Jail & Juvenile Facility Pharmaceutical Services
Addendum #1
8/18/16

1. Revised Due Date: Monday, August 22, 2016 at 3pm

2. Regarding the statistics on page 2 of the RFP:
   - Do the prescription volume and cost figures represent the average monthly utilization? **Monthly**
   - Or, are those figures annual representations of County utilization?

3. If your facilities receive medications in blister cards: **Yes**
   - Do you currently receive your patient-specific blister cards with each individual bubble of the blister card labeled with the medication's name and strength, lot number, expiration date, and manufacturer's name to allow those medications to be safely—and in many states legally—returned for credit? **No, only the card is labeled.**

4. Do your facilities have a state pharmacy license or any type of clinic license issued by the state board of pharmacy?
   The pharmacy provides their license.

5. Does each facility have a U.S. Drug Enforcement Administration (DEA) registration, which is required to receive stock controlled substances (i.e., Schedule II-IV medications)? **No**
   If not, is each facility's physical address listed as the business address on the DEA registration of at least one of your facility's providers? **Yes**

6. Nearly every correctional facility nationwide has some degree of emergency, night-locker, or first-dose starter stock on hand. Facilities often overlook that a pharmacy provider cannot dispense more than 5% of their overall company-wide sales as stock. (Federal Register, Vol. 64, No. 232, 21 CFR Parts 203/205, III, H, 4.)Additionally, a provider is required to be a licensed wholesaler in California to distribute wholesale quantities of stock medications in California**.** Therefore, to comply with federal and state regulations, a pharmacy provider must be a licensed wholesaler or use the services of a wholesaler licensed both in their home state and in California to distribute wholesale quantities of stock medications.
   - Will you require bidders to comply with this regulation and include this documentation in their proposals to show whether they use a pharmacy provider that is licensed as a wholesaler or whether they use the services of a California-licensed wholesaler? **No**
   - Will failure to provide proof of compliance with federal regulations, specifically this requirement, deem a pharmacy bidder as non-responsive and therefore ineligible for an award? **No**
   - Will you mandate that the pharmacy vendor be a National Association of Boards of Pharmacy (NABP) Verified-Accredited Wholesale Distributor (VAWD) for stock distribution? Will you require documentation to be submitted as part of the proposal? **No**

7. Do you receive stock in 30-count blister cards or in original manufacturers' bulk bottles? **Blister cards**
   If not, how does your current vendor provide your facilities with stock medications in accordance with the Drug Supply Chain Security Act (DSCSA)?

8. If you currently receive stock in blister cards, a pharmacy or a wholesaler cannot simply put those medications in a card, label them as stock, and still be in full regulatory compliance. A company must be an FDA-registered repackager or use the services of an FDA-registered repackager to legally repackage stock medications into blister cards or any other packaging that results in a change to the original manufacturer's packaging.
   - Will you mandate that the pharmacy vendor comply with the regulations and use an FDA-registered repackager if stock is provided in packaging other than the original manufacturer's packaging? **Yes**
   - Will you require bidders to provide evidence (such as the repackager's license and labeler code) that they use an FDA-registered repackager? **No**
   - Will failure of a pharmacy bidder to comply with FDA repackaging regulations regarding the provision of stock deem that bidder non-compliant and therefore ineligible to receive an award? **Yes**

9. What company is your current pharmacy services provider? **Contract Pharmacy Services**

10. Is your current contract rate for pharmacy services:
   - A discount to average wholesale price (AWP)? If so, what is the current discount percentage to AWP?

   AWP-17.2% for brand and AWP - 70% for generic

   - Acquisition cost plus a dispensing fee? If so, what is the current dispensing fee?

   No Dispensing fee

   - If other, please describe or explain how the current pricing is structured and the current rates?

11. Item 10: Pricing on page 4 of RFP seems to allow bidders to determine their own pricing formula for pharmacy services. As you know, numerous formulas for pricing exist—such as AWP minus a discount rate, WAC, and acquisition cost plus a dispensing fee. Without a standard formula, a utilization list, or a medication list to price out, it is not clear how the evaluation committee can compare pricing formulas to determine the lowest cost.
   - To ensure that various vendors submit their pricing in such a way that your committee will be able to conduct and fair and equal comparison and be able to clearly identify the lowest-cost provider, would you provide an addendum with a recent actual invoice that vendors can use to price out the medications using their proposed pricing formulas? **Information not being provided; The County would like to vendor to provide their own pricing formula/structure**
   - If not, would the County require all bidders to use the same formula—such as a discount to AWP—so that the bidder with the largest discount percentage would be determined as the lowest-cost bidder? **Bidders should submit the best and final best pricing formulas.**

12. Regarding credits on returns:
   - Are you charged a processing fee for each returned card? **No**
   - Are your returns subject to a minimum dollar value per returned item? **No**
   - Do you receive credit on all returned medications or only on those where each individual bubble of the blister cards is labeled with the medication name and strength, lot number, expiration date, and manufacturer's name?

   Credit for all returned medications

13. Knowledge of utilization is important in determining a final and accurate bid rate. This information should be readily available from your current vendor or from your billing statement, and it would provide actual utilization to bidders that would otherwise have to project utilization. The bidders would then be able to firmly establish their bid rates and provide a total cost projection, as required in your RFP in Exhibit D. Without these figures,

your incumbent provider of services would have a decisive advantage over other bidders as only they would know actual utilization.

- Can you please provide (as an addendum) copies of your two most recent monthly pharmacy invoices or two recent monthly medications utilization reports that include actual pharmacy utilization data (with patient names redacted)? **Information not being provided**

14. Regarding shipping and receiving:

- Will all medications be shipped to and received at one central location? **No**
- Or, will medications also need to be shipped to the juvenile facility? If so, please provide details.

Two separate shipments – one to the jail and one to Juvenile Hall

15. Regarding electronic ordering and eMAR:

- Does your current pharmacy vendor provide your facilities with an electronic prescription order entry and eMAR system at no additional cost? **Yes**
- If so, what is the name of the system? **ECorrRx**
- If not, would you consider issuing an addendum to your current solicitation that adds this requirement, as electronic med pass at a facility as large as your facilities could decrease the time for a single med pass by up to 50% and that time could be used to provide other healthcare services? **Not required**

16. Regarding electronic ordering and reconciliation:

- Does your current pharmacy vendor provide your facilities with a barcode electronic order reconciliation and medication return management system at no additional cost? **No**
- If not, would you consider issuing an addendum to your current solicitation that adds this requirement, as manual daily order check-in and return processing time could be decreased by up to 75% at a facility as large as your facilities? **Not required**

17. Regarding online reporting:

- Do your facilities and county administrators currently have access to a web based online reporting dashboard provided at no cost by your current pharmacy for you to access meaningful and accurate reporting 24/7/365? **No**
- If not, would you consider issuing an addendum that adds this requirement to your current solicitation so your staff can analyze prescriber ordering trends and costs to better manage facility operations through accessible reporting? **Not required**