

Leadership

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ADDENDUM NO. 3

July 12, 2023

Title: Specialty Pharmacy Consulting RFP # H23-0043

1. General

This addendum revises RFP documents. This addendum is issued to respondents of record prior to execution of contract and forms a part of contract documents and modifies previously issued documents. Insofar as previously issued contract documents are inconsistent with modifications indicated by this addendum, modifications indicated by this addendum shall govern. Where any part of the contract documents are modified by this addendum, all unaltered provisions shall remain in effect.

2. Addendum Acknowledgement Form

Acknowledge receipt of this addendum in the space provided on the Addendum Acknowledgement Form. Proposers must include the signed form with their response. Failure to do so will subject Proposers to disqualification.

3. Changes and Clarifications

A. Responses to questions receive before June 1, 2023.

4. Attachments

A. None

Responses to Vendor Questions

	Question	CCH Response		
1	Reference 5.6 - Will CCH be providing data according to vendor specifications to complete the specialty pharmacy opportunity analysis and proposal? These data specifications will be provided via email (see Enclosures).	Yes		
2	Reference 2.a Is CCH open to considerations for a term longer than 1 year?	The assessment should be completed within a year. The contract award will be longer than 1 year		
3	Reference 4 – Is Cermak Health Services of Cook County in scope for the specialty pharmacy program & to be included in this analysis? If so, data will be required according to the data specifications we will send.	Yes, if there is a proven value		
4	Reference VI – What technology platforms & applications are used by CCH today? (EHR, acute system, ambulatory system, pharmacy system, etc)	Cerner ~ inpatient McKesson ~ retail		
5	Reference 5.6 – Please share a list of provider practices on the CCH cost report.	More detail related to provider practices will be provided to the Awardee to complete the Assessment.		
6	Reference 4.1 IV – Is CCH currently engaged in any at risk value based contracts?	Yes		
7	Reference 4.1 VII – Is the CCH pharmacy unionized?	Yes		
8	Reference 4.1 VII – What is the current staffing model (unnamed org chart) for CCH pharmacy services?	More detail related to staffing models will be provided to the awardee to complete assessment.		
9	Reference 4.1 VII - Does Cook County currently utilize any in-clinic pharmacy support & what is the staffing count & placement of these resources? (ie clinical pharmacists, technicians, etc)	Yes, more detail will be provided to the awardee to complete assessment.		
10	Reference 4.1 V – Who is CCH's primary & secondary drug wholesaler?	Primary ~ AmerisourceBergen Secondary ~ Direct		
11	Reference 4.1 IX – Does CCH intend responses to answer whether Financial Assistance provided is 1) patients serviced with medication access or 2) medication access dollars obtained?	Yes		

	Question	CCH Response	
12	Reference 4.1 IV & V - What is the non- CCH patient volume that is available to capture by CCH's specialty pharmacy as a contract pharmacy for IL PBMs?	CCH is looking for the awardee to provide such information at the conclusion of the assessment	
13	Reference 4.1 III – What accreditations does CCH currently have? URAC, ACHC, other?	URAC, Joint Commission ASHP	
14	Reference 4.1 III – What other vendors are engaged to support CCH's pharmacy accreditation or other specialty pharmacy services today?	URAC ASHP Vizient	
15	Reference 4.1 VII - How many pharmacies does CCH operate today? Of those, how many currently support specialty pharmacy across the system?	Six All six	
16	Reference 4.1 VII – What are the types & volumes for drug dispensing today? (ie pickup, mail order, delivery)	More detail related to volumes will be provided to the awardee to complete assessment	
17	Reference 4.1 VII - What is the operating model of the health system ambulatory care practices, specifically in the specialty space (HOPD vs. Private Practice)? If they are not HOPD clinics, what is the interest of the system to move the clinics to HOPD?	Majority of CCH clinics are Hospital-based Outpatient departments including the community clinics	
18	Reference 4.1 IV - What is your current method of qualification for 340B? Are you using third-party billing software? If so, which one?	Split bill software Yes, Verity	
19	Reference 4.1 IV - What is your current PSAO?	N/A as it relates to pharmacy services administrative organizations	
20	Reference 4.1 IX - Do you perform any revenue cycle activities in your current specialty pharmacy operation? What does the cash reconciliation process look like?	Not specific to specialty pharmacy	
21	Reference 4.1 V – What are the top 20 specialty drugs prescribed & associated annual volume for each?	More detail will be provided to the awardee to complete assessment	
22	Reference 4.1 V - Does your pharmacy manage any access to specific LDD drugs? What are the LDD drug names & what has been the process for LDD management?	More detail related to limited distribution drugs will be provided to the awardee to complete assessment	

	Question	CCH Response		
23	Regarding section 5.5, Please confirm if	Not required but preferred.		
	MWBE participation is required for any %			
	of contract			
24	Regarding section 4 Scope of Services,	Timeline ~ ASAP		
	What are your expectations for the	Implementation 6 months to 1 year		
	timeline for data assessment vs.	May also require an amendment with change in		
25	implementation? Regarding section 1 hospital background,	scope of services More detail will be provided to the awardee to		
23	what is your current revenue and profit	complete assessment.		
	CY2023Q1 annualized run rate within	complete assessment.		
	specialty pharmacy cost center?			
26	Regarding section 2 Purpose, Does Cook	TBD based on assessment outcome		
	County intend to fill for patients seen by			
	providers outside of the system?			
27	Section 1 hospital background, please	Insured ~ 8.46%		
	describe your ambulatory payor mix	Medicaid ~ 6.53%		
	(excluding ED/OBs/Urgent Care)	Medicaid Managed Care ~ 29.63%		
		Medicare ~ 9.19%		
		Medicare Managed Care ~ 5.75%		
		Others ~ 0.88%		
		Uninsured ~ 36.18%		
20	Cartian 1 has ital has been and have	Unknown ~ 3.38%		
28	Section 1 hospital background, how	15		
29	many specialty clinics bill as HOPDs? Please describe the current specialty	More detail will be provided to the awardee to		
29	pharmacy staffing model: # of fulfillment	complete assessment.		
	pharmacists, # of clinical PMP	complete assessment.		
	pharmacists, # of fulfillment technicians,			
	# of prior authorization & financial			
	assistance staff			
30	Cook County recently put forth a RFP for	The RFP is for an Automated High Volume		
	a centralized fill vendor, is the intention	Prescription Fulfilment System for CCH's Central Fill		
	to move existing specialty pharmacy?	(mail order) Pharmacy		
31	Does Cook County have any existing	Yes		
	relationships with specialty PBMs (in-			
	network status) excluding Medicare &			
	Medicaid			

ADDENDUM ACKNOWLEDGEMENT FORM

As required by the RFP, Proposers must submit this acknowledgement form with their response. One acknowledgement form per response, listing all addenda, is appropriate.

Addendum No.:		
Addendum No.:		
Company Name:	 	
Representative's Name:	 	
Signature:	 	
Date:	 	

END OF ADDENDUM