

March 12, 2018

**BOARD OF COUNTY COMMISSIONERS
ORANGE COUNTY, FLORIDA
IFB #Y18-1000
GROUP MEDICAL AND PHARMACY PLAN**

ADDENDUM NO.1

This addendum is hereby incorporated into the Request for Proposals document. The following items are clarifications, corrections, additions, deletions and/or revisions to and shall take precedence over the original documents. Deletions are denoted by ~~strike through~~ and additions via underline.

The bid opening date remains **Tuesday, March 20, 2018**.

1. **Question:** The File 4 Pharmacy Network and Formulary only provides 7 digits for the NDC column on the Formulary tab. Please provide the full 11 digit NDC number so that we may properly run the file as with the 7 digits they are all coming up as invalid NDC numbers.

Answer: Form 4, Pharmacy Network and Formulary has been revised and is titled Revised 3.12.18 Form_4_Pharmacy_Network_and_Formulary located at <ftp://ftp.ocfl.net/divisions/Purchasing/pub/Current%20Bids%20and%20RFPs%20-%20Large%20Files/Y18-1000/>

2. **Question:** The proposal format on page 12 of the RFP document states that all pages in proposal must be numbered sequentially and indicate the name of the Proposer. Please confirm if we can restart the sequential numbering per tab or do we need to do it sequential from the beginning to end?

Answer: The proposal format shall be in accordance with the requirements stated on page 12, **PROPSAL FORMAT** of the Request for Proposals, sequential numbering from beginning to end.

3. **Question:** On Form 2, Health Plan Proposal Worksheet Section 2 question 10 states: Confirm that Proposer shall provide finance and banking arrangements that shall include documentation for claims reimbursement prior to payment and shall meet the accounting needs of the County, as determined by the County. Can you please clarify exactly what type of reporting that you will be looking for Proposers to provide to the County?

Answer: Additional reporting to substantiate the request for reimbursement per the Scope of Service, section 2 Administrative Services, letter J.

4. **Question:** On Form 1 Mandatory Features question 14 states: The Proposer agrees to the County's claims funding arrangement which allows the County to "push" funds to the

Proposers designated account. Can you please clarify exactly what you mean by “push” funds to the Proposers?

Answer: The County will direct funds to an account set up by the Proposer. Proposer will not draw funds directly from the County’s account.

5. **Question:** On Form 3 Medical Network, can you please clarify what you mean by Quality Designation?

Answer: Proposers shall indicate whether the network provider meets Proposer’s Care, Quality and Efficiency standards in column G in Form 3, for which the Proposer provides additional recognition within Proposer’s network listings.

6. **Question:** On Form 3 Medical Network can we add any additional columns to indicate any additional Special providers we may have?

Answer: Responses shall comply with the instructions listed at the top of each worksheet.

7. **Question:** Please confirm the exact number of on-site positions and what responsibilities the County is requesting. This is based on the following statement from the RFP:

1. One (1) Full time and one (1) Part time for a total of two (2) client service representatives (CSR) to act as a member advocate to resolve medical and prescription issues. The CSR will have on-line administrative access for eligibility additions, changes and deletions and have the authority to resolve eligibility and claim issues.
2. One (1) Full time Health Coach to assist the County with wellness initiatives and work directly with employees.
3. Two (2) Full time registered dietitians to assist the County with wellness initiatives and work directly with employees.

Answer: Per the RFP the County is looking for five (5) on-site resources as outlined.

8. **Question:** What is your vision for the dedicated case manager? Is the interaction more aligned to providing data related to high claimants? Or to have a single case manager aligned to the members?

Answer: Case management services shall include assisting individuals to ensure appropriate treatment beyond acute care settings and work closely with the County to continually review and make improvement in the process of those services.

9. **Question:** We have reviewed Exhibit K “OC ENTERPRISE SECURITY STANDARDS, POLICIES, AND GUIDELINES ENCRYPTION AND CERTIFICATION AUTHORITIES” in order to confirm our compliance with the Mandatory Features Checklist. Upon review, this document appears to be the internal data security policies

for Orange County Board of County Commissioners. Typically, in order to confirm compliance, we are provided with a more generic data security agreement and/or questionnaire. Can you confirm the correct document was attached for review?

Answer: Confirmed

10. **Question:** Form 1, #15 refers to “Exhibit X” however the Medical and Pharmacy Claims file layout is labeled Exhibit G. Can you please confirm that it is the document and layout you are referring to?

Answer: Yes, on Form 1, question #15 should refer to Exhibit G.

ACKNOWLEDGEMENT OF ADDENDA

- a. The bidder shall acknowledge receipt of this addendum by completing the applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned not later than the date and time for receipt of the bid.
- b. Receipt acknowledged by:

Authorized Signer

Title

Name of Bidder

Date Signed