

# MIDDLESEX COUNTY JOINT HEALTH INSURANCE FUND

## Rx Drug Consultant

### SELECTION CRITERIA

The selection criteria to be used by the Fund's Contracts Committee in making its recommendation to the Fund Commissioners as to which proposal is most advantageous to the Fund, price and other factors considered, shall include:

1. The name and qualifications of the individual(s) who will perform the services;
2. Experience and reputation in the particular field of endeavor;
3. Ability to perform the required services in a timely manner (including familiarity with the subject matter, attendance at meetings, etc.)
4. Competitiveness of rates (fees and expenses); and
5. Other factors, if determined to be in the best interests of the Fund.

If, after receipt of any proposals as described above and prior to any recommendation to the Fund Commissioners, the Contracts Committee determines to revise the required services or to seek more favorable terms, all vendors who have submitted proposals shall be given an equal opportunity to resubmit or modify their proposal.

Applicants will be eliminated from competition if they do not meet applicable Federal, State or County legal requirements. Where Federal or State law regulations require a procedural step(s) at variance with these procedures, the Federal or State requirements shall govern.

All contracts pursuant to the fair and open process will be awarded by a majority vote of the Fund Commissioners at a public meeting.

### **The term and services for which proposals are sought:**

#### **RX DRUG CONSULTANT**

TERM. April 1, 2018 to March 31, 2019.

SERVICES. During the term of this Agreement, the Rx Drug Consultant shall provide the services of senior professionals satisfactory to the Fund's Executive Committee/ Commissioners. The Rx Drug Consultant shall also provide all necessary staff support and shall provide the following:

- A. Confirm, manage and maintain on-line eligibility for active employees, new hires, terminated employees, retired employees and dependents using the database provided.
- B. Confirm all co-payments are correct.
- C. Provide monthly reviews for all claims to ensure compliance with current MCJHIF Self Insured Prescription Drug Program TPA contract with respect to discounts, co-payments and eligible drugs.
- D. Review all rebate statements to ensure rebates are being remitted to the MCJHIF in accordance with the MCJHIF Self Insured Prescription Drug Program TPA contract.

- E. Review all drugs purchased and from where the drugstore purchased the drugs. Research and advise the MCJHIF which provider has the lowest costs.
- F. Provide a monthly report to the Fund Administrator which shall contain but not be limited to information obtained from the claim review, rebate review and recommendations to reduce costs.
- G. Under the direction of the Fund Administrator, the consultant shall serve as the Account Manager for the MCJHIF Medicare Retiree Drug Subsidy, (RDS) Program. This shall include reviews of the Self- Insured Prescription Drug Program TPA's reports and records. The successful vendor is also responsible for the timely completion of all submissions to RDS in accordance with the Medicare Prescription Drug Benefit Program as set forth in Part D of the Medicare Prescription Drug Improvement and Modernization Act of 2003 and all amendments thereto.
- H. The successful vendor shall also send "Credible coverage Notices" to all eligible retirees as required by the Medicare Prescription Drug Benefit Program as set forth in Part D of the Medicare Prescription Drug Improvement and Modernization Act of 2003 and all amendments thereto. This shall be done annually.
- I. Establish a toll free phone number to provide customer service assistance to Employees, provide 24/7 member access to service.
- J. Create employee communications literature as necessary or requested by the MCJHIF Fund Administrator.
- K. Provide assistance at open enrollment and/or when plan changes are introduced as required by the Fund Administrator.
- L. The successful vendor shall be required to contact the contracted Third Party Administrator for the Self-Insured Prescription Plan in the event of an "exception" in which an employee needs to obtain and "override" on a prescription. This is a necessary function which is required in very specific instances.
- M. Provide information regarding market trends and their possible impact on the MCJHIF's plan. Provide detailed recommendations for long-term and short-term strategies which will drive unit costs of the Prescription Drug Plan down.
- N. Monitor Excluded Drug and Step Therapy Review Process with affected members and provide 24/7 member access to service. Prepare monthly reports and provide quarterly report at Professionals meeting.