

**VOLUNTARY BENEFITS  
CRITICAL ILLNESS & HOSPITAL INDEMNITY  
REQUEST FOR PROPOSAL**

**ADDENDUM NUMBER: ONE (1)**

**JULY 26, 2019**

**THIS ADDENDUM IS ISSUED PRIOR TO THE ACCEPTANCE OF THE FORMAL RFP's. THE FOLLOWING CLARIFICATIONS, AMENDMENTS, ADDITIONS, DELETIONS, REVISIONS, AND MODIFICATION FORM A PART OF THE CONTRACT DOCUMENTS ONLY IN THE MANNER AND TO THE EXTENT STATED.**

Please note Section E. "Financial/Cost of Services" of the Vendor Questionnaire has been revised to reflect [bids@browardhealth.org](mailto:bids@browardhealth.org) as the contact to request census file.

**END ADDENDUM ONE**