



ADDENDUM NO. 1
INVITATION TO NEGOTIATE NO. 16-0001
MEDICAL AND PRESCRIPTION BENEFITS PROGRAM
MARCH 1, 2016

The purpose of this addendum is to advise of any changes to the solicitation and answer questions received prior to the deadline on Page 1, Calendar of Events.

SOLICITATION CHANGES:

Citizens hereby amends Section 4.5 of the ITN as follows (changes are highlighted):

4.5 ELECTRONIC POSTING: Citizens will electronically post all notices, solicitation documents and addenda on Citizens' website which is located at <https://www.citizensfla.com/about/purchasing/purchasing-solicitations.cfm>.
<https://www.citizensfla.com/web/public/solicitations>

ANSWERS TO QUESTIONS:

1. Is it acceptable to only bid on the Pharmacy Benefit Management portion of this ITN? If so, would we only submit the documents required for that portion of the ITN?

Answer: No. It is not acceptable to submit a reply based only on the Pharmacy Benefit Management portion.

2. [ITN Section 2.6, Page 28] Regarding "Folder 4, #4, Attachment M". In reviewing Attachment M, it appears to be informational only. Is there a specific request and required vendor response for Attachment M? If yes, please explain the required content of the response being requested.

Answer: No. Attachment M is for information purposes only. No response to Attachment M is necessary. Vendors may wish to review Attachment M, which will be discussed for incorporation into the contract during the negotiation phase of this ITN.

3. Do we need to include Attachment A form and signature pages on the final submitted CD? If so, where? Note: Attachment A form is not specifically mentioned in the "Response Contents" of ITN, Section 3.6, page 27.

Answer: Attachment A was required to be submitted on or before 5:00pm on February 17, 2016, consistent with the Calendar of Events in the ITN. Only those vendors who submitted the Attachment A and received the data are eligible for consideration of award.

4. [Attachment D] Regarding #5 "Financial Assessment", language states, "...response to this competitive solicitation will be evaluated using a separate form, which has been attached as Exhibit". Is this statement a reference to Attachment E (Financial Review Form)? Please identify the location of the associated Exhibit in the ITN.

Answer: Yes. The Financial Assessment requirements are described in Attachment E, Financial Review Form.

5. [Attachment G, Section II. Program Administrative and Support Services (Benefits & Exclusions)] This section references Appendix 2, 3, 6 & 7 in the body of the paragraph. The reference to Appendix 7 may be a typo, as it appears that Appendix 2, 3, 5 & 6 would be more applicable to the stated request. Please confirm.

Answer: Correct, the reference should have been to Appendix 2, 3, 5 and 6. A corrected Attachment G has been provided along with this addendum.

6. [Attachment G, Section II. Program Administrative and Support Services (Reporting)] This section references Section 2.4.5 of the ITN. However, it appears that Section 2.4.6 (Reporting Requirements) would be the appropriate reference point in the ITN. Please confirm.

Answer: Correct, the reference should have been to Section 2.4.6 of the ITN for reporting requirements. A revised Attachment G has been provided along with this addendum.

7. [Attachment G, IV. (Claims Processing)] Regarding “Claims and Appeals of Claims”, should the response also include the process associated with “Member” appeals?

Answer: Yes, the response should also include processes related to Member appeals.

8. [Attachment G, VI. – Innovation] Please clarify/explain question 41.B, “Provider quality ratings completed by Vendor”

Answer: Provider quality ratings indicate if a provider's performance and quality scores are above, below, or close to the typical performance and quality in their geographical area. These ratings are to be completed by the Vendor and made available to Members.

9. [Attachment H] What type of Outpatient facilities do you want included in the GeoAccess report?

Answer: All types of outpatient facilities in the Vendor's proposed network should be populated within the parameters of the GeoAccess report.

10. [Attachment I. – Network Discounts tab] In referencing the column identified as “Outpatient”, is this request meant to reflect the discounts related only to Hospital facilities rendering services on an outpatient basis, whether in the ER or Non-ER setting?

Answer: No. Please indicate the discounts that would apply to all (emergency room and non-emergency room) outpatient services including emergency room services where there is no admission.

11. [Attachment I. – Pricing for additional services grid] This section requests additional costs which may be in addition to the PEMP “Fixed Fees”. In responding to each service description (by row), if the service is included in the Total Fixed Fees (PEPM), should we identify the line item service by stating response as “Included”?

Answer: Yes, if a service listed under additional fees is included in the Fixed Fee (PEPM), please identify that the service is included by stating "included". Please provide pricing for any service not included in the Fixed Fees (PEPM).

12. [Attachment I. – Pricing for additional services grid] To more effectively meet Citizens' needs, please provide a brief description of expectations involving the following "Services":

- Alternate Network
- Behavioral Health Management
- Maternity Management
- Customization of Communications Materials.

Answer: Provided below are descriptions for the services. Our expectation is that responses are consistent with these services as described.

- *Alternate Network means any network considered non-primary or in addition to the main network of providers offered to employees. The most common form of an alternate network would be a non-owned or leased network providing access to services or discounts not available thru the primary network.*
- *Behavioral Health Management means any specific treatment protocol or clinical program specifically designed to treat various forms of mental illness including employee assistance programs and other telephonic provider interface.*
- *Maternity Management means any program designed to assist expectant mothers during the course of their pregnancy including postpartum. This would include any clinical interface with providers, access to helpful maternity related products or information.*
- *Customized Communication Program means any form of communication where the content would be specific to Citizens or where Citizens has substantial control over the style and/or content of the messaging. Examples include Open Enrollment material, Summary of Benefits pieces or communication targeted at a specific program or initiative administered by the claims administrator. This would include but not be limited to print material, electronic or digital/social media based communications.*

13. Regarding "Appendix 7", is it meant to be informational only?

Answer: Yes. Appendix 7 is being provided for informational purposes only.

14. [ITN Section 3.5(A), Page 26] You state you want one (1) Original CD of our proposal. Can you indicate if you also require hard copy binders, and if so, how many? Do you require additional copies of the CD?

Answer: No. Hard copies and additional discs (other than the redacted copy) are not required. Redacted copies may be provided, but are not required.

15. [ITN Section 3.5(B), Page 26] Can you confirm we would not need to provide an Additional "Redacted Response" If we don't mark anything as confidential?

Answer: Yes, that is correct. A redacted copy is not needed if nothing in the response is claimed proprietary or confidential.

16. [Appendix 8] Can you please provide a census that shows which employees are enrolled in each plan and their tier?

Answer: The Census, Appendix 8, was provided to all Vendors who submitted Attachment A on or before February 17, 2016, at 5pm to the Procurement Officer as required under the terms of the ITN.

17. Can you please provide your most recent 12 months of claims experience and high cost claimant information?

Answer: The most recent 12 months of claims experience and high cost claimant information will not be provided.

END OF QUESTIONS AND ANSWERS

**FAILURE TO FILE A PROTEST WITHIN THE TIME PRESCRIBED IN SECTION 627.351 (6)(e),
F.S., CONSTITUTES A WAIVER OF PROCEEDINGS.**