

## ADDENDUM 1

### QUESTIONS & ANSWERS

#### Facility Statistics & Information

1. What is the current contract bid rate for pharmacy services for jail facilities and DOH?

<http://www.co.cameron.tx.us/purchasing/awards/1610PharmaceuticalServc.pdf>

2. Who is your current pharmacy services provider?

**Westwood Pharmacy**

3. What percentage of prescriptions is dispensed as stock?

**As patient-specific? Approx. 75% pt. specific 25% stock**

4. Does your facility have a state pharmacy or clinic license?

**We utilize our physician DEA and TCS license**

#### RFP-Specific Questions

5. Page 4 of the RFP mentions participation in a CO-OP Interlocal pricing program. Can out-of-state vendors participate in this program if they desire? Is participation in the program mandatory? Is a website available that vendors can use to learn more about the program?

**Interlocals include both in State and National Cooperative purchasing of which they are several. Participation in the program is not mandatory, however the County reserves the right to use an Interlocal if determined to be more advantageous to the County. Ex: [www.NIPA.org](http://www.NIPA.org) [www.NCPA.us](http://www.NCPA.us) [www.window.state.tx.us/procurement](http://www.window.state.tx.us/procurement)**

6. Page 8, section II.B states that orders submitted on Sunday must be delivered on Monday. Most of the leading correctional providers are located out-of-state, and common carriers such as FedEx and UPS do not pick up or deliver on Sunday. Can this request for Monday delivery of Sunday orders be lifted, or can it be modified so that only emergency Sunday orders must be obtained through a local backup pharmacy and delivered by Monday?

**It is understood that orders for Sunday will be delivered by Tuesday. A back up pharmacy is helpful though.**

7. Page 9, section II.G speaks of a quarterly pharmacy and then leads into a request for patient drug education reports with each prescription. Can this requirement be clarified?

**Quarterly reports on cost and pt spending is used for budgetary purposes. Patient education materials are for medications that require extensive teaching only.**

8. Page 9, section II.H speaks of the vendor providing all hardware for an electronic ordering system. A bidder providing hardware and peripherals is not typical, as this expense is usually borne by the solicitor of a bid request. However, can you project the number of laptops or work stations you expect to be provided to fulfill the needs of the County so this

can be considered by the bidders? Although also not typical, would the bidder bear any responsibility in providing Internet or wireless access needed to deploy an eMAR and electronic ordering program?

### **fax machine at minimum**

Regarding the medications listed in Category A on pages 15 through 18

- 9. The RFP asks for a 30-day supply to be quoted, but many medications on the list can be dispensed as given daily, twice a day, three times a day etc., which would arbitrarily allow different bidders to select different quantities. So that all bidders provide prices for the same quantity of each medication to generate a fair comparison for Cameron County, could the County require all bidders to provide prices for tablets and capsules for 30 units and for topicals, injections, and inhalers in the unit-of-use in which they are packaged?

**The bidder can provide a unit dose cost to make things easier a 30 day cost for QD dosing, BID dosing etc. Unit dosing is better to establish realistic cost per medication.**

- 10. Please verify the strength to price out for the following items—Prezista, Intelence, Promethazine, Aller-chlor, sodium chloride, and hydrocortisone cream.

**All HIV medication will be priced for all strengths. Promethazine is usually 25 mg. Aller-chlor is usually 4 mg. Hydrocortisone cream 1%**

- 11. For items listed as brand names on Category A, may bidders quote prices for generic equivalents?

**All medications will be expected to be generic unless otherwise stated.**

12. Regarding pricing the items listed in Category B (pages 20-24) for the Health Department—All items in the left column have a specific pack size identified. To determine the price for the 30-day supply (to be entered in the far right column), should the bidder multiply their unit cost per pack size (middle column) by 30?

**Yes.**

13. Are the items listed in Category B (pages 20-24) to be provided in bulk in the package sizes identified in the exhibit?

### **Please price bulk and unit specific**

14. Since several of the items listed in Category B (pages 20-24) are requested in package sizes not commercially available, it will require and mandate the use of a licensed repacker to provide the items in the quantities requested. Further, a company must be an FDA Registered Repacker to legally repackage bulk stock medications into blister cards or to provide bulk medication in a quantity lesser than what was packaged in a bulk supply. If you intend to have any degree of stock on hand for the Health Department, will you mandate that the pharmacy vendor use a FDA Registered Repacker? Will you require bidders to provide evidence that they use an FDA Registered Repacker (such as providing the repacker's license and labeler code)? **For your protection**, will you require documentation to be submitted as part of the proposal?

**The Jail Infirmary does not repackage; however, the Health Department does repackage under the direction of a licensed pharmacist who will have oversight of the repackaging. To this end, the Health Department will not require a FDA Registered Repacker.**

15. Page 37 of the RFP speaks of firm prices for the duration of the contract. As acquisition costs change and are deducted by the manufacturer, does this requirement mean that the proposed dispensing fee is to remain fixed and firm and that changes to the acquisition cost—increases or decreases—are permitted as long as proof of the change can be provided by the bidder?

**This would pertain to the Dispensing fee. It is understood that acquisition costs will fluctuate.**

## **Accreditations, Registrations, & Certifications**

### **FDA Registered Repacker**

16. A company must be a FDA Registered Repacker to legally repackage bulk stock medications into blister cards. If you intend to have any degree of stock on hand at the facility, will you mandate that the pharmacy vendor use a FDA Registered Repacker? Will you require bidders to provide evidence that they use an FDA Registered Repacker (such as providing the repacker's license and labeler code)? **For your protection**, will you require documentation to be submitted as part of the proposal?

**The Jail Infirmary does not repackage; however, the Health Department does repackage under the direction of a licensed pharmacist who will have oversight of the repackaging. To this end, the Health Department will not require a FDA Registered Repacker.**

### **Licensed Wholesaler**

17. A vendor is required by law to be a licensed wholesaler in a particular state to distribute wholesale quantities of stock medications in that state. If you intend to have any degree of stock on hand at the facility, will you require bidders to provide evidence that they are a licensed wholesaler in the bidder's home state and in your state? **For your protection**, will you require documentation to be submitted as part of the proposal?

**Home state is okay we provide a Dr license to hold medications in the jail facility  
The Health Department would require documentation that the vendor is a licensed wholesaler.**

### **VAWD**

18. Will you mandate that the pharmacy vendor be a National Association of Boards of Pharmacy (NABP) Verified-Accredited Wholesale Distributor (VAWD) to assure Cameron County will receive stock medication provided under the strictest and highest standards set forth within the industry? Will you require documentation to be submitted as part of the proposal?

**YES**

### **NCCHC/ACA**

19. Is your facility accredited by the National Commission on Correctional Health Care (NCCHC) or American Correctional Association (ACA)? If not, do you expect to seek accreditation during the term of contract?

**NO**

## **Regulations**

20. The Prescription Drug Marketing Act of 1987 (PDMA) requires vendors to provide electronic pedigree papers (ePedigrees) with all stock medications. Will you require the pharmacy vendor to provide FDA-mandated pedigree papers for stock medications?

**For the Jail, no; we provide the Dr. License.**

## **Services**

### **Packaging & Labeling**

21. True unit-dose dispensing is required in many states before a pharmacy vendor is allowed to accept returns and provide credit on returned medications. A pharmacy vendor that dispenses medications in blister cards (both stock and patient specific) must individually label each bubble of the blister card with a medication's name, strength,

manufacturer, NDC number, lot, and expiration date. Will you mandate that the pharmacy vendor be in complete compliance at time of proposal submission with this requirement?

**Yes.**

## **Return and Destruction of Medications**

22. How are controlled substances currently destroyed, as they cannot be returned?

**The Jail and Health Department facilities do not accept or dispense Narcs or controlled substances.**

## **Equipment**

23. Can your current medication carts be purchased, or are new carts required? How many med carts do you need?

**We have purchased new carts. If new carts are needed, we will order from vendor on an as needed basis.**

## **Software**

### **eMAR Software**

24. Will you require bidders to have eMAR software and a minimum of 3 years' experience implementing online ordering?

**eMar Software is not a requirement for this RFP**

**NO - If eMAR is included on the winning bid, no experience is really needed for online ordering.**

25. Will you require bidders to use proprietary software and employ their own programmers, which will enable facility software change requests?

**NO - Whatever is better for transition for the winning bidder.**

26. Will you require the proposed electronic order entry and eMAR system to provide duplicate therapy warnings that can be displayed to prescriber at point of order entry?

**Not necessary**

27. Will you require the eMAR system to be web-based?

**If included in the bid, yes.**

28. Do you have wireless connectivity in the cellblocks or will the eMAR program need to work offline?

**NO - Offline if included in the bid**

29. Will you require the eMAR program to allow for scanned barcodes for both patients and medications and then notify the staff if an incorrect medication is scanned?

**If included in the bid, yes.**

30. Will you require an eMAR system to perform and electronically document a declining inventory check?

**If included in the bid, yes.**

31. Will you require an eMAR system to allow staff to review administration history and print reports showing administration, non-compliance, and refusals?

**If included in the bid, yes.**

32. Will you require an eMAR system to print completed medication administration records (MAR) at the end of every month?

**If included in the bid, yes.**

33. What are your storage and backup requirements for the eMAR system?

**If included in the bid, storage will be at the pharmacy home site.**

34. Will you require the vendor to provide a description of their software and training support plan, including after-hours and 24-hour emergency support?

**Yes.**

35. Will you require the vendor and its employees to provide the support and training for the eMAR system or will a third-party company/service be permitted to provide these services?

**If included in the bid, either will be acceptable.**

36. Will you require the eMAR system to enable staff to initiate, document, and track vitas, labs, and injection sites?

**If included in the bid, yes.**

### **Jail Management System Interface**

37. Will you require a jail management system interface to be provided at no charge?

**Not required, but if included in the bid yes.**

38. Will you require the proposed system to be HL7 compliant?

**Yes**

### **RFP Process / Deadlines**

39. Will there be an opportunity to ask more questions in the event responses are not clear?

**Yes.**

40. The Federal inmates that you house, do they belong to ICE via Script Care or the US Marshals thru the Heritage program? As you may know, both are direct re-imbusement programs to the pharmacy and as such, you would only be billed for non-covered items.

**The Federals are under the US Marshals and it is a direct bill to them not under Heritage. We will provide a billing address for the vendor that wins the bid.**