MISSOULA COUNTY
REQUEST FOR PROPOSALS ADDENDUM

RFP NAME: Missoula County Workers' Compensation and Liability Claims Administration Software RFP

DUE DATE: Friday November 6, 2026

ADDENDUM NUMBER: 10-2026-01-A1

To All Offerors:

Attached are written questions received in response to this RFP. These questions, along with the County's response, become an official amendment to this RFP.

All other terms of the subject "Request for Proposal" remain as previously stated.

Acknowledgment of Addendum:

The offeror for this solicitation must acknowledge receipt of this addendum. This page must be submitted at the same time as the qualifications, or the qualifications may be disqualified from further consideration.

I acknowledge receipt of Addendum No. 10-2026-01-A1

Signed: _____

Company Name: _____

Date: _____

Vendor	RFP Question	Response
Klear.ai	Regarding your RFP requirements relative to Workers Compensation Payments and Bill Repricing, is the County open to supporting that functionality via an interface with a 3rd party (Enlyte, Medata, Corvel, Conduent, etc) or is the bill repricing functionality an absolute requirement for inclusion directly within the Claims Administration platform.	The county does not currently utilize a third-party medical bill review company. Our preference is that the platform will directly provide bill processing and repricing functionality. Bill repricing functionality would require the platform to have a bill processing engine that could deliver an end-to-end service from bill entry to payment. Bill entry would include system capability to capture data from a HCFA 1500, UB04 and payment types associated with State of Montana (SOM) First Report of Injury (FROI)/ Subsequent Report of Injury (SROI) requirements. Bill processing includes system capability to load, maintain and update fee schedules (such as State of Montana Workers' Compensation professional fee schedule) and have the CPT/HCPC billed service reduced to the fee listed on the schedule. The remaining amount (billed amount – fee schedule) should populate as a savings. Custom remark codes, maintained by the system administrator, should also be available when processing a bill to explain why there was a savings, denial, etc. Additionally, bill processing should allow for manual adjustments and have no fee schedule apply, if necessary. When done processing the bill, it should stay in a pending/unselected status until batched with the check run cycle. Reprocessing of the bill should also be allowed, if not finalized, through the check run cycle. If check run cycle has finalized there should be the option to void, re-issue and apply a refund to the payment.
CHSI Technologies, Inc. dba Spear Technologies	The RFP requires the system to load fee schedules and reprice medical bills. Would the County accept bill repricing delivered through an integrated external bill review service, with repricing results and payment records held in the claims system? (Section 3, p. 8, Workers' Compensation Payments and Bill Repricing)	The county does not currently utilize a third-party medical bill review company. Our preference is that the platform will directly provide bill processing and repricing functionality. Bill repricing functionality would require the platform to have a bill processing engine that could deliver an end-to-end service from bill entry to payment. Bill entry would include system capability to capture data from a HCFA 1500, UB04 and payment types associated with State of Montana (SOM) First Report of Injury (FROI)/ Subsequent Report of Injury (SROI) requirements. Bill processing includes system capability to load, maintain and update fee schedules (such as State of Montana Workers' Compensation professional fee schedule) and have the CPT/HCPC billed service reduced to the fee listed on the schedule. The remaining amount (billed amount – fee schedule) should populate as a savings. Custom remark codes, maintained by the system administrator, should also be available when processing a bill to explain why there was a savings, denial, etc. Additionally, bill processing should allow for manual adjustments and have no fee schedule apply, if necessary. When done processing the bill, it should stay in a pending/unselected status until batched with the check run cycle. Reprocessing of the bill should also be allowed, if not finalized, through the check run cycle. If check run cycle has finalized there should be the option to void, re-issue and apply a refund to the payment.
CHSI Technologies, Inc. dba Spear Technologies	Does "native" EDI capability include a pre-built integration with a certified EDI service provider, provided filing statuses and acknowledgements (Accepted, Accepted-with-Errors, Rejected) are visible inside the claims system? (Section 3, p. 8, Native Workers' Compensation EDI Reporting)	Yes. We currently use CoreFTP Pro to upload batches of FROI and SROI reports, pulled from Ventiv Claims Premier, to the State of Montana. We receive acknowledgment or rejection files in return from the State of Montana and upload to Ventiv so that the files show as received and accepted or if there were errors allow us to correct those. If your system has an integrated file transfer, that may be desirable, however; we do use Core FTP as our third party software at this time.
CHSI Technologies, Inc. dba Spear Technologies	Does "complimentary interfaces" mean the County expects the ISO ClaimSearch, Workday, Montana EDI, and Microsoft Office interfaces to be included at no additional cost, including any third-party fees? (Section 3, p. 8, Complimentary Interfaces)	The expectation is vendors provide a clear understanding of what is included in terms of interfaces with other platforms. The response should demonstrate any costs associated with these connections along with a statement of costs which the vendor cannot anticipate such as those charged by the third-party. Additionally, the response should demonstrate the cost per connection or an overall cost for unlimited connections.
CHSI Technologies, Inc. dba Spear Technologies	The criterion "Public Alerting and External Emergency Communication System Capability" (5 points) does not correspond to any requirement in Section 3. Does it apply to this procurement, and if so, what capabilities does the County expect? (Section 6, p. 14, Evaluation Criteria)	This is an error in the RFP and should not be considered a requirement for this RFP.
CHSI Technologies, Inc. dba Spear Technologies	Section 1 says the contract period ends no later than June 30, 2031. Section 3 says the term is up to 7 years, billed annually. Which applies, and how many annual billing periods should the cost proposal show? (Section 1, p. 3, Contract Period; Section 3, p. 7, Contract Term)	The county is proposing an initial term of 5 years with the option to extend for 2 additional years reflected by the up to seven years language.
CHSI Technologies, Inc. dba Spear Technologies	The RFP requires a 120-day offer period, and the Standard Terms say proposals are firm for 30 days unless stated otherwise. Please confirm that 120 days applies. (Section 1, p. 4, Offer in Effect for 120 Calendar Days; Standard Terms, p. 15, Acceptance/Rejection)	Yes, the RFP requires a 120-day offer period.
CHSI Technologies, Inc. dba Spear Technologies	The County's environment includes on-premises data centers. Does the County prefer a vendor-hosted SaaS solution, or would it consider a cloud solution deployed in an environment the County controls? (Section 3, pp. 9 and 10, Technical Requirements and SaaS/Subscription Requirements)	The county prefers a SaaS solution, or a solution deployed within the County's data center. If this decision meaningfully changes the capabilities or functionality of the system, please share those details in your proposal.
CHSI Technologies, Inc. dba Spear Technologies	Section 2 refers to cost information in a "separate, sealed envelope," while Section 5 says the cost proposal may be a separate file in the same email. Please confirm a separate file in the same email is acceptable. (Section 2, p. 6, Classification of Proposals; Section 5, p. 13)	Yes, a separate file in the same email is acceptable. The requirement is to receive them as separate documents so they can be evaluated individually.
CHSI Technologies, Inc. dba Spear Technologies	Please provide the expected number of users: (a) full-access named users in Risk Management, claims, and other staff roles; (b) staff outside Risk Management who will submit incidents or claims through intake forms, for example through a portal; and (c) read-only or report-only users. If read-only or report-only users will access the system through a portal, please count them under (b). (Section 1, p. 2, Introduction; Section 3, p. 7, Project Overview)	a) The county prefers proposals that allow the county the ability to designate users at any security level in the system as determined by the business needs of the county. The county will need costing information based on user numbers. At present, we expect to have up to 40 users. The majority of these users would be in our technology department supporting the security needs and potentially assisting in other issues users may experience with configuration or accessing reporting. Our current staff for claims includes one (1) program administrator (Plan Administrator for Workers' Compensation and Property/Casualty programs) who does adjust catastrophic property and casualty claims, three (3) claims adjusters who manage claims in both programs, one (1) reporting specialist, and one (1) financial coordinator who manages payment and recording of payments within both programs. b) Incidents being reported fluctuate each year. On average there are approximately 180 reported incidents per year for Workers' Compensation and about 50 property and casualty claim reports per year. We would expect similar or fewer users if incident are reported through an intake form or portal. c) As stated in (a), please include in your proposal the cost impact associated with different levels of users. The county would prefer proposals that allow the county the ability to designate users at any security level in the system as determined by the business needs.
CHSI Technologies, Inc. dba Spear Technologies	The RFP gives annual volumes of about 65 workers' compensation and 50 property and casualty claims. For conversion planning, please provide: (a) the total number of claims in Claims Premier 3.8, open and closed, by line of coverage (workers' compensation, liability, property, cyber, fine arts); (b) the number of years of history the County expects to convert; (c) the current claims database size in GB; (d) the number and total size in GB of document images and attachments, and where they are stored (in the database, on a file share, or elsewhere); and (e) the number of policies and tracked assets (vehicles, equipment) to be loaded (Section 1, p. 2, Introduction; Section 3, pp. 8 to 9, Data Migration and Conversion Services)	(a) The total number of open and closed Workers' Compensation claims 5,504. The total number of liability claims 2,207 (mostly property and auto) (b) It is difficult to assess the number of years of history we will need to transfer. We will definitely need to move all of our open claims. Some of these claims originated 20+ years ago. Additionally, we will want to move closed claims that closed from July 1, 2020 to present. (c) At this time we are unable to provide an answer on data size in GB. We have contacted Riskonnect to try and obtain this information. (d) At this time we are unable to provide an answer on what the number and total size in GB of documents, images, and attachments is. We have contacted Riskonnect to try and obtain this information. (e) We do not have policies or assets in our current application. However, we will want the ability to load both. Please provide in your proposal a description as to how we will load these (i.e. CSV template, manual data entry, etc.).
CHSI Technologies, Inc. dba Spear Technologies	The RFP names Workday, ISO ClaimSearch, Montana EDI, and Microsoft Office, and refers to possible other third-party systems. Please provide a complete list of the interfaces required at go-live, so they can be included in pricing, and, for each, the data exchanged and whether it is real-time or batch. Please include: (a) the Workday HCM and Finance data flows (for example employee data, payments, general ledger, vendor records); (b) the current Montana EDI and excess insurer reporting process and vendor; c) bank, ACH, check printing, and positive pay arrangements; and (d) any document management, email, or other cloud systems to integrate. (Section 3, p. 8, Complimentary Interfaces; Section 3, p. 10, System Integration)	At go-live, the county would require Montana EDI batch processing for FROI and SROI reporting to the State of Montana. The county would like to explore integration capabilities your organization has with Workday, ISO ClaimSearch, EDI CMS Reporting, and Microsoft Office interfaces. These interfaces are desirable but not currently established. Refer to the State of Montana EDI Implementation Guide (https://erd.dli.mt.gov/_docs/work-comp-claims/2023-EDI-Implementation-Guide.pdf) for data exchange requirements for submitting FROI and SROI to the State of Montana. The EDI is currently transferred to the State of Montana via an SFTP and then they return an acceptance/rejection EDI file, which has historically been imported to the Workers' Compensation platform. Specifically for Workday, the county is interested in understanding if the vendor's proposed application can batch payment register data (including redacting any PHI) and have it interface to Workday to update the county's central financial records. Ideally, batched data would be sent to Workday and then a confirmation or import file would be returned. The county is also interested in ability to query Workday HCM data such as name, DOB, SSN, address, phone number, email, gender, marital status, hired date, employee type (FT/PT/etc.), wage, scheduled weekly hours, job title, department, and work comp class code to help with the accuarcy of claim entry. Aditionally, there is interest in understanding if there is a report and/or data exchange from the platform to Workday to relay back to Human Resource partners the temporary partial disability (TPD) and temporary total disability (TTD) payment information. MidWest Employers is our current excess insurer, monthly we send them loss run data and check run data in excel format. The workbooks are uploaded manually to a ShareFile site. It would be required to have the capability to create custom adHoc reporting with claim and payment data or to navigate if direct integration is available. We currently do not have any interface integrated for banking or ACH payments. We print our own check stock upon completing Ventiv batch payments. Our request is for all vendors to include ACH payment capabilities that include a direct interface with the county's financial institution. We utilize Microsoft Office 360. We would like an Outlook integration where emails can be written and documented in the claims system directly.
CHSI Technologies, Inc. dba Spear Technologies	Please describe the County's access to its current data and the incumbent's role: (a) will Riskonnect (Ventiv) be required to provide full data extracts, schema documentation, and conversion support before the current contract ends on September 14, 2027; (b) in what formats can data and documents be exported; (c) which interfaces does Claims Premier 3.8 currently run; and (d) approximately how many custom reports, correspondence templates, and forms does the County expect to be recreated? (Section 1, p. 2 Introduction; Section 3, p. 7, Implementation Date; Section 3, pp. 8 to 0, Conversion Services)	At this time we are unable to provide an answer on whether Riskconnect can provide full data extracts, schema documentation, conversion support and in what formats data can be exported. We have contacted Riskonnect to get clarification. Please let us know our options in the event they can or cannot provide this information and conversion support. Our desire is to be able to create our own custom reports, templates and forms. As an estimate we would expect a minimum of 15 templates and forms but would like to know what the flexibility is to create our own for future business needs. We would like advanced reporting capabilities with the option of AdHoc reporting in addition to industry standard reports.
Ebix, Inc	May we please have more information on the Workday integration and what types of information would be exchanged between the RMIS and Workday? (Page 10. Section System Integration "The Vendor must provide integration services to ensure the claims management system works seamlessly with the County's existing applications and external systems. This includes: a) Interfaces for Workday and possibly, other third-party systems")	The Workday interface is desirable but not currently established. Specifically for Workday, the county is interested in understanding if the vendor's proposed application can batch payment register data (including redacting any PHI) and have it interface to Workday to update the county's central financial records. Ideally, batched data would be sent to Workday and then a confirmation or import file would be returned. The county is also interested in ability to query Workday HCM data such as name, DOB, SSN, address, phone number, email, gender, marital status, hired date, employee type (FT/PT/etc.), wage, scheduled weekly hours, job title, department, and work comp class code to help with the accuarcy of claim entry. Aditionally, there is interest in understanding if there is a report and/or data exchange from the platform to Workday to relay back to Human Resource partners the temporary partial disability (TPD) and temporary total disability (TTD) payment information.

Ebix, Inc	RE: Page 10. Section System Integration: Are there any other data exchanges anticipated at the time? Or is there a list of systems that are currently integrated with Riskonnect?	At go-live, the county would require Montana EDI batch processing for FROI and SROI reporting to the State of Montana. The county would like to explore integration capabilities your organization has with Workday, ISO ClaimSearch, EDI CMS Reporting, and Microsoft Office interfaces. These interfaces are desirable but not currently established at this time. Refer to the State of Montana EDI Implementation Guide (https://erd.dli.mt.gov/_docs/work-comp-claims/2023-EDI-Implementation-Guide.pdf) for data exchange requirements for submitting FROI and SROI to the State of Montana. The EDI is currently transferred to the State of Montana via an SFTP and then they return an acceptance/rejection EDI file which has historically been imported to the Workers' Compensation platform. Specifically for Workday, the county is interested in understanding if you the vendor's proposed application can batch payment register data (including redacting any PHI) and have it interface to Workday to update the county's central financial records. Ideally, batched data would be sent to Workday and then a confirmation or import file would be returned. The county is also interested in ability to query Workday HCM data such as name, DOB, SSN, address, phone number, email, gender, marital status, hired date, employee type (FT/PT/etc.), wage, scheduled weekly hours, job title, department, and work comp class code to help with the accuarcy of claim entry. Aditionally, their is interest in understanding if there is a report and/or data exchange from the platform to Workday to relay back to Human Resource partners the temporary partial disability (TPD) and temporary total disability (TTD) payment information. MidWest Employers is our current excess insurer, monthly we send them loss run data and check run data in excel format. The workbooks are uploaded manually to a ShareFile site. It would be required to have the capability to create custom adHoc reports with claim and payment data. If a direct integration is available that is desirable. We currently do not have any interface integrated for banking or ACH payments. We print our own check stock upon completing Ventiv batch payments. Our request is for all vendors to include ACH payment capabilities that include a direct interface with the county's financial institution. We utilize Microsoft Office 360. We would like an Outlook integration where emails can be written and documented in the claims system directly.
Origami Risk	Page 3 under Offeror Questions it states "The County will provide a formal written addendum by November 30, 2026…". Should this really be October 30? Please advise when we will expect to receive questions in order for us to respond to the RFP.	Responses will be posted to County website 10/30/2026.
Origami Risk	Page 11 – Project Implementation states to describe the capabilities, but it is not listed under Section 4 that directs us to the required capabilities and format. Please advise if the Project Implementation section needs to be addressed as part of the Section 4 requirements – perhaps under the Firm Experience portion?	The county would like to understand the vendor's proposed strategy for implementation. This could include the vendor's capabilities and/or the vendor's recommendation to outsource implementation, which we would ask reflect cost, if known, by vendor. The county would prefer the vendor provide the implementation support, if possible, and include what that support looks like in terms of staffing and experience. This response can be included under Firm Experience as proposed. Please be sure to include if your organization directly handles the implementation or if you use a third party. It is preferred to disclose if part of the implementation is done through a third party to include what percentage and parts of the project is done using a third party versus using an implementation team that is within your organization.
Origami Risk	Page 2 – In Section 1 Overview can you elaborate if with your current RMIS solution (Riskonnect /Ventiv) is this a SaaS offering or is it being locally hosted by the County?	Our current platform is SaaS.
Origami Risk	Page 8 – Section 3 Scope of Project lists WC medical bill review as a requirement. Is this to interface with a MBR? Please clarify the scope of the reqt.	The county does not currently utilize a third-party medical bill review company. Our preference is that the platform will directly provide bill processing and repricing functionality. Bill repricing functionality would require the platform to have a bill processing engine that could deliver an end-to-end service from bill entry to payment. Bill entry would include system capability to capture data from a HCFA 1500, UB04 and payment types associated with State of Montana (SOM) First Report of Injury (FROI)/ Subsequent Report of Injury (SROI) requirements. Bill processing includes system capability to load, maintain and update fee schedules (such as State of Montana Workers' Compensation professional fee schedule) and have the CPT/HCPC billed service reduced to the fee listed on the schedule. The remaining amount (billed amount – fee schedule) should populate as a savings. Custom remark codes, maintained by the system administrator, should also be available when processing a bill to explain why there was a savings, denial, etc. Additionally, bill processing should allow for manual adjustments and have no fee schedule apply, if necessary. When done processing the bill, it should stay in a pending/unselected status until batched with the check run cycle. Reprocessing of the bill should also be allowed, if not finalized, through the check run cycle. If check run cycle has finalized there should be the option to void, re-issue and apply a refund to the payment.