

Health Action Council

Request for Proposal 2020.03.19
for Pharmacy Benefit
Management Services

March 19, 2020

The Cooperative Council of
Governments



I. General Information

A. Climate Setter

Excelsior Solutions is assisting Health Action Council (“**HAC**”) in the evaluation of its prescription drug benefit management services that are offered to HAC’s participating member plan sponsors. This request for proposal (“**RFP**”) is being used jointly with The Cooperative Council of Governments (“**CCOG**”) on behalf of Sourcing Alliance to establish an already-procured contract vehicle for prescription drug benefit management services available to public sector entities nationwide, as detailed herein.

Health Action Council was founded as a not-for-profit 501(c)(6) corporation in 1983 and has grown and transformed itself into a proactive coalition representing more than 2,700,000 covered lives and over 200 employers across the country (the “**HAC Members**”). HAC’s vision is healthy communities where business thrives. HAC is an employer-led independent organization that is led by a Board of Directors that consists entirely of purchasers. HAC provides value to members through education, health improvement, decision support and group purchasing activities.

As a group purchasing organization, HAC negotiates purchasing arrangements on behalf of HAC Members, focusing on successful group purchasing in medical, prescription drug, and other lines of coverage. Through this RFP, HAC is soliciting proposals from qualified bidders to provide prescription drug benefit management services to participating HAC members for a three-year period from January 1, 2022 through December 31, 2024.

HAC continuously provides value for its Members participating in the pharmacy benefits program (“**Participating Groups**”). As a result, HAC has successfully grown the program (“**Rx Program**” or “**Program**”) to over 1,000,000 covered lives and 135 groups Participating Groups nationwide. The HAC Rx Program is available to both ERISA and non-ERISA governed plans and offers Participating Groups broad autonomy in the plan design, drug coverage, and performance guarantee allocations.

Through this RFP, HAC is seeking qualified pharmacy benefit management (“**PBM**”) vendors to provide financial pricing options and services based on each bidder’s unique business processes, capabilities, and competitive differentiators. HAC is requesting the following pricing options for the Program. The National Average Drug Acquisition Cost (“**NADAC**”) pricing model, Pricing Alt1, and Pricing Alt2 are both optional.

Please note member counts and group counts below are estimates and may vary.

Pricing Scenarios:

- Pricing TBR: Traditional pricing, Broad retail network, Reinvested rebates (Approx. 340,000 members, 34 groups)
- Pricing TBG: Traditional pricing, Broad retail network, Guaranteed rebates (Approx. 150,000 members, 59 groups)
- Pricing TBP: Traditional pricing, Broad retail network, Point-of-sale rebates (Approx. 14,000 members, 1 group)

- Pricing TNR: Traditional pricing, Narrow retail network, Reinvested rebates (Approx. 47,000 members, 2 groups)
- Pricing TNG: Traditional pricing, Narrow retail network, Guaranteed rebates (Approx. 1,800 members, 1 groups)
- Pricing TNP: Traditional pricing, Narrow retail network, Point-of-sale rebates
- Pricing PBG: Pass-through pricing, Broad retail network, Guaranteed rebates (Approx. 6,000 members, 1 groups)
- Pricing PBP: Pass-through pricing, Broad retail network, Point-of-sale rebates
- Pricing PNG: Pass-through pricing, Narrow retail network, Guaranteed rebates (Approx. 3,000 members, 1 groups)
- Pricing PNP: Pass-through pricing, Narrow retail network, Point-of-sale rebates
- Pricing Alt1: NADAC pricing on non-specialty, overall specialty effective rate guarantee on specialty (optional)
- Pricing Alt2: Other acquisition cost-based model (optional)

Also, in each of the above pricing scenarios, HAC will consider other variations available from the bidder such as: other retail network options, formulary variations, specialty formulary variations, options linked to mandatory mail and/or retail 90, and options linked to various step therapy or utilization management packages. Please provide as separate Appendices in your Pricing Proposal response.

B. Quality Goals & Objectives

HAC has established the following critical quality objectives for this RFP:

- Ability to offer different types of pricing models and rebate options.
- Ability to offer an acquisition cost-based model to interested Participating Groups.
- For Participating Groups who select the PBM's partner medical carrier, when applicable, a PEPM or per-script credit as proof of the value of vertical integration.
- Financial guarantees that operate at a Participating Group level for as many clients as possible (lowest spend threshold possible for Participating Group level guarantees vs. coalition-level guarantees).
- Permitting specialty drug carve-outs without impact to other non-specialty guarantees. This could include carve out of fulfillment, prior authorization, or rebates.
- Issuance of the RFP under public procurement protocols, whereby public sector entities nationwide will be able to join HAC and Sourcing Alliance and participate in the Program without having to conduct their own bid or RFP process for a PBM vendor.
- Focus on strong PBM contract terms, conditions, definitions, and drug classifications to limit risk to Participating Groups.
- Easily auditable contract terms.
- Marketing and sales support to grow the program, including engagement of the PBM vendor's sales resources with the HAC and Sourcing Alliance sales and marketing teams.
- Ability for to validate the competitiveness of pricing on an annual basis.
- When applicable, have vendors Medical Rx Alignment and Synchronization Credits to demonstrate the value of integrating medical and pharmacy benefits with one company.

- Ability for HAC Member plan sponsors to integrate outside service vendors when they determine the capabilities of those vendors exceed the value of the PBM.

II. The Cooperative Council of Governments & Sourcing Alliance

A. Cooperative Council of Governments & Sourcing Alliance Overview

This RFP is published jointly by HAC and CCOG for the purpose of making the Program available to members of Sourcing Alliance, a public sector group purchasing organization with approximately 1,000 members, and E & I Cooperative Services, a higher education and K-12 cooperative with approximately 5,000 members

Sourcing Alliance is a collaboration of group purchasing organizations (“**GPO**”) and contract holders serving public sector, private sector, and nonprofit organizations nationwide. Each participating group purchasing organization and contract holder (collectively, “**Contract Holders**”) procures contracts for various products and services through its required public sector procurement process. These contracts feature improved pricing, terms and conditions. The Contract Holders then make these already procured documents available to members of Sourcing Alliance (“**Sourcing Alliance Members**” or “**SA Members**”).

Sourcing Alliance Members include public sector, private sector, and nonprofit entities seeking to streamline their procurement practices and aggregate their combined buying power to access improved pricing, terms, and conditions. Most Sourcing Alliance contracts have been procured by public sector entities in accordance with applicable public sector purchasing guidelines. As a result, and under applicable state statutes, virtually any public sector entity in the country that joins Sourcing Alliance can purchase products and services through these Sourcing Alliance contracts without having to conduct their own RFP or bid process, thereby saving themselves and the suppliers significant time and money.

CCOG is a Sourcing Alliance Contract Holder. CCOG is a Council of Governments organized under Chapter 167 of the Ohio Revised Code. It is a political subdivision and special purpose public sector entity. CCOG is a membership organization that serves its members through group purchasing and shared services programs. CCOG works closely with its members, Sourcing Alliance, and potential bidders to develop program specifications for various products and services, then conducts a formal public sector competitive solicitation process in compliance with applicable public sector procurement guidelines to select a winning bidder(s). The master agreement established between CCOG and each winning bidder is an already procured contract vehicle upon which current and prospective Sourcing Alliance Members can “piggyback” to purchase products and/or services from the winning bidder(s) without having to conduct their own bid or request for proposal process, similar to state term contracts and GSA schedules.

At the conclusion of this RFP process, HAC and CCOG will award a contract (the “**Master Agreement**”) to a winning bidder(s). The contract will be a three-party agreement between the winning bidder(s) (as the service provider), CCOG (as the public sector contract holder), and HAC.

This program and the partnership between HAC and Sourcing Alliance presents the winning bidder(s) with a unique opportunity to accelerate its public sector sales from coast to coast. The Sourcing Alliance team will serve in a leadership role to develop and implement targeted marketing strategies, train the winning bidders’ sales team how to effectively utilize the already procured Master Agreement and capture public sector business, and support the actual sales process through collateral development training and responding to prospect questions regarding the procurement process and how the

prospects can legally and appropriately enter into contracts for PBM services with the winning bidder(s) without having to conduct their own RFP processes.

III. The RFP Process & Timeline

A. RFP Timeline

The RFP process shall be conducted in accordance with the following schedule. HAC, Excelsior Solutions, and CCOG (the “**Proposal Team**”) reserve the right to revise this schedule in the best interest of the Proposal Team and/or to comply with the State of Ohio procurement procedures and regulations and after providing reasonable notice.

RFP Publication; Email Q&A opens	March 19, 2020
Preproposal bidders call	March 30, 2020, 3:30-4:30 PM EST
Email Q&A period closes; Questions due from bidders	April 3, 2020, 5:00 PM EST
Responses to bidder questions posted	April 7, 2020
Proposals due from bidders	April 20, 2020, 5:00 PM EST
Initial scoring; Requests for clarification from Proposal Team	April 20 - June 1, 2020
Individual bidder calls; Request for revised bids	June 1 - June 12, 2020
Revised bids due	June 15, 2020
Finalist meetings (Site interviews) at HAC	June 22 - July 17, 2020
HAC visits to bidders’ operations	June 22 - July 17, 2020
Individual bidder calls; Request for BAFO	July 17 - July 31, 2020
BAFOs due	Week of August 3, 2020
PBM draft contracts due	Week of August 10, 2020
Contract negotiations	August 10 - September 30, 2020
Winner(s) selected & notified	October 1, 2020
Contract finalization & execution	To Be Determined

B. Email Question & Answer (Q&A) Period

Potential bidders may submit clarifying questions regarding this RFP via email during the Q&A Period between **March 19 – April 3, 2020**. All questions must be submitted in writing via email to PBM@SourcingAlliance.org. Do not contact HAC or HAC’s Participating Groups with any questions concerning this RFP until the winning bidders(s) is selected and notified. Contacting HAC or HAC’s Participating Groups in violation of this instruction may result in disqualification.

Questions about the RFP must reference the relevant section or Attachment, including the page number or question number. Questions must also include contact information for a representative from the company submitting the question (name of the representative, company name, phone number, and email address). The Proposal Team may, at its option, disregard any questions which do not appropriately reference the relevant portion of the RFP, or do not identify the originator of the question. The Proposal Team may not respond to any questions received after 5:00 PM Eastern on **April 3, 2020**. The Proposal Team reserves the right to extend the deadline for bidders to submit proposals.

The Proposal Team will provide written responses to all questions submitted via email to each bidder that has requested or received a copy of the RFP. In addition, responses will also be posted on the Sourcing Alliance website page dedicated to this RFP for reference by all bidders:

www.sourcingalliance.org/PBM. Clarifying questions asked and Proposal Team responses to those questions comprise the “**Q&A Document**” for this RFP, which will constitute an Attachment to this RFP. Any interpretation or correction of the RFP will be made only by Attachment posted on the Sourcing Alliance website. The Proposal Team is not responsible for any other explanations or interpretations of the RFP.

Bidder proposals in response to this RFP are to take into account any information communicated by the Proposal Team in the Q&A Document. It is the affirmative responsibility of all potential bidders to check for any updates regarding this RFP at the website, www.sourcingalliance.org/PBM.

Bidders can arrange calls to address questions and/or follow-up questions to responses in the above process. These calls should be scheduled by email with Sarah Martin and Riley Harrell via PBM@sourcingalliance.org. Any questions and responses deemed relevant to all bidders will be posted on the website cited above.

C. Communication Prohibited

From the issuance date of this RFP until contract award to the winning bidder(s), there may be no communications concerning the RFP between any bidder that expects to submit a proposal and any employee of CCOG, Sourcing Alliance, Excelsior Solutions, HAC, or any other individual, regardless of their employment status, who is in any way involved in the development of the RFP and/or the selection of the winning bidder (“**Communications Prohibited**”). The only exceptions to the Communications Prohibited are as follows:

- Communications conducted pursuant to **RFP Section III B – Email Question & Answer (Q&A) Period;**
- As necessary in any pre-existing or on-going business relationship between HAC, Excelsior Solutions, Sourcing Alliance, and/or CCOG and any bidder that could submit a proposal in response to this RFP;
- As part of any bidder interview process, finalist meeting, or proposal clarification process initiated by the Proposal Team, which the Proposal Team deems necessary;
- If it becomes necessary to revise any part of this RFP, the Proposal Team will post notice at www.sourcingalliance.org/PBM*; and
- Any Public Record Requests made to CCOG.

*Note: Attachments to the RFP or to any documents related to it will be accessible to interested bidders through www.sourcingalliance.org/PBM. The Proposal Team may not specifically notify any bidder of changes or announcements related to this RFP except through posting on the Sourcing Alliance website. It is the affirmative responsibility of interested bidders to be aware of and to fully respond to all updated information regarding this RFP posted to the Sourcing Alliance website.

The Proposal Team is not responsible for the accuracy of any information regarding this RFP that was obtained or gathered by interested bidders through a source other than the Proposal Team directly or the Q&A process described.

Any attempts at Communications Prohibited by bidders may result in the disqualification of those bidders’ proposals.

D. Timeframes & Fund Available

The Proposal Team is seeking to offer the Program with the winning bidders(s) for an initial period of three (3) years, from January 1, 2022 to December 31, 2024 with two (2) one- (1) year renewal options. Through this RFP, the Proposal Team intends to provide interested bidders with sufficient information to under the scope of work. Bidders are to use this information to determine the pricing they will offer for the performance of the work described herein.

CCOG has not established or authorized available funds for this Program. The establishment and authorization of available funds is solely the responsibility of Sourcing Alliance Members and HAC Members participating in the Program.

Bidders responding to this RFP are to be aware that the Proposal Team may, at its sole discretion, negotiate with and/or seek best and final offers from all technically qualifying bidders for a revised Cost Proposal if the Cost Proposals of all technically qualifying bidders are deemed excessive. See **RFP Section VII – Criteria for Proposal Evaluation & Selection** for additional information regarding the scoring of proposals.

IV. RFP Requirements & Pricing

A. Initial Qualifying Criteria

All bidders must complete and provide executed originals of the following documents. The Proposal Team cannot consider a bidder's proposal unless these forms are properly completed and submitted as part of the RFP response. These documents should be completed, signed in **blue ink (MUST BE BLUE INK)**, and returned to the Proposal Team as part of the bidder's Technical Proposal package.

- **Attachment C** – Required Bidder Information & Certifications
- **Attachment D** – Declaration Regarding Material Assistance
- **Attachment E** – W-9 Form
- **Attachment G** – SAS-70 or SSAE-18

In addition to submitting these four properly completed and executed documents, bidders' proposals must also meet the following initial qualifying criteria (the "**Initial Qualifying Criteria**"). Any proposal not meeting these Initial Qualifying Criteria may be deemed nonresponsive:

- Was the bidder's proposal received by the deadline as specified in **RFP Section III – RFP Process & Timeline?**
- Did the bidder submit a proposal comprised of a Technical Proposal and a Cost Proposal, both submitted in separate, appropriately labeled, sealed envelope as required in **RFP Section VI – Proposal Submission & Format?**
- In **Attachment C – Required Bidder Information & Certifications**, does the bidder state that it is NOT excluded from entering into a contract with CCOG due to restrictions related to the federal debarment list, unfair labor findings, or ORC § 9.24?
- Did CCOG's review of the Auditor of State website verify that the bidder is NOT excluded from contracting with CCOG by ORC § 9.24 as a result of an unresolved finding for recovery?
- In **Attachment C – Required Bidder Information & Certifications**, does the bidder meet the minimum size requirements?
 - The bidder has a minimum enrolled member population of 250,000 people, and
 - The bidder has a minimum drug spend under management of \$500 Million

B. Technical Proposal Requirements & Specifications – **Attachment A**

The technical requirements and specifications for this Program are detailed in **Attachment A – Technical Proposal Requirements & Specifications**. **Attachment A** is provided to bidders in an Excel format for bidders to enter their Technical Proposal responses directly into the electronic file. Do not attempt to add rows, columns, or change the format of **Attachment A**. Doing so may result in dismissal of your proposal. Enter responses in designated cells only. Entering responses in non-designated cells or added tabs may result in dismissal of your proposal.

Bidders' completion of **Attachment A** is intended to facilitate the Proposal Team's understanding of your clear acceptance and compliance with key terms and conditions. The rigor of the Excel format is designed to facilitate both clarity and a level playing field for all bidders. Bidders should be aware that

non-compliance with any of the requirements listed or insufficient responses to Information Security and Privacy may result in disqualification.

Attachment A contains the following tabs for completion:

- Signature Tab
- General Requirements
- Data Requirements
- Performance Guarantees
- Information Security & Privacy

C. Cost Proposal & Pricing Template – **Attachment B**

The requested Cost Proposal and pricing structures for this Program are outlined in **Attachment B – Cost Proposal Requirements & Pricing Structures**. **Attachment B** is provided to bidders in an Excel format for bidders to enter their Cost Proposal responses directly into the file. Do not attempt to add rows, columns, or change the format of **Attachment B**. Doing so may result in dismissal of your proposal. Enter responses in designated cells only. Entering responses in non-designated cells or added tabs may result in dismissal of your proposal.

Bidders' completion of **Attachment B** is intended to facilitate fair evaluation of Cost Proposals across bidders. **Attachment B** contains requested contract and pricing terms related to the Cost Proposal that are either “confirmed” or “not confirmed” by each bidder. **Attachment B** also contains data entry fields in which each bidder enters proposed pricing metrics, within the bounds of their responses to the requested contract and pricing terms.

Attachment B contains the following tabs for completion:

- Signature Tab
- Pricing Requirements – Traditional Bids
- Pricing Requirements – Pass-Through Bids
- Other Credits and Fees
- Medical Rx Alignment Credit
- Clinical Program Fees
- Pricing Tabs
- Lists Requested (Specialty, Formularies, and LDD)

1. Provision of Historical Claims Data Extract for Underwriting Purposes

Excelsior Solutions has worked in conjunction with HAC to obtain twelve (12) months of recent claims data for the currently Participating Groups from each incumbent PBM. This data is intended to be used by bidders for underwriting purposes, as we recognize your need to understand specific drug mix, utilization patterns, and network utilization.

A claims repricing of this data is NOT requested. Do not submitted repriced claims data with your proposal.

Please note that the extract contains a data indicator (“**Group ID**”) to highlight that portion of the data that matches the underwriting assumptions criteria noted herein.

The Claims Data Extract has been loaded onto our ShareFile site and each bidder will be provided a link upon request to access the data to download from there. Each bidder will also receive a Data Crosswalk that identifies Group IDs with their respective pricing scenario. Any questions regarding accessing the site and/or problems downloading the Claims Data Extract should be directed to PBM@sourcingalliance.org.

By accepting the claims extract the bidder commits to destroying this extract within one-hundred-eighty (180) days from the response to the RFP.

2. Financial Bid Valuations

Based on the drug mix and utilization within the Claims Data Extract, Excelsior Solutions has established a baseline spend projection using reasonable trend assumptions and actual performance of discounts, dispensing fees, rebates, administrative fees, and other cost components. This pro forma baseline spend projection for years 2022, 2023, and 2024 will be compared against which each bidder’s resulting spend projection. Each bidder’s resulting spend projection is based on a claims repricing utilizing each bidder’s specific responses in the Cost Proposal.

Given that not all Participating Groups have the same plan management setup, the RFP specifies a specific set of pricing scenarios based on the predominant plan management setups across the coalition. Please record your pricing terms for each requested Pricing Scenario in the appropriate tables in **Attachment B**. Also please provide written documentation on the pricing menu you are offering for the Participating Groups whose plan management setup does not match the pricing scenarios requested.

3. Pricing Scenarios Requested

Pricing TBR: Traditional pricing, Broad retail network, Reinvested rebates

Pricing TBG: Traditional pricing, Broad retail network, Guaranteed rebates

Pricing TBP: Traditional pricing, Broad retail network, Point-of-sale rebates

Pricing TNR: Traditional pricing, Narrow retail network, Reinvested rebates

Pricing TNG: Traditional pricing, Narrow retail network, Guaranteed rebates

Pricing TNP: Traditional pricing, Narrow retail network, Point-of-sale rebates

Pricing PBG: Pass-through pricing, Broad retail network, Guaranteed rebates

Pricing PBP: Pass-through pricing, Broad retail network, Point-of-sale rebates

Pricing PNG: Pass-through pricing, Narrow retail network, Guaranteed rebates

Pricing PNP: Pass-through pricing, Narrow retail network, Point-of-sale rebates

Pricing Alt1: NADAC pricing on non-specialty, overall specialty effective rate guarantee on specialty (optional)

Pricing Alt2: Other acquisition cost-based model (optional)

4. NADAC and Other Acquisition Cost-Based Models

HAC is exploring inclusion of a non-traditional financial option for HAC Members based upon acquisition cost. Bidders have the option of providing a quote based on NADAC or another acquisition cost model. These options and full pricing quotes and conditions are to be submitted on the designated tabs of **Attachment B**, Pricing Alt1, and Pricing Alt2. See **Attachment F** for further details and scoring information.

5. Plan Management Option-Based Pricing

Bidders may outline a menu of pricing that is specific to additional proposed scenarios on network, formulary, ICER based formulary, clinical program options, mandatory or incentivized mail order or retail 90, and other scenarios. These pricing scenarios will create buy-downs or buy-ups from the pricing scenarios and underwriting rules requested and provided.

6. HAC Administration Fees

Please quote net of any HAC Administration Fees. Do not build in any fees into your underwriting. Any HAC fees will be incorporated after the RFP process.

7. CCOG Administration Fees

Please quote net of any CCOG Administration Fees. Do not build in any fees into your underwriting. Any CCOG fees will be incorporated after the RFP process.

8. Proposal Score Sheet – Attachment F

The Proposal Team has included the Proposal Score Sheet that will be utilized to score all Technical and Cost Proposals submitted in this RFP package as **Attachment F – Proposal Score Sheet** for reference by potential bidders.

V. Conditions & Other Requirements

In this section of the RFP, the Proposal Team notifies bidders seeking award of this Program contract of certain conditions and requirements which may affect their eligibility or willingness to participate in this procurement process; or their eligibility to be awarded a contract; and of all requirements that will be in effect should they be awarded a contract by HAC and CCOG.

A. Interview

Bidders submitting proposals may be requested to participate in an in-depth interview as part of the evaluation process. The Proposal Team reserves the right to select bidders to interview and may not interview all bidders submitting proposals. Any bidders interviewed will bear all the costs associated with any scheduled interview.

B. Program Start Date

The winning bidder must be able to begin providing PBM services to Participating to Participating Groups no later than January 1, 2022.

C. Proposal Costs

Costs incurred in the preparation of this proposal will be borne by the bidder and the Proposal Team will not in any way contribute to or be responsible for any costs incurred by any bidder relating to this RFP process.

D. Trade Secrets Prohibition; Public Sector Information Disclaimer

CCOG will consider all proposals voluntarily submitted in response to this RFP to be free of trade secrets and such proposals will, in their entirety, be made a part of the public record in compliance with Ohio Revised Code Chapter 125.01, et seq. However, if a proposal is submitted in response to this RFP, and the proposal contains trade secret information as defined in Ohio Revised Code (“**ORC**” or “**R.C.**”) Chapter 1333.61, then such trade secret information must be clearly and conspicuously marked and/or identified as “**Trade Secret Information**” at the time that such proposal is submitted to the Proposal Team. If such trade secret information is so marked and/or identified, then the CCOG shall designate such information as trade secret information and shall maintain and keep such trade secret information in accordance with R.C. Chapter 149.43

All proposals and any other documents submitted to the Proposal Team in response to this RFP will become the property of CCOG and HAC and are deemed to be public records pursuant to R.C. 149.43, except for such portions, sections, or parts of a proposal that are clearly and conspicuously marked and/or identified as trade secret information. For purposes of this section, “**proposal**” will mean both the Technical and the Cost Proposals (if opened by the Proposal Team) submitted by the bidder, and any attachments, addenda, appendices, or sample products.

Any proposal submitted in response to this RFP that fails to clearly and conspicuously mark and/or identify trade secret information at the time that such proposal is submitted for consideration shall be deemed and considered by CCOG to not contain trade secret information, and such proposals

shall be deemed to be public records in their entirety in accordance with this **Section V D – Trade Secrets Prohibition; Public Information Disclaimer** and R.C. 149.43

E. Ethical & Conflict of Interest Requirements

- No bidder or individual, company, or organization seeking a contract will promise to give any Proposal Team member anything of value that is of such character as to manifest a substantial and improper influence upon the employee with respect to his or her duties;
- No bidder or individual, company, or organization seeking a contract will solicit any Proposal Team member to violate any of the conduct requirements for employees;
- Any bidder acting on behalf of HAC or CCOG will refrain from activities which could result in violations of ethics and/or conflicts of interest. Any bidder or potential bidder who violates the requirements and prohibitions defined herein or in Chapter 102.04 of the R.C. is subject to termination of the contract or refusal by HAC or CCOG to enter into a contract;
- Any CCOG employee who violates Chapters 102.03, 102.04, 2921.42, or 2921.43 of the R.C. may be prosecuted for criminal violations.

F. Health Insurance Portability & Accessibility ACT (HIPAA) Requirements

As a condition of receiving a contract from CCOG, the winning bidder, and any subcontractor(s), may be required to comply with 42 U.S.C. Sections 1320d through 1320d-8, and to implement regulations at 45 C.F.R. Section 164.502 (e) and Sections 164.504 (e) regarding disclosure of protected health information under the Health Insurance Portability and Accountability Act (HIPAA) of 1996. Protected Health Information (PHI) is information received by the winning bidder from or on behalf of the Proposal Team that meets the definition of PHI as defined by HIPAA and the regulations promulgated by the United States Department of Health & Human Services, specifically 45 CFR Section 164.501 and any amendments thereto.

The winning bidder(s) may reasonably anticipate HIPAA language in the contract that results from this RFP, if applicable.

In the event of a material breach by the winning bidder of obligations under this section, HAC and CCOG may, at their option, terminate the contract according to the provisions within the contract for termination.

G. Waiver of Minor Proposal Errors

The Proposal Team may, at its sole discretion, waive minor errors or omissions in bidders' Technical and/or Cost Proposals when those errors do not unreasonably obscure the meaning of the content or the competitive nature of the proposal submitted in response to this RFP. However, substantial and/or substantive proposal errors that include, but are not limited to, bidder's ability to perform, price points, costs, or other economic indicators and factors that may affect the content or competitive nature of the proposal submitted, or capacity to perform, shall not be waived, and bidders shall not have the right to withdraw or modify their proposals after such proposals have been submitted and received and the time periods in the RFP have closed.

H. Proposal Clarifications

The Proposal Team reserves the right to request clarifications and revisions from bidders to any information in their Technical and/or Cost Proposals, and may request such clarifications or revisions as it deems necessary at any point in the proposal review process.

Bidder agrees to be bound by its proposal including best & final offers until contract execution, during which there may be clarifications or corrections. Amendments or clarifications shall not affect the remainder of the proposal but only the amended or clarified portion.

I. Unresolved Findings for Recovery (R.C. 9.24)

ORC Chapter 9.24 prohibits CCOG from awarding a contract to any entity against whom the Auditor of State has issued a finding for recovery, if such finding for recovery is “**unresolved**” at the time of the award. By submitting a proposal, the bidder warrants that it is not now, and will not become, subject to an “unresolved” finding for recovery under ORC Chapter 9.24 prior to the award of any contract arising out of this RFP, without notifying CCOG of such finding. CCOG will review the Auditor of the State’s website prior to the evaluations of any proposal submitted pursuant to this RFP. CCOG will not evaluate a proposal from any bidder whose name, or the name of any of the subcontractors proposed by the bidder, appears on the website of the Auditor of the State of Ohio as having an “unresolved” finding for recovery.

J. Mandatory Contract Performance Disclosure

Each proposal must disclose whether the bidder’s performance and/or the performance of any of the proposed subcontractor(s), under contracts for the provision of services that are the same or similar to those to be provided for the Program which is the subject of this RFP has resulted in any “formal claims” for breach of those contracts. For purposes of this disclosure, “**formal claim**” means any claims for breach that have been filed as a lawsuit in any court, submitted for arbitration (whether voluntary or involuntary, binding or not), or assigned to mediation. If any claims are disclosed, bidder will fully explain the details of those claims, including the allegations regarding all alleged breaches, any written or legal action resulting from those allegations, and the results of any litigation, arbitration, or mediation regarding those claims, including terms of any settlement. While disclosure of any formal claims in response to this section will not automatically disqualify a bidder from consideration, at the sole discretion of the Proposal Team, such claims and a review of the background details may result in a rejection of the bidder’s proposal. The Proposal Team will make this decision based on its determination of the seriousness of the claims, the potential impact that the behavior that led to the claims could have on the bidder’s performance of the work, and the best interests of HAC and CCOG.

K. Mandatory Disclosures of Governmental Investigations

Each proposal must indicate whether the bidder and/or any subcontractor(s) has been the subject of any adverse regulatory or adverse administrative governmental action (federal, state, or local) with respect to the bidder’s performance of services similar to those described in this RFP. If any such instances are disclosed, the bidder must fully explain, in detail, the nature of the governmental action, the allegations that led to the governmental action, and the results of the governmental action including any legal action that was taken against the bidder by the governmental agency.

While disclosure of any governmental action in response to this section will not automatically disqualify a bidder from consideration, such governmental action and a review of the background details may result in a rejection of the bidder's proposal at the sole discretion of the Proposal Team. The decision by the Proposal Team on this issue will be based on a determination of the seriousness of the matter, the matter's potential impact on the bidder's performance of the work, and the best interests of HAC and CCOG.

VI. Proposal Submission & Format

A. Proposal Submission Information

This RFP requires proposal submissions in both paper and electronic format. The proposal must be prepared and submitted in accordance with instructions found herein.

Bidders must provide one (1) original proposal, which must be mailed or personally delivered to CCOG as detailed herein, and include the following:

- In a separate, sealed envelope, one signed original hard copy of the Technical Proposal and one electronic copy (USB jump drive) of the Technical Proposal; AND
- In a separate, sealed envelope, one signed original hard copy of the Cost Proposal and one electronic copy (USB jump drive) of the Cost Proposal.

Bidders must provide four (4) complete copies of the original proposal, which must be mailed or personally delivered to Excelsior Solutions and HAC as detailed herein, and include the following:

- In a separate, sealed envelope, one signed original hard copy of the Technical Proposal and one electronic copy (USB jump drive) of the Technical Proposal; AND
- In a separate, sealed envelope, one signed original hard copy of the Cost Proposal and one electronic copy (USB jump drive) of the Cost Proposal.

Each bidder's complete proposal packages (comprised of one (1) separate, sealed envelope containing the Technical Proposal and one (1) separate, sealed envelope containing the Cost Proposal as described immediately above) must be received by the Proposal Team no later than 5:00 PM Eastern Standard Time on **April 20, 2020**.

Bidders' one (1) original and four (4) hard copies of the Technical Proposals and Cost Proposals must contain all the information and documents specified in this RFP. All copies (both paper and electronic) of the Technical Proposal and Cost Proposal must include copies of ALL information, documents, and pages in the original proposal.

Envelopes containing the Technical Proposals (original and four copies) must be clearly marked: **"TECHNICAL PROPOSAL ENCLOSED FOR RFP #2020.03.19: PBM SERVICES PROGRAM, SUBMITTED BY [BIDDER'S NAME HERE]"**.

Envelopes containing the Cost Proposals (original and four copies) must be clearly marked: **"COST PROPOSAL ENCLOSED FOR RFP #2020.03.19: PBM SERVICES PROGRAM, SUBMITTED BY [BIDDER'S NAME HERE]"**.

Bidders should submit their five (5) complete proposal packages by 5:00 PM Eastern on **April 20, 2020** as follows:

One (1) original complete proposal package submitted to:

*The Cooperative Council of Governments
Attn: David J. Akers
6001 Cochran Road, Suite 333
Cleveland, OH 44139*

Two (2) copies of complete proposal packages submitted to:

*Lockton – Excelsior Solutions
Attn: Sarah Martin, Vice President
2100 Ross Avenue, Suite 1200
Dallas, Texas 75201*

Two (2) copies of complete proposal packages submitted to:

*Health Action Council
Attn: Kevin Gregory, Vice President Business Solutions; Rockside Square II
6133 Rockside Rd., Suite 210
Cleveland, Ohio 44131*

CCOG will formally open all proposal packages received in response to this RFP at 5 PM Eastern on **April 20, 2020** at CCOG's headquarters location, which is located at:

6001 Cochran Road, Suite 333
Cleveland, OH 44139

The opening of proposals will occur in a public meeting; bidders may send a representative to attend the opening of proposals. Please be advised that the purpose of the meeting is solely to identify the bidders that have submitted proposals in response to the RFP. The actual scoring of the proposals **WILL NOT** occur in a public setting or forum.

The electronic copies and/or the packages containing them of both the Technical and Cost Proposals must be labeled with the bidder's name, the RFP name, and the proposal submission date or proposal due date, at minimum. Failure to include them or to properly label them may, at the Proposal Team's discretion, result in the rejection of the bidder from any consideration in this RFP process.

IMPORTANT: the electronic file names included on the USB jump drives submitted should include the bidder's name and the tab or sub-tab of the proposal which the electronic file's contents address. For example: "*Bidder Name - Technical Proposal - Signature Tab*".

All complete proposal submissions must be received at the above addresses, whether via U.S. Mail, overnight shipping, or hand delivery by the above date and time. Materials received after the date and time as stated above will not be included in any previous submissions, nor will they be considered, unless such materials are specifically requested by the Proposal Team. The Proposal Team is not responsible for incorrectly addressed proposals or for proposals delivered to any location other than the address specified above. No confirmation of the receipt of mailed proposals will be provided.

All proposals will be valid for a minimum period of one-hundred-eighty (180) days from the date the proposals are received by CCOG. A respondent seeking to withdraw its proposal from consideration may submit such request directly to the Proposal Team.

Technical Proposal Organization

The bidder's Technical Proposal must contain the following components, with the paper copies organized into primary tabs and divided into sub-tabs, as described below. Any other information thought to be relevant, but not applicable to a specific RFP section number/letter must be provided as an appendix to the proposal and so marked as an Appendix tab. **The Proposal Team reserves the right not to review submitted appendices which include information/materials not provided in the RFP. If any information submitted as an appendix contradicts and response provided in the RFP, the RFP response will prevail.**

Bidders must organize their Technical Proposals in the following order:

Tab C – **Attachment C - Required Bidder Information and Certifications Document**. Completed and signed.

Tab D – **Attachment D - Declaration Regarding Material Assistance**. Completed and signed.

Tab E – **Attachment E - Request for Taxpayer Identification Number (W-9) Form**. Completed and signed.

Tab G – **Attachment G - SAS-70 or SSAE-18 Document**. Completed and signed.

Tab A – From **Attachment A – Technical Proposal**:

Sub-Tab: Signature

Sub-Tab: General Requirements

Sub-Tab: Data Requirements

Sub-Tab: Performance Guarantees

Sub-Tab: Info Security

IMPORTANT: The Technical Proposal is defined as any part of the bidder's proposal (either as required by this RFP or included at the bidder's discretion, such as work plan, biographies, etc.) which is not specifically identified by this RFP as a required component of the separate, sealed Cost Proposal. Failure to follow these instructions will result in a determination that the bidder's proposal is nonresponsive to this RFP pursuant to ORC § 9.321, and any Technical Proposal found to contain any prohibited cost or pricing information will be disqualified from consideration.

"Prohibited Cost Information" is defined as any dollar amounts, pricing, rebates or other financial terms in response to this RFP which the Proposal Team might find indicative of the relative cost of pricing of the proposal that should be included in the Cost Proposal. However, information on the assets, value, or historical business volume of the bidder is NOT considered to be such Prohibited Cost Information, and MAY be included in any bidder's Technical Proposal as information on business capability and stability. Any Prohibited Cost Information must be submitted with the separate, sealed Cost Proposal.

B. Cost Proposal Organization

Bidders should provide their Cost Proposal via completion of the Excel file included in the RFP package as **Attachment B – Cost Proposal**. The bidder’s Cost Proposal must contain the following components, with paper copies organized in tabs as described below. Any other information thought to be relevant, but not applicable to a specific RFP section number/letter must be provided as an appendix to the proposal and so marked as an Appendix tab. **The Proposal Team reserves the right not to review submitted appendices which include information/materials not provided or requested in the RFP. If any information submitted as an appendix contradicts and response provided in the RFP, the RFP response will prevail.**

From **Attachment B – Cost Proposal**:

Signature Tab

Pricing Requirements – Traditional Bids Tab

Pricing Requirements – Pass-through Bids Tab

Other Credits and Fees Tab

Med Rx Alignment Credit Tab

Clinical Program Fees Tab

Pricing Tabs

Sub-Tab: Pricing TBR

Sub-Tab: Pricing TBG

Sub-Tab: Pricing TBP

Sub-Tab: Pricing TNR

Sub-Tab: Pricing TNG

Sub-Tab: Pricing TNP

Sub-Tab: Pricing PBG

Sub-Tab: Pricing PBP

Sub-Tab: Pricing PNG

Sub-Tab: Pricing PNP

Sub-Tab: Pricing Alt1

Sub-Tab: Pricing Alt2

Appendices for additional pricing scenarios offered

Lists Requested

Specialty drug list (in electronic format only, by NDC)

Formulary, including exclusions (multiple lists if multiple formularies are quoted, in electronic format only, by NDC)

LDD List (in electronic format only, by NDC)

VII. Criteria for Proposal Evaluation & Selection

A. Scoring of Proposals

HAC and CCOG will contract with the bidder(s) that best demonstrates the ability to meet the requirements specified in this RFP. Bidders submitting a response will be evaluated based on the capability and experience demonstrated in their Technical and Cost Proposals. Proposal scoring will be weighted as described in **Attachment F – Proposal Score Sheet**. All proposals will be reviewed and scored by the Proposal Team. Bidders should not assume that the Proposal Team is familiar with any current or past work activities of the bidder with HAC or CCOG. Proposals containing assumptions, lack of sufficient detail, poor organization, lack of proofreading, and unnecessary use of self-promotional claims will be evaluated accordingly.

Selection of the winning bidder(s) will be based upon the criteria specific in the **RFP Sections IV, V, and VI**, and the Technical and Cost Proposals. Any proposals not meeting the requirements contained in those sections of this RFP will not be scored or may be held pending receipt of required clarifications. The Proposal Team reserves the right to reject any and all proposals, in whole or in part, received in response to this RFP. The Proposal Team may waive minor defects that are not material, do not affect the competitive nature of the proposal, and when no prejudice will result to the rights of any bidder or to the public. In scoring the proposals, the Proposal Team will score in three (3) phases:

1. Phase I Review: Initial Qualifying Criteria

The Initial Qualifying Criteria is listed and described in **Section IV. A.** of this document. In order to be fully reviewed and scored, proposals submitted must pass this Phase I Initial Qualifying Criteria review. **Any “no” for the listed Initial Qualifying Criteria may eliminate a proposal from further consideration.**

2. Phase II Review: Criteria for Scoring the Technical Proposal

The Proposal Team will then score those Technical Proposals not eliminated in Phase I: Initial Qualifying Criteria by assessing how well the bidder meets the requirements as specified in **Section IV B– Technical Proposal Requirements & Specifications** and **Attachment A** of this RFP using the Proposal Score Sheet for Phase II scoring (see **Attachment F** of this RFP for specific evaluation criteria).

The maximum Technical score is 1,540 points, and is based on the summation of the scores from each of the following tabs:

- General Requirements – Maximum 600 Points, weighted for each requirement shown in **Attachment A**
- Data Requirements – Maximum 220 Points, weighted for each requirement shown in **Attachment A**
- Performance Guarantees – Maximum 120 Points, weighted for each performance guarantee shown in **Attachment A**
- Information Security & Privacy – Maximum 600 Points, weighted for each question shown in **Attachment A**

A maximum of 1,540 points will be awarded for the Technical Proposal, weighted as shown in **Attachment A. A Technical Proposal must achieve a total of 1,200 points (a score which represents that the bidder can successfully perform the resulting contractual duties) out of the possible 1,540 points to qualify for continued consideration.** Any Technical Proposal which does not meet the minimum required Technical Proposal point threshold will be determined nonresponsive to this RFP and the associated Cost Proposal will neither be opened nor considered.

All bidders whose Technical Proposals meet the minimum scoring threshold will process to the next level of review, which is consideration of the Cost Proposal.

3. Phase III Review: Criteria for Scoring the Cost Proposal

The Proposal Team will review Cost Proposals to determine the best overall financial value for HAC, CCOG, and Participating Groups as outlined in **Section IV C – Cost Proposal & Pricing Template** and **Attachment B**. There is a maximum of 5,040 points available in the evaluation of Cost Proposals. See **Attachment F** for details on scoring of the Cost Proposal.

The maximum Cost Proposal score is 5,040 points, and is based on the summation of the scores from each of the following tabs:

- Pricing Requirements – Traditional Bids – Maximum 820 Points, weight for each requirement shown in **Attachment B**
- Pricing Requirements – Pass-through Bids – Maximum 820 Points, weight for each requirement shown in **Attachment B**
- Bid valuation – Maximum 3,000 points
- Other financials – Maximum 400 points. Other Credits & Fees is worth 100 points, Medical Rx Alignment & Synchronization Credit is worth 200 points, and Clinical Program Fees is worth 100 points.

4. Final Scoring

The total of each bidder's Technical Proposal and Cost Proposal will be added together to calculate the final points awarded to each bidder. The Proposal Team will recommend awarding the contract(s) to the most responsible bidder(s) with the greatest bid score(s) in accordance with applicable public sector procurement guidelines.

If the Cost Proposals of all technically qualifying bidders are deemed excessive, the Proposal Team may, at its sole discretion, negotiate with all technically qualifying bidders for a revised Cost Proposal. Bidders may then submit one best and final offer, or may request that the Proposal Team view its original Cost Proposal as its last and best offer, and will formally indicate its choice according to directions provided by the Proposal Team at that time. Upon receipt of all best and final offers, the Proposal Team will re-score each bidder's Cost Proposal utilizing the best and final offer, as described herein.

B. Review Process Caveats

Negligence on the part of a bidder in preparing its proposal submitted in response to this RFP confers no right of modification or withdrawal of the bidder's proposal after such proposal has been received and the time periods identified in **Section III – The RFP Process & Timeline** have closed.

Should the Proposal Team determine a need for interviewing bidders or conducting finalist meetings prior to making a final selection, results to interview questions will be scored in a manner similar to the process described in **Section VII A – Scoring of Proposals**, above. Such scored results may be either added to those bidders' proposal scores, or will replace certain scores, at the discretion of the Proposal Team. The standards for scoring the interviews and the method used for considering the results of the interviews will be applied consistently for all bidders participating in the interview process for this RFP. Such communications are not violations of any Communications Prohibited in **Section III C – Communications Prohibited** of this RFP, and are expressly permitted when initiated by the Proposal Team, but are conducted at the sole discretion of the Proposal Team.

The Proposal Team reserves the right to negotiate with bidders for adjustments to their proposals should the Proposal Team determine, for any reason, to adjust the scope of the Program for which this RFP is released. Such communications are not violations of any Communications Prohibited in **Section III C – Communications Prohibited** of this RFP, and are expressly permitted when initiated by the Proposal Team, but are conducted at the sole discretion of the Proposal Team. Any bidder deemed not responsible, or any bidder submitting a proposal deemed not to be responsive to the terms of this RFP as those terms as defined in ORC § 9.321, will not be awarded the contract.

C. Final Bidder Recommendation

The Proposal Team will recommend to HAC and CCOG the technically qualified bidder(s) offering the proposal most advantageous to HAC, CCOG, and Participating Groups, taking into consideration factors such as price and the evaluation of criteria in the Technical Proposal.

D. Tie Breaker

In the event two or more of the proposals have a score which is tied after final calculation of both the Technical Proposal and the Cost Proposal, the proposal with the higher score in the Technical Proposal will prevail. The Proposal Team reserves the right to recommend one, two, or three bidders to HAC and CCOG.

E. Protests

Any potential, or actual, bidder objecting to the award of a contract resulting from the issuance of this RFP may file a protest of the award of the contract, or any other matter relating to the process of soliciting the proposals. Such a protest must comply with the following guidelines:

1. A protest may be filed by a prospective or actual respondent objecting to the award of a contract resulting from the RFP. The protest must be filed in writing and must contain the following information:
 - The name, address, and telephone number of the protestor;
 - The name and number of the RFP being protested;

- A detailed statement of the legal and factual grounds for the protest, including copies of any relevant documents;
 - A request for a ruling by HAC and CCOG;
 - A statement as to the form of relief requested from HAC and CCOG; and
 - Any other information the protestor believes to be essential to the determination of the factual and legal questions at issue in the written protest.
2. A timely protest will be considered by HAC and CCOG, if it is received by HAC and CCOG within the following periods:
- A protest based on alleged improprieties in the issuance of the RFP or any other event preceding the closing date for receipt of proposals which are apparent or should be apparent prior to the closing date for receipt of proposals will be filed no later than 5:00 PM Eastern on the closing date for receipt of proposals, as specified in **Section III – The RFP Process & Timeline**.
 - If the protest relates to the announced intent to award a contract, the protest will be filed no later than 5:00 PM of the eighth (8th) calendar day after the issuance of the Letter of Intent to Award Contract.
 - An untimely protest may be considered by HAC and CCOG if HAC and CCOG determine that the protest raises issues significant to the procurement process. An untimely protest is one received by HAC and CCOG after the time periods set forth in this **Section VIII E – Protests**.
 - All protests must be filed at the following location:
The Cooperative Council of Governments
6001 Cochran Road, Suite 333
Solon OH 44139
 - When a timely protest is filed a contract award will not proceed until a decision on the protest is issued or the matter is otherwise resolved, unless HAC and CCOG determine that a delay will severely disadvantage HAC, CCOG, or Participating Groups. The bidder(s) who would have been awarded the contract will be notified of the receipt of the protest.
 - HAC and CCOG will issue written decisions on all timely protests and will notify any bidder who filed an untimely protest as to whether or not the protest will be considered.

F. Caveats

HAC and CCOG are under no obligation to issue a contract as a result of this solicitation if, in the opinion of the Proposal Team, none of the proposals are sufficiently responsive to the objectives and needs of the HAC, CCOG, and Participating Groups. HAC and CCOG reserve the right to not select any bidder should HAC and CCOG decide not to proceed for any reason. HAC and CCOG reserve the right to select multiple bidders for contract award.

VIII. RFP Package Inventory

The complete RFP release contains the following elements:

- **RFP - Health Action Council and CCOG PBM - 2020** [THIS DOCUMENT]
- **Attachment A - Technical Proposal Requirements & Specifications**
- **Attachment B - Cost Proposal Requirements & Pricing Structures**
- **Attachment C - Required Bidder Information & Certifications**
- **Attachment D - Declaration Regarding Material Assistance**
- **Attachment E - W-9 Form**
- **Attachment F - Proposal Score Sheet (Word document & Excel document)**
- **Attachment G - SAS-70 or SSAE-18**
- Claim Data Extract - To be provided upon request
- Data Specification – Data Crosswalk to assist in identifying groups with each Pricing Scenario to be provided along with the data files
- Q&A Document - Available following the Q&A Period

Data Requirements

#	Data Requirements	Yes / No	Point Value
1)	Contract will state Bidder will provide up to 24 months of historical data at no charge to the HAC and/or individual Participating Group(s) when either HAC or an individual Participating Group(s) terminates.		10
2)	Bidder agrees audit files will be supplied to Client (either HAC or Participating Group) directly from the source system and should include all transactions processed including but not limited to paid, reversed and denied claims.		10
3)	At no charge, Bidder must be able to transfer data to Client (HAC or Participating Group) and Client's other vendor partners (e.g., medical plan administrator, stop loss vendor, disease management vendor, catastrophic claimant advocate, etc.), with an appropriate NDA.		50
4)	Please confirm at the end of the Participating Group's customer agreement with the Bidder, Bidder will transfer the following files to the Participating Group or the Participating Group's new PBM.		
	12 months of historical claims		5
	Specialty pharmacy patient information		5
	Open Mail order file		5
	PA file		5
5)	Bidder will provide two separate files in fully identified NCPDP expanded format to HAC and/or its consultant on a monthly basis at no additional charge.		10
Medical Integration			

6)	List all real time or near real time capabilities with Medical Carriers. Indicate which medical carriers Bidder integrates with today. Maximum points will be awarded if Bidder already has real time existing connections with UHC, Blue Cross, Aetna, Cigna, Anthem, and Medical Mutual. Do NOT include fee information here. Any fees should be listed in Attachment B on the "Other Fees and Credits" tab.		50
7)	Define "real time". Is this nightly or within a few minutes?		5
8)	Define "near real time".		5
9)	Bidder confirms that Client or it's Participating Group's claims data will not be sold to any third party entity.		10
10)	Bidder confirms that Client and it's Participating Groups will be granted access to their respective data and Bidder's reporting tools.		50
Total Possible Points			220

Health Action Council & Cooperative Council of Governments

RFP #2020.03.19 for PBM Services

Attachment A: Technical Proposal

Excelsior Solutions

Signature Tab

General Requirements Tab

Data Requirements Tab

Performance Guarantees Tab

Info Security Tab



2100 Ross Ave, Ste. 1200
Dallas, TX 75201

www.lockton.com
smartin@lockton.com
816-489-2545



General Technical Requirements

Partial points may be awarded on any question. Any bidder without sufficient and appropriate responses to Audits, Contract Terms, and Insurance items in bold will be disqualified at the Proposal Team's discretion.

#	Requirement	Yes/No	Point Value	Bidder Comments
Claim Integrity				
1)	Bidder agrees that HAC and/or individual Participating Groups, hereinafter Client has the ability to reconcile PBM claims and administrative charges on a per billing cycle basis and provide disputed claims to Bidder.		5	
2)	Bidder agrees Client has the ability to continuously monitor claim accuracy in pricing, quantity, dosage, overrides, and adherence to plan design on a per billing cycle basis.		5	
3)	Bidder agrees to provide Client or the designee a consolidated electronic invoice via a File Transfer Protocol (FTP) for services provided by Bidder. The data feed will be made at the same frequency of the invoice. The data will be provided in the format required at no charge. This is in addition to any other data feeds required by individual Participating Group and/or HAC.		5	
4)	Bidder agrees to provide Client and their vendor with electronic versions of all clinical rules (formulary, step therapy, prior authorization, quantity limits) at no charge and in the specified format for claims monitoring.		1	
5)	Bidder agrees to provide updated files for any clinical rules changes or updates.		1	
6)	Bidder agrees to allow individual Participating Group to hold partial payment on the disputed claim if Bidder does not work in good faith effort to correct problems identified.		5	
Audits				
7)	Bidder agrees that Client may employ another third party auditor to conduct annual audits of the processing contract, including, but not limited to:			
	Pharmacy claims transactions		10	
	Rebates		5	

	Financial performance guarantees		50	
	Benefits		5	
	Eligibility		5	
	Pharmacy contracts if pass through contract		10	
8)	Bidder confirms that HAC, individual Participating Groups, or their third party auditor may perform a pre-implementation audit prior to the effective date.		10	
Prior Authorization & Formulary				
9)	Bidder agrees to administer Client specific prior authorization criteria if requested.		5	
10)	Bidder agrees to allow HAC or other mutually agreed-upon third party vendor to audit Bidder's performance on administering the prior authorization criteria as specified.		5	
11)	Bidder agrees to collect and store documentation as necessary to support prior authorization criteria. For example if criteria requires documentation of a specific lab result, Bidder will collect and store that documentation. Bidder will make that documentation available for audits as necessary.		2	
12)	Bidder agrees to provide drug specific criteria as requested by the Client or their consultant throughout the RFP cycle and life of the contract.		2	
13)	Bidder agrees to allow client to have mutually agreed-upon third party perform prior authorization determinations on all or specific medications at no additional cost.		5	
14)	Bidder agrees to provide any custom secondary messaging necessary in the adjudication system at no charge to alert the pharmacy or call center to the appropriate mutually agreed-upon prior authorization review organization.		2	
15)	Bidder agrees to give a mutually agreed-upon third party access to required systems to enter any necessary overrides for prior authorization approvals or changes at no additional cost.		2	
16)	Bidder agrees to allow Client to have a separate P&T and create their own formulary for their groups as they see fit.		20	
17)	Describe your formulary development philosophy and process for non-specialty. How are rebates incorporated into this process? Use extra space to right if needed.		20	
Specialty Medications				

18)	Bidder agrees that if client has a hemophilia patient serviced by the specialty pharmacy that dispensing assay will be within 3% of ordered product.		5	
19)	Bidder agrees to provide reporting to validate the 3% assay dispensing every 6 months. If the specialty pharmacy is out of compliance, the client will be reimbursed for anything over 3%.		5	
20)	Bidder agrees that their formulary will promote the use of biosimilars and generic specialty drugs where available. Describe approach to biosimilars.		10	
21)	Bidder agrees to provide a dynamic copay program that can apply the copay assistance programs available from pharmaceutical manufacturers to reduce the plan cost. Bidder will provide this at no charge to the Client.		10	
22)	Bidder agrees to provide the correct indemnity amounts to accurately reflect the members true out of pocket expense at no additional charge.		10	
23)	Do you utilize ICER information to make specialty formulary decisions? Describe.		20	
24)	Do you use ICER information to make sure specialty drugs are priced appropriately when you are negotiating with pharmaceutical manufacturers? Describe.		20	
25)	Describe your formulary development philosophy and process for specialty. How are rebates incorporated into this process? Use extra space to right if needed.		20	
Other Clinical Programs				
26)	Bidder confirms that Client and it's Participating Groups are able to source clinical programs from third party vendors without impact to pricing guarantees.		10	
27)	If you offer or have ownership stake in an external point solution to your PBM (e.g. for diabetes or other chronic conditions), do you derive revenue from this, including any revenue from a potential stock IPO? Explain in comments area.		10	
28)	Describe the Medication Therapy Management Programs available from the bidder, beyond standard step therapy, prior authorization, and other utilization management programs. Do not include any fee information here. Describe how your MTM programs might replace or be in lieu of third-party point solutions.		20	

29)	What MTM programs are standard?		5	
30)	What MTM programs are voluntary to each Participating Group?		5	
Contract Terms				
31)	Bidder agrees to hold a master services agreement with HAC and CCOG and a specific sub-agreement with each HAC and Sourcing Alliance Participating Group.		20	
32)	Bidder agrees that termination without penalty with 90 days' notice will be allowed should Client experience a change in control due to an acquisition during the term of this agreement.		20	
33)	Do early termination fees apply under any circumstances? Describe each possible scenario.		20	
34)	Bidder agrees the standard payment terms will be to remit payment within five (5) business days following issuance of a pharmacy claims invoice.		5	
35)	Bidder agrees to allow annual market checks. Provide details of market check terms and timing.		20	
36)	Bidder confirms that Participating Groups will have a term without cause clause.		20	
37)	Bidder agrees that all responses in this Excel workbook will be binding, without regard to information provided in any RFP supplements or added Appendices. Failure to identify any disagreement to the minimum requirements indicates that Bidder is in full compliance with all requirements.		20	
Miscellaneous				

38)	Client has the right to review, meet with and sign off on the account executive, account manager and clinical pharmacist proposed by the Bidder. Bidder will agree not to change the assigned account team members without mutual consent from Client, unless a promotional opportunity or employment termination is the reason for the change. If any member of the account team is not meeting the service expectations of Client, Bidder agrees to fully support reassignment.		20	
39)	Bidder agrees that on an annual basis they will support review of Summary Plan Description (SPD) and Summary Benefit and Coverage (SBC) documents with Client or it's Designee due no later than 45 days prior to Client's Annual or Open Enrollment activities.		5	
40)	Bidder agrees that on an annual basis they will provide to Client or its Designee a detailed Plan Design Document tied to each plan design being administered on behalf of Client, due no later than 30 days prior to renewal date.		5	
41)	Bidder agrees that all Participating Group communications materials will be approved by HAC prior to release, and all communication materials to Participating Group employees will be approved by the respective Participating Groups.		5	
42)	Bidder agrees to have a Senior Executive attend one (1) Coalition Board of Directors meeting each year.		5	
43)	Bidder agrees to present innovation opportunities to Client and Participating Groups for pilot opportunities.		5	
44)	Bidder agrees to provide 2 years of identity theft protection to all impacted individuals in the event of data breach.		10	
Insurance				

45)	Comprehensive general liability, including personal injury, products and completed operations and contractual liability in an amount of not less than \$10,000,000 per occurrence		10	
46)	Excess liability insurance in an amount of not less than \$10,000,000		10	
47)	Pharmacists professional liability insurance, in an amount of not less than \$2,000,000 per occurrence, in excess of any self-retained risk		10	
48)	Pharmacy benefit management professional liability/Errors & Omissions insurance with minimum limits of \$20,000,000		10	
49)	Commercial auto liability insurance with a minimum \$2,000,000 limit		10	
50)	Workman's compensation and employer's liability with minimum statutory limits in all states		10	
51)	Network Security and Privacy Liability insurance with a minimum limit of \$20,000,000. Such insurance shall include, without limitation, coverage for unauthorized access, denial of service attacks, computer viruses, transmission of malicious code, and failure of security; breach of privacy and the failure to protect and disclosure of personally identifiable information, payment card information and health information; violation of any Law in connection with the protection of information including fines and penalties to the extent allowed by applicable Law; notification and crisis management costs, identity theft monitoring and regulatory defense		10	

52)	Confirm that your company will accept full responsibility for notification of participants and provision of identity theft protection if participant information housed in your company is lost or stolen.		10	
53)	Bidder Agrees to provide proof of Insurance annually to HAC and/or individual Participating Group		10	
Total Possible Points			600	

Information Security & Privacy

Full points are awarded if answers are sufficiently provided and security & privacy standards are met. Any bidder without sufficient security & privacy standards will be disqualified.

#	Description of the Services Provided and Information Shared	Bidder Response	Point Value	
1	What data applications will be utilized containing Client data? Has the service been penetration tested, at both the system and application level, by 3rd party security analysts? Does your policy allow an employer, or their delegate, to perform their own penetration test of the systems and application?		10	
2	Organization Description: a. Please list your locations and indicate the location type (i.e. offices, call centers, data centers, disaster recovery sites). b. How many employees and contractors? c. Where is your customer base? Do you service all states? If not, please list the states?	a. b. c.	10	
3	Outsourced Services: In the delivery of the services that you provide or will provide to Client, do you outsource any services? This includes operations, application development and data centers. Please describe the services being provided. a. Provide the complete legal name of the third party, their address(es) and the locations used. b. Do your third parties have any offshore locations? These includes operations, application development and data centers.	a. b.	10	
4	Offshore Services: In the delivery of the services that you provide or will provide to Company, do you use any offshore (i.e. outside the U.S.) services. a. Please list these locations. b. Please describe these services. This includes operations, application development and data centers. c. Subcontractors will be held to the same data security/policies, confidentiality and insurance commitments as the primary vendor. Confirmation needed.	a. b. c.	10	
5	Data Elements Shared: a. Please indicate whether any of the following Confidential-Highly Sensitive data elements are being shared to provide the services described above. 1. SSN 2. DLN 3. Bank Account Number 4. Credit / Debit Card Number 5. Employee Health Care Information 6. Consumer Call Recordings 7. Corporate Strategic or Financial Information 8. Encryption Keys, PKCS 12 Certificate Passwords 9. Passwords, PINs, Passphrases b. Please provide a list of any other data elements shared.	a. b.	10	
5	Please indicate what entities any of the above data elements may be shared with (examples: retail pharmacy, third-party vendor, third-party call center, mail order pharmacy, retail pharmacy, pharmaceutical companies, etc.)		10	
6	Data Flow: Please describe or provide a description of the individual Participating Groups data flow. If applicable, this should clearly identify any third parties used to provide services to the client.		10	
#	Security Category / Objective	Questions	Bidder Response	Point Value
7	Security Policy	Do you have a Security Policy? Are policies reviewed and updated at least annually? Is there evidence (i.e. revision dates, approvals, sign-offs) that policies are reviewed regularly? Please provide a copy of your Security Policy.		50
8	Compliance Management > To manage information security within the organization. > To ensure policies and procedures are in place to guide personnel in the management of information security for all systems. The information security policy should be reviewed on an annual basis to help ensure effectiveness.	Do you have established policies and procedures that ensure legal compliance with regulations (e.g. SOX, PCI, HIPAA, HITECH, GLBA) that apply to your company? Is someone in your company responsible for regulatory compliance? Please provide a copy of your Attestation of Compliance.		25
9		Vendor, in compliance with all GINA, ADA, HIPAA and other confidentiality regulations, will grant access to authorized personnel only for care management claim detail at the member level (minus any PHI) which reside in vendor's medical and disease management system. Vendor will only provide access to case notes to authorized medical personnel and will prevent access by unauthorized members.		25

10	Human Resources Security > To ensure that employees, contractors and third party users understand their responsibilities, and are suitable for the roles they are considered for. All candidates for employment, contractors and third party users should be adequately screened, especially for sensitive jobs.	Are <u>criminal</u> background checks performed on all appropriate parties (i.e. employees, temporary employees, contractors and third parties including offshore)? Do the results affect hiring decisions? Are they ongoing?		10
11		Do employees with access to Client data complete HIPAA training? Describe.		50
12	Third Party Relationships > To maintain the security of the organization's information and information processing facilities that are accessed, processed, communicated to, or managed by external parties.	Do you establish security requirements for all of your outsourced service relationships? How is this communicated? Do you monitor compliance to these established security requirements? Do you require evidence from an independent audit?		50
13		Do you maintain a physical and information asset inventory to enable the ability to apply controls based on the data? Do you classify all information assets relative to their value, legal requirements, sensitivity, and criticality to the organization? Do you have controls and procedures defined to protect the information assets based on their classification?		20
14	Data Security > To ensure effective management of information and technology assets and ensure that assets are accounted for appropriately.	Is Company Confidential-Highly Sensitive (C-HS) data (as defined in the Description of Services section item 5a above) encrypted in transit outside of the enterprise? What encryption methodology do you use?		50
15	> To ensure that cryptographic controls are strong enough to protect Company information. > To ensure that Suppliers return or certify destruction of all Company information when it is no longer needed to provide goods or services.	Is Company Confidential-Highly Sensitive (C-HS) data (as defined in the Description of Services section item 5a above) encrypted at rest ? How is it encrypted? What is the methodology/algorithm?		50
16		Is there a procedure to ensure sensitive data and licensed software is appropriately destroyed prior to equipment disposal, re-use, or upon Client termination? Does your process comply with NIST SP 800-88 data destruction standards? Do you use SDelete (compliant with NIST or a similar tool) to securely delete files housed on a shared server?		20
17		Do you have a Data Loss (Data Leak) Prevention and/or Detection solution?		20
18	Application Development Process > To ensure that application development procedures include appropriate controls to prevent malicious code and unauthorized access.	Do you have a documented Software Development Life Cycle (SDLC) for application development and enhancement to ensure availability and stable functional code? Please provide a copy of your policy and procedures for software and system development.		20
19	> To ensure changes to production environments are controlled through a standard change promotion process.	Do you have a governance process to ensure security requirements are met throughout the SDLC process? Are security requirements included in the systems architecture, design and deployment documents?		20
20		Do you educate developers on secure coding and then scan the application code for application vulnerabilities (e.g. OWASP top ten), conduct code reviews and/or conduct application vulnerability assessments before the application is elevated to production?		20
21	Consumer Facing Tools	Outline your security procedures for consumer facing tools (both web and smartphone apps).		50
22	Remote Access Security > To ensure that remote access users use an authorized and approved solution for remote access.	Do you have policies and technical controls in place to ensure data is appropriately secured when working remotely? Do your policies include guidance for remote access granted to vendors (e.g. HVAC)? Please provide a copy of your remote access security policies and procedure documentation.		25
23	> To ensure remote access attempts to all systems are logged, and information security personnel monitor failed login attempts.	Do you require two-factor authentication when working remotely? Which factors are required?		25
Total Possible Points				600

Non-Financial Performance Guarantees

#	Requirement	Yes / No	Bidder Comments	Point Value
1)	Bidder agrees that performance guarantees will be calculated at the Participating Group level. Indicate any deviations below. More points will be awarded for bidders who offer more guarantees at the Participating Group level.			20
2)	Bidder agrees to provide copy of standard measurement report for each guarantee selected by the Client.			10
3)	Bidder agrees to provide quarterly reporting upon request and provide annual reports automatically.			5
4)	Bidder agrees that fees at risk for all ongoing performance guarantees may be reallocated one time each calendar year by each individual Participating Group.			1

5)	Bidder agrees that any penalties for missed performance guarantees will be paid within ninety (90) days following the end of each contract year.			10
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Bidder to confirm acceptance of the performance guarantees below

#	Performance Guarantee Description	Guarantee Measurement	Reporting Frequency	PBM Acceptance Yes or No		
Account Management:					Point Value	Bidder Comments
6)	Account Team Satisfaction	Score of at least 8 out of 10 on mutually agreed upon survey tool	Quarterly		5	
7)	Account team response rate	100% of responses returned within 24 hours after initial contact during work week	Quarterly		5	
8)	Response time for critical issue resolution	Work plan developed and presented within 3 business days	Quarterly		5	
9)	Delivery of Management Reports	Within 15 business days following end of reporting period	Quarterly		5	
Member Service:						
10)	Average speed of answer	100% of calls answered in 25 seconds or less	Quarterly		2	
11)	Abandonment Rate	2% or less	Quarterly		2	

12)	Courtesy of Customer Service Representatives	An overall satisfaction of at least 90% of responses 3 or higher on a 5 point scale shall be guaranteed	Quarterly		2	
13)	Participant Refund Checks	Bidder guarantees that any applicable refund checks will be mailed to Plan Participants within fifteen (15) business days of amount resolution	Quarterly		2	
14)	Written Inquiries	Bidder guarantees 95% of all written inquiries received by bidder's customer service department from all Plan Participants will be responded to within 7 business days following the business day on which the inquiry was received.	Quarterly		2	
15)	First Call Resolution	98% of all calls resolved on first contact	Quarterly		2	
Mail Service:						
16)	Mail Service dispensing accuracy rate	99.99%	Quarterly		2	
17)	Mail Service turnaround time for prescriptions	Within 2 business days of receipt of prescription that does not require intervention	Quarterly		2	

	for prescriptions	Within 5 business days of receipt of prescription that requires intervention				
Operations and Claims Administration:						
18)	Eligibility	Must be processed within 24 hours of receipt of file with 100% accuracy	Quarterly		2	
19)	Eligibility Error Report	Bidder must produce an error report on eligibility file with updates within an average of twenty four (24) hours of bidder receiving a clean and complete electronic eligibility file, which is provided by Participating Group's eligibility vendor and/or Participating Group, as directed by Participating Group	Quarterly		2	

20)	Unprocessed Eligibility Transaction	Bidder guarantees that 100% of all unprocessed transactions will be communicated to the membership processor within 24 hours and a corrected measure will be identified and reprocessed within 24 hour of receipt of revised transaction.	Quarterly		2	
21)	Claim payment timeliness	97% of paper claims will be processed and paid within 5 days of receipt	Quarterly		2	
22)	Claim payment accuracy	100%	Quarterly		2	
23)	Participant Submitted Paper Claim Turnaround Time	Within an average of ten (10) business days bidder shall process at least 95% of all commercial paper Claims submitted by Plan Participants not requiring clarification.	Quarterly		2	

24)	ID card production (ongoing production--see below for PGs on Implementation)	Must be produced and mailed within 2 business days post receipt of both complete & accurate information	Quarterly		2	
25)	Formulary Notification	Bidder agrees to provide at least 90 days notice to the client prior to any formulary or drug list changes. Bidder agrees to provide membership impact associated with the formulary or drug list changes in advance, and notify members who will be disrupted in a manner agreed upon with the client.	Annually		2	
26)	Plan design changes/updates	100% accuracy within 7 calendar days following submission of proposed changes	Quarterly		2	

Implementations of New Participating Groups:

27)	ID Card Implementation / Re-Issue	<p>Provided bidder receives accurate data provided twenty (20) business days prior to effective date, 99% of enrollees to bidder will be mailed ID cards and a welcome kit five (5) business days prior to the effective date or re-issue date.</p>	One-time		2	
28)	Delivery and timeliness of initial welcome packets & other materials to members	<p>Based on accurate information provided by external vendors, if applicable, 99.5% of membership materials will be tested and documented accurate and mailed to Plan Participants according to the implementation plan project deliverable dates</p>	One-time		2	
29)	Eligibility loading and testing	<p>Per agreed upon implementation timeline</p>	One-time		2	

30)	Accuracy & timeliness of benefits set-up	Benefit plans and plan designs must be set up, tested, and signed off by the Participating Group and will be 99.5% accurate according to the implementation project plan deliverable dates. Benefit Plan set-up will have a 99.5% accuracy.	One-time		2	
31)	Accuracy of clinical programs set-up	100% accuracy as determined by independent audit	One-time		2	
32)	Overall Client Satisfaction of Implementation	Score of at least 80% is needed. For every 10% points under 80, 10% of the amount will be assessed. This penalty is due 60 days following receipt of the agreed upon survey.	One-time		10	
Total Possible Points					120	

Bidder Signature Page

The bidder must include this signature page in the Attachment A RFP response under Signature Tab.
Please sign in [BLUE INK](#).

Company: _____
Bidder Name: _____
Bidder Signature: _____
Bidder Primary Contact Name/email: _____
Date of Bid Submission: _____

Health Action Council & Cooperative Council of Governments RFP #2020.03.19 for PBM Services

Attachment B: Cost Proposal

Excelsior Solutions

Signature Tab

Pricing Requirements - Traditional Bids Tab

Pricing Requirements - Pass-Through Bids Tab

Other Credits and Fees Tab

Med Rx Alignment Credit Tab

Clinical Program Fees Tab

Pricing Scenarios Tabs

Lists Requested



2100 Ross Ave, Ste. 1200
Dallas, TX 75201

www.lockton.com
smartin@lockton.com
816-489-2545



Alignment Credit

The Health Action Council and CCOG are requesting PBM bidders offer an alignment credit, **preferably as a PMPM or PEPM**, to Participating Groups who select an aligned medical carrier, if applicable. (Examples: OptumRx and UHC, ESI and Cigna, CVS and Aetna, Anthem and Ingenio). To show the value of integration or alignment, please indicate the credit you will offer if a Participating Group selects the medical carrier you are aligned with.

Please note: The Proposal Team is not requesting integrated PBM/medical quotes or credits. The quoted credits would apply assumed a carved our pharmacy benefit, but selection of your aligned medical carrier.

As explained in Attachment F, more points will be awarded to bidders who are willing to provide a medical/pharmacy alignment credit. More points will be awarded for higher credits and fewer caveats. Bidders who are independent from any medical carrier can explain the advantages of their position in the area provided and will not be penalized for not providing a credit on this tab.

POINT VALUE: Maximum point value is 150 points.

Alignment Credit	
	Basis
What Alignment Credit is being offered?	
What medical vendor(s) must a Participating Group select to receive the credit?	
How can the alignment credit be used?	

Synchronization Credit or Savings Guarantee

The Health Action Council and CCOG are requesting PBM bidders offer a synchronization credit or savings guarantee to Participating Groups who select an aligned medical carrier, if applicable. (Examples: OptumRx and UHC, ESI and Cigna, CVS and Aetna, Anthem and Ingenio). To show the value of integration or alignment, please indicate a credit or savings guarantee for the Client, including how it is calculated, if a Participating Group selects the medical carrier you are aligned with.

Please note: The Proposal Team is not requesting integrated PBM/medical quotes or credits. The quoted credits would apply assumed a carved our pharmacy benefit, but selection of your aligned medical carrier.

As explained in Attachment F, more points will be awarded to bidders who are willing to provide a medical/pharmacy synchronization credit or savings guarantee. More points will be awarded for higher credits or savings guarantee, with a meaningful formula, and fewer caveats. Bidders who are independent from any medical carrier can explain the advantages of their position in the area provided and will not be penalized for not providing a credit on this tab.

POINT VALUE: Maximum point value is 50 points.

Synchronization Credit	
	Basis
What Synchronization Credit is being offered?	
What medical vendor(s) must a Participating Group select to receive the credit?	
How can the synchronization credit be used?	

Total Possible Points

200

Other Credits and Fees

Maximum Point Value is 100 Points. Points will be awarded based on estimated total credits less estimated total fees, adjusted down for any caveats around credit utilization, at the discretion of the Proposal Team.

Implementation Credits	Amount	Basis
What implementation credit is being offered?		
Bidder agrees individual Participating Group can use any remaining implementation credits during the life of the contract.		
How can the implementation credit be used?		
When will it be paid and what type of documentation is required?		

General Credits or "Ongoing Management Credits"		
What general or ongoing management credit is being offered?		
Is the credit provided each year or one time credit for the life of the contract?		
Bidder agrees the credit can be used for services including but not limited to, offsetting clinical program fees, ad hoc reporting, coding, audits and consulting fees. If there are any caveats, please explain.		
Bidder agrees the credit can be used to pay for outside third-party care management programs or point solutions. If there are any caveats, please explain.		
Will outstanding balance at the end of the year be an offset on the Participating Group's invoice?		

Pharmacy Network Access	Yes/No	Percentage & Approximate amount PMPY
Bidder agrees to pass through a percentage of the pharmacy network access they receive to Client		

Other Items with Separate Fees	Fee
ID Cards	
Paper Claims	
Manual Claims	
Other	
Other	
Other	
Other	
Other	

Non-Financial Performance Guarantees	
What is the total annual amount at risk for a Participating Group for the annual Performance Guarantees listed in Attachment A?	
What is the total one-time amount at risk for a Participating Group for the Implementation Performance Guarantees listed in Attachment A?	

Total Possible Points	100
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Pricing Requirements - Pass Through Bids

Question #	QUESTIONS - Please indicate YES/NO as applicable.	Bidder Response	Point Value	Comments to Bidders	Comments from Bidders
1	Bidder agrees that all answers in this document are binding and supersede any pricing supplement provided as an Appendix. Pricing supplements may be provided if you wish to provide more details but there is no guarantee it will be reviewed by the Proposal Team.		4		
Discounts					
	Bidder agrees the proposed "effective" generic discount and the generic discount guarantee calculation INCLUDES the following:			In addition to point value, valuation of the bids will be adjusted accordingly if this is not confirmed.	
2			5		
3			5		
4			5		
5			5		
6			5		
7			5		
8			5		
9			5		
10			5		
	Bidder agrees all proposed "effective" discounts and the discount guarantee calculation, dispensing fees and dispensing fee guarantee calculation EXCLUDES the following:			In addition to point value, valuation of the bids will be adjusted accordingly if this is not confirmed.	
11			5		
12			5		
13			5		
14			5		
15			5		
16			1		
17	Bidder agrees that all claims filled in all states and Puerto Rico are INCLUDED in discount guarantees.		1		
18	Bidder agrees that all claims filled in rural pharmacies are INCLUDED in discount guarantees.		1		
19	Bidder agrees that 100% Member Paid Claims (Zero Balance Due Claims) will be INCLUDED in discount guarantees, with discounts calculated based on the ingredient cost before the subtraction of member paid amount.		10		
Calculations/Definitions					
	Bidder agrees to all the following calculations/definitions				
	Average Wholesale Price (AWP) must be based on ALL of the following criteria:				
20	Provided by Medi-Span		10		
21	Actual date that the drug is dispensed		10		
22	Actual package size used for dispensing: PBM will not charge a higher AWP price based on repackaged products. This applies at retail, mail service and specialty.		10		
23	AWP used to calculate the claim (and quoted in pricing in this RFP) is the current, post-settlement AWP.		10		
24	U&C is defined as the retail price charged by a retail pharmacy for the particular NDC-11 dispensed on the date the drug was dispensed.		2		
25	Bidder agrees when HAC or the designated auditor or consultant is completing the annual pricing reconciliation, U&C claims will be identified and treated as U&C claims if the ingredient cost is equal to the U&C amount and the dispensing fee is \$0, OR ingredient cost plus dispensing fee equal the U&C amount provided in the claims file.		2		
	Ingredient Cost (including member share) is defined as the lesser of the following:				
26	AWP-Discout %		5		
27	MAC Price		5		
28	Usual & Customary Price		5		
29	Discount will always be calculated using this formula (all claims, including ZBDs): (1- [Ingredient Cost]/[AWP Price]) * 100.		5		
30	Gross Cost is defined as [Ingredient Cost] + [Dispensing Fee] + [Sales Tax].		5		
31	Gross Cost for vaccines is defined as [Ingredient Cost] + [Dispensing Fee] + [Sales Tax] + [Vaccine Fee].		1		

32	Any OTC exclusions do NOT apply to insulin or diabetic test strips.		1		
33	Biosimilars will be included in specialty brand discount guarantees and specialty rebate guarantees.		5	If not, quote separate pricing in appropriate tabs.	
34	Any manufacturer coupons will be excluded from ingredient cost calculations.		5		
35	Bidder agrees that a specialty generic medication is defined as any NDC with a Medispan indication of Y and the GPI 14 is on the Bidder's or individual Participating Group's specialty drug list.		1		
36	Please confirm that brand and generic definitions are based on indicators found in Medi-Span.		5		
37	If not, Please specify brand/generic indicator source:		1		
Guarantees					
38	Bidder agrees to apply individual Participating Group-specific guarantees to all pricing components: discounts, rebates, admin fees, dispensing fees		20	If not in all situations, indicate size threshold or other exceptions in comments.	
40	Bidder agrees to reimburse individual Participating Group or HAC 100% of the shortfalls resulting from the guarantees on a dollar-for-dollar basis. Shortfalls may not be limited in any way.		20		
41	Bidder agrees that all guarantees will be evaluated separately and performance from one guarantee may not be used to offset other guarantee performance within the proposal.		10		
42	During the contract term, Bidder agrees that the guarantees will not change.		10		
43	If not confirmed, please specifically explain the ONLY conditions upon which guarantees may change during the contract term.		10	Higher points will be awarded to bidders with fewest exceptions.	
At a minimum, the Bidder agrees that the following financial guarantees will be reconciled and paid on an annual basis 90 days after the end of each contract year. If the Bidder is willing to reconcile quarterly, please indicate in comments.					
44	Discounts		20	If not, indicate timing in the comments for partial points.	
45	Dispensing Fees		20	If not, indicate timing in the comments for partial points.	
46	Admin Fees		20	If not, indicate timing in the comments for partial points.	
Claims Adjudication					
47	Bidder agrees that individual Participating Group will pay Bidder for claims based on this equation: Ingredient cost + dispensing fee (when applicable) + sales tax (when applicable) – member copayment.		20		
Bidder agrees that Members will always pay based on the logic below:					
48	Retail - lowest of the U&C price, plan copayments/coinsurance, or discounted AWP (including MAC price)		10		
49	Bidder agrees that if the individual Participating Group plan design includes minimum copayments the member would pay the lower of U&C, Discounted Ingredient Price, MAC or copayment (including minimum copay in a coinsurance plan design)		10		
50	Mail Order - lower of plan copayments/coinsurance or discounted AWP (including MAC price)		5		
51	Bidder agrees there will be no price floors for amount paid on any claims.		5		
52	Bidder agrees to apply its most comprehensive, lowest-cost MAC list to individual Participating Group's prescription drug program throughout the term of the contract.		5		
53	Bidder agrees to provide HAC a copy of the current MAC file upon request.		1		
54	Bidder agrees to proactively notify individual Participating Group of a material MAC change equal to or greater than 10%.		1		
55	Bidder agrees there will not be a minimum number of manufacturers of the generic product in order for a DAW penalty to apply if the individual Participating Group has implemented a DAW policy.		1		
56	Bidder confirms its contracts with retail network pharmacies mandates that any pharmacy retail program charges (i.e. \$4 generic program for select medications) are submitted as the pharmacy's Usual and Customary charge to the Bidder.		1		

57	Bidder confirms its contract with retail network pharmacies mandates submission of all pharmacy related claims to the PBM if the member has pharmacy benefit coverage.		1		
Rebates				Certain questions below are not applicable to reinvested rebates, and bidders will not be penalized on the reinvested rebate portion of their quotes for indicating "Not Confirmed"	
58			40		
59	Bidder agrees that discount guarantees quoted must not include the impact of rebates. Rebates may not be included in the discount calculation when reconciling against a discount guarantee. This includes specialty drug discounts. For example, the guaranteed specialty discount must be based on the ingredient cost before any rebates are netted out.		20		
Rebates will be paid at the greater of the following:					
60	Minimum Dollar Guarantee		20		
61	100% of Rebate dollars received by PBM for the individual Participating Group's claims		20		
Bidder to indicate what sources of pharmaceutical manufacturer revenue Bidder receives and if Bidder is including that source in the 100% share passed to individual Participating Group. Y = Bidder receives revenue and is passing through to the individual Participating Group N= Bidder receives revenue but Bidder is NOT passing through to the individual Participating Group N/A = revenue is not received by the bidder					
62			10		
63			1		
64			10		
65			1		
66			5		
67			5		
68			5		
69			1		
70			1		
71			1		
72			1		
73			1		
74			20		
75			10		
76			20		
77			10	If not confirmed, bid valuation will be adjusted according to response below.	

78					
79			50		
80			10	If not, indicate timing in comments. More points will be awarded for shorter pay outs.	
81			5		
82			1		
83			20		
84			20		
85			20		
Mail Order					
86	Bidder agrees a MAC list will be in place at mail order.		10		
87	Bidder agrees the MAC list used at mail order will be either equivalent in price or more favorable than the MAC list used at retail at a drug level.		10		
88	Bidder agrees they will not pass any increases in mailing/postage fees to individual Participating Group during the contract term.		1		
89	Bidder agrees it will not use NDC's of licensed repackagers as a cost basis for calculating AWP discounts and charging for mail service pharmacy discounts.		1		
90	Bidder agrees that all proposed mail service pricing guarantees (administration fees, discounts, dispensing fees, rebates) would apply to all mail service prescriptions, regardless of days supply.		1		
HDHP					
91	Bidder agrees all Discount and Dispensing Fee guarantees provided will also apply to claims filled through the HDHP plan.		20		
92	If rebate guarantees vary for HDHPs and PPO plans, both sets of guarantees are provided in the pricing on the 3 Year Pricing Proposal tabs.		5		
93	Bidder agrees that any UM requirements still apply to drugs listed on the preventive drug list.		1		
Specialty Medications					
94	Bidder will be providing individual Participating Group specialty guarantees for each category on the pricing tab. Note that if the specialty guarantees are not provided, Bidder's specialty drugs will be valued at a 10% discount off of AWP.		5		
95	Bidder agrees the Specialty guarantees and rebates provided include Limited Distribution Drugs. If answer is no, the bidder will input a separate discount guarantee for Limited Distribution Drugs on the pricing tab.		5		
96	Bidder agrees to provide a list of LDD drugs.		5		
97	If this offer is drug specific (with or without an overall guarantee) the Bidder agrees to provide the guarantee at an NDC level as an attachment.		5		
98	Bidder agrees that the Specialty guarantees provided will include new Specialty drugs introduced to the market.		5		
99	Bidder agrees that the Specialty drug discounts provided are discounts off of AWP with discounts calculated based on Ingredient Cost before subtraction of member paid amounts, manufacturer coupons, rebate amounts, or any other offset amounts.		20		
100	The Bidder agrees the individual Participating Group or it's Participating Groups reserve the right to purchase specialty products from other sources with no impact to non-specialty guarantees. Please provide any fees for this scenario on the pricing tab.		5		
OTHER					
1	Bidder agrees that rebates received on OTC or other excluded claims are shared in their entirety with individual Participating Group.		20		

Total Possible Points	820
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Pricing Alt1: NADAC or Acquisition Cost Based Model

The Health Action Council is considering adding an alternative pricing model. Please describe your acquisition cost based model below by answers the questions and adding a further description and pricing as needed.

POINT VALUE: This model is optional for bidders. Bidders offering this model will be compared and scored relative to reach other based on the below.

Questions	Complete below
Is the only source of income the dispensing fees?	
Is there an admin fee in addition to the dispensing fee?	
How are specialty drugs priced?	
What acquisition cost metric is utilized? (NADAC, etc.)	
Are you able to offer any pricing guarantees?	
How many commercial clients (non-health plan) do you have using this model?	
How many lives (non-health plan) do you have using this model?	
Please provide a complete description of your pricing proposal:	

Pricing Alt2: Other Acquisition Cost Based Model

The Health Action Council is considering adding an alternative pricing model. Please describe your acquisition cost based model below by answers the questions and adding a further description and pricing as needed.

POINT VALUE: This model is optional for bidders. Bidders offering this model will be compared and scored relative to reach other based on the below.

Questions	Complete below
Is the only source of income the dispensing fees?	
Is there an admin fee in addition to the dispensing fee?	
How are specialty drugs priced?	
What acquisition cost metric is utilized? (NADAC, etc.)	
Are you able to offer any pricing guarantees?	
How many commercial clients (non-health plan) do you have using this model?	
How many lives (non-health plan) do you have using this model?	
Please provide a complete description of your pricing proposal:	

Proposed Pricing PBG - Pass-through, Broad, Guaranteed Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing PBG - Pass-through, Broad, Guaranteed Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees						
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing PBP - Pass-through, Broad, Point-of-Sale Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing PBP - Pass-through, Broad, Point-of-Sale Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			
Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			

In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees	Yes / No			Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees	Yes / No			Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing PNG - Pass-through, Narrow, Guaranteed Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing PNG - Pass-through, Narrow, Guaranteed Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing PNP - Pass-through, Narrow, Point-of-Sale Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing PNP - Pass-through, Narrow, Point-of-Sale Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
				HDHP plans		
Rebate Guarantees						
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-1

PEPM: rebates will be paid employee per month as list row 98

PMPM: rebates will be paid member per month as list row 98

Flat Credit: a predetermined rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TBG - Traditional, Broad, Guaranteed Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TBG - Traditional, Broad, Guaranteed Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TBP - Traditional, Broad, Point-of-Sale Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TBP - Traditional, Broad, Point-of-Sale Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TBR - Traditional, Broad, Reinvested Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TBR - Traditional, Broad, Reinvested Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of formulary quoted here	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TNG - Traditional, Narrow, Guaranteed Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TNG - Traditional, Narrow, Guaranteed Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TNP - Traditional, Narrow, Point-of-Sale Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TNP - Traditional, Narrow, Point-of-Sale Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees						
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees			Yes / No	Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Proposed Pricing TNR - Traditional, Narrow, Reinvested Rebates

Confirm Pricing below is reconciled at Participating Group Level. If any tiers or group size thresholds apply, please explain and add tabs for any variations based on Participating Group Size:	
Definitions to use in Bids	
Retail Days Supply	1-83
Extended Days Supply	84 +
Specialty Retail	1-83
Specialty Extended Days Supply	84 +
Specialty Pharmacy	Dedicated pharmacy that dispenses predominantly specialty drugs
Exclusive Specialty Network	Maximum of one grace fill at retail
Open Specialty Network	Two or more fills allowed at retail
Limited Specialty Network	Specialty network is greater than one but does not include retail pharmacies
Mandatory Mail	Mail order required after initial 2 fills of maintenance medication
Optional Exclusive 90 Day Network	90 day supply allowed at one retail store chain
Optional Limited 90 Day Network	90 day supply allowed at limited number of retail stores but not the entire network
Optional Open 90 Day Network	90 day supply allowed at any store in the network
Mandatory Exclusive 90 Day Network	90 day supply required after 2 fills of maintenance medication at one retail store chain
Mandatory Limited 90 Day Network	90 day supply required after 2 fills at limited number of retail stores but not the entire network
Mandatory Open 90 Day Network	90 day supply required after 2 fills at any store in the network
Limited Distribution Drugs	Specialty medications available from 3 or fewer pharmacies

Proposed Pricing TNR - Traditional, Narrow, Reinvested Rebates

What specialty network are you bidding?	
What formulary are you bidding?	
Name of current formulary	
What Mail Benefit are you bidding?	
What 90 Day Network are you bidding?	

	Year 1	Year 2	Year 3
Minimum Guaranteed Discount %			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply (84 plus) Retail Brand			
Extended Days Supply (84 plus) Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Maximum Guaranteed Dispensing Fees Per Claim			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
Retail Vaccine Dispensing fees			
Bidder agrees there will be NO dispensing fee applied to U&C or reversed/rejected claims			

Maximum Guaranteed Admin Fees			
Please specify how admin fees will be applied:			
PEPM, PMPM, or Flat Fee amount if applicable			
Retail Brand			
Retail Generic			
Mail Brand			
Mail Generic			
Extended Days Supply Retail Brand			
Extended Days Supply Retail Generic			
Specialty Retail Pharmacy Generics			
Specialty Extended Days (84 plus) Supply Retail Pharmacy Generics			
Specialty Pharmacy 1-83 Days Supply Generics			
Specialty Pharmacy extended days (84 plus) supply Generics			
Specialty Retail Pharmacy Brand			
Specialty Extended Days Supply (84 plus) Retail Pharmacy Brand			
Specialty Pharmacy 1-83 Days Supply Brand			
Specialty Pharmacy Extended Days (84 plus) days supply Brand			
Specialty Limited Distribution Drugs			
In-House pharmacy			
340B Claims			

	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Rebate Guarantees				HDHP plans		
The HDHP grid should only be filled out if the client has an HDHP plan listed on the Current Rx Plan Design tab AND separate rebate guarantees will be provided for the HDHP plans. If the client has an HDHP plan listed on the Current Rx Plan Design tab but rebate guarantees will be the same for all plans then please fill out the first grid only.						
Please specify how rebate credits will be applied:						
Per Rx, Per Brand Rx, PEPM, PMPM, or Flat Credit Amount						
Retail						
Retail Extended Days (84 plus) Supply						
Specialty Retail						
Specialty Retail Extended Days (84 plus) Supply						
Mail						
Specialty Pharmacy 1-83 Days Supply						
Specialty Pharmacy Extended Days (84 plus) Supply						
Please indicate if the following categories are EXCLUDED from Rebate guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Claims below minimum plan paid percentage						
Other (please specify)						
Please indicate if the following categories are EXCLUDED from Discount guarantees				Yes / No		
Compounds						
OTC - except insulin						
OTC - except test strips						
U&C Claims						
Devices						
Vaccines						
In-house pharmacies						
340B Claims						
Military Pharmacies						
Indian Health Services Pharmacies						
Veteran Affairs Pharmacies						
Long-term care pharmacies						
Limited Distribution Drugs						
COB						
Other (please specify)						
Other Fees						
High Deductible Health Plan Integration Fees						
Amount of Fee						
Fee Basis						
Specialty Carve Out Fees						
Fee Basis						
Point of Sale Rebate Fees						
Fee Basis						

REBATE INSTRUCTIONS

Per Claim: rebates will be applied per script, per brand script as listed in rows 99-105.

PEPM: rebates will be paid per employee per month as listed in row 98

PMPM: rebates will be paid per member per month as listed in row 98

Flat Credit: a predetermined flat rate will be paid as a rebate credit, the value of which is noted in row 98. This arrangement is very rare.

Bidder Signature Page

The bidder must include this signature page in the Attachment B RFP response under Signature Tab.
Please sign in [BLUE INK](#).

Company: _____
Bidder Name: _____
Bidder Signature: _____
Bidder Primary Contact Name/email: _____
Date of Bid Submission: _____

Pricing Requirements - Traditional Bids

Question #	QUESTIONS - Please indicate YES/NO as applicable.	Bidder Response	Point Value	Comments to Bidders	Comments from Bidders
1	Bidder agrees that all answers in this document are binding and supersede any pricing supplement provided as an Appendix. Pricing supplements may be provided if you wish to provide more details but there is no guarantee it will be reviewed by the Proposal Team.		4		
Discounts					
	Bidder agrees the proposed "effective" generic discount and the generic discount guarantee calculation INCLUDES the following:			In addition to point value, valuation of the bids will be adjusted accordingly if this is not confirmed.	
2			5		
3			5		
4			5		
5			5		
6			5		
7			5		
8			5		
9			5		
10			5		
	Bidder agrees all proposed "effective" discounts and the discount guarantee calculation, dispensing fees and dispensing fee guarantee calculation EXCLUDES the following:			In addition to point value, valuation of the bids will be adjusted accordingly if this is not confirmed.	
11			5		
12			5		
13			5		
14			5		
15			5		
16			1		
17	Bidder agrees that all claims filled in all states and Puerto Rico are INCLUDED in discount guarantees.		1		
18	Bidder agrees that all claims filled in rural pharmacies are INCLUDED in discount guarantees.		1		
19	Bidder agrees that 100% Member Paid Claims (Zero Balance Due Claims) will be INCLUDED in discount guarantees, with discounts calculated based on the ingredient cost before the subtraction of member paid amount.		10		
Calculations/Definitions					
	Bidder agrees to all the following calculations/definitions				
20	Provided by Medi-Span		10		
21	Actual date that the drug is dispensed		10		
22	Actual package size used for dispensing: PBM will not charge a higher AWP price based on repackaged products. This applies at retail, mail service and specialty.		10		
23	AWP used to calculate the claim (and quoted in pricing in this RFP) is the current, post-settlement AWP.		10		
24	U&C is defined as the retail price charged by a retail pharmacy for the particular NDC-11 dispensed on the date the drug was dispensed.		2		
25	Bidder agrees when HAC or the designated auditor or consultant is completing the annual pricing reconciliation, U&C claims will be identified and treated as U&C claims if the ingredient cost is equal to the U&C amount and the dispensing fee is \$0, OR ingredient cost plus dispensing fee equal the U&C amount provided in the claims file.		2		
	Ingredient Cost (including member share) is defined as the lesser of the following:				
26	AWP-Discout %		5		
27	MAC Price		5		
28	Usual & Customary Price		5		
29	Discount will always be calculated using this formula (all claims, including ZBDs): (1- [Ingredient Cost]/[AWP Price]) * 100.		5		
30	Gross Cost is defined as [Ingredient Cost] + [Dispensing Fee] + [Sales Tax].		5		
31	Gross Cost for vaccines is defined as [Ingredient Cost] + [Dispensing Fee] + [Sales Tax] + [Vaccine Fee].		1		

32	Any OTC exclusions do NOT apply to insulin or diabetic test strips.		1		
33	Biosimilars will be included in specialty brand discount guarantees and specialty rebate guarantees.		5	If not, quote separate pricing in appropriate tabs.	
34	Any manufacturer coupons will be excluded from ingredient cost calculations.		5		
35	Bidder agrees that a specialty generic medication is defined as any NDC with a Medispan indication of Y and the GPI 14 is on the Bidder's or individual Participating Group's specialty drug list.		1		
36	Please confirm that brand and generic definitions are based on indicators found in Medi-Span.		5		
37	If not, Please specify brand/generic indicator source:		1		
Guarantees					
38	Bidder agrees to apply individual Participating Group-specific guarantees to all pricing components: discounts, rebates, admin fees, dispensing fees		20	If not in all situations, indicate size threshold or other exceptions in comments.	
40	Bidder agrees to reimburse individual Participating Group or HAC 100% of the shortfalls resulting from the guarantees on a dollar-for-dollar basis. Shortfalls may not be limited in any way.		20		
41	Bidder agrees that all guarantees will be evaluated separately and performance from one guarantee may not be used to offset other guarantee performance within the proposal.		10		
42	During the contract term, Bidder agrees that the guarantees will not change.		10		
43	If not confirmed, please specifically explain the ONLY conditions upon which guarantees may change during the contract term.		10	Higher points will be awarded to bidders with fewest exceptions.	
At a minimum, the Bidder agrees that the following financial guarantees will be reconciled and paid on an annual basis 90 days after the end of each contract year. If the Bidder is willing to reconcile quarterly, please indicate in comments.					
44	Discounts		20	If not, indicate timing in the comments for partial points.	
45	Dispensing Fees		20	If not, indicate timing in the comments for partial points.	
46	Admin Fees		20	If not, indicate timing in the comments for partial points.	
Claims Adjudication					
47	Bidder agrees that individual Participating Group will pay Bidder for claims based on this equation: Ingredient cost + dispensing fee (when applicable) + sales tax (when applicable) – member copayment.		20		
Bidder agrees that Members will always pay based on the logic below:					
48	Retail - lowest of the U&C price, plan copayments/coinsurance, or discounted AWP (including MAC price)		10		
49	Bidder agrees that if the individual Participating Group plan design includes minimum copayments the member would pay the lower of U&C, Discounted Ingredient Price, MAC or copayment (including minimum copay in a coinsurance plan design)		10		
50	Mail Order - lower of plan copayments/coinsurance or discounted AWP (including MAC price)		5		
51	Bidder agrees there will be no price floors for amount paid on any claims.		5		
52	Bidder agrees to apply its most comprehensive, lowest-cost MAC list to individual Participating Group's prescription drug program throughout the term of the contract.		5		
53	Bidder agrees to provide HAC a copy of the current MAC file upon request.		1		
54	Bidder agrees to proactively notify individual Participating Group of a material MAC change equal to or greater than 10%.		1		
55	Bidder agrees there will not be a minimum number of manufacturers of the generic product in order for a DAW penalty to apply if the individual Participating Group has implemented a DAW policy.		1		
56	Bidder confirms its contracts with retail network pharmacies mandates that any pharmacy retail program charges (i.e. \$4 generic program for select medications) are submitted as the pharmacy's Usual and Customary charge to the Bidder.		1		
57	Bidder confirms its contract with retail network pharmacies mandates submission of all pharmacy related claims to the PBM if the member has pharmacy benefit coverage.		1		

Rebates			Certain questions below are not applicable to reinvested rebates, and bidders will not be penalized on the reinvested rebate portion of their quotes for indicating "Not Confirmed"		
58			40		
59	Bidder agrees that discount guarantees quoted must not include the impact of rebates. Rebates may not be included in the discount calculation when reconciling against a discount guarantee. This includes specialty drug discounts. For example, the guaranteed specialty discount must be based on the ingredient cost before any rebates are netted out.		20		
Rebates will be paid at the greater of the following:					
60	Minimum Dollar Guarantee		20		
61	100% of Rebate dollars received by PBM for the individual Participating Group's claims		20		
Bidder to indicate what sources of pharmaceutical manufacturer revenue Bidder receives and if Bidder is including that source in the 100% share passed to individual Participating Group. Y = Bidder receives revenue and is passing through to the individual Participating Group N= Bidder receives revenue but Bidder is NOT passing through to the individual Participating Group N/A = revenue is not received by the bidder					
62			10		
63			1		
64			10		
65			1		
66			5		
67			5		
68			5		
69			1		
70			1		
71			1		
72			1		
73			1		
74			20		
75			10		
76			20		
77			10	If not confirmed, bid valuation will be adjusted according to response below.	
78					
79			50		

80			10	If not, indicate timing in comments. More points will be awarded for shorter pay outs.	
81			5		
82			1		
83			20		
84			20		
85			20		
Mail Order					
86	Bidder agrees a MAC list will be in place at mail order.		10		
87	Bidder agrees the MAC list used at mail order will be either equivalent in price or more favorable than the MAC list used at retail at a drug level.		10		
88	Bidder agrees they will not pass any increases in mailing/postage fees to individual Participating Group during the contract term.		1		
89	Bidder agrees it will not use NDC's of licensed repackagers as a cost basis for calculating AWP discounts and charging for mail service pharmacy discounts.		1		
90	Bidder agrees that all proposed mail service pricing guarantees (administration fees, discounts, dispensing fees, rebates) would apply to all mail service prescriptions, regardless of days supply.		1		
HDHP					
91	Bidder agrees all Discount and Dispensing Fee guarantees provided will also apply to claims filled through the HDHP plan.		20		
92	If rebate guarantees vary for HDHPs and PPO plans, both sets of guarantees are provided in the pricing on the 3 Year Pricing Proposal tabs.		5		
93	Bidder agrees that any UM requirements still apply to drugs listed on the preventive drug list.		1		
Specialty Medications					
94	Bidder will be providing individual Participating Group specialty guarantees for each category on the pricing tab. Note that if the specialty guarantees are not provided, Bidder's specialty drugs will be valued at a 10% discount off of AWP.		5		
95	Bidder agrees the Specialty guarantees and rebates provided include Limited Distribution Drugs. If answer is no, the bidder will input a separate discount guarantee for Limited Distribution Drugs on the pricing tab.		5		
96	Bidder agrees to provide a list of LDD drugs.		5		
97	If this offer is drug specific (with or without an overall guarantee) the Bidder agrees to provide the guarantee at an NDC level as an attachment.		5		
98	Bidder agrees that the Specialty guarantees provided will include new Specialty drugs introduced to the market.		5		
99	Bidder agrees that the Specialty drug discounts provided are discounts off of AWP with discounts calculated based on Ingredient Cost before subtraction of member paid amounts, manufacturer coupons, rebate amounts, or any other offset amounts.		20		
100	The Bidder agrees the individual Participating Group or it's Participating Groups reserve the right to purchase specialty products from other sources with no impact to non-specialty guarantees. Please provide any fees for this scenario on the pricing tab.		5		
OTHER					
1	Bidder agrees that rebates received on OTC or other excluded claims are shared in their entirety with individual Participating Group.		20		
Total Possible Points			820		

ATTACHMENT C

HAC & CCOG RFP #2020.03.19

PHARMACY BENEFIT MANAGEMENT SERVICES

REQUIRED BIDDER INFORMATION & CERTIFICATIONS

Purpose of this Attachment C: HAC and CCOG require the following information about bidders who submit proposals in response to this RFP in order to facilitate the development of the contract with the winning bidder(s). The Proposal Team reserves the right to reject a bidder’s proposal if the bidder fails to provide this information fully, accurately, and by the deadline for submitting proposals set in **Section III A – RFP Timeline** in the RFP. Further, some of this information (as identified below) **must** be provided in order for the Proposal Team to accept and consider a bidder’s proposal. **Failure to provide such required information will result in a bidder’s proposal being deemed nonresponsive to this RFP, and therefore disqualified from consideration.**

Instructions: Provide the following information regarding the bidder submitting the proposal. Bidders should complete this document in Microsoft Word by filling out the form fields, printing the completed document, and signing it in the designated signature areas. It is mandatory that the information provided is certified with an original signature (in **BLUE INK**, please) from a person with sufficient authority and/or authorization to represent the bidder. As described in **Section IV A – Initial Qualifying Criteria** of the RFP, bidders are to provide one original completed and signed **Attachment C** in Tab 1 of the Technical Proposal submitted to CCOG and hard copies of the original in Tab 1 of the four Technical Proposals submitted to HAC and Excelsior Solutions. In addition, a scanned electronic copy of the original should be included in the USB jump drive submitted in each of the five proposal packages submitted.

BIDDERS MUST PROVIDE ALL THE INFORMATION OUTLINED BELOW

<p>1. HAC & CCOG RFP Name:</p> <p><u>Pharmacy Benefit Management Services</u></p>	<p>2. Proposal Due Date:</p> <p><u>April 20, 2020 at 5 PM Eastern</u></p>
<p>3. Bidder Name:</p> <p>_____</p> <p>(insert legal name of the entity responding to RFP)</p>	<p>4. Bidder Federal Tax ID #:</p> <p>_____</p>
<p>5. Bidder Corporate Address:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>6. Bidder Remittance Address (or "Same" if same as Item #5):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>



7. Print or type information about the bidder representative/contact person authorized to answer questions regarding the proposal submitted by your company:

Bidder Representative's Name: _____
Representative's Title: _____
Address 1: _____
Address 2: _____
City, State, Zip: _____
Phone #: _____
Fax #: _____
E-Mail Address: _____

8. Print or type the name of the bidder representative authorized to address contractual issues, including the authority to execute a contract on behalf of the bidder, and to whom legal notices regarding contract termination or breach, should be sent (if not the same individual as in #7, provide the following information on each such representative and specify their function):

Bidder Representative's Name: _____
Representative's Title: _____
Address 1: _____
Address 2: _____
City, State, Zip: _____
Phone #: _____
Fax #: _____
E-Mail Address: _____

9. Is this bidder an Ohio certified Minority Business Enterprise ("MBE")? Yes No

If yes, attach a copy of current certification as an appendix in Tab 3 of your Technical Proposal.

10. **Mandatory Bidder Certifications:**

CCOG may not enter into contracts with any bidders who have been found to be ineligible for state contracts under specific federal or Ohio statutes or regulations. Bidders responding to this RFP **MUST** certify that they are **NOT** ineligible by signing each of the four statements below. **Failure to provide proper affirming signature on any of these statements will result in a bidder's proposal being deemed nonresponsive to this RFP and eliminated from consideration.**

I, _____ (signature of representative shown in Item #7, above), hereby certify and affirm that _____ (insert name of the submitting bidder shown in Item #3, above), has not been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in transactions by the United States Department of Labor, the United States Department of Health and Human Services, or any other federal department or agency as set forth in 29 CFR Part 98, or 45 CFR Part 76, or other applicable statutes.

AND



I, _____ (signature of representative shown in Item #7, above), hereby certify and affirm that _____ (insert name of the submitting bidder shown in Item #3, above), is in compliance with all federal, state, and local laws, rules, and regulations, including but not limited to the Occupational Safety and Health Act and the Ohio Bureau of Employment Services and attest to the following: the bidder has –

- Not been penalized or debarred from any public contracts or falsified certified payroll records or any other violation of the Fair Labor Standards Act in the last three (3) years;
- Not been found to have violated any worker's compensation law within the last three (3) years;
- Not violated any employee discrimination law within the last three (3) years;
- Not been found to have committed more than one (1) willful or repeated OSHA violation of a safety standard (as opposed to a record keeping or administrative standard) in the last three (3) years;
- Not had an Experience Modification Rating of greater than 1.5 (a penalty-rated employer) with respect to the Bureau of Workers' Compensation risk assessment rating; and
- Not failed to file any required tax returns or failed to pay any required taxes to any governmental entity within the past three (3) years.

AND

I _____ (signature of representative shown in Item #7, above) hereby certify and affirm that _____ (insert name of the submitting bidder shown in Item #3, above), is not on the list established by the Ohio Secretary of State, pursuant to ORC Section 121.23, which identifies persons and businesses with more than one unfair labor practice contempt of court finding against them.

AND

I _____ (signature of representative shown in Item #7, above) hereby certify and affirm that _____ (insert name of the submitting bidder shown in Item #3, above), either is not subject to a finding for recovery under ORC Section 9.24, or has taken appropriate remedial steps required under that statute to resolve any findings for recovery, or otherwise qualifies under that section to enter into contracts with CCOG.

11. Supplemental Contract and Equal Employment Opportunity Information on the Bidder:

A. Provide data on bidder employees both nationwide (inclusive of Ohio staff) and the number of Ohio employees:

	<u>Nationwide:</u>	<u>Ohio Offices:</u>
Total Number of Employees:	_____	_____
% of those who are Women:	_____	_____
% of those who are Minorities:	_____	_____

B. If you are the winning bidder and this RFP involves the provision of services to HAC Members and Sourcing Alliance Members, will you subcontract any part of the work?

- NO -or-
- YES, but for less than 50% of the work -or-
- YES, for 50% or more of the work



C. If any part of your proposal would be performed by any subcontractors, provide the following information on each subcontractor (additional pages may be added as needed):

Subcontractor Name: _____
 Street Address 1: _____
 Street Address 2: _____
 City, State, Zip: _____
 Work to be Performed: _____

Estimated percentage of total proposal to be performed by subcontractors: _____ %
 (Do **NOT** show dollar amounts here; **show % of WORK** sub-contractors will perform/provide). Define the part of the work that will be performed by each subcontractor.

Subcontractor's employee information (attach additional pages if needed):

	Nationwide:	Ohio Offices:
Total Number of Employees:	_____	_____
% of those who are Women:	_____	_____
% of those who are Minorities:	_____	_____

12. The Proposal Team has identified the following minimum market size requirements for proposals of bidders participating in this RFP process to be considered; bidders must meet or exceed these requirements:

Minimum enrolled member population of 250,000. What is the current enrolled member population served by your company as of your most recently completed fiscal year? _____

Minimum drug spend under management of \$500 million annually. What was the drug spend under management during your most recently completed fiscal year? _____

I _____ (signature of representative shown in Item #7, above) hereby certify and affirm that _____ (insert name of the submitting bidder shown in Item #3, above) meets the minimum market size requirements of this **Attachment C Section 12** and that the enrolled member population and drug spend under management annually figures provided are accurate.

13. I _____, (name of bidder representative in Item #7, above) hereby affirm that this proposal submitted to HAC and CCOG accurately represents the capabilities and qualifications of _____ (insert name of submitting bidder as shown in item #3, above), and I hereby affirm that the cost(s) proposed in **Attachment B – Cost Proposal & Pricing Template** for the performance of services and/or provision of goods covered in this proposal in response to this RFP is a firm fixed price structure as described in the Cost Proposal, inclusive of all incidental as well as primary costs to be charged to Participating Groups. (Failure to provide the proper affirming signature on this item may result in the disqualification of your proposal.)

Signature _____ Date _____



GOVERNMENT BUSINESS AND FUNDING CONTRACTS
In accordance with section 2909.33 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division website for a reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

Form with fields: LAST NAME, FIRST NAME, MIDDLE INITIAL, HOME ADDRESS, CITY, STATE, ZIP, COUNTY, HOME PHONE, WORK PHONE.

COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION

Form with fields: BUSINESS/ORGANIZATION NAME, BUSINESS ADDRESS, CITY, STATE, ZIP, COUNTY, PHONE NUMBER.

DECLARATION

In accordance with division (A)(2)(b) of section 2909.32 of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

- 1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List?
2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List?

GOVERNMENT BUSINESS AND FUNDING CONTRACTS - CONTINUED

3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism?
 Yes No

In the event of a denial of a government contract or government funding due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division website.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced on page 1 of this declaration.

X

Signature

Date

ATTACHMENT B

SOURCING ALLIANCE ONE CARD RFP #2019.1

PROPOSAL SCORE SHEET

ATTACHMENT F

RFP #2020.03.19: PBM SERVICES PROGRAM

PROPOSAL SCORE SHEET

Phase I Review - Initial Qualifying Criteria

Each proposal must meet all of the following Phase I proposal acceptance criteria in order to be considered for further evaluation. Any proposal receiving a "no" response to any of the following criteria may be deemed nonresponsive to this RFP and disqualified.

#	Initial Qualifying Criteria	Bidder 1		Bidder 2		Bidder 3		Bidder 4		Bidder 5		Bidder 6		Bidder 7		Bidder 8	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1.	Did Bidder submit Attachments C, D, E, and G completely, with proper execution?																
2.	Was the Bidder's proposal received by the deadline as specified in RFP Section III - RFP Process & Timeline?																
3.	Did the bidder submit a proposal comprised of a Technical Proposal and a Cost Proposal, both submitted in separate, appropriately labeled, sealed envelope as required in RFP Section VI – Proposal Submission & Format?																
4.	In Attachment C – Required Bidder Information & Certifications, does the bidder state that it is NOT excluded from entering into a contract with CCOG due to restrictions related to the federal debarment list, unfair labor findings, or ORC § 9.24?																
5.	Did CCOG's review of the Auditor of State website verify that the bidder is NOT excluded from contracting with CCOG by ORC § 9.24 as a result of an unresolved finding for recovery?																
6.	In Attachment C – Required Bidder Information & Certifications, does the bidder meet the minimum size requirements? oThe bidder has a minimum enrolled member population of 250,000 people, and oThe bidder has a minimum drug spend under management of \$500 Million																
Does Bidder meet the Initial Qualifying Criteria? Yes or No.																	

Phase 2 Review - Scoring of Technical Proposal

The Proposal Team will score those Technical Proposals not eliminated in Phase I utilizing responses in Attachment A. The maximum Technical score is 1,540 points, and is based on the summation of the scores from each of the following tabs. A Technical Proposal must achieve a total of 1,200 points out of a possible 1,540 points to qualify for continued consideration. Only those bidders whose Technical Proposals receive a score that meets or exceeds the minimum required 1,200 technical points will advance to Phase III of the evaluation process.

Technical	Maximum Points	Bidder 1 Points	Bidder 2 Points	Bidder 3 Points	Bidder 4 Points	Bidder 5 Points	Bidder 6 Points	Bidder 7 Points	Bidder 8 Points
General Requirements - See Attachment A for maximum points assigned to each question on this tab.	600								
Data Requirements - See Attachment A for maximum points assigned to each question on this tab.	220								
Performance Guarantees - See Attachment A for maximum points assigned to each question on this tab.	120								
Information Security & Privacy - See Attachment A for maximum points assigned to each question on this tab.	600								
TOTALS:	1,540	0	0	0	0	0	0	0	0
Is Respondent's point total at least the 1,200-point minimum? Yes or No.									

Phase III Review - Cost Proposal

The Proposal Team will only consider Cost Proposals of Bidders whose Technical Proposal score is at least 1,200 points - all other proposals will be disqualified.

Pricing	Maximum Points	Bidder 1 Points	Bidder 2 Points	Bidder 3 Points	Bidder 4 Points	Bidder 5 Points	Bidder 6 Points	Bidder 7 Points	Bidder 8 Points
Pricing Requirements - Traditional Bids - See Attachment B for weight for each requirement.	820								
Pricing Requirements - Pass-Through Bids - See Attachment B for weight for each requirement.	820								
Bid Valuation	3,000								
Other Financials:									
Other Credits & Fees	100								
Medical Rx Alignment & Synchronization Credit	200								
Clinical Program Fees	100								
TOTALS:	5,040	0	0	0	0	0	0	0	0

Total Score - Technical Proposal + Cost Proposal Scores

The total of each bidder's Technical Proposal and Cost Proposal will be added together to calculate the final points awarded to each bidder. The Proposal Team will recommend awarding the contract(s) to the most responsible bidder(s) with the greatest bid score(s) in accordance with applicable public sector procurement guidelines.

	Bidder 1	Bidder 2	Bidder 3	Bidder 4	Bidder 5	Bidder 6	Bidder 7	Bidder 8
Technical Proposal Points Awarded	0	0	0	0	0	0	0	0
Cost Proposal Points Awarded	0	0	0	0	0	0	0	0
Total Points Awarded	0	0	0	0	0	0	0	0

Health Action Council

Attachment F: Proposal Scoring Guide

1. Phase II Review: Criteria for Scoring the Technical Proposal

The Proposal Team will score those Technical Proposals not eliminated in Phase I: Initial Qualifying Criteria by assessing how well the bidder meets the requirements as specified in Attachment A.

The maximum Technical score is 1,540 points, and is based on the summation of the scores from each of the following tabs of Attachment A:

- General Requirements – Maximum 600 Points, weight for each requirement shown in Attachment A
- Data Requirements – Maximum 220 Points, weight for each requirement shown in Attachment A
- Performance Guarantees – Maximum 120 Points, weight for each performance guarantee shown in Attachment A
- Information Security & Privacy – Maximum 600 Points, weight for each question shown in Attachment A

Based on the bidder's responses, each question or component may receive anywhere from 0 points up to the maximum points indicated for that question or component, at the Proposal Team's discretion, if there are conditions, caveats, or unfavorable comments in the response. Only responses that are fully agreed without conditions or caveats will receive to maximum score for that question or component.

As Information Security & Privacy is of utmost importance to HAC and all Participating Groups, bidders without sufficient security & privacy provisions in place may be eliminated from the process as the Proposal Team's discretion.

A maximum of 1,540 points will be awarded for the Technical Proposal. **A Technical Proposal must achieve a total of 1,200 points (a score which represents that the bidder can successfully perform the resulting contractual duties) out of a possible 1,540 points to qualify for continued consideration.** Any Technical Proposal which does not meet the minimum required Technical Proposal point threshold will be determined nonresponsive to this RFP and the associated Cost Proposal will neither be opened nor considered.

All bidders whose Technical Proposals meet the minimum scoring threshold will process to the next level of review, which is consideration of the Cost Proposal.

2. Phase III Review: Criteria for Scoring the Cost Proposal

The Proposal Team will review Cost Proposals to determine the best overall financial value for HAC, CCOG, and Participating Groups as outlined in Section IV C – Cost Proposal & Pricing Template and Attachment B.

The maximum Cost Proposal score is 5040 points, and is based on the summation of the scores from the bid valuation and each of the following tabs of **Attachment B**:

- Pricing Requirements – Traditional Bids – Maximum 820 Points, weight for each requirement shown in **Attachment B**
- Pricing Requirements – Pass-through Bids – Maximum 820 Points, weight for each requirement shown in **Attachment B**
- Bid valuation – Maximum 3,000 points
- Other financials – Maximum 400 points. Other Credits & Fees is worth 100 points, Medical Rx Alignment & Synchronization Credit is worth 200 points, and Clinical Program Fees is worth 100 points.

Based on the bidder’s responses, each question or component may receive anywhere from 0 points up to the maximum points indicated for that question or component, at the Proposal Team’s discretion, if there are conditions, caveats, or unfavorable comments in the response. Only responses that are fully agreed without conditions or caveats will receive to maximum score for that question or component.

Details for “Other Financials”:

- **Other Credits & Fees (100 points):** More points will be awarded for higher credits and lower fees. Caveats around credits may result in fewer points.
- **Medical Rx Alignment Credit (150 points):** As explained on this tab of **Attachment B**, more points will be awarded to bidders who are willing to provide a medical/pharmacy alignment credit. More points will be awarded for higher credits and fewer caveats. Bidders who are independent from any medical carrier can explain the advantages of their position in the area provided and may receive partial points at the Proposal Team’s discretion based on the response.
- **Medical Rx Synchronization Credit or Savings Guarantee (50 points):** As explained on this tab of **Attachment B**, more points will be awarded to bidders who are willing to provide a medical/pharmacy synchronization credit or savings guarantee. More points will be awarded for higher credits or savings guarantee, with a meaningful formula, and fewer caveats. Bidders who are independent from any medical carrier can explain the advantages of their position in the area provided and will not be penalized for not providing a credit on this tab.
- **Clinical Program Fees (100 points):** More points will be awarded to bidders with lower or no fees for each program. At the Proposal Team’s discretion, partial points may be deducted if a bidder is unable to offer one or more of the clinical programs listed. Additional points may be awarded based on offered ROI guarantees.

Details for “Bid Valuation”:

Based on the drug mix and utilization within the Claims Data Extract, Excelsior Solutions has established a baseline spend projection using reasonable trend assumptions and actual performance of discounts, dispensing fees, rebates, administrative fees, and other cost components. This pro forma baseline spend projection for years 2022, 2023, and 2024 will be compared against which each bidder’s resulting spend projection. Each bidder’s resulting spend projection is based on a claims repricing utilizing each bidder’s specific responses in the Cost Proposal.

Given that not all Participating Groups have the same plan management setup, the RFP specifies a specific set of pricing scenarios based on the predominant plan management setups across the coalition. Please record your pricing terms for each requested Underwriting Rule Set in the appropriate tables in **Attachment B**. Also please provide written documentation on the pricing menu you are offering for the Participating Groups whose plan management setup does not match the pricing scenarios requested.

The bid valuation score will be based on the weighted pricing scenarios and both one-year and three-year savings. Please note the bid valuation will reflect your responses on the other portions of **Attachment B**. The bid with the higher savings will receive the full score. Partial scores will be awarded to other bidders based on the relative savings projection.

Details for NADAC or Acquisition Cost-based Models (Pricing Alt1 and Alt2):

As this is an alternative model some Participating Groups may be interested in, the bid valuation for these models will be compared separately from the other pricing scenarios. Bid valuations will be conducted based on the pricing source or benchmark indicated in the bidder's RFP response.

Bidders proposing Alt1 and/or Alt2 only (not the other scenarios) should still complete all tabs of Attachment B and indicate when a question is not applicable.

HAC and the Proposal Team reserve the right to compare Alt1 and/or Alt2 proposals relative to each other, disregarding other pricing scenarios and bidders who did not respond to the optional Alt1 and/or Alt2 pricing scenarios, if HAC wishes to add one of these scenarios as an additional option for Participating Groups.

HAC and the Proposal Team reserve the right not to award an Alt1 or Alt2 pricing option.

3. Final Scoring

The total of each bidder's Technical Proposal and Cost Proposal will be added together to calculate the final points awarded to each bidder. The Proposal Team will recommend awarding the contract(s) to the most responsible bidder(s) with the greatest bid score(s) in accordance with applicable public sector procurement guidelines. See **ATTACHMENT F – Proposal Score Card** (Excel document) for the scoring grid