

**STATE OF WASHINGTON**

**HEALTH CARE AUTHORITY**

**REQUEST FOR PROPOSALS (RFP)**

**RFP NO. 2020HCA14 HCA Fraud and Abuse Detection Solution (FADS)**

**Response Form 06**

# Statement of Work Issues List

Use the following template to provide Bidder's response as described in Section 3.1 of the RFP. This should include all issues on the *Appendix A Statement of Work* only EXCEPT those identified in the Draft Contract which will be captured in a separate Response Form. Add additional rows if necessary.

**Bidder Name:**

| **Item** | **Reference Document**  | **Section & Page #** | **Issue** | **Bidder Proposed Solution/Rationale** |
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