training take to complete, and what is the method of delivery?	See answer to number 18.

20	2.1.1.8	12	Given that our reviewers are all active clinical practices and may not always be available at the exact hearing times requested- especially when hearings are scheduled on short notice- will DOM allow reasonable scheduling flexability?	Yes. DOM will make reasonable efforts to accommodate scheduling needs; however, clinical reviewers should maintain sufficient flexibility to ensure hearings are completed in a timely manner. Federal regulations require that beneficiary hearings be concluded within 90 days of receipt by the Office of Appeals, and scheduling must support compliance with these requirements.
21	2.1.1.9	12	Section 2.1.1.9 requires the Contractor to provide a certified biller/coder's review upon request from the Office of Appeals. Our organization performs coding reviews but not billing reviews. Will DOM confirm whether billing review is a mandatory requirement for this contract, or if coding-only reviews are acceptable?	Yes, a certified biller/coder review is required on cases where a specialized biller/coder review is necessary.
22	2.1.1.11	12	What is the formal, written process for obtaining "prior approval" from the Office of Appeals to extend a deadline?	Requests for prior approval must be submitted by email to DOM's Appeal Contact Person. Any such requests must be made promptly, as timeliness in submitting determinations is essential.
23	2.2	12	What are the average frequency and length of telephonic hearings?	The length of the hearings are typically 1 to 1.5 hours with some lasting up to 3 hours on a rare occasion. A medical reviewer may provide the statement and be examined and does not have to attend the full hearing. A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

24	2.2	12	Are all Medical Providers who participate on this contract expected to complete the DOM training for hearings? What is the length of the training, and how is it conducted? Also, can the training be done at any time?	See answer to number 18.
25	2.3	14	What components of this contract require travel, if any?	Travel is not required. All hearings are conducted by telephonic call-in, with video hearings occurring only in very rare occurrence.
26	2.3	14	Will medical providers and/or staff be required to travel to Mississippi or elsewhere for any reason?	See answer to number 25.
27	2.3	14	If DOM requires travel to be included, can DOM clarify typical travel expectations and historical frequency of required in-person attendance?	See answer to number 25.
28	2.3	14	Will DOM allow virtual participation in place of in-person travel when appropriate?	See answer to number 25.
29	3.4	16	What is the current incumbent pricing?	See answer to number 1.
30	Attachment B - Bid Form	25	What are the hourly rates of the current vendor?	See answer to number 1.

31	Attachment B – Bid Form Certifications #5	26	Can the Division confirm what "applicable licenses" will be necessary for the bidder to have or secure? For example: an Independent Review Organization (IRO) license from the Mississippi Department of Insurance. And does this include any accreditations or certifications, such as URAC?	Attachment B - Bid Form Certification #5 refers to applicable licensed and certified personnel who are qualified to perform the duties required under the IFB. For the organization, DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, accreditation by NCQA for Utilization Management is preferred but not required. Amendment 2, will amend this language.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment. This Amendment must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #1 Acknowledged:

Theresa Garcia

Digitally signed by: Theresa Garcia
DN: CN = Theresa Garcia email = Theresa.Garcia@mcmdllc.com C = US O = MCMC Services OU = MCMC Services
Date: 2025.12.19 02:12:48 -08'00'

Signature

Theresa Garcia

Printed Name

Senior Account Manager

Title

MCMC Services, LLC

Entity Name

[END OF RESPONSE]

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

Amendment #2 - Clarifications

External Medical Review Consulting

IFB #20251031 RFX #3160007625

Date: November 26, 2025

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

2.1.1.8 (**General Requirements**) Medical Providers must be flexible in their availability for hearings related to the case. ~~Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings.~~ Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include:

- Appeals and Hearing processes and decorum
- Requirements for timely and efficient reviews, including flexibility in scheduling
- Confidentiality and HIPAA compliance.

1.10.2 (3) References

From the list of engagements provided at **IFB Section 1.10.2 (1)**, the Bidder shall provide reference contacts for ~~all engagements .~~6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.

1.10.2 (2) Bidder Licenses/Certifications

Medical Providers

Bidder must warrant that all physicians (the "Medical Providers") providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Each Medical Provider shall be licensed to practice in Mississippi. If a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation. The Bidder must provide a list of all participating Medical Providers and attest that they meet these licensure and board certification requirements. The Bidder must also attest that the Medical Providers have the relevant experience in the specialty and detail the number of years of experience. While DOM prefers at

a Medical Provider has no prior experience in the specialty area, the Bidder should state 'None' or '0' years for that provider.

Bidder Company

DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, an accreditation by NCQA for Utilization Management is preferred but not required.

The bid due date remains unchanged: December 12, 2025, by 2:00 p.m.

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #2 Acknowledged:

Theresa Garcia Digitally signed by: Theresa Garcia DN: CN = Theresa Garcia email = Theresa.Garcia@mcmclic.com C = US O = MCMC Services OU = MCMC Services Date: 2025.12.19 02:23:03 -08'00'

Signature

Theresa Garcia

Printed Name

Senior Account Manager

Title

MCMC Services, LLC

Entity Name

[END OF RESPONSE]

IFB # 20251031,

MCMC Services LLC

Amendment #3

Clarification Change to Bid Due Date

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #3 – CLARIFICATION

CHANGE TO BID DUE DATE

EXTERNAL MEDICAL REVIEW CONSULTING

IFB #20251031 RFX #3160007625

Date: December 9, 2025

Due to an administrative error, the following sections of IFB #20251031 have been amended.

1. COVER PAGE is modified as follows: Bid Response Deadline**:** Friday, December ~~12~~19, 2025, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~12/12/2025~~ 12/19/2025	Bid Deadline (by 2:00 p.m.)
1/02/2025	Anticipated Date of Notice of Intent to Award
2/04/2026	Public Procurement Review Board meeting date (proposed)
2/09/2026	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM

5. Attachment H – Bidder's IFB Response Checklist is modified as follows:

BIDDER NAME:			✓	**N/A**
MANDATORY LETTER OF INTENT				
1		IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***		
SHAREPOINT REGISTRATION VERIFICATION				
2		Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)		
BID SUBMISSION PACKET **Due Date Friday, December ~~12~~19, 2025, by 2:00 p.m. CST**				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required)		
	b	Attachment B – Bid Form (Signature Required)		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.		
	d	Attachment C – Contract Draft Acknowledgement		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.		
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December ~~12~~19, 2025, by 2:00 p.m. CST.***		

MISSISSIPPI DIVISION OF MEDICAID

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #3 Acknowledged:

Sarah Gorzny

Digitally signed by: Sarah Gorzny
DN: CN = Sarah Gorzny email = sarah.gorzny@mcmcllc.com
C = US O = MCMC Services, LLC OU = General Manager
Date: 2025.12.09 13:33:12 -06'00'

Signature

Printed Name

Title

MCMC Services, LLC

Entity Name

[END OF RESPONSE]

MISSISSIPPI DIVISION OF MEDICAID

Amendment #6 Additional Questions and Answers Issued: January 5, 2026

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response
1	Attachment A and Section 3.4.14	Page 1 and IFB Page 19	Attachment A states: "A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site. File Name: BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING, and IFB page 19 (Section 3.4.14) states: The one combined searchable PDF file should be uploaded in SharePoint with the file name: IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING." **Question:** Which requirement is correct? Should the file name of the one-combined searchable PDF file include the IFB number or not?	Yes. The file name of the one combined searchable PDF file must include the IFB number when submitted to the SharePoint site. Bidders should follow the naming convention outlined in IFB page 19, Section 3.4.14. IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING.
2	Amendment 4 Revised Attachment H	Page 3 3a	3a states: "A cover page is required for each Attachment subsection." **Question:** The word *subsection* is unclear. Do you mean that before each Attachment, you want the bidder to include a cover page? If so, should the bidder include a cover page for Attachment A or just start the proposal with Attachment A (as the Bid Cover Sheet), and then create a cover page for Attachments B through I?	Yes. Attachments A through I are the Attachment subsections referenced in the IFB. Bidders must include a cover page for Attachment A and each attachment thereafter.
3	Amendment 4 Revised Attachment H	Page 3 3c	The first bullet of 3c states: "For the Minimum Qualifications, the *header of each page* should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement." **Question:** Is the Minimum Qualifications section the only section in which the DOM requires specific wording to be stated in the header of each page? Please clarify if you want specific wording in the header of each page for **any other section** of the proposal. That is, for all the other Attachments, does DOM want the headers to be blank (no logos, no wording)?	Yes. The Minimum Qualifications section is the only section that requires a header identifying the specific element to which the bidder is responding. All other sections of the proposal will include a cover page, and no specific header wording is required for other sections of the proposal.
4	Amendment 4 Revised Attachment H	Page 3 3c	The second bullet of 3c states: "For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review)." **Question:** Do you want the bidder to include a copy of its URAC certificate in this section?	URAC Accreditation is required; however, submission of the URAC certificate is not required at the time of bid response. DOM may request documentation of accreditation at a later time.
5	N/A	N/A	**Question:** Should the bidder change the submission date from December 12, 2025, to January 16, 2026, on any signed documents that are included with its proposal?	Yes. DOM issued Amendment #4, which established a revised bid submission deadline of January 16, 2026. Bidders must ensure that all proposal documents requiring signatures reflect this updated submission date.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.
This Amendment #6 must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #6 Acknowledged:

Sarah Gorzny
Signature
Sarah Gorzny
Printed Name
General Manager
Title
MCMC Services, LLC
Entity Name

IFB# 20251031

iMPROVE HEALTH

ATTACHMENT A: BID COVER SHEET

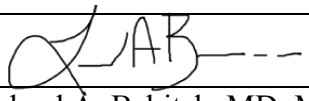
Attachment A – Bid Cover Sheet IFB #: 20251031

DOM is seeking to establish a contract for External Medical Review Consulting.
Bids are to be submitted **Friday, January 16, 2026,** on or before **2:00 p.m., CST**.

Bid Cover Sheet is to be used to accompany your electronic file when submitting bid via SharePoint.

A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site.

File Name: **BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING**

Company Name:	Michigan Peer Review Organization (dba iMPROve Health)
Company Address:	625 Kenmoor Ave. SE Suite 350 PMB 47995 Grand Rapids, Michigan 49546-2395 **Note:** This is a mailing address only. iMPROve Health is a fully remote organization.
Authorized Signature:	
Name and Title:	Leland A. Babitch, MD, MBA
Phone Number:	248-465-7400
Email address:	lbabitch@improve.health
***MAGIC Supplier #**	We do not have a MAGIC Supplier number. If awarded the contract, we will register in MAGIC.

*If Bidder does not have a MAGIC Supplier number, Bidder can register in MAGIC after award is made to Contractor.

IFB# 20251031

iMPROVE HEALTH

ATTACHMENT B: BID FORM

Attachment B - Bid Form

GENERAL

Compensation for services shall be in the form of a firm fixed-rate agreement. Through submission of this form and accompanying **Addendum 1: Minimum Qualifications**, the Bidder certifies the following:

1. The Bidder shall accept an award made as a result of the submission.
2. The Bidder is registered to do business in the State of Mississippi as prescribed by the Mississippi Secretary of State, if not already registered Bidder will do so within five (5) business days of being offered an award.
3. The Bidder has not been sanctioned by a state or federal government within the last 10 years.
4. The Bidder has a minimum of five (5) years of experience in contractual services, providing the type of services described in this IFB.
5. The Bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation and is able to provide each required component and deliverable as detailed in the Scope of Services.

The services described in the Scope of Services require Bidders to offer an all-inclusive, fully burdened hourly rate. This rate must encompass all costs of performance, including but not limited to, labor, overhead, administrative expenses, and profit. To assist in determining this pricing, historical usage data has been provided in Appendix 2.

The total number of hours for this contract is not fixed and will vary based on the State's needs. For evaluation purposes, DOM will calculate the average cost across all five years to determine the lowest bid.

The anticipated contract term for the required services is February 9, 2026, through February 8, 2029, with one optional two-year renewal, at the discretion of DOM.

BID FORM – EXTERNAL MEDICAL REVIEW CONSULTING IFB #20251031	
BIDDER NAME: Michigan Peer Review Organization (dba iMPROve Health)	
Service Description: Appeal Review, Hearing and Report Preparation	**Hourly Rate**
Term: Year One	$275
Term: Year Two	$275
Term: Year Three	$290
Optional Term: Year Four	$290
Optional Term: Year Five	$290

*Bidders shall **not** include any additional charges or additional line items in this bid form. Any additional charges included on a bid form may result in the bid being deemed non-responsive, and the bid will thereby be rejected.*

CERTIFICATIONS:

By signing below, the Company Representative certifies that he/she has authority to bind the company and further acknowledges on behalf of the company:

1. That he/she has thoroughly read and understands this IFB and the attachments thereto;
2. That the company meets all requirements and acknowledges all certifications contained in this IFB and the attachments thereto;
3. That the company agrees to all provisions of this IFB and the attachments thereto, including, but not limited to, the draft contract attached to this IFB, which contains the Required and Optional Clauses as required by the *Mississippi Public Procurement Review Board (PPRB) Office of Personal Service Contract Review (OPSCR) Rules and Regulations*;
4. That the company will perform, without delay, the services required at the prices quoted in this **Attachment B;**
5. That the company has, or will secure, at its own expense, applicable licensed and certified personnel or personnel with requisite credentials who shall be qualified to perform the duties required to be performed under this IFB; and
6. That the company can and will meet all required laws, regulations, and/or procedures related to services and represents that it is licensed, certified and possesses the requisite credentials to perform these services, if required. Further, if the company is the successful bidder and the material, equipment, etc., delivered is subsequently found to be deficient pursuant to any federal and state laws and regulations in effect on the date of delivery, all costs necessary to bring the material, equipment, etc. into compliance with aforementioned requirements shall be borne solely by Company.

NON-DEBARMENT:

By submitting a bid, the Bidder certifies that it is not currently debarred, suspended, or otherwise excluded from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government and that it is not an agent of a person or entity that is currently debarred from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government.

CERTIFICATION OF INDEPENDENT PRICE DETERMINATION:

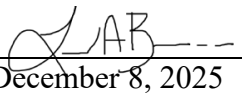
By submitting a bid, the Bidder certifies that the prices submitted in response to the solicitation have been arrived at independently and without any consultation, communication, or agreement with any other bidder or competitor for the purpose of restricting competition.

BIDDER'S REPRESENTATION REGARDING CONTINGENT FEES:

By responding to the solicitation, Bidder represents that it has not retained any person or agency on a percentage, commission, or other contingent arrangement to secure this contract. If Bidder cannot make such a representation, a full and complete explanation shall be submitted, in writing, with the bid.

REPRESENTATION REGARDING GRATUITIES:

The Bidder represents that is has not, is not, and will not offer, give, or agree to give any employee or former employee of DOM a gratuity or offer of employment in connection with any approval, disapproval, recommendation, development, or any other action or decision related to the solicitation and resulting contract. The Bidder further represents that no employee or former employee of DOM has or is soliciting, demanding, accepting, or agreeing to accept a gratuity or offer of employment for the reasons previously stated; any such action by an employee or former employee in the future, if any, will be rejected by contractor. The Bidder further represents that is it in compliance with the Mississippi Code Annotated §§ 25-4-101 through 25-4-121 and has not solicited any employee or former employee to act in violation of said law.

Signature:	
Date:	December 8, 2025
Name and Title:	Leland A. Babitch, MD, MBA
Company Name:	iMPROve Health

Note: Failure to sign the bid form may result in the bid being rejected as non-responsive. Modifications or additions to any portion of this bid document may be cause for rejection of the bid.

In addition to providing the above information, please answer the following questions regarding your company. The Bidder must answer questions below in order for their bid to be considered.

1	What year was your company started?	**1984**	
2	Please provide the physical location and mailing address of your company's home office, principal place of business and place of incorporation.	Physical Location	**None. We are a fully remote organization.**
		Mailing Address	**625 Kenmoor Ave. SE Suite 350 PMB 47995 Grand Rapids, MI 49546**
		Principal Place of Business	**See notation above regarding Physical Location.**
		Place of Incorporation	**Michigan**
3	Company structure/organization to include any parent or subsidiary companies. As applicable, please describe the role of any parent and/or subsidiary company in providing the services requested within this IFB.	**iMPROve Health is a 501(c)(3) non-profit organization. We operate independently. We do not have any parent or subsidiary companies.**	
		No	Yes, please explain.

4	Is your company currently for sale or involved in any transaction to expand or become acquired by another business entity during either this solicitation or the resultant contract period? If "yes", please provide information regarding such a transaction as it relates to your Company's organization structure (post transaction) and your Company's ability to continue delivery of services (post transaction) as required herein.		**No. iMPROve Health is not for sale or involved in any transaction to expand or become acquired by another business entity during either this solicitation or the resultant contract period.**
5	If your company is not physically located in Mississippi, how will you provide the services set forth in the IFB?	**iMPROve Health has been providing external medical review services for many years and continues to do so successfully as a fully remote organization. A physical address is not required to perform these reviews, as our secure, virtual processes ensure the same level of quality, confidentiality, and efficiency our clients have always relied on.**	
6	List all licenses, certifications or permits your company possesses that are applicable to performing the services required in this IFB.	**Since 2002, iMPROve Health has proudly maintained full accreditation by URAC as an Independent Review Organization: Comprehensive Review. Our current accreditation remains valid through November 1, 2028. A copy of our certificate is available upon request.**	

IFB# 20251031

iMPROVe Health

Attachment B: Addendum 1

ADDENDUM 1: MINIMUM QUALIFICATIONS, 1.10.2 (1) - BIDDER EXPERIENCE REQUIREMENT

iMPROve Health hereby attests that it meets and exceeds the Bidder Experience Requirement. We have more than five years of experience providing independent external medical review services within the administrative appeals process for healthcare organizations, as it relates to the services requested in this IFB.

For more than four decades, iMPROve Health has delivered independent external medical review services across federal, state, and commercial programs, including Medicare and Medicaid. This experience includes supporting administrative appeals, State Fair Hearings, and State Administrative Hearings through independent medical necessity determinations, claims adverse determination reviews, utilization review, and peer review services.

The table below provides a list of past and current engagements for which we performed services similar in nature, scope, and complexity to those requested in this IFB. These engagements are provided to demonstrate compliance with the Bidder Experience Requirement. Each listed engagement involved independent external medical review services conducted in support of an administrative appeals process for a healthcare organization.

CLIENT	DESCRIPTION OF SERVICE	CONTRACT START	CONTRACT END
Alaska Division of Insurance	Provide independent medical review	10/2018	12/2026
Arizona Department of Administration	Provide independent medical review	06/2022	12/2026
Baraga County Memorial Hospital	Provide medical peer review services	12/2021	Ongoing
Big Horn Hospital Association	Provide Ongoing Professional Practice Evaluation (OPPE) services via standard-of-care medical determinations along with consultation, provider education, utilization review, and peer review	03/2018	Ongoing
Connecticut Insurance Department	Provide independent medical review	10/2024	12/2027

Client	Description of Service	Contract Start	Contract End
Detroit Wayne Integrated Health Network (DWIHN)	Provide independent medical review	07/2017	03/2027
Dickinson County Healthcare System	Provide OPPE services via standard-of-care medical determinations	12/2021	Ongoing
Eaton Rapids Medical Center	Provide FPPE services via standard-of-care medical determinations	10/2018	Ongoing
Hawaii Department of Commerce and Consumer Affairs Division	Provide independent medical review	03/2023	02/2026
Hayes Green Beach Memorial Hospital	Provide FPPE services via standard-of-care medical determinations	11/2018	Ongoing
Maine Department of Professional and Financial Regulation	Provide independent medical services and facilitate appeal hearings	07/2023	06/2026
Michigan Department of Health and Human Services - PACER	Provide statewide utilization review services for PACER and selected Durable Medical Equipment (DME) and medical supplies	01/1988	11/2026
Michigan Department of Insurance and Financial Services	Provide independent medical and utilization reviews	03/2019	02/2026
Michigan State University Healthcare, Inc.	Provide medical peer review services including quality assurance/ improvement and standard of care determinations	01/2022	Ongoing
Minnesota Department of Administration	Provide independent medical review and independent billing/policy review of health claim denials	01/2020	05/2027
Montana Commissioner of Securities and Insurance, Office of State Auditor	Provide independent medical review	01/2016	12/2026
Munising Memorial Hospital	Provide FPPE services via standard-of-care medical determinations	06/2021	Ongoing
Munson Healthcare, Cadillac Hospital	Provide FPPE services via standard-of-care medical determinations	04/2018	Ongoing
Munson Healthcare, Manistee Hospital	Provide FPPE services via standard-of-care medical determinations	12/2021	Ongoing

CLIENT	DESCRIPTION OF SERVICE	CONTRACT START	CONTRACT END
Nacogdoches Memorial Hospital	Provide utilization review services via medical consultation	5/9/2019	Ongoing
New York Engineers Health Fund	Provide independent medical review	06/2022	Ongoing
North Carolina Department of Insurance	Provide independent medical review	07/2016	06/2027
North Dakota Insurance Department	Provide independent medical review	05/2024	04/2026
Scheurer Hospital	Provide OPPE/FPPE via standard of care medical determinations	04/2022	Ongoing
Sheridan Community Hospital	Provide FPPE via standard-of-care medical determinations.	01/2022	Ongoing
Virginia (Commonwealth of)	Provide independent medical review	07/2017	06/2027

[END OF RESPONSE]

ADDENDUM 1: MINIMUM QUALIFICATIONS, 1.10.2 (2) - BIDDER LICENSES & CERTIFICATIONS

LICENSES

iMPROve Health hereby attests that all physicians (the "Medical Providers") proposed to provide medical recommendations and/or participate in hearings under this engagement meet all licensure, board certification, and experience requirements outlined by the Division of Medicaid (DOM).

All Medical Providers hold current, valid licenses and applicable board certifications appropriate to their respective specialties, and we warrant that these credentials will be maintained in good standing throughout the full term of the engagement. In the event that a specialty physician does not hold a Mississippi license, we attest that a Mississippi-licensed physician will review and formally sign off on the medical recommendation in accordance with DOM requirements.

iMPROve Health maintains a rigorous, URAC-aligned credentialing and ongoing verification process to ensure continuous compliance with all professional, regulatory, and contractual standards.

The table below provides a complete list of proposed Medical Providers and attests, for each provider, to:

- Relevant specialty area,
- Board certification,
- Number of years of experience in the applicable specialty.

All proposed Medical Providers possess more than five years of relevant clinical experience in their respective specialty areas. If a Medical Provider had no prior experience in a specialty area, we denoted "None" or "0" years of experience for that provider, consistent with DOM requirements; however, no such instances apply to the proposed team.

Peer Reviewers

iMPROve Health Peer Reviewers					
Last Name	**First Name**	**Degree**	**Board Specialty**	**Related Specialty Certification Status**	**Years of Experience**
Aggrey	Gloria	MD	Infectious Disease	Certified	5+
Ahmed	Tarig	MD	Hematology/Oncology	Certified	5+
Al Zoubi	Moamen	MD	Internal Medicine	Certified	5+
Albovias	Jay	MD	Radiology, Diagnostic	Certified	5+
Alhosh	Rabea	MD	Pediatric Gastroenterology	Certified	5+
Ali	Ashraf	MD	Psychiatry	Certified	5+
Allen	Sandra	MD	Internal Medicine		5+
Al-Mudallal	Dalia	MD	Gastroenterology	Certified	5+
Amer	Ahdi	MD	Pediatric	Certified	5+
Amrock	Levana	MD	Anesthesiology	Certified	5+
Anders	Gabriel	DO	Pulmonary	Certified	5+
Babich	Jay	MD	Gastroenterology	Certified	5+
Babitch	Leland	MD	Clinical Informatics	Certified	5+
Babler	Heather	DPT	Physical Therapy		5+
Baker	Emma	RN	Emergency Medicine		5+
Baker	Mary	MD	Critical Care Medicine	Certified	5+
Bandi	Gaurav	MD	Urology	Certified	5+
Baracco	Rossana	MD	Pediatric Nephrology	Certified	5+
Barnes	Sara	MD	Emergency Medicine	Certified	5+
Bellman	Betty	MD	Dermatology	Certified	5+
Beneson	David	DPM	Podiatry	Certified	5+

iMPROve Health Peer Reviewers					
Berlin	Evan	MD	Physical Medicine & Rehabilitation	Certified	5+
Bertram	Heidi	MD	Anatomic & Clinical Pathology	Certified	5+
Bethin	Kathleen	MD	Pediatric Endocrinology	Certified	5+
Beyah	Charlene	JD, RN	Arbiter		5+
Bhatt	Rajat	MD	Rheumatology	Certified	5+
Bille	Brian	MD	Orthopaedic Surgery		5+
Blazick	Michael	JD	Arbiter		5+
Bodnar	Timothy	MD	Endocrinology & Metabolism	Certified	5+
Boles	Edgar	CRNA	Anesthesiology	Certified	5+
Bonilla	Diego	MD	Internal Medicine	Certified	5+
Bonner Millar	Lara	MD	Radiation oncology		5+
Bouhairie	Victoria	MD	Internal Medicine		5+
Boumansour	Erin	NP	Nurse Practitioner		5+
Bowe	Kelly	RN	Emergency Medicine		5+
Boyd	Clayton	OD	Optometry		5+
Brady	Kristin	RN	Critical Care Medicine		5+
Bray Snyder	Kelly	JD	Arbiter		5+
Bright	Justin	MD	Emergency Medicine	Certified	5+
Britt	Christopher	MD	Otolaryngology	Certified	5+
Broomes	Stephen	MD	Internal Medicine	Certified	5+
Brumberg	Robert	DO	Vascular surgery	Certified	5+
Bruner	Dedan	JD	Arbiter		5+
Bupp	Caleb	MD	Medical Genetics	Certified	5+
Burkett	Elizabeth	JD, RN, MPH	Health Care Law		5+
Bussey	Schvon	FNP	Psychiatric Mental Health NP	Certified	5+
Caison-Sorey	Thelma	MD	Pediatric		5+

iMPROve Health Peer Reviewers					
Callard	Jeffrey	PA	Physician Assistant		5+
Cappa	Ryan	MD	Pediatric Neurology		5+
Caudill	Christal	JD	Arbiter		5+
Centini	Shelley	JD	Arbiter		5+
Chace	Carol	RN	Hematology/Oncology		5+
Check	Tammy	FNP	Family Medicine	Certified	5+
Cheema	Anjum	MD	Ophthalmology	Certified	5+
Cheema	Faiqa	MD	Infectious Disease	Certified	5+
Chopra	Rajiv	MD	Diagnostic Radiology	Certified	5+
Chu	Roland	MD	Pediatric Hematology/Oncology	Certified	5+
Cobb	Kaycie	MD	Internal Medicine		5+
Cole	Oluremi	NP	Psychiatric Mental Health NP		5+
Cooper	Aharon	MD	Emergency Medicine	Certified	5+
Cooper	Ashley	SLP	Speech Language Pathology	Certified	5+
Corrigan	Jonathan	PA	Physician Assistant	Certified	5+
Cox	Beverly	PsyD	Mental Health		5+
Cronin	Lynn	MD	Internal Medicine	Certified	5+
Dalawari	Jasdeep	MD	Internal Medicine	Certified	5+
Daou	Nadine	FNP	Nurse Practitioner	Certified	5+
Darby	Nicole	RN	Medical/Surgical		5+
Davis	Dawn	MD	Family Medicine	Certified	5+
Davis	Kortney	JD	Arbiter		5+
Davoudzadeh	Natan	MD	Urology	Certified	5+
Dean	Nannette	JD	Arbiter		5+
Deguia	Amapuri	MD	Geriatrics	Certified	5+
Deleon	Randall	MD	Anesthesiology	Certified	5+

iMPROve Health Peer Reviewers					
DeWall	Michael	DO	Pathology	Certified	5+
Dishroon	Bonnie	NP	Family Medicine	Certified	5+
Dooley	Victoria	MD	Family Medicine	Certified	5+
Dopgima	Igxtelle	JD	Arbiter		5+
Downey-Biechler	Christina	DO	Family Medicine/OT	Certified	5+
Dua	Renee	MD	Internal Medicine	Certified	5+
Dwarica	Denicia	MD	Obstetrics & Gynecology	Certified	5+
Ehsan	Amirhesam	MD	Orthopedic Surgery	Certified	5+
Elkind	Scott	JD	Arbiter		5+
Eller	Linda	DO	Family Medicine/OT		5+
Ellsworth	Jennifer	RN	IV Infusion		5+
Elrod	Sean	NP	NP (Psychiatry)	Certified	5+
Eltahir	Aiman	DPT	Physical Therapy DPT		5+
Engers	Drew	MD	Infectious Disease	Certified	5+
Erdos	Brandon	MD	Psychiatry		5+
Erinne	Ikenna	MD	Cardiovascular Disease	Certified	5+
Ernst	Jordan	DPM	Podiatry	Certified	5+
Esco	Miechia	MD	Vascular surgery	Certified	5+
Eshak	Christine	OD	Optometry		5+
Evanko	Jamie	PharmD	Pharmacy		5+
Fackler	Tamara	MD	Ophthalmology	Certified	5+
Farrand	Nicole	OT	Occupational Therapist	Certified	5+
Farrar	Logan	RN	Critical Care Medicine		5+
Fenton	James	MD	Thoracic & Cardiac Surgery	Certified	5+
Feth	Tammy	RN	Psychiatry - Adult and Child/Adolescent		5+

iMPROve Health Peer Reviewers					
Fetters	Lisa	NP	Adult - Geriatric NP	Certified	5+
Fike	Kerry	MD	Dermatology	Certified	5+
Findley-Knapp	Elizabeth	NP	Nurse Practitioner	Certified	5+
Finkelstein	Eric	MD	Physical Medicine and Rehab	Certified	5+
Fivenson	David	MD	Dermatology	Lifetime	5+
Flenniken	Terrill	JD	Arbiter		5+
Fogge	Michael	DDS	Orthodontics		5+
Fournier	Mark	RN	Emergency Medicine		5+
Frith	John	DO	Allergy & Immunology	Certified	5+
Galicia	Dalia	MD	Internal Medicine		5+
Gelman	Ariel	MD	Dermatology	Certified	5+
Gepp	Karin	PsyD	Psychotherapy		5+
Ghahramani	Mehrdad	MD	Cardiovascular Disease	Certified	5+
Giacomaro	Kimberly		Billing/Coding		5+
Giasi	Paul	MD	Preventive Medicine		5+
Gilbert	Falyn	DC	Chiropractic		5+
Gilman	Robert	MD, DDS	Plastic surgery	Lifetime	5+
Glauch	Nina	OD	Optometry		5+
Gouveia	Alexis	RN	Emergency Medicine		5+
Gramlick	Rene	RD	Dietary	Certified	5+
Graydus	Roshni	FNP	Family Practice	Certified	5+
Greenberg	Lawrence	DO	Internal Medicine		5+
Grigor	Laura	MD	Infectious Disease	Certified	5+
Grodman	Scott	DPM	Podiatry	Certified	5+
Gupta	Amit	MD	Critical Care Medicine	Certified	5+
Guzman	Angelica	JD	Arbiter		5+

iMPROve Health Peer Reviewers					
Haber	Corey	DO	Family Medicine	Lifetime	5+
Hall	Jennifer	PA	Physician Assistant	Certified	5+
Harris	Callandra	RN	Emergency Medicine		5+
Harris	Marissa	NP	Adult Gerontology Acute Care NP		5+
Hasaniya	Nahidh	MD	Thoracic Surgery	Certified	5+
Hedayati	Nasim	MD	Vascular surgery	Certified	5+
Hekmatdoost	Kevon	MD	Neurology	Certified	5+
Henry	Reynold	MD	Surgery	Certified	5+
Hereford	Vanessa	MD	Family Medicine	Certified	5+
Heying	Elizabeth	JD	Arbiter		5+
Hill	Aeisha	DPM	Podiatry		5+
Hoffman	Sara	RN	Pre-Operative		5+
Holloman	Carla	DO	Family Medicine	Certified	5+
Holloway	Lillian	MD	Family Medicine	Certified	5+
Horka	Kimberly	NP	Nurse Practitioner	Certified	5+
Hosseini	Nooshin	MD	Gastroenterology	Certified	5+
Hsu	Chia-Yang	MD	Gastroenterology	Certified	5+
Hunt	Justin	MD	General Surgery	Certified	5+
Hysa	Viola	MD	Physical Medicine & Rehabilitation	Certified	5+
Ishioka	Naomi	RN	IDRE		5+
Jans	Shannon	MD	Psychiatry	Certified	5+
Jewell	Emily	DO	Family Medicine	Certified	5+
Jimenez Restrepo	Alejandro	MD	Internal Medicine		5+
Johnson	Justin	DO	Internal Medicine	Certified	5+
Kaloostian	Paul	MD	Neurological Surgery	Certified	5+
Karidas	Steven	MD	Diagnostic Radiology	Certified	5+

iMPROve Health Peer Reviewers					
Kastning	Scott	PA	Physician Assistant	Certified	5+
Katzman	Steven	DO	Hospice and Palliative Care	Certified	5+
Kauffman	Rachel	RN	Medical/Surgical		5+
Kaufman	David	JD	Arbiter		5+
Kazmers	Andris	MD	Surgery	Certified	5+
Khatib	Rana	MD	Pediatric	Certified	5+
Khoury	Michael	MD	Vascular surgery		5+
King	Andre	MD	Urology		5+
King	LaQuita	MD	Cytopathology	Certified	5+
Kohen	Robert	MD	Orthopedic Surgery	Certified	5+
Koshy	Matthew	MD	Radiology		5+
Kotla	Venumadhav	MD	Hematology	Certified	5+
Krowl	Lauren	MD	Internal Medicine Hospitalist	Certified	5+
Kumar	Abhijeet	MD	Hematology/Oncology	Certified	5+
Kumar	Gunjan	MD	Anesthesiology	Certified	5+
Labella	Gennaro	MD	General Surgery	Certified	5+
Lager	Sean	MD	Orthopedic Surgery	Certified	5+
Landau	Daniel	MD	Internal Medicine	Certified	5+
Lankton	Kathryn	DO	Family Medicine		5+
Leis	Paul	DO	Internal Medicine	Certified	5+
Lekwauwa	Ruby	MD	Psychiatry		5+
Lin	Jason	MD	Neurology	Certified	5+
Liu	James	MD	Neurological Surgery		5+
Lloyd-Davidson-Tuckey	Karshibia	LPC	License Professional Counselor	Certified	5+
Lockwood	Michelle	PsyD	Mental Health		5+
Loush	Mark	LMSW	Mental Health		5+

iMPROve Health Peer Reviewers					
MacDonald	Kara	RN	Wound Care		5+
Macrae	Erin	MD	Internal Medicine	Certified	5+
Maher	Dermot	MD	Anesthesiology	Certified	5+
Mahony	Sara	MD	Ophthalmology	Certified	5+
Makrides	Lisa	MD	Pain Management	Certified	5+
Martin	Aaron	NP	Adult & Child/Adolescent Psychiatry	Certified	5+
Masood	Syed	MD	Pediatric Cardiology	Certified	5+
Massak	Mark	DO	Radiology	Certified	5+
Masse	Clementine	CRNA	Anesthesiology		5+
Mathew	Charly	LMSW	Substance Use Disorder		5+
Mathews	Simon	MD	Gastroenterology	Certified	5+
Mau	Kristin	DDS	General Dentistry		5+
McCreight	Jessica	NP	Adult- Geriatric NP		5+
McGlothin	Demetra	CRNA	Anesthesiology		5+
McGrew	Camisha	RN	Utilization Review		5+
McKee	Nathanial	DC	Chiropractic		5+
McMahan	Emily	AuD	Audiology		5+
Michel	Kendra	MD	Psychiatry	Certified	5+
Milburn	Cara	PA	Physician Assistant	Certified	5+
Miller	Peter	MD	Colon and Rectal Surgery	Certified	5+
Minnock	Christopher	MD	Orthopedic Surgery	Certified	5+
Mitchell	Erica	MD	Vascular surgery	Certified	5+
Mitchell	Tiffany	RN	Acute Care		5+
Moltz	Kathleen	MD	Pediatric Endocrinology	Certified	5+
Monterrosa	Annette	MD	Anesthesiology	Certified	5+
Moore	Mary	MD	Pediatric Rheumatology	Lifetime	5+

iMPROve Health Peer Reviewers					
Mossallam	Usamah Sam	MD	Emergency Medicine	Certified	5+
Mueller	Dale	MD	Thoracic & Cardiac Surgery		5+
Mun	Sandra	MD	Diagnostic Radiology	Certified	5+
Munoz	Denise	LMSW	ABA Therapy		5+
Murtagh	Keith	DDS	Oral & Maxillofacial Surgery	Certified	5+
Nadendla	Kavita	MD	Physical Medicine & Rehabilitation	Certified	5+
Nahas-Vigon	Jordan	MD	Internal Medicine	Certified	5+
Nasr	Samya	MD	Pediatric Pulmonology	Certified	5+
Neahring	Richard	MD	Ophthalmology	Certified	5+
Neil Knierbein	Erin	DO	Neurology w/ Special in Child Neurology	Certified	5+
Nelson	Rachel	NP	Adult- Geriatric Nurse Practitioner	Certified	5+
Nguyen	Annie	MD	Obesity Medicine	Certified	5+
Nguyen	Anthony	MD	Internal Medicine		5+
Nielsen	Jenna	LMSW	Mental Health		5+
Obeid	Chadi	MD	Nephrology	Certified	5+
Okafor	Chukwuebuka	MD	Neonatal Perinatal Medicine	Certified	5+
Olmez	Inan	MD	Neurology w/ Special in Child Neurology	Certified	5+
Olson	David	MD	Pediatric Endocrinology	Certified	5+
Ostransky	David	DO	Sleep Medicine		5+
Oyetakin	Patricia	MD	Dermatology	Certified	5+
Pandit	Ravi	MD	Ophthalmology		5+
Pappas	Kara	MD	Clinical Genetics & Genomics	Certified	5+
Parikh	Manali	PT	Physical Therapy		5+
Parva	Mehdi	MD	Minimally Invasive Gynecological Surgery	Certified	5+

iMPROve Health Peer Reviewers					
Patel	Shachi	MD	Anesthesiology	Certified	5+
Patrias	Rebecca	MD	Internal Medicine	Lifetime	5+
Pevner	Barry	MD	Internal Medicine	Certified	5+
Pham	Leslie	MD	Ophthalmology	Certified	5+
Pickett Baisden	Tina	MD	Dermatology		5+
Pieh	Nyota	MD	Psychiatry	Certified	5+
Piekarz	Nicole	RN	Emergency Medicine		5+
Pierce	Ciara	LMSW	Mental Health		5+
Pinn-Bingham	Melva	MD	Radiation Oncology	Certified	5+
Pinto	Mark	MD	Orthopedic Surgery	Certified	5+
Pitcher	Elizabeth	OT	Occupational Therapist	Certified	5+
Plencner	Lydia	RN	Emergency Medicine		5+
Pomerantz	Benjamin	MD	Interventional radiology	Certified	5+
Pressel	David	MD	Pediatrics		5+
Pritchard	Amanda	MD	Medical Genetics	Certified	5+
Qadir	Fariha	MD	Psychiatry	Certified	5+
Qureshi	Mansoor	MD	Interventional Cardiology	Certified	5+
Raichle	Timothy	MD	Obstetrics & Gynecology	Certified	5+
Reichert	Bryan	MD	Family Medicine	Certified	5+
Reiff	Kelley	LMSW	Behavioral Therapy		5+
Reue	Matthew	JD	Arbiter		5+
Riechmann	Lisa	FNP	Family Medicine	Certified	5+
Rivera	Angeline	MA	Phlebotomy		5+
Robertson	Paul	JD	Arbiter		5+
Rodino	William	MD	Vascular surgery	Certified	5+
Romero-Medina	Marialba	MD	Psychiatry	Certified	5+

iMPROve Health Peer Reviewers					
Rose	Brandi	FNP	Family Nurse Practitioner		5+
Rosenberg	Bradley	MD	Urology	Certified	5+
Rosenberg	Ilyse	DO	Psychiatry		5+
Rubin	David	MD	Neurosurgery	Certified	5+
Rutter	Tabitha	NP	Psychiatric Mental Health NP	Certified	5+
Saba	Waddah	DO	Internal Medicine		5+
Saha	Dalia	MD	Internal Medicine	Certified	5+
Sahijdak	Walter	MD	Radiation oncology	Certified	5+
Sahul	Zakir	MD	Cardiovascular Disease	Certified	5+
Sanford	Tiffany	MD	Internal Medicine	Certified	5+
Schachter	Howard	JD	Arbiter		5+
Schloss	Lawrence	MD	Forensic Psychiatry	Certified	5+
Schmidt	Morgan	RN	Wound Care & Ostomy	Certified	5+
Sehgal	Rajeev	DPM	Podiatry	Certified	5+
Selik	Esther	FNP	Family Medicine	Certified	5+
Selvam	Naveen	MD	Radiology, Diagnostic	Certified	5+
Shah	Shefali	MD	Otolaryngology – Head/Neck Surgery	Certified	5+
Shah	Trushil	MD	Critical Care Medicine	Certified	5+
Shah	Una	MD	Dermatology	Certified	5+
Shaheen	Jennifer	OT	Occupational Therapist	Certified	5+
Shakir	Abdur	MD	Internal Medicine	Certified	5+
Shank	Holly	PA	OB/GYN	Certified	5+
Sharma	Neha	MD	Radiation oncology	Certified	5+
Siddiqui	Suleman	DO	Internal Medicine	Certified	5+
Silber	Molly	MD	Pediatric	Certified	5+
Simon	Robert	MD	Physical Medicine & Rehabilitation	Lifetime	5+

iMPROve Health Peer Reviewers					
Singapuri	Mohammed	MD	Nephrology	Certified	5+
Skiba	Andrea	RN	Critical Care Medicine		5+
Skiba	James	MD	Critical Care Medicine	Certified	5+
Smith	Kyle	MD	Neurosurgery		5+
Sohail	Zohaib	MD	Addiction Medicine	Certified	5+
Sommer	Chelsea	RN	Emergency Medicine		5+
Sondheimer	James	MD	Nephrology	Lifetime	5+
Sorel	Albina	RN	Medical/Surgical		5+
Soronen	Cheryl	MD	Internal Medicine	Certified	5+
Sparks	Ian	PA	Physician Assistant	Certified	5+
Spasic	Laura	NP	Nurse Practitioner Primary Care	Certified	5+
Speck	Karen	MD	Pediatric Surgery	Certified	5+
Spicher	Sarah	RN	Critical Care Medicine		5+
Spiroff	Christopher	JD	Arbiter		5+
Stahl	Robert	NP	Adult- Geriatric NP		5+
Stanek	Sheila	DO	Family Medicine		5+
Stewart	Alexandra	AuD	Audiology		5+
Stickler	Kimberly	RN	Medical Record Abstraction		5+
Stoddart	Stephanie	DDS	Dentistry - General		5+
Stokes	Ashley	RN	Utilization Review		5+
Stowman	Stephanie	PsyD	Clinical Psychology	Certified	5+
Striker	Prachi	MD	Adult & Child/Adolescent Psychiatry	Certified	5+
Surrock	Lauren	PA	Physician Assistant	Certified	5+
Suru	Mihaela	MD	Internal Medicine	Certified	5+
Sutherland	Sarah	RN	Hematology/Oncology		5+
Suthrave	Aswani	MD	Internal Medicine	Certified	5+

iMPROve Health Peer Reviewers					
Szalai	Imre	JD	Arbiter		5+
Tai	Ming	PharmD	Pharmacy		5+
Talsma	Samuel	MD	Anesthesiology	Lifetime	5+
Taylor	Danette	DO	Neurology	Certified	5+
Taylor	Jamila	MD	Family Medicine	Certified	5+
Therson	Danielle	PsyD	Clinical Psychology		5+
Thompson	Stephany	LMSW	Behavioral Therapy		5+
Todd Hesham	Hosai	MD	Otolaryngology	Certified	5+
Tontz	William	MD	Orthopaedic Surgery	Certified	5+
Trajkovski	Meri	NP	Adult - Geriatric NP	Certified	5+
Tran	Jiaxin	MD	Clinical Informatics	Certified	5+
Treese	Megan	RD	Dietary		5+
Trice	DeJarnette	JD	Arbiter		5+
Trivedi	Deep	MD	Urology	Certified	5+
Tu	Michael	DO	Family Medicine	Certified	5+
Tu	Santine	FNP	Family Nurse Practitioner	Certified	5+
Tucker	Hadar	MD	Emergency Medicine	Certified	5+
Turner-Baldwin	Tiffany	LMSW	Mental Health		5+
Udeshi	Rupal	MD	Pediatric		5+
Ujoatu	Jane	RD	Dietary		5+
Umbaugh	Jennifer	JD	Arbiter		5+
Uren	Bradley	MD	Emergency Medicine	Certified	5+
Uzodi	Adaora	MD	Pediatric Infectious Disease	Certified	5+
Vasquez	Peter	MD	Internal Medicine		5+
Vemulapalli	Ramesh	MD	Infectious Disease	Certified	5+
Vengrenyuk	Mariya	MD	Internal Medicine	Certified	5+

iMPROve Health Peer Reviewers					
Vertkin	Anna	MD	Gastroenterology	Certified	5+
Wagner	Sangeeta	DO	Family Medicine		5+
Waguespack	Alexis	MD	Orthopedic Surgery	Certified	5+
Walker	Katrina	PharmD	Pharmacy		5+
Wang	Ping	MD	Family Medicine	Certified	5+
Ward	Justin	MD	Anesthesiology	Certified	5+
Wason-Fawver	Stacy	FNP	Family Nurse Practitioner	Certified	5+
Weise	Andrew	MD	Emergency Medicine	Certified	5+
West	Nina	PharmD	Non-clinical Reviews ONLY		5+
West	Robert	JD	Arbiter		5+
Williams	Melissa	LPN	Billing/Coding		5+
Wilson	Alisha	RN	Utilization Review		5+
Wise	Eric	MD	Rheumatology	Certified	5+
Woodard	Fallon	LMSW	Mental Health		5+
Wulff	Brian	DC	Chiropractic		5+
Xu	Xiaoti	MD	Plastic Surgery	Certified	5+
Yang	Mike	DO	Family Medicine	Certified	5+
Yeboah	Isaac	MD	Medical Oncology	Certified	5+
Yepez Kuri	Jazmin	MD	Internal Medicine	Certified	5+
Yousef	Nida	MD	Pediatrics	Certified	5+
Zaka	Mimoza	FNP	Nurse Practitioner		5+
Zaslau	Stanley	MD	Urology	Certified	5+
Zielinski	Steven	MD	Neurological Surgery	Certified	5+

CERTIFICATIONS

Since 2002, iMPROve Health has maintained full URAC accreditation as an Independent Review Organization: Comprehensive Review. URAC is a nationally recognized, independent accrediting body that establishes evidence-based standards for quality, accountability, and performance in medical review services.

We consistently meet URAC requirements for qualified clinical staff, rigorous review processes, valid clinical criteria, quality improvement, and organizational oversight. This accreditation reflects our commitment to industry best practices and high-quality, defensible medical review services. Our current URAC accreditation is effective through November 1, 2028, as shown below. A copy of the accreditation certificate is available upon request.

urac

CERTIFICATE OF AWARD

in recognition of

Michigan Peer Review Organization d/b/a iMPROve Health
625 Kenmoor Ave, Suite 350
Grand Rapids, Michigan 49546-2395

for compliance with

Independent Review Organization 6.0: Comprehensive Review Accreditation Program

is awarded

Full Accreditation

Effective from 11/01/2025 through 11/01/2028

Shawn Griffin MD

Shawn Griffin, MD
President & Chief Executive Officer

Certificate Number: IRO010626

urac

ACCREDITED

URAC accreditation is assigned to the organization and address named on this certificate and is not transferable to subcontractors or other affiliated entities not accredited by URAC.

URAC accreditation is subject to the representations contained in the organization's application for accreditation. URAC must be advised of any changes made after the granting of accreditation. Failure to report changes can affect accreditation status.

This certificate is the property of URAC and shall be returned upon request.

[END OF RESPONSE]

ADDENDUM 1: MINIMUM QUALIFICATIONS, 1.10.2 (3) – REFERENCES

iMPROve Health hereby attests that it has provided complete and accurate reference information for 6-8 engagements, as revised by Amendment 1, from the list of engagements identified in IFB Section 1.10.2(1).

In accordance with IFB instructions, we have completed Attachment G – References and provided it below in its designated section.

Each reference:

- Is familiar with our past or current performance,
- Has direct knowledge of the services performed, and
- Possesses the authority to speak to our performance on the referenced engagement.

We have verified that all reference contact information is current and accurate and attests that DOM staff will be able to successfully contact at least two references within three business days of bid opening, in accordance with IFB requirements. We acknowledge that references may be contacted at random and that no further references will be contacted once two Reference Survey Score Sheets have been completed.

We further attest that the references provided are qualified to participate in the reference evaluation process and are expected to meet the minimum scoring requirements outlined in the IFB.

[END OF RESPONSE]

ADDENDUM 1: MINIMUM QUALIFICATIONS, 1.10.2 (4) - QUALIFICATIONS & SCOPE OF SERVICES

GENERAL REQUIREMENTS, 2.1.1.1 – REVIEWS

iMPROve Health conducts comprehensive reviews of all medical records, clinical documentation, utilization guidelines, and applicable policies and regulations in full compliance with the requirements outlined in the IFB. Our Independent Review Team (IRT) is well-equipped to support the DOM in managing external independent medical reviews for State Fair Hearings and State Administrative Hearings. With over 30 years of combined healthcare experience and industry-recognized credentials, our clinical staff ensures thorough, accurate, and compliant evaluations. The IRT brings both current clinical expertise and a deep understanding of healthcare regulations, gained through extensive experience in the independent review industry. Team members are trained in state-specific healthcare policies and have successfully collaborated with state and federal regulatory bodies to provide reviews that withstand scrutiny and are free from conflicts of interest. Recognizing that review volumes may fluctuate monthly, we are fully prepared to adjust staffing and workflows to ensure timely and precise completion of all reviews. All documentation for each review will be submitted by DOM staff through our secure portal, SBS, in accordance with strict confidentiality and data protection protocols.

GENERAL REQUIREMENTS, 2.1.1.2 - CLINICAL RATIONALE

iMPROve Health will provide a clear, substantive written clinical rationale for each determination submitted to the Office of Appeals. Each rationale will summarize the relevant clinical history, diagnostics, and treatment course; identify the clinical questions at issue; explain the medical reasoning behind the recommendation, including consideration of evidence and member-specific factors; and state whether the requested service meets, does not meet, or partially meets the applicable criteria.
All determinations will include the medical criteria, clinical guidelines, and evidence-based resources relied upon, such as DOM criteria, nationally recognized guidelines, or peer-reviewed literature.

General Requirements, 2.1.1.3 - Written Recommendations

iMPROve Health provides recommendation letters that summarize all medical documentation reviewed, outline the questions on appeal, offer a recommendation with detailed supporting rationale, and include a comprehensive list of references. We use current, relevant, nationally recognized clinical guidelines to ensure accurate, evidence-based determinations, providing copies or active links with each recommendation. Reviewers are required to cite at least three recent (within three years), evidence-based sources from peer-reviewed publications, including guidelines, systematic reviews, society statements, meta-analyses, clinical trials, and relevant case series. When older citations are used, reviewers must provide documentation confirming their continued relevance to current practice.

General Requirements, 2.1.1.4 - Recommendations Format

We acknowledge and accept that the format of the written recommendation will be subject to the approval of the Office of Appeals Director following the award. We will fully comply with all formatting requirements and will collaborate with the Office of Appeals to ensure that all deliverables align with their expectations and standards.

General Requirements, 2.1.1.5 - Standard Requests

We submit professional, timely, and high-quality deliverables in full compliance with contractual requirements. Our IRT follows structured project management and documentation protocols that promote clear communication, version control, and alignment with client expectations. The IRT understands the need to provide DOM a written, detailed recommendation via the secure portal within seven business days after the initial request, and no later than seven business days after the submission of additional documentation. This is accomplished through robust processes the IRT implements when a case is assigned.

General Requirements, 2.1.1.6 - Expedited Requests

The IRT is fully prepared to provide DOM a written, detailed recommendation within one business day after the initial request via SBS, and no later than one business day after the submission of additional documentation.

General Requirements, 2.1.1.7 - Telephonic Hearings & Testimony

iMPROve Health and our Medical Providers will fully comply with this requirement. Our reviewers are experienced in participating in telephonic hearings and are prepared to provide detailed, knowledgeable testimony in support of their written recommendations. Each Medical Provider is qualified to discuss and respond comprehensively to any questions from the parties regarding their reviews and recommendations, ensuring clarity, accuracy, and integrity throughout the process.

General Requirements, 2.1.1.8 - Medical Provider Expectations

Our Medical Providers are committed to maintaining flexibility in their schedules to accommodate hearings as needed. All Medical Providers will participate in any required DOM training to ensure a clear understanding of the level of detail expected in written recommendations and the standards of professional conduct when testifying on behalf of the Contractor. Additionally, all out-of-state Medical Providers will make themselves available during regular Central Standard Time business hours to ensure timely participation in hearings and effective communication with DOM staff.

General Requirements, 2.1.1.9 - Biller/Coder Review & Recommend

We are fully prepared to provide certified biller/coder reviews as required by the Office of Appeals. When a specialized coding assessment is requested, a qualified and certified coding professional will conduct a comprehensive review and provide clear, well-supported recommendations. We will ensure all analyses adhere to applicable coding guidelines, regulatory requirements, and industry standards, and that all findings are delivered promptly and through our designated secure processes.

General Requirements, 2.1.1.10 - Hearing Misconduct

iMPROve Health fully maintains strict professional standards for all Medical Providers representing our organization. In the event a Medical Provider's conduct during a hearing is deemed to constitute misconduct, such as rudeness, hostility, or failure to competently provide testimony or respond to questions, we will forfeit payment for that hearing as stipulated. Furthermore, we will take immediate action to remove the Medical Provider from DOM's network and ensure a qualified replacement is assigned to maintain the integrity and professionalism of services provided.

General Requirements, 2.1.1.11 - Recommendations Submission

iMPROve Health understands the requirements to comply with the standard request and expedited request deadlines as set forth in IFB sections 2.1.1.5 and 2.1.1.6. We use standardized protocols, and work plans to promote uniformity across all cases. This includes defined timelines, documentation standards, and decision-making criteria. To date, we are 100% timely on all external independent review submissions, which we have accomplished through the implementation of robust processes, secure portal efficiencies, and peer reviewer collaboration. We understand that in the event a recommendation is not submitted by the required deadline without prior approval; we shall forfeit the right to payment for that specific recommendation.

Systems Requirements, 2.2.1 - User Access & Authentication

We have a robust system in place that fully meets user access and authentication requirements. SBS provides secure login for all DOM staff, contractors, and authorized reviewers through username and password authentication combined with two-factor authentication. User access is controlled through role-based permissions to ensure individuals can only view information appropriate to their responsibilities. In addition, all data, including PHI, is encrypted both in transit and at rest, ensuring full HIPAA compliance and protecting the confidentiality and integrity of sensitive information.

Systems Requirements, 2.2.2 - Dashboard/Homepage

Our portal provides clients with real-time visibility and easy access to the information needed to effectively manage external review requests through a user-friendly SBS dashboard. The dashboard offers a clear summary of all pending, in-process, on-hold, and completed cases, allowing users to quickly assess status at a glance. It also includes convenient quick-action features to initiate new reviews, search for specific cases, and view detailed case information, streamlining workflows & enhancing overall efficiency.

SYSTEMS REQUIREMENTS, 2.2.3 - CASE INTAKE & MANAGEMENT TOOL

SBS fully supports secure, efficient case intake and management by enabling DOM to submit external review requests for medical necessity appeals with all relevant documentation, including denial notices, medical records, clinical notes, and treatment plans, even for cases with voluminous records. Each case is automatically assigned a unique identifier for accurate tracking and streamlined management throughout the review process, ensuring an organized and efficient workflow for all review requests.

SYSTEMS REQUIREMENTS, 2.2.4 - MEDICAL REVIEW INTERFACE

The secure, user-friendly SBS portal allows authorized users to easily submit and access case-specific information. It supports electronic case submissions, notifies the IRT upon receipt, and enables efficient case assignment to qualified medical reviewers based on specialty and availability. All documentation, including denial summaries, clinical records, policy citations, and medical necessity criteria, is accessible within the portal, and additional information requests are managed directly through SBS. Our peer reviewers are also available to participate in telephonic hearings as needed. These integrated workflows ensure consistency, compliance, and timely case resolution and we can customize them to meet DOM's requirements.

SYSTEMS REQUIREMENTS, 2.2.5 - COMMUNICATION & NOTIFICATIONS TOOL

SBS sends automated email notifications for key status updates, including reviewer assignment, case completion, and requests for additional information. The platform also features secure internal messaging for timely communication between peer reviewers, the IRT, and DOM. Our portal is designed to support timely, compliant, and high-quality service delivery with real-time status updates for authorized users.

[END OF RESPONSE]

IFB# 20251031

iMPROVe Health

Attachment C:

Contract Draft Acknowledgement

Attachment C – Contract Draft Acknowledgement

The Bidder shall be required to sign and submit this formal acknowledgment confirming that they have received, reviewed, and fully understood the draft contract, Appendix 3. By signing this acknowledgment, the Bidder affirms acceptance of the terms, conditions, and obligations set forth therein, and agrees to be bound by the provisions of the contract as finalized.

Company Name:	Michigan Peer Review Organization (dba iMPROve Health)
Signature:	
Title:	President & CEO
Date:	December 5, 2025

IFB# 20251031

iMPROVE HEALTH

ATTACHMENT D: DHHS CERTIFICATION DRUG-FREE WORKPLACE

Attachment D - DHHS Certification Drug-Free Workplace

DHHS CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS:

GRANTEES OTHER THAN INDIVIDUALS

Instructions for Certification

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

1) This certification is required by regulations implementing the Drug-Free Act of 1988, 2 CFR Part 382. The regulations require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the DHHS determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
2) Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee shall keep the identity of the workplace(s) on file in its office and make the information available for federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
3) Workplace identifications shall include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
4) If the workplace identified to DOM changes during the performance of the grant, the grantee shall inform DOM of the change(s), if it previously identified the workplaces in question (see above).
5) Definitions of terms in the Non-procurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

    - "Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. §812) and as further defined by regulation (21 CFR § 1308.11 through § 1308.15);
    - "Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes;
    - "Criminal drug statute" means a federal or non-federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

6) "Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including (i) all direct charge employees; (ii) all indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent Contractors not on the grantee's payroll; or employees of sub recipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

b) Establishing an ongoing drug-free awareness program to inform employees about:

   1) The dangers of drug abuse in the workplace;
   2) The grantee's policy of maintaining a drug-free workplace;
   3) Any available drug counseling, rehabilitation, and employee assistance programs; and
   4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

   1) Abide by the terms of the statement; and
   2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e) Notifying DOM in writing, within 10 calendar days after receiving notice under paragraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted:

   1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
   2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;

g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

h) Complying with all provisions 2 CFR Part 382.

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments if needed):

a) Place of Performance (street address, city, county, state, zip code)
b) Check if there are workplaces on file that are not identified here.

---->NOTE: Sections 76.630(c) and (d) (2) and 76.635(a)(1) and (b) provide that a federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For HHS, the central receipt point is Division of Grants Management and Oversight, Office of Management and Acquisition, HHS, Room 517-D, 200 Independence Ave, S.W., Washington, D.C. 20201.

Company Name:	Michigan Peer Review Organization (dba iMPROve Health)
Signature:	
Title:	President & CEO
Date:	December 5, 2025

IFB# 20251031

iMPROVe Health

Attachment E: DHHS Certification Debarment, Suspension, & Other Responsibility Matters

Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility Matters

DHHS Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Primary Covered Transactions

2 CFR Part 376

(1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:

a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;

b. Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and,

d. Have not within a three-year period preceding this bid had one or more public transactions (federal, state or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

Company Name:	Michigan Peer Review Organization (dba iMPROve Health)
Signature:	
Title:	President & CEO
Date:	December 5, 2025

IFB# 20251031

iMPROVE HEALTH

ATTACHMENT F:

PROPRIETARY INFORMATION FORM

Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

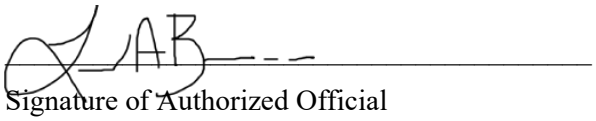
For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☒	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 through 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.

☐	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.



Signature of Authorized Official

December 5, 2025

Date

Michigan Peer Review Organization (dba iMPROve Health)

Name of Organization

IFB# 20251031

iMPROVE HEALTH

ATTACHMENT G: REFERENCES

Attachment G – References

BIDDER NAME: iMPROve Health

Reference 1	
Name of Company:	Minnesota Department of Administration
Dates of Service:	10/2020-Present
Contact Person:	Creta King
Address:	85 7th Place East Suite 280
City/State/ZIP:	St. Paul, MN 55101
Telephone Number:	651-539-4080
Cell Number:	N/A
Email:	creta.king@state.mn.us
Alternate Contact Person (optional):	N/A
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	N/A
Reference 2	
Name of Company:	North Carolina Department of Insurance
Dates of Service:	1/2010-Present
Contact Person:	Bianca Cogdell
Address:	1201 Mail Service Center
City/State/ZIP:	Raleigh, NC 27699
Telephone Number:	919-814-9909
Cell Number:	N/A
Email:	bianca.cogdell@ncdoi.gov
Alternate Contact Person (optional):	N/A
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	N/A
Reference 3	
Name of Company:	Detroit Wayne Integrated Health Network
Dates of Service:	07/2017-Present
Contact Person:	Tasha Bridges
Address:	707 W. Milwaukee Street
City/State/ZIP:	Detroit, MI 48202-2943
Telephone Number:	313-344-9099
Cell Number:	N/A
Email:	tbridges@dwin.org
Alternate Contact Person (optional):	N/A
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	N/A
Reference 4	
Name of Company:	Arizona Department of Administration
Dates of Service:	12/20/2022-Present
Contact Person:	Yanneth Montes

Address:	100 North 15th Ave. Suite 402
City/State/ZIP:	Phoenix, AZ 85007
Telephone Number:	602-542-7165
Cell Number:	N/A
Email:	Yanneth.montes@azdoa.gov
Alternate Contact Person (optional):	Jeanette Villines
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	Jeanette.villines@difi.az.gov
Reference 5	
Name of Company:	Big Horn Hospital Association
Dates of Service:	3/1/2018-Present
Contact Person:	Misty Zink
Address:	17 N. Miles Avenue
City/State/ZIP:	Hardin, Montana 59034
Telephone Number:	406-665-2310
Cell Number:	N/A
Email:	mzink@bighornhospital.org
Alternate Contact Person (optional):	N/A
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	N/A
Reference 6	
Name of Company:	Virginia State Corporation Bureau of Insurance
Dates of Service:	7/1/2015-Present
Contact Person:	Kim Naoroz
Address:	P.O. BOX 1157
City/State/ZIP:	Richmond, VA 23218
Telephone Number:	804-371-9913
Cell Number:	N/A
Email:	kim.naoroz@scc.virginia.gov
Alternate Contact Person (optional):	N/A
Alternate Contact Telephone Number:	N/A
Alternate Contact Cell Number:	N/A
Alternate Contact Email:	N/A

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

IFB# 20251031

iMPROVe Health

Attachment H:

Bidder's IFB Response Checklist

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected due to respondents simply failing to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

			✓	N/A
BIDDER NAME: Michigan Peer Review Organization (dba iMPROve Health)				
MANDATORY LETTER OF INTENT				
1		IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. ~~On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***~~ **Only vendors who submitted the Mandatory Letter of Intent by the original deadline are permitted to participate in this re-submission of the IFB.**	✓	
SHAREPOINT REGISTRATION VERIFICATION				
2		~~Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site.~~ Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of ***Friday, January 16, 2026, 2:00 p.m.*** (Assistance must have been requested at least two (2) business days prior to due date.)	✓	
BID SUBMISSION PACKET Due Date Friday, January 16, 2026, by 2:00 p.m. CST				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required) • A cover page is required for each Attachment subsection. The cover page for each subsection of the Bid must include the IFB#, the name of the Bidder and the Attachment letter and title. All information must be presented in the same order and format as described in section 3.4.14 Bid Submission Format.	✓	
	b	Attachment B – Bid Form (Signature Required) • All pages of the Bid Form must be submitted and signed by an authorized person. All six questions regarding your company must be answered and included with Bid response. Refer to pages 25-28 of the IFB.	✓	
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format. • For the Minimum Qualifications, the header of each page should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement. • For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). • Ensure that all lists, narratives and/or attestations for each of the four (4) minimum qualification elements are answered or provided.	✓	
	d	Attachment C – Contract Draft Acknowledgement • By signing the acknowledgement to Attachment C, the Bidder affirms acceptance of Appendix 3 – Contract draft; including the terms, conditions, and obligations set forth therein, and agrees to the be bound by the provision on the contract as finalized. As noted in the Bid Form the bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation.	✓	
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required) • All pages of Attachment D form must be included in bid response. No modifications are allowed.	✓	

	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required) • All pages of Attachment E form must be included in bid response. No modifications are allowed.	✓	
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release. • Bidder's providing a redacted copy of response must properly answer the questions on this form and provide a separate redacted copy of the bid response adhering to the submission format used for confidential information, as stated on Attachment F.	✓	
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening. • For Minimum Qualification 1.10.2 (2) Amendment 2 – Clarification: From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.	✓	
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required) • Amended. Must be signed and returned with bid re-submission.	✓	
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission. • Acknowledgement to Amendment 1, 2, 3 and 4 must be signed and returned with bid re-submission.	✓	
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14. • All required IFB documents must be re-submitted with response.	✓	
4	Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ~~***Friday, December 12, 2025, by 2:00 p.m. CST.***~~ ***Friday, January 16, 2026, by 2:00 p.m.***		✓	

Bid Submitted By: Michigan Peer Review Organization (dba iMPROve Health)

Authorized Signature

January 9, 2026

Date

IFB# 20251031

iMPROVe Health

Attachment I:

Amendment Acknowledgements

MISSISSIPPI DIVISION OF MEDICAID

Date: November 26, 2025

Amendment #1 Questions and Answers and Pre-Bid Submission Conference PowerPoint Presentation

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is December 12, 2025 by 2:00 p.m.

Question #	RFP Section #	RFP Page #	Question	DOM Response
1	N/A	N/A	What is the current pricing for this scope of work?	The current incumbent pricing is as follows: • Appeal Review and/or Length of Stay Review: Flat hourly rate of $150 • Medicaid Hearing & Report Preparation: Hourly rate of $155.
2	1.8	7	Does the single fixed hourly rate specified in the bid, cover all aspects of the service, including the detailed medical review, writing the recommendation, and all time associated with preparatin for and attendance at required telephonic hearings?	Yes. The single fixed hourly rate specified in the IFB on the Bid Form is intended to cover all aspects of the required service. As outlined in the Service Description, the hourly rate encompasses Appeal Review, Hearing and Report Preparation.
3	1.10.2	8	What is the most frequently requested medical specialties and percentage of breakdown of reviews by specialty over the past 12 to 24 months?	Please refer to Appendix 2 – Historical Data (pages 40-42) of the IFB for a breakdown of reviews by medical specialties for 2024 and 2025 to date.

4	1.10.2	8	In the event that a specialty physician is not licensed in Mississippi, can the Mississippi licensed physician who must review and sign off on the recommendation be of any specialty?	If the reviewing physician is not of the same specialty as the case, a Mississippi-licensed physician can be of any specialty, however, general practice is preferred to provide the required review and sign-off.
5	1.10.2 and 3.4.14	9 and 20	The text for #4 on Page 9 states, "Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services (no more than 5 pages)." Two questions: 1) Does the Scope of Services include the General Requirements on pages 11-12 AND the System Requirements on pages 13-14, or just the General Requirements? 2) Please clarify the number of pages the bidder has to respond to the Scope of Services section because above it states "no more than five pages," yet Section 3.4.14 - Bid Submission format states: "At the end of each response to an element by the Bidder, the Bidder should type "[END OF RESPONSE]" and leave the remainder of the page blank, beginning the response to the next element on the next page." There are 16 "elements" between the General Requirements (2.1.1.1-2.1.1.11) and System Requirements (2.2.1-.2.2.5), plus four (4) "elements" under Minimum Qualifications (pages 8-9). If the bidder follows the Section 3.4.14 guideline, it would require 20 pages to ensure each response falls/begins on its own page.	1) Yes. For purposes of Item #4 on Page 9, the Scope of Services includes both the General Requirements and the System Requirements. 2) Section 3.4.14 only relates to the items listed at 1.10.2 Minimum Qualifications (Attachment B: Addendum 1) •• 1st Element •• Addendum 1: Minimum Qualifications, 1.10.2(1) Bidders Experience Requirement *add your documentation and then state END OF RESPONSE •• 2nd Element •• Addendum 1: Minimum Qualifications, 1.10.2(2) Bidder Licenses/Certifications * add your documentation and then state END OF RESPONSE •• 3rd Element •• Addendum 1: Minimum Qualifications 1.10.2(4) Bidder's Narrative * add your documentation and then state END OF RESPONSE **The 3rd Element (1.10.2 (4)) is the only element that is limited to no more than 5 pages. **Note**: For Element 1.10.2(3) Minimum Qualifications References. Follow the required documenting format.

6	1.10.2 (1) and (3)	8	Our company is authorized to provide external reviews in 30+ states which we will identify per 1.10.2 (1). Per 1.10.2 (3), are we required to provide reference contacts for all 30+ states where we're licensed/certified/contracted to provide external reviews?	Please provide 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references, will be sufficient.
7	2	11	What is your criteria for extension? How much advance notice is the contracted company given if it is or isn't extended?	1) An extension is based solely on satisfactory performance of the contracted vendor. 2) If performance is satisfactory, the amended contract will proceed through DOM's internal review process before being submitted to our regulatory board, which requires a minimum one-month approval period. If performance is unsatisfactory, DOM will follow the specific termination clauses outlined in the contract.
8	2.1.1.1	11	Are there specific data integration requirements, API protocols or established DOM systems (e.g., for case intake or claims processing) that the Contractor's secured portal must interface with, or is the Contractor expected to provide a fully independent standalone system for all case management and data exchange?	The Contractor is expected to provide an independent, standalone system that DOM personnel will utilize for all case management and data exchange.
9	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide an average number of reviews to be performed per month?	A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.
10	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide a total volume of cases performed in 2024? Total volume of hearings?	A month to month estimate of reviews has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

11	2.1.1.2	12	It is stated "*includes a copy* of any and all medical criteria or clinical guidelines..." Can you elaborate what the expectation is for "including a copy?"	DOM Appeals will give you a policy to review to uphold or overturn the managed care organizations' denials. If you have any additional references that you utilized in making the determination, DOM Appeals would like those listed and on hand in case of a hearing. Our priority is that the policy and criteria provided from the managed care organization is applied properly to the medical case.
12	2.1.1.2	11	Can the DOM provide bidders with a sample of a determination or a sample format expected for a determination?	Yes, A sample format will be provided with Amendment 1, Questions and Answers.
13	2.1.1.3	11	Section 2.1.1.3 states that copies or active links to referenced documents must be incuded with recommendations. Many clinical references are proprietary, require subscripions, and cannot legally be redistributed. Will DOM allow venders to cite these resources without providing full copies due to copyright and royalty restrictions?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
14	2.1.1.4	11	If active links lead to subscription based resources that DOM staff cannot access without a license, will DOM consider alternative documentation methods?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
15	2.1.1.5	11	In situations that extention on the submission deadline is needed, can extensions be granted? If so, what is the length of extension?	Yes, an extension may be granted when necessary; however, such instances are expected to be rare. In general, no more than an additional week should be needed. All determinations are expected to be submitted in a timely manner.
16	2.1.1.5 and 2.1.1.6		What is the historial annual volume of completed reviews by turnaround time? (ie: standard vs expedited).	There are typically only 2-4 expedited requests per year.

17	2.1.1.7	12	Please provide an estimate on the number of telephonic hearings per year and how many there were in 2024 and 2025.	An estimate of review requests vs hearings has been included with Appendix 2 -Historical Data as part of Amendment 1, Questions and Answers.
18	2.1.1.8	12	Please clarify what DOM defines as the "appropriate training by DOM staff" referenced in section 2.1.1.8. What training content is included?	The IFB incorrectly stated that DOM Appeals would conduct training for the Medical Reviewers. This was an error and shall be corrected in Amendment 2. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include: • Appeals and Hearing processes and de corum • Requirements for timely and efficient reviews, including flexibility in scheduling • Confidentiality and HIPAA compliance.
19	2.1.1.8	12	How long does the required DOM training take to complete, and what is the method of delivery?	See answer to number 18.

20	2.1.1.8	12	Given that our reviewers are all active clinical practices and may not always be available at the exact hearing times requested- especially when hearings are scheduled on short notice- will DOM allow reasonable scheduling flexability?	Yes. DOM will make reasonable efforts to accommodate scheduling needs; however, clinical reviewers should maintain sufficient flexibility to ensure hearings are completed in a timely manner. Federal regulations require that beneficiary hearings be concluded within 90 days of receipt by the Office of Appeals, and scheduling must support compliance with these requirements.
21	2.1.1.9	12	Section 2.1.1.9 requires the Contractor to provide a certified biller/coder's review upon request from the Office of Appeals. Our organization performs coding reviews but not billing reviews. Will DOM confirm whether billing review is a mandatory requirement for this contract, or if coding-only reviews are acceptable?	Yes, a certified biller/coder review is required on cases where a specialized biller/coder review is necessary.
22	2.1.1.11	12	What is the formal, written process for obtaining "prior approval" from the Office of Appeals to extend a deadline?	Requests for prior approval must be submitted by email to DOM's Appeal Contact Person. Any such requests must be made promptly, as timeliness in submitting determinations is essential.
23	2.2	12	What are the average frequency and length of telephonic hearings?	The length of the hearings are typically 1 to 1.5 hours with some lasting up to 3 hours on a rare occasion. A medical reviewer may provide the statement and be examined and does not have to attend the full hearing. A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

24	2.2	12	Are all Medical Providers who participate on this contract expected to complete the DOM training for hearings? What is the length of the training, and how is it conducted? Also, can the training be done at any time?	See answer to number 18.
25	2.3	14	What components of this contract require travel, if any?	Travel is not required. All hearings are conducted by telephonic call-in, with video hearings occurring only in very rare occurrence.
26	2.3	14	Will medical providers and/or staff be required to travel to Mississippi or elsewhere for any reason?	See answer to number 25.
27	2.3	14	If DOM requires travel to be included, can DOM clarify typical travel expectations and historical frequency of required in-person attendance?	See answer to number 25.
28	2.3	14	Will DOM allow virtual participation in place of in-person travel when appropriate?	See answer to number 25.
29	3.4	16	What is the current incumbent pricing?	See answer to number 1.
30	Attachment B - Bid Form	25	What are the hourly rates of the current vendor?	See answer to number 1.

31	Attachment B – Bid Form Certifications #5	26	Can the Division confirm what "applicable licenses" will be necessary for the bidder to have or secure? For example: an Independent Review Organization (IRO) license from the Mississippi Department of Insurance. And does this include any accreditations or certifications, such as URAC?	Attachment B - Bid Form Certification #5 refers to applicable licensed and certified personnel who are qualified to perform the duties required under the IFB. For the organization, DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, accreditation by NCQA for Utilization Management is preferred but not required. Amendment 2, will amend this language.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment. This Amendment must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #1 Acknowledged:

Signature

Leland A. Babitch, MD, MBA

Printed Name

President & CEO

Title

Michigan Peer Review Organization (dba iMPROve Health)

Entity Name

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

Amendment #2 - Clarifications

External Medical Review Consulting

IFB #20251031 RFX #3160007625

Date: November 26, 2025

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

2.1.1.8 (**General Requirements**) Medical Providers must be flexible in their availability for hearings related to the case. ~~Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings.~~ Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include:

- Appeals and Hearing processes and decorum
- Requirements for timely and efficient reviews, including flexibility in scheduling
- Confidentiality and HIPAA compliance.

1.10.2 (3) References

From the list of engagements provided at **IFB Section 1.10.2 (1)**, the Bidder shall provide reference contacts for ~~all engagements .~~6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.

1.10.2 (2) Bidder Licenses/Certifications

Medical Providers

Bidder must warrant that all physicians (the "Medical Providers") providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Each Medical Provider shall be licensed to practice in Mississippi. If a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation. The Bidder must provide a list of all participating Medical Providers and attest that they meet these licensure and board certification requirements. The Bidder must also attest that the Medical Providers have the relevant experience in the specialty and detail the number of years of experience. While DOM prefers at least two (2) years of experience, there is no minimum experience requirement for Medical Providers. If

a Medical Provider has no prior experience in the specialty area, the Bidder should state 'None' or '0' years for that provider.

Bidder Company

DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, an accreditation by NCQA for Utilization Management is preferred but not required.

The bid due date remains unchanged: December 12, 2025 by 2:00 p.m.

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #2 Acknowledged:

Signature

Leland A Babitch, MD MBA
Printed Name

President & CEO
Title

Michigan Peer Review Organization (dba iMPROve Health)
Entity Name

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #3 – CLARIFICATION

CHANGE TO BID DUE DATE

EXTERNAL MEDICAL REVIEW CONSULTING

IFB #20251031 RFX #3160007625

Date: December 9, 2025

Due to an administrative error, the following sections of IFB #20251031 have been amended.

1. COVER PAGE is modified as follows: Bid Response Deadline**:** Friday, December ~~12~~19, 2025, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~12/12/2025~~ 12/19/2025	Bid Deadline (by 2:00 p.m.)
1/02/2025	Anticipated Date of Notice of Intent to Award
2/04/2026	Public Procurement Review Board meeting date (proposed)
2/09/2026	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025,** on or before **2:00 p.m., CST**.

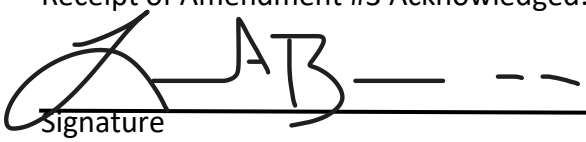
5. Attachment H – Bidder's IFB Response Checklist is modified as follows:

BIDDER NAME:			✓	**N/A**
MANDATORY LETTER OF INTENT				
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***			
SHAREPOINT REGISTRATION VERIFICATION				
2	Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)			
BID SUBMISSION PACKET **Due Date Friday, December ~~12~~19, 2025, by 2:00 p.m. CST**				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required)		
	b	Attachment B – Bid Form (Signature Required)		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.		
	d	Attachment C – Contract Draft Acknowledgement		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.		
4	Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December ~~12~~19, 2025, by 2:00 p.m. CST.***			

MISSISSIPPI DIVISION OF MEDICAID

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #3 Acknowledged:



Signature

Leland A. Babitch, MD, MBA

Printed Name

President & CEO

Title

Michigan Peer Review Organization (dba iMPROve Health)

Entity Name

[END OF RESPONSE}

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #4

External Medical Review Consulting

IFB #20251031

Issued December 24, 2025

Revised IFB – Re-submission of IFB Bids

RE-SUBMISSION DUE DATE: Friday, January 16, 2026, by 2:00 p.m.

This Amendment serves as formal notice that the Mississippi Division of Medicaid (DOM) is providing a new submission deadline for Invitation for Bid (IFB) #20251031 for External Medical Review Consulting services due to various submission deficiencies. Only bidders that submitted a Letter of Intent by the original deadline of November 14, 2025, are eligible for this re-submission of bid allowance.

Pursuant to Section 3.10 of the IFB, DOM expressly reserves the right to reject any and all bids, in whole or in part, when it is determined to be in the best interest of the agency. To ensure fair and open competition, DOM has elected to reject all bids and allow for re-submission of responses to the IFB.

As further clarification, DOM has revised Attachment H, Bidder's IFB Response Checklist to further assist bidders with preparing their bid submission.

To be a responsive and responsible bidder, the following conditions must apply:

- Bidders must adhere to **all** required formats, minimum qualifications, and submission requirements as stated in the IFB and its amendments.

In accordance with PPRB Section 5.7.3, DOM will not retain the original bid submissions in the Agency Procurement files. All original bids will be deleted. Only enough information necessary to support the decision to reject the bids will be retained. Therefore, bidders are free to make any adjustments they would like for the new submission deadline.

Please refer back to IFB and all Amendments before submitting bid responses.

Failure to submit a responsive bid may result in the rejection of the bid.

Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of ***Friday, January 16, 2026, by 2:00 p.m.***

Remainder Of This Page Intentionally Left Blank

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

1. COVER PAGE is modified as follows: Bid Response Deadline**:** ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~**12/12/2025 12/19/2025**~~ **1/16/2026**	Bid Deadline (by 2:00 p.m.)
~~**1/02/2025**~~ **1/30/2026**	Anticipated Date of Notice of Intent to Award
~~**2/04/2026**~~ **3/4/2026**	Public Procurement Review Board meeting date (proposed)
~~**2/09/2026**~~ **3/9/2026**	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025~~ Friday, January 16, 2026.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026.**

5. Attachment H – Bidder's IFB Response Checklist is modified to further clarify submission requirements and emphasize the importance of completing a fully compliant IFB response.

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected due to respondents simply failing to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

	BIDDER NAME:	✓	**N/A**
	MANDATORY LETTER OF INTENT		
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. ~~On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***~~ **Only vendors who submitted the Mandatory Letter of Intent by the original deadline are permitted to participate in this re-submission of the IFB.**		
	SHAREPOINT REGISTRATION VERIFICATION		
2	~~Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site.~~ Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of		

		Friday, January 16, 2026, 2:00 p.m. (Assistance must have been requested at least two (2) business days prior to due date.)		
BID SUBMISSION PACKET Due Date Friday, January 16, 2026, by 2:00 p.m. CST				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required) • A cover page is required for each Attachment subsection. The cover page for each subsection of the Bid must include the IFB#, the name of the Bidder and the Attachment letter and title. All information must be presented in the same order and format as described in section 3.4.14 Bid Submission Format.		
	b	Attachment B – Bid Form (Signature Required) • All pages of the Bid Form must be submitted and signed by an authorized person. All six questions regarding your company must be answered and included with Bid response. Refer to pages 25-28 of the IFB.		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format. • For the Minimum Qualifications, the header of each page should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement. • For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). • Ensure that all lists, narratives and/or attestations for each of the four (4) minimum qualification elements are answered or provided.		
	d	Attachment C – Contract Draft Acknowledgement • By signing the acknowledgement to Attachment C, the Bidder affirms acceptance of Appendix 3 – Contract draft; including the terms, conditions, and obligations set forth therein, and agrees to the be bound by the provision on the contract as finalized. As noted in the Bid Form the bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation.		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required) • All pages of Attachment D form must be included in bid response. No modifications are allowed.		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required) • All pages of Attachment E form must be included in bid response. No modifications are allowed.		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release. • Bidder's providing a redacted copy of response must properly answer the questions on this form and provide a separate redacted copy of the bid response adhering to the submission format used for confidential information, as stated on Attachment F.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening. • For Minimum Qualification 1.10.2 (2) Amendment 2 – Clarification: From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required) • Amended. Must be signed and returned with bid re-submission.		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		

		• Acknowledgement to Amendment 1, 2, 3 and 4 must be signed and returned with bid re-submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14. • All required IFB documents must be re-submitted with response.		
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ~~***Friday, December 12, 2025, by 2:00 p.m. CST.***~~ ***Friday, January 16, 2026, by 2:00 p.m.***		

Bid Submitted By: _____

_____ _____

Authorized Signature Date

Receipt of Amendment #4 Acknowledged:

Printed Name: Leland A. Babitch, MD, MBA

Signature: 

Title: President & CEO

Company Name: Michigan Peer Review Organization (dba iMPROve Health)

MISSISSIPPI DIVISION OF MEDICAID

Date: December 30, 2025

Amendment #5 Additional Questions Period **Deadline for Additional Questions shall be Friday, January 2, 2026 by 5:00 p.m. Anticipated date of posting Written Answers shall be Monday, January 5, 2026 by 5:00 p.m.**

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.

Receipt of Amendment #5 Acknowledged:

LAB

Signature

Leland A. Babitch, MD, MBA

Printed Name

President & CEO

Title

Michigan Peer Review Organization (dba iMPROve Health)

Entity Name

MISSISSIPPI DIVISION OF MEDICAID

Amendment #6 Additional Questions and Answers Issued: January 5, 2026

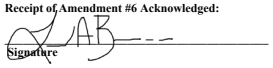
Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response
1	Attachment A and Section 3.4.14	Page 1 and IFB Page 19	Attachment A states: "A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site. File Name: BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING, and IFB page 19 (Section 3.4.14) states: The one combined searchable PDF file should be uploaded in SharePoint with the file name: IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING." **Question:** Which requirement is correct? Should the file name of the one-combined searchable PDF file include the IFB number or not?	Yes. The file name of the one combined searchable PDF file must include the IFB number when submitted to the SharePoint site. Bidders should follow the naming convention outlined in IFB page 19, Section 3.4.14. IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING.
2	Amendment 4 Revised Attachment H	Page 3 3a	3a states: "A cover page is required for each Attachment subsection." **Question:** The word *subsection* is unclear. Do you mean that before each Attachment, you want the bidder to include a cover page? If so, should the bidder include a cover page for Attachment A or just start the proposal with Attachment A (as the Bid Cover Sheet), and then create a cover page for Attachments B through I?	Yes. Attachments A through I are the Attachment subsections referenced in the IFB. Bidders must include a cover page for Attachment A and each attachment thereafter.
3	Amendment 4 Revised Attachment H	Page 3 3c	The first bullet of 3c states: "For the Minimum Qualifications, the *header of each page* should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement." **Question:** Is the Minimum Qualifications section the only section in which the DOM requires specific wording to be stated in the header of each page? Please clarify if you want specific wording in the header of each page for **any other section** of the proposal. That is, for all the other Attachments, does DOM want the headers to be blank (no logos, no wording)?	Yes. The Minimum Qualifications section is the only section that requires a header identifying the specific element to which the bidder is responding. All other sections of the proposal will include a cover page, and no specific header wording is required for other sections of the proposal.
4	Amendment 4 Revised Attachment H	Page 3 3c	The second bullet of 3c states: "For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review)." **Question:** Do you want the bidder to include a copy of its URAC certificate in this section?	URAC Accreditation is required; however, submission of the URAC certificate is not required at the time of bid response. DOM may request documentation of accreditation at a later time.
5	N/A	N/A	**Question:** Should the bidder change the submission date from December 12, 2025, to January 16, 2026, on any signed documents that are included with its proposal?	Yes. DOM issued Amendment #4, which established a revised bid submission deadline of January 16, 2026. Bidders must ensure that all proposal documents requiring signatures reflect this updated submission date.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.
This Amendment #6 must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #6 Acknowledged:



Signature

Leland A. Babitch, MD, MBA

Printed Name

President & CEO

Title

Michigan Peer Review Organization (dba iMPROve Health)

Entity Name

Qsource®

Response to:
IFB #20251031
RFX #3160007625

External Medical Review Consulting

Submitted to:

Mississippi Division of Medicaid

Jackson, MS 39225

Submitted by:

Qsource

8245 Tournament Drive, Suite 201
Memphis, TN 38125

January 16, 2026

Jeanette Crawford, Procurement Officer
Mississippi Division of Medicaid

Subject: Response to IFB#20251031 / RFX #3160007625, External Medical Review Consulting

Dear Jeannette Crawford:

Qsource is pleased to submit its response to the Mississippi Division of Medicaid (DOM)'s IFB#20251031 / RFX #3160007625 for External Medical Review Consulting. Our response highlights Qsource's expertise, resources, experience, and dedication to serving Mississippi as the External Medical Review Consulting organization.

Qsource is a nonprofit corporation that boasts a team of clinical, project management, and quality improvement experts with extensive experience in Medicaid programs. Founded in 1973, over the past five decades Qsource has become a nationwide leader in healthcare quality improvement and assurance (QI/QA) across all healthcare settings. Qsource currently provides External Quality Review Organization (EQRO) services for Arkansas, Florida, Indiana, and Tennessee, and holds numerous other healthcare quality improvement contracts with CMS, state departments of health, and private clients.

As the current EQRO for four different states, we are well-versed in CMS and other national standards. We will collaborate with DOM to determine priorities and expectations and apply the best practices and lessons learned from multiple states to create a process tailored to Mississippi's unique needs.

Qsource has available Medical Providers who are licensed to practice in Mississippi and who are available to review and sign off on recommendations from specialty physicians.

[redacted]

We acknowledge the receipt of amendments 1-6 of the original IFB.

Should you have questions or need additional information, please do not hesitate to contact me or Rebel McKnight, Vice President, Operations at 501-351-7585 or rmcknight@qsource.org. I am the designated company representative with the authority to bind the organization, and I can be reached at 804-368-5064 or mbaldauf@qsource.org. We look forward to working with you.

Sincerely,

Mary-Lyn Baldauf
Chief Executive Officer

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Attachment A: Bid Cover Sheet

Attachment A – Bid Cover Sheet IFB #: 20251031

DOM is seeking to establish a contract for External Medical Review Consulting. Bids are to be submitted **Friday, December 12, 2025,** on or before **2:00 p.m., CST**.

Bid Cover Sheet is to be used to accompany your electronic file when submitting bid via SharePoint.

A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site.

File Name: **BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING**

Company Name:	Qsource
Company Address:	3725Champion Hills Drive, Suite 3100, Memphis TN 38125
Authorized Signature:	
Name and Title:	Mary-Lyn Baldauf, Chief Executive Officer
Phone Number:	804-368-5064
Email address:	mbaldauf@qsource.org
***MAGIC Supplier #**	Vendor Number: 3102137988 Magic User ID: VND213798801

*If Bidder does not have a MAGIC Supplier number, Bidder can register in MAGIC after award is made to Contractor.

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Attachment B: Bid Form

Attachment B - Bid Form

GENERAL

Compensation for services shall be in the form of a firm fixed-rate agreement. Through submission of this form and accompanying **Addendum 1: Minimum Qualifications**, the Bidder certifies the following:

1. The Bidder shall accept an award made as a result of the submission.
2. The Bidder is registered to do business in the State of Mississippi as prescribed by the Mississippi Secretary of State, if not already registered Bidder will do so within five (5) business days of being offered an award.
3. The Bidder has not been sanctioned by a state or federal government within the last 10 years.
4. The Bidder has a minimum of five (5) years of experience in contractual services, providing the type of services described in this IFB.
5. The Bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation and is able to provide each required component and deliverable as detailed in the Scope of Services.

The services described in the Scope of Services require Bidders to offer an all-inclusive, fully burdened hourly rate. This rate must encompass all costs of performance, including but not limited to, labor, overhead, administrative expenses, and profit. To assist in determining this pricing, historical usage data has been provided in Appendix 2.

The total number of hours for this contract is not fixed and will vary based on the State's needs. For evaluation purposes, DOM will calculate the average cost across all five years to determine the lowest bid.

The anticipated contract term for the required services is February 9, 2026, through February 8, 2029, with one optional two-year renewal, at the discretion of DOM.

BID FORM – EXTERNAL MEDICAL REVIEW CONSULTING IFB #20251031	
BIDDER NAME: Qsource	
Service Description: Appeal Review, Hearing and Report Preparation	**Hourly Rate**
Term: Year One	$ 402.24
Term: Year Two	$ 414.31
Term: Year Three	$ 426.74
Optional Term: Year Four	$ 439.54
Optional Term: Year Five	$ 452.73

*Bidders shall **not** include any additional charges or additional line items in this bid form. Any additional charges included on a bid form may result in the bid being deemed non-responsive, and the bid will thereby be rejected.*

CERTIFICATIONS:

By signing below, the Company Representative certifies that he/she has authority to bind the company and further acknowledges on behalf of the company:

1. That he/she has thoroughly read and understands this IFB and the attachments thereto;

2. That the company meets all requirements and acknowledges all certifications contained in this IFB and the attachments thereto;

3. That the company agrees to all provisions of this IFB and the attachments thereto, including, but not limited to, the draft contract attached to this IFB, which contains the Required and Optional Clauses as required by the *Mississippi Public Procurement Review Board (PPRB) Office of Personal Service Contract Review (OPSCR) Rules and Regulations*;

4. That the company will perform, without delay, the services required at the prices quoted in this **Attachment B;**

5. That the company has, or will secure, at its own expense, applicable licensed and certified personnel or personnel with requisite credentials who shall be qualified to perform the duties required to be performed under this IFB; and

6. That the company can and will meet all required laws, regulations, and/or procedures related to services and represents that it is licensed, certified and possesses the requisite credentials to perform these services, if required. Further, if the company is the successful bidder and the material, equipment, etc., delivered is subsequently found to be deficient pursuant to any federal and state laws and regulations in effect on the date of delivery, all costs necessary to bring the material, equipment, etc. into compliance with aforementioned requirements shall be borne solely by Company.

NON-DEBARMENT:

By submitting a bid, the Bidder certifies that it is not currently debarred, suspended, or otherwise excluded from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government and that it is not an agent of a person or entity that is currently debarred from submitting bids for contracts issued by any political subdivision or agency of the State of Mississippi or federal government.

CERTIFICATION OF INDEPENDENT PRICE DETERMINATION:

By submitting a bid, the Bidder certifies that the prices submitted in response to the solicitation have been arrived at independently and without any consultation, communication, or agreement with any other bidder or competitor for the purpose of restricting competition.

BIDDER'S REPRESENTATION REGARDING CONTINGENT FEES:

By responding to the solicitation, Bidder represents that it has not retained any person or agency on a percentage, commission, or other contingent arrangement to secure this contract. If Bidder cannot make such a representation, a full and complete explanation shall be submitted, in writing, with the bid.

REPRESENTATION REGARDING GRATUITIES:

The Bidder represents that is has not, is not, and will not offer, give, or agree to give any employee or former employee of DOM a gratuity or offer of employment in connection with any approval, disapproval, recommendation, development, or any other action or decision related to the solicitation and resulting contract. The Bidder further represents that no employee or former employee of DOM has or is soliciting, demanding, accepting, or agreeing to accept a gratuity or offer of employment for the reasons previously stated; any such action by an employee or former employee in the future, if any, will be rejected by contractor. The Bidder further represents that is it in compliance with the Mississippi Code Annotated §§ 25-4-101 through 25-4-121 and has not solicited any employee or former employee to act in violation of said law.

Signature:	
Date:	January 9, 2026
Name and Title:	Mary-Lyn Baldauf
Company Name:	Qsource

Note: Failure to sign the bid form may result in the bid being rejected as non-responsive. Modifications or additions to any portion of this bid document may be cause for rejection of the bid.

In addition to providing the above information, please answer the following questions regarding your company. The Bidder must answer questions below in order for their bid to be considered.

1	What year was your company started?	1973	
2	Please provide the physical location and mailing address of your company's home office, principal place of business and place of incorporation.	Physical Location	3725 Champion Hills Drive Suite 3100
		Mailing Address	Memphis TN 38125
		Principal Place of Business	see above
		Place of Incorporation	Memphis, TN

3	Company structure/organization to include any parent or subsidiary companies. As applicable, please describe the role of any parent and/or subsidiary company in providing the services requested within this IFB.	Qsource has no parent or subsidiary companies. Qsource is an independent 501(c)(3) nonprofit.	
4	Is your company currently for sale or involved in any transaction to expand or become acquired by another business entity during either this solicitation or the resultant contract period? If "yes", please provide information regarding such a transaction as it relates to your Company's organization structure (post transaction) and your Company's ability to continue delivery of services (post transaction) as required herein.	No	Yes, please explain.
		X	
5	If your company is not physically located in Mississippi, how will you provide the services set forth in the IFB?	Qsource is headquartered in Memphis, TN. We have contracts in 12 states and are accustomed to providing services virtually	
6	List all licenses, certifications or permits your company possesses that are applicable to performing the services required in this IFB.	or traveling as necessary.	

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1.10.2 Minimum Qualifications (Attachment B: Addendum 1)

1. Bidder Experience Requirement: Bidder must have a minimum of five (5) years of experience providing independent external medical review services in the administrative appeals process for a healthcare organization as it relates to the services requested in this IFB. To demonstrate this expertise, the Bidder must provide a list of past and/or current engagements for which bidder performed similar services. Failure to provide this information will result in bid disqualification.

Qsource offers 20+ years of experience providing independent external medical review services in the administrative appeals process as it relates to the services requested in this IFB.

Qsource began as the Shelby County Foundation for Medical Care in 1973. Over the past five decades, Qsource has become a nationwide leader in quality improvement and assurance (QI/QA) across all healthcare settings. We continue to lead by combining personal engagement with technological innovation. Our team comprises healthcare professionals, providers, data analysts, and executives with experience spanning federal, state, and private programs.

Qsource is contracted by the Centers for Medicare & Medicaid Services (CMS) as a Quality Innovation Network-Quality Improvement Organization (QIN-QIO). QIN-QIOs bring Medicare beneficiaries, providers, and communities together in data-driven initiatives that increase patient safety, make communities healthier, better coordinate post-hospital care, and improve clinical quality.

As a designated, independent, External Quality Review Organization (EQRO), Qsource contracts with state agencies to meet federal regulations for assessing managed care organizations (MCOs), prepaid inpatient health plans (PIHPs), and prepaid ambulatory health plans (PAHPs).

In all these contracts, independent external medical review services as part of the administrative appeals process for a healthcare organization is a standard feature of our work. Qsource will bring lessons learned and apply best practices from multiple states to provide independent external medical review services in the administrative appeals process for a healthcare organization for Mississippi Division of Medicaid. Past and/or current engagements for which Qsource performs similar services include:

- External Quality Review work for Arkansas Division of Medical Services (DMS)
- External Quality Review work for Florida - Florida Healthy Kids Corp.
- External Quality Review work for Indiana Office of Medicaid Policy & Planning (OMPP)
- External Quality Review work for Tennessee Department of Finance and Administration, Bureau of TennCare

2. Bidder Licenses/Certifications: Bidder must warrant that all physicians (the “Medical Providers”) providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Each Medical Provider shall be licensed to practice in Mississippi. If a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation. The Bidder must provide a list of all participating Medical Providers and attest that they meet these licensure and board certification requirements. The Bidder must also attest that the Medical Providers have the relevant experience in the specialty and detail the number of years of experience. While DOM prefers at least two (2) years of experience, there is no minimum experience requirement for Medical Providers. If a Medical Provider has no prior experience in the specialty area, the Bidder should state ‘None’ or ‘0’ years for that provider.

Qsource agrees and warrants that all clinical specialists (the “Medical Providers”) who will provide medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Qsource understands and acknowledges that each Medical Provider shall be licensed to practice in Mississippi and that if a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation.

Qsource’s participating Medical Providers include:

Name	Specialty	MS License?	Years Exp	Review experience	Other
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]

[redacted] will service as the Mississippi "sign-off" physician when necessary.

[redacted]

In addition, Qsource can provide [redacted]

3. References: From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for all engagements. The Bidder must use Attachment G, References form and submit as many copies of the form as necessary to provide a reference contact for each engagement. Reference contacts shall be contacted at random until two (2) references identified as meeting the minimum qualifications have been contacted and Reference Survey Score Sheets are completed. No further references shall be contacted. DOM staff shall be able to contact two references within three (3) business days of bid opening, or the Bidder may be rejected.

Please see the attached form Attachment G, References, for Qsource's reference contacts.

i. These Bidder-provided references shall be familiar with and be able to speak to the Bidder's abilities as it relates to Bidder's past or current performance. The Bidder is solely responsible to ensure that reference contact information is correct and current and that the reference contact has the knowledge and authority to speak to the Bidder's performance on past or current projects for this reference check.

Qsource understands and acknowledges this requirement. Please see the attached form Attachment G, References, for Qsource's reference contacts.

ii. Bidder must score a minimum of nine (9) points on each Reference Survey Score Sheet to be utilized by DOM Procurement staff when interviewing Bidder-provided references. A total reference score of 18 points (combined minimum scoring of nine (9) points for each of the individual Reference Survey Score Sheets) is required to be considered responsive and/or responsible. A sample copy of the Reference Survey Score Sheet is provided on Appendix 1.

Qsource understands and acknowledges this requirement. Please see the attached form Attachment G, References, for Qsource's reference contacts.

4. Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services. (no more than 5 pages)

See below for 1.10.2 Minimum Qualifications (Attachment B: Addendum 1); Qsource's 5-page description of our ability to meet each of the qualifications and perform the scope of services.

Will conduct reviews of medical records, clinical documentation, utilization guidelines, and applicable policies or regulations. The number of reviews vary from month to month. All relevant documentation will be submitted to Contractor via the Contractor's secured portal for review.

Qsource will deploy a team of board-certified Medical Providers, licensed clinicians, and specialized reviewers trained in state and federal requirements, including CMS, Medicaid, and state-specific coverage rules.

- All monthly assignments will be triaged through Qsource's centralized Case Assignment System to ensure appropriate specialty review.
- Qsource will access the Contractor's secure portal and adhere to all data-security protocols (HIPAA, NIST 800-53, and SOC-based standards).
- Reviewers will perform comprehensive evaluations of medical records, clinical documentation, utilization management guidelines, and applicable policies/regulations that align with the specific appeal question(s).
- Qsource's flexible staffing model accommodates monthly fluctuations in volume without delays or backlogs.

Provide a written clinical rationale for each determination to the Office of Appeals, that includes a copy of any and all medical criteria or clinical guidelines relied upon in support of the recommendation.

For every determination submitted to the Office of Appeals, Qsource will prepare a written clinical rationale that:

- Clearly explains the reviewer's professional assessment, and
- Includes copies of all medical criteria, evidence-based clinical guidelines, statutes, and/or policy references relied upon to form the recommendation.
- Qsource maintains access to national evidence-based guidelines such as Health Effectiveness Data and Information Set (HEDIS®), federal Centers for Medicare & Medicaid Services (CMS) Core Measures, and National Committee for Quality Assurance (NCQA) and will attach the relevant excerpts or links as required.

Written recommendations shall include a summary of all medical documentation reviewed, a summary of the question(s) raised on appeal, a recommendation regarding the question(s) raised on appeal, the reviewer's detailed, supporting rationale for recommendation, and a comprehensive list of any references used to make a recommendation. If references are utilized by the Medical Providers in the recommendations, a copy of or active link to the referenced documents must be provided with the recommendation.

Each written recommendation will follow a standardized Qsource template that includes:

- Summary of all medical documentation reviewed, including relevant clinical findings, diagnostics, treatments, timelines, and provider notes.
- Summary of the questions raised in the appeal, demonstrating clear understanding of the issue.
- Reviewer's formal recommendation directly addressing each question.
- Detailed rationale, citing clinical evidence, policy text, and professional judgment.
- Comprehensive list of all references used, with copies or active links to all referenced documents.
- Qsource's internal Quality Assurance (QA) process validates completeness, clarity, and fidelity to requirements before submission.

Format of the written recommendation shall be subject to the approval of the Office of Appeals Director.

Qsource will tailor its written recommendation format to any specifications approved by the Office of Appeals Director. We will work with DOM to create all necessary templates and forms, provide clear communication, and supply training materials for review before their utilization. Qsource offers a dedicated team of healthcare technical writers to design and produce professional reports, in compliance with DOM's desired standards and CMS guidelines (including Section 508 accessibility compliance). Qsource appreciates feedback on the tools used and reports generated for DOM.

- Qsource will participate in post-award onboarding, formatting alignment meetings, and template refinement.
- Our document production process supports rapid reformatting, version control, and consistent compliance across all reviewers.

Standard Requests: Written, detailed recommendations shall be provided to DOM seven (7) business days after the initial request and supporting documentation are submitted via the secured portal. If DOM submits additional documentation after the initial request, the Contractor shall provide the detailed recommendations to DOM no later than seven (7) business days following the submission of that additional documentation.

Qsource will meet or exceed the required timetable by:

- Immediately logging new cases received via the secure portal.
- Assigning the case to the appropriate specialty reviewer within four business hours.
- Conducting medical, policy, and regulatory review within the standard request timeframe.
- Completing QA review and submitting the final written recommendation within seven (7) business days of receipt of the complete documentation.
- If additional documentation is provided, Qsource resets the internal clock and guarantees return of the recommendation within seven (7) business days of receiving the new documentation.

Expedited Requests: Written, detailed recommendations for any expedited appeal requests shall be provided to DOM within one (1) business day via the secured portal. If DOM submits additional documentation after the initial expedited request, the Contractor shall provide the detailed recommendations to DOM no later than one (1) business day after expedited request is submitted via the secured portal.

For expedited appeal requests, Qsource will:

- Activate a rapid-response workflow monitored 24/7.
- Assign an on-call specialty reviewer immediately upon receipt.
- Deliver a complete written recommendation within one (1) business day via the secure portal.
- If additional documentation is submitted by DOM, Qsource will return the updated recommendation within one (1) business day of receipt.

When requested by DOM, the Medical Providers must attend telephonic hearings and provide detailed, knowledgeable testimony in support of their written recommendations. Medical Providers must be able to discuss and answer any questions that the parties may have regarding written recommendations in detail.

Qsource Medical Providers will participate in hearings as requested by DOM, and will:

- Provide informed, expert testimony aligned with their written recommendations.
- Respond to questions posed by hearing officers, DOM, appellants, or other parties.
- Demonstrate full mastery of the clinical, policy, and regulatory basis for their recommendation.
- Qsource's hearing preparation protocols ensure consistency, accuracy, and professionalism during all proceedings.

Medical Providers must be flexible in their availability for hearings related to the case. Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings. Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time.

Qsource ensures that Medical Providers:

- Maintain flexible scheduling to accommodate hearings during CST business hours.
- Successfully complete DOM-provided training regarding documentation standards, testimony expectations, and hearing etiquette.
- Adhere to professional conduct expectations at all times, representing Qsource and DOM with integrity.
- Out-of-state Medical Providers will adjust availability to align with CST requirements.

Contractor shall be able to provide a certified biller/coder's review and recommendation for certain cases upon request by the Office of Appeals, on cases that a specialized coding review is necessary.

Qsource can supply certified medical coders capable of performing specialized coding reviews when requested by the Office of Appeals.

- Coding experts will evaluate whether diagnosis codes, procedure codes, modifiers, and billing practices align with medical necessity, billing rules, and documentation standards.
- A written coding rationale will accompany the medical recommendation as appropriate.

Qsource has on staff employees with coding credentials, and will supply certified billers/coders as needed for reviews and recommendations for certain cases upon request by the Office of Appeals.

If a Medical Provider's behavior during a hearing, rises to the level of misconduct, the Contractor forfeits full payment from DOM for that hearing and must immediately remove that Medical Provider from DOM's network.

Qsource conducts background checks on all employees and enforces a strict professional conduct policy for all Medical Providers participating in hearings. If a Medical Provider's behavior meets the definition of misconduct (e.g., rudeness, hostility, or inability to answer questions):

- Qsource will immediately remove the provider from DOM's network.
- Retrain and replace as necessary to prevent recurrence.
- Accept forfeiture of hearing payment as outlined by DOM.
- Continuous performance monitoring and pre-hearing preparation help prevent misconduct and ensure quality.

The Contractor agrees to submit all recommendations in accordance with the deadlines established in sections 2.1.1.5 and 2.1.1.6. In the event the Contractor fails to submit a recommendation by the required deadline without receiving prior approval from Office of Appeals, the Contractor shall forfeit any right to payment for that specific recommendation. DOM shall have no obligation to pay, in whole or in part, for any untimely submission that fails to meet this approval requirement.

Qsource fully agrees to comply with all deadlines required in Sections 2.1.1.5 (standard requests) and 2.1.1.6 (expedited requests).

- Our internal workflow includes automated timestamping, deadline alerts, and escalation pathways.
- Supervisors monitor all case timelines through real-time dashboards.
  Qsource will not submit late recommendations without prior approval from DOM and acknowledges forfeiture of payment for any non-approved late submissions.

[END OF RESPONSE]

System Requirements

Qsource is equipped to meet the Mississippi Division of Medicaid (DOM)'s analytic and operational requirements through a combination of secure infrastructure, experienced personnel, and disciplined execution. Our technical environment is certified by HITRUST and meets all HIPAA and SOC 2 Type 2 standards. We use FedRAMP-authorized platforms for data transfer and storage, and our internal systems follow federal best practices for handling sensitive data.

As part of the DOM contract, Qsource can provide a Secured Portal with user access & authentication features that secure credential-based login requirements, role-based access, and HIPAA-compliant security

As we have for other, similar contracts for other states, Qsource can provide a secure Portal with a Dashboard / Homepage that provides a Summary of Cases, which will display a list or summary of pending, in-process, on hold, and completed external review requests, as well as Quick Actions, with buttons to start a new review, search cases, or view detailed case statuses.

As part of the secure Portal, Qsource can provide a **Case Intake & Management tool** to include

- Case Submission: DOM can submit requests for external review of medically necessary appeals. Submission includes attaching all relevant documentation such as denial notices, medical records, clinical notes, and treatment plans. Ability to submit voluminous medical records for one appeal.
- Automated Case Numbering & Tracking: Each case is assigned a unique identifier for easy tracking.

The secure Portal will feature a **Medical Review Interface** to:

- Review Assignment: Cases are assigned to qualified external medical reviewers based on specialty and availability. Ability to schedule Reviewer for virtual hearing, if needed.
- Case Details Display: Reviewers to review all documentation, to include summary of the denial, clinical information, state policy citations, and relevant medical necessity criteria.
- Reviewer Tools, with the ability to enter detailed recommendations, findings, and conclusions, access to guidelines or medical necessity criteria embedded or linked in the portal, and the option to request additional information from DOM.

A **Communications & notifications tool** will be a feature of the Portal, including

- Automated Notifications: Alerts sent to DOM when Reviewers are assigned, completed, or if additional info is requested.
- Messaging System: Secure internal messaging for communication between Reviewers, Contractors, and DOM.
- Status Updates: Real-time updates on case status accessible to authorized user.

[END OF RESPONSE]

Attachment C: Contract Draft Acknowledgement

IFB # 20251031

Qsource

Attachment C – Contract Draft Acknowledgement

The Bidder shall be required to sign and submit this formal acknowledgment confirming that they have received, reviewed, and fully understood the draft contract, Appendix 3. By signing this acknowledgment, the Bidder affirms acceptance of the terms, conditions, and obligations set forth therein, and agrees to be bound by the provisions of the contract as finalized.

Company Name:	Qsource
Signature:	
Title:	Mary-Lyn Baldauf, Chief Executive Officer
Date:	January 9, 2026

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Attachment D: DHHS Certification Drug-Free Workplace

IFB # 20251031

Qsource

Attachment D - DHHS Certification Drug-Free Workplace

DHHS CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS:

GRANTEES OTHER THAN INDIVIDUALS

Instructions for Certification

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

1) This certification is required by regulations implementing the Drug-Free Act of 1988, 2 CFR Part 382. The regulations require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the DHHS determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
2) Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee shall keep the identity of the workplace(s) on file in its office and make the information available for federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
3) Workplace identifications shall include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
4) If the workplace identified to DOM changes during the performance of the grant, the grantee shall inform DOM of the change(s), if it previously identified the workplaces in question (see above).
5) Definitions of terms in the Non-procurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:
    - "Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. §812) and as further defined by regulation (21 CFR § 1308.11 through § 1308.15);
    - "Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes;
    - "Criminal drug statute" means a federal or non-federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

6) "Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including (i) all direct charge employees; (ii) all indirect charge employees unless their impact

or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent Contractors not on the grantee's payroll; or employees of sub recipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

b) Establishing an ongoing drug-free awareness program to inform employees about:

1) The dangers of drug abuse in the workplace;
2) The grantee's policy of maintaining a drug-free workplace;
3) Any available drug counseling, rehabilitation, and employee assistance programs; and
4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

1) Abide by the terms of the statement; and
2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e) Notifying DOM in writing, within 10 calendar days after receiving notice under paragraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted:

1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;

g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

h) Complying with all provisions 2 CFR Part 382.

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments if needed):

a) Place of Performance (street address, city, county, state, zip code)
b) Check if there are workplaces on file that are not identified here.

---->NOTE: Sections 76.630(c) and (d) (2) and 76.635(a)(1) and (b) provide that a federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For HHS, the central receipt point is Division of Grants Management and Oversight, Office of Management and Acquisition, HHS, Room 517-D, 200 Independence Ave, S.W., Washington, D.C. 20201

Company Name:	Qsource
Signature:	
Title:	Mary-Lyn Baldauf, Chief Executive Officer
Date:	January 9, 2026

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Attachment E: DHHS Certification Debarment, Suspension, and Other Responsibility Matters

IFB # 20251031

Qsource

Attachment E - DHHS Certification Debarment, Suspension, and Other Responsibility Matters

DHHS Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Primary Covered Transactions

2 CFR Part 376,

(1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:

a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;

b. Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and,

d. Have not within a three-year period preceding this bid had one or more public transactions (federal, state or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

Company Name:	Qsource
Signature:	
Title:	Mary-Lyn Baldauf, Chief Executive Officer
Date:	January 9, 2026

Attachment F: Proprietary Information Form

IFB # 20251031

Qsource

Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☐	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 through 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.

☒	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.

_____ January 9, 2026

Signature of Authorized Official Date

Qsource

Name of Organization

Attachment G: References

IFB # 20251031

Qsource

Attachment G – References

BIDDER NAME: Qsource

Reference 1	
Name of Company:	Office of Preparedness and Emergency Response Systems at the Arkansas Department of Health.
Dates of Service:	9/1/2023 - present
Contact Person:	Christy Kresse, Public Health Section Chief
Address:	4815 W Markham St
City/State/ZIP:	Little Rock, AR 72205
Telephone Number:	501-661-2178
Cell Number:	
Email:	christine.kresse@arkansas.gov
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	
Reference 2	
Name of Company:	Arkansas Department of Health Preventable Mortality Committee
Dates of Service:	9/1/2023 - present
Contact Person:	Mike Hillis, MD
Address:	4815 W Markham St
City/State/ZIP:	Little Rock, AR 72205
Telephone Number:	479-979-4452
Cell Number:	
Email:	
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	
Reference 3	
Name of Company:	Arkansas State Quality Improvement Committee
Dates of Service:	9/1/2023 - present
Contact Person:	Scott Lewis, MD
Address:	4815 W Markham St
City/State/ZIP:	Little Rock, AR 72205
Telephone Number:	870-892-6245
Cell Number:	
Email:	
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

Attachment G – References

BIDDER NAME: Qsource

Reference 1	
Name of Company:	Arkansas Dept. of Health Preventable Mortality Committee
Dates of Service:	9/1/2023 - present
Contact Person:	Deidre Wyrick, MD
Address:	4815 W Markham St
City/State/ZIP:	Little Rock, AR 72205
Telephone Number:	501-364-1446
Cell Number:	501-743-9559
Email:	
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	
Reference 2	
Name of Company:	Arkansas Dept. of Health Preventable Mortality Committee
Dates of Service:	9/1/2023 - present
Contact Person:	Charles Mabry, MD
Address:	4815 W Markham St
City/State/ZIP:	Little Rock, AR 72205
Telephone Number:	870-540-9494
Cell Number:	
Email:	
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	
Reference 3	
Name of Company:	
Dates of Service:	
Contact Person:	
Address:	
City/State/ZIP:	
Telephone Number:	
Cell Number:	
Email:	
Alternate Contact Person (optional):	
Alternate Contact Telephone Number:	
Alternate Contact Cell Number:	
Alternate Contact Email:	

Review the reference requirements in **IFB Section 1.10.2**. Bidder may submit as many references as desired by submitting as many additional copies of **Attachment G, References**, as deemed necessary. References will be contacted at random until two references have been contacted and Reference Survey Score Sheets completed for each of the two references. Bidders are encouraged to submit additional references to ensure that at least two references are available and all IFB requirements are met.

Attachment H: Bidder's IFB Response Checklist

IFB # 20251031

Qsource

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected because the respondent simply failed to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

BIDDER NAME: Qsource			✓	**N/A**
MANDATORY LETTER OF INTENT				
1		IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***	✓	
SHAREPOINT REGISTRATION VERIFICATION				
2		Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)		
BID SUBMISSION PACKET Due Date Friday, December 12, 2025, by 2:00 p.m. CST				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required)	✓	
	b	Attachment B – Bid Form (Signature Required)	✓	
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.	✓	
	d	Attachment C – Contract Draft Acknowledgement	✓	
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)	✓	
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)	✓	
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.	✓	
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.	✓	
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)	✓	
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.	✓	
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.	✓	
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December 12, 2025, by 2:00 p.m. CST.***	✓	

Bid Submitted By: _____ January 9, 2026

Authorized Signature Date

Attachment I: Amendment Acknowledgement

IFB # 20251031

Qsource

MISSISSIPPI DIVISION OF MEDICAID

Date: November 26, 2025

Amendment #1 Questions and Answers and Pre-Bid Submission Conference PowerPoint Presentation

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is December 12, 2025 by 2:00 p.m.

Question #	RFP Section #	RFP Page #	Question	DOM Response
1	N/A	N/A	What is the current pricing for this scope of work?	The current incumbent pricing is as follows: • Appeal Review and/or Length of Stay Review: Flat hourly rate of $150 • Medicaid Hearing & Report Preparation: Hourly rate of $155.
2	1.8	7	Does the single fixed hourly rate specified in the bid, cover all aspects of the service, including the detailed medical review, writing the recommendation, and all time associated with preparatin for and attendance at required telephonic hearings?	Yes. The single fixed hourly rate specified in the IFB on the Bid Form is intended to cover all aspects of the required service. As outlined in the Service Description, the hourly rate encompasses Appeal Review, Hearing and Report Preparation.
3	1.10.2	8	What is the most frequently requested medical specialties and percentage of breakdown of reviews by specialty over the past 12 to 24 months?	Please refer to Appendix 2 – Historical Data (pages 40-42) of the IFB for a breakdown of reviews by medical specialties for 2024 and 2025 to date.

4	1.10.2	8	In the event that a specialty physician is not licensed in Mississippi, can the Mississippi licensed physician who must review and sign off on the recommendation be of any specialty?	If the reviewing physician is not of the same specialty as the case, a Mississippi-licensed physician can be of any specialty, however, general practice is preferred to provide the required review and sign-off.
5	1.10.2 and 3.4.14	9 and 20	The text for #4 on Page 9 states, "Bidders shall provide written, detailed validation describing Bidder's ability to meet each of the qualifications and perform the scope of services (no more than 5 pages)." Two questions: 1) Does the Scope of Services include the General Requirements on pages 11-12 AND the System Requirements on pages 13-14, or just the General Requirements? 2) Please clarify the number of pages the bidder has to respond to the Scope of Services section because above it states "no more than five pages," yet Section 3.4.14 - Bid Submission format states: "At the end of each response to an element by the Bidder, the Bidder should type "[END OF RESPONSE]" and leave the remainder of the page blank, beginning the response to the next element on the next page." There are 16 "elements" between the General Requirements (2.1.1.1-2.1.1.11) and System Requirements (2.2.1-.2.2.5), plus four (4) "elements" under Minimum Qualifications (pages 8-9). If the bidder follows the Section 3.4.14 guideline, it would require 20 pages to ensure each response falls/begins on its own page.	1) Yes. For purposes of Item #4 on Page 9, the Scope of Services includes both the General Requirements and the System Requirements. 2) Section 3.4.14 only relates to the items listed at 1.10.2 Minimum Qualifications (Attachment B: Addendum 1) •• 1st Element •• Addendum 1: Minimum Qualifications, 1.10.2(1) Bidders Experience Requirement *add your documentation and then state END OF RESPONSE •• 2nd Element •• Addendum 1: Minimum Qualifications, 1.10.2(2) Bidder Licenses/Certifications * add your documentation and then state END OF RESPONSE •• 3rd Element •• Addendum 1: Minimum Qualifications 1.10.2(4) Bidder's Narrative * add your documentation and then state END OF RESPONSE **The 3rd Element (1.10.2 (4)) is the only element that is limited to no more than 5 pages. **Note**: For Element 1.10.2(3) Minimum Qualifications References. Follow the required documenting format.

6	1.10.2 (1) and (3)	8	Our company is authorized to provide external reviews in 30+ states which we will identify per 1.10.2 (1). Per 1.10.2 (3), are we required to provide reference contacts for all 30+ states where we're licensed/certified/contracted to provide external reviews?	Please provide 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references, will be sufficient.
7	2	11	What is your criteria for extension? How much advance notice is the contracted company given if it is or isn't extended?	1) An extension is based solely on satisfactory performance of the contracted vendor. 2) If performance is satisfactory, the amended contract will proceed through DOM's internal review process before being submitted to our regulatory board, which requires a minimum one-month approval period. If performance is unsatisfactory, DOM will follow the specific termination clauses outlined in the contract.
8	2.1.1.1	11	Are there specific data integration requirements, API protocols or established DOM systems (e.g., for case intake or claims processing) that the Contractor's secured portal must interface with, or is the Contractor expected to provide a fully independent standalone system for all case management and data exchange?	The Contractor is expected to provide an independent, standalone system that DOM personnel will utilize for all case management and data exchange.
9	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide an average number of reviews to be performed per month?	A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.
10	2.1.1.1	12	It is stated the number of reviews "vary from month to month." Can you provide a total volume of cases performed in 2024? Total volume of hearings?	A month to month estimate of reviews has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

11	2.1.1.2	12	It is stated "*includes a copy* of any and all medical criteria or clinical guidelines..." Can you elaborate what the expectation is for "including a copy?"	DOM Appeals will give you a policy to review to uphold or overturn the managed care organizations' denials. If you have any additional references that you utilized in making the determination, DOM Appeals would like those listed and on hand in case of a hearing. Our priority is that the policy and criteria provided from the managed care organization is applied properly to the medical case.
12	2.1.1.2	11	Can the DOM provide bidders with a sample of a determination or a sample format expected for a determination?	Yes, A sample format will be provided with Amendment 1, Questions and Answers.
13	2.1.1.3	11	Section 2.1.1.3 states that copies or active links to referenced documents must be incuded with recommendations. Many clinical references are proprietary, require subscripions, and cannot legally be redistributed. Will DOM allow venders to cite these resources without providing full copies due to copyright and royalty restrictions?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
14	2.1.1.4	11	If active links lead to subscription based resources that DOM staff cannot access without a license, will DOM consider alternative documentation methods?	The vendor should only utilize references that can be provided to DOM and hearing attendees via PDF related to their determination reviews, if necessary.
15	2.1.1.5	11	In situations that extention on the submission deadline is needed, can extensions be granted? If so, what is the length of extension?	Yes, an extension may be granted when necessary; however, such instances are expected to be rare. In general, no more than an additional week should be needed. All determinations are expected to be submitted in a timely manner.
16	2.1.1.5 and 2.1.1.6		What is the historial annual volume of completed reviews by turnaround time? (ie: standard vs expedited).	There are typically only 2-4 expedited requests per year.

17	2.1.1.7	12	Please provide an estimate on the number of telephonic hearings per year and how many there were in 2024 and 2025.	An estimate of review requests vs hearings has been included with Appendix 2 -Historical Data as part of Amendment 1, Questions and Answers.
18	2.1.1.8	12	Please clarify what DOM defines as the "appropriate training by DOM staff" referenced in section 2.1.1.8. What training content is included?	The IFB incorrectly stated that DOM Appeals would conduct training for the Medical Reviewers. This was an error and shall be corrected in Amendment 2. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include: • Appeals and Hearing processes and de corum • Requirements for timely and efficient reviews, including flexibility in scheduling • Confidentiality and HIPAA compliance.
19	2.1.1.8	12	How long does the required DOM training take to complete, and what is the method of delivery?	See answer to number 18.

20	2.1.1.8	12	Given that our reviewers are all active clinical practices and may not always be available at the exact hearing times requested- especially when hearings are scheduled on short notice- will DOM allow reasonable scheduling flexability?	Yes. DOM will make reasonable efforts to accommodate scheduling needs; however, clinical reviewers should maintain sufficient flexibility to ensure hearings are completed in a timely manner. Federal regulations require that beneficiary hearings be concluded within 90 days of receipt by the Office of Appeals, and scheduling must support compliance with these requirements.
21	2.1.1.9	12	Section 2.1.1.9 requires the Contractor to provide a certified biller/coder's review upon request from the Office of Appeals. Our organization performs coding reviews but not billing reviews. Will DOM confirm whether billing review is a mandatory requirement for this contract, or if coding-only reviews are acceptable?	Yes, a certified biller/coder review is required on cases where a specialized biller/coder review is necessary.
22	2.1.1.11	12	What is the formal, written process for obtaining "prior approval" from the Office of Appeals to extend a deadline?	Requests for prior approval must be submitted by email to DOM's Appeal Contact Person. Any such requests must be made promptly, as timeliness in submitting determinations is essential.
23	2.2	12	What are the average frequency and length of telephonic hearings?	The length of the hearings are typically 1 to 1.5 hours with some lasting up to 3 hours on a rare occasion. A medical reviewer may provide the statement and be examined and does not have to attend the full hearing. A month to month estimate of review requests vs hearings has been included with Appendix 2 - Historical Data as part of Amendment 1, Questions and Answers.

24	2.2	12	Are all Medical Providers who participate on this contract expected to complete the DOM training for hearings? What is the length of the training, and how is it conducted? Also, can the training be done at any time?	See answer to number 18.
25	2.3	14	What components of this contract require travel, if any?	Travel is not required. All hearings are conducted by telephonic call-in, with video hearings occurring only in very rare occurrence.
26	2.3	14	Will medical providers and/or staff be required to travel to Mississippi or elsewhere for any reason?	See answer to number 25.
27	2.3	14	If DOM requires travel to be included, can DOM clarify typical travel expectations and historical frequency of required in-person attendance?	See answer to number 25.
28	2.3	14	Will DOM allow virtual participation in place of in-person travel when appropriate?	See answer to number 25.
29	3.4	16	What is the current incumbent pricing?	See answer to number 1.
30	Attachment B - Bid Form	25	What are the hourly rates of the current vendor?	See answer to number 1.

31	Attachment B – Bid Form Certifications #5	26	Can the Division confirm what "applicable licenses" will be necessary for the bidder to have or secure? For example: an Independent Review Organization (IRO) license from the Mississippi Department of Insurance. And does this include any accreditations or certifications, such as URAC?	Attachment B - Bid Form Certification #5 refers to applicable licensed and certified personnel who are qualified to perform the duties required under the IFB. For the organization, DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, accreditation by NCQA for Utilization Management is preferred but not required. Amendment 2, will amend this language.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment. This Amendment must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #1 Acknowledged:

_____

Signature

Mary-Lyn Baldauf

Printed Name

Chief Executive Officer

Title

Qsource

Entity Name

Amendment 1 – Questions and Answers - IFB #20251031

Appendix 2 - Historical Data – UPDATED

MLS Group of Companies, LLC

January 2025 to Date

Total Number of Reviews	67
Estimated Number of Hours	211

Anesthesiology	1
Certified Coder	3
Child & Adolescent Psychiatry	7
Dentistry	1
Internal Medicine	41
Neurological Surgery	2
Obstetrics & Gynecology	1
Occupational Therapist	1
Pediatrics	2
Plastic Surgery	2
Psychiatry	4
Speech-Language Pathologist	2

2024

Total Number of Reviews	130
Estimated Number of Hours	306

Cardiovascular Disease	2
Child & Adolescent Psychiatry	3
Dentistry	13
General Surgery	3
Internal Medicine	60
Neurology Q Child Neurology	3

Occupational Therapist	4
Pain Medicine	1
Pediatrics	20
Physical Medicine & Rehabilitation	4
Plastic Surgery	6
Psychiatry	2
Speech-Language Pathologist	6

Month to Month MLS Reviews vs Hearings

2025	Total Review Request	Member Hearings
January	5	4
February	9	9
March	5	4
April	8	7
May	5	5
June	2	2
July	8	4
August	12	10
September	13	13
October	0	0
November		
December		

2024	Total Review Request	Member Hearings
January	8	8
February	3	3
March	6	6
April	24	24
May	23	23
June	12	12
July	6	6
August	17	17
September	5	4
October	13	13
November	6	5
December	7	7

Amendment 1 – Questions and Answers - IFB #20251031

Attachment – Sample of Determination format

Vendor Name and Logo

11/14/25

RE:	Claimant Name	:	
	Client	:	Mississippi Division of Medicaid
	Referred By	:	DOM Contact Person
	Type of Review	:	Adverse Benefit Determination
	Type of Service	:	State Hearing
	Appeal Level	:	SFH - Appeal

MEDICAL DOCUMENTATION REVIEWED

I have reviewed all of the documents provided.

Referral Document	Name of Document	Party Submitted By	10/14/2025
MSCAN Appeal Acknowledgement Letter	[redacted]	MCO	10/07/2025
Appeal Summary	Appeal Summary[redacted]	MCO	updated
Written Appeal	[redacted]	[redacted]	08/19/2025
Authorized Request Form Letter	[redacted]	MCO	08/19/2025
Notice of Appeal Resolution – Appeal Denied	Final_denial[redacted]	MCO	10/08/2025
MSCAN Appeal Acknowledgement Letter, Member Appeals Authorized Representative Form, POC,	[redacted] Appeal Docs PA.pdf	MCO	08/04/2025 - 10/07/2025
Notification of Adverse Benefit Determination for Requested Services	Initial_PADenial[redacted]	MCO	08/14/2025
Administrative Code: Title 23: Medicaid Part 213 Therapy Services	Policy.pdf	DOM	updated

Email	[redacted]	MCO/DOM	10/13/2025 – 10/14/2025
Member Appeals Authorized Representative Form	[redacted]	MCO	10/06/2025

SUMMARY OF MEDICAL DOCUMENTATION

[redacted]

QUESTION

1. **Do you agree with the original determination to partially deny the request on 8/11/XXXX for coverage of twenty-four (24) Speech Therapy visits for dates of service 8/12/XXXX-10/31/XXXX and approve visits to continue skilled therapy one (1) time per (for each) week with a total of Twelve (12) Speech Therapy visits approved.**

[redacted]

RATIONALE AND DETERMINATION

[redacted]

[redacted]

REFERENCE (S):

[redacted]

[redacted]

CONFLICT OF INTEREST:

[redacted]

Sincerely,

[redacted]

PRE-BID CONFERENCE ON SUBMISSION REQUIREMENTS EXTERNAL MEDICAL REVIEW CONSULTING IFB

MISSISSIPPI DIVISION OF MEDICAID

AGENDA

- Procurement Team
- Housekeeping
- Procurement Overview
- 5-Step Submission Process
- Bid Review Process
- Closing

MISSISSIPPI DIVISION OF MEDICAID

PROCUREMENT TEAM

procurement@medicaid.ms.gov

Kayla McKnight
Procurement Director
601.359.2286

Sharon Clark
Procurement Supervisor
601.359.6153

Jeanette Crawford
Procurement Team Leader
601.359.2664

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Please place your microphone on mute.

Please refrain from typing questions directly into the chat.

Presentation slides will be posted on DOM's website.

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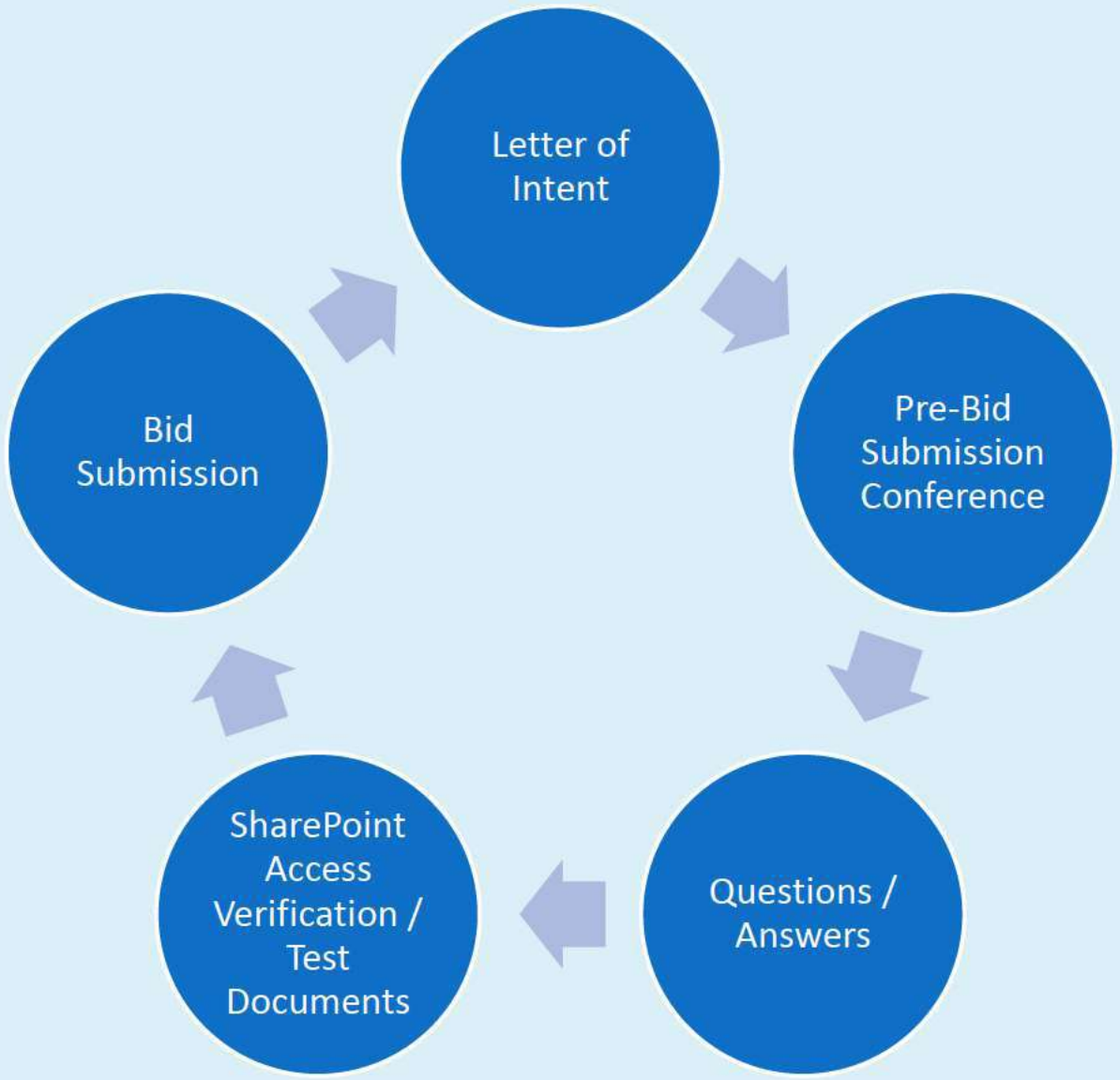
OVERVIEW

Understand	• Understand the bid submission process .
Educate	• Educate on the requirements of the submission.
Ensure	• Ensure the procurement process is fair and just to all vendors.

MISSISSIPPI DIVISION OF MEDICAID

FIVE (5) STEP SUBMISSION PROCESS



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PRE-BID SUBMISSION CONFERENCE

A record of all attendees will be taken.

Nothing stated in the Pre-Bid Submission Conference will change the submission requirements. Only an amendment can change submission requirements.

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QUESTIONS

- Questions are to be submitted using the Question-and-Answer template provided on the Medicaid website found at: https://Medicaid.ms.gov/resources/procurement
- Email questions to: procurement@medicaid.ms.gov with subject line: ***External Medical Review Consulting – Questions***.
- Procurement will email receipt confirmation.
- Questions received after the deadline will NOT be answered.
- A register of questions will be compiled, exactly as submitted.

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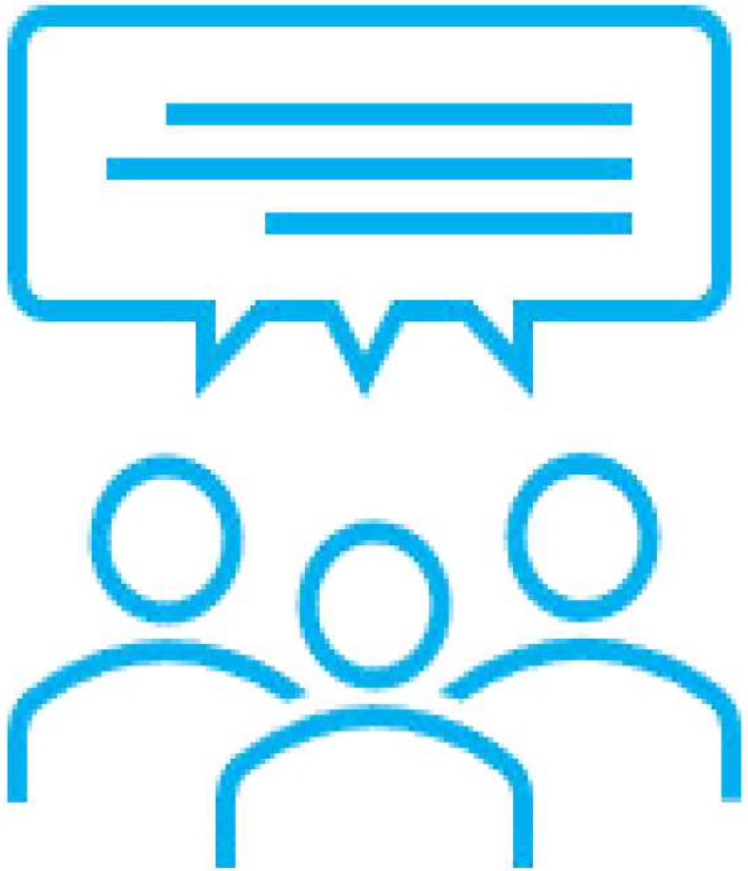

MISSISSIPPI DIVISION OF MEDICAID

ANSWERS

- Answers will be provided as an Amendment to the procurement.
- Amendment will be emailed directly to all vendors who have submitted a Letter of Intent.
- Amendment will be posted on Medicaid website and on the MS Contract / Procurement Opportunity Search portal website.
- Written answers provided are binding.
- All amendments will become part of the final contract as an attachment.

ACKNOWLEDGEMENT OF AMENDMENT(S)

All amendments issued by DOM must be signed by an authorized representative of the bidder. The signed acknowledgment of each amendment must be submitted with the bidder's response OR by any deadline specified within the amendment. All amendment acknowledgments must be included in submission as Attachment I: Amendment Acknowledgement(s).

Vendors who fail to submit all Amendment Acknowledgements may be deemed non-responsive.

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SHAREPOINT ACCESS

Bidders will only have access to their company's specific folder within SharePoint.

Upload a test document titled, "Test Document".

Email procurement@medicaid.ms.gov for confirmation of receipt of test documents in SharePoint.

Vendors are encouraged to confirm SharePoint access no later than two (2) days prior to the submission deadline to ensure sufficient time to resolve any technical issues. Issues with SharePoint access should be directed to: Sally.Harrison@medicaid.ms.gov and copy the procurement team.

Please do NOT remove the Test Documents from your SharePoint file.

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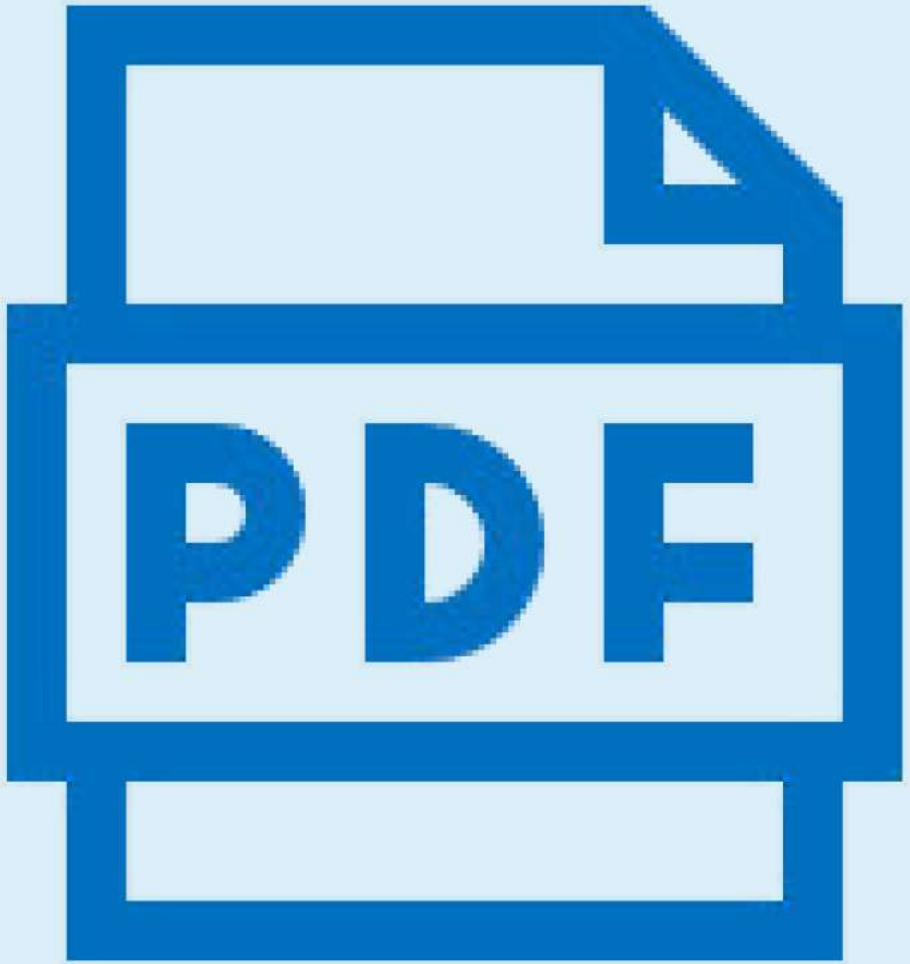

BID SUBMISSION REQUIREMENTS

You'll find a Bidder's Response checklist in the procurement documents. This checklist is a guide to help avoid any missing information. Required forms should not be modified. Incomplete submissions may be rejected.

All submissions must be in a single searchable Adobe Acrobat PDF file and must not be password protected.

Each Attachment is required to have a cover sheet and every page should be numbered with page number centered in the footer.

MISSISSIPPI DIVISION OF MEDICAID

IFB
Bidder's Name
Attachment A -Bid Cover Sheet

MISSISSIPPI DIVISION OF MEDICAID

Provide your narrative to the requested information under Bidder Experience Requirement.

END OF RESPONSE

Page Number here

PROPRIETARY INFORMATION FORM
Attachment F

Each vendor must make a selection on this form stating if you are providing both an unredacted and redacted submission or just an unredacted submission.

If your bid submission contains ***no proprietary information***, select the unredacted submission option. The entire document will then be released publicly along with the procurement file and posted on our website.

If you have ***proprietary information*** that will be redacted, select the redacted submission option and provide two copies of your bid submission – one unredacted and one redacted that shall be marked "**Public Copy**." This "**Public Copy**" will be released along with the procurement file and posted on our website.

Each page containing redaction of confidential commercial / financial information should be marked in the upper right-hand corner as "**Confidential**." Please redact the information in accordance with the Mississippi Public Records Act under Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1.

It is the responsibility of the bidder for any errors made in redaction of documents. **Pricing cannot be redacted.**

Attachment F – Proprietary Information Form

Designation of this form is required (Select One)

By designation and your signature below, you indicate that you understand that failure to clearly mark or designate proprietary information within the response to this solicitation as identified may result in disclosure of such information as it will be subject to review by the general public after award of the contract.

For all procurement contracts awarded by state agencies, the provisions of the contract which contain the personal or professional services provided, the price to be paid, and the term of the contract shall not be deemed to be a trade secret, or confidential commercial or financial information, and shall be available for examination, copying, or reproduction.

☐	Offeror hereby certifies that the complete unredacted copy of its submission may be released as a public record by DOM at any time without notice to vendor. The vendor explicitly waives any right to receive notice of a request to inspect, examine, copy, or reproduce its quote as provided in Mississippi Code Annotated § 25-61-9(1)(a). The submission contains no information vendor deems to be confidential commercial and financial information and/or trade secrets in accordance with Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. An Offeror who selects this option but submits a redacted copy of its submission may be deemed non-responsive.
☐	Along with a complete copy of its submission, Offeror has submitted a second copy of the submission document in which all information Offeror deems to be confidential commercial and financial information and/or trade secrets is redacted in black. Offeror acknowledges that it may be subject to exclusion pursuant to Chapter 15 of the PPRB OPSCR Rules and Regulations if DOM or the Public Procurement Review Board determine redactions were made in bad faith in order to prohibit public access to portions of the submission which are not subject to Mississippi Code Annotated §§ 25-61-9, 75-26-1 - 75-26-19, and/or 79-23-1. Vendor - acknowledges and agrees that DOM may release the redacted copy of the submission document at any time as a public record without further notice to the Offeror. An Offeror who selects this option but fails to submit a redacted copy of its submission may be deemed non-responsive.

Each page of the response considered by the respondent to contain trade secrets or other confidential commercial/financial information should be marked in the upper right-hand corner with the word "CONFIDENTIAL" and the related information should be redacted in black. The redacted copy of the submission should be in a single document and shall be clearly labeled "PUBLIC COPY" on the cover page. This copy should be in a searchable Microsoft Word or Adobe Acrobat (PDF) format. To the extent possible, confidential information should be redacted sentence by sentence unless all content on the page is clearly confidential under the law.

Any pages not marked accordingly will be subject to review by the general public after the award of the contract. Requests to review the proprietary information will be handled in accordance with applicable legal procedures. Failure to clearly identify trade secrets or other confidential commercial/financial information may result in that information being released in a public records request.

_____ _____

Signature of Authorized Official Date

_____

Name of Organization

Although references are listed as a requirement under Minimum Qualifications, Addendum 1, you will NOT provide references in a narrative format. Bidders should provide references using Attachment G form provided in the IFB.

Bidders must provide a list of past and/or current engagements for which the bidder performed similar services.

The Procurement Team will contact your references randomly until two individuals can be reached within 3 business days from bid due date.

MISSISSIPPI DIVISION OF MEDICAID

REQUIRED DOCUMENTS

Please ensure all documents that require signatures are signed and all applicable form fields are completed.

READY FOR BID SUBMISSION

Submit your bid as a single searchable PDF format and do not include embedded web links.

Only upload the bid in SharePoint. Do not email a copy of the bid to the Procurement Team.

You may email Procurement to verify receipt in SharePoint at: procurement@medicaid.ms.gov

The Procurement Team will not open your bid submission at that time.

Procurement will only verify that the document has been uploaded and visible in SharePoint.

Procurement will email vendor that Submission has been received.

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BID REVIEW PROCESS

- The Procurement Team will review the Bid Submissions to ensure that all required documents have been provided in accordance with the Bid Response Checklist. Bidders not submitting all the documents may be deemed ***non-responsive***.
- The Procurement Team will review the Bid Submissions to ensure that documents or narratives have been provided in accordance with the Minimum Qualifications section. Bidders not submitting all of the requested information may be deemed ***non-responsible***.
- After the responsive and responsible bidder(s) have been determined, the award will be made to the bidder with the lowest cost on the Bid Form (Attachment B). Remember, required forms, including the Bid Form, CANNOT be modified.
- After review has been completed and an award is made, the ***Notice of Intent to Award*** will be emailed directly to all vendors who submitted bids. The Notice of Intent to Award will also be posted on DOM's website, in the MS Procurement Portal and in MAGIC.

MISSISSIPPI DIVISION OF MEDICAID

CLOSING

MISSISSIPPI DIVISION OF MEDICAID

Amendment #2 - Clarifications

External Medical Review Consulting

IFB #20251031 RFX #3160007625

Date: November 26, 2025

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

2.1.1.8 (**General Requirements**) Medical Providers must be flexible in their availability for hearings related to the case. ~~Medical Providers shall receive the appropriate training by DOM staff regarding the amount of detail required in the recommendations and have knowledge of appropriate conduct when testifying on the Contractor's behalf in the hearings.~~ Any Out-of-State Medical Providers must be available during the regular business hours of Central Standard Time. The Contractor will be responsible for all training related to Medical Review and Hearing functions and must ensure that all Medical Reviewers within DOM's network receive this training. DOM does not prescribe the training methods or timeframes and allows the Contractor full discretion in determining how the training is delivered. The Contractor must maintain training records and provide them to DOM upon request. Required training should include:

- Appeals and Hearing processes and decorum
- Requirements for timely and efficient reviews, including flexibility in scheduling
- Confidentiality and HIPAA compliance.

1.10.2 (3) References

From the list of engagements provided at **IFB Section 1.10.2 (1)**, the Bidder shall provide reference contacts for ~~all engagements .~~6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.

1.10.2 (2) Bidder Licenses/Certifications

Medical Providers

Bidder must warrant that all physicians (the "Medical Providers") providing medical recommendations and attending hearings possess the necessary licenses and board certifications required to perform the services and will maintain current and valid credentials throughout the duration of the engagement. Each Medical Provider shall be licensed to practice in Mississippi. If a specialty physician is not licensed in Mississippi, a Mississippi licensed physician must review and sign off on the recommendation. The Bidder must provide a list of all participating Medical Providers and attest that they meet these licensure and board certification requirements. The Bidder must also attest that the Medical Providers have the relevant experience in the specialty and detail the number of years of experience. While DOM prefers at least two (2) years of experience, there is no minimum experience requirement for Medical Providers. If

a Medical Provider has no prior experience in the specialty area, the Bidder should state 'None' or '0' years for that provider.

Bidder Company

DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). In addition, an accreditation by NCQA for Utilization Management is preferred but not required.

The bid due date remains unchanged: December 12, 2025, by 2:00 p.m.

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #2 Acknowledged:

_____
Signature

Mary-Lyn Baldauf
_____
Printed Name

Chief Executive Officer
_____
Title

Qsource
_____
Entity Name

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #3 – CLARIFICATION

CHANGE TO BID DUE DATE

EXTERNAL MEDICAL REVIEW CONSULTING

IFB #20251031 RFX #3160007625

Date: December 9, 2025

Due to an administrative error, the following sections of IFB #20251031 have been amended.

1. COVER PAGE is modified as follows: Bid Response Deadline: Friday, December ~~12~~19, 2025, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~12/12/2025~~ 12/19/2025	Bid Deadline (by 2:00 p.m.)
1/02/2025	Anticipated Date of Notice of Intent to Award
2/04/2026	Public Procurement Review Board meeting date (proposed)
2/09/2026	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, Friday, December ~~12~~19, 2025,** on or before **2:00 p.m., CST.**

5. Attachment H – Bidder's IFB Response Checklist is modified as follows:

BIDDER NAME:			✓	**N/A**
MANDATORY LETTER OF INTENT				
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***			
SHAREPOINT REGISTRATION VERIFICATION				
2	Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site. (Assistance must have been requested at least two (2) business days prior to due date.)			
BID SUBMISSION PACKET **Due Date Friday, December ~~12~~19, 2025, by 2:00 p.m. CST**				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required)		
	b	Attachment B – Bid Form (Signature Required)		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format.		
	d	Attachment C – Contract Draft Acknowledgement		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required)		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required)		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required)		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14.		
4	Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ***Friday, December ~~12~~19, 2025, by 2:00 p.m. CST.***			

MISSISSIPPI DIVISION OF
MEDICAID

This Amendment must be signed and submitted as part of any bid submission to be considered for this procurement.

Receipt of Amendment #3 Acknowledged:

Signature

Mary-Lyn Baldauf

Printed Name

Chief Executive Officer

Title

Qsource

Entity Name

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201

MISSISSIPPI DIVISION OF MEDICAID

AMENDMENT #4

External Medical Review Consulting

IFB #20251031

Issued December 24, 2025

Revised IFB – Re-submission of IFB Bids

RE-SUBMISSION DUE DATE: Friday, January 16, 2026, by 2:00 p.m.

This Amendment serves as formal notice that the Mississippi Division of Medicaid (DOM) is providing a new submission deadline for Invitation for Bid (IFB) #20251031 for External Medical Review Consulting services due to various submission deficiencies. Only bidders that submitted a Letter of Intent by the original deadline of November 14, 2025, are eligible for this re-submission of bid allowance.

Pursuant to Section 3.10 of the IFB, DOM expressly reserves the right to reject any and all bids, in whole or in part, when it is determined to be in the best interest of the agency. To ensure fair and open competition, DOM has elected to reject all bids and allow for re-submission of responses to the IFB.

As further clarification, DOM has revised Attachment H, Bidder's IFB Response Checklist to further assist bidders with preparing their bid submission.

To be a responsive and responsible bidder, the following conditions must apply:

- Bidders must adhere to **all** required formats, minimum qualifications, and submission requirements as stated in the IFB and its amendments.

In accordance with PPRB Section 5.7.3, DOM will not retain the original bid submissions in the Agency Procurement files. All original bids will be deleted. Only enough information necessary to support the decision to reject the bids will be retained. Therefore, bidders are free to make any adjustments they would like for the new submission deadline.

Please refer back to IFB and all Amendments before submitting bid responses.

Failure to submit a responsive bid may result in the rejection of the bid.

Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of ***Friday, January 16, 2026, by 2:00 p.m.***

Remainder Of This Page Intentionally Left Blank

This Amendment must be signed and submitted as a part of any bid to be considered for this procurement. The following sections of IFB #20251031 have been amended for the following:

1. COVER PAGE is modified as follows: Bid Response Deadline: ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026, at 2:00 p.m. CST.

2. 1.3 Procurement Timeline: Figure 1.1: Procurement Timetable is modified as follows:

Date	Process
10/31/2025	Release of Invitation for Bid
11/14/2025	Mandatory Letter of Intent (by 2:00 p.m.)
11/17/2025	Pre-Bid Conference (10:00 a.m.)
11/19/2025	Written Questions Deadline (by 2:00 p.m.)
11/26/2025	Anticipated Date of Posting Written Answers (by 5:00 p.m.)
~~**12/12/2025 12/19/2025**~~ **1/16/2026**	Bid Deadline (by 2:00 p.m.)
~~**1/02/2025**~~ **1/30/2026**	Anticipated Date of Notice of Intent to Award
~~**2/04/2026**~~ **3/4/2026**	Public Procurement Review Board meeting date (proposed)
~~**2/09/2026**~~ **3/9/2026**	Anticipated Contract Start

3. 1.6 Bid Submission Requirements is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025~~ Friday, January 16, 2026.**

4. Attachment A – Bid Cover Sheet IFB #: 20251031 is modified as follows:

   Bids shall be submitted electronically through a **SharePoint site ONLY** maintained by DOM **by 2:00 p.m. CST, ~~Friday, December 1219, 2025,~~ Friday, January 16, 2026.**

5. Attachment H – Bidder's IFB Response Checklist is modified to further clarify submission requirements and emphasize the importance of completing a fully compliant IFB response.

Attachment H – Bidder's IFB Response Checklist

Please review this checklist to ensure that you have properly followed the instructions. Many proposals are rejected due to respondents simply failing to comply with the required preparation and submission requirements. All Attachments are to remain unmodified.

	BIDDER NAME:	✓	**N/A**
	MANDATORY LETTER OF INTENT		
1	IFB Attachment I - Mandatory Letter of Intent (Signature Required) submitted to procurement@medicaid.ms.gov. ~~On or before due date: ***Friday, November 14, 2025, by 2:00 p.m. CST***~~ **Only vendors who submitted the Mandatory Letter of Intent by the original deadline are permitted to participate in this re-submission of the IFB.**		
	SHAREPOINT REGISTRATION VERIFICATION		
2	~~Bidder verifies receipt of previous SharePoint registration for Bid Submission and has accessed the site.~~ Bidder's SharePoint access will be reinstated until the revised IFB submission deadline of		

		Friday, January 16, 2026, 2:00 p.m. (Assistance must have been requested at least two (2) business days prior to due date.)		
BID SUBMISSION PACKET Due Date Friday, January 16, 2026, by 2:00 p.m. CST				
3	a	Attachment A – Bid Submission Cover Sheet (Signature Required) • A cover page is required for each Attachment subsection. The cover page for each subsection of the Bid must include the IFB#, the name of the Bidder and the Attachment letter and title. All information must be presented in the same order and format as described in section 3.4.14 Bid Submission Format.		
	b	Attachment B – Bid Form (Signature Required) • All pages of the Bid Form must be submitted and signed by an authorized person. All six questions regarding your company must be answered and included with Bid response. Refer to pages 25-28 of the IFB.		
	c	Attachment B – Addendum 1: Minimum Qualifications Adhere to required information to be submitted and submission format. • For the Minimum Qualifications, the header of each page should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement. • For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review). • Ensure that all lists, narratives and/or attestations for each of the four (4) minimum qualification elements are answered or provided.		
	d	Attachment C – Contract Draft Acknowledgement • By signing the acknowledgement to Attachment C, the Bidder affirms acceptance of Appendix 3 – Contract draft; including the terms, conditions, and obligations set forth therein, and agrees to the be bound by the provision on the contract as finalized. As noted in the Bid Form the bidder has read, understands and agrees to all provisions of this IFB without reservation and without expectation of negotiation.		
	e	Attachment D – DHHS Certification Drug-Free Workplace (Signature Required) • All pages of Attachment D form must be included in bid response. No modifications are allowed.		
	f	Attachment E – DHHS Certification Debarment, Suspension, and Other Responsibility Matters (Signature Required) • All pages of Attachment E form must be included in bid response. No modifications are allowed.		
	g	Attachment F – Proprietary Information Form (Signature Required) If redacted copy is submitted, it is clearly marked "Public Copy". Submitted in searchable format and not password protected. Provide the required indication for Public Records release. • Bidder's providing a redacted copy of response must properly answer the questions on this form and provide a separate redacted copy of the bid response adhering to the submission format used for confidential information, as stated on Attachment F.		
	h	Attachment G – References You must provide references and DOM must be able to contact at minimum two (2) references within 3 days of bid opening. • For Minimum Qualification 1.10.2 (2) Amendment 2 – Clarification: From the list of engagements provided at IFB Section 1.10.2 (1), the Bidder shall provide reference contacts for 6-8 clients which should include current and/or past clients within the last five years that may be contacted as references.		
	i	Attachment H – Bidder's IFB Response Checklist (Signature Required) • Amended. Must be signed and returned with bid re-submission.		
	j	Attachment I – All Amendments (if applicable) must be acknowledged and returned with bid submission.		

		• Acknowledgement to Amendment 1, 2, 3 and 4 must be signed and returned with bid re-submission.		
	k	**Follow the bid submission format for all required documents.** Ensure each page of the bid and attachments are numbered and identified as detailed in 3.4.14. • All required IFB documents must be re-submitted with response.		
4		Unredacted and redacted bid responses (if vendor submits a redacted copy) MUST be submitted via **SharePoint ONLY** as separate PDF files. Both files must be in a searchable format and must not include any embedded web links. Bid submissions must be received by the due date and time. Email submissions will not be accepted. Submission Due Date and Time: ~~***Friday, December 12, 2025, by 2:00 p.m. CST.***~~ ***Friday, January 16, 2026, by 2:00 p.m.***		

Bid Submitted By: _____

_____ _____

Authorized Signature Date

Receipt of Amendment #4 Acknowledged:

Printed Name: Mary-Lyn Baldauf

Signature: _____

Title: Chief Executive Officer

Company Name: Qsource

MISSISSIPPI DIVISION OF MEDICAID

Date: December 30, 2025

Amendment #5 Additional Questions Period **Deadline for Additional Questions shall be Friday, January 2, 2026 by 5:00 p.m. Anticipated date of posting Written Answers shall be Monday, January 5, 2026 by 5:00 p.m.**

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is Janaury 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.

Receipt of Amendment #5 Acknowledged:

_____
Signature
Mary-Lyn Baldauf
Printed Name
Chief Executive Officer
Title
Qsource
Entity Name

MISSISSIPPI DIVISION OF MEDICAID

Amendment #6 Additional Questions and Answers Issued: January 5, 2026

Solicitation Name and Number: External Medical Review Consulting IFB#20251031 RFx# 3160007625

This Amendment must be signed and submitted as part of the Invitation for Bid (IFB) response to be considered for this procurement.
IFB response deadline is January 16, 2026 by 2:00 p.m.

Question #	IFB Section #	IFB Page #	Question	DOM Response
1	Attachment A and Section 3.4.14	Page 1 and IFB Page 19	Attachment A states: "A PDF file with the naming convention below should be used when submitting the electronic files to the SharePoint site. File Name: BIDDER'S NAME HERE – EXTERNAL MEDICAL REVIEW CONSULTING, and IFB page 19 (Section 3.4.14) states: The one combined searchable PDF file should be uploaded in SharePoint with the file name: IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING." **Question:** Which requirement is correct? Should the file name of the one-combined searchable PDF file include the IFB number or not?	Yes. The file name of the one combined searchable PDF file must include the IFB number when submitted to the SharePoint site. Bidders should follow the naming convention outlined in IFB page 19, Section 3.4.14. IFB #, BIDDER'S NAME, EXTERNAL MEDICAL REVIEW CONSULTING.
2	Amendment 4 Revised Attachment H	Page 3 3a	3a states: "A cover page is required for each Attachment subsection." **Question:** The word *subsection* is unclear. Do you mean that before each Attachment, you want the bidder to include a cover page? If so, should the bidder include a cover page for Attachment A or just start the proposal with Attachment A (as the Bid Cover Sheet), and then create a cover page for Attachments B through I?	Yes. Attachments A through I are the Attachment subsections referenced in the IFB. Bidders must include a cover page for Attachment A and each attachment thereafter.
3	Amendment 4 Revised Attachment H	Page 3 3c	The first bullet of 3c states: "For the Minimum Qualifications, the *header of each page* should indicate the corresponding element to which the page is responsive. For instance, Addendum 1: Minimum Qualifications, 1.10.2(1) Bidder Experience Requirement." **Question:** Is the Minimum Qualifications section the only section in which the DOM requires specific wording to be stated in the header of each page? Please clarify if you want specific wording in the header of each page for **any other section** of the proposal. That is, for all the other Attachments, does DOM want the headers to be blank (no logos, no wording)?	Yes. The Minimum Qualifications section is the only section that requires a header identifying the specific element to which the bidder is responding. All other sections of the proposal will include a cover page, and no specific header wording is required for other sections of the proposal.
4	Amendment 4 Revised Attachment H	Page 3 3c	The second bullet of 3c states: "For Minimum Qualification 1.10.2 (2) - Amendment #2 – Clarification: DOM will require the Contractor to hold URAC Accreditation – Independent Review Organization (Comprehensive Review)." **Question:** Do you want the bidder to include a copy of its URAC certificate in this section?	URAC Accreditation is required; however, submission of the URAC certificate is not required at the time of bid response. DOM may request documentation of accreditation at a later time.
5	N/A	N/A	**Question:** Should the bidder change the submission date from December 12, 2025, to January 16, 2026, on any signed documents that are included with its proposal?	Yes. DOM issued Amendment #4, which established a revised bid submission deadline of January 16, 2026. Bidders must ensure that all proposal documents requiring signatures reflect this updated submission date.

Written answers provided for the questions are binding. Questions and answers shall become part of the final contract as an attachment.
This Amendment #6 must be signed and submitted as part of IFB to be considered for this procurement.

Receipt of Amendment #6 Acknowledged:

Signature
Mary-Lyn Baldauf
Printed Name
Chief Executive Officer
Title
Qsource
Entity Name