

## BATCH 1 – QUESTIONS & ANSWERS

### RFP #1610: Pharmaceuticals & Services W/ Prescription & Over the Counter

#### Question #1

In order to submit a compliant response, please confirm that Offerors are to address each item in Section II – EXECUTIVE SUMMARY, do not need to respond to items in Section III – SCOPE OF SERVICES, and then are to resume with a response to Items A through DD of Section IV – RFP SPECIFICATIONS.

- If not, please clarify.

**EXECUTIVE SUMMARY – YES**

**A through DD of Section IV – YES**

#### Question #2

Regarding Section IV – RFP SPECIFICATIONS, Items A to G have specific page limits, Items H to K indicate there is no maximum page limit, and Items L to DD do not indicate a page limit or no maximum page limit.

- Can you please indicate if there are any page limits in the responses to Items L to DD?

**NO**

#### Question #3

Category A price sheet is requesting an Offeror's price for a 30-day supply of medication that is inclusive of the medication acquisition cost plus a dispensing fee. However, not all medications on the list are prescribed as once daily. This will lead to Offerors interpreting what constitutes a 30-day supply and pricing may become inconsistent.

- Will the County consider updating the Category A price sheet to an Excel Workbook with an individual column for medication name and strength, a column for the exact metric quantity to price, a column for AAC, a column for the dispensing fee, and a total price column in order to eliminate any Offeror interpretations?
- Will the County consider the same for the Category B and WIC price sheets as well?

**PRICE SHEETS CATEGORY A, B, WIC - REMOVED COLUMN "SPECIFY PRICE BASED UPON INDIVIDUAL'S 30 DAY SUPPLY PRICING" – SEE ADDENDUM # 2**

#### Question #4

The General Terms and Conditions document states that, "BONDS: If the contract that may be entered into with the County will likely require a performance guarantee or bond, the Purchasing Department will attach a separate page to the RFP explaining those requirements."

- As the cost to procure a bond or surety is costly, please confirm if a bond or security will be required at the time of contract signature.
  - If so, what are the terms regarding a bond or surety?

**THIS RFP HAS NO BID BOND REQUIREMENT**

### **Question #5**

The General Terms and Conditions document states that, "PRICING: Prices for all goods and/or services shall be firm for the duration of the contract and shall be stated on the Pricing/Delivery Information form."

- Please confirm that a bidder's dispensing fee/percentage markup are to remain firm for the initial 3-year term of the contract...or...is the pricing to be held firm for the optional 2-year extension as well if exercised by the County?

### **TO BE ADDRESSED DURING CONTRACT NEGOTIATIONS**

### **Question #6**

In order to provide a meaningful response to the RFP, while also respecting the time of your evaluation committee, it would be helpful to know in order of importance the top five solutions Cameron County is seeking because of this solicitation.

- What are the top five solutions that Cameron County is seeking in this solicitation?

### **IN ADDITION TO ALL SCORING CRITERIA AS NOTED IN RFP:**

### **PRICING: COST CONTAINMENT & BEST PRICING**

### **EXPERIENCE & FIRM'S CAPABILITY TO PROVIDE THE SERVICES:**

### **CUSTOMER SERVICE, EQUIVALENT OR GENERIC MEDICATION SUGGESTIONS, QUICK TURNAROUND**

### **Question #7 - Requirement of Wholesaler Compliance**

The Cameron County Jails are law enforcement correctional institutions required to comply with all applicable state and federal laws, rules, and regulations.

- Will you require bidders to submit the name of their wholesaler and copy of the wholesaler's license in the state of Texas that they will subcontract with for stock distribution in order to remain in regulatory compliance? NO – PHARMACIES RESPONSIBILITY

### **TEXAS AND HOME STATE LICENSES - BOTH SHOULD BE PROVIDED ALONG WITH PROPOSAL**

- Will a bidder's failure to provide proof of compliance with regulations at the time of proposal submittal, specifically this requirement, deem that bidder as non-compliant and therefore ineligible for an award?

### **IT IS THE PHARMACIES RESPONSIBILITY TO BE IN COMPLIANCE AT ALL TIMES**

### **Question #8 - Repackager**

It is indicated in the RFP that all services will comply with all applicable state and federal laws, rules, and regulations. A company must use the services of an FDA-registered repackager to legally repack stock medications into blister cards or into any other packaging that results in a change to the original manufacturer's packaging. This would include 30-count blister cards being sold/distributed to Cameron County as stock.

- Will Cameron County require bidders at the time of proposal submittal to submit the name and FDA Drug Establishment Registration Facility Establishment Identifier of the registered repackager they are utilizing for these services in order to remain in regulatory compliance?

**N/A**

Will a bidder's failure to provide proof of compliance with regulations at the time of proposal submittal, specifically this requirement, deem that bidder as non-compliant and therefore ineligible to receive an award?

**N/A**

### **Question #9 - eMAR**

Many correctional institutions within the industry the size of Cameron County are utilizing electronic order entry and eMAR software to decrease their reliance on time-consuming paper processes. Electronic med pass can decrease the time required for med pass by up to 50%, eliminate the need and overtime for end of month changeovers, eliminate transcription errors from faxed orders that are profiled for MAR purposes, and saves time that can be used by your medical staff to provide other health care services?

- Does Cameron County currently use an electronic prescription order entry and eMAR system that is provided by your medical or pharmacy vendor at no additional cost?
- If so, what is the name of the system?

**WILL BE IN USE BY JANUARY (TENTATIVELY) "FUSION"**

### **Question #10 - Electronic Reconciliation**

Many correctional institutions within the industry the size of Cameron County are using electronic check-in and return programs for inventory management. Manual daily order check-in and return processing time can be decreased by up to 75%, medication diversion potential will be virtually eliminated, and you can have full accountability of all medications received by, and returned from, your facility for accounting purposes.

- Does the jail and juvenile probation currently use a barcode electronic order reconciliation and medication return management system that is provided by your medical or pharmacy vendor at no additional cost?

**AT THIS TIME NO**

- If not, would you find value in adding this requirement to your current solicitation for bidders to provide a solution for electronic inventory management?

**NOT MANDATORY – PLEASE SPECIFY IF YOUR FIRM CAN OFFER THIS AND IF SO WHAT WILL THE a) UPFRONT b) ONGOING COST BE TO CAMERON COUNTY**

### **Question #11 - Online Reporting Access**

Many correctional institutions within the industry the size of Cameron County have fingertip access to electronic reporting. Analyzing prescriber ordering trends and costs to better manage facility operations is critical and dependent upon reliable and accurate reporting.

- Does the County and Jail administrative teams currently have access to an online reporting dashboard to access meaningful and accurate reporting 24/7/365 that is provided by your medical or pharmacy vendor at no additional cost?

**AT THIS TIME NO**

- If not, would you find value in adding this requirement to your current solicitation so your facility-level staff and administrators can access online reports?
- 

**NOT MANDATORY – PLEASE SPECIFY IF YOUR FIRM CAN OFFER THIS AND IF SO WHAT WILL THE a) UPFRONT b) ONGOING COST BE TO CAMERON COUNTY**

### **Question #12 - Current Services**

What are the main challenges or issues for Cameron County regarding your current medication dispensing and pharmacy management program?

- If there are no challenges or issues, what are some areas in which you believe improvements can be made or value added?
- 

**NONE AT THIS TIME**

### **Question #13 - Additional Questions**

Will there be an opportunity to ask more questions, for clarification purposes, in the event responses to submitted questions are unclear?

**SEE ADDENDUM # 1 – Cameron County Purchasing WEB page (Bids / RFPs/RFQs).**

**Question #14**

What is the deadline to submit questions for the RFP?

**NOVEMBER 13, 2020**

**Question #15**

When can vendors expect answers to all questions submitted?

**NOVEMBER 17, 2020 - POSTED TO WEB**

**Question #16**

Will there be an opportunity for a second round of questions if any answers in the first round of questions needs clarification?

**FOLLOW UP QUESTIONS DUE NOVEMBER 19, 2020**

**Question #17**

Will Cameron County consider extending the due date for Submission of Response to accommodate thoughtful consideration of answers to all questions submitted and a potential second round of questions to provide the most cost-effective proposal possible?

**YES**

**Question #18**

When will the intent to award a contract be published?

**TENTATIVE END OF JANUARY TO MID FEBRUARY**

**Question #19**

Once the contract is awarded, what is the proposed contract start date?

**TENTATIVE - MARCH 16, 2020**

**Question #20**

Is Cameron County considering final BAFO presentations for finalists to be a part of this RFP process?

**YES**

If so, what would be the selection process for those participating in an in-person BAFO presentation?

**REVISED SCORING POTENTIAL BASED ON EVALUATORS FINAL SCORES**

**THE EVALUATION COMMITTEE WOULD MAKE THAT DECISION**

**Question #21**

Who is the current vendor providing Healthcare Services to Cameron County Facilities?

**WESTWOOD PHARMACY**

**Question #22**

What are the current contracted pharmacy rates? In most, if not all public procurements, cost is not considered proprietary and would be readily available.

**PENDING – TO ANSWER IN BATCH 2 FOLLOW UP ANSWERS**

**Question #23**

What is your current cutoff time for next-day delivery orders to be submitted to the pharmacy? Do you intend to keep this the same?

**2 to 3 pm**

**Question #24**

What is the average number of prescriptions filled per month for your facilities?

**JAIL - 2,000 to 2,500 MONTHLY    JUVENILE – 200 MONTHLY**

**Question #25**

Actual utilization data would be helpful for potential bidders to study medication mix and prescriber ordering trends in order to prepare a responsible and competitive bid rate.

- a. Can you please provide the past 3 months pharmacy invoices for review?

**NO**

- b. What is the average pharmacy dollar amount spent monthly over the past 12 months?

**\$30,000 TO \$35,000 AVERAGE MONTHLY**

**Question #26**

What is the percentage of stock medications vs. patient specific medications?

**25% STOCK 75% PATIENT SPECIFIC**

**Question #27**

Do you receive stock medications in 30 count blister cards or is all stock in manufacturer's bulk bottles?

**BOTTLES**

**Question #28**

How many days' worth of medication is typically dispensed for routine medication orders? (Ex: 7, 14, 30 days.)

**30 DAYS**

**Question #29**

May we have a copy of your current formulary?

**MEDICATION LIST IS PROVIDED**

**Question #30**

In order to ensure a fair and equitable evaluation of pricing where the County can ensure they are comparing prices from all bidders on the exact same medications, would the County consider updating Category A to include specific NDCs for each line item?

**WE ARE COMPARING THE EXACT SAME MEDICATIONS PROVIDED**

**SEE ADDENDUM # 2**

**Question #31**

In order to ensure a fair and equitable evaluation of pricing where the County can ensure they are comparing prices from all bidders on the exact same date, would the County consider updating the Category A to include a recent date from which pricing should be provided for evaluation?

**WE ARE COMPARING THE EXACT SAME MEDICATIONS AND PRICES TURNED IN FROM EACH VENDOR**

**Question #32**

How does the County send prescription new orders and refills to the pharmacy vendor? For example: eMAR/EHR interface, Email, Fax, Remote Provider Order entry.

**CURRENTLY VIA FAX HOWEVER WE SHOULD BE FULLY EMR BY MARCH**

If multiple methods are used, approximately what percentage of each type of transmittal apply?

**ADDRESSED ABOVE**

**Question #33**

Please identify the number of facilities to ship to from the Pharmacy and the specific ship-to addresses.

**3 FACILITIES – ADDRESSED AS PROVIDED ON RFP**

**Question #34**

What is the current preferred method for delivery?

**UPS / FED-EX**

**Question #35**

Please describe the frequency for medication deliveries to your facility by current vendor.

**DAILY**

**Question #36**

Are medical supplies (needles, syringes, diabetic test strips, etc.) for your location ordered from the current contracted pharmacy? If not, would Cameron County be interested in this value-added service?

**NOT AT THIS TIME – SUPPLIES ARE CURRENTLY ORDERED FROM BUY BOARD COOP**

**Question #37**

Does the County currently have an eMAR or EHR in place?

- a. If so, what is the name of the program currently in place?
- b. If so, is an interface required to connect with the system?

**NOT AT THIS TIME ADDRESSED ABOVE**

**Question #38**

If there is no eMAR or EHR in place, are there plans to implement an eMAR or an EHR during the term of this contract?

**ADDRESSED ABOVE**

If yes, would a new price be negotiated to include the value-added service of an eMAR or EHR implementation?

**NO WE ARE BASING AWARD ON SCORING CRITERIA AS NOTED IN RFP WITH PRICING POINTS AS LAID OUT**

**Question #39**

Can you please provide the name of the correctional facility inmate management software or jail management system?

**ODYSSEY**

- a. Is an interface required to connect with the inmate management software system?

**FOR IT DEPT.**

- b. Does the inmate management software currently in use support an HL7 interface?

**FOR IT DEPT.**

**Question #40**

Who is the current after-hours back-up pharmacy (if utilized)?

**AUTREY PHARMACY**

**Question #41**

What is your current average daily inmate population at each facility?

**950**

**Question #42**

Can you please provide the inmate population for each facility for the past 12 months?

**950**

**Question #43**

How are the prescription returns from your facility currently handled?

**YES**

**Question #44**

Do you currently receive credit for returned medications?

**ON SOME OCCASIONS**

**Question #45**

Are release medications supplied to inmates upon parole or discharge?

**YES**

If so, how many days' supply is provided?

**7 TO 10 DAYS**

**Question #46**

What is the current process for notifying pharmacy of an inmate's release dates?

**FAX TO VENDOR**

**Question #47**

Will it be required to ship inmate discharge/transfer medications to private residences or are they shipped to each correctional facility only for discharge/transfer patients?

**NO**

**Question #48**

Is your correctional facility accredited by the National Commission on Correctional Health Care (NCCHC) or American Correctional Association (ACA)?

**NO**

If not, do you expect to seek accreditation during the term of the contract?

**NO**

**Question #49**

Please provide all current Accreditation for all facilities.

**NONE**

**Question #50**

Do the correctional facilities currently maintain a Keep-On-Person (KOP) Program?

If so, please provide a list of KOP medications approved by facility.

**NONE**

**Question #51**

What percentage of your inmates, if any, are Federal? Specifically, what percentages are under jurisdiction of each the US Marshals Service (USMS) and US Immigrations and Customs Enforcement (ICE)?

**FEDERAL 10 TO 15 PERCENT USMS**

**Question #52**

Are OTC medications for commissary provided by the Contracted Pharmacy?

**NO**

If not, where do they come from?

**N/A**

**Question #53**

How are non-formulary requests approved?

**MUST BE ORDERED BY JAIL PHYSICIAN**

Please describe your Non-Formulary Review process in detail.

**REVIEWED BY JAIL PHYSICIAN**

**Question #54**

Please describe the current destruction policy for all outdated/expired drugs.

**DISCARDED INTO BIOHAZARD BOXES**

**Question #55**

Does your facility have a DEA License? If so, whose name(s) is(are) under licensure?

**NO**

**Question #56**

Does your facility have a current state pharmacy license?

**YES, PROVIDED BY CURRENT VENDOR**

**Question #57**

Please provide the following pharmacy information by year for the last three years: number of patients on HIV medication, number of patients on psychotropic medications, number of patients on Hepatitis C medications, number of patients receiving medications associated with hemophilia, HIV medication dollars, psychotropic medication dollars, hepatitis C medication dollars, and hemophilia related medications dollars.

**HIV - 4**

**PSYCH - 280**

**HEP C - 0**

**HEMOPHILIA - 3**

**HIV COST - \$8,000 MONTHLY**

**HEMO - \$1,100 MONTHLY**

**Question #58**

Of inmates receiving Hepatitis C treatment, what is the nature of the treatment? Please list medications used to treat over the past three years.

**N/A**

**Question #59**

Are there any state or federal drug programs being accessed for inmate medications?

If so, what are they?

**NO**

**Question #60**

Does your facility currently use a barcode electronic order reconciliation and medication return management system?

**NOT AT THIS TIME**

**Question #61**

Please outline the medical personnel shifts that will require start up in-service training?

**5 AM TO 5 PM & 5 PM TO 5 AM**

**Question #62**

Does the current pharmacy vendor use a FDA-registered repackager to ensure compliance with federal regulations for Correctional Health stock medications?

**YES**

**Question #63**

Will you mandate that the pharmacy vendor use a FDA-registered repackager for Correctional Health stock medications to ensure compliance with Federal regulations?

**YES**

**Question #64**

Will you require bidders to provide, as part of the proposal, evidence (the repacker's license and labeler code) that they use a FDA-registered repackager, as this is the only means to ensure compliance?

**YES**

**Question #65**

Will failure to provide proof of compliance with Federal regulations deem a bidder non-responsive and therefore ineligible for an award?

**YES**

**Question #66**

Do your facilities maintain an Emergency Drug Box? If so, please provide a list of medications to be contained in the Emergency Drug Boxes.

**YES – ANTI-CONVULSANTS AND NARCOTICS**

**Question #67**

Please provide a list of your current Stock Medications.

**OTC MEDS (NSAIDS, EYE DROPS, MUSCLE RUB, AFC, HYDROCORTISONE CREAM, ETC.**

**Question #68**

Who administers medications to inmates? For example: Nursing staff or Correctional Officers?

**NURSING STAFF**

**Question #69**

Where does medication administration take place, that is, do medication carts go to the housing units or do inmates come to the medical units for medication administration?

**MED CARTS GO OUT TO UNITS**

**Question #70**

How many med carts are currently in use by your correctional facilities?

**7**

- a Are these med carts the property of the current contractor or will they remain with the County?

**OWNED BY COUNTY**

- b Please outline the quantity of medications carts needed for each facility (if required)?

**CARRIZALES RUCKER DETENTION CENTER – 4 DOWNTOWN FACILITY – 3**

**Question #71**

What additional reports other than the ones listed on page 9 in the RFP will be required?

**NONE**

**Question #72**

Can Cameron County provide examples of current monthly reports provided by current pharmaceutical services vendor?

**EACH VENDOR HAS DIFFERENT MONTHLY USAGE REPORTS**

**Question #73**

Are there any current committee meetings that would require a pharmacist or other vendor representative to attend?

**NOT AT THIS TIME**

- a If so, what is the frequency of those meetings?
- b Are the meetings required to be attended in person or will video/teleconferencing be permitted?

**Question #74**

Please provide the current pharmacy related Policies & Procedures for all facilities.

**CURRENTLY NONE**

**Question #75**

What are the small diverse business and small business contract requirements/goals for this contract?

**COST CONTAINMENT**

**Question #76**

What is the average length of stay for inmates at your facilities?

**3 TO 6 MONTHS**

**Question #77**

What are the protocols and standards for storage and dispensing of medication that is brought from an inmate's home?

**IF ACCEPTED, WE STOCK IN CART AND ADMINISTER. IF NOT ACCEPTED, PUT INTO PROPERTY**

**Question #78**

For Line 28 of the "Det Cntr Meds" tab of the Category A pricing spreadsheet "Albuterol Inh" would you please specify a brand name, strength, or package size for the inhaler so that all bidders price the same sized inhaler?

**90 MCG**

**Question #79**

For Line 29 of the "Det Cntr Meds" tab of the Category A pricing spreadsheet "Albuterol Soln" would you please specify what strength solution should be priced?

**.0082%**

**Question #80**

For Line 111 of the "Det Cntr Meds" tab of the Category A pricing spreadsheet "Pro Air Inhaler" would you please specify a package size to make sure that all bidders are pricing the same product.

**PLEASE PROVIDE MOST COMMON. WE UTILIZE WHATEVER PCP PRESCRIBES**

**Question #81**

Please specify strengths on for the medications listed on Lines 34 (Fish Oil), 69 (Levothyroxine), 72 (Fluconazole), 74 (Tivicay), 75 (Viread), 76 (Prescouix), 83 (Prezista), and 84 (Intelence) of the "Det Cntr Meds" tab of the Category A pricing spreadsheet as all of these medications come in different strengths.

**WE UTILIZE WHAT PCP ORDERS**

**Question #82**

For Line 137 of the "OTCs" tab of the Category A pricing spreadsheet "Vit. A & D Oint" would you please specify a package size and/or if you would like this product to be priced in unit-dose form?

**UNIT DOSE FORM**

**Question #83**

For Line 1 of the "WIC" tab of the Category B pricing spreadsheet "Engerix-B" would you please specify a strength for the medication?

**ADULT**

**Question #84**

Can you verify an average daily population count for years 2019 and 2020?

**950**

**Question #85**

Can you verify the facility address for delivery of medications?

**DETENTION CENTER # 1 – 1145 EAST HARRISON ST., BROWNSVILLE, TX.**

**DETENTION CENTER # 2 – 1054 EAST HARRISON ST., BROWNSVILLE, TX.**

**OLD COUNTY JAIL – 954 EAST HARRISON ST, BROWNSVILLE, TX.**

**CARRIZALES RUCKER JAIL – 7100 OLD ALICE ROAD, OLMITO. TX.**

**Question #86**

What is script volume or number of inmates per month?

**1,200 SCRIPTS PER MONTH**

**Question #87**

What is the approximate volume of controlled substances?

**APPROXIMATELY 1 % ARE NARCOTICS**

**Question #88**

Would prescriptions come from one prescriber or multiple?

**2 APPROVING PROVIDERS**

**Question #89**

Do you have any further special requirements/requests regarding consultant pharmacists and the work they do for your facility?

**TO KEEP US INFORMED AS TO ALTERNATIVE MEDICATIONS THAT MAY BE LESS EXPENSIVE**

**Question #90**

Are you currently using an EMAR provider? And if so what features (for example electronic med order/reorder), have you been taking advantage of?

**CURRENTLY NOT USING EMR HOWEVER, SCHEDULED TO HAVE IT BY FEBRUARY OR MARCH OF 2021**

**Question #91**

How do you handle emergency and/or STAT med needs?

**WE CURRENTLY USE A BACKUP LOCAL PHARMACY**

**Question #92**

Have you had to rely on a back-up pharmacy historically?

**YES**

**Question #93**

Does your pharmacy target and manage quantity limits automatically or is your staff required to manage this process?

**EACH PRESCRIPTION HAS A SPECIFIC NUMBER OF PILLS AND A STOP DATE IF NEEDED**

**Question #94**

How do you currently communicate inmates' insurance coverage to the Pharmacy?

**CAMERON COUNTY DOES NOT UTILIZE INMATES INSURANCE OF ANY KIND**

**Question #95**

Due to the current pandemic, is the county accepting email as a form of submission? If so, what email should the submission be sent to?

**NO**

**Question #96**

If email submission is acceptable, what are the file size limits?

**NO**

**Question #97**

Is the vendor to return Attachment G if it is not applicable?

**YES - IF SO NOTE N/A**

**Question #98**

Please confirm that the RFP content /order should mirror the one stated on page 15, section IV: RFP Specifications and not on page 10, section II: Executive Summary.

**THAT IS CORRECT – PG 15 SECTION IV  
WHEN COMPLETING THE EXECUTIVE SUMMARY SECTION ITS FORMAT SHOULD BE  
SEQUENCED IN SAME (ES) ORDER.**

**Question #99**

Is an attachments section allowed?

**YES**

**Question #100**

Is a smaller than 12 font size allowed for graphics?

**YES**

**Question #101**

In Section III. Scope of Services, the subsections skip from P to S and is missing Q and R. Are Offeror's to just skip those letters and label as formatted currently? Or will the layout of the RFP be updated to reflect the correct letter sequencing?

**AS PER RFP – SINCE NO Q AND R ARE NOTED USE P AND S APPROPRIATELY AND  
DO NOT USE LETTERS Q AND R**

**Question #102**

In Section III. Scope of Services, between subsections M. and N. there is a requirement that is not lettered in the alphabetical subsection listing. How do you want it noted in the Offeror's response? Or will the layout of the RFP be updated to reflect the correct letter sequencing?

**NOTE AS M - SUB**

**Question #103**

On page 6 under Invoices and Payments, the County requires that a separate invoice be sent for every delivery. The Contractor would expect to be ship medications almost every day each month. Would it be acceptable for the Contractor to accumulate all deliveries for a month and send one invoice for those deliveries after completion of each month which includes the detail of each fill delivered?

**YES THAT IS ACCEPTABLE**

**Question #104**

The average census has 252 Federal inmates. Please give the approximate split between ICE and US Marshal.

**247 FEDERAL        7 ICE**

**Question #105**

Section II Executive Summary (pages 10-11) lists the format, content, and maximum page limitations for Proposer's responses. Section IV RFP Specifications (pages 15-18) provides a similar yet different outline. Please clarify the County's preferred format, content, and maximum page limitations for the response to the RFP.

**SECTION II PAGES 10 AND 11 EXECUTIVE SUMMARY SHOULD FOLLOW THE OUTLINE AS NOTED ON THOSE PAGES. WHEN DONE WITH SECTION II INSERT IT INTO – A - AS NOTED ON PAGE # 15. CONTINUE WITH PG. 15 B THRU PG. 18 DD AS SO NOTED.**

**Question #106**

Section II Executive Summary Cost Proposal requires "Proposer's cost proposals must include an itemized list of all direct and indirect costs associated with the performance of this contract, including, but not limited to, total number of hours at various hourly rates, direct expenses, payroll, supplies, overhead assigned to each person working on the project, percentage of each person's time devoted to the project, and profit". This contract is for to supply medication and pharmaceutical services over a period of time as opposed to being a project. In addition, the medications used and pricing are subject to change as new medications are introduced, medication pricing changes, and ADP increases/decreases. Therefore, this requirement is difficult to meet and does not seem to be part of the decision process. We ask that it be removed from the RFP.

**THIS (COST PROPOSAL - pg. 11 top) WILL BE DELETED IN ADDENDUM # 3 ONCE POSTED**

### Question #107

The following items need further information so that we can price properly:

Description	Comments
26. Bactrim 500mg	Bactrim is 400/80mg or 800/160mg. Which should be priced?
29. Albuterol Solution	Need both strength and size to be able to price.
34. Fish Oil	How many milligrams? Need strength to be able to price.
53. Iron 375	Iron usually dispensed at 325mg vs. 375mg. Need strength to be able to price.
69. Levothyroxine	Medication available in multiple strengths. Need strength to be able to price.
72. Fluconazole	Medication available in multiple strengths. Need strength to be able to price.
79. Ora Gel	Medication available in several types. Which specific one should be priced?
83. Prezista	Medication available in multiple strengths. Need strength to be able to price.
84. Intelence	Medication available in multiple strengths. Need strength to be able to price.
29. Female Contraceptive Film	Medication available in multiple count boxes. Which box size should be priced? Should the unit be the box or each film?
33. Nuvaring	A box includes 3 rings which would last 3 months. Should this be priced as one ring or the box?

**BACTRIM 500 AND BACTRIM D/S SHOULD BE PRICED**

**ALBUTEROL SOLUTION 2.5 MG/3ML 0.083%**

**FISH OIL 1000 MG**

**IRON 325 MG**

**LEVOTHYROXINE 25 AND 50 MCG**

**FLUCONAZOLE 150 MG**

**ORA GEL 1 OZ TUBE**

**PREZISTA 800 MG**

**INTELENCE 100 AND 200 MG**

**FEMALE CONTRACEPTIVE FILM PLEASE PRICE UNIT**

**NOVARING PLEASE PRICE BOX**

**Question #108**

Category A of drug pricing asks for a 30-day supply price. However, different disease states may require a different number of tablets per day or one vendor may interpret that only 1 tube of a medication is needed or 15mls of a solution is needed when that might not suffice for 30 days. Would the County provide additional clarification around the 30 day supply price such as:

- a. All tablets, capsules or caplets are to be priced as a supply of 30 units

**YES**

- b. All inhalers are to be priced as one inhaler

**YES**

- c. For all other items, please specify the total quantity to be priced for a 30 day supply (number of mls, ounces, etc.)

**PLEASE PROVIDE PRICE PER PILL. THIS WILL MAKE IT EASIER FOR COUNTY TO SCORE.**

Also, would the county consider adding a quantity column for the 30-day supply to ensure all vendors are using the same information?

**PENDING – TO ANSWER IN BATCH 2 FOLLOW UP ANSWERS**

**Question #109**

Category B of drug pricing appear to be given out on a basis that may be more or less than 30 days but the pricing asks for a 30 day supply. Please confirm that you want each vendor to price as a 30-day supply the amount of tablets/capsules/vials shown in the description. For the Epipen and Epipen Jr, please give a number of pens that should be priced in total. Also, please give the number of male condoms, female condoms, female contraceptive film, one-step pills, Nuvarings, and Nexplanon you want us to price in total.

**EPI-PENS SHOULD BE PRICED AS PER UNIT. CONTRACEPTIVES WERE ADDRESSED ABOVE**

**Question #110**

WIC of drug pricing are one time shots or tests. How many should be priced in total for the 30-day supply pricing?

**ONE TIME SHOT**

**Question #111**

Does Cameron County have any required limitations on insurance coverage? If so, please provide those coverage limitations.

**PENDING – TO ANSWER IN BATCH 2 FOLLOW UP ANSWERS**

**Question #112**

Where are your medications currently stored?

**MEDICATIONS ARE STORED IN LOCKED CABINETS IN THE INFIRMARY**

**Question #113**

Do we need to supply the County with locking med carts?

**NO**

**Question #114**

What is the average number of scripts per inmate?

**2 TO 3 MEDICATIONS PER INMATE THAT HAS BEEN PRESCRIBED TREATMENT BY OUR PHYSICIANS**

**Question #115**

What is the average number of scripts per month?

**1,200 TO 1,500 MONTHLY**

**Question #116**

Do you anticipate any need for IV med services?

**NO IV MEDICATIONS**

**Question #117**

What is the average length of stay for inmates?

**30 TO 90 DAYS (DEPENDING ON CHARGES)**

**Question #118**

What is your preferred time for deliveries?

**BEFORE 3 PM**

**Question #119**

Can you accept deliveries on weekends and holidays?

**YES, WE ARE STAFFED 24/7**

**Question #120**

10. RFP page 12, Question H states "...Pharmacy should provide electronic prescribing system with the ability to electronically request and transmit prescriptions to the pharmacy to be processed." Are you asking vendors to supply you with an electronic medication administration records platform, or to accommodate electronic ordering such as via SureScripts and/or fax machine?

**AT THIS TIME NO BUT HAVE THE OPTION ONCE CAMERON COUNTY INSTALLS EMR (BY FEBRUARY OR MARCH 2021)**