



ADDENDUM #1

February 7, 2020

TO: ALL INTERESTED PARTIES

FROM: RON VENTURELLA, BUNCOMBE COUNTY PROCUREMENT MANAGER

SUBJECT: ADDENDUM #1 FOR RFI PrEP/PEP Medication 340b Pharmacy Contracting

The following changes, revisions, additions, and/or clarifications to the plans and/or specifications are hereby made a part of the original documents.

Addendum # 1

The following questions were asked by potential bidders (listed in no particular order):

1. What drugs are to be included as part of the PrEP and PEP protocols for BCHHS?
Truvada, Descovy, Isentress
2. Would drugs be expected to be issued as stock or would they be ordered as needed for specific patients?
Issued as stock
3. What is the volume of medication orders expected?
We estimate to have 50 patients utilizing this program by the end of 2020. Medications are filled monthly, ie 50 scripts per month
4. What is meant by "total cost of ownership for the solution" referenced in Section 2.0, C., 1, bullet point number two?
Be sure to take into account any known upcoming changes in the industry when considering cost.
5. What is the expectation for expansion and evolution to meet all service and performance requirements?
This is a new program with BCHHS. We currently have 36 patients enrolled, half of which are commercially insured and would utilize this service. We have not advertised for this service but anticipate more enrollment as awareness increases.
6. What reporting and/or auditing elements would be required by BCHHS?
BCHHS would require monthly reports of dispensed medications under the 340B program. BCHHS would also require monthly client invoice showing reimbursement of medications dispensed and remittance to BCHHS.

7. What is the frequency of expected reports and/or audits?
monthly
8. What is the daily census expected (in order to estimate PIPM requirements)?
Estimated 1.5 patients per day by the end of 2020
9. Are “expected administrative fees,” referenced in Section 3.0.3 in place of traditional dispensing fees?
To calculate this, use the following equations:
(Total amount reimbursed per client per transaction) – (Amount agency will keep per client per transaction) = (Amount agency will remit to BCHHS per client per transaction)
Expected Administrative Fee = (Amount Agency will keep per client per transaction) / (Total amount reimbursed per client per transaction)
10. Please provide the total lives count?
We anticipate having 50 340B eligible clients enrolled into this program by the end of the year.
11. What “unique benefits” would be expected/desired by BCHHS for its clients? (Section 3.0.5).
Copayment support services (ie assistance with copay card enrollment), refill reminders
12. May we contact the 340B manager for BCHHS to discuss details of the current program?
Yes. Monica Dillingham, PharmD 828-250-5234
13. RFI indicates medications are to be provided to clients of BCHHS clinical services.
 - Are clients housed in a closed-door institutional type setting or are clients seen on an outpatient basis and reside at a personal residence?
Patients are seen on an outpatient basis and reside at a personal residence
 - Will medications need to be sent to the BCHHS Clinical location or sent to personal residences?
Medications may be sent to personal residences or available at retail pharmacy location for pick up
14. Please confirm that written response are limited to 5 pages in total when responding to the bullet points in Section 3.0- Requested Information part of the RFI.
Written responses are limited to 5 pages
15. Is BCHHS the current covered entity for 340B medications or is there another agency serving as the covered entity eligible to receive 340B medications?
BCHHS is the current covered entity
16. Questions Concerning response #3
 - Would it be preferable to provide a range of estimated per client per month payment that would be made, or would you prefer an average estimated payment amount?

Per client per month is preferred

- Would you like us to break down the estimated per client per month payment by drug (Truvada, Descovy, Isentress, Tivicay), or would you prefer one aggregate average/range?

Break down payment per client per drug

17. Would you please provide a list of NPI numbers for prescribers affiliated with the BCHHS? This will assist us in providing our most accurate estimate of benefit to the BCHHS.

- Dr. Jennifer Mullendore 1417991845
- Dr. Christine Posner 1821191131
- Bonny Runion, FNP 1073955647
- Wendy Young, FNP 1972674828

18. Would you please provide an estimate of monthly patient volume of patients served by the BCHHS under this program?

We anticipate to have 50 eligible patients enrolled into this program by the end of 2020.

19. Would you please provide a list of drugs you anticipate filling through this program, and please provide an estimate of monthly volume the BCHHS anticipates filling through this program.

Truvada, Descovy, Isentress

20. What requirements does the BCHHS have for vendors to have dispensing locations within the county?

No requirements

21. What requirements does the BCHHS have for vendors with regard to pharmacy staffing for this program?

Pharmacy/pharmacist must be licensed and permitted to dispense medications in the state of NC.

END OF ADDENDUM #1

RFI PrEP/PEP Medication 340b Pharmacy Contracting