

**HIV Medication Dispensing RFP**  
**2021-OHPT-001**  
**Vendor Question Response 1**

**Questions:**

1. Will the IDPH accept proposals from pharmacy providers without PBM services?
  - **IDPH Response:** No, the Department requires a vendor with PBM services. The Department is seeking a single vendor that demonstrates operational capacity to manage a mail-order pharmacy in addition to a PBM that can manage a statewide network of pharmacies. PBM functionality is a one of the mandatory elements which will be evaluated during the review process.
  
2. Does a pharmacy chain qualify as an offeror as they would be able to sub-contract the pharmacy benefit manager aspects as stated in the RFP?
  - **IDPH Response:** Yes, a pharmacy chain would qualify as an offeror if all aspects of the RFP are addressed.
  
3. Can IDPH please provide all bidders with the current contracted dispensing fee and related financials?
  - **IDPH Response:** A bidder is welcome to submit a FOIA request for the current contract. Please see the following link <https://www.dph.illinois.gov/foia> for the FOIA process.”
  
4. Are there any specific services or aspects of the current vendor’s program IDPH would like to see improved?
  - **IDPH Response:** The current contract is not relevant as this RFP is requesting new services.
  
5. A.8 - Performance Bond – Please confirm that a performance bond will not be required for this contract. If such bond is required, please provide the required dollar value.
  - **IDPH Response:** No, the RFP does not require a performance bond.
  
6. A.14 - The State will disclose the successful offeror’s price. Please clarify your intent with ‘price’ disclosure – is that the total value of the contract only, or all pricing details?
  - **IDPH Response:** The estimated contract award value will be included in the award notice.
  
7. D.1 - How is a single dispensing pharmacy contractor defined?
  - **IDPH Response:** The Department defines a single dispensing pharmacy contractor as a single vendor that has the functionality to provide and manage

both a centralized mail-order contract pharmacy and provide statewide network of dispensing pharmacies for the Illinois HIV/AIDS Section and Ryan White Part B AIDS Drug Assistance Program.

8. D.1 - Does the entity that is providing the pharmacy benefit management services also have to be a licensed pharmacy? Can a licensed pharmacy submit a proposal and use the services of a pharmacy benefit manager to provide services?

- **IDPH Response:** Disregard D.1 Goal in the published RFP and replace it in its entirety with the following:

D.1 GOAL: The Illinois Department of Public Health is seeking to establish a contract for the purpose of acquiring the services of a single dispensing pharmacy contractor, under the guidelines provided in the Veteran's Health Care Act of 1992, 42 U.S.C.A § 256b. The Agency is utilizing this form of agreement to access eligibility for Public Health Service Pricing (PHS) under the Veteran's Health Care Act of 1992, 42 U.S.C.A. § 256(a)(4)(C) as a "covered entity"; as well as pharmacy benefit management entity to coordinate a statewide network of pharmacies. This entitles ADAP to prices no higher than those calculated under the Veteran's Health Care Act of 1992, 42 U.S.C.A § 256b(a)(1), which is based on the rebate required under the Medicaid Act, at U.S.C.A § 1396r-8(c)(1) and the "best price" definition at 42 U.S.C.A § 1396r-8(c)(1)(C). The Agency seeks to solicit Offerors that are a licensed pharmacy in good standing with the appropriate State Licensing Agency or an entity that can manage a network of licensed pharmacies in good standing with the appropriate State Licensing Agency and provide both PBM and network pharmacy services. The Offeror must also be a licensed Illinois Medicaid provider with the Illinois Department of Healthcare and Family Services or be able to manage a network of pharmacies that are licensed Illinois Medicaid providers. An Offeror that is not a licensed pharmacy or able to be a licensed Medicaid provider must provide an attestation of these service provision with an entity with similar scope and size. An Offeror that meets these requirements will enable the Agency to select the most qualified vendor to provide pharmacy and pharmacy-related services, including pharmacy benefit management services for Illinois' AIDS Drug Assistance Program (ADAP) and other dispensing programs within IDPH's HIV Section Programs.

- A licensed pharmacy may submit a proposal that uses a pharmacy benefit manager to provide services. It is the responsibility of the Offeror to demonstrate its ability to manage licensed pharmacies or be a licensed pharmacy able to provide pharmacy benefit management services.

9. D.2.1.3 - Mail Service option and Statewide Network – Can you please confirm that this contract is being awarded to a single vendor exclusively for all services in scope?

- **IDPH Response:** Yes, the Department is seeking a single vendor to provide both pharmacy dispensing options outlined in the RFP.

10. D.2.1.3 – Statewide Network – Can a statewide network of retail pharmacies consist of a single pharmacy chain/vendor with multiple locations throughout the State?
- **IDPH Response:** Yes, the statewide network of pharmacies can consist of a single pharmacy chain/vendor with multiple locations across the State of Illinois.
11. D.2.1.3 - Will the Agency allow for mail order and retail pharmacy 340B program activity to be combined as one distribution system?
- **IDPH Response:** Yes, the Agency would allow for one distribution system.
12. D.2.1.3 - How many prescriptions per year or per month are currently being dispensed via mail order?
- **IDPH Response:** Currently the Program dispenses 70,000 prescriptions per month/840,000 annually for the mail order area of the current contract.
13. D.2.2.2 - What is the Agency policy on the process of differentiating HIV treatment vs HIV prevention?
- **IDPH Response:** The Department requires separate billing/invoicing for the dispensing of HIV treatment medications and HIV prevention dispensing for PrEP related medications. Currently, the Department's daily enrollment file distinguishes dispenses for each program.
14. D.2.2.4 - Confirm that the Agency does not consider a transaction as 340B eligible at the contract pharmacy when commercial or Medicare insurance is the primary payer and the Agency is the secondary payer.
- **IDPH Response:** The Department confirms its does not consider a transaction at the contract pharmacy as a 340B eligible when the Department is functioning as the secondary/tertiary payer source. The Department reserve the exclusive rights to all available 340B partial pay rebates from medication dispensed by the mail-order pharmacy arm of the contract and ADAP is the secondary payer source as stated in D.2.2.4 of the RFP.
15. D.2.10 - Confirm that the Agency does consider a network pharmacy under this arrangement as a 340B contract pharmacy for the entity (IL ADAP).
- **IDPH Response:** The Department confirms that the Agency does consider a network pharmacy as a 340B contract pharmacy for IL ADAP only as outlined in Section D.2.10.
16. D.2.10 - Confirm that the Agency does not allow transactions that are covered by IL ADAP as either a primary or secondary payer to be considered as 340B eligible for any other entity.
- **IDPH Response:** See response to questions 14.

17. D.2.13 - Will the Agency allow for the mail order option to be direct-to-home delivery shipped from retail pharmacy locations?
- **IDPH Response:** Yes, the Department will allow the mail order option to dispense direct-to-home delivery from retail pharmacy locations.
18. D.2.14 – Wholesaler - D.2.14 - Who is the State-approved wholesaler?
- **IDPH Response:** The current wholesaler for the State of Illinois is Cardinal Health.
19. D.2.14 - Who is the State Master contract approved wholesale vendor?
- **IDPH Response:** The current wholesaler for the State of Illinois is Cardinal Health.
20. D.2.16.4 - How many refills per year are shipped outside of Illinois?
- **IDPH Response:** An average of 100 refills per year are shipped out of Illinois.
21. D.2.16.7 - How many expedited orders per year are being shipped?
- **IDPH Response:** Expedited orders occur weekly and average approximately 1,000 per year.
22. D.2.16.10 - How many bubble/blister pack shipments are requested from prescribers every month or year?
- **IDPH Response:** During the last contract year, no bubble/blister packages were requested; however, the Offeror must have the ability to meet this requirement if needed.
23. D.2.17 - What is the expectation of the State when it comes to payments (i.e. Is it only based on a Dispense/transaction Fee or is a replenishment program be expected)? Is this regardless of if the drug is dispensed from retail or specialty mail?
- **IDPH Response:** The Department payment structure includes transactional dispense fee payments to vendor as well as the reimbursement for insurance deductible and copayment costs that are listed in the Illinois HIV Medication Dispensing Fee Structure.
24. D.2.17 - Will the Agency allow for mail order and retail pharmacy 340B program activity to be combined as a single virtual inventory model?
- **IDPH Response:** Yes, the Department will consider a combined single virtual inventory model.
25. D.2.19 - Can a mail-service and the network pharmacy satisfy the business hour requirements with select locations and not have the same hours of operations at all locations?
- **IDPH Response:** Yes, the Department will consider an Offeror using the mail order site and select statewide pharmacies in the network to meet the business hour requirement. The Offeror will need to be clear in their response how they

intend to meet requirement in the RFP. In addition, the Offeror must address how access to prescription pickup are meeting reasonable pharmacy hours to accommodate client with varying work schedules.

26. D.3.3. - Is attestation of compliance with Business Continuity Plan requirements sufficient?

- **IDPH Response:** No, the Business Continuity Plan must be submitted to the Agency within the required time.

27. D.4.1 - Pharmacy Licensure - requires the offeror to be a licensed pharmacy in good standing with the appropriate State Licensing Agency and must be a licensed Medicaid provider with the IL Department of Healthcare and Family Service. However, the scope of the RFP is also looking for a PBM for these services. Would the scenario change because of the PBM status (the PBM itself is not a licensed pharmacy, and the pharmacies proposed would all be licensed)?

- **IDPH Response:** Disregard Section D.4.1 in published RFP and replace it in its entirety with the following:

D.4.1. Offeror must be a licensed pharmacy in good standing with the appropriate State Licensing Agency or an entity that can manage a network of licensed pharmacies in good standing with the appropriate State Licensing Agency and provide both PBM and network pharmacy services. The Offeror must also be a licensed Illinois Medicaid provider with the Illinois Department of Healthcare and Family Services or be able to manage a network of pharmacies that are licensed Illinois Medicaid providers. An Offeror that is not a licensed pharmacy or able to be a licensed Medicaid provider must provide an attestation of these service provision with an entity with similar scope and size.

- A PBM on its own does not need to be a licensed pharmacy within the State of Illinois, but must demonstrate its ability to build, manage, and oversee a network of pharmacies which are licensed within the State of Illinois. The Offeror should clearly articulate in the RFP how it will ensure its dispensing networks are lawfully able to dispense in the State of Illinois.

28. D.4.1-4.2 - Do these requirements limit the bidding to PBM owned pharmacies?

- **IDPH Response:** No, the requirements do not limit the bidding to PBM-owned pharmacies. The requirements do limit the bidding to entities that meet the specifications in Section D.4.1 and D.4.2. See the response to question 27 for a revised Section D.4.1.

- Disregard Section D.4.2 in the published RFP and replace in its entirety with the following:

D.4.2. Offeror must have five (5) years' experience in pharmacy benefits management or prescription drug point of sale processing and working with a large pharmacy network, including pharmacies which have customers with multiple payment sources.

29. D.4.4.5 – Pharmacist Licensure - Requires all pharmacists to be licensed by, and in good standing with, the IL Pharmacy Board. This would be true for all in state pharmacies. Does this requirement apply to mail order pharmacy staff outside of IL? If a mail pharmacy is licensed to dispense out of state to IL, please confirm all staff can be licensed in the state where that pharmacy resides.

- **IDPH Response:** Disregard Section D.4.4.5 in published RFP and replace it in its entirety with the following:

**D.4.4.5 Pharmacists/Pharmacy Technicians:** The Offeror must have an adequate number of licensed registered pharmacists and trained pharmacy technicians to support the workload and deliverables of the contract. All pharmacists must be licensed by, and in good standing with, the Illinois Pharmacy Board, or the appropriate State Agency.

30. D.8.1 - There is a requirement that we perform all services within USA, what is the definition of services?

- **IDPH Response:** Services includes all work requirements to be performed by the vendor or subcontractors if applicable in the RFP and the resulting contract. Services must be performed in the United States per Section D.8.1.

31. D.8.1 - Is offshore work permitted by the State, as long as it is disclosed in the proposal submission?

- **IDPH Response:** No, all work must be in the United States.

32. F.1.1 – Term of Contract – With the contract award date at July 1, 2021, please provide an effective date of the contract. An implementation period would be needed of 90 days post award and contract execution.

- **IDPH Response:** The effective date of the contract will be the date of the last signature execution by the State. Specifics of implementation will be determined with the selected vendor.

33. F.1 - 1.3/1.4 – Termination provisions - We do not see a vendor termination without cause in the contract. Where does the state stand on this?

- **IDPH Response:** The published document is the RFP, not the contract. The contract will be reviewed with the selected vendor. If Offeror has concerns, the Offeror is welcome to complete Section G Exceptions to Solicitation and Contract Terms and Conditions.

34. F.2-2.6 – Invoicing – Can the State please provide a response on expected turnaround time for invoice payments to the vendor?

- **IDPH Response:** The expected turn-around time is currently 60 days for invoice payments. The turn-around time period is at the discretion of the Comptroller and subject to change.
35. H.1.8 and 1.18 – Clinician/Medical Provider/Prescriber and Resident – Both items make reference to an individual licensed and living in North Carolina. Can you please clarify if these items regarding location?
- **IDPH Response:** Please disregard original published H.1.8 and replace it in its entirety with the following:
    - **H.1.8 Clinician/Medical Provider/Prescriber:** a physician, physician’s assistant, nurse practitioner, or other physician extender licensed in Illinois to prescribe medications that are on the Program’s formulary to a client.
  - Please disregard original published H.1.18 and replace it in its entirety with the following:
    - **H.1.18 Resident:** an individual that currently lives in Illinois and expects to remain for the immediate and foreseeable future.
36. Attachment 1 - Prescribing Guidelines (p. 58) – Can the State please provide detail and a definition regarding days’ supply for the drugs in scope?
- **IDPH Response:** The Department does not see this terminology on the Prescribing Guidelines on page 58.
37. When will the State will provide eligibility files, and does the state intend to audit claims? If so, please provide detail surrounding any requirements tied to these topics.
- **IDPH Response:** The Department will provide eligibility files daily and will audit claims monthly and provide any dispensing disputes to the vendor 30 days following billing/invoicing to the Department. The successful vendor will work with the Department’s contracted Data System Provider, Groupware Technology Incorporated, to develop the claims audit exchanges in a secure transmission virtual exchange.
38. Business Associate Agreement - What is the reasoning for the BAA?
- **IDPH Response:** The ADAP Program is a HIPAA covered program and therefore the BAA is a required document.
39. Business Associate Agreement - Is the BAA a requirement for Pharmacy Providers with PBM services?
- **IDPH Response:** See response to question 38.