

REQUEST FOR PROPOSALS

ADDENDUM # 2

ISSUED: AUGUST 4, 2014

RFP NUMBER: CSP904515
INDEX NUMBER: DMH007

The State of Ohio, through the Department of Administrative Services, Office of Procurement Services, for the Ohio Department of Health is requesting proposals for:

PRESCRIPTION ADJUDICATION SERVICES

Reasons for Addendum: Change quantity of Department of Youth Services facilities from four (4) to three (3) on page 17, paragraph 4.

PROPOSAL DUE DATE: August 22, 2014
OPENING LOCATION: Department of Administrative Services
General Services Bid Desk
4200 Surface Road
Columbus, Ohio 43228-1395

*4. CENTRAL PHARMACY INPATIENT (CPI). CPI focuses on best practices for patient care within state, county or governmental inpatient settings. CPI offers competitively priced medications through consolidated purchasing, formulary management, medication monitoring, and coordinated care to ensure that health care dollars are spent wisely. Central Pharmacy Inpatient (CPI) customers eligible to use the on-line adjudication service include 26 Department of Rehabilitation and Corrections institutions and three (3) Department of Youth Service's facilities. CPI required services shall include, but not be limited to, the following:

- a. The Offeror shall provide a system with plan limits, a provision that will limit prescription fills to a five (5) day supply, or one (1) unit of use item (i.e. one inhaler, one small tube of cream, etc.). Exceptions to this limit would require a prior authorization code for every fill, including a thirty (30) day prescription.
- b. The Offeror will provide an override process for emergency situations.

5. BILLING REQUIREMENTS. Services expected at time of billing shall include the following:

- a. The Offeror shall invoice a processing/administrative fee for only paid adjudicated claims individually. The invoice must indicate the requested reimbursement and the actual amount paid. Reimbursement of prescriptions will be at state of Ohio Medicaid levels.

Three invoices are required to be generated. The first invoice is utilized to reimburse the pharmacy provider. A second invoice or Account for Prescription Form must be generated with the six (6) data elements listed below, but must also include a line for the administrative fee for processing the claims listed. This invoice would represent the total charge to the facility/clinic. A third invoice would need to be generated for the prescription processing organization representing the administrative fees to be reimbursed.

Invoices shall show all listed charges in detail. An invoice or Account for Prescription must be generated for each pharmacy provider which includes the following information:

1. Name of Pharmacy Provider.
 2. National Association of Boards of Pharmacy (NABP) Member Number.
 3. Tax ID Number of Pharmacy Provider.
 4. Remit Address for Pharmacy Providing Service.
 5. Phone number of Pharmacy Provider.
 6. If Pharmacy Name and Remit Name are different, both names must appear and the Tax ID and Remit Name must be delineated per W-9 on file with State of Ohio Accounting.
- b. The Offeror shall provide a detail of claims reversed or adjustments made to payments. A processing fee reimbursement shall be credited to the Agency for claims billed in error or reversed.
 - c. The Offeror's billing system shall include auditing and technical services required to meet State requirements.
 - d. The Offeror shall provide weekly billings in a format as required by State Accounting or the Office of Support Service's (OSS) fiscal department. Also weekly, a detailed billing file shall be submitted to OSS. Facility/Clinic Name and Number representing the patients listed on the Account for Prescription is required.

CONTRACTOR RESPONSIBILITIES. The Contractor must meet all RFP requirements and perform Work as defined in the Scope of Work.

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