



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
BUREAU OF MANAGEMENT SERVICES / PURCHASING
245 MCKEE ROAD
DOVER, DELAWARE 19904

TO: ALL OFFERERS

FROM: PURCHASING SERVICES ADMINISTRATOR

SUBJECT: RESPONSES TO RFP QUESTIONS FOR PROPOSAL NO.:
DOC1427-PHARM, Correctional Health Care Pharmaceutical Services

ADDENDUM #6 – September 27, 2013

DE Department of Correction submits the following Consolidated Response to questions submitted between September 20th through September 26th. All other terms and conditions of the RFP remain unchanged.

QUESTION #1

Section:

Paragraph:

Page:

Question: Is your current contract rate for pharmacy services based on the actual acquisition cost of medications plus a per inmate per month (PIPM) fee? If so, what is the current PIPM fee?

Answer: Currently services are PIPM. The current rate is proprietary.

Question: If the rate is based on another format, can you please provide that format and rate?

Answer: N/A

Question: If any items such as consultative services and delivery are itemized, can you provide those costs?

Answer: This information is proprietary.

QUESTION #2

Section:

Paragraph:

Page:

Question: What is the average aggregate dollar amount spent per month on pharmacy services and medications over the past 12 months?

Answer: \$447,266.85

QUESTION #3

Section:

Paragraph:

Page:

Question: Do your facilities currently use a barcode electronic order reconciliation and medication return management system?

Answer: Yes, we do have bar code electronic order reconciliation in all but one facility; which we anticipate will be up and running by the implementation of the new contract.

QUESTION #4

Section:

Paragraph:

Page:

Question: Will you require the wholesaler to provide FDA-mandated pedigree papers for stock medications?

Answer: Yes

Question: Will you deem bidders that choose not to, or cannot, provide pedigree papers to ensure the integrity of your supply line as non-responsive and therefore ineligible for an award?

Answer: This has to be determined based upon the overall ability to ensure the quality of the prescriptions.

QUESTION #5

Section:

Paragraph:

Page:

Question: Will you mandate that the pharmacy vendor use a FDA-registered repackager to ensure compliance with federal regulations?

Answer: We expect all FDA requirements are adhered to.

Question: Will you require bidders to provide, as part of the proposal, evidence (the repacker's license and labeler code) that they use an FDA-registered repackager, as this is the only means to ensure compliance?

Answer: No, we do not need a sample.

Question: Will failure to provide proof of compliance with federal regulations deem a bidder non-responsive and therefore ineligible for an award?

Answer: Yes.

QUESTION #6

Section:

Paragraph:

Page:

Question: Will you mandate that the pharmacy vendor be in complete compliance at the time of proposal submission with this requirement before they can reclaim medications and provide credit to your facilities?

Answer: Each proposal must interpret the FDA requirements and give a reasonable explanation on how they will meet those requirements.

(Question #6 continues next page)

Question: Will you require a sample blister card to be submitted by each bidder as proof of compliance with this requirement?

Answer: No

Question: Will vendors unable to ensure the safety of your patients through their inability to track the lot number and expiration dates of return medications be deemed non-responsive and therefore ineligible for an award?

Answer: Each proposal must interpret the FDA requirements and give a reasonable explanation on how they will meet those requirements.

Question: Are you currently receiving credit on partial blister cards if they are not labeled as unit dose packaging?

Answer: This is proprietary information.

QUESTION #7

Section:

Paragraph:

Page:

Question: Are pharmacy delivery personnel who currently enter your facilities employees of your incumbent provider of services or subcontracted employees? If subcontracted, can you provide the name of the subcontracted agency?

Answer: The delivery personnel for our pharmacy vendor are employees of the vendor.

QUESTION #8

Section:

Paragraph:

Page:

Question: Are the current Pharm.D. clinical pharmacists employees of your incumbent provider of services or are they subcontracted employees? If subcontracted, can you provide the name of the subcontracted agency?

Answer: The current PharmD. Clinical pharmacists are employees of our provider.

QUESTION #9

Section:

Paragraph:

Page:

Question: How many inmates take multiple (more than 1) long term drugs?

Answer: Currently, there are 4,584 patients with more than 1 active order.

QUESTION #10

Section:

Paragraph:

Page:

Question: As pricing is a component of the RFP, will the DDOC provide a list of the top 100 medications by quantity, along with total units (number of tablets or capsules) for each line item dispensed during the past 12 months? Such a list will allow the DDOC to compare actual acquisition costs (AAC) of medications among vendors, as not all vendors have the same AAC on medications. A comparative listing of medications actually used will allow the DDOC to see the variances in AAC that can be offered by different bidders versus the AAC hidden in a comprehensive submission.

Answer: This information is not available.

QUESTION #11

Section:

Paragraph:

Page:

Question: The RFP asks for total aggregate pricing, which could be interpreted as the total cost of all medications along with a management fee for a total bid. Without knowing the current formulary or the health service provider that will be awarded the contract, predicting the total aggregate cost, to include medications, is impossible. Please clarify if the DDOC intends for the pharmacy vendor to bill the actual acquisition cost (AAC) of medications written by health service providers each month and then submit a per inmate per month management fee?

Answer: Yes, the DDOC intends for the pharmacy vendor to bill the actual acquisition cost (AAC) of medications written by health service providers each month and then submit a per inmate per month management fee.

QUESTION #12

Section: II

Paragraph: B.1.b.

Page: 5

Question: What number (or percentage) of orders are (is) dispensed as KOP each month?

Answer: This information is not available.

QUESTION #13

Section: II

Paragraph: B.2.a.

Page: 6

Question: This section indicates that vendors are required to provide individual pricing information specific to the certain areas. Although the current pharmacy contract is all-inclusive, a reasonable expectation is that the DDOC currently receives the breakout by category, as requested in the RFP. Could the DDOC provide the individual pricing information for the past 12 months for the following categories?

- Prescription medication actual acquisition cost (AAC) charged to the DDOC for the past 12 months
- Over-the-counter (OTC) stock item medication actual acquisition cost (AAC) charged to the DDOC over the past 12 months
- Total dollars charged to the DDOC for daily delivery services over the past 12 months
- Total dollars charged to the DDOC for Pharm.D. consultative services over the past 12 months
- Total dollars charged to the DDOC for pharmacy inventory management services over the past 12 months

Answer: This information is proprietary.

QUESTION #14

Section: II

Paragraph: B.4.a.ii.

Page: 7

Question: Does the RFP require that one of the Pharm.D. clinical pharmacists also be a registered nurse and that another has experience with Geriatric Pharmacy? Additionally, what credentials is the pharmacy vendor required to provide to support experience in Geriatric Pharmacy?

Answer: Please see prior week's questions and answers.

QUESTION #15

Section: II

Paragraph: B.4.a.iv.

Page: 8

Question: At the pre-bid closing conference, the DDOC stated that a vendor does not need to provide an electronic ordering and eMAR system as the DDOC has one in mind for deployment. What are the names of the system and of the software vendor? Will the system provide electronic order entry and electronic medication pass?

Answer: It is a proprietary system of the DOC based upon DACS and is not commercial system. It will provide electronic order entry and electronic medication pass.

QUESTION #16

Section: II

Paragraph: B.4.a.iv.

Page: 8

Question: What is the cost of equipment purchased under this requirement over the past 12 months? Do you have any current costs associated with maintenance contracts? Do you anticipating any equipment purchases during 2013-2014?

Answer: We have had no pharmacy purchases for equipment in pharmacy and no maintenance costs at this time.

QUESTION #17

Section: II

Paragraph: B.15.

Page: 13

Question: Is the vendor to pay for these services and then pass them on to the DDOC as a pass-through cost, which is typical within the correctional industry for emergency medication needs? Or, is the vendor to absorb the cost of these services as part of its bid rate? If so, what is the dollar cost over the past 12 months for backup medications and delivery expenses?

Answer: The vendor is to absorb the cost of these services as part of its bid rate. The dollar cost over the past 12 months is proprietary.

QUESTION #18

Section: II

Paragraph: C.4.a.

Page: 16

Question: Please provide the name of the current database that vendors access to obtain this information? Is this database owned by the DDOC or a third party vendor?

Answer: The database is accessed by the DOC EHR software through the Delaware Health Information Network (DHIN). It is a database owned by the State of Delaware.

QUESTION #19

Section: II

Paragraph: C.10.h.

Page: 22

Question: Regarding morbidity and mortality (M&M) review, how many M&M consultations involved Pharm.D. clinical pharmacist participation during the past 12 months?

Answer: We do not have information available on the number of individual consults performed in the last year. As a quality improvement initiative we anticipate this will begin with the next contract.

QUESTION #20

Section: II

Paragraph: B.1

Page: 5

Question: Are the stated chemotherapeutic medications in oral form only?

Answer: Yes.

Question: Is the Pharmacy Vendor required to supply any sterile intravenous preparations?

Answer: Yes, there may be non-chemotherapy IV fluids in the infirmaries or dialysis unit.

Question: If the Pharmacy Vendors' overall drug testing program is approved by the Bureau Chief are the few Pharmacy Vendor employees at DDOC facilities (delivery personnel and clinical pharmacists) required to participate in a random urine analysis program?

Answer: The random drug screening policy that the vendor has in place would be evaluated by the Bureau Chief and if approved the pharmacy vendor would not fall under the DDOC drug testing policy.

QUESTION #21

The following was submitted as a Question:

RFP Appendix F

Page 55, Line 2260

Deliverables Table—Proposal Items Due October 4, 2013

Regarding the specific items highlighted in the table, what does the DDOC require to be submitted? Please clarify.

Answer: Appendix F is not the deliverables table, Page 55, Line 22 is not related to this, and there are no specific items highlighted in the table. Please clarify the above submission if you require a clarification/answer for next week's Q&A publication.