



Addendum # 2

STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF GROUP BENEFITS (OGB)

NOTICE OF INTENT TO CONTRACT (NIC)

FOR

**PHARMACY BENEFIT MANAGEMENT (PBM)
SERVICES**

ISSUED

December 11, 2009

REVISED

SECTION V – Questionnaire – C. Mail Service/Specialty Pharmacy

PROPOSER INFORMATION/QUALIFICATIONS/EXPERIENCE

Questionnaire

Please respond to all questions outlined in this section. Each question must be answered specifically. Reference should not be made to a prior response.

C. Mail Service/Specialty Pharmacy

1. Your policies prevent you from dispensing any prescriptions using medication within 120 days of the medication’s expiration date.

Mail Service		
Yes	No	NA
Specialty Pharmacy		
Yes	No	NA

2. You allow mail service prescription refills by telephone using a credit card.

Mail Service		
Yes	No	NA
Specialty Pharmacy		
Yes	No	NA

3. You allow mail service prescriptions refills by the Internet using a credit card.

Mail Service		
Yes	No	NA
Specialty Pharmacy		
Yes	No	NA

4. The following mechanisms are available to notify participants of their next refill date:

- At time of initial fill
- Through proactive phone call
- Internet email
- Post card/letter
- Other

Mail Service			Specialty Pharmacy		
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	Yes	Yes	No	NA

5. If a patient reports that a prescription drug is lost in the delivery process, you will replace the drug at no cost to the payer (i.e., OGB).

Mail Service			Specialty Pharmacy		
Yes	No	Yes	Yes	No	NA

6. OGB employees can purchase the following at their expense through the mail facility:

- OTCs
- Vitamins
- Nutritional supplements
- DME
- Other

Mail Service			Specialty Pharmacy		
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA
Yes	No	NA	Yes	No	NA

7. When auditing your mail service facilities, your audit criteria are more stringent and detailed than your retail audit criteria. Explain.

Mail Service			Specialty Pharmacy		
Yes	No	NA	Yes	No	NA

8. You have a disaster recovery plan, which would be used in the event of a mail service facility closure or local disaster where members reside.

Mail Service			Specialty Pharmacy		
Yes	No	NA	Yes	No	NA

9. Please provide copies of all materials mailed to members receiving mail service prescriptions.

10. Provide your book-of-business drug mix over the past year separately for mail and retail. Provide number of single source brands, multi-source brands, generic, and specialty. Please provide numbers and percentages.

Drug Mix Percentage for 2008

	Single Source Brands		Multi-Source Brands		Generic		Specialty	
	#	%	#	#	%	%	#	%
Retail 2008	#	%	#	#	%	%	#	%
Mail Service 2008	#	%	#	#	%	%	#	%

11. What was your book-of-business generic substitution rate (GSR) at mail service during the first six months of 2009?

Brand to Generic	
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12. Indicate the location, percent capacity, and hours of operation of the mail order and specialty facility you are proposing for OGB.

	Location (City, State)	Percent Capacity	Hours of Operation (i.e., dispensing)
Mail			
Specialty			

13. Please outline the procedure for tracking/replacing prescriptions sent to patients that are reported lost or stolen.

14. Using the table below, provide your Mail Order performance statistics over the past two years:

Mail Order Facility Statistics	2008	YTD 2009
Total number of prescriptions dispensed		
Utilization as a percent (%) of capacity		
Average turn-around time (no intervention required)		
Target turn-around time (no intervention required)		
Average turn-around time (intervention required)		
Target turn-around time (intervention required)		

15. Are specialty/biotech drugs dispensed from your mail order pharmacy or at a separate facility? If at a separate facility, briefly describe your routing procedures if a prescription for a specialty/biotech drug is sent to the standard mail order pharmacy.

16. Using the table below, provide your Specialty Pharmacy performance statistics over the past two years:

Specialty Pharmacy Facility Statistics	2008	YTD 2009
Total number of prescriptions dispensed		
Utilization as a percent (%) of capacity		
Average turn-around time (no intervention required)		
Average turn-around time (intervention required)		

17. How do you define and classify “specialty/biotech” drugs for dispensing purposes (i.e., determining what products are filled at the Specialty Pharmacy). Is this definition consistent with your pricing of specialty/biotech drugs?
18. Do you (or any subcontractors) repackage drugs for your mail order/specialty dispensing operations? If yes, how is the Average Wholesale Price (AWP) determined for the repacked product and does it match the unit AWP of the source labeler?
19. Will you provide postage-paid return envelopes for refill orders to OGB members along with their filled mail order/specialty prescription?
20. What is the minimum length of time (in days) that a mail order/specialty prescription would have to be delayed before a short-term retail supply is offered to the member? In addition, please explain:
 - a) What criteria are used to determine whether or not a short-term retail supply is authorized?
 - b) Under what circumstances is the member contribution not waived for the short-term retail supply?
21. How are members notified when a mail order/specialty prescription is delayed due to the following circumstances?
 - a) A prescription requiring clarification from the physician or physician's agent (e.g., missing quantity, illegible drug name)?
 - b) A clean prescription where the delay is due to the vendor's operational, capacity, or drug supply issues?
 - c) A clean prescription where the delay is a result of the vendor's therapeutic switch intervention?
22. Describe your shipping procedures and protocols for medications that are temperature sensitive.
23. How do you manage wholesale drug shortages, including the process for seeking alternative procurement or adjusting dispensing levels?

24. What is the standard days' supply for specialty drugs dispensed at the mail order/specialty pharmacy? Can OGB customize the allowable supply, and are there any other plan design requirements or parameters specific to specialty drugs?
25. Discuss your capabilities for ensuring that all specialty/biotech drugs are appropriately processed through OGB's pharmacy program rather than its medical benefit. Provide a recent case study where you were successful in "carving out" specialty drug claims from a medical plan that helped achieve measurable savings for the plan sponsor.
26. Confirm your willingness to lock out all artificial (i.e., 'dummy') DEA numbers, including your own mail facility DEA number, and describe your ability to ensure that the correct physician DEA number is included with each mail order claim.
27. Confirm your willingness and ability to print claim price information (e.g., total claim cost and member/plan cost share) on mail order/specialty pharmacy invoices or offer other services to accomplish this objective.