

**Request for Pharmacy
Benefits Manager**

RFP# 2016-07-04

Frequently Asked Questions

ADDENDUM

To: All Interested Proposers
from: Christina Gonzales
Date: August 23, 2016

Subject: Pharmacy Benefit Manager RFP #2016-001

This Frequently Asked Questions document includes responses to all questions submitted to date. Any questions or additional information required by interested vendors must be emailed to cgonzales@ntbha.org. RFP number must be on the "Subject Line" of the email. Failure to follow this requirement may result in questions being unanswered.

1. The start date for the program is referenced as 1/1/2017 and it is stated the contract will be for one year through 8/1/2017. Can you please clarify the start and end dates for the first year of the program?
Response: The start and end dates are correct for 1/1/2017 through 8/1/2017, this is due to the nature of the "Go Live" date for the new indigent behavioral health program which will be implemented effective January 1, 2017 with the first term ending at the close of the State Fiscal Year, August 31, 2017. Prior to the period ending discussions for renewal will occur for continuous service.
2. Can you confirm for me if this is a new program or a program that is already up and running? If the program is currently running, why are you going out to bid? Are you running into cost issues or service issues? What will compel the program to move to a new PBM partner? (In regard to PBM service all together)
 - a. Response: This will be a new program for the North Texas area. six county service delivery area area. NTBHA is implementing an updated indigent behavioral health program as the existing NorthSTAR Program will be ending on December 31, 2016.
3. If the program is up and running, who is the current incumbent PBM? (In regard to PBM service all together)
 - a. Response: N/A, please see the above response.
4. Are you using a TPA and if yes, who is that? (In regard to PBM service all together)
 - a. Response: N/A, please see the above response.
5. How many lives are covered by the program and how many are utilizing? (In regard to PBM service all together)
 - a. Response: On average 12,000 adults and adolescents per month.

6. Will you be providing claims data for a re-pricing analysis? If not, how will the PBM pricing be evaluated? Is it strictly on discounts and dispensing fees as well as administrative fees?
 - a. Response: No claims data is available, NTBHA is looking for innovative solutions and the cost benefit. Pricing will be evaluated on all aspects of discounts, dispensing fees, and administrative fees.

7. When you state “Central Fill Pharmacy” are you asking about our Mail Order or Specialty pharmacy?

Attachment A Pricing: List Pricing Offered Central fill pharmacy

 - a. Response: NTBHA asks prospective applicants provide as much information as possible on the services they are able to provide.

8. I do not see any question concerning rebate amounts. Can you please let me know if that was intentional and why rebates are not requested?
 - a. Response: Rebates were left of the RFP intentionally, once responses are reviewed applicants whom NTBHA feels are the best choices will be contacted for additional information which may include rebates.

9. I am assuming with this type of population, ID cards and booklet mailings will not be needed, but can you please confirm?
 - a. Response: This has not been ruled out, NTBHA is open to suggestions from prospective contractors on the benefits of such mailings or ID Cards.

10. Is the formulary for such a group an Open formulary where everything is covered or are their exclusions?
 - a. Response: The current draft formulary is attached to the RFP. NTBHA anticipates a closed formulary consisting of specified neuropsychiatric medications only, with exceptions made for non-formulary neuropsychiatric medication through a prior-authorization process initiated by the prescribing physician

11. Will we need to staff the pharmacies or provide pharmaceutical oversight?
 - a. Response: No, many of the providers in the NTBHA Network have their own on-site pharmacy completely staffed; other providers utilize retail pharmacies and provide their consumers with prescriptions.

12. Is there an existing mail service benefit?
 - a. Response: This is a new program and there is no existing mail service benefit.

13. Is there an existing benefit plan with plan design and co-pay structure? If so, please provide.
 - a. Response: This is a new program and there is no existing benefit plan with plan design and co-pay structure

14. Is there an existing formulary or is it totally open?
 - a. Attachment F is the current draft formulary. Once a contractor is selected NTBHA will collaborate with Provider Network and contract to create a formulary.

15. Who is the medical provider/carrier?
 - a. Response: NTBHA has contracted with local mental health centers in the six county area, to create a provider network.

16. What type of integration is in place with present Medical provider/carrier?
 - a. Response: There is an expectation the contractor will collaborate with NTBHA and the providers to serve the clients.

17. Is there a consultant assisting the RFP? If yes, who is the consultant and will fees be required?
- Response: There is no consultant assisting with the RFP.
18. Will it be possible to obtain from NTBHA a list of utilizing clinics and pharmacies?
- Response: Currently, NTBHA is working to complete contracting for the various clinics that will be within the network and cannot provide a list until after the contract period is complete.
19. Will NTBHA require the PBM to design and implement medical disease management programs or to support existing disease management programs?
- Exhibit B: Scope of Services Being Procured, 1.2 Service in General pg 6**
- Response: No design is needed. NTBHA follows the Texas Department of Health and Human Services and the use of the Texas Resilience and Recovery for more information regarding TRR, please visit their website @ <http://www.dshs.texas.gov/mhsa/trr/>
20. **Exhibit B: PAP Program PG 6** Please describe this program. Is it currently administered by NTBHA?
- Response: The PAP program is not currently administered by NTBHA, NTBHA seeks innovative approaches to management of PAP programs through the PBM in association with network pharmacies, instead of through individual physician practitioners.
21. **Exhibit B; PAP Program PG 6 Does NTBHA expect to use one mail-order and specialty pharmacy to dispense the medications needed for this program? If not, is it permissible for the PBM to sub-contract for these services? Execute the Patient Assistance Program**
- Response: The PAP program is not currently administered by NTBHA, NTBHA seeks innovative approaches to management of PAP programs through the PBM in association with network pharmacies, instead of through individual physician practitioners
22. How many clinics does NTBHA operate? Do all clinics have an on-site pharmacy?
- Exhibit B: 1.2 Services in General**
- Response: NTBHA does not operate any clinics, NTBHA has a provider network, some providers have an onsite pharmacy while others do not.
23. Is this requirement applicable to pharmacy benefit management services?
- Exhibit B: 1.2 Services in General**
- Response: Yes
24. Does NTBHA require the use of historically underutilized businesses? If so, please provide specific requirements that must be met in the proposal.
- Exhibit C**
Evaluation, Selection Criteria and Process &
5. **the impact on the ability of NTBHA to comply with laws and rules relating to historically underutilized businesses or relating to the procurement of services from persons with disabilities;**
- Response: No, NTBHA does not require the use of historically underutilized businesses.
25. Detail Proposal. Response to Proposal Guidelines as specified in this document: Are these referring to the sections listed in the Application Outline (**page 15**)? If not, please list the sections and page numbers of the RFP containing the \Proposal Guidelines?
- Response: Yes
26. Are direct responses requested for Exhibit B (Scope of Services) and Exhibit D?

- a. Response: Yes
27. Respondents taking exception to the specifications, terms and conditions or offering substitutions, shall state these exceptions in the section provided or by attachment as part of the proposal. If exceptions are stated within the applicable proposal section, will redlines, alternative language, and/or deviations be acceptable? **13. EXCEPTIONS/SUBSTITUTIONS. PG 13**
- a. Response: Yes
28. **Page 14. TERMINATION OF CONTRACT: NTBHA reserves the right to terminate any resulting contract with thirty (30) days written notice.** Would NTBHA consider a PBM-industry standard contract, i.e. a three year contract with a right to terminate after 90 days?
- a. Response: NTBHA is looking for innovative solutions to PBM services, once NTBHA has determined who to contract with contract length and term will be discussed.
29. **PG 14 CONTRACT MONITOR: Under this contract NTBHA shall appoint a contract monitor with designated responsibility to ensure compliance with contract requirements. The contract monitor will serve as liaison between NTBHA and the successful Respondent.** What is the contract monitor? Is the contract monitor responsible for compliance only?
- a. Response: A contract monitor reviews for compliance, and are responsible solely for contract compliance.
30. **PG 14. INVOICES shall show all information as required and shall be mailed directly to NTBHA location and staff person as set out in the contract entered into by NTBHA and Contractor.** Is electronic submission of invoices permitted?
- a. Response: Yes, electronic submission is permitted.
31. **Pg 15, second paragraph "Following Contract award, the contents of all applications may be made available upon written request."** How is this information to be presented? Does the NTBHA prefer the identification of proprietary material within the text of the proposal itself or in a separate log that references the applicable page number and provides a description of the information designated as proprietary?
- a. Response: Please identify any information that is proprietary within the text of the proposal itself. If information is requested, that is not marked as proprietary NTBHA will provide the information exactly as it was provided to NTBHA.
32. **Pg 17. III Staffing Plans (C) Due to the uniqueness of NTBHA, can applicant provide a staff member assigned to the account have a minimum of 2 years of providing continuous Account Management experience overseeing the directive?** What is meant by overseeing the directive? Is the NTBHA requiring a minimum of two years of continuous account management services to NTBHA without a change of personnel? Or, does this refer to the experience level requested for the individual proposed to manage the NTBHA's account?
- a. Response: NTBHA is requesting the experience level for the NTBHA account manager.
33. **Pg 19, XII. Implantation Plan** Provide a schedule for implementation and training (if necessary) four months after the date of contract signing. Per exhibit at the contract award would be announced September 14, 2016. Assuming that there will also be a contract negotiation process, this allows less than four months for implementation. Is NTBHA requesting a schedule to commence on a projected date of contract signing?
- a. Response: Yes, the schedule should commence on the projected date of contract signing.
34. **Attachment A: Pricing** Is NTBHA requesting a traditional or pass-through pricing model? Also, there is no reference to administrative fees. Where should this information be listed?
- a. Response: NTBHA is requested information on the best pricing method for our consumers.

We urge all applicants to provide their best information on their traditional or pass-through pricing. Any administrative fees should be included in the Cost proposal.

35. **Attachment A: Pricing** Does the term “client” refer to a program participant or does the NTBHA serve multiple agencies or entities that fall under this RFP?
 - a. Response: NTBHA services multiple agencies, in this context client refers to the program participants that are authorized to receive services through NTBHA.

36. There does not seem to be any utilization or claims data attached to the RFP. The Utilization/Claims data will need to include NDCs or GPIs and Formulary designation (preferred, non-preferred, etc.), and contain at least 12-months of data in order to perform a thorough analysis. Please provide such information in order for us to provide a better program for you.
 - a. Response: No claims data is available, NTBHA is looking for innovative solutions and the cost benefit. Pricing will be evaluated on all aspects of discounts, dispensing fees, and administrative fees.

37. Does NTBHA have an onsite pharmacy currently or an onsite remote dispensing machine? IF Yes, do they plan to continue the use of either? IF yes, how many locations currently have the onsite pharmacy and/or remote machine?
 - a. Response: NTBHA contracts out with providers in a 6 county area, some of the providers have on site pharmacies that will remain up and running, and other providers utilize retail pharmacies such as Target, CVS etc.

38. IS Dallas Metrocare part of the dispensing pharmacy network that will be required to process claims under the PBM Services contract? IF yes, can they provide the NPI of that pharmacy?
 - a. Response: Current NTBHA is working with Dallas Metrocare to become part of the provider network, until such contracts have been approved by all parties NTBHA cannot provide that information.

39. Does NTBHA anticipate the use of a Mail Order Pharmacy or looking for strictly utilizing a Retail Network of Pharmacies? OR Will NTBHA plan to utilize a combination of both?
 - a. Response: This is a new service for NTBHA to contract, being such NTBHA seeks innovative approaches to serving our clients the best way possible. We value the suggestions of our partners and look forward to working with a partner who can bring the best service for our clients.

40. Does NTBHA plan to utilize retail pharmacies or the Mail Order Pharmacy for storing/dispensing of PAP medications?
 - a. Response: This is a new service for NTBHA to contract, being such NTBHA seeks innovative approaches to serving our clients the best way possible. We value the suggestions of our partners and look forward to working with a partner who can bring the best service for our clients.

41. IF NTBHA anticipates utilizing a Mail Order Pharmacy, how many ship to locations will there be?
 - a. Response: This is a new service for NTBHA to contract, being such NTBHA seeks innovative approaches to serving our clients the best way possible. We value the suggestions of our partners and look forward to working with a partner who can bring the best service for our clients.

42. Does NTBHA anticipate the use of any blister / bingo card packaging?
 - a. Response: NTBHA anticipates there will be times when providers would prefer to use blister packs as opposed to providing clients with the amber vials.

43. Is our proposal to include mail order pharmacy services or just retail pharmacy services?
- a. Response: This is a new service for NTBHA to contract, being such NTBHA seeks innovative approaches to serving our clients the best way possible. We value the suggestions of our partners and look forward to working with a partner who can bring the best service for our clients.
44. Please explain what you are referring to on page 17, Section IV, SERVICES, as an “onsite distribution office”.
- Describe how Vendor will provide support to NTBHA to develop policies, procedures and guidance for operation of an onsite distribution office.
- a. Response: This is a new service for NTBHA to contract, since
45. If clinics serving the NTBHA population have in house pharmacies:
- a. How many clinics serve NTBHA today?
 - Response: None, NTBHA is in the process of contracting with various providers, some of which have a pharmacy onsite.
 - b. How many clinics have out-patient pharmacies?
 - Response: None, NTBHA is in the process of contracting with various providers, some of which have a pharmacy onsite.
 - c. How many prescriptions are filled at clinic versus non clinic (community) pharmacies? If exact numbers are not available, please offer an estimate.
 - Response: 12,000 – covered lives a month
 - d. Are the prescription claims filled at clinic pharmacies processed through the PBM or direct billed to NTBHA today? What about in the future?
 - Response: This will be a new program for the North Texas area. six county service delivery area. NTBHA is implementing an updated indigent behavioral health program as the existing NorthSTAR Program will be ending on December 31, 2016.
46. Are patients of NTBHA required to pay any copays or experience any out of pocket expense to have a prescription filled? If not, where and how would Patient Assistance Programs apply to the population NTBHA serves?
- Response: For the most part many of the clients should not need to pay a co-pay however, there may be instances in which there will be a co-pay and that’s when NTBHA will be in need of PAP services.
47. Is there a specific drug formulary in place today? Who is responsible for ongoing formulary maintenance, (especially the consideration of new to market medications) the PBM or another entity?
- Response: Attachment F is the current draft formulary. Once a contractor is selected NTBHA will collaborate with Provider Network and contract to create a formulary.
48. In the RFP a reference is made to Attachment F Formulary...but it is not present...can you provide a copy of the formulary? The RFP ends on page 25 of 25 Exhibit E.
- Response: PDF has been attached to original RFP on the website.
49. Is there any coordination of benefits (COB) required to process billing and payment of NTBHA claims? If so, will NTBHA provide Other Health Insurance (OHI) information?
- Response: Currently there is no such service, NTBHA will look to coordinate with the selected vendor to assist with such items.

50. Please confirm that there are no special packaging requirements for prescriptions dispensed to your population?

- Response: NTBHA anticipates there will be times when providers would prefer to use blister packs as opposed to providing clients with the amber vials.

51. Please verify that facility staffing is not a requirement for this proposal?

As an example: Expecting a "pharmacy" to be set up in the facilities that do not have one?

- Response: No, many of the providers in the NTBHA Network have their own on-site pharmacy completely staffed; other providers utilize retail pharmacies and provide their consumers with prescriptions.

52. Can you list any specific outsourced functions you are seeking that are not core standard PBM functions and service offerings?

- Response: This will be a new program for NTBHA and the six county service delivery area. NTBHA urges all responders to provide as much information on the various innovative plans and services they provide.