SOLICITATION ADDENDUM Three
QUESTIONS AND ANSWERS

SOLICITATION NUMBER: 124528 ON
Medicaid Drug Rebate System
Opening Date: July 23, 2026
Addendum Effective Date: July 6, 2026

Questions and Answers

Following are the questions submitted and answers provided for the above-mentioned solicitation. The questions and answers are to be considered as part of the solicitation. It is the responsibility of bidders to check the State Purchasing Bureau website for all addenda or amendments.

Question Number	RFP/ITB Section Reference	RFP/ITB Page Number	Question	State Response
1.	Attachment A-MDR Functional Requirements and Attachment B-MDR Technical Requirements		To accommodate and ease the use of graphics and tables in Offerors response, are Offerors allowed to provide their response not within a table cell, but outside of the table, as long as the RFP table or table row precede the response?	Yes, as long as the response is concise and relevant.
2.	ATTACHMENT A - Functional Requirement		Please confirm that Bidders are allowed to modify the PDF to include all needed information per each requirement.	Word attachment has been uploaded.
3.	Section VI. Solicitation Response Instructions	p.54	Can the State confirm what constitutes the "Requested samples" to be submitted as a separate files under Part II of the Technical response?	Within Attachment A and B, samples were requested for reporting and project management deliverables (i.e. Attachment B – SPC-09, Attachment A – IVM-41, CDT-07).
4.	Section I.C Schedule of Events	p.2	We request that the opening date for Solicitation No. 124528 ON be extended from July 23, 2026 to August 13, 2026. Because the State responses to written questions are not	DHHS will extend the opening date to August 6, 2026 at 2:00 PM. Correction to scope of work to be posted.

			posted until July 7, the current schedule leaves a very limited window to incorporate those answers into a complete and accurate response. An extension would allow bidders adequate time to fully address all requirements and submit stronger, more responsive proposals.	
5.	ATTACHMENT C - MDR INTERFACES AND DATA EXCHANGES - MDR3	p.1	Could DHHS please explain how and why the Drug Rebate system uses Medispan Data file attributes in their DR program data? Is it DHHS expectation that the Drug Rebate Vendor procure the Medispan Data file?	MDR3 references a proprietarily data file called “MEDI”. This file is an extract from the MMIS to MDR.
6.	ATTACHMENT B - Technical Requirements - OM-04	p. 42	Will DHHS consider a RPO defined in hours instead of minutes, e.g. 1 Hour?	The bidder may define RPO in minutes or hours.
7.	RFP V.D.2. - Project Initiation and Planning	p. 28	This section says "Develop and create all plans as outlined herein subsections a through j." However, the RFP only has items a. through i. listed. Is there an intended item j. that was left out if this section?	Yes, DHHS confirms section V.D.2. only has a-i. There is no section j. Correction to scope of work to be posted.
8.	Attachment A and Attachment B	ALL	Should the response documents contain "drop down" tables of available options to choose from for "Met the requirement" and "Implementation Approach" responses or should the vendor manually add/write in the Available Response option?	A Word version has been posted for download. Save a copy and “Enable Editing”.
9.	ATTACHMENT E - CMS Certification Outcomes & Metrics	p. 1	FM7 states - 'The system processes drug rebates accurately and quickly' relates to the Financial Management Module's financial cycle processing of pharmacy claims and provision of finalized claims to the	CMS required outcomes will ultimately be decided between CMS, the vendor and DHHS. Please refer to the specific functional requirements within the RFP to define the scope.

			Drug Rebate Module'. Since Vendor will not be the Financial Management module vendor - Does this need to be included?	
10.	ATTACHMENT E - CMS Certification Outcomes & Metrics	p. 1	Has the State defined proposed evidence or default metrics for the State-Specific Outcomes (STPBM01 - STPBM04)?	DHHS plans on defining metrics in collaboration with the successful bidder.
11.	Medicaid_Drug_Rebate_ System- b. Assists DHHS with APD Supporting Materials	p. 47	An Advanced Planning Document (APD) generally preceeds contract award. How would Vendor be engaged to support the generation of an APD prior to the contract award?	Updates to APD's may be required during implementation and operations of this project. An example of support would be the contributing to the content of the CMS monthly project status reports. The vendor would also support the state by providing cost or technical information if there was a scope change that needed to be documented in the IAPD.
12.	Medicaid_Drug_Rebate_ System- viii. The vendor shall develop a Certification Crosswalk…	p. 45	Vendors typically use the prescribed CMS "SMC Intake Form" to demonstrate how the Vendor's deliverables, documentation, project/operatons outputs, and performance metrics align with the Conditions for Enhanced Funding, CMS Required and State Specific Outcomes for the module. Is the SMC Intake Form the intended Certification Crosswalk artifact?	The Certification Crosswalk is a separate deliverable (similar to an RTM) which the state and the successful bidder will collaborate on. The state and the successful bidder will also collaborate to create the intake form prior to Certification.
13.	Medicaid_Drug_Rebate_ System- c. Operations Readiness Review (ORR) ii. . The vendor's solution must comply with all vendor-applicable requirements outlined in CMS Conditions for Enhanced	p. 46	Has DHHS assessed all 22 SMC CEFs and determined any CEFs that are not considered vendor-applicable (i.e. outside the scope of the Drug Rebate implementation)?	DHHS has done an initial assessment of the applicable CEFs and outcomes, however, ultimately the applicable CEFs and outcomes will be determined by CMS.

	Funding 42 C.F.R. 433.112.			
14.	Medicaid_Drug_Rebate_ System b. Pre-Operational Readiness Review ii. The Vendor shall use State approved testing procedures… vii. The Vendor shall develop a crosswalk for all requirements of the SMC Testing Guidance Framework to address where each requirements is addressed.	p. 45	Has DHHS included the CMS MES Testing Framework expectations into the State approved testing procedures?	DHHS has not performed a specific cross-walk to the CMS MES Testing Framework expectations. The bidder must put together their test plan, using the CMS Testing Guidance Framework to cover certification. The bidder is also responsible for making sure that they write the test plan so that it meets NE test team requirements.
15.	Medicaid_Drug_Rebate_ System c. Operational Readiness Review (ORR) i. The Vendor shall develop ORR Checklists…	p. 46	CMS utilizes the SMC Intake Form vs ORR/CR Checklists. Does DHHS agree to use the SMC Intake Form to meet the ORR/CR Checklist expectation?	Yes, it is the state's expectation that the vendor will utilize the current template from CMS, including the SMC Intake form.
16.	Medicaid_Drug_Rebate_ System e. Operations Metrics i. The Vendor shall develop, prodcue, update and support initial and ongoing metrics reportinig…		CMS utilizes the SMC Operational Report Workbook (ORW). Does DHHS agree to use the SMC Intake Form to meet the SMC ORW expectation?	The SMC ORW is a separate CMS requirement. SMC Intake Form will not be accepted in replacement.
17.	Medicaid_Drug_Rebate_ System I. Deliverables and Due Dates 1. Implemenation Deliverables	p. 48	CMS best practice includes obtaining 6 months of operational evidence to support the Final CR. Further, the System Acceptance Letter is also dependent on the 6 month timeframe. Does DHHS agree that Certification cannot occur within 6 months of Go Live because of this requirement?	The system acceptance letter must be submitted with the CR request, which will happen sooner than 6 months into operations. The state should accept the system when it is confident that all DDI requirements have been met.
18.	General Question		Please confirm whether any of the work in scope is covered under a collective bargaining agreement	No.
19.			The cost sheet is currently provided in PDF format. Could state please confirm whether an Excel version will be made available, or	A word version has now been provided please utilize this.

			advise on the preferred format for submission?	
20.	Medicaid_Drug_Rebate_ System Cost_Sheet	p. 48	The DDI is expected to be completed within 12–18 months. As per the cost sheet, the initial contract term is five years, including 48 months of M&O. If the DDI exceeds 12 months, will the overall contract term be extended accordingly, or will the M&O period be reduced to maintain the five-year duration? Additionally, should the vendor update the M&O period in the cost sheet to reflect this?	DHHS will reduce the M&O period to maintain the five-year duration. NO the cost sheet should not be manipulated.
21.	Attachment_A MDR_Fun ctional_Requirements	p. 13	Please provide the current annual or quarterly count of invoices produced.	DHHS sends approximately 4.6 million invoices, annually.
22.	Attachment_A MDR_Fun ctional_Requirements	p. 13	Please provide the current annual or quarterly dollar amount invoiced for rebate.	DHHS estimates the current annual invoiced amount for rebate to be approximately $616,311,000.

This addendum will be incorporated into the solicitation.