Questions Related to Request for Proposals for Pharmacy Services

1. (Services to be Provided 1.d) Is it correct to assume that the definition of standard orders would be those orders that are accurate, complete, and the medication is readily available? If, for example, there is a supply issue or clarification is needed from the prescriber, then would it be reasonable to assume that additional time would likely be needed for these orders?

Yes it is correct that standard orders would be orders that are accurate, complete, and the medication is available.

2. (Services to be Provided 1.e) Specifically around injectable medications, but in general, is there an established formulary (i.e., the attached formulary) or is the attached only a sample/example of potential formulary?

The attached is a sample formulary. We plan to develop a more specific formulary once the RFP is awarded.

3. (Services to be Provided 1.k) Would it be possible to clarify the 24 hr. turnaround time? Is it safe to assume 24 business hours or is there an alternative expectation?

The 24 hr. turnaround is not business hours. The expectation is that there will be some weekend hours. The only time we envision longer than 24 hours is if someone needs a prescription on Sunday.

4. (Services to be Provided 1.l) Are there specific parameters JCG expects to be monitored to ensure program performance or is this up to the interpretation of the pharmacy?

This will be developed after the RFP is awarded.

5. (Services to be Provided 1.t) Is this referring to a “case by case” basis whereby a medication is needed to be shipped to the home due to extenuating circumstances? Or is this asking for a mail order option to be available for all members? Or is this referring to specifically the procurement process when JCG can purchase medication more competitively than the pharmacy?

This is in reference to the procurement process when JCG can purchase meds more competitively than the pharmacy.
6. (Pricing, Reimbursement and Billing 2.a) Does this refer to the pharmacy administering Pharmacy Benefits Management (PBM) services which would bill JCG for services provided or that the pharmacy will bill for services provided? Also, for “services provided” does that include any services beyond traditional pharmacy/medication dispensation?  
   This would refer to billing JCG for services provided (for example managing inventory). The traditional pharmacy/medication dispensing fee would also need to be provided.

7. (Pricing, Reimbursement, and Billing 2.b) Does JCG have an existing Pharmacy Benefits Management (PBM) company that will handle the plan set-up that a pharmacy will bill prescription claims electronically to the established prescription plan? Or, will the pharmacy need to handle the plan set-up with an in-house PBM?  
   JCG has an existing PBM but willing to discuss the in-house PBM option.

8. (Pricing, Reimbursement and Billing 2.c) Does this refer to an expectation that the patient can place copays on a charge account to paid at a later date (account receivable) vs. paying at the services are rendered?  
   Patients are expected to pay co-pays at the time service is rendered.