



MARTIN O'MALLEY
Governor

ANTHONY BROWN
Lieutenant Governor

T. ELOISE FOSTER
Secretary

DAVID C. ROMANS
Deputy Secretary

QUESTIONS AND RESPONSES # 3
Project No. F10B0400006
Pharmacy Benefits Plan Management Services and Pharmacy Purchasing Pool
Management
February 17, 2010

Ladies/Gentlemen:

This List of Questions and Responses #3, questions #84 through #89, is being issued to clarify certain information contained in the above named RFP. The statements and interpretations of contract requirements, which are stated in the following questions from potential Offerors, are not binding on the State, unless the State expressly amends the RFP. Nothing in the State's responses to these questions is to be construed as agreement to or acceptance by the State of any statement or interpretation on the part of the vendor asking the question as to what the contract does or does not require.

84. *If we propose a deviation and the State does not accept it, will we be allowed to replace the pricing submitted in the original proposal to account for denied deviation, or would we need to withdraw our proposal if we cannot agree to proceed with the submitted pricing without the deviation?*

RESPONSE: Pricing changes are allowed through the BAFO process only. COMAR 21.05.03.03D. Per RFP §1.16, proposals submitted in response to this RFP are irrevocable for 180 days following the later of the closing date of proposals or of Best and Final Offers (BAFOs), if requested. Offerors are strongly encouraged to submit the most competitive proposal that meets the State's requirements as outlined in the RFP and attachments.

85. *RFP §3.2 Objectives states: "Maximize cost-savings for the State and Maryland Rx Program participants by contracting on a fixed fee basis, with product discounts and incentives accruing directly to the State and Purchasing Pool Participants."*

Can you please provide further clarification on what is meant by "contracting on a fixed fee basis?"

RESPONSE: See RFP §1.4 and Attachment K. The Contractor will be paid a firm, fixed per unit administrative fee for its services. These fixed fees will be on the basis outlined in Attachment K (in particular, see K-1: Financial Proposal Instructions).

~Effective Resource Management~

45 Calvert Street • Annapolis, MD 21401-1907

Tel: (410) 260-7041 • Fax: (410) 974-3274 • Toll Free: 1 (800) 705-3493 • TTY Users: call via Maryland Relay

<http://www.dbm.maryland.gov>

86. *RFP §3.2 Objectives states: As the Maryland Rx Program grows, the State expects to see its own self-funded plan become more cost effective. As the pharmacy and prescription benefits purchasing pool grows, the Department expects to be advantaged by the increased aggregate number of total lives and the increased aggregate drug purchases to obtain still lower unit costs for the products and services obtained by this RFP and higher rebates and discounts. The State expects the successful Offeror to provide pricing that reflects the economies of scale that the growing purchasing pool produces.*

The financial proposal is requesting pricing for under 149K lives and over 149K lives; is the State requesting additional pricing options for increased growth?

RESPONSE: No, the State is not requesting additional pricing options for increased growth. Please complete the tables in Attachment K-4: Financial Proposal as described in the RFP. Table 1 will apply when enrollment is less than 150,000 Members; and Table 2 will apply when enrollment is at least 150,000 Members. The enrollment tiers for the pricing guarantee changes in Attachment K-4 are not based on covered lives. Per RFP §1.2, Member is defined as an employee, former employee or retiree (including Satellite and Direct Pay) who are enrolled in the State of Maryland Benefits Program, pursuant to COMAR 17.04.13.03A, but does not include the member's dependents.

87. *The response to Question # 79 in Q&A # 2 requires further confirmation. The response states that the percentage of retail scripts under 35 days supply is 66.3% and the percentage of retail scripts between 35 days and 84 days supply is 6.05%; this implies that the percentage of retail scripts 84 days supply or higher is 27.65%. Based on our experience this seems slightly high, please confirm.*

RESPONSE: The Response to Question # 79 in Q&A # 2 is confirmed. These data exclude specialty drug prescriptions. Please note that the prescription drug benefits include a copay schedule for 1-45 days supply and 46-90 days supply.

88. *Regarding Attachments J-9 and J-10 (Pharmacy Disruption by Days of Therapy and Total Paid Amount, respectively) of the response document for the State of Maryland RFP. These sections are protected in such a way that we are only permitted to enter information for 50 lines of NABP numbers. Based on the data we were provided, however, we need to enter information for more than 50 NABP numbers. Given this, how would you suggest we proceed with responding to these sections of the RFP? Should we provide information for 50 NABP numbers in the response document and the rest as an attachment? Any direction you could provide would be greatly appreciated.*

RESPONSE: Please refer to Amendment #4 for an updated version of Attachment J: Technical Proposal. Attachments J-9 and J-10 have been expanded to allow for 100 lines of data.

89. *We have discovered an issue with Attachment K. On tab K-8, the question asks whether our retail MAC list is the same as the mail MAC list, and the drop down menu offers a choice of either yes or no. However, when we try to select the response, we get the message that the sheet is protected.*

RESPONSE: Please refer to Amendment #4 for an updated version of Attachment K: Financial Proposal. The cell containing the drop down menu has been unlocked.

Please remember that proposals are due on February 26, 2010, no later than 2:00 p.m. (per Amendment # 2). If there are additional questions concerning this solicitation, please contact me via e-mail at ggnall@dbm.state.md.us or by phone at (410) 260-7338 as soon as possible.

Date Issued: 02/17/2010

By: Gabriel Gnall
Procurement Officer