

REQUEST FOR PROPOSALS
FOR
PRESCRIPTION DRUG PLAN
FOR
THE
PUBLIC EDUCATION EMPLOYEES' HEALTH INSURANCE PLAN
FOR
FISCAL YEARS
2020 through 2022
RFP 19-003

Alabama PEEHIP Prescription Drug Plan RFP 2019

1 PURPOSE/ INTRODUCTION

1.1 INTRODUCTION

Through the issuance of this Request for Proposal (RFP) the Public Education Employees' Health Insurance Plan (PEEHIP) is soliciting Proposals from qualified Bidders that can provide administrative only services for PEEHIP's self-funded Prescription Drug Plan. PEEHIP is seeking proposals for its active and early retiree membership. If interested and able to meet the requirements in this RFP, PEEHIP appreciates and welcomes your proposal.

The contract term is for a three-year period beginning October 1, 2019. There will not be an extension of the contract period.

Five additional RFPs are being released separately from the Prescription Drug RFP. They are:

- Comprehensive Medical
- Flexible Spending Accounts Program (FSA)
- Optional Dental, Vision, Hospital Indemnity, and Cancer (Optional Plans)
- Medicare Advantage
- Wellness/Disease Management/Technology Services

Please note that Alabama PEEHIP has chosen to market the Medical, Prescription Drug, FSA, Optional Plans, Medicare Advantage (MA), and Wellness/DM/Health Platform coverages separately. This RFP is only for the prescription drug plan. Responses provided in this RFP should be for Prescription Drug Plans only. Any information, which is provided by respondents, which pertains to Medical, Flex, Optional Plans, MA or Wellness-related coverages (unless explicitly requested within the RFP) will not be considered in evaluation of this RFP. This includes attempts by Bidders to provide fees that are contingent upon the additional award of business in connection with the Medical, Flex, Optional Plans, MA or wellness administration. If you are interested in proposing services for any of the five additional RFPs, you may do so independently under each distinct RFP.

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 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 Proposer, based on the evaluation 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 Worksheet, 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 Consulting 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 selection criteria and other relevant factors listed below:

- Cost of the proposed benefits and/or services and any "value added" terms, conditions, and services

Alabama PEEHIP Prescription Drug Plan RFP 2019

- Qualifications of the firm including financial capacity, staffing, and availability of staff to work with PEEHIP during Open Enrollment
- Proposer's experience with comparable plans; commitment to such plans; experience offering such plans to public sector employers
- Proposer's ability to provide exceptional prior authorization and other utilization management programs
- Proposer's ability to educate and communicate with program participants
- Proposer's ability to minimize enrollee disruption

All Proposers 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.

In addition to comprehensive medical coverage, PEEHIP currently provides prescription drug benefits, to approximately 221,500 active and retired members and dependents:

- MedImpact Healthcare Systems, Inc, (MedImpact) provides self-insured pharmacy benefit management services to PEEHIP's active members, early retirees and their dependents
- UnitedHealth Care (UHC) provides fully-insured prescription drug coverage through a Medicare Advantage program with Medicare Part D prescription drug component to PEEHIP's Medicare-eligible retirees and their Medicare-eligible dependents

Please refer to the PEEHIP Member Handbook attached to this RFP. PEEHIP requires that the Bidder mirror the current design and administration of the plan as outlined in the Handbook and as specified by PEEHIP management.

Key highlights of this are:

- PEEHIP manages customized Prior Authorization requirements and other customized clinical management programs with the help of their current PBM. PEEHIP reserves the right to continue to develop its own customized PA process.
- PEEHIP offers a customized formulary and expects the Bidder to accept and manage PEEHIP's customized formulary at no additional charge. In addition, PEEHIP requires that NO prescription drug shall be added to the PEEHIP formulary unless it has been approved, in writing, by PEEHIP management.

Alabama PEEHIP Prescription Drug Plan RFP 2019

- Additional clinical rules such as DAW penalties, member copay assistance programs, and non-essential drug exclusion strategies are currently being implemented and are outlined in the handbook.

Note that effective February 1, 2019, PEEHIP will carve out their hemophilia management program from the pharmacy benefit and move it under their medical benefit.

The following provides the approximate enrollment numbers for the PEEHIP active and non-Medicare-eligible population.

September 2018 member counts:

	Active		Retiree Non Medicare		Total		Total Contracts	Covered Member	Lives per Contract
	Single	Family	Single	Family	Single	Family			
Pharmacy	31,931	49,343	6,305	6,473	38,236	55,816	94,052	221,535	2.36

2.2 SCOPE AND OBJECTIVES

PEEHIP has high service expectations for the selected Bidder who will administer the prescription drug benefits. Accurate, consistent, timely, and comprehensive management reporting is also critically important. Specifically, PEEHIP is looking for a prescription drug plan administrator that will:

- Offer a competitive financial arrangement and guaranteed pricing terms
- Demonstrate ability and willingness to provide support for a custom formulary that drives utilization to the lowest net cost medications, network, and clinical management with strong emphasis on stringent and customizable Prior Authorization criteria that are effectively enforced, and other aggressive utilization management programs including quantity limits, step therapy and drug utilization review
- Demonstrate innovative and quality-oriented claims administration processes and procedures
- Provide superior account service to PEEHIP including dedicated resources and timely actionable reporting
- Provide best-in-class member services
- Provide seamless implementation of the program for PEEHIP and its members
- Partner with PEEHIP in identifying, recommending and implementing cost savings opportunities

A key objective is to ensure that members are able to obtain prescription drugs that are necessary to maintain their health and that those drugs are the most clinically appropriate and cost effective. Right drug, right quantity, right price. To that end PEEHIP seeks a PBM partner that will work collaboratively to establish and maintain aggressive clinical and utilization management that are customized to meet PEEHIP's needs. PEEHIP believes that an exceptional prior authorization program is the gate keeper to effective cost control. This entails aggressive enforcement of clinically appropriate, stringent prior authorization criteria. We expect our PBM to provide proactive, flexible, and expert support for all clinical programs including full disclosure of cost and rebate implications.

3 RESPONSE INSTRUCTIONS

3.1 INSTRUCTIONS FOR SUBMITTING OFFERS

Alabama PEEHIP Prescription Drug Plan RFP 2019

Detailed instructions for the completion and submission of your proposal will be found in the eRFP. Proposal Tech will be available to assist you with technical aspects of utilizing the system. Any questions regarding content should be submitted directly to Segal using the "Ask Questions" feature on the main RFP page.

All sections must be answered completely and, as outlined in the RFP, using Proposal Tech. It is not acceptable to use the term "See Attached" as a response to any of the questions, fee quotation forms, plan or network comparisons. Such a response may jeopardize your chances for consideration.

Please note that Reference Documents (i.e., enrollment, etc.) will only be provided to Proposers 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 NDAs should be emailed to Ms. Jennifer Slutzky, at JSlutzky@segalco.com and NOT posted to the Proposal Tech site. NDAs posted to Proposal Tech will not be accepted.

Final submissions must be posted with Proposal Tech at www.proposaltech.com before the due date and time cited. Access to the eRFP will be locked after that time. Carriers will not be able to post or change their responses. Late proposals will not be considered.

3.2 QUESTIONNAIRE INSTRUCTIONS

PEEHIP and Segal Consultants 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 BIDDERS CONFERENCE

A Bidders Conference Call will be held the week of January 28th. The exact time and date will be posted on the Proposal Tech site. All interested Bidders should plan to attend. It will be assumed that potential Proposer(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. The contact information for the conference call is:

Dial In: (877) 818-7893

Passcode: 678 306 3120#

3.4 PROPOSAL DELIVERY

The Bidder must provide copies of its proposal submission as follows:

1. Technical Proposal:

Eight (8) hard copies, bound and tabbed, with one (1) marked "Original" with original signatures; and one (1) electronic copy on one (1) CD, with one (1) designated as the "Original" version.

2. Price Proposal:

Eight (8) hard copies, bound and tabbed, with one (1) marked "Original" and having original signatures; and One (1) electronic copy on one (1) CDs, with one (1) designated as the "Original" version.

3. Redacted Copy:

One (1) hard copy and one electronic copy in pdf, redacted for proprietary information.

The Technical Proposal and Price Proposal **must be labeled and packaged separately**. In the event of a discrepancy/conflict between the Proposal Tech submission and the Hard copy version, the Proposal Tech version will take precedence. In the event of a power failure or similar occurrence, the hard copy version will be used. In the event a document or section is omitted from the Proposal Tech version of the Bidder's response, PEEHIP reserves the right to accept the omitted document or section, if included, in the hard copy

Alabama PEEHIP Prescription Drug Plan RFP 2019

version. All documents should remain in their native formats. Copies should be addressed and mailed or delivered to the **Solicitation Contact**:

Ms. Jennifer Slutzky
Senior Consultant
Segal Consulting
2727 Paces Ferry Road SE
Suite 1400
Atlanta, GA 30339

Complete Proposals should be submitted via the Proposal Tech website by **5:00 p.m. EST on February 21, 2019**. Hard copy proposals should be delivered to the address noted above. **Hard copy proposals will be accepted until 5:00 p.m. EST on February 22, 2019**. Proposals will **not** be accepted after these stated dates and times. PEEHIP reserves the right to reject any and all responses to this RFP.

Any questions regarding this RFP must be submitted electronically using the "Ask Question" feature via the Proposal Tech website by February 1, 2019 at 5:00 p.m. EST.

3.5 KEY DATES

Event	Due Date
Release of RFP	January 22, 2019
Bidders Conference Call	Week of January 28, 2019
Notification of Intent to Bid and Receipt of Signed NDA (by 5:00 pm EST)	January 30, 2019
Written Questions from Proposers Due Date	February 1, 2019
Response to Questions from Proposers Released	February 7, 2019
Electronic Bid Due Date (no later than 5:00 p.m. EST)	February 21, 2019
Hard Copy Bid Due Date (no later than 4:00 p.m. CST)	February 22, 2019
Notification of Finalist(s)	Week of March 18, 2019
Finalist(s) Presentation(s) in Montgomery	Week of March 25, 2019
Anticipated Contract Award Date	May 2019
Implementation Begins	May 13, 2019

3.6 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. The proposal shall become the property of PEEHIP.

3.7 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.

3.8 NEWS RELEASES

Alabama PEEHIP Prescription Drug Plan RFP 2019

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.

3.9 ADDENDA TO THE RFP

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

3.10 SOLICITATION CONTACT

All questions regarding this RFP should be submitted to the **Solicitation Contact**, Ms. Jennifer Slutzky, through the Proposal Tech website. Questions regarding technical issues with the website should be directed to Proposal Tech, by calling (877) 211-8316, ext. #84, and asking for support. Any questions that arise concerning this RFP may be directed to Ms. Jennifer Slutzky via the Proposal Tech website only, **prior to 5:00 p.m. EST on February 1, 2019**.

3.11 DISCLOSURE OF PROPOSAL CONTENTS

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 price 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.

4 INTENT TO BID

4.1 If your company intends to submit a proposal for administration of PEEHIP's self-funded Prescription Drug Plans, and wishes to access the Reference Documents (e.g., plan information, demographics, etc.), please complete the Intent to Bid form and Non-Disclosure Agreement (NDA), and email both forms to Ms. Jennifer Slutzky, at JSlutzky@segalco.com by January 30, 2019. The Intent to Bid and NDA forms may be downloaded from the Proposal Tech system for completion.

Reference Documents will be provided only to Proposers that have submitted a completed and signed NDA to Ms. Slutzky. **Completed Intent to Bid and NDA forms must be submitted via e-mail. Forms posted to Proposal Tech will not be accepted.**

Alabama PEEHIP Prescription Drug Plan RFP 2019

Attached Document(s): [Non-Discolure Agreement](#) [Segal Model Mutual Bid-related Confidentiality Agreement \(Global\).DOC](#), [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.

Unlimited.

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

Unlimited.

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

Unlimited.

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.

Unlimited.

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

Unlimited.

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:

- Bidder must be currently providing prescription benefit management services to at least one state-wide public sector client with a minimum of 100,000 active lives
- Bidder must have a minimum of 1.2 million current lives under management
- Bidder must have a minimum of five (5) years of pharmacy benefit management experience
- Bidder must not have any bankruptcy filings within the last 5 years; and
- 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

5.3 QUALIFICATIONS OF THE FIRM - MANPOWER

5.3.1 Identify lead sales and account management individuals by name and title and include a resume of each.

Unlimited.

Alabama PEEHIP Prescription Drug Plan RFP 2019

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.

Unlimited.

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, please adhere to the following:

-Reflect the details of the expected total contract cost for fiscal plan years 2020, 2021 and 2022

-PEEHIP desires to enter into a three-year contract for pharmacy benefit administration services, for plan years 2020 through 2022. Be specific regarding the following:

- Administrative fees Discounts from AWP and dispensing fees
- Rebates
- Fee basis for pharmacy benefit administration
- Minimum three-year fee guarantee
- Note: All “add-on” costs are estimated and documented in the Price Proposal Worksheet – Attachment 1

5.6 SCORING CRITERIA

5.6.1 Proposals will be evaluated by a 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
Minimum Contractual Requirements	
Term/ Termination	25
Definitions	75
Financial Terms and Conditions	100
Formulary Management	75
Retail Network Management	25
Account Service	50
Audit Rights	25
Legal Responsibilities	25
Implementation/Ongoing	25
Questionnaire	50
Performance Guarantees	25
Total Technical Proposal	500 points
Total Price Proposal	500 points

Alabama PEEHIP Prescription Drug Plan RFP 2019

Total Proposal	1000 points
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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/index.php/members/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

5.8 ADDITIONAL PROCUREMENT DOCUMENTS

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

1. State of Alabama Disclosure Statement (Required by Article 3B of Title 41, Code of Alabama 1975) – two pages
2. Sample PEEHIP State Contract
3. Business Associate Agreement
4. Immigration Compliance Certificate (submission must include entire E-Verify Memorandum of Understanding, verified by the U.S. Department of Homeland Security)
5. IRS Form W-9
6. Verification of adherence to the PEEHIP Statement on HIPAA Compliance Documentation. Please see the Business Associate Data Security Policy as a reference.
7. RSA Third Party Vendor Security Questionnaire
8. Trading Partner Agreement

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

Attached Document(s): [Exhibit 8 - Trading Partner Agreement 1.17.18.pdf](#), [Exhibit 7 - RSA Third Party Vendor Security Questionnaire-Editable format.xlsx](#), [Exhibit 6A - PEEHIP Statement on HIPAA Compliance Documentation.docx](#), [Exhibit 6 - Bidder Verification Adherence to BA Policy.docx](#), [Exhibit 5 - W9.pdf](#), [Exhibit 4 - Immigration Compliance Certificate.pdf](#), [Exhibit 3 - 2018 BUSINESS ASSOCIATE AGREEMENT.PDF](#), [Exhibit 2 - Sample Professional Services Agreement for PEEHIP RFPs 2019.docx](#), [Exhibit 1 - Disclosure Statement.pdf](#)

Single, Radio group.

1: Confirmed,

2: Not confirmed: [500 words]

6 GENERAL PROPOSAL CONDITIONS

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

6.4 Bidder will not be bound by oral explanations or instructions 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 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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

6.7 The proposal must be signed (electronic signature is acceptable) 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.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

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: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

6.13 There are NO additional fees (beyond those outlined in the Price Proposal Worksheet) required to provide the services outlined in this RFP. Any mandatory fees must be clearly outlined in the Price Proposal Worksheet. 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: [Unlimited]

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: [Unlimited]

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Agree,

2: Disagree, explain: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Agree, please specify coverage amounts;
- 2: Disagree, explain: [Unlimited]

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 in 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: [Unlimited]

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: [Unlimited]

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, 2019.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

6.29 Bidder agrees to provide a sample Services Agreement that includes 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,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

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: [Unlimited]

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 or ISAE 3402 (If a foreign organization).

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

6.38 Bidder must have the capability to process daily transmittal of eligibility files, and maintain eligibility files, on a daily basis, and transmit and receive a reconciliation file to/from PEEHIP electronically, on a monthly basis, in PEEHIP's eligibility file format. PEEHIP will provide their file format to the Bidder.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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 Appendix A - 834 Reporting Mapping in the Reference Documents section.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree, explain: [Unlimited] ,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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: [Unlimited]

6.53 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

Alabama PEEHIP Prescription Drug Plan RFP 2019

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: [Unlimited]

6.54 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 in order to minimize any disruption to members.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

6.55 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: [Unlimited]

6.56 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 45 days after the implementation date of October 1, 2019, 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: [Unlimited]

6.57 Bidder must have the ability to accept “warm transfers” from PEEHIP’s Member Services Call Center to Bidder’s call center(s) at no additional cost to PEEHIP.

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

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

Single, Radio group.

- 1: Agree,
- 2: Disagree, explain: [Unlimited]

6.59 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

Alabama PEEHIP Prescription Drug Plan RFP 2019

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: [Unlimited]

6.60 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: [Unlimited]

7 MINIMUM CONTRACTUAL REQUIREMENTS

The following are PEEHIP's core requirements. Bidders' responses to this section will be heavily weighted in the selection process. By checking "Yes", 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.

7.1 Term/ Termination

7.1.1 The Bidder agrees to a three-year Initial Term effective October 1, 2019. The Bidder must guarantee financial terms through September 30, 2022.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

7.1.2 PEEHIP will have the right to terminate the Bidder with or without cause with a 90-day notice period.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

7.1.3 The Bidder agrees that beginning eighteen (18) months from the initial Effective Date, PEEHIP may conduct a market check analysis of the pricing terms, which may include discount from AWP, dispensing fees, administration fees, and rebates, against the pricing then available to similarly sized or smaller plan sponsors and for similar pharmacy benefit management services. PEEHIP will submit to the Bidder a market check report that evaluates and compares all major pricing elements and other information to demonstrate comparability of plans. The Bidder will review the market check request and respond to PEEHIP within thirty (30) days of receipt of the market check report. If the market check report validates an aggregate annualized savings of greater than 1%, the parties will discuss, in good faith, revisions to the pricing terms. Any revisions to the pricing terms resulting from the parties' negotiations will be effective October 1 of the following year but no sooner than thirty (30) days after completion of the market check report.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

7.1.4 Bidder agrees to implement new pricing due to market check process on specified dates in 7.1.3. Acceptance of the new pricing will apply for the remainder of the Initial Term and will NOT result in extension

Alabama PEEHIP Prescription Drug Plan RFP 2019

of the contract, unless requested by PEEHIP. The financial guarantees for any partial contractual year that results from the implementation of new pricing will still be guaranteed, reconciled and the Bidder will still make payments for any shortfalls for those partial contractual years with less than 12 months and those contractual years with over 12 months.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.1.5 The Bidder contract will not include automatic renewal language.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.1.6 All rebate revenue earned by utilization pertaining to PEEHIP will be paid to PEEHIP regardless of their termination status as a client. Lag rebates on claims incurred prior to the termination date will continue to be paid to PEEHIP after termination until 100% of earned rebates are paid.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.2 Definitions

7.2.1 Confirm you agree to the following contract definitions:

	Response	Comments
a. "Transparent" - Bidder agrees to pass-through 100% of negotiated discounts with network pharmacies at the point-of-service and to provide auditing protocol, enabling tracking of individual claims back to original pharmacy network contract documents. The Bidder agrees to disclose details of all programs and services generating financial remuneration from outside entities.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
b. "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 Specialty order 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 Bidder receives from a pharmaceutical manufacturer for administrative costs, formulary placement, and/or access.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required

Alabama PEEHIP Prescription Drug Plan RFP 2019

<p>c. AWP (Average Wholesale Price) is based on date sensitive, 11-digit NDC as supplied by a nationally-recognized pricing source (i.e., First DataBank, Medi-Span) for retail, Specialty order, and specialty adjudicated claims (subject to outstanding litigation).</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>d. Member Copay - Members will pay the lowest of the following: plan copay/coinsurance, plan-negotiated discounted price plus dispensing fee, usual and customary (U&C), MAC (maximum allowable cost), the negotiated price between the retail pharmacy and PBM, or retail cash price.</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>e. Eligibility and claim data - All eligibility and claims records are the sole property of PEEHIP and must be made available upon request to PEEHIP and its representatives. Selling or providing of PEEHIP's data to ANY outside entities must be approved in advance, reported on a monthly basis and all income derived must be disclosed and shared per agreement with PEEHIP. Even if Bidder has not "sold" the data, it is NOT free to use the data for analyses that they publish or provide to outside industries.</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>f. Paid Claims - Defined as all transactions made on eligible members that result in a payment to pharmacies or members from PEEHIP or PEEHIP member copays. (Does not include reversals, rejected claims and adjustments.) Each unique prescription that results in payment shall be calculated separately as a paid claim.</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>g. Members - All eligible employees, non-Medicare retirees, and their eligible dependents, enrolled under PEEHIP's prescription benefit program.</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>h. Brand Drug means drugs which are classified as brand drugs based on indicators provided by Medi-Span's National Drug Data File or another nationally recognized source as follows denoted in the Multi-source Code field as "M", "N", and "O."</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>i. Generic Drug means a single source or multi-source prescription drug, which is classified as a generic drug by Medi-Span's National Drug Data File or another nationally recognized source denoted in the Multi-source Code field as "Y."</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>
<p>j. Specialty Drugs means certain pharmaceuticals and/or biotech or biological drugs that are (i) used in the management of chronic or genetic diseases; or (ii) injectable, infused, or oral medications, or otherwise require special handling; or (iii) high cost biotech and other Federal legend prescription drug products, or; (iv) classified at the discretion of PEEHIP</p>	<p><i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments</p>	<p><i>Unlimited.</i> Nothing required</p>

Alabama PEEHIP Prescription Drug Plan RFP 2019

k. Maximum Allowable Cost or MAC means the maximum allowable unit cost of a drug and establishes an upper limit reimbursement price for certain drugs dispensed without regard to the specific manufacturer whose drug is dispensed, and which drugs are identified on a “MAC List”.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
l. “House Generics” or DAW 3,5,6 or 9 claims will be included in the generic guarantee financial reconciliation calculations and GDR guarantee calculations	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
Any rebates derived from “House Generics” or DAW 3, 5, 6, 9 claims will be passed through at 100% to PEEHIP	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
m. Members will pay the generic copay for any “House Generics or DAW 3, 5, 6 or 9 claims	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required

7.2.2 Brand and Minimum Generic Discount Guarantees for retail and specialty shall be defined as follows: (1-Aggregate Ingredient Cost/Aggregate AWP)

	Response	Comments
a. Aggregate Ingredient Cost prior to application of plan-specific copays/coinsurance (including member paid penalties) will be the basis of the calculation.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
b. Dispensing Fees are not included in the Aggregate Ingredient Cost.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
c. Zero balance due claims or zero amount claims will be included in the guaranteed measurement for AWP, ingredient cost, achieved discounts, or dispensing fee calculations at the discounted cost before copay.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required

Alabama PEEHIP Prescription Drug Plan RFP 2019

d. Both the Aggregate Ingredient Cost and Aggregate AWP from the actual date of claim adjudication will be used.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
e. Both non-MAC, MAC, single-source and multiple source generic products are to be included in the generic guarantee measurement.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
f. Compounds, OTC claims, and ancillary supplies will be excluded from the guarantee measurements components. Please review a copy of the PEEHIP Member Handbook attached to this RFP for further detail on compounds.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
g. The guarantee measurement must exclude the savings impact from DUR programs, formulary programs, utilization management programs, and/or other therapeutic interventions.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required
h. Measurement will be performed annually via independent PEEHIP audit utilizing date-sensitive AWP derived from a single, nationally recognized price source for all claims.	<i>Single, Radio group.</i> 1: Yes, 2: No, please explain in comments	<i>Unlimited.</i> Nothing required

7.2.3 The Bidder agrees to provide upon request any proprietary algorithms, hierarchy or other logic employed to define a prescription drug as generic or brand, as part of this competitive bid process or at any point during any resulting contract term.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3 Financial

7.3.1 Each distinct non-rebate pricing guarantee (including discounts and dispensing fees) will be measured and reconciled on a component (e.g., retail 30 brand, retail 30 generic, retail 90 brand, retail 90 generic, specialty drugs via Participating Retail Pharmacies, specialty drugs via the Bidder's Specialty Pharmacy) basis only and guaranteed on a dollar-for-dollar basis with 100% of any shortfalls recouped by PEEHIP. Surpluses in one component (including rebates) may not be utilized to offset deficits in any other component.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.3.2 Each distinct rebate pricing guarantee will be measured and reconciled on a component (e.g., retail 30 brand, retail 30 generic, retail 90 brand, retail 90 generic, specialty drugs via Participating Retail Pharmacies, specialty drugs via the Bidder's Specialty Pharmacy) basis only and guaranteed on a dollar-for-dollar basis with 100% of any shortfalls recouped by PEEHIP. Surpluses in one component may not be utilized to offset deficits in any other component. Rebates surpluses will not be utilized to offset deficits in any other non-rebate guaranteed component.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.3 The Bidder will provide a financial reconciliation report within 20 days after the end of each contractual month and 90 days after each contractual year, and the report will include the contractual and actual discounts and dispensing fees for each component (e.g., retail 30 brands, retail 30 generics, retail 90 brands, retail 90 generics, specialty drugs via Participating Retail Pharmacies, specialty drugs via the Bidder's Specialty Pharmacy). Lag rebates will continue to be paid to PEEHIP until 100% of earned rebates are paid.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.4 The Bidder agrees that any shortfall between the actual result and the guarantee will be paid, dollar-for-dollar, to PEEHIP within 90 days of the end of each contractual year.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.5 The Bidder's financial reconciliation that occurs after the end of the contract year will use the lower of the AWP pricing at the point of adjudication or the retroactive AWP pricing, if the pricing source the Bidder uses issues retroactive AWP pricing for that annual reconciliation time period.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.6 All pricing submitted will NOT be contingent on participation in any proposed clinical management programs, group medical or behavioral health programs proposed by you or any other vendor other than programs that are requested by PEEHIP. Further, the pricing guaranteed in the Financial Section of this RFP reflects a) the Bidder's broadest national network, and b) the Bidder's highly managed formulary offering.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.7 Confirm the Bidder will, at a minimum, duplicate the plan design features and levels of coverage presently offered by PEEHIP, including coordination with the medical plan, without impacting the proposed pricing.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.8 Specialty pricing and rebates will apply to all claims that adjudicate at any pharmacy regardless of days' supply.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.9 Guaranteed rebates per prescription will be based on all brand prescriptions dispensed, not only on formulary prescriptions dispensed.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.10 Rebates are guaranteed on a minimum (i.e., not fixed) basis, and the Bidder will pass through 100% of the rebates to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.11 Rebates will be paid upon the earliest of signature of: 1) the Letter of Agreement/Intent, OR 2) Pricing Implementation Document, OR 3) contract. "Paid" implies all rebates earned attribute to PEEHIP will be paid to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.12 The Bidder will guarantee Retail/Specialty unit cost equalization meaning that Specialty unit costs prior to member cost sharing, and dispensing fees will be no greater than the unit cost for the same NDC-11 at Retail.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.13 The Bidder agrees to produce a date-sensitive comparison report showing unit costs charged to PEEHIP at a GCN-level, and reimburse PEEHIP on a dollar-for-dollar basis for all instances where Specialty unit costs exceed retail unit's costs. Report and reconciliation will be provided on a quarterly basis, without a request being made by PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.14 PEEHIP will be notified of any switch to the source of the aggregate AWP with at least a 180-day notice. In the event that a switch is made, it must be price neutral and acceptable to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.15 The Bidder will be responsible for collecting any outstanding member cost shares for prescriptions dispensed through the Specialty order facility. The Bidder will not invoice PEEHIP for any uncollected member cost shares even if there is a debit threshold in place.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.3.16 The Bidder will not withhold any financial recoveries from audits performed on the contracted pharmacy network. Any recoveries will be disclosed and credited to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.17 The Bidder will credit PEEHIP the cost difference for any claims where PEEHIP was considered “primary” for the claim but the claim should have been considered “secondary” for PEEHIP (e.g., workers' compensation claim).

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.18 The Bidder will not charge PEEHIP or offset any costs from an audit recovery should the Bidder have to pursue additional collection action to recover audit discrepancies.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.19 The Bidder will invoice PEEHIP twice monthly for claims and once monthly for the administrative services.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.20 PEEHIP will pay all undisputed invoiced amounts for claims and service fees to the Bidder within ten (10) business days after PEEHIP receives an invoice from the Bidder.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.21 If PEEHIP disputes all or a portion of any invoice, PEEHIP will pay the undisputed amount timely and notify the Bidder in writing of the specific reason and amount of any dispute before the due date of the invoice. The Bidder and PEEHIP will work together, in good faith, to resolve any dispute. Upon resolution, PEEHIP or the Bidder will remit the amount owed to the other party, if any, within five (5) business days as the parties agree based on the resolution.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.22 Sales tax will be included at the point of sale, only when required by a state's law and will be charged to the participant and not PEEHIP. Prescription drugs are not subject to sales tax in Alabama.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.23 Confirm that any pharmaceutical provider tax is not passed to either PEEHIP or PEEHIP member.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.3.24 Bidder agrees to provide PEEHIP with the necessary information so that PEEHIP can review and approve refunds on a monthly basis from Members who have received any prescriptions after cancel date.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.25 Bidder will request refunds from providers with respect to a claim incurred after the cancel date for up to 2 years from the incurred date. If the claim is adjudicated improperly, there is no time limit for the Bidder to request refunds from the provider.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.26 Confirm your understanding that Alabama prohibits exclusive specialty pharmacy arrangements by any-willing-provider statute.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.27 Confirm Limited distribution drugs will be included in the minimum rebate guarantee and overall effective discount.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.28 Confirm New to Market Specialty Drugs will be included in the above overall and rebate guarantee.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.3.29 Confirm your organization can offer price or inflation protection guarantees and please define the dollars at risk your organization will commit to in this guarantee.

Single, Radio group.

1: Yes, please define the dollars at risk,

2: No, please explain: [Unlimited]

7.3.30 Confirm that price protection you receive from manufacturers will be passed through in your rebates to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.31 Confirm your organization will provide an NDC level report on earned rebate dollars and all ancillary fees received by your organization from pharmaceutical manufacturers for medications dispensed for PEEHIP in addition to the monthly and annual reconciliation reports.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.3.32 Confirm how many MAC lists and MAC drug price lists does your organization maintains. If more than one, please explain how multiple lists are used in relationship to PEEHIP.

Alabama PEEHIP Prescription Drug Plan RFP 2019

1000 words.

7.4 Formulary Management

7.4.1 Confirm that you are able to administer PEEHIP's current customized Commercial Plan formulary and plan design. The submitted proposal is not contingent on PEEHIP's acceptance of any clinical programs PEEHIP's current formulary is provided in Appendix C.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.2 Confirm all additions and deletions for the customized formulary will be made at PEEHIP's discretion.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.3 Confirm your organization will work with PEEHIP and its third party consultants to make custom formulary changes that are clinically and financially sound. This includes bi-weekly calls to review all new drugs to market, high dollar calls, drug price inflation reports, maximum claim edit reports, identifying high,-cost low-value outliers for exclusion, etc.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.4 Bidder confirms that no new drug therapies will be covered until approved by PEEHIP. PEEHIP does not allow coverage of new drugs for the first 180 days. If a new drug is added to the formulary, it is not to be automatically assumed PEEHIP will provide coverage of that particular drug. It must be approved by PEEHIP. All new drugs and line extensions must be reviewed bi-weekly with PEEHIP for purposes of determining formulary status and utilization management. Non-essential drugs such as high-cost, low value kits, etc., can be automatically excluded through the Non-Essential Table program.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.5 Confirm you will allow PEEHIP to make edits and modifications to your standard Prior Authorization criteria.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.6 Confirm you will accept and manage PEEHIP customized Prior Authorization criteria as it is currently administered and specified by PEEHIP management.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.7 Confirm you will allow PEEHIP to remove and/or add prior authorizations, quantity limits or step therapies on an individual drug level.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.4.8 With the exception of FDA recalls or other safety issues, the Bidder agrees not to remove any drug products, brand or generic, from PEEHIP's non-specialty and specialty formulary or non-specialty and specialty preferred drug listings without notification and prior approval from PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.4.9 No alterations to financial guarantees will be made on non-specialty and specialty formulary drug exclusions. PEEHIP has the right to opt in or opt out of any non-specialty/specialty formulary drug exclusions without penalty.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.4.10 Confirm you will provide rebate reporting by therapeutic category and by manufacturer on a quarterly basis and down to the NDC level.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.4.11 Confirm that you will provide written advance notification, 60-days in advance, to affected physicians and members for negative formulary changes (drug moving to non-preferred or non-covered) or when new prior authorization or step therapy rules are implemented. Note: Existing PEEHIP members are grandfathered from Step Therapy rules.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.4.12 Confirm you have formulary management support services you can provide to PEEHIP and how that process would be managed.

Single, Radio group.

1: Yes, please explain: [Unlimited],

2: No, please explain: [Unlimited]

7.4.13 Confirm you have rebate management support services you can provide to PEEHIP and how that process would be managed.

Single, Radio group.

1: Yes, please explain: [Unlimited],

2: No, please explain: [Unlimited]

7.4.14 Confirm manufacturer agreements contain provisions that limit the amount the manufacturer can raise the AWP price of prescription drugs each year.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.4.15 Confirm reporting will be provided to PEEHIP to demonstrate such manufacturer price limit agreements provide meaningful benefits to PEEHIP.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.4.16 Confirm your organization holds its own rebate contracts and does not utilize a rebate aggregator, and if an aggregator is used, please indicate the organization.

Single, Radio group.

1: Yes, indicate organization: [Unlimited],

2: No, please explain: [Unlimited]

7.4.17 Confirm any custom reporting will be applied to PEEHIP at no extra cost.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5 Retail Network Management

7.5.1 Confirm that mail order pharmacies will not be allowed in the PEEHIP network.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.2 Explain how you identify mail order pharmacies from retail pharmacies.

1000 words.

7.5.3 Confirm that your proposal is based on your broadest network.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.4 Confirm you are willing to solicit a more aggressive pharmacy network and describe how the process would work.

Single, Radio group.

1: Yes, please explain: [Unlimited],

2: No, please explain: [Unlimited]

7.5.5 Confirm you will accept, manage and administer PEEHIP's existing customized variable copay assistance program for specialty drugs as it is administered today.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.6 Describe your current capabilities to administer a variable copay plan design to leverage available specialty drug manufacturer patient assistance programs.

1000 words.

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.5.7 For the variable copay plan design currently administered, confirm you will be able to exclude the portion of cost funded by the manufacturer from a member's out-of-pocket maximum.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.8 Confirm you will offer and administer PEEHIP's current Coordination of Benefits (COB) procedures as they are administered today.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.9 Bidder agrees that it will not remove any participating network pharmacies that impact greater than 2% of PEEHIP's prescriptions without communicating to PEEHIP at least sixty (60) days in advance of the scheduled change and obtaining PEEHIP approval for the removal(s). If the change is not agreeable to PEEHIP, PEEHIP will have the right to terminate the agreement without penalty with 30 days' notice. If removal is approved by PEEHIP, Bidder is also required to notify the impacted members in writing and provide a listing of nearby participating pharmacies.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.10 Bidder agrees to offer improved pricing terms to PEEHIP if greater than 2% of members are impacted by proposed changes to the participating pharmacy network.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.11 Bidder will perform and provide a GeoAccess analysis based on your contracted pharmacy network using the Census File (provided upon receipt of signed Intent to Bid Form and NDA). Provide this separately for independent pharmacies and chain pharmacies. The access standards in the table below will be utilized in the analysis.

Provider Type	Urban / Suburban Enrollees	Rural Enrollees
Pharmacies	2 in 5 miles	2 in 20 miles

Single, Pull-down list.

1: Confirmed and Attached,

2: Not confirmed and not provided

7.5.12 Bidder will provide any pharmacy chains excluded from your proposed retail pharmacy network. Please list in comments or attach as part of this RFP.

Single, Pull-down list.

1: Confirmed and Attached,

2: Not confirmed and not provided

7.5.13 Bidder will provide and describe the contracting strategy for independent pharmacies and how discounts differ between independent pharmacies and chain pharmacies.

Single, Pull-down list.

1: Confirmed and Attached,

2: Not confirmed and not provided

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.5.14 Confirm that members/PEEHIP are credited for prescriptions filled but not obtained (Return to Stock situations).

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.5.15 Confirm if retail network agreements allow pharmacies to utilize manufacturer coupon and other programs to circumvent plan design incentives and disincentives.

Single, Radio group.

1: Yes,

2: No

7.5.16 If manufacturer coupons and other such programs are allowed, provide what actions your organization takes to support PEEHIPs cost management objectives.

Unlimited.

7.5.17 Bidder must implement measures to recover overpayments made to pharmacies or members and employ a mechanism to ensure PEEHIP receives credit for these overpayments. Details of threshold recovery levels will be finalized at the time of contract award.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.5.18 Confirm your organization's capability and willingness to exclude from the network providers identified by the Federal Office of Inspector General (OIG) exclusion list for the PEEHIP population.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.5.19 Confirm your organization's capability and willingness to exclude from the network providers identified by the Alabama State Medicaid Agency exclusion list for the PEEHIP population.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.6 Account Service

7.6.1 For each program, confirm that you can and will administer PEEHIP's clinical and other programs as described in the Member Handbook and as specified by PEEHIP management.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.6.2 PBM agrees to provide at least two-full time employee to work in the PEEHIP office at the PBM's expense. Each full-time employee should be a member service representative whose primary responsibility is to answer member service calls (consistent with the responsibilities of other member service representatives not on-site), and who will also be available to work with PEEHIP management staff and have access to PEEHIP systems for the purposes of resolving claim and member issues. These persons should be solely dedicated to

Alabama PEEHIP Prescription Drug Plan RFP 2019

PEEHIP. Please confirm and describe how your organization will train these employees to ensure high quality service to PEEHIP and its members.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.6.3 Bidder agrees to provide designated/dedicated account resources including, but not limited to, an implementation manager, strategic account executive, clinical director - pharmacist, account manager, claims advocate and an underwriter/financial analyst. Please include biographies in attachments.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.6.4 Confirm that you will provide a dedicated clinical manager to PEEHIP (have no other clients other than PEEHIP), who will have full knowledge of all clinical programs in effect as well as all clinical programs offered by your organization. Confirm that the clinical manager will have sufficient resources to efficiently and effectively handle the work load, including organization support to initiate and maintain custom Prior Authorization (PA) criteria.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.6.5 Confirm that you will provide a dedicated account manager to PEEHIP (have no other clients other than PEEHIP), who will be the primary day-to-day contact, have full knowledge of all operational aspects of the administration of the benefit. Confirm that the account manager will have sufficient resources to efficiently and effectively handle the work load.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.6.6 Confirm that a designated member service manager (may have clients other than PEEHIP) will be assigned to this account.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.6.7 Confirm the Account Manager will lead bi-weekly meetings with PEEHIP and maintain an accurate, up to date task log of current issues and discussion items. The Account Manager will be responsible for overseeing the task log and ensuring each identified issue is addressed until resolution is achieved.

Single, Radio group.

1: Confirmed: [500 words] ,

2: Not confirmed.

7.6.8 Confirm that a designated enrollment analyst will be assigned to PEEHIP's account (may have clients other than PEEHIP). The duties of the enrollment analyst are to monitor the inbound files from PEEHIP's medical plan carriers and other third party vendors, manage discrepancy issues, and actively engage in relationships with the vendors.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.6.9 Indicate if the following resources will be designated (have other clients) or dedicated (have no clients other than PEEHIP).

	Response
Strategic Account Executive	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Account Manager	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Implementation Manager	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Clinical Account Executive	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Financial Analyst	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Call Center Service Representative	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated
Claims Advocate	<i>Single, Pull-down list.</i> 1: Dedicated, 2: Designated

7.6.10 Confirm PEEHIP will have the authority to override the Bidder regarding decisions on individual medication choices of members.

Single, Radio group.

- 1: Confirmed,
2: Not confirmed: [Unlimited]

7.6.11 Confirm you will request PEEHIP's input and approval of all non-standard (custom) member communications prior to dissemination.

Single, Radio group.

- 1: Confirmed,
2: Not confirmed: [Unlimited]

7.6.12 Confirm that all member communications will be co-branded with the PEEHIP logo.

Single, Radio group.

- 1: Confirmed,
2: Not confirmed: [Unlimited]

7.6.13 Bidder agrees to provide quarterly electronic EOB statements to all PEEHIP members at no charge.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

7.6.14 Bidder agrees to mail quarterly EOB statements to all PEEHIP members that request a paper statement at no charge.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

7.6.15 Confirm your team will attend onsite Quarterly meetings with PEEHIP to present current plan and service performance, address any recent issues/challenges encountered, suggest potential savings opportunities specifically applicable to PEEHIP's plan, and discuss other pertinent topics to be identified prior to each meeting. At a minimum, PEEHIP requests that the appropriate clinical and analytical team members closely involved in the daily operations of the PEEHIP account and the Account Manager 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,
- 2: Not confirmed

7.6.16 If a member visits an out of network provider and files for reimbursement via a paper claim, confirm that neither the member nor PEEHIP will be charged any additional fees for processing a paper claim.

Single, Radio group.

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

7.7 Audit Rights

7.7.1 PEEHIP or its designee will have the right to audit annually, with an auditor of its choice (for both claims and rebate audits), with full cooperation of the selected Bidder, the claims, services and pricing and/or rebates, including the manufacturer rebate contracts held by the Bidder, to verify compliance with all program requirements and contractual guarantees with no additional charge from the Bidder.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

7.7.2 PEEHIP or its designee will have the right to audit annually, with an auditor of its choice, with full cooperation of the selected Bidder, PEEHIP's customized Prior Authorization program, to verify compliance with all program requirements and contractual guarantees with no additional charge from the Bidder.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

7.7.3 PEEHIP or its designee will have the right to audit up to the last three complete contractual years (36 months) of claims data at no additional charge from the Bidder.

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.7.4 PEEHIP or its designee will have the right to conduct an audit at any time during the year, at any point during the contract term, and the selected Bidder will provide all documentation necessary to perform the audit.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.7.5 Bidder will provide complete claim files and documentation (i.e., full claim files, financial reconciliation reports, inclusion files, and plan documentation) to the auditor within 30 days of receipt of the audit data request as long as a non-disclosure agreement is in place between the auditor and the Bidder.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.7.6 Bidder agrees to a 30-day turnaround time to provide the full responses to all of the sample claims and claims audit findings.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.7.7 PEEHIP or its designee will have the right to audit up to 10 pharmaceutical manufacturer contracts during an on-site rebate audit at no additional charge from the Bidder.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.7.8 The audit provision shall survive the termination of the agreement between the parties for a period equivalent to the Initial Term of the contract.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.7.9 Bidder must perform on-site audits of at least 5% of the contracted network pharmacies on an annual basis, returning 100% of audit recoveries from PEEHIP's utilization for pharmacies with at least 500 claims processed annually.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

7.7.10 Bidder agrees to pass through 100% of PEEHIP-related audit recoveries identified through Bidder's internal daily and ongoing retail network pharmacy audit compliance procedures.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

7.8 Legal Responsibilities

7.8.1 Bidder agrees that this Agreement or any of the functions to be performed hereunder shall not be assigned by either party to another party, absent advance notice to the other party, and written consent to said assignment, which consent shall not be unreasonably withheld. In the event either party shall not agree to an assignment by the other party, then this agreement shall terminate upon the effective date of said assignment.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.8.2 The Bidder must agree that in the event of a dispute between the parties, about the payment or entitlement to receive payment, or any administrative fees hereunder, the Bidder and PEEHIP shall endeavor to meet and negotiate a reasonable outcome of said dispute. In NO event shall Bidder undertake unilateral offset against any monies due and owed PEEHIP, whether from manufacturer rebates, credit adjustment or otherwise.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.8.3 Bidder will agree to defend claims litigation based on its decisions to deny coverage for clinical reasons.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.8.4 Bidder will agree to handle claims/appeals processing in accordance with the Affordable Care Act (ACA).

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.8.5 Bidder will agree to be responsible for selecting and contracting the external review organizations sufficient to allow PEEHIP to comply with the ACA.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.8.6 Confirm you will notify the Plan and each affected individual directly if a breach of unsecured protected health information is discovered, as required under the Health Information Technology for Economic and Clinical Health (HITECH) Act, enacted as part of the American Recovery and Reinvestment Act of 2009, and in accordance with the HIPAA/HITECH Comprehensive Final Rule.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9 Implementation/Ongoing

7.9.1 Bidder agrees to provide an Implementation Credit to PEEHIP on a Per Member basis. Note to Bidder: Do not include proposed implementation credit in your response to this question. Bidder can propose the implementation credit where instructed in the Price Proposal Worksheet.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.2 Bidder will provide draft SPD language for any clinical programs that are to be implemented.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.3 Bidder agrees to load all current prior authorizations, open refills, specialty transfer files, claim history files, and accumulator files that exist for current members from the existing Bidder at NO charge to PEEHIP (with no charges being deducted from the implementation allowance for file loading or IT).

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.4 Bidder agrees to send at least 36 months of claims history data, all current prior authorizations, open refills, specialty transfer files, and accumulator files that exist for PEEHIP participants to the next/successor Bidder at NO charge if PEEHIP terminates the contract with or without cause, or upon expiration of the term.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.5 Bidder agrees to provide and receive weekly and/or monthly data transmissions to and from PEEHIP and /or its third party vendors at no charge including full, electronic claims files, in NCPDP format, as specified by PEEHIP. Bidder will also interact/exchange data with all vendors as needed (e.g., combined medical/Rx out of pocket maximum) at no additional charge.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.6 Bidder agrees to waive any charges to PEEHIP or PEEHIP's medical plan claims administrators such as a set-up fee, a programming fee or a monthly fee, for establishing a connection with a Third Party Administrator/Claims processor for real-time, bidirectional data integration, including non-standard data integration formats.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

7.9.7 Bidder agrees to absorb any programming or other administrative costs to meet any existing or future requirements of the ACA.

Single, Radio group.

1: Yes,

2: No, please explain: [Unlimited]

8 QUESTIONNAIRE

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.1 REFERENCES

8.1.1 Please provide references of four (4) current clients of similar size and industry for which you provide similar services.

-At least one of these references must be a state-level plan with at least 100,000 active lives.

	Reference 1	Reference 2	Reference 3	Reference
a. Customer Name	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
b. Length of time serviced	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
c. Number of eligible employees	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
d. Number of participating employees/subscribers	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
e. Description of services	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
f. Effective date of contract	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
g. Name of contact	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
h. Contact title	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
i. Contact phone number	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
j. Contact email	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>
j. Contact address	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>	<i>Unlimited.</i>

8.1.2 Provide this same information for two (2) recently terminated prescription drug customers. Include the reason the engagement was terminated.

	Reference 1	Reference 2
a. Customer Name	<i>Unlimited.</i>	<i>Unlimited.</i>
b. Length of time serviced	<i>Unlimited.</i>	<i>Unlimited.</i>
c. Number of eligible employees	<i>Unlimited.</i>	<i>Unlimited.</i>
d. Description of services	<i>Unlimited.</i>	<i>Unlimited.</i>
e. Name of contact	<i>Unlimited.</i>	<i>Unlimited.</i>

Alabama PEEHIP Prescription Drug Plan RFP 2019

f. Contact title	<i>Unlimited.</i>	<i>Unlimited.</i>
g. Effective date of contract	<i>Unlimited.</i>	<i>Unlimited.</i>
h. Contact phone number	<i>Unlimited.</i>	<i>Unlimited.</i>
i. Contact email	<i>Unlimited.</i>	<i>Unlimited.</i>
j. Contact address	<i>Unlimited.</i>	<i>Unlimited.</i>
k. Reason for termination	<i>Unlimited.</i>	<i>Unlimited.</i>

8.2 COMPANY OVERVIEW

8.2.1 Provide the following information for the proposed administrator of the prescription drug plan.

	Your Company	Parent Company
Legal Company Name	<i>500 words.</i>	<i>500 words.</i>
Corporate Office Address	<i>500 words.</i>	<i>500 words.</i>
Telephone Number	<i>500 words.</i>	<i>500 words.</i>
Company URL (web address)	<i>500 words.</i>	<i>500 words.</i>

8.2.2 Provide the location of the Bidder's office(s) that would be responsible for managing the PEEHIP contract(s).

Unlimited.

8.2.3 Please complete the following table:

	Response
Year PBM Established	<i>500 words.</i>

Alabama PEEHIP Prescription Drug Plan RFP 2019

Total Lives Covered (2018)	500 words.
Percent Lives Covered from Top 10 Clients	500 words.
Total Client Drug Spend (2018)	500 words.
Total Number of Retail Claims Processed (2018)	500 words.
Total Number of Mail Order Claims Processed (2018)	500 words.
Total PBM Employees (2018)	500 words.

8.2.4 Does your organization (or affiliate or subsidiary) provide services to pharmaceutical manufacturers? If so, please describe.

Unlimited.

8.2.5 Provide the 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	Comments
1.	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required
2.	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required
3.	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required
4.	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required
5.	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required	<i>Unlimited.</i> Nothing required

8.2.6 Does your organization (or affiliate, subsidiary, or sub-contractor) perform any activities outside the U.S.? If so, describe the activity(ies) and whether the task(s) are central to the scope of services or are support activities.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Unlimited.

8.2.7 Describe your process for vetting the privacy, security, HIPAA compliance, and readiness of your sub-contractors.

Unlimited.

8.2.8 Has your organization experienced recent merger or acquisition activity? If so, please describe. Has your organization recently undergone any workforce realignments? 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.

500 words.

8.2.9 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.

8.2.10 Please describe any known investigations of your organization by Federal or State government agencies or offices that have been announced, are underway, are pending, or have been settled with the past 24 months.

Unlimited.

8.2.11 What are the most recent ratings for your company by the following rating entities?

	Rating	Date
A.M. Best	<i>10 words.</i>	<i>To the day.</i>
Fitch	<i>10 words.</i>	<i>To the day.</i>
Moody's	<i>10 words.</i>	<i>To the day.</i>
Standard and Poor's	<i>10 words.</i>	<i>To the day.</i>

8.2.12 If any rating has changed within the past 12 months, from any of the rating agencies, please explain.

500 words.

8.2.13 Is your organization:

Single, Radio group.

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

8.2.14 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.

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.3 EXPERIENCE

8.3.1 Confirm that your company can administer prescription drug benefits for a population of PEEHIP's size.

Single, Radio group.

1: Confirmed,

2: Not confirmed, please explain: [500 words]

8.3.2 Provide statistics regarding your benefits business for your entire book of business.

	Total Client Members	Client Members in Alabama	Total Number of Employer Clients	Public Sector Members	Number of Public Sector Clients	Number of Clients with 100,000+ Members
2017	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>
2018	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>	<i>Integer.</i>

8.3.3 Provide your organization's 2018 year-end membership for each of the following:

	2018 Year End Membership
Actives and Early Retirees	<i>Integer.</i>

8.3.4 How many new clients did your organization add effective January 1, 2019?

	2019 New Groups
Actives and Early Retirees	<i>Integer.</i>

8.3.5 What percentage of your 2018 total client membership renewed for the 2019 plan year?

	2019 Total Group Member Percentage Renewed
Actives and Early Retirees	<i>Integer.</i>

8.4 STAFFING

8.4.1 Confirm your understanding and agreement that ALL on-site staff will be subject to a background check.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Confirmed: [Unlimited] ,
- 2: Not confirmed: [Unlimited]

8.4.2 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 firms 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."

Unlimited.

8.5 MEMBER SERVICES

8.5.1 Confirm that you will provide a Member Services toll-free telephone line 24 hours a day, 7 days a week.

Single, Radio group.

- 1: Confirmed: [Unlimited] ,
- 2: Not confirmed: [Unlimited]

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

	Response	Comments
Actives and Early Retirees	<i>Single, Radio group.</i> 1: Voice mail, 2: No service, 3: Full service – 24/7, 4: Some extended hours for calls, 5: Other, please specify in comments	<i>500 words.</i> Nothing required

8.5.3 Confirm each of the following:

Member Services	Commercial Plan – Actives and Early Retirees
a. Bidders will operate a dedicated member services unit (solely for PEEHIP) with a toll-free dedicated member services telephone line (solely for PEEHIP) to answer questions from PEEHIP’s members.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed

Alabama PEEHIP Prescription Drug Plan RFP 2019

b. Bidders will have special telephone features for the hearing impaired.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed
c. Resources will be available to assist non-English speaking callers through a translation service.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed
d. All calls will be recorded and kept for 24 months and made available for PEEHIP's review upon request.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed
e. Member Service Representatives (MSR) will warm or soft transfer members to other service areas or vendors including PEEHIP, if necessary.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed
f. Members will easily be able to opt out of the Interactive Voice Response (IVR) to speak with a live MSR.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed

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

Unlimited.

8.5.5 For the Member Services call center(s) indicated above please fill out the following table for 2018:

Member Services	Actives and Early Retirees
Number of calls handled:	<i>10 words.</i>
Percent of calls handled by live representative:	<i>10 words.</i>
Percent of calls abandoned:	<i>10 words.</i>
Average speed of answer (live representatives only):	<i>10 words.</i>
Average wait time to speak to a pharmacist:	<i>10 words.</i>
Number of member service representatives:	<i>10 words.</i>
Number of member service pharmacists:	<i>10 words.</i>

Alabama PEEHIP Prescription Drug Plan RFP 2019

Number of supervisors, trainers, and management staff:	10 words.
Member service representative turnover percentage:	10 words.
Member service representative call average talk time:	10 words.
Percent of member calls recorded:	10 words.

8.5.6 Describe how MSR performance is measured, how often calls are monitored or reviewed for quality, and the process used to provide feedback and coaching.

1000 words.

8.5.7 Describe the criteria MSRs use to determine when to transfer a call to a pharmacist.

1000 words.

8.5.8 Can the MSRs access claims status online real-time?

Single, Radio group.

1: Yes,

2: No: [500 words]

8.5.9 Can MSRs make adjustments to claims during a call real-time?

Single, Radio group.

1: Yes,

2: No: [500 words]

8.5.10 Confirm that Bidder will allow PEEHIP to review and approve MSR notes that are to be used by the representatives in assisting members with questions and issues.

Single, Radio group.

1: Yes,

2: No: [500 words]

8.5.11 Confirm that Member Services will provide services for selecting and/or locating network pharmacies.

Single, Radio group.

1: Confirmed: [Unlimited] ,

2: Not confirmed: [Unlimited]

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

1000 words.

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

1000 words.

8.5.14 Describe the escalation process for urgent drug claim issues where claims are rejecting at the pharmacy and members need immediate assistance and resolution.

Unlimited.

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.5.15 Confirm that you will mail ID cards to newly enrolled Members within ten (10) business days of enrollment. 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 such as a name change.

Single, Radio group.

- 1: Confirmed: [Unlimited] ,
- 2: Not confirmed: [Unlimited]

8.5.16 Confirm that you will issue new member ID cards to all covered members, as required by PEEHIP, including when a member has a name change or the contract number on the ID card is changed for reasons such as a HIPAA breach, at your expense.

Single, Radio group.

- 1: Confirmed: [Unlimited] ,
- 2: Not confirmed: [Unlimited]

8.5.17 Do you use an outside vendor to print ID cards? If yes, what security measures do you have in place to prevent a breach?

1000 words.

8.5.18 If your organization has experienced a security breach, describe the breach and how your organization achieved resolution.

Unlimited.

8.5.19 Do you issue hard-copy network directories to all members or upon request?

Single, Radio group.

- 1: Yes, to all members at no additional charge,
- 2: Yes, to all members for an additional charge,
- 3: Yes, upon request at no additional charge,
- 4: Yes, upon request for an additional charge,
- 5: Other

8.5.20 Indicate whether your Member Website provides the following:

Member Website Capabilities	Commercial Plan – Actives and Early Retirees
Pharmacy directory and search capability	Yes/No.
Directions to pharmacy provided by Map Quest or other mapping/direction applications	Yes/No.
Ability to review enrollment status/changes	Yes/No.
Ability to review a history of prescriptions, including copayments	Yes/No.
Ability to see a summary of PEEHIP’s plan design	Yes/No.
Ability to print ID cards and request replacement cards	Yes/No.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Ability to contact member services online	Yes/No.
Information about diseases and conditions	Yes/No.
Contact information for PEEHIP, its other vendors, and links to their websites	Yes/No.
On-line access to forms	Yes/No.
Up to date PEEHIP-specific formularies with tier rankings	Yes/No.

8.5.21 Confirm that you will include PEEHIP's logo throughout your portal and that online tools can be customized, as requested by PEEHIP.

Single, Pull-down list.

- 1: Confirmed,
- 2: Not confirmed

8.5.22 Describe all internet and mobile application tools available to members. How often is the Internet directory updated?

Unlimited.

8.5.23 Do you provide a drug cost look-up tool on your member website that provides both the plan copay and full drug cost?

Unlimited.

8.5.24 Does your drug look-up tool on your member website capture retailer's U&C price? If not, would you be willing to develop this capability or provide a link to this information? Does your drug look-up tool on your member website show copay cost and plan cost for alternative drugs to any given drug that is searched?

Unlimited.

8.5.25 How many toll free numbers are available to PEEHIP and its members to handle claims or other member service issues?

Unlimited.

8.5.26 Will separate toll free numbers be required for the retail and specialty programs?

Single, Radio group.

- 1: Yes,
- 2: No

8.5.27 Describe your organization's member satisfaction surveys and provide the most recent results.

500 words.

8.6 BENEFIT ADMINISTRATION AND PLAN DESIGN

PEEHIP is requiring Bidders to replicate the current plan, in both the benefit design and in the administration of the custom formularies and clinical management programs, for the active members, early retirees and their

Alabama PEEHIP Prescription Drug Plan RFP 2019

dependents. PEEHIP must be notified of any variations from the current clinical and other programs. If no variations from the current programs are identified within your response, PEEHIP will assume the pharmacy benefit plan can be duplicated exactly. A summary of current pharmacy benefits is attached in Appendix B - PEEHIP_Member_Handbook 2018-2019.

8.6.1 Confirm you will replicate the current plan design and administration as it is administered by PEEHIP today. If not, indicate any deviations on the Bid Exceptions and Deviations form housed on the Proposal Tech site. If no variations are noted on this form, it will be assumed that your organization can administer the current plan exactly as it is currently managed.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed: [Unlimited]

8.6.2 Confirm that your retail network includes pharmacies that provide 90-day supply prescription for maintenance drugs.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed: [Unlimited]

8.6.3 What is the current number of retail pharmacies in your network?

Single, Radio group.

- 1: Yes,
- 2: No, please explain: [Unlimited]

8.6.4 Bidder must be willing to administer PEEHIP's custom formulary/PDL (provided in the Reference Documents section of the RFP) with no changes, and agrees that all pricing and guarantees must be based on PEEHIP's formulary.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.6.5 Bidder agrees to administer a Retail-90 program in accordance with PEEHIP's requirements. Under this program Eligible Members will be permitted to obtain a ninety (90) day supply of certain maintenance medications at select retail Participating Pharmacies that have signed up for this program, and the first fill for new medications through this program is for a 30 days supply. If an Eligible Member requests a ninety (90) day supply of a Covered Benefit from a Pharmacy that is not a Participating Pharmacy, the Claim will reject. PEEHIP's maintenance drug list shall be used for the Retail-90 Rx program. Changes to the maintenance drug list shall not incur an additional charge. Only PEEHIP has the authority to make changes to the maintenance drug list.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.6.6 Bidder will not modify any operational or clinical program or process during the term of this contract without the prior notification and approval of PEEHIP.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.6.7 Bidder agrees to maintain a system that will accept/store the appropriate eligibility information regarding coordination of benefits, electronically adjudicate claims as primary or secondary and report same to PEEHIP on a quarterly basis.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.6.8 Bidder agrees to store additional group information that is transmitted on the 834 file so that claims are processed correctly as primary or secondary (an 834 Reporting Mapping is included as an attachment for review).

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.6.9 Confirm that you will provide PEEHIP's Medical, FSA, Wellness and Prescription Drug Strategies vendors with monthly claims files for the purposes of patient care and utilization management and also to coordinate member out-of-pocket costs tracking and administration.

Single, Radio group.

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

8.6.10 Confirm that claims must be received by the PBM within 365 days of the incurred date to be eligible for payment.

	2018 Target	2018 Actual Results	Comments
Confirm that claims must be received by the administrator within 365 days of the incurred date to be eligible for payment.	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed, explain in comments	<i>Single, Radio group.</i> 1: Confirmed, 2: Not confirmed, explain in comments	<i>Unlimited.</i> Nothing required

8.6.11 Describe your process for handling exceptions (i.e., claims received after claims filing deadline).
1000 words.

8.6.12 Bidder will process paper claims submitted by those who used an out of network pharmacy. The claims should be reimbursed at the in-network rates less the applicable copayment. All applicable UM programs should be applied.

Single, Pull-down list.

- 1: Confirmed,
- 2: Not confirmed

8.6.13 Confirm Bidder has a list of non-essential medications PEEHIP can adopt, if desired.

Single, Pull-down list.

- 1: Confirmed,
- 2: Not confirmed

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.7 REPORTING TO PEEHIP

8.7.1 Bidder will be expected to provide robust reporting to PEEHIP monthly at no charge to PEEHIP. Provide samples of the Standard Reports that are INCLUDED in your quote. These samples should be uploaded in the Response Documents section of the RFP with your response. Please confirm that you have provided the requested documents.

Single, Pull-down list.

1: Confirmed and uploaded,

2: Not confirmed

8.7.2 Bidder must collect and report statistics and/or summaries on a monthly, quarterly and annual basis as specified by PEEHIP. The reports may be standardized reports provided by the Bidder. If the reports do not adequately meet PEEHIP requirements, Bidders agrees to customize the reports to PEEHIP's specifications as part of the base administrative fees with no additional cost to PEEHIP. PEEHIP's reporting requirements may change from time- to-time during the life of the contract.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

8.7.3 Bidder shall maintain records in such a manner that allow reporting of claims submitted by providers. No less than monthly, Bidder must provide PEEHIP with a series of management reports, no later than 10 business days following the last calendar day of each month. These reports will, at a minimum, provide a summary of activity and results from the previous month, year including at least the following:

- Demographic overview of utilization and dollars spent;
- Claim performance summary broken down by integrated, non-integrated and by network for each benefit plan tier;
- Claims summary broken down cost change over time (trends);
- Claims summary illustrating cost by member by plan;
- Utilization by maintenance medications, generic dispensing and formulary compliance;
- Utilization of top therapy classes, top drugs by cost and top drugs by claim volume;
- Specialty drugs by class, trends, cost, utilization and disease;
- Clinical programs for utilization management;
- Industry highlights, Bidder capability updates and plan administration recommendations.
- New drug reports – bi-weekly basis
- High Dollar reports – monthly basis
- Prior Authorization approval rates reports – monthly
- Drug Price Inflation reports - monthly

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

8.7.4 Confirm all routine reports identified shall be broken down as follows; future reporting break outs may also be requested by any other parameter for analysis.

- Employee
- Retiree<65
- Dependent of Employed Account
- Dependent < 65 on Retired Account
- COBRA

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.7.5 Confirm you will provide comprehensive onsite or web-based training for the online reporting tool as part of the base administrative fees with no additional cost to PEEHIP.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.7.6 Bidder must allow unlimited access to its point-of-sale system for all staff as designated by PEEHIP to view adjudication of claims, including real-time viewing of prior authorization status and documentation used in approval/denial of the PA, real-time viewing of submitted claims (denied and adjudicated) and various reference screens. The materials must be viewable and printable from the site by PEEHIP.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.7.7 Bidder must provide unlimited user IDs to access the web-enabled online reporting tools as part of the base administrative fees with no additional charge to PEEHIP.

Single, Radio group.

- 1: Yes,
- 2: No. Explanation: [Unlimited]

8.7.8 Confirm that your organization will provide claim line detail for ALL claims.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed [Unlimited]

8.7.9 Confirm that your organization will provide this data in a mutually agreed upon format by the 3rd business day of the month following the reporting month.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed [Unlimited]

8.7.10 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,
- 2: Not confirmed [Unlimited]

8.7.11 Confirm that you will provide a rebate reconciliation report (actual to guarantee) quarterly within 45 days of the quarter end and annually within 90 days after the end of each contract year.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed [Unlimited]

8.7.12 Please complete the following table:

	Actives and Early Retirees	Comments

Alabama PEEHIP Prescription Drug Plan RFP 2019

Confirm that PEEHIP will be provided sufficient information regarding the previous year’s renewals to audit them for accuracy and compare them to actual experience.	<i>Single, Pull-down list.</i> 1: Confirmed, 2: Not confirmed, please explain in comments	<i>Unlimited.</i> Nothing required
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8.7.13 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.

Single, Pull-down list.

- 1: Confirmed,
- 2: Not confirmed

8.8 CLINICAL MANAGEMENT PROGRAMS

8.8.1 For each program, PEEHIP requires you administer its clinical and other programs as described in the Member Handbook and as specified by PEEHIP management. Also, please explain how you administer these programs. If your program differs, please fully describe the differences here (not on the Exception appendices) and state why you believe your program is superior. Specify if any additional fees apply in your response below and in your response to the Price Proposal Worksheet.

The clinical and other programs include:

- Prior authorization (PA). PEEHIP requires stringent prior authorization criteria that is clinically appropriate and based on the manufacturer’s full prescribing information. PA requests are required to be submitted in writing and not via the telephone. Chart documentation is required. The following benchmark guidelines should be considered in the development of the PA criteria:
 - **Age** – Is the drug only FDA approved for certain age groups? (i.e., only adults, over 12, under 65, etc.)
 - **Physician specialty** – Should the use of this drug be reserved for certain physician specialists? (i.e., Hep C drugs should only be prescribed by specialists)
 - **Diagnosis** – only include FDA approved indications for acceptable diagnoses for use in the criteria.
 - **Measurable markers** – Are specific labs, genetic tests, tests in general used in the diagnosis of the specific condition the drug is treating? If so, those values with documentation should be required as part of the criteria. (i.e., hematocrit for anemia, right heart catheterization for PAH, etc.)
 - **Previous therapies** – Are there any drugs that should be taken first-line or before the use of the requested drug is considered appropriate? (i.e., methotrexate before a biologic for RA) Documentation should be required.
 - **Concomitant therapies** – Are there any drugs that should be taken in combination with the drug being requested? (i.e., methotrexate with Remicade)
 - **Duration of therapy** – when specific treatment durations or thresholds are outlined in the treatment guidelines or package labeling, they should be incorporated. (i.e., Hep C drugs indicated for 12 weeks)
- Step therapy. PEEHIP requires preferring the lowest net cost drugs such as generics over higher cost brand drugs.
- Quantity limits. PEEHIP requires FDA recommended quantity limits.
- Benefit maximums for certain categories

Alabama PEEHIP Prescription Drug Plan RFP 2019

- Maximum Out of Pocket Amounts in compliance with the ACA
- Exclusions
 - Erectile dysfunction drugs
 - Weight management drugs, drugs used for cosmetic purposes, over-the-counter drugs (OTC) except those mandated by ACA, medical foods, drugs administered by dentists, hospital administered drugs, physician administered drugs where the cost to PEEHIP is lower under the medical benefit, compounds containing bulk chemical powder drugs, and various drugs PEEHIP has identified for exclusion where the efficacy does not warrant the high cost and which there are cheaper therapeutic alternatives
 - Others as allowed under ACA

Unlimited.

8.8.2 Confirm that Bidder will administer/enforce each of the programs above based on PEEHIP's protocols.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [Unlimited]

8.8.3 Describe your drug utilization review (DUR) process and indicate which point-of-sale edits can be overwritten and which are "hard" rejects.

Unlimited.

8.8.4 Provide a sample DUR report you produce and make available to clients.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.5 Describe your policies for lost medication, vacation supplies, and overseas supplies for prescription early refills and confirm that you can administer PEEHIP's current refill too soon policies

1000 words.

8.8.6 What was your overall average DUR savings as a percentage of plan cost in 2018?

Percent.

8.8.7 Briefly summarize the DUR edits that detect fraud and/or abuse.

Unlimited.

8.8.8 In addition to point-of-sale edits, describe any other tools or programs that are available to detect, prevent, and resolve fraud and/or abuse? Indicate whether such programs are optional and whether they entail a separate fee, and include in the Price Proposal Worksheet. Also, provide a complete description and samples of any documents used.

1000 words.

8.8.9 List the specific network management processes currently in place to avoid fraud and abuse.

Unlimited.

8.8.10 Do you require a DEA or other identifier to be indicated to fill a controlled substance drug? If so, how is the requirement enforced?

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.8.11 Provide a listing of all therapeutic categories (non-specialty and specialty) for which your organization currently maintains and recommends prior authorization. Please provide in Excel.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.12 Provide a listing of all therapeutic categories (non-specialty and specialty) for which your organization currently maintains and recommends step therapy. Please include both the preferred and targeted drugs within each category and provide in Excel.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.13 Provide a listing of all drugs for which your organization currently maintains and recommends quantity level and quantity per copay limits and a listing of all drugs preferred by your organization. Please include the limit amount for each drug and provide in Excel.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.14 Provide a sample client management report that details clinical rule activity and savings.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.15 Describe concisely the prior authorization and step therapy process including all steps required by the participant and indicate if any part of the process is performed by a sub-contractor or third party.

1000 words.

8.8.16 Who are the representatives on your pharmacy and therapeutics (P&T) Committee? What are their affiliations? Do these members accept grant money from drug manufacturers?

1000 words.

8.8.17 Does your P&T therapeutics committee approve all prior authorization and step therapy rules? Do you require chart notes documentation of diagnosis, applicable lab tests, and adequate trial/failure of first line therapies?

1000 words.

8.8.18 What are the results of these programs? Do you track savings and the return on investment of these programs? For your book-of-business, what is the PA approval rate, average amount paid per prescription, and the ROI by therapeutic class for 2018 and by specialty and non-specialty drugs? What percentage of the drugs on your specialty drug list require prior authorization?

Percent.

8.8.19 For your book-of-business, what is the % savings and ROI in 2017/2018 for step therapy?

1000 words.

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.8.20 For the two questions above, please concisely explain the methodology used to determine savings including the period of time used to project savings.

1000 words.

8.8.21 Do you support current clients with customized prior authorization and/or step therapy rules? If so, briefly describe the process and circumstances for such support.

1000 words.

8.8.22 Indicate your willingness to provide proactive and expert support to maintain custom clinical rules (prior authorization, step therapy, and quantity limits) to PEEHIP and briefly describe such support.

1000 words.

8.8.23 How do manufacturer rebate agreements impact the establishment of prior authorization and step therapy rules?

1000 words.

8.8.24 Do you administer generic only clinical programs by drug category (i.e., PPI's, Statins, etc.)?

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.8.25 Concisely describe any "smart PA" rule capabilities you utilize e.g. claim look-back to expedite the prior authorization or step therapy process and to reduce member disruption.

1000 words.

8.8.26 Are you able to send multiple prior authorization requests for different drugs and different patients in a single communication? Please describe.

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.8.27 What is the communication process to participants and providers in the case of a claim denial for prior authorization?

Unlimited.

8.8.28 Provide a sample of your client clinical management performance report.

Single, Pull-down list.

1: Attached,

2: Not provided

8.8.29 Do you monitor individual physician prescribing patterns? If so, what action is taken with physicians who have a high degree of non-compliance, to improve their compliance?

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.8.30 Provide a copy of any physician score card or other reporting that is provided to clients.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

8.9 PRESCRIPTION REIMBURSEMENT ISSUES

8.9.1 What is your proposed source for AWP data?

500 words.

8.9.2 How often are AWP prices updated in your adjudication system?

500 words.

8.9.3 What percent of your network pharmacy contracts include the “lesser of retail price, MAC price, or discounted price” provision?

Percent.

8.9.4 How do you guarantee that PEEHIP always receives this lowest price? What procedures are established to ensure that the pharmacy is in compliance with this provision?

1000 words.

8.9.5 Describe the timing and process you use to reconcile actual and guaranteed pricing terms and indicate when a true-up payment will be made, if necessary, in relation to the end of each contract year.

Unlimited.

8.9.6 Explain in detail how network pharmacies' U&C prices are captured and reported.

1000 words.

8.9.7 Do you maintain multiple contracts with individual pharmacies at varying reimbursement rates? If yes, explain.

Single, Radio group.

- 1: Yes, explain: [Unlimited] ,
- 2: No

8.9.8 What percentage of generic drugs are on your MAC list (measured as percent of all generic GCNs)?

Percent.

8.9.9 Confirm that retailers provide the lower of the discounted plan cost plus dispensing fee, member cost, U&C, or retail price for plan adjudication.

Single, Radio group.

- 1: Confirmed,
- 2: Not confirmed, explain: [Unlimited]

8.9.10 Define your electronic process for determining a product's brand or generic status for retail claims using First DataBank and/or Medi-Span definitions. Specify your pricing source used.

Unlimited.

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.9.11 Is it possible for a retail pharmacy to submit NDC numbers for adjudication that contain AWP prices designed to maximize their discounted ingredient costs? If not, please indicate why.

Single, Radio group.

1: Yes,

2: No, explain: [Unlimited]

8.9.12 How do you ensure that submitted NDCs at retail are indicative of pharmacy drug purchasing patterns?

Unlimited.

8.9.13 Does your organization share in any financial remuneration that retail pharmacies receive from drug manufacturers or other sources?

Single, Radio group.

1: Yes, explain:,

2: No

8.9.14 Specify whether your claims software system can readily generate a detailed listing of all of the various ingredients that are included in multi-ingredient compound claims and confirm multi-ingredient compounds can take a specified cost-share.

Single, Radio group.

1: Yes,

2: No, explain: [Unlimited]

8.9.15 Describe what procedures or management tools your organization has in-place to manage the cost of compound drugs and to prevent overcharging of plan sponsors.

1000 words.

8.10 SPECIALTY PHARMACY PROGRAM

8.10.1 PEEHIP expects each participating specialty pharmacy to strictly meet financial, service, and quality standards determined and maintained by the PBM. Please describe such standards and how your organization will ensure that only qualified providers are included.

1000 words.

8.10.2 Describe any existing specialty pharmacy networks your organization currently maintains.

1000 words.

8.10.3 Describe how your organization notifies clients of the pricing terms for new specialty drugs including how far in advance such notice is provided.

1000 words.

8.10.4 Confirm that you are able to administer PEEHIP's current customized Specialty formulary. PEEHIP's current formulary is provided in Appendix C.

Unlimited.

Attached Document(s): [Appendix C -Formulary 1Q19.pdf](#)

8.10.5 Are your proposed guarantees for your retail program contingent upon PEEHIP's purchase of your specialty drug program?

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes,

2: No

8.10.6 Does your firm utilize courier services for specialty product delivery? If so, detail these services and procedures and detail how courier service vehicles maintain temperature control.

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.10.7 Do you currently have a specialty/biotech drug P&T committee? If yes, explain the role, function, and structure and how it differs from your traditional P&T Committee.

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.10.8 Confirm you will provide PEEHIP with PA guidelines upon request.

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.10.9 Confirm ability and willingness to develop and manage stringent qualification criteria for a specialty pharmacy network.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [Unlimited]

8.10.10 Confirm that all specialty drugs will be limited to no more than thirty (30) days' supply.

Single, Radio group.

1: Confirmed,

2: Not confirmed, explain: [Unlimited]

8.10.11 Do you limit certain specialty drugs to less than thirty (30) days' supply for a patient's initial prescription? If yes, please indicate which drugs and the days' supply limit.

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.10.12 Describe your quantity limit rules for specialty drugs and include a list of the quantity limits by drug.

1000 words.

8.10.13 Provide the customer and Member Service operation hours of your specialty pharmacy program.

1000 words.

8.10.14 Provide a concise description of your Member Service pharmacist support for specialty drugs, including how many pharmacists provide member support, the hours of their availability and any specialized expertise they hold.

1000 words.

Alabama PEEHIP Prescription Drug Plan RFP 2019

8.10.15 Provide a concise description of the member support services your organization provides to members who utilize oncology specialty drugs.

Unlimited.

8.10.16 Does your organization receive medical claim records from clients' medical carriers, and if so, how is this information utilized?

Single, Radio group.

1: Yes, explain: [Unlimited] ,

2: No

8.10.17 Provide a brief recommendation of how you would propose to collaborate with PEEHIP's medical carriers to optimize patient care and utilization of specialty drugs.

1000 words.

8.10.18 PEEHIP requires that specialty drug pricing (discount and dispensing fee) provided through the specialty pharmacy is equal to or better than the best available retail price. Please describe how your organization will meet this requirement and provide validating reporting.

1000 words.

8.11 FINANCE AND BANKING

8.11.1 Please provide samples of a detailed invoice.

Single, Radio group.

1: Provided,

2: Not provided, please explain: [500 words]

8.11.2 Confirm that you are able to accept both check or an EFT payment formats.

Single, Radio group.

1: Confirmed,

2: Not confirmed, please explain: [500 words]

8.11.3 Full plan accounting will be furnished within ninety (90) days of the end of each contract year.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

8.11.4 Bidder agrees to provide PEEHIP with a copy of the billing for the situations above along with a spreadsheet detail so that records can be updated in PEEHIP's invoicing system and appropriate members can be placed on claim hold. PEEHIP requires the Administrator to exercise a Claim Hold process. Claims are to be held (not processed) when certain scenarios arise, as specified by PEEHIP in the 834 file. Please confirm you will be able to administer the Claim Hold process in a timely manner, including the hold and release of the claim, as PEEHIP requires.

Single, Radio group.

1: Yes,

2: No. Explanation: [Unlimited]

8.11.5 Confirm that you will accept fiduciary responsibility for claim processing at no additional charge.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Radio group.

1: Yes. Additional cost: [500 words] ,

2: No

9 PERFORMANCE GUARANTEES

9.1 PEEHIP is interested in negotiating standards of performance results with the selected Bidder to encourage the Bidder to provide superior performance. Bidder's failure to meet the performance guarantee(s) would result in financial penalties. Please review and complete Attachment 2 - Performance Guarantees. Higher assessments than required are encouraged.

Single, Pull-down list.

1: Attached,

2: Not provided

9.2 Confirm your agreement with the proposed service level targets and associated guarantees for the prescription drug program.

Single, Radio group.

1: Confirmed,

2: Not confirmed

10 BID EXCEPTIONS AND DEVIATIONS

10.1 If your bid does not fully comply with the specifications in this RFP, please upload and complete the Bid Exceptions and Deviations Document for which you will list exceptions and/or deviations.

Single, Pull-down list.

1: Bid does not fully comply - Document Attached,

2: Bid does fully comply - Document Not Attached

Attached Document(s): [Attachment 3 - Bid Exceptions & Deviations.doc](#)

11 RESPONSE DOCUMENTS

11.1 PEEHIP Price Proposal Worksheets - Attachment 1

Single, Pull-down list.

1: Attached,

2: Not provided

Attached Document(s): [Attachment 1 - Price Proposal Worksheet 1.22.19.xls](#)

11.2 Performance Guarantees - Attachment 2

Single, Pull-down list.

1: Attached,

2: Not provided

Attached Document(s): [Attachment 2- PEEHIP Performance Guarantees 1.22.19.xlsx](#)

11.3 Bid Exceptions and Deviations form - Attachment 3

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

Attached Document(s): [Attachment 3 - Bid Exceptions & Deviations.doc](#)

12 REFERENCE DOCUMENTS

12.1 Note: The Reference documents will only be provided to Proposers 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.

- Appendix A – 834 Reporting Mapping
- Appendix B – PEEHIP Member Handbook_2018-2019
- Appendix C – Custom Formulary
- Census – Appendix E (provided upon receipt of fully executed NDA)
- Historical Claims and Enrollment/Membership – Appendix F (provided upon receipt of fully executed NDA)

Attached Document(s): [Appendix B - PEEHIP Member Handbook 2018-2019.pdf](#), [Appendix A - 834 Reporting Mapping.xlsx](#), [Appendix C -Formulary 1Q19.pdf](#)

13 REQUIRED DOCUMENTS

13.1 Sample Administrative Services Agreement.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.2 Copy of your most recently completed HIPAA Assessment.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.3 Copy of your Information Security Policy and Procedures. Note: These policies must apply to the systems, processes and personnel directly related to the work included in this contract and not for other subcontractor's or lines of business.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.4 Proof of Errors and Omissions (E&O) Insurance.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

Alabama PEEHIP Prescription Drug Plan RFP 2019

13.5 Operational and System Redundancy Procedures. Note: These policies must apply to the systems, processes and personnel directly related to the work included in this contract and not for other subcontractor's or lines of business.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.6 Disaster Recovery Procedures. Note: These policies must apply to the systems, processes and personnel directly related to the work included in this contract and not for other subcontractor's or lines of business.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.7 Account Team Organization Charts.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.8 Account team resumes.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.9 Annual Score Card samples.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.10 Sample claim forms.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.11 List of standard reports, including description and frequency.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.12 Sample of your client clinical management performance report.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.13 Any physician scorecard or other reporting that is provided to clients.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.14 A listing of all specialty and non-specialty therapeutic categories for which your organization currently maintains and recommends prior authorization.

Alabama PEEHIP Prescription Drug Plan RFP 2019

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.15 A listing of all specialty and non-specialty therapeutic categories for which your organization currently maintains and recommends step therapy.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.16 A listing of all drugs for which your organization currently maintains and recommends quantity level and quantity per copay limits and a listing of all drugs preferred by your organization.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.17 Sample client management report that details clinical rule activity and savings.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.18 Sample monthly invoices.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.19 Sample Implementation Plan and time-table.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided

13.20 Sample communications materials.

Single, Pull-down list.

- 1: Attached,
- 2: Not provided