

**NYS OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE (OTDA)
DIVISION OF DISABILITY DETERMINATIONS**

**CONSULTATIVE EXAMINATION CONTRACT MEDICAL PROVIDER
BUFFALO/ROCHESTER/UTICA**

OFFICIAL QUESTIONS AND ANSWERS

May 25, 2011

- 1. Q. RFP-Page 16, paragraph F7: First sentence requests claimant's social security numbers be typed on first page of reports. This is in conflict with information received previously; is this an error?**

A. Section II.F.7 is replaced with the following language:
Claimant name, Order & Voucher (O&V) number, Module/Unit, Personal Identification Number (PIN), and date of report must appear on the first page of the report typed on original letterhead. All subsequent pages, tracings and any other material must have claimant name, O&V number, and Module/Unit/Personal Identification Number. The claimant's Social Security Number (SSN) should not appear on any of the documents mentioned above.
- 2. Q. Appendix C for Utica, Page C-4: No volumes are listed for Procedure Code 96100 Adaptive Behavior Scale? What are the volumes, if any?**

A. The Adaptive Behavior Scale volume for Utica is five (5).
- 3. Q. Technical proposal requirements, Page 23, first paragraph: Are we required to submit the second page of the 4095 consultant enrollment form?**

A. No.
- 4. Q. Technical proposal requirements, Page 24, paragraph 11, Physician Background Questionnaire: Are we required to submit two originals of this form for each provider in each location, as is required for the 4095 forms?**

A. No. Copies are sufficient; however, originals may be requested later from the winning bidder(s).