



GENESEE COUNTY PURCHASING DEPARTMENT

ROOM 343, COUNTY ADMINISTRATION BLDG.
1101 BEACH STREET
FLINT, MICHIGAN 48502

TELEPHONE
(810) 257-3030
FAX
(810) 257-3380

CINDY CARNES
Purchasing Manager

December 3, 2014

ADDENDUM #1

REQUEST FOR PROPOSALS (RFP) #14-034 PHARMACY BENEFIT MANAGEMENT SERVICES FOR GENESEE COUNTY

1. Please include the questions and answers on attachment 1, as part of the above mentioned RFP.
2. The due date and time for the above referenced RFP has been extended to **Monday, December 22, 2014 at noon, 12:00 p.m. EST**

Indicate on the Signature Page item #6 and on the exterior of the envelope containing your proposal:

ADDENDUM #1 RECEIVED

**ALL PROPOSALS MUST BE RECEIVED AT:
GENESEE COUNTY PURCHASING DEPARTMENT
1101 BEACH STREET, ROOM 343
FLINT, MI 48502**

Cindy Carnes

Cindy Carnes, Purchasing Manager
G:/bid2/2014/14-034 add1

ATTACHMENT #1

#14-034 PHARMACY BENEFIT MANAGEMENT SERVICES FOR GENESEE COUNTY

1 Vendor agrees to comply with the County's request for a third party to perform an Implementation Audit of the pharmacy plan set-up prior to or after the effective date of the Agreement, as determined by the County

Q1. Does the County envision a particular amount for an Implementation Audit allowance?

A1. The County is requesting an implementation allowance of \$30,000.

2. Provide claims data to enable County's medical insurance carriers to conduct disease management activities

Q2. How frequently does the County intend for such data to be provided? For example, monthly? And for each periodicity, how many different vendors do you require files to be sent?

A2. Monthly reporting. There are two medical carriers that data will be potentially shared with. Note that right now the County's PBM is not passing information to its medical carriers, but it may be something it will want to do in the future.

3. The County requires vendor to support clinically appropriate and current utilization management program offerings to control costs in a "lowest net cost" manner, including administration of the current clinical and utilization manage programs and edits. The County currently employs prior authorization, quantity restrictions, and step therapy as part of its approach to managing utilization.

Q3. Presume the County intends to adopt the PBM's similar programs, or do you intend to replicate all current clinical programs & edits?

A3. The County intends to adopt the PBM's programs that most closely match its existing programs.

4. Vendor agrees to pay County a guaranteed rebate payment/credit equal to the greater of 100% pass through of actual Total Rebates or minimum guaranteed rebate per brand drug dispensed at each drug distribution channel--retail, mail order and specialty.

Q4. Please describe the County's current rebate arrangement and/or guaranteed amounts?

A4. The County is currently paid 100% of rebates earned, with a minimum guaranteed amount per Brand medication filled.

Q5. Does the County prefer a broader retail-90 network, or something more limited, such as a single national chain?

A5. The County currently does not utilize a retail-90 network. This question is to gain an understanding of each proposers capabilities. The County would like a full understanding of all available options.

Q6. When did the County last bid Medical and other ancillary coverages, and do you intend to bid them in the upcoming 12-18 months?

A6. Timing varies based on the coverage in question. The most recent coverage to be marketed is Vision coverage. The County anticipates the potential to market Medical and/or Dental coverage within the next year or two.

Q7. Please provide a census of the lives we would be quoting on, preferably separated by Medicare, Retiree, and actives as applicable.

A7. This will be provided to all vendors who submit an intent to bid. There will be separate census files for the EGWP population and the Commercial population. The Commercial population contains both Actives and Pre-65 retirees.

Q8. If not already provided, please provide a recent 12 months of pharmacy claims including the following minimum fields for each claim:

- Dispense date
- Mail/retail indicator
- Brand/generic indicator
- 11-digit drug NDC
- Dispensing Pharmacy NABP or NPI number
- Days supply
- Quantity
- Claim or RX number

If a claim file isn't available we request a summary of RX utilization, for example:

- Average days supply (Retail and Mail)
- Scripts/EE/year including:
 - latest 12 months of scripts
 - split between retail and mail
 - retail split between brand and generic
 - mail split between generic and mail

A8. This will be provided to all vendors who submit an intent to bid. There will be separate claim files for the EGWP population and the Commercial population.

Q9. "Pricing guarantees and reconciliations for the EGWP Plus Wrap lives (discounts, dispensing fees, rebates) do not differ for those claims administered while under the primary coverage and those in the wrap." Is the County requesting that EGWP pricing guarantees match the guarantees proposed for the commercial lives?

A9. No, there is no requirement for the Commercial & SGWP contracts to have the same pricing guarantees.

Q10. Is the "Contract for Professional Services" included for informational purposes only, or are we expected to redline and sign it?

A10. It is for information purposes all exceptions should be included with your submission.

Q11. Please identify vendors that would be included in the following requirement: "Vendor will perform real-time information/data exchanges with other the County vendor partners, as necessary, to share account balances (e.g., deductible, out-of-pocket expenses) at no additional cost to the County. Such information/data will be provided in a HIPAA-compliant format directly to the designated vendor(s) contracted with the County or to the County within the required time intervals."

A11. The following vendors could be included; Health Care Consultant Firm, Health Care Providers, Wellness Vendors and Disease Management Vendors.

Q12. Please confirm that the County is considering only transparent, pass-through offers.

A12. The County is willing to accept proposals for both Traditional and Transparent pricing arrangements.

Q13. Who is the current PBM?

A13. Express Scripts, Inc.

Q14. In order to qualify for rebate guarantees, will the County be implementing the PBM's formulary(ies)?

A 14. Yes, however in the case of formulary exclusions, the County retains the right to not accept the exclusions with the understanding that it may impact rebate performance.

Q15. Is the following sentence applicable to this RFP? "A green proposal sticker will be provided by Genesee County when the RFP is sent to the offeror by mail." If so, when will this be sent?

A 15. No a green sticker will not be sent and is not required.

Q16. Because we won't be getting the claims data until the end of this week, and because our Analytics team will require as much time as possible to review the file, is it possible to extend the due date by 2-3 days?

A16. Yes the revised due date is Monday, December 22, 2014 at noon, 12:00 p.m. EST.

Q17. On page 32 of the RFP, you ask vendors to provide 3 references of similar projects, and also request client references in Appendix C, pg. 44-45. Would

you like us to provide different references for each of these requests, totaling 6 current references, or can we use the same references for each request?

A17. Three (3) references are acceptable.

Q18. Will the Active and EGWP Pharmacy plan designs be staying the same? If not, what will they be?

A18. The active Rx plan could change during contract negotiations, which may start sometime after the PBM contract is awarded and I do not know what the change could be.

Q19. Please advise when Appendix A-2 (Excel File) will be released.

A19. No later than December 5th, and as soon as all the documentation is available.