



Community Care Plan PBM RFP

Pricing Assumptions:

Traditional Discount & Fee Guarantees

Assumption

Lowest of Assumption - Members will pay the lowest of (i) copay, (ii) U&C or (iii) contracted rate. In no event will the member pay full copay if the contracted cost is lower. There will not be a minimum paid amount at any pharmacy including at mail.

Retail 90 will apply to all retail claims with a day supply of 84 and greater.

Terms and conditions for the Effective Rate Guarantees stated below are outlined in the requirements section of this RFP.

Mail pricing at retail equivalent if applicable

	National Network			Preferred Network		
Pricing Summary	Yr 1	Yr 2	Yr 3	Yr 1	Yr 2	Yr 3
Discounts						
Minimum Retail Brand Effective Rate						
Minimum Retail Single Source Generic						
Minimum Retail Generic (GER)						
Minimum Retail 90 Brand						
Minimum Retail Single Source Generic 90						
Minimum Retail 90 Generic (GER)						
Maintenance Brand 90						
Maintenance SS Generic						
Maintenance Generic 90						
Mail Brand						
Mail Single Source Generic						
Mail Generic						
Specialty Retail						
Specialty PBM Channel						
Compound Drugs						
Dispensing Fees						
Retail Brand						
Retail Single Source Generic						
Retail Generic (GER)						
Retail 90 Brand						

Retail 90 Generic (GER)						
Maintenance Brand 90						
Minimum Retail Single Source Generic 90						
Minimum Retail 90 Generic (GER)						
Maintenance Brand 90						
Maintenance SS Generic						
Maintenance Generic 90						
Mail Brand						
Mail Single Source Generic						
Mail Generic						
Specialty Retail						
Specialty PBM Channel						
Compound Drugs						

Admin Fee	Yr 1	Yr 2	Yr 3
Per Rx			
Retail			
Retail 90 Day			
Maintenance 90			
Mail			
Specialty Retail			
Specialty PBM Channel			

Florida Healthy Kids

	Open			Exclusion		
Rebate	Yr 1	Yr 2	Yr 3	Yr 1	Yr 2	Yr 3
Retail Brand						
Retail Brand 90 Day						
Maintenance Brand						
Mail Brand						
Specialty Retail						
Specialty PBM Channel						

Medicaid Supplemental Rebates

	Open			Exclusion		
Rebate	Yr 1	Yr 2	Yr 3	Yr 1	Yr 2	Yr 3
Retail Brand						
Retail Brand 90 Day						

Maintenance Brand						
Mail Brand						
Specialty Retail						
Specialty PBM Channel						



Additional Fees			
		Fee	Fee Basis
	Recommended Clinical Programs (Please provide description under separate appendix.)		
1.	Ad Hoc Reports		
2.	Pharmacy Call Center		
3.	Member Call Center		
4.	Member Call Center - After Hours Only		
5.	Standard member communication (printing and mailing)		
6.	Standard physician communication (printing and mailing)		
7.	Additional member services		
8.	Coordination of Benefits		
9.	Group Set Up Fees		
10.	ePrescribing - Cost for Prescription Benefit transaction (including Patient Eligibility Data and Patient Formulary Data)		
11.	ePrescribing - Implementation Fee		
12.	ePrescribing - Additional Fees (Please list all)		
13.	Eligibility - Direct Access		
14.	Manual Eligibility Maintenance		
15.	Electronic Paid Claims File to client (bi-weekly)		
16.	Claims data transmission to third party vendors (daily/real-time)		
17.	Systems Access Fee		
18.	On-line PA Management Tool - View access		
19.	On-line PA Management Tool - Edit access		
20.	On-line Reporting (standard) - specify number of users		
21.	On-line Reporting (custom) - specify number of users		
22.	Bi-directional data exchanges		
23.	Formulary Development and P&T Committee support (including clinical monographs) if PBM's standard formulary is used.		

24.	Formulary Development and P&T Committee support (including clinical monographs) if client has custom formulary		
25.	Concurrent DUR Programs		
26.	Retrospective DUR Programs - standard		
27.	Retrospective DUR Programs - additional		
28.	Step Therapy Programs		
29.	Utilization Management Programs - Custom Criteria Set-up Fees (ST, QL, etc.)		
30.	Coverage determination clinical reviews		
31.	Disease education programs		
32.	Per diem nursing		
33.	Additional clinical services or programs		
34.	Coverage Determination (PA)		
35.	Prior Authorization - Administrative Overrides		
36.	Prior Authorization - Clinical Overrides		
37.	Prior Authorization - Electronic (ePA) Fees		
38.	Prior Authorization - Custom Criteria Set-up Fee		
39.	Member Submitted Paper Claims Processing		
40.	Pharmacy Auditing		
41.	Fraud, Waste, and Abuse Program - standard		
42.	Fraud, Waste, and Abuse Program - enhanced		
43.	Postage		
44.	Other - Please Describe		
45.	Other - Please Describe		
46.	Other - Please Describe		
47.	Other - Please Describe		
48.	Other - Please Describe		

CLIENT CREDITS AND ALLOWANCES		
Implementation Credit - to cover documented third party expenses incurred by the client that are directly associated with the implementation of your organization's services. This is IN ADDITION to the Implementation Audit Allowance specified in the Financial Requirements section of the Questionnaire.		

<p>Pharmacy Management Account (PMA): An account pre-funded by the PBM Vendor to be used by plan sponsor for actions intended to maximize value of the pharmacy program. Funds may be used for items including, but not restricted to, programming for customization, design and implementation of clinical or other programs, communications, documented expenses related to staff education and industry conference attendance, auditing, data integration and analytics, consulting fees, and engagement of relevant vendors that impact pharmacy program strategy and results.</p>		
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Electronic File for PBM Analysis
Layout Summary

File Type and size

FHK = Florida Healthy Kids
SFCCN = Florida Medicaid

Repricing Assumptions

										PBM to Provide											
Sequence	Product/Drug Label Name	Drug ID (NDC)	Pharmacy Name	Pharmacy NABP ID	Submitted Unit Quantity	Total Days Supply	Date of Service	Client ID	Member ID	Channel	Component	MONY	Specialty	Brand / Generic Indicator (B,G)	Proposed Formulary Tier (Preferred, Included, Excluded)	Proposed Total AWP	Proposed Ingredient Cost	Proposed Dispensing Fee	Proposed Admin Fee, If Any	Proposed Amount of Rebate Payable	If Excluded, Reason for Exclusion