

Alabama PEEHIP Medical-Pharmacy Drug Program RFP

1 PURPOSE / INTRODUCTION

1.1 INTRODUCTION

Through the issuance of this Request for Proposal "RFP" Alabama's Public Education Employees' Health Insurance Plan (PEEHIP) is soliciting options for their self-insured Medical-Pharmacy Drug program.

The effective date for the Medical-Pharmacy Drug Program contract is October 1, 2022. If interested and able to meet the requirements described in this RFP, PEEHIP appreciates and welcomes your offer.

Four additional RFPs have recently been or are being released separately from the Medical-Pharmacy Drug Program RFP. They are:

- Flexible Program Administration (FSA)
- Optional Dental, Vision, Hospital Indemnity and Cancer Plans
- Medicare Advantage and Prescription Drugs (MA-PD)
- Medical PPO

Please note that Alabama PEEHIP has chosen to market the FSA, Optional Plans, MA-PD and Medical PPO coverages separately. This RFP is only for Medical-Pharmacy Drugs; therefore, responses provided in this RFP should be for Medical-Pharmacy Drug Program administration services only. Any information provided by respondents, which pertains to FSA, Optional Plans, MA-PD or Medical PPO services (unless explicitly requested within the RFP) will not be considered in evaluation of this RFP. This includes attempts by Bidders to provide Medical-Pharmacy Drug Program fees that are contingent upon the additional award of business in connection with the FSA, Optional Plans, MA-PD or Medical PPO services.

PEEHIP reserves the right to award any service in whole or in part, if proposals suggest that doing so would be in PEEHIP's best interest. PEEHIP also reserves the right to issue multiple awards, no award or cancel or alter the procurement at any time. In addition, PEEHIP reserves the right to extend the proposed RFP period, if needed. Proposals containing the lowest cost will not necessarily be awarded as PEEHIP recognizes that factors other than costs are important to the ultimate selection of the provider or providers of their benefit plan.

Proposals provided in response to this RFP must comply with the submittal requirements set forth in later sections, including all forms and certifications, and will be evaluated in accordance with the criteria and procedures described herein. Based on the results of the evaluation, PEEHIP will award the contract to the most advantageous Bidder, based on the evaluation of cost and capability factors set forth in the RFP. Any contract awarded hereunder shall be subject to the approval of the PEEHIP Board of Control and all appropriate PEEHIP and governmental officials in accordance with applicable state laws and regulations.

Please read the entire solicitation package and submit an offer in accordance with the instructions. All forms contained in the solicitation package must be completed in full and submitted along with the Technical Response and Price Proposal Worksheets, which combined, will constitute the offer. **This RFP and your response, including all subsequent documents provided during this RFP process will become part of the contract terms and policy between the parties.**

PEEHIP has retained Segal to assist in the evaluation of the proposals for completeness and responsiveness to the RFP and to review such proposals with them. Each proposal shall be evaluated in accordance with the company's selection criteria and other relevant factors listed below:

- Value of the services, taking into consideration the requirements of the RFP, proposed services, and any "value added" terms, conditions and service levels
- Bidder's ability to offer a proposal based on the lowest net cost on a per member per month basis

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- Qualifications of the firm including financial capacity, staffing, and availability of staff to work with PEEHIP during Open Enrollment and continue to support PEEHIP after the program's "go-live" date
- Bidder's experience with the appropriate plans; commitment to such plans; experience offering such plans to public sector employers
- Bidder's experience in administering a variable copay solution that maximizes copay assistance programs
- Bidder's ability to provide exceptional prior authorization and other utilization management programs
- Bidder's ability to educate and communicate with program participants
- Bidder's ability to minimize enrollee disruption

All Bidders must meet the general conditions set forth in this RFP and are asked to respond only to the specific questions asked.

2 GENERAL INFORMATION

2.1 BACKGROUND

PEEHIP was established in 1983 by the Alabama legislature to provide quality health care insurance benefits for employees of public institutions of education within the state of Alabama which provide instruction at any combination of grades K through 14, exclusively, under the auspices of the State Board of Education, the Alabama Community College System Board of Trustees, or the Alabama Institute for Deaf and Blind. These health care benefits are available to all full-time, permanent part-time, and retired employees, and their eligible dependents.

Local employer units consist of all city school systems, county school systems, and community colleges in the state of Alabama. These entities are not allowed to opt out of the PEEHIP program. All 13 state four-year colleges and universities offer the PEEHIP program to their retirees, with only two institutions offering the program to the active population. However, others may join the program subject to meeting applicable requirements.

PEEHIP active employees and non-Medicare eligible retirees can choose one of three medical plans and/or either/or both of two Flexible Spending Accounts (active employees only), and/or any of four optional coverage plans as follows:

- Hospital Medical Plan currently administered by Blue Cross and Blue Shield of Alabama (BCBSAL) (group #14000).
- Drug coverage currently administered by Express Scripts.
- Health Maintenance Organization currently administered by Viva Health Network.
- Supplemental Medical Plan currently administered by Blue Cross and Blue Shield of Alabama (group #61000)
- Flexible Spending Accounts - Healthcare and Dependent Care currently administered by HealthEquity.
- Optional Coverage Plans currently administered by Southland Benefit Solutions, LLC, - consisting of Dental, Hospital Indemnity, Vision and Cancer.

Medicare eligible retirees and Medicare eligible dependents of retirees are covered under a Medicare Advantage Plan with Part D included. This plan is currently administered by Humana.

Prescription drugs under the medical benefit are currently carved into the medical plan and are administered by BCBSAL. PEEHIP's current arrangement with BCBSAL operates through a typical buy-and-bill program for Medical-Drugs. BCBSAL's contracted PBM, Prime Therapeutics/Magellan assesses Utilization Management (UM) and Prior Authorization (PA) criteria and submits for rebates. Note that for oncology medications the UM

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and PA are set by AIM Specialty Health. More information on the UM and PA process can be found at the link below:

<https://al-policies.exploremyplan.com/portal/web/al-policies/member-policies/-/categories/171118>

In addition, in partnership with BCBSAL, HealthSmartRx administers a copay assistance maximizer coupon program for mainly specialty prescription drugs under the medical benefit.

2.2 Enrollment

The following provides the approximate enrollment numbers for the PEEHIP medical plans as of 9/30/2021:

	Active		Retired		Total		Member Contracts	Covered Persons	Lives per Contract
	Single	Family	Single	Family	Single	Family			
Total	32,527	51,226	5,571	6,709	38,098	57,935	96,033	229,341	2.39

2.3 OBJECTIVES

PEEHIP seeks to provide high quality, cost-effective benefits to its active and early retiree members and their dependents. PEEHIP is soliciting offers for options for their self-insured Medical-Pharmacy Drug program. For the purposes of this RFP, the term 'Medical-Pharmacy Drug' or 'Medical-Drug' is defined as a prescription medication that would typically be administered and billed under the medical benefit.

As part of this RFP, we are requesting that your organization provide at minimum one offer based upon the details in Option #1 below. Additionally, your organization may or may not provide a separate offer based on Option #2.

1. Status Quo Option -

- Maintain PEEHIP's existing Medical-Drug claims processing procedures as administered by Medical PPO Vendor. No eligibility data will be shared with the Bidder by PEEHIP and no claims will be adjudicated by the Bidder.
- Contract with Medical PPO Vendor solely for the administration of certain Medical-Drugs for PPO vendor's network. Under this option, the medical PPO vendor will process the claim just as is done today. Bidder will employ utilization management, manufacturer assistance, and complete pass through of all rebates.
- Partner with PEEHIP's Medical PPO Vendor to administer and process copay assistance maximizer coupon program for medical billed drugs. Medical PPO Vendor will bill PEEHIP for the remaining balance on each claim based on Medical PPO Vendor's set reimbursement rate.
- Contract with PEEHIP's Medical PPO Vendor to employ your best practice Utilization Management (UM), site of care and Prior Authorization (PA) criteria.
- Contract with PEEHIP's Medical PPO Vendor to pass through all rebate dollars received due to PEEHIP claims. Drug-level rebate reporting is also to be shared with PEEHIP.
- Leverage any other strategies or processes designed to reduce net cost while maintaining high quality of care.

2. *Vendor Proposed Option* - Propose a separate arrangement where your organization replaces the existing buy-and-bill system and instead bills and dispenses the drug through your Vendor-contracted specialty pharmacy. This arrangement shall include the following:

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- Bill and administer certain Medical-Drugs.
- Administer and process copay assistance maximizer coupon program for medical billed drugs.
- Determine and administer Utilization Management (UM), site of care, and Prior Authorization (PA) criteria.
- Process and submit rebates.
- Coordinate with PEEHIP's medical-PPO vendor.
- Leverage any other strategies or processes designed to reduce net cost while maintaining high quality of care.

The goals of this RFP are to maximum transparency in the utilization management and billing processes, (including rebates) minimize member disruption, and provide aggressive lowest net cost pricing with guarantees. PEEHIP desires a three-year contract, with discount guarantees and performance standards with fees at risk.

Proposals will be reviewed and evaluated for completeness and responsiveness according to PEEHIP's selection criteria. Proposals will be considered completed only if the Bidder responds to and meets all the requirements of this RFP.

PEEHIP will evaluate each proposal considering the following criteria:

- Overall Net Costs (discounts, rebates, coupons, etc.) to PEEHIP and its participants
- Member Services, Account Service Capabilities and ability to meet core client service requirements
- Clinical Support to PEEHIP
- Strength of Pharmacy Network and Utilization Management Programs

PEEHIP reserves the right to award this contract or to cancel this RFP and solicit new proposals if, in PEEHIP's sole judgment, the best interests of PEEHIP will be served.

Please confirm what options you will be bidding on:

Single, Radio group.

1: I am bidding on the Status Quo Option Only,

2: I am bidding on both the Status Quo and Vendor Proposed Option

2.4 CONTRACT TERM

The contract term is for a three-year period beginning October 1, 2022, with Implementation to begin at contract award. There will not be an extension of the contract period.

3 RESPONSE INSTRUCTIONS

3.1 INSTRUCTIONS FOR SUBMITTING OFFERS

Detailed instructions for the completion and submission of your proposal will be found in the electronic RFP (eRFP) on ProposalTech. ProposalTech will be available to assist you with technical aspects of utilizing the system.

All sections must be answered completely and as outlined in the RFP, using ProposalTech.

Final submissions must be posted with ProposalTech at www.proposaltech.com before the due date and time cited. Access to the eRFP will be locked after that time. Bidders will not be able to post or change their

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responses. Late proposals will not be considered. PEEHIP reserves the right to ask Bidders follow-up questions through ProposalTech as may be necessary to fully evaluate bidder capabilities.

Please note that these instructions are to be read and followed by each Bidder and that failure to follow these instructions may result in rejection of a proposal offer for non-responsiveness or cancellation of contract if already awarded. **Any mention of “days” in this RFP will refer to calendar days unless noted.**

In order for your proposal to be considered and accepted, you must provide answers to the questions presented in this RFP. Each question must be answered specifically and in detail. Be sure to review this entire RFP before responding to any of the questions, so that you have a complete understanding of all of PEEHIP's requirements with respect to the proposal.

*****DO NOT ALTER THE QUESTIONS/Requirements OR QUESTION/requirement NUMBERING*****

1. Provide answers to all questions in your submission.
2. Provide an answer to each question even if the answer is “not applicable” or “unknown.”
3. Answer the question as directly as possible.
 - If the question asks “How many...”, provide a number.
 - If the question asks, “Do you...”, indicate Yes or No followed by any additional narrative explanation.
4. Where you desire to provide additional information to assist the reader in more fully understanding a response, refer the reader of your RFP response to your appendix/attachments. However, direct responses to all of the RFP questions must be provided and will be looked upon favorably.
5. Bidder will be held accountable for accuracy/validity of all answers.

If your proposal is different in any way (whether more or less favorable) from what is requested in this RFP, clearly indicate and explain the difference in the response to that particular question and the *Bid Exceptions & Deviations Form*. If you do not, the submission of your proposal will be deemed a certification that you will comply in every respect (including, but not limited to, coverage provided, funding method requested, benefit exclusions and limitations, underwriting provisions, etc.) with the requirements set forth in this RFP.

If you are unable to perform any required service, indicate clearly: a) what you are currently unable to do, and, b) what steps will be taken (if any) to meet the requirement, the timetable for that process and who will be responsible for the implementation, along with that person's qualifications.

All products should be priced individually. If pricing terms are provided for combining services, show the pricing terms as a separate line item.

Intent to bid: If your company intends to submit a proposal for administration of PEEHIP's Medical - Pharmacy Drug program, and wishes to access the Reference Documents (e.g., plan information, demographics, etc.), please complete the *Intent to Bid Form* and submit completed form through ProposalTech per the instructions on Section 4 Intent to Bid and Non-Disclosure Form section by the deadline outlined in Section 3.4 Key Dates. Upon receipt of a signed Intent to Bid form and a fully executed NDA, Bidders will receive data in connection with this RFP. An *Intent to Bid Form* does not bind participants to submit a proposal.

Bidder questions: Any questions regarding this proposal should be submitted directly via ProposalTech using the “Ask Questions” feature on the main RFP page. Questions from any potential Bidder will be answered. Questions sent via email or telephone will not be accepted. PEEHIP reserves the right to provide a combined answer to similar questions. Any and all questions and answers to this RFP will be posted on

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ProposalTech. Questions regarding technical issues with the website should be directed to ProposalTech, by calling (877) 211-8316, ext. #4, and asking for support.

Submission of proposals: Your completed proposal including a sample contract that addresses all the items in General Proposal Conditions, is to be submitted electronically via ProposalTech.

All decisions and evaluations will be determined from the proposals submitted electronically via ProposalTech.

The Bidder must also provide two copies of its proposal via a thumb drive: One copy will have the complete proposal submission and the other copy will have the complete proposal submission that has been redacted for proprietary information.

In the event of a discrepancy/conflict between the ProposalTech submission and the thumb drive version, the ProposalTech version will take precedence. In the event a document or section is omitted from the ProposalTech version of the Bidder's response, PEEHIP reserves the right to accept the omitted document or section, if included, in the thumb drive version. All documents should remain in their native formats. Thumb drives should be addressed and mailed or delivered to:

Mr. Frank Roemer
PEEHIP
201 South Union Street
5th Floor
Montgomery, Alabama 36104

Thumb drives should be delivered to the address noted above by date specified on Section 3.4 Key Dates table. Proposals will not be accepted after these stated dates and times. PEEHIP reserves the right to reject any and all responses to this RFP.

Your completed proposal should be submitted in the following format:

- Cover Letter
- Completed Section 4: Intent to Bid and Non-Disclosure Agreement (NDA)
- Completed Section 5: Information Required from Bidders
- Completed Section 6: General Proposal Conditions
- Sample Contract that addresses all the items in Section 6
- Completed Section 8: Questionnaire
- Completed Section 9: Price Proposal
- Required Attachments

3.2 QUESTIONNAIRE INSTRUCTIONS

PEEHIP and Segal will review and evaluate each proposal carefully. Many questions within the RFP system do not require lengthy responses. When a question does require a written response, please provide a response that is clear and concise. DO NOT answer any of the questions by referring to a prior answer or by referring to an attachment. Any such answers will not be considered and will constitute sufficient grounds for rejecting a proposal.

ANSWERS TO THE QUESTIONS SHOULD BE AS SHORT AND CONCISE AS POSSIBLE TO FACILITATE OUR ANALYSIS AND TO AVOID CONFUSION.

3.3 BIDDER'S CONFERENCE

A Bidders Conference Call will be held for this RFP the week April 18, 2022. The exact date and time of the call will be posted to Proposal Tech as well as a link to join the meeting. All interested Bidders should plan to attend. It will be assumed that potential Bidder(s) attending this conference call have reviewed the RFP in detail and are prepared to bring up any substantive questions not already addressed in this RFP.

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3.4 KEY DATES

Event	Due Date
Release of RFP	April 12, 2022
Bidder's Conference	Week of April 18
Notification of Intent to Bid and Receipt of NDA (by 5:00 pm EST)	April 21, 2022
Written Questions from Bidders Due Date (by 5:00 pm EST)	April 25, 2022
Response to Questions from Bidders Released	April 28, 2022
Electronic Bid Due Date (no later than 5:00 p.m. EST)	May 6, 2022
Thumb Drive Due Date (no later than 5:00 p.m. EST)	May 10, 2022
Notification of Finalist(s)	Week of May 16, 2022
Finalist(s) Presentation(s) in Montgomery	Week of May 23, 2022
Anticipated Contract Award Date	June 8, 2022
Implementation Begins	June 9, 2022
Proposed Effective Date	October 1, 2022

3.5 SELECTION OF PARTNER

All responding Bidders will be notified in writing within a reasonable length of time following the selection. Prior to the selection of a vendor partner, two or more Bidders may be requested to make oral presentations in person to the evaluation committee. Any costs incurred by Bidder related to oral presentations shall be borne by such Bidders. The proposal shall become the property of PEEHIP.

3.6 ECONOMY OF PREPARATION

Proposals should be prepared simply and economically and provide a concise description of the bidder's response to the requirements of this RFP. Emphasis should be on clarity. PEEHIP will not be responsible for any costs incurred by any Bidder in the preparation, submission, or presentation of a proposal.

3.7 NEWS RELEASES

News releases pertaining to this RFP, or to any services to which it relates, will be made only with prior written approval of PEEHIP, which may be withheld for any reason.

3.8 ADDENDA TO THE RFP

Any modifications made to the RFP prior to the proposal due date will be provided to all vendors via the Proposal Tech system described in this RFP.

3.9 SOLICITATION CONTACT

All questions regarding this RFP should be submitted to the Solicitation Contact, Ms. Jennifer Slutzky, through the Ask Question link in the left-hand side menu of the RFP in Proposal Tech. Questions regarding technical issues with the website should be directed to Proposal Tech, by calling (877) 211-8316, ext. #4, and asking for support.

Proposers are not allowed to communicate concerning this RFP with any PEEHIP member or employee except as provided by existing work agreements. For violation of this provision, PEEHIP reserves the right to reject the proposal of the violator.

3.10 DISCLOSURE OF PROPOSAL CONTENTS

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Proposals and supporting documents are kept confidential until the evaluation process is complete and a contract has been awarded. Bidders should be aware that any information in a proposal may be subject to disclosure and/or reproduction under Alabama law. Designation as proprietary or confidential may not protect any materials included within the proposal from disclosure, if required by law. Bidders should mark or otherwise designate any material that it feels is proprietary or otherwise confidential by labeling the page as "confidential." Bidders shall redact this information in the redacted copy provided to PEEHIP pursuant to Section 3.4 Proposal Delivery. Bidders shall also state any legal authority as to why that material should not be subject to public disclosure under Alabama open records laws and is marked as proprietary information. Information contained in the cost proposal may not be marked confidential. It is the sole responsibility of the Bidder to indicate information that is to remain confidential. If the Bidder identifies its entire proposal as confidential, PEEHIP may deem the proposal non-responsive and may reject it.

Bidder agrees to intervene in and defend any lawsuit brought against PEEHIP for its refusal to provide Bidder's alleged confidential and/or proprietary information to a requesting party. PEEHIP shall provide Bidder written notice of any such lawsuit within ten (10) days of receipt of service by PEEHIP. Bidder shall intervene within thirty (30) days of notice or will be deemed to have waived any and all claim that information contained in the proposal is confidential and/or proprietary and any and all claims against PEEHIP for disclosure of Bidder's alleged confidential and/or proprietary information.

****The identification of confidential responses has been turned on for this RFP. If you feel that a response to a question contains proprietary/confidential information, click the "Disclosure" tab located underneath the question and check the box for "Exemption from Disclosure." Provide a reason for the exemption in the text field provided. If you do not provide a reason for exemption, the question will not be considered answered. If you have any questions regarding this process, please contact Proposal Tech Support at 877-211-8316 x84.***

4 INTENT TO BID AND NON-DISCLOSURE FORM (NDA)

4.1 If you intend to submit a proposal for administration of PEEHIP's Medical PPO Plan, and wish to access the data (e.g., plan information, demographics, etc.), the *Intent to Bid Form* must be completed and submitted via the ProposalTech system per the Key Dates table in Section 3.4. Note that the *Intent to Bid Form* also requires bidders to name a designated recipient(s) to whom the RFP related data should be sent.

PLEASE FOLLOW THE INSTRUCTIONS BELOW. SIMPLY UPLOADING THE INTENT TO BID FORM TO PROPOSALTECH DOES NOT GIVE SEGAL ACCESS TO THE FILE.

Instructions for submission: Click on the Messaging/History in the left-hand side menu and on the following page create a "New" message and select "Individual User" (Jennifer Slutzky) to send to. Once your attachment is uploaded be sure to check the box to include your attachment with the email and then click "Send."

Upon receipt of the *Intent to Bid Form* Segal will review internally whether we have a current Global or Bid-Related NDA/Confidentiality Agreement on file in our system, with each Bidder. No data will be issued without first having a signed NDA/Confidentiality Agreement on file.

If there is no NDA/Confidentiality Agreement on file with Segal, a document will be issued to the interested Vendor for signature and instructions to return signed form. Verbiage is non-negotiable. Upon receipt of the newly signed NDA, or confirmation of an existing NDA on file, Segal will establish a secure workspace and

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upload the data file(s). A system-generated e-mail will be sent to the Vendor's designated data recipient, containing a link to instructions for accessing the workspace.

Single, Radio group.

1: Completed and sent,

2: Not provided

Attached Document(s): [Intent to Bid Form_FINAL.doc](#)

5 INFORMATION REQUIRED FROM BIDDERS

5.1 QUALIFICATIONS OF THE FIRM - BUSINESS ORGANIZATION

5.1.1 State the full name and address of your organization, and if applicable, the branch office or other subordinate element that will perform or assist in performing the work hereunder.

500 words.

5.1.2 Indicate whether you operate as an individual, partnership, limited liability company, or corporation.

500 words.

5.1.3 State the name of the state in which you are formed or incorporated.

500 words.

5.1.4 State whether you are currently in good standing in the state in which you are formed or incorporated and provide a Certificate of Good Standing from that state.

500 words.

5.1.5 State whether you are licensed to operate in the State of Alabama.

500 words.

5.2 QUALIFICATIONS OF THE FIRM - PRIOR EXPERIENCE

5.2.1 To be considered a viable Bidder, the following minimum requirements for prior experience must be met:

1) Bidder must have provided administration services for Medical-Pharmacy Drug Program coverage (on a self-funded basis) for the last 5 years to each:

- one state-level health plan with at least 150,000 lives; and
- a book of business with at least 2 million covered lives.

2) Bidder must not have any bankruptcy filings within the last 5 years: and

3) Bidder's senior officers, board members, or directors must not have any felony convictions.

Please confirm that your organization meets the above minimum Bidder requirements.

Single, Radio group.

1: Yes,

2: No

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5.3 QUALIFICATIONS OF THE FIRM - MANPOWER

5.3.1 Identify lead individuals by name and title. Include a resume for each and the proposed percent of time dedicated to this account (based on 40 hour work-week).

500 words.

5.4 QUALIFICATIONS OF THE FIRM - AUTHORIZED OFFICIALS

5.4.1 Include the names, titles, e-mail addresses and telephone numbers of personnel of the organization authorized to execute the proposed contracts with PEEHIP.

500 words.

5.5 QUALIFICATIONS OF THE FIRM - COST AND PRICE ANALYSIS

5.5.1 The information requested in this Section and the RFP questionnaire is required to support the reasonableness of your proposed price. In the *Price Proposal Worksheet - Attachment 1*, please adhere to the following:

Please provide separately for the Status Quo Option and the Vendor Proposed Option.

- Reflect the details of the expected total contract cost for fiscal plan years 2023, 2024 and 2025 (plan years run October 1st through September 30th-- e.g., plan year 2023 will run 10/1/22 - 9/30/23)
- Reflect a three-year contract for performing the administration services for prescription drugs run through the medical benefit for fiscal plan years 2023 through 2025.
- Minimum three-year fee guarantee is requested
- Administration fee should be quoted on a per-employee-per-month (PEPM) basis (although lowest cost is not necessarily the only decision-making factor)
- All “add-on” costs must be estimated and documented in the Price Proposal Worksheet - Attachment 1

5.6 SCORING CRITERIA

5.6.1 Proposals will be evaluated by an evaluation committee. Selection will be based on all factors listed below and others implicit within the RFP and will represent the best performance and reasonable costs for PEEHIP. Oral presentations may be required as part of the evaluation criteria.

Technical Proposal Section	Maximum Points
Organizational Experience, Company Overview and Client References	75
Member Services and Account Management	75
Contracting and Utilization Management	100
Data and Reporting, Eligibility and Claims Processing	100

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Manufacturer Assistance / Coupons	100
Pricing and Rebates	150
Implementation and Communications	75
Performance Guarantees	50
Transparency in Coverage Final Rule and No Surprises Act	25
Total Technical Proposal	750 points
Total Price Proposal	250 points
Total Proposal	1,000 points
Finalist Interviews/Site Visits (optional)	100 points

5.7 OTHER INFORMATION

5.7.1 Other documents and information that may be helpful in preparing your proposal may be accessed via the Internet as follows:

<http://www.rsa-al.gov/> - RSA home page

<http://www.rsa-al.gov/peehip/> - PEEHIP home page

<http://www.rsa-al.gov/index.php/employers/peehip/> - PEEHIP employers section of RSA web page

www.sos.alabama.gov - Secretary of State home page

<http://alisondb.legislature.state.al.us/alison/codeofalabama/1975/coatoc.htm> - Statutes establishing and governing PEEHIP - See Title 16, Chapter 25A

<https://al-policies.exploremyplan.com/portal/web/al-policies/member-policies/-/categories/801789002> - HealthSmartRx assistance for Medical Drugs

<https://al-policies.exploremyplan.com/portal/web/al-policies/member-policies/-/categories/235996> - Hemophilia Drug UM and PA criteria - administered through Magellan

<https://al-policies.exploremyplan.com/portal/web/al-policies/member-policies/-/categories/171118> - Medical Drug Policies (non oncology)

<https://al-policies.exploremyplan.com/portal/web/al-policies/member-policies/-/categories/171190> - Medical Drug policies (oncology only)

5.8 ADDITIONAL PROCUREMENT DOCUMENTS

5.8.1 The following documents, labeled Exhibits 1-8 in ProposalTech, must be completed and submitted with your proposal:

1. Exhibit 1 - State of Alabama Disclosure Statement (Required by Article 3B of Title 41, Code of Alabama 1975) - two pages
2. Exhibit 2 - Sample PEEHIP State Contract
3. Exhibit 3 - Business Associate Agreement
4. Exhibit 4 - Immigration Compliance Certificate (submission must include entire E-Verify Memorandum of Understanding, verified by the U.S. Department of Homeland Security)

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5. Exhibit 5 - IRS Form W-9
6. Exhibit 6 - Verification of adherence to the PEEHIP Statement on HIPAA Compliance Documentation. Please see the Business Associate Data Security Policy as a reference.
7. Exhibit 6A - Bidder Verification Adherence to BA Policy
8. Exhibit 7 - RSA Third Party Vendor Security Questionnaire
9. Exhibit 8 - Trading Partner Agreement

Please confirm you have downloaded, completed and uploaded all of the procurement documents listed above. If not, please explain.

Attached Document(s): [Exhibit 1 State of Alabama Disclosure Statement.pdf](#), [Exhibit 2 Sample PEEHIP State Contract.pdf](#), [Exhibit 3 Business Associate Agreement.pdf](#), [Exhibit 4 Immigration Compliance Certificate.pdf](#), [Exhibit 5 IRS Form W-9.pdf](#), [Exhibit 6A - Bidder Verification Adherence to BA Policy.docx](#), [Exhibit 6 Verification of Adherence to the PEEHIP Statement on HIPAA Compliance Documentation.pdf](#), [Exhibit 7 RSA Third Party Vendor Security Questionnaire FINAL.xlsx](#), [Exhibit 8 Trading Partner Agreement.docx](#)

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed: [500 words]

6 GENERAL PROPOSAL CONDITIONS

Below are the general conditions for submitting a proposal. By checking “Agree”, Bidder represents the proposal submitted adheres to these conditions, unless otherwise noted in the proposal. **Failure to meet any of these conditions may result in disqualification of proposal.** This RFP and your response, including all subsequent documents provided during this RFP process, will become part of the contract terms and policy between the parties. If a Bidder takes exception to any of these conditions, it must be so noted in the Bid Exceptions and Deviations Document of their proposal response. These requirements will also explicitly apply to any subcontractors used by the Bidder to deliver services to PEEHIP. If a proposal condition would not be applicable under the Status Quo or Vendor Proposed options, please indicate in your response.

6.1 Any award will be made to the Bidder(s) whose proposal(s) is/are deemed to be in the best interest of PEEHIP. PEEHIP reserves the right to reject any and all proposals.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.2 Bidder agrees to respond to this RFP in full, including all requirements.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.3 Any cost incurred by Bidder in preparing or submitting proposals or attending Finalist Interviews is Bidder's sole responsibility. Proposals will not be returned.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.4 Bidder is expected to operate in good faith by fulfilling and/or bringing to fruition any oral explanations or instructions but will not be bound by any of these given during the competitive process or after the award of the contract(s). However, PEEHIP reserves the right to request that Bidder put any such oral explanations or

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instructions into writing and, once in written format, such documentation shall become part of Bidder's proposal for purposes of becoming part of the final agreement.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.5 Bidder agrees to be bound by its proposal for a period of at least 180 days, during which time PEEHIP and/or Segal may request clarification or correction of the proposal for the purpose of evaluation. Amendments or clarifications shall not affect the remainder of the proposal, but only the portion as amended or clarified.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.6 Any exceptions to terms, conditions, or other requirements in any part of these specifications must be clearly pointed out in the appropriate section of the proposal. Otherwise, it will be considered that all items offered are in strict compliance with the specifications.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.7 The proposal must be signed (electronic signature) by a legal representative of the bidding firm, who is authorized to bind the firm to a contract in the event of the award. All rates, fees and terms presented will be considered legally binding. Please see the PEEHIP Binding Signature document, attached in the Manage Documents section of the eRFP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.8 All Bidder services must adhere to relevant federal and state laws and regulations.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.9 Any early termination provision contained in your contract cannot be tied to financial provisions or penalties. Either party can terminate the contract without cause. However, PEEHIP can provide 30 days' notice while you will be required to provide 180 days' notice to PEEHIP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.10 Bidder agrees to provide completed Exhibit 1 - Alabama Disclosure Statement, Exhibit 4 - Immigration Compliance Certificate (entire E-Verify Memorandum of Understanding (MOU), verified by U.S. Office of Homeland Security), and Exhibit 5 - IRS Form W-9 with submission of proposal.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.11 Bidder agrees that the MOU for e-Verify will match the EIN on the Exhibit 5 - IRS Form W-9 or offer an explanation on company letterhead of why the numbers are different.

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Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.12 Bidder agrees there will be no initial or ongoing commissions or finder's fees payable on any plan or services as a result of this RFP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.13 There are NO additional fees (beyond those outlined in the Price Proposal) required to provide the services outlined in this RFP. Any mandatory fees must be clearly outlined in the Price Proposal. Under no circumstances will PEEHIP be liable to Bidder for fees not disclosed in Bidder's written proposal.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.14 Bidder agrees to abide by the following contract language: Contractor acknowledges that Contractor is an independent contractor, and neither Contractor nor Contractor's employees are to be considered employees of PEEHIP or entitled to benefits under the State of Alabama Merit System.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.15 Bidder agrees to abide by the following contract language: Contractor acknowledges that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article 11, Section 213 of the Constitution of Alabama, 1901, as amended by Amendment Number 26. It is further agreed that if any provisions of this Agreement shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Agreement, be enacted, then that conflicting provision in the Agreement shall be deemed null and void. Contractor may not assign this Agreement or any interest herein or any money due hereunder without the expressed written consent of PEEHIP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.16 Bidder agrees to abide by the following contract language: To the fullest extent permitted by law, the Contractor shall indemnify, defend, and hold harmless PEEHIP, the State of Alabama, and their affiliates, and their respective administrators, officers, directors, agents, and employees (the "Indemnitees"), from and against any and all claims, damages, losses, and expenses, including, but not limited to, attorney's fees, arising out of or resulting from the Contractor's performance of services under this Agreement and/or any other of the Contractor's acts and/or omissions under this Agreement. Without limiting the foregoing in any manner, the Contractor shall indemnify, defend, and hold harmless the Indemnitees from and against any and all claims, damages, losses and expenses, including, but not limited to, attorney's fees, (a) incurred as a result of the Contractor's violation of any law, rule or regulation; (b) arising out of, or related to, the Contractor's breach of warranty or representation; or (c) arising out of, or related to, the Contractor's negligent or willful misconduct.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

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6.17 Bidder agrees to abide by the following contract language: Contractor acknowledges and agrees that, PEEHIP shall not indemnify or hold harmless Contractor, its affiliates, administrators, officers, employees, or agents. Contractor further acknowledges and agrees that PEEHIP shall not be liable to Contractor for any late fees, penalties, collection fees, or attorney fees.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.18 Bidder agrees to abide by the following contract language: Contractor acknowledges that, in the course of performing its responsibilities under this Agreement, Contractor may be exposed to or acquire information that is proprietary or confidential to PEEHIP or its members. Contractor agrees to hold such information in confidence and not to copy, reproduce, sell, assign, license, market, transfer, or otherwise disclose such information to third parties or to use such information for any purpose whatsoever, without the express written permission of PEEHIP, other than for the performance of obligations hereunder or as required by applicable state or federal law. For purposes of this Agreement, all records, financial information, specifications, and data disclosed to Contractor during the term of this Agreement, whether submitted orally, in writing, or by any other media, shall be deemed to be confidential in nature unless otherwise specifically stated in writing by PEEHIP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.19 Bidder agrees to abide by the following contract language: Contractor acknowledges that PEEHIP may be subject to Alabama open records laws or similar state and/or federal laws relating to disclosure of public records and may be required, upon request, to disclose certain records and information covered by and not exempted from such laws. Notwithstanding anything to the contrary contained in Contractor's proposal or in this final Agreement, Contractor acknowledges and agrees that PEEHIP may comply with those laws and any such compliance shall not be deemed a violation with any provision of Contractor's proposal or final Agreement.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.20 Bidder agrees to abide by the following contract language: By signing this contract, the contracting parties affirm, for the duration of the Agreement, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a contracting party found to be in violation of this provision shall be deemed in breach of the Agreement and shall be responsible for all damages resulting therefrom.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.21 Bidder agrees to abide by the following contract language: In compliance with Act 2016-312, Contractor hereby certifies that it is not currently engaged in, and will not engage in, the boycott of a person or an entity based in or doing business with a jurisdiction with which this state can enjoy open trade.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

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6.22 Bidder agrees to abide by the following contract language: In the event of any dispute between the parties, senior officials of both parties shall meet and engage in a good faith attempt to resolve the dispute. Should that effort fail and the dispute involve the payment of money, Contractor's sole remedy is the filing of a claim with the Board of Adjustment to the State of Alabama. For any and all other disputes arising under the terms of this Agreement which are not resolved by negotiation, the parties agree to utilize appropriate forms of nonbinding alternative dispute resolution including, but not limited to, mediation. Such dispute resolution shall occur in Montgomery, Alabama, utilizing where appropriate, mediators selected from the roster of mediators maintained by the Center for Dispute Resolution of the Alabama State Bar.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.23 Bidder agrees to abide by the following contract language: This Agreement shall be governed by and construed in accordance with Alabama Law, without giving any effect to the conflict of laws provision thereof.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.24 Bidder agrees to make changes in a timely manner in such instances where the Alabama Legislature enacts legislation that impacts PEEHIP and requires such changes.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.25 Insurance. Bidder shall maintain or obtain (as applicable), with respect to the activities in which Bidder engages pursuant to this Agreement, professional liability (errors and omissions) insurance and general liability insurance in amounts reasonable and customary for the nature and scope of business engaged in by such party. Bidder shall deliver to PEEHIP evidence of such insurance on or before the Effective Date and annually thereafter and name PEEHIP as an additional insured. Please specify the liability coverage amounts you are offering for this account.

Single, Radio group.

1: Agree, please specify coverage amounts.,

2: Disagree, explain: [500 words]

6.26 If selected as a finalist, PEEHIP will require that you provide copies of all privacy policies, terms of use protections and any other terms related to cyber security protection. Please note that this applies not only for how you will use and transfer data but also as it relates to employee sites or portal access.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.27 Bidder will accept liability for any mistakes, errors, or omissions it makes in providing services to PEEHIP and its members.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.28 Bidders must have all licenses necessary to do business in the State of Alabama and to perform the services required by PEEHIP. If you have an application for license pending please provide a copy of the application. Such license(s) must be in effect before October 1, 2022.

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Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.29 Provide a copy of an executable contract for PEEHIP to redline. The contract shall include provisions for all agreed-upon bid conditions. Bidder shall upload the sample agreement in the corresponding Required Documents section of this RFP. By accepting Bidder's proposal, PEEHIP is not agreeing to nor accepting the terms of Bidder's sample agreement. PEEHIP reserves the right to negotiate or reject the terms of Bidder's agreement.

Single, Radio group.

1: Agree, Agree & attach,

2: Disagree, explain: [500 words]

6.30 PEEHIP expects the contract to be signed, at least 30-days prior to go-live. Bidder agrees to meet this deadline.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.31 Bidder will execute and remain in full compliance with the attached Exhibit 3 - Business Associate Agreement (BAA) with PEEHIP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.32 Bidder must notify PEEHIP within 30 days of purchase, acquisition and any other change in its ownership or partners or control affecting 10% or greater interest, any acquisition by it of 10% or greater interest in any subsidiary, and any new agreement with, by or between any affiliates that is relevant to the contract.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.33 Bidder will not render or administer services off-shore, and all work performed will be in the contiguous United States.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.34 Bidder agrees to provide its organization's last audited financial statement and the most recent unaudited financial statement if the most recent audited financial statement is older than 12 months as well as the latest SSAE 18 report.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.35 Bidder acknowledges and agrees that Bidder has a continuing obligation to disclose any change of circumstances that will affect its qualifications as a Bidder.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

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6.36 UNIQUE MEMBER IDENTIFIER ADMINISTRATION REQUIREMENT: Bidder must be able to accept, store, and report member-level detail, using the following data elements:

1. Social Security Number
2. Individual Personal Identification number (PID), assigned by PEEHIP to each covered member (subscribers and dependents)
3. Subscriber Personal Identification number (PID), assigned by PEEHIP and reported for each covered member on an account

PEEHIP stores and tracks member-level detail using SSNs and unique PEEHIP-assigned PIDs. ALL eligibility and member-level reporting must include these unique identifiers. The Bidder must be able to accept and track each individual plan member based upon the SSN and PEEHIP-assigned member PID. The following chart provides an example of how the Unique Member Identifier should be structured.

Contract Participants	Individual SSN	PEEHIP-assigned Individual PID	PEEHIP-assigned Subscriber PID
John Doe - Subscriber	XXX-XX-XXX1	12222222	12222222
Jane Doe - Spouse	XXX-XX-XXX2	22345678	12222222
Julie Doe - Child	XXX-XX-XXX3	32345678	12222222
Jack Doe - Child	XXX-XX-XXX4	42345678	12222222

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.37 Confirm that all file transmissions will include member-level detail using these identifiers - SSNs, PEEHIP-assigned Individual Personal Identification Number (PID)s, and PEEHIP-assigned Subscriber PIDs.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.38 Bidder must have the capability to process daily transmittal of standard HIPAA-compliant eligibility files, and maintain eligibility files, on a daily basis, and transmit and receive a reconciliation file to/from PEEHIP electronically, on a weekly and monthly basis. All files must be accepted in PEEHIP's prescribed format.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.39 Bidder must assign the ID card contract numbers (without containing the PEEHIP assigned PIDs). Note that the vendor assigned contract numbers will not be stored in PEEHIP's system.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.40 Bidder agrees to utilize PEEHIP's Trading Partner Agreement related to the 834 file format to update the eligibility records on a daily basis. PEEHIP will provide the Trading Partner Agreement to the Bidder. Please review the PEEHIP 834 Reporting Mapping - **Appendix A** in the Reference Documents section.

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Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.41 Bidder agrees to the specified eligibility rules established by PEEHIP and as stated in the PEEHIP Member Handbook.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.42 Bidder must provide detailed disclosure of all invoice line items to PEEHIP at each monthly billing cycle in the electronic format prescribed by PEEHIP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.43 Bidder agrees that all reporting submitted by Bidder must be reconciled to the billing.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.44 Bidder will attach a copy of its most recently completed HIPAA assessment in the Required Documents section of the RFP.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.45 Bidder will supply PEEHIP with the most recent copy of its completed HIPAA assessment every time one is completed within 10 business days of Bidder's receipt of same.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.46 All personnel/staff in Bidder's organization must have completed HIPAA training, at least annually.

Single, Radio group.

1: Agree, explain: [500 words] ,

2: Disagree, explain: [500 words]

6.47 All employees at Bidder's organization have been trained on how to report a security incident or potential breach under HIPAA.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

6.48 If awarded the contract, PEEHIP or its agent or representative may, at any point during the Agreement, perform an on-site self-assessment of Bidder's organization based on HIPAA requirements.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

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6.49 Bidder has attached documents that indicate Bidder is in compliance with the PEEHIP Statement on HIPAA Compliance Document in the Additional Procurement Documents section of the RFP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.50 Bidder has attached a copy of its Information Security Policy and Procedures in the Required Documents section of the RFP. These policies must apply to the systems, processes and personnel directly related to the work included in this contract and not for other subcontractors or lines of business.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.51 Bidder must be able to accept and process standard HIPAA-compliant enrollment data electronically, daily.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.52 Bidder agrees that PEEHIP owns its data and that such data will be considered proprietary and will not be shared, except at PEEHIP's request, with full knowledge and express written consent.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.53 Confirm that PEEHIP may terminate the agreement without cause for any reason at any point during the contract period.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

6.54 Confirm that all pricing guarantees will remain in effect should PEEHIP terminate the agreement mid-contract year. Otherwise said, there will be no fees or penalties incurred by PEEHIP should they terminate the agreement during the contract period.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

6.55 Upon termination of the contract, Bidder must provide historical data to succeeding Bidder or PEEHIP, as directed, at no additional charge. Bidder must provide, at no additional cost to PEEHIP, up to five (5) files of historical data, for the three previous contract years, to any new Bidder selected by PEEHIP. Transition of data will begin immediately following notification of termination and must be complete within 90 days of that notification. Within 14 days of notification, bidder must provide files as of the notification date. Bidder must provide all data on a rolling basis at least once every 30 days thereafter until all PEEHIP data has been provided to the succeeding bidder or to PEEHIP as directed.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

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6.56 Bidder must notify PEEHIP, in writing, immediately upon identification of system-related problems, programming problems or data transfer problems. Bidder must make every effort necessary to correct such problems within 48 hours regardless of the time or date to minimize any disruption to members.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.57 Bidder must provide operational and system redundancy and disaster recovery procedures to ensure disruption-free service in the Required Documents section of the RFP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.58 Bidder must provide a dedicated Implementation Manager whose sole account is PEEHIP and who, in coordination with the dedicated Account Manager and PEEHIP Account Management team, will effectively manage the implementation of this program. The dedicated Implementation Manager must continue to support PEEHIP a minimum of 60 days after the implementation date of October 1, 2022, should PEEHIP desire. Such support includes, but is not limited to, weekly calls with PEEHIP and the designated Account Management team, maintenance of issue-tracking logs, and issue resolution. This support must be provided as part of the base administrative fees with no additional cost to PEEHIP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.59 Bidder must have the ability to continuously accept “warm transfers” during business hours from PEEHIP to Bidder's call center(s) at no additional cost to PEEHIP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.60 No loss/No gain: No covered PEEHIP members shall lose or gain coverage as a result of a vendor change.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

6.61 Bidder agrees to be audited by PEEHIP or an entity chosen by PEEHIP. The Bidder will cooperate with any outside audit firm PEEHIP selects to perform the audit. PEEHIP reserves the right to review and audit the operations of the Bidder, including the Bidder's internal control procedures and records, at any point during the life of the contract. Additionally, PEEHIP or its designated agent will be permitted to annually audit Bidder's performance under the contract, at no cost to PEEHIP, including, but not limited to, claims processing and payment, customer service, and banking and billing records to assure that claims subject to each proposed coverage are evaluated in accordance with the plan provision. If an audit identifies performance guarantees are not being met, PEEHIP will expect the Bidder to pay for follow-up audits to confirm resolution of any problem(s) that are uncovered during the initial audit. PEEHIP reserves this right to audit for the duration of the agreement and for a period of three (3) years following expiration or termination thereof.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [500 words]

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6.62 All PEEHIP information disclosed during the proposal and contract term must remain strictly confidential unless disclosure is required by law.

Single, Radio group.

1: Agree,

2: Disagree, explain: [500 words]

7 QUESTIONNAIRE FOR MEDICAL - PHARMACY DRUG PROGRAM

7.1 REFERENCES

7.1.1 Provide three (3) current customer group health plan references for the Status Quo Option. At least one of these references must be a state-level plan with at least 150,000 covered lives.

	Company Name	Contact Name	Contact Title	Telephone	Email Address	Contract Start Date	Products/Services Offered	Number of Lives Covered
Reference 1	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.
Reference 2	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.
Reference 3	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.

7.1.2 Provide three (3) current customer group health plan references for the Vendor Proposed Option. At least one of these references must be a state-level plan with at least 150,000 covered lives.

	Company Name	Contact Name	Contact Title	Telephone	Email Address	Contract Start Date	Products/Services Offered	Number of Lives Covered
Reference 1	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.
Reference 2	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.
Reference 3	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.

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7.1.3 Provide three (3) references of clients, for the Status Quo Option, who have disenrolled from your program, using former clients of similar size and industry for which you provided similar services and the reason or termination.

	Company Name	Contact Name	Contact Title	Telephone	Email Address	Contract Termination Date	Products/Services Offered	Number of Lives Covered	Reason for Termination
Reference 1	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.
Reference 2	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.
Reference 3	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.

7.1.4 Provide three (3) references of clients, for the Vendor Proposed Option, who have disenrolled from your program, using former clients of similar size and industry for which you provided similar services and the reason or termination.

	Company Name	Contact Name	Contact Title	Telephone	Email Address	Contract Termination Date	Products/Services Offered	Number of Lives Covered	Reason for Termination
Reference 1	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.
Reference 2	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.
Reference 3	50 words.	50 words.	50 words.	50 words.	50 words.	To the day.	50 words.	Integer.	50 words.

7.2 COMPANY OVERVIEW

7.2.1 Please provide contact information for the individual authorized to answer questions regarding your response to the RFP.

Contact Name	50 words.
Contact Title	50 words.

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Address	50 words.
Telephone Number	50 words.
e-Mail Address	50 words.
Company URL (web address)	50 words.

7.2.2 Please complete the following table:

	Response
Year Organization Established	To the year.
Total Lives Covered (2021)	Integer.
Percent Lives Covered from Top 10 Clients	Percent.
Total Number of Your Organization’s Employees (2021)	Integer.

7.2.3 Provide names of all subcontractors along with type of services they will provide, the number of years your firm has utilized the subcontractor, and the contractual relationship between subcontractor and your company. Please use the table provided below.

	Name and Address	Type of Service(s)	Years Utilizing this Contractor	Contractual Relationship
1.	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required
2.	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required
3.	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required
4.	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required
5.	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required	50 words. Nothing required

7.2.4 Describe your process for vetting the privacy, security, HIPAA compliance and readiness of your subcontractors.

1000 words.

7.2.5 Has your organization recently undergone any workforce realignments and/or experienced recent merger or acquisition activity? If so, please describe. Are there any anticipated changes in ownership or business developments, including but not limited to mergers, stock issues, and the acquisition of new venture capital? Please explain.

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500 words.

7.2.6 Please provide the most recent ratings and date of rating for your company by the major rating organizations.

	Rating	Date of Rating
Standard & Poors	10 words.	To the year.
Fitch	10 words.	To the year.
A.M. Best	10 words.	To the year.
Moody's	10 words.	To the year.

7.2.7 Provide the following financial information:

	Response
a. Current ratio	50 words.
b. Days cash on hand	50 words.
c. Debt to equity ratio	50 words.

7.2.8 Describe any changes in the organizational structure (including, but not limited to demutualization, addition/deletion of claim offices, addition/removal of product lines, and staff reductions) that have occurred in your organization over the last twelve (12) months or are anticipated to occur in the next 24 months.

500 words.

7.2.9 Describe any staff relocations, computer system changes/upgrades, program changes, or telephone system changes in process at this time or proposed within the next 12-24 months.

500 words.

7.2.10 Describe any parent/subsidiary relationship.

500 words.

7.2.11 Indicate how many years your organization has been in the business of providing the coverage(s) for which you are submitting a proposal, for the Status Quo Option.

Single, Pull-down list.

- 1: More than 10 years,
- 2: 5-10 years,
- 3: 1-4 years

7.2.12 Indicate how many years your organization has been in the business of providing the coverage(s) for which you are submitting a proposal, for the Vendor Proposed Option.

Single, Pull-down list.

- 1: More than 10 years,
- 2: 5-10 years,
- 3: 1-4 years

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7.2.13 Indicate how many years your organization has been in the business of providing the coverage(s) for which you are submitting a proposal, for the Status Quo Option.

Single, Pull-down list.

- 1: More than 10 years,
- 2: 5-10 years,
- 3: 1-4 years

7.2.14 Indicate how many years your organization has been in the business of providing the coverage(s) for which you are submitting a proposal, for the Vendor Proposed Option.

Single, Pull-down list.

- 1: More than 10 years,
- 2: 5-10 years,
- 3: 1-4 years

7.2.15 Does your company have any administrative, regulatory, judicial actions or investigations regarding past or current activities? If yes, please explain.

Single, Radio group.

- 1: Yes: [500 words] ,
- 2: No

7.2.16 Is your organization:

Single, Radio group.

- 1: Privately held,
- 2: Publicly traded,
- 3: A Mutual Holding Company,
- 4: Other. Please describe: [500 words]

7.2.17 What fidelity and surety insurance or bond coverage do you carry or would you recommend to protect PEEHIP? Specifically, describe the type and amount of the fidelity bond, which would protect PEEHIP in the event of a loss.

500 words.

7.2.18 Please provide the following information: a. A statement of whether the Bidder or any of the Bidder's employees, agents, independent contractors, or subcontractors have been convicted of, pled guilty to, or pled nolo contendere to any felony, and if so, an explanation providing relevant details. b. A statement of whether there is any concluded or pending litigation against the Bidder or Bidder's employees related to a contract engagement; and if such litigation exists, an attached opinion of counsel as to whether the pending litigation will impair the firm's performance in a contract under this RFP. c. A statement of whether the Bidder or any of the Bidder's business associates have reported a HIPAA breach involving 500 or more individuals in a given state or jurisdiction. d. A statement on how Bidder vets employees and/or contract personnel to ensure workforce clearance procedures are followed under HIPAA. e. A statement as to whether, in the last ten years, Bidder or any of its subcontractors has filed (or had filed against it) any bankruptcy or insolvency proceeding, whether voluntary or involuntary, or undergone the appointment of a receiver, trustee, or assignee for the benefit of creditors; and if so, an explanation providing relevant details.

500 words.

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7.3 ORGANIZATIONAL EXPERIENCE

7.3.1 Describe your organization's ability to manage high-cost medications that are typically billed under the medical benefit.

500 words.

7.3.2 For the Status Quo Option, how long has your organization been managing Medical-Pharmacy Drugs on behalf of self-funded clients that are covered under the medical benefit?

500 words.

7.3.3 For the Vendor Proposed Option, how long has your organization been managing Medical-Pharmacy Drugs and processing them under the outpatient pharmacy benefit?

500 words.

7.3.4 For the Status Quo Option, how many clients have enrolled in your programs? How many lives?

500 words.

7.3.5 For the Vendor Proposed Option, how many clients have enrolled in your programs? How many lives?

500 words.

7.3.6 For the Status Quo Option, what has been the achieved savings across your book of business on a per-life basis?

500 words.

7.3.7 For the Vendor Proposed Option, what has been the achieved savings across your book of business on a per-life basis?

500 words.

7.4 MEMBER SERVICES

7.4.1 Please describe the hours and days the Members Services unit will have live representatives available to PEEHIP members. At a minimum, Vendor shall provide a toll-free telephone number and TDD access for customer service that will be available at least from 8:00 am to 5:00 pm (Central Time) Monday through Friday, except for observed Vendor holidays.

500 words.

7.4.2 Confirm each of the following:

Member Services	Response
a. Bidders will operate a dedicated member services unit to answer questions from PEEHIP's members.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed

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b. Bidders will operate a toll-free dedicated member services telephone line to answer questions from PEEHIP's members.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed
c. Bidders will have special telephone features for the hearing impaired.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed
d. Resources will be available to assist non-English speaking callers through a translation service.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed
e. All calls will be recorded and kept for 24 months and made available for PEEHIP's review upon request.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed
f. MSR will warm or soft transfer members to other service areas or Vendors including PEEHIP, if necessary.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed
g. Members will be able to opt out of the Interactive Voice Response (IVR) to speak with a live MSR.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed

7.4.3 Please provide the geographic location of the Member Service unit(s) that will be servicing PEEHIP's members. Will this service be outsourced? If so, provide the name of the outsourcer.

500 words.

7.4.4 How large is your Member Service Department? How many employees work exclusively in this department?

500 words.

7.4.5 What is the process for referring calls to a customer service representative? Do all customer service representatives reside in the US?

500 words.

7.4.6 How are calls "after hours" of operation handled?

Single, Radio group.

- 1: Voice mail,
- 2: No service,
- 3: Full service – 24/7,
- 4: Some extended hours for calls,
- 5: Other, please specify: [500 words]

7.4.7 Describe how you can provide PEEHIP's staff call monitoring capability for live and/or recorded calls remotely and on-site. If recorded calls, confirm that you will allow PEEHIP to select a sampling on a weekly basis. Please describe if your organization's system can allow PEEHIP staff to hear a specific call made to your call center if the PEEHIP staff person can provide the date, time, and MSR involved.

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500 words.

7.4.8 Describe the escalation process for Member Service satisfaction and complaints.

500 words.

7.4.9 Describe the tools or functionalities available on your member website.

500 words.

7.4.10 Complete the table below regarding ID Cards:

	Response	Comments
a. Confirm that you will issue a member ID card and mail, via surface mail, to covered Members within ten (10) business days following the enrollment period.	<i>Single, Pull-down list.</i> 1: Confirmed, explain in comments, 2: Not confirmed, explain in comments	500 words.
b. Confirm that all PEEHIP covered members will have a valid ID card in hand prior to October 1, 2022.	<i>Single, Pull-down list.</i> 1: Confirmed, explain in comments, 2: Not confirmed, explain in comments	500 words.
c. Confirm that you will re-issue the member ID card within five (5) business days of notification that a member has lost a card, or for any reason that results in a change to the information disclosed on the member ID card.	<i>Single, Pull-down list.</i> 1: Confirmed, explain in comments, 2: Not confirmed, explain in comments	500 words.
d. Confirm extra ID cards will be available for a dependent child away from home attending school or residing out of area.	<i>Single, Pull-down list.</i> 1: Confirmed, explain in comments, 2: Not confirmed, explain in comments	500 words.
e. Confirm that ID cards will be subject to final approval by PEEHIP.	<i>Single, Pull-down list.</i> 1: Confirmed, explain in comments, 2: Not confirmed, explain in comments	500 words.
f. How soon after eligibility data is successfully loaded will a member be able to print a temporary ID card from your web portal?	500 words.	

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g. Indicate how many ID cards you will mail to subscribers who have family coverage, at no additional charge.	500 words.	
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7.4.11 Do you use an outside vendor to print the ID cards? If yes, what security measures are in place to prevent a breach.

500 words.

7.4.12 If your organization has experienced a security breach as a result of an outside ID card vendor, describe the breach and how your organization achieved resolution.

500 words.

7.4.13 Confirm your member website is maintained for HIPAA compliance.

Single, Pull-down list.

1: Confirmed, explain: [500 words],

2: Not confirmed, explain: [500 words]

7.4.14 Describe your mobile application and how it is designed to serve a senior membership.

500 words.

7.4.15 Describe your organization's Member Satisfaction Surveys and provide the most recent results.

500 words.

7.5 ACCOUNT MANAGEMENT/ CLIENT SERVICES

7.5.1 Please provide contact information for the Account Executive that will be assigned to this engagement.

	Response
Company Name	100 words.
Contact Name	100 words.
Contact Title	100 words.
Address	100 words.
Office Number	50 words.
Mobile Number	50 words.
e-Mail Address	100 words.
Company URL (web address)	100 words.

7.5.2 Identify the key Account Management team you propose to work on this account and provide an organization chart, including names and titles, of management and key personnel that will be responsible for

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account management. Some positions may be dedicated and others may be designated. For the purpose of this RFP, “Dedicated” is defined as the Bidder's staff members who are solely assigned to perform Services in furtherance of this Contract, which means the Bidder does not assign them to work for any other client or customer. “Designated” is defined as the Bidder's staff members who are assigned to perform Services in furtherance of this Contract but may also be assigned to work for other clients or customers. Please indicate which positions are Dedicated vs. Designated.

500 words.

7.5.3 Please complete the table below regarding staffing of this account.

	Contact Name	Years of experience	Years of service with your firm	Currently employed by your firm or will be recruited on Contract Award?	Number of accounts this employee will be servicing in addition to PEEHIP
Account Executive	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Account Manager	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Lead Actuary/Underwriter	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Clinical Account Director	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Operations Director	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Implementation Manager	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Systems/I.T. Analyst	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.
Other	20 words.	Integer.	Integer.	Single, Pull-down list. 1: Currently employed, 2: Recruited on Contract Award	Integer.

7.5.4 Confirm your Account Team will include a dedicated clinical resource to work with PEEHIP management to better manage their prescription drugs covered through the medical benefit.

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Single, Radio group.

1: Confirmed, [500 words] ,

2: Not Confirmed, [500 words]

7.5.5 What was the turnover rate for your group Account Management staff in 2019, 2020 and 2021?

Account Management Staff Turnover	Response
2019	<i>Percent.</i>
2020	<i>Percent.</i>
2021	<i>Percent.</i>

7.5.6 Confirm that you will provide an Account Executive and a backup account staff member that will handle ALL service matters related to the operation of the program.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.5.7 Confirm that you will respond to all PEEHIP inquiries within one (1) business day.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.5.8 Describe your firm's process to escalate problems or concerns through the corporate structure to facilitate resolution of issues. Discuss how you will track such problems or concerns and report them to PEEHIP.

500 words.

7.5.9 What influence does the client account management team have within the call center, particularly if the client is reporting an issue to Account Management? How does the Account Management team address the issues with the call center to get resolution?

500 words.

7.5.10 Confirm that you will provide an annual Account Management satisfaction score card to PEEHIP so that PEEHIP can assess your performance. Please upload a sample of your annual score card.

Single, Radio group.

1: Confirmed, uploaded to Proposal Tech, explain: [500 words] ,

2: Confirmed, not uploaded to Proposal Tech, explain: [500 words] ,

3: Not confirmed, explain: [500 words]

7.5.11 Confirm that your team will attend on-site quarterly meetings with PEEHIP to present current plan and service performance, address any recent issues/challenges encountered, suggest potential savings opportunities, and discuss other pertinent topics to be identified prior to each meeting. At a minimum, PEEHIP requests that an account team member closely involved in the daily operations of the PEEHIP account and an executive-level team member with oversight responsibility attend all quarterly meetings. The mid-year and year-end meetings are expected to provide more robust, detailed plan metrics, observations, and consultative discussion.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

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7.5.12 Confirm you will lead bi-weekly calls to review all new drugs to market, high dollar claims, identifying high-cost low-value outliers for exclusion, identifying the lowest cost site of care, etc.

Single, Radio group.

1: Confirmed, [500 words] ,

2: Not Confirmed, [500 words]

7.5.13 Confirm that your team will attend PEEHIP's Board meetings, if requested by PEEHIP, at your expense.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.5.14 Do your services include legislative updates to plan sponsors?

Single, Radio group.

1: Yes – included in Standard Fees,

2: Yes – for Additional Charge,

3: No

7.5.15 Discuss how you will notify PEEHIP when you first identify significant issues that cause member disruption. How will you track the issue through to resolution while keeping PEEHIP updated on status?

500 words.

7.5.16 Discuss how your firm will notify PEEHIP when you first identify significant issues that cause provider disruption. How will you track the issue through to resolution while keeping PEEHIP updated on status?

500 words.

7.5.17 Describe your client web portal. What tools and capabilities are available to PEEHIP staff?

500 words.

7.5.18 Will you make available to PEEHIP staff and its designees the on-line claims query/reporting tool for the purposes of standard and ad-hoc report generation and queries? If yes, how soon after the end of each month are claims reports available?

500 words.

7.6 CONTRACTING AND UTILIZATION MANAGEMENT

7.6.1 Provide a copy of your executable contract for PEEHIP's ability to redline.

Single, Pull-down list.

1: Attached,

2: Not Attached

7.6.2 For the Status Quo Option, describe your process for partnering with PEEHIP's medical vendors to administer this Medical-Pharmacy Drug program.

500 words.

7.6.3 For the Vendor Proposed Option, describe your process for partnering with PEEHIP's medical vendors to administer this Medical-Pharmacy Drug program.

500 words.

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7.6.4 For the Status Quo Option, describe your process for coordinating pre-certification and medical necessity reviews with PEEHIP's medical vendor. Who will be responsible for the final determination? Describe your ability to partner with AIM for the oncology reviews.

500 words.

7.6.5 For the Vendor Proposed Option, describe your process for coordinating pre-certification and medical necessity reviews with PEEHIP's medical vendor. Who will be responsible for the final determination? Describe your ability to partner with AIM for certain oncology reviews.

500 words.

7.6.6 For the Status Quo Option, describe your standard UM and PA criteria for managing Medical-Drugs. Based on the external information provided at the beginning of this RFP, describe the differences in your standard UM and PA criteria compared to the current PEEHIP criteria.

500 words.

7.6.7 For the Vendor Proposed Option, describe your standard UM and PA criteria for managing Medical-Drugs. Based on the external information provided at the beginning of this RFP, describe the differences in your standard UM and PA criteria compared to the current PEEHIP criteria.

500 words.

7.6.8 At PEEHIP's request, confirm your organization will create custom UM and PA criteria.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.6.9 Confirm that your utilization management programs for Medical-Pharmacy Drugs are clinically and financially sound, acknowledging that the program criteria PEEHIP may request could be more robust and stringent than the standard program you normally implement.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.6.10 For both options, describe how you manage and/or influence utilization of the most appropriate and cost-efficient site of care for administration of prescription drugs administered through the medical benefit.

500 words.

7.6.11 For both options, describe your process for coordination with the network carrier for site of care steerage?

500 words.

7.6.12 For both options, please describe your site of care steerage policy.

500 words.

7.6.13 Provide a summary of sites of care for which you do not currently contract with for the administration of medical drugs dispensed from your organization. Explain how you plan to add sites of care to your network.

500 words.

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7.6.14 Will you provide care coordination for members or will you integrate with the Plan's case management? Please describe the process.

500 words.

7.6.15 Describe PEEHIP's ability to audit each component of your program.

500 words.

7.6.16 Confirm your organization can match the existing formulary with PEEHIP's medical vendor exactly. Confirm there would be no member disruption under this arrangement.

Single, Radio group.

1: Confirmed, explain: [500 words],

2: Not confirmed, explain: [500 words]

7.6.17 Propose your organization's optimal formulary which yields effective clinical results and aggressive cost savings to PEEHIP. Confirm which formulary would be available under the Status Quo option and the Vendor Proposed option.

500 words.

7.6.18 Provide a formulary disruption report for each vendor proposed formulary option.

Single, Radio group.

1: Confirmed, explain: [500 words],

2: Not confirmed, explain: [500 words]

7.6.19 Confirm that PEEHIP will have the ability to make modifications to the vendor proposed formulary. Confirm that modifications will not have any impact on overall rebate guarantees.

500 words.

7.6.20 Confirm that your organization will provide PEEHIP 60 days' notice prior to any changes or modifications to the implemented formulary. In the case changes will occur, confirm your organization will provide an impact analysis to PEEHIP for each drug that was either added, removed, or adjusted.

Single, Radio group.

1: Confirmed, explain: [500 words],

2: Not confirmed, explain: [500 words]

7.7 CLAIMS PROCESSING

7.7.1 Using most recent year-end data, complete the table below for the claim office that will have payment responsibility for this account:

	Target	Actual 2021 year end results
Total annual claim volume per year (in total number of claims)	<i>Integer.</i>	<i>Integer.</i>
Average claims processed per processor per day	<i>Integer.</i>	<i>Integer.</i>
Claims turnaround time (percent of clean claim transactions processed within 14 calendar days following receipt of claim)	<i>Percent.</i>	<i>Percent.</i>

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Average number of business days to process a clean claim from date received to date check/EOB issued	<i>Decimal.</i>	<i>Decimal.</i>
Financial accuracy (percentage of claim dollars paid without error, relative to total claim dollars paid)	<i>Percent.</i>	<i>Percent.</i>
Processing accuracy (percentage of claims processed without error, relative to the total number of claims processed)	<i>Percent.</i>	<i>Percent.</i>
What percent of all non-clean claims submitted are processed (from date received to date check/EOB issued) within 10 business days?	<i>Percent.</i>	<i>Percent.</i>
What percent of all non-clean claims submitted are processed (from date received to date check/EOB issued) within 30 business days?	<i>Percent.</i>	<i>Percent.</i>

7.7.2 Confirm that the claims processing system is integrated with the eligibility and Member Services system.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.7.3 Describe the claims payment process for “clean claims” from date of receipt to full adjudication of checks to providers or patients. If the process is different for network and non-network claims please discuss separately.

1000 words.

7.7.4 Describe the claims payment process for “non-clean claims” from date of receipt to full adjudication of checks to providers or patients. If the process is different for network and non-network claims please discuss separately.

1000 words.

7.7.5 Provide the following information regarding internal claims audit(s):

Internal Claims Audits	Response
What are the current standards for internal claim audits?	<i>500 words.</i>
How often are claim processors audited?	<i>500 words.</i>
When an error is found, what is the time period for correction of the claim?	<i>500 words.</i>
Are reports monthly, quarterly, semi-annual, etc.?	<i>500 words.</i>
What claims do you consider for high dollar audits?	<i>500 words.</i>
Are high dollar audit claims handled internally?	<i>500 words.</i>
How are criteria determined for internal audits? What triggers do you utilize?	<i>500 words.</i>
What percent of claims are audited internally?	<i>500 words.</i>

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What is the ratio of quality reviewers to claim processors?	500 words.
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7.7.6 Describe protocol and use of proper quality control testing prior to live release. Include in your response the standard number of tests and applicable test areas.

1000 words.

7.7.7 Will you share the results of the internal audit testing with PEEHIP and its designee? Describe your process to address errors and adjustments found from the internal audit and quality assurance review. How are adjustments issued and what impact does it have, if any, on the implementation timing?

1000 words.

7.7.8 Will PEEHIP have the ability to review your organization's external audit benefit testing scenarios? Will PEEHIP have the opportunity to provide customized scenarios for internal testing? For external audit testing conducted via a third party auditor?

1000 words.

7.7.9 Describe how you monitor denied claims for trends and patterns to timely determine if outreach is needed to a provider's office for educating/training on proper filing, codes, etc. so the provider may submit a clean and accurate claim.

1000 words.

7.7.10 Describe the outreach made to providers and the education/training provided in the event a provider needs to be contacted because of trends and patterns related to denied claims.

1000 words.

7.7.11 Describe how you monitor pharmacy claims for trends and patterns to timely determine if outreach is needed to a provider's office for educating/training on dispensing guidelines and protocols.

1000 words.

7.8 DATA AND REPORTING

7.8.1 Describe your organizations protocols for assessing new to market drugs that would fall into the Medical-Drug channel. Describe how these drugs are priced.

500 words.

7.8.2 Confirm you will provide all NDC level codes associated with all Medical-Drug claims.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.3 Confirm that you will be able to provide an identifier for the site-of-care which the Medical-Drug was administered.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

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7.8.4 Confirm that you will provide reporting on an NDC-level basis for all AWP discounts and dispensing fees associated with the Medical-Drug claims.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.5 Confirm that you will provide reporting on an NDC-level basis for all rebates associated with the Medical-Drug claims.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.6 Describe your reporting and monitoring of medical drugs. What information is tracked? What patterns and trends do you monitor? What is the frequency of reporting?

500 words.

7.8.7 Are these reports available online currently? If they are not available online, how will they be provided to PEEHIP?

500 words.

7.8.8 Confirm that you are able to customize reports and this is included in your quoted premium(s).

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.9 Confirm that your organization will provide claim line detail for ALL claims—including, but not limited to, financial and diagnoses information.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.10 Confirm that your organization will provide this data in a mutually agreed upon format by the 2nd day of the month following the subject month.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.11 Confirm that claims line detail for ALL claims will include member level detail using SSNs, PEEHIP-assigned Individual PIDs, and PEEHIP-assigned Subscriber PIDs.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.8.12 Confirm you will work with PEEHIP daily to resolve any discrepancies that may arise from the nightly 834 file.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

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7.8.13 Confirm you will provide a denied claims report, including number of denials by reason, to PEEHIP. What is the frequency of this reporting? Provide a sample denied claims report.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

7.8.14 Confirm you will provide reporting on all Utilization Management - PA, site of care steerage.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

7.8.15 Confirm the reporting will be provided at the drug level and detail the ultimate outcome including appeal result, if applicable.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

7.8.16 Confirm you will provide a report on member calls, concerns, and grievances. What is the frequency of this reporting? Provide a sample report.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

7.8.17 Confirm that you will provide monthly, quarterly, and annual appeals reports to PEEHIP.

Single, Radio group.

- 1: Confirmed, explain: [500 words] ,
- 2: Not confirmed, explain: [500 words]

7.8.18 For the Status Quo Option, complete the table below on your 2021 group book of business statistics on appeals and grievances.

	Response
Total 2021 Member Medical Appeals	<i>Integer.</i>
Total Dismissed	<i>Integer.</i>
Total Overturned	<i>Integer.</i>
Total Upheld	<i>Integer.</i>
Total 2021 Member Pharmacy Appeals	<i>Integer.</i>
Total Dismissed	<i>Integer.</i>
Total Overturned	<i>Integer.</i>
Total Upheld	<i>Integer.</i>
Total 2021 Provider Medical Appeals	<i>Integer.</i>
Total Dismissed	<i>Integer.</i>
Total Overturned	<i>Integer.</i>
Total Upheld	<i>Integer.</i>
Total 2021 Member Grievances	<i>Integer.</i>

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7.8.19 Confirm that you will provide and present quarterly reports to PEEHIP.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed

7.8.20 Describe your standard web portal and Member Services utilization reports (i.e., number of hits and calls and the nature of the members' inquiries) and provide examples.

500 words.

7.8.21 Describe how your organization monitors and provides reporting on contractual Performance Guarantees. Provide a sample Performance Guarantee report.

500 words.

7.8.22 Is there an additional charge for ad hoc reporting? If so, please provide the average cost per report and the average preparation time.

Single, Radio group.

1: Yes, explain: [500 words] ,

2: No, explain: [500 words]

7.8.23 Confirm that the vendor generated reports listed above and any others that may develop throughout the contract term will be reviewed and verified for accuracy prior to distribution.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.9 MANUFACTURER ASSISTANCE / COUPONS

7.9.1 Confirm your organization's ability to submit for and process manufacturer assistance / coupon payments for Medical-Drugs on behalf of PEEHIP.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.9.2 Confirm your organization will administer a manufacturer assistance/coupon program for PEEHIP in the general manner outlined below, if requested by PEEHIP as opposed to the parameters of your standard manufacturer assistance/coupon program.

- Obtain consent to enroll members on their behalf in available and mutually agreed upon drug manufacturer assistance/coupon program. Once enrolled, apply a coinsurance to members' responsibility. Provide training and real time guidance to providers on how to bill the increased member responsibility to the manufacturer assistance payor. Any remaining member responsibility after exhaustion of manufacturer assistance will be paid by the plan, not the member.
- Carryover of the drugs currently leveraged by PEEHIP's manufacturer assistance program to ensure seamless transition and no loss of manufacturer assistance value
- Addition of new drugs to the program as requested by PEEHIP and as identified and recommended by your organization

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- Aggressive member and provider outreach by mail, email, and phone to capture member enrollment at the time a member is identified as eligible based upon utilization, or at least 60 days prior to coupon expiration for members currently enrolled in the program
- Flexibility to exclude members as deemed necessary by PEEHIP
- Guarantees with financial penalty if program does not operate as intended and results in financial or clinical harm to PEEHIP members

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.9.3 Describe your organization's process for enrolling members in programs to leverage manufacturer coupon payments. Explain the patient experience for their first fill / encounter and how does this continue for subsequent fills / encounters. Please provide any supporting documentation which explains the process workflow in your response.

500 words.

7.9.4 Based on the claims data provided, provide an estimate of what PEEHIP would save with your manufacturer coupon program.

500 words.

7.9.5 Based on the claims data provided, provide a guarantee of what PEEHIP would save with your manufacturer coupon program.

500 words.

7.9.6 Provide a current list of drugs, by NDC, for which your organization can submit for and obtain manufacturer assistance / coupon payments.

500 words.

7.9.7 Discuss the frequency in which your organization reviews and adds drugs to this list. Discuss the frequency in which coupon assistance amounts change.

500 words.

7.9.8 Confirm you will provide PEEHIP updates to this list and updates to coupon assistance amounts at least monthly.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.9.9 Describe your experience in implementing these manufacturer assistance / coupon payment programs when transitioning from an existing vendor. Confirm that the process will be seamless to PEEHIP and its members.

500 words.

7.9.10 If your organization's current manufacturer assistance / coupon payment list does not include some drugs for which PEEHIP currently obtains assistance, please discuss your process for adding drugs to your list and how long that process would take.

500 words.

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7.10 PRICING AND REBATES

7.10.1 For the Status Quo Option, describe your organization's ability to offer pricing guarantees to provide transparency and cost-savings to PEEHIP for Medical-Drugs.

500 words.

7.10.2 For the Vendor Proposed Option, describe your organization's ability to offer pricing guarantees to provide transparency and cost-savings to PEEHIP for Medical-Drugs.

500 words.

7.10.3 Describe your process for handling Medical-Drugs that are billed under a bundled-payment structure.

500 words.

7.10.4 Confirm that you have the ability to coordinate billing with the medical provider to ensure lowest net cost for bundled payments. Confirm that under this process you understand the bundled cost may result in lower total payment and therefore the drug will not be processed by your organization.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.5 Confirm that you will define a Generic Drug based on Medi-Span MultiSourceCode of Y.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.6 Confirm that you will define a Brand Drug as everything that is not a Generic Drug.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.7 Confirm that Limited Distribution Drugs (LDDs), Exclusive Distribution Drugs, New to Market LDDs, and New to Market Exclusive Distribution Drugs will be included in all pricing guarantees.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.8 Confirm you will adhere to the following definition of "Rebates".

Compensation or remuneration of any kind received or recovered from a pharmaceutical manufacturer attributable to the purchase or utilization of covered drugs by eligible persons, including, but not limited to, incentive rebates categorized as purchase discounts; credits; rebates, regardless of how categorized; market share incentives; promotional allowances; commissions; educational grants; market share of utilization; drug pull-through programs; implementation allowances; clinical detailing; rebate submission fees; and administrative or management fees. Rebates also include any fees that PBM receives from a pharmaceutical manufacturer for administrative costs, formulary placement, and/or access.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.9 For the Status Quo Option, describe all pricing guarantees you will offer PEEHIP to control Medical-Drug costs.

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500 words.

7.10.10 For the Vendor Proposed Option, confirm that your pricing proposal will contain individual guarantees for each pricing component listed below:

	Response	Comments
a. AWP Discounts (separate for Brand and Generic drugs)	<i>Single, Radio group.</i> 1: Confirmed, explain, 2: Not confirmed, explain	500 words.
b. Dispensing Fees (separate for Brand and Generic drugs)	<i>Single, Radio group.</i> 1: Confirmed, explain, 2: Not confirmed, explain	500 words.
c. Rebates	<i>Single, Radio group.</i> 1: Confirmed, explain, 2: Not confirmed, explain	500 words.
d. Manufacturer Coupons / Financial Assistance	<i>Single, Radio group.</i> 1: Confirmed, explain, 2: Not confirmed, explain	500 words.

7.10.11 Describe your organization's process to contract with manufacturers in order to obtain aggressive rebates for Medical-Drugs.

500 words.

7.10.12 How does your organization track and report rebates at the NDC level on Medical-Drugs?

500 words.

7.10.13 Confirm that your organization will pass along 100% of these Medical-Drug rebates and confirm the frequency in which they are accrued to PEEHIP.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.14 Confirm that the rebates accrued to PEEHIP will be the greater of the minimum guarantee and the actual amount received by your organization.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.15 Confirm that if your organization were to over-perform in one pricing component that you will not use this surplus to offset any underperformance in other pricing components.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.10.16 Please list and describe any Medical-Drugs that would be excluded from your pricing guarantees.

500 words.

7.10.17 Confirm that annual pricing guarantees will be reconciled within 90 days of the end of a Contract Year. Any under-performance in guarantees will be paid dollar-for-dollar by your organization to PEEHIP within 30 days of the reconciliation report.

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Single, Radio group.

1: Confirmed, explain: [500 words],

2: Not confirmed, explain: [500 words]

7.10.18 Please describe any fees associated with your program.

500 words.

7.11 ELIGIBILITY

7.11.1 Confirm that you will update eligibility data within 24 hours from receipt of data.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.2 PEEHIP will handle all enrollments and cancellations and transmit that data in an 834 file daily to Bidder for processing. Confirm that you will electronically accept and process, daily, the ASC X12 Benefit Enrollment and 834 Maintenance (834) transaction provided file format sent to you by PEEHIP daily.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.3 Confirm you will utilize PEEHIP's Trading Partner Agreement related to the 834 file format to update the eligibility records on a daily basis. PEEHIP will provide the Trading Partner Agreement to the Bidder.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.4 Confirm that your organization will store member-level detail using SSNs, PEEHIP-assigned Individual PIDs, and PEEHIP-assigned Subscriber PIDs and will include it on any member-level reporting back to PEEHIP.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.5 With regard to exchanging data, PEEHIP will include their SSNs, PEEHIP-assigned Individual PIDs, and PEEHIP-assigned Subscriber PIDs for each individual in the 834 file format. Please confirm that your organization will store the PIDs and Contract Numbers, and include them along with the member's SSN, on all member-level reporting, back to PEEHIP.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.6 Confirm that your organization will generate a reconciliation file monthly or on demand and that this file will contain, at a minimum, the member's SSN, PID, contract number, demographics, enrollment date, and cancel date.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

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7.11.7 For the Vendor Proposed Option, confirm you will develop and issue an ID card for the member at no additional cost to PEEHIP.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.11.8 Describe the processing procedures to ensure files are received and processed timely. What safeguards are in place to detect missing files?

500 words.

7.11.9 Will you stop an eligibility upload if established error thresholds are exceeded? How will you notify PEEHIP of this aborted upload? Will the previous file be reinstated?

1000 words.

7.11.10 Confirm that you will provide direct same day confirmation that the eligibility file was received, properly loaded, processed, and that this confirmation will include the date of receipt.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.11.11 Explain your process of working error reports generated from the file loads.

500 words.

7.11.12 Describe the process for manual entry and safeguards in place (i.e., authorization to make manual entries, audit tracking of who made changes, etc.)

500 words.

7.11.13 How much historical eligibility information is maintained on an individual's file? How much is accessible online, real time versus archived?

500 words.

7.11.14 Confirm that there will be no minimum participation requirements.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.12 IMPLEMENTATION

7.12.1 Provide an Implementation Project Plan for the Medical-Pharmacy Drug Program. Include a detailed timetable assuming a Notice of Contract Award by June 8, 2022 for an October 1, 2022 Program 'go-live' date. Note that PEEHIP's Open Enrollment Period begins each July 1. Development of communications is expected to commence upon Contract Award to assist PEEHIP with any communications necessary prior to Open Enrollment. Your firm's implementation plan should assume that PEEHIP-specific communications to Members and external stakeholders must be completed by June 15, 2022. At a minimum, the Implementation Project Plan must provide specific details on the following:

a. Identification and timing of significant responsibilities and tasks

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- b. Names, titles, and implementation experience of key implementation staff and time dedicated to PEEHIP during implementation
- c. Identification and timing of PEEHIP's responsibilities
- d. Transition requirements with the incumbent vendors
- e. Staff assigned to attend and present at Open Enrollment/educational sessions
- f. Member communication plan - including development and assistance to PEEHIP, prior to Open Enrollment, and on-site Open Enrollment meetings as described in the Staffing section of this RFP
- g. Data and timing requirements from current vendors to ensure transition of care and prior-authorization data is appropriately transferred

Single, Radio group.

1: Attached,

2: Not attached, explain: [500 words]

7.12.2 Confirm that any changes or additional detail to the implementation plan will be submitted to PEEHIP within 5 business days of receiving Notice of Contract Award.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.12.3 Confirm that at least sixty (60) days prior to October 1, 2022 effective date, PEEHIP will have a readiness review of the pending awardees, including an on-site review of the Bidder's facilities. Bidders shall participate in all readiness review activities conducted by PEEHIP staff to ensure the Bidder's operational readiness. Readiness review will include verification (by PEEHIP or its agent) that PEEHIP's benefits have been properly loaded into your claims processing system. PEEHIP will provide the Bidders with a summary of findings as well as areas requiring corrective action. Describe how your organization will comply with this requirement.

500 words.

7.12.4 Describe how your organization will test the program to ensure claims will process correctly on the Program 'go-live' date of October 1, 2022.

500 words.

7.12.5 Describe the process and timing if PEEHIP elects to perform a third party pre-implementation audit. Please include in your response the development of testing scenarios, the duration of the audit and any blackout audit dates, the format of the audit and whether there will be a "live" webinar where PEEHIP and third party auditor can see claims being adjudicated on the Offeror's system).

500 words.

7.12.6 7 Describe your process for educating providers during implementation so that they know where to send PAs, where to bill, etc.

500 words.

7.12.7 Are you willing to provide a one-time implementation allowance to fund, as approved by PEEHIP, implementation support, pre-implementation audits, readiness assessments, communication plans, outside printing costs, etc.? What dollar amount are you willing to provide?

500 words.

7.12.8 Identify the Implementation Team you propose to work on this account and provide an organization chart defining the Implementation Team roles. Include names and titles for the entire proposed Implementation Team including key positions and support staff.

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500 words.

7.12.9 Please provide resumes and experience and qualifications for each individual listed in the organization chart.

500 words.

7.12.10 Confirm your organization will provide a weekly status report on the Implementation Project Plan detailing current activities, closed tasks, problems, and any recommendations.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain [500 words]

7.12.11 Confirm your organization will provide a weekly Problem Identification Report - an ad hoc report that details any implementation issues, their impact on the overall project, and which task(s) in the Implementation Project Plan will be affected.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain [500 words]

7.12.12 Confirm your organization will provide a Final Report detailing all implementation activities and final enrollment is complete.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain [500 words]

7.12.13 How long will the Implementation Team stay involved after Program 'go-live' date for troubleshooting before a handoff to the Account Management team?

500 words.

7.13 COMMUNICATIONS AND EDUCATION

7.13.1 Describe how your organization can effectively communicate with and educate PEEHIP's membership about your programs and services available to them.

500 words.

7.13.2 What will be your communication and education strategy and why do you think it is the right one for PEEHIP?

500 words.

7.13.3 How will you implement this strategy?

500 words.

7.13.4 Provide samples of communications and educational materials.

Single, Radio group.

1: Attached,

2: Not attached, explain: [500 words]

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7.13.5 How has your communication strategy and member outreach changed as a result of COVID-19 and as a result of the US Postal Services changes that became effective on October 1, 2021?

500 words.

7.13.6 Confirm that letters can be customized with PEEHIP's logo as requested by PEEHIP.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.13.7 Confirm that staff will be available and participate in PEEHIP's open enrollment communications campaign if requested by PEEHIP. Describe your involvement and how you will assist members in learning about their benefit options. Note that Open Enrollment is scheduled to begin each July 1 and ends on September 10.

Single, Radio group.

1: Confirmed, explain: [500 words] ,

2: Not confirmed, explain: [500 words]

7.13.8 Identify which communication materials can be customized at no additional charge and those that require an additional charge. Indicate fee if applicable.

	Response	Amount of Fee
Claim Forms	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.
Summary Plan Description	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.
Toll-Free Telephone Access	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.
Internet Access	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.
General Letters and Correspondence sent to Participants	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.
HIPAA Privacy Notices	<i>Single, Radio group.</i> 1: No Fee, 2: Additional Fee	<i>Dollars.</i> N/A OK.

7.14 FINANCE AND BANKING

7.14.1 Please provide a sample detailed invoice.

Single, Radio group.

1: Attached,

2: Not attached, explain: [500 words]

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7.14.2 Currently, PEEHIP can remit payment for an invoice via check or EFT only. Confirm that you can accept both payment formats.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.14.3 Confirm you will provide invoices/billing monthly.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [500 words]

7.15 TRANSPARENCY IN COVERAGE FINAL RULE AND NO SURPRISES ACT

7.15.1 GENERAL

7.15.1.1 Describe how your company will assure that PEEHIP will be in compliance with federal law and regulations concerning the Transparency in Coverage final rule and the No Surprises Act with respect to the services provided by your company.

500 words.

7.15.1.2 List any subcontractors or third-parties who are providing assistance to you in complying with the law and regulations surrounding Transparency in Coverage, or who will be involved in work you may perform on behalf of PEEHIP.

500 words.

7.15.1.3 List any technical specifications that PEEHIP will need to meet in order to use any solution you intend to offer to comply with the Transparency in Coverage law and regulations, including software, hardware, or other information technology.

500 words.

7.15.1.4 Do you expect to be fully compliant with the Transparency in Coverage law and regulations and the No Surprises Act by the statutory and regulatory due dates? If not please explain.

500 words.

7.15.1.5 Are the fees you propose inclusive of all services related to the law and regulations? If not, please explain what additional costs the Plan may incur.

500 words.

7.15.2 TRANSPARENCY RULES

7.15.2.1 Describe your general process for complying with the Transparency in Coverage Final Rule.

1000 words.

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7.15.2.2 Will you prepare an internet-based self-service tool that makes available to plan participants real time cost-sharing information in accordance with the rule (effective January 1, 2023 for 500 services and January 1, 2024 for remaining services)?

- a. Do you currently offer an internet-based self-service tool? If so, please describe how it differs from the regulations and how you will revise it.
- b. How will you make the tool available to plan participants, through your website, by providing information to plans, or through another option?
- c. Please provide screenshots of the web portal to be used for the participant cost-sharing disclosure.
- d. How will the required participant notice of disclosure be provided?
- e. How will you respond to individuals who request the information on paper instead of through the website?

1000 words.

7.15.2.3 Will you provide a price comparison tool via internet websites and via telephone that allow a participant to compare the amount of cost sharing that they will be responsible for by participating provider and geographic region consistent with the No Surprises Act (requirement delayed pending further regulation)?

500 words.

7.15.2.4 Will you provide the Plan with any of the three machine readable files on a monthly basis including in-network rates, out-of-network allowed amounts, and prescription drug negotiated rates (effective July 1, 2022 for in-network and out-of-network; delayed until further regulations for prescription drug rates)? If so, describe which files will be provided.

- a. Describe the information technology requirements necessary for transmitting files and/or posting them.
- b. If the Plan uses multiple service providers, will you provide assistance in consolidating the information into one file?
- c. Will you send files to the Plan or provide another service to the Plan that allows the Plan to link to your website or another website?

500 words.

7.16 GAG CLAUSE

7.16.1 Do any contracts you are a party to contain a claim prohibiting disclosure of pricing terms (“gag clause”) which will be prohibited under the No Surprises Act (effective December 27, 2020)?

500 words.

7.16.2 If yes, please describe and state how you will assure they are removed. Indicate your timeline for removing gag clauses from contracts.

500 words.

7.17 NO SURPRISES ACT (effective January 1, 2022)

7.17.1 Describe whether the type of service(s) being requested in this RFP would apply to the No Surprises Act?

500 words.

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8 PERFORMANCE GUARANTEES

8.1 The Bidder must agree to operational Performance Guarantees. Bidder's failure to meet the performance guarantee(s) would result in financial penalties. Bidder is expected to place at least 25% of total annual administration fees at risk. Please review and complete Attachment 2 - Performance Guarantees. Higher assessments than required are encouraged.

Single, Radio group.

- 1: Attached,
- 2: Not provided

8.2 Confirm your agreement with the proposed service level targets, measurement methodology, and reporting and penalty assessment schedule.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed

8.3 Indicate the maximum percentage of administration fees you will place at risk, to guarantee excellent service to PEEHIP.

Percent.

9 PRICE PROPOSAL

9.1 PEEHIP is looking to contract with an organization(s) that has proven success in managing Medical-Drug costs and can submit data timely in the required formats. The RFP submission was designed with knowledge of the capabilities of the market, and it is expected that each Bidder will comply with these requirements. If any issues or complications are expected, Bidders should submit questions. Bidders are required to provide pricing guarantees as well as a full claims reprice based on data provided.

Price Proposal documents have been included with this RFP.

Please provide quotes for the *Status Quo Option* and the *Vendor Proposed Option*, separately, if applicable.

10 RESPONSE DOCUMENTS

10.1 Please confirm you have attached the completed Price Proposal, Attachment 1 **in its native format**.

Single, Radio group.

- 1: Attached,
- 2: Not Attached, explain: [500 words]

10.2 Please confirm you have attached the completed Performance Guarantees, Attachment 2 **in its native format**.

Single, Radio group.

- 1: Attached,
- 2: Not Attached, explain: [500 words]

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11 REFERENCE DOCUMENTS

11.1 Note: The Reference documents will only be provided to Bidders that have submitted a completed and signed Non-Disclosure Agreement (NDA) to the solicitation contact. NDAs will be provided on the Proposal Tech system for completion. Completed and signed NDA's should be emailed to Jennifer Slutzky at JSlutzky@segalco.com and NOT posted to the Proposal Tech site.

- PEEHIP 834 Reporting Mapping- Appendix A
- PEEHIP Member Handbook- Appendix B
- Benefit Matrix - Appendix C
- Supplemental Plan Matrix - Appendix D
- BCBS PPO Summary of Benefits and Coverage - Appendix E
- PEEHIP List of Excluded Drugs - Appendix F

12 BID EXCEPTIONS AND DEVIATIONS

12.1 If your bid does not fully comply with the specifications in this Request for Proposal (RFP), please complete and upload the Bid Exceptions and Deviations Document.

Single, Radio group.

1: Bid does not fully comply - Document Attached,

2: Bid does fully comply - Document Not Attached

Attached Document(s): [Bid Exceptions & Deviations Doc.doc](#)