



<b>SOLICITATION AMENDMENT #1</b>		
<b>YH24-0004</b> Fee-for-Service Pharmacy Benefit Management Services	Solicitation Due Date: <b>December 7, 2023, 3:00 pm</b> Arizona Time	Procurement Officer: Toni Cota Email: <a href="mailto:procurement@azahcccs.gov">procurement@azahcccs.gov</a>

**A signed copy of this amendment must be submitted with your solicitation response.**

This Solicitation is amended as follows:

<b>Paragraph # or Title</b>	<b>Page #</b>	<b>Amendment</b>
Exhibit A – Solicitation Instructions to Offerors	#2, Definitions	The definitions section is hereby removed from Exhibit A – Solicitation Instructions to Offerors in its entirety and incorporated into the Uniform Terms and Conditions, Section 1, Definitions.
Exhibit A – Solicitation Instructions to Offerors	5	The following statement is hereby revised in Section 3, Evaluation Criteria and Selection Process:  From: Any proposals not meeting the Mandatory Requirements will be disqualified and rejected. Other susceptibility and rejection criteria are listed below in “Rejection of Proposal”.  To: Any proposals not meeting the Requirements will be disqualified and rejected. Other susceptibility and rejection criteria are listed below in “Rejection of Proposal”.

The attached Answers to Questions are incorporated as part of this solicitation amendment.

<b>OFFEROR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THIS SOLICITATION AMENDMENT.</b>	<b>THIS SOLICITATION AMENDMENT IS HEREBY EXECUTED ON THIS DAY, IN PHOENIX, AZ.</b>
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE: <b>SIGNATURE ON FILE</b>
TYPED NAME:	TYPED NAME: Meggan LaPorte, CPPO, MSW
TITLE:	TITLE: Chief Procurement Officer
DATE:	DATE:



**ANSWERS TO QUESTIONS**

**Fee-for-Service Pharmacy Benefit Management Services  
Solicitation YH24-0004**

Question #	VENDOR NAME	Paragraph # or Title	Page #	Vendor Question	AHCCCS Response
1.	RxParadigm	YH24-0004 Exhibit A 5.2.3	9	Regarding the Experience and Expertise of the Firm and Key Personnel requirement of the RFP, If the Prime vendor plans to use a subcontractor to satisfy certain aspects of the RFP. Can the subcontractor's experience, expertise, financials and references be used to satisfy the requirements set forth in this RFP?	No, subcontractors may not be used to satisfy the requirements set forth in this RFP.
2.	SGRX Health	19. Ownership of Information and Data	36	Is AHCCCS considering treating the information technology solution that the selected PBMS vendor would supply and utilize as a Medicaid Enterprise System (MES) "module" for purposes of securing enhanced CMS funding for implementation and operations?	This question is outside of the PBM RFP scope.
3.	MedImpact	Solicitation document, scope of work 13.2	28	Please provide a listing of management reports requested.	The awarded offeror shall provide reports as defined by AHCCCS and on an ad hoc basis. AHCCCS will work with the awarded contractor to define the reports.
4.	MedImpact	Exhibit A, Section 5.2; 5.2.1.1; 5.2.1.5	8	Understanding the requested narrative approach, please advise if the narrative should follow the flow of sections 4 – 16 of the scope of work.	The narrative approach is determined by the offeror.
5.	MedImpact	Exhibit A, Section 2.3	15	Please confirm that exceptions are to be presented within submission section C5.	Yes.
6.	MedImpact	Exhibit A, special instructions #3	5	Please advise where the mandatory requirements are located within the procurement files.	Refer to the Solicitation amendment #1.



**ANSWERS TO QUESTIONS**

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Question #	VENDOR NAME	Paragraph # or Title	Page #	Vendor Question	AHCCCS Response
7.	MedImpact	Exhibit A, special instructions #5	5	Please confirm that each part of the proposal response (Part A, Part B, Part C) can be submitted as separate zip files with the required files included within each zip file.	Instructions will be provided upon receipt of the Offerors Intent to Bid forms.
8.	MedImpact	General	N/A	Please provide monthly member and prescriber call volumes.	533 average monthly member calls. 900 average monthly provider calls.
9.	MedImpact	General	N/A	Please provide monthly clinical PA volume.	10684 average monthly prior authorizations were received. 9500 of the 10684 prior authorizations were cancelled.
10.	MedImpact	General	N/A	Please provide monthly appeal volume, by appeal level.	Zero
11.	MedImpact	General	N/A	Please provide monthly grievance volume.	Zero
12.	MedImpact	General	N/A	Please provide monthly DMR volume.	Zero