		Amendment #1 - Issued August 5, 2020
Question/ Answer#	Section Reference and/or Page Number	Questions Received / Responses Provided
Q1	8.01 / pg. 36	Deliverable 1 - Should I estimate 1.7 scripts per month for 100 clients, or 1.7 scripts per month for 88% of 100 clients?
A1		Please estimate 1.7 scripts per person for 88% of 100 clients. The critical factor is the actual <u>dispensing</u> fee for each prescription dispensed. We anticipate the number of clients and the number of scripts to fluctuate during the course of the resultant contract.
Q2	8.01 / pg. 36	Deliverable 2 - I am unclear how to populate this section. Should I assume clients are split evenly across the different delivery methods?
A2		For the sake of maintaining consistency in evaluation across all offers received, and to streamline the evaluative process, Offerors should estimate shipping costs for 50 clients. Please see attached RFP Amendment 1, Section 8.01, Cost Proposal, page 37 for updates to the cost proposal which align with the following response provided below: •For USPS delivery method: Provide cost for 50% (25) clients receiving their medications via USPS
		delivery. • For Courier Service delivery method: Provide cost for 50% (25) clients receiving their medications via courier services utilizing the applicable courier rate of Offeror's preferred courier service delivery. • "Other" is removed from the cost proposal.
Q3	8.01 / pg. 36	Does the program only pay for the cost of actual shipment and not a handling fee, thus pegging the cost to USPS rates?
А3		 Actual shipping costs, whether by USPS or courier service delivery method, will be reimbursed to successful Offeror, upon approval by the HIV/STD program during the course of the resultant contract. There are no handling fees to be charged per prescription filled. The handling fee is for processing insurance claims. The insurance handling fees are retained by the resultant contractor via Offeror's proposed percentage of all private and/or third party insurance claims reimbursements, per Deliverable 3.
Q4	1.04 / pg. 4	What kinds of evidence will be accepted to meet the prior experience requirements of Section 1.04?
		This section requests prior experience length and the corresponding month/year for experience as applicable related to items 1 through 3 below. Item 4 relates to responsive customer service, and item 5 relates to the understanding of the requirements consistent with dispensing 340B drugs. In order for offers to be considered responsive, offerors must meet the following minimum prior experience requirements. Please ensure start and end dates (month and year) are indicated, and that experience is detailed sufficiently to ensure verification of all aspects of the minimums below.
	1	Offerors must provide performance date in their proposal of at least three (3) years' experience providing direct pharmacy services to individuals with HIV; • Provide start and stop dates for the service described above.
	2	Offerors must provide evidence in their proposal of at least one (1) years' experience providing pharmacy services to Alaska Medicaid recipients; • Provide start and stop dates for the service described above.
	3	Offerors must provide evidence in their proposal of at least one year's experience billing private insurance plans for pharmacy services; and • Provide start and stop dates for the service described above.
A4	4	Offerors must provide evidence in their proposal of a documented history of responsive customer service. • Offerors may submit logs of consumer grievance and result/resolution; response of client satisfaction surveys; any consumer response that are accessible to the pharmacy (i.e., online reports, letters, testimonials, communications from agencies where customers are shared with that agency, or other sources). NOTE: For any of the above types of examples, all personally identifiable information must be redacted.

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	5	Offerors must demonstrate an understanding of the requirements related to dispensing 340B drugs. • A written narrative description of how the pharmacy will ensure that the 340B program is being administered which enables the pharmacy to maintain compliance with federal statutes and HRSA guidelines (e.g., diversion of covered drugs; auditable records; and any other applicable requirement). You may include where this information can be found and how staff are/will be trained that is in compliance and supports the requirements necessary to dispense 340B drugs.	

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