



Response to Request for Proposal



NEBRASKA

DEPT. OF ADMINISTRATIVE SERVICES

The State of Nebraska Request for Proposal 6396 Z1

Nebraska ADAP Pharmacy Benefit Management (PBM) Services

Submission Date: 11/24/2020 2:00pm CT



Nebraska ADAP Pharmacy Benefit Management Services RFP

As Nebraska ADAP's current PBM, ScriptGuideRX, Inc (SGRX) would like to thank you for the opportunity to participate in the Pharmacy Benefit Management Services Request for Proposal for the State of Nebraska ADAP program. Enclosed please find SGRX's response to the information requested in the RFP. SGRX agrees to the scope, terms, and pricing contained in this proposal.

SGRX is a privately held Pharmacy Benefit Manager (PBM) / Third Party Administrator (TPA) providing services to private and public entities including State AIDS Drug Assistance Programs (ADAP) since 2001. Over the past 10 years SGRX has successfully implemented PBM / TPA services for the following State ADAPs: Wyoming, Michigan, Nebraska, Montana, Utah, Mississippi, US Virgin Islands, Hawaii, Tennessee Insurance Assistance Program administered by Nashville CARES, and South Carolina.

SGRX's core ADAP services include the following:

- Online Claims Processing Platform with the flexibility to administer complex plan designs
- Flexible Pharmacy Network Management program with over 120 pharmacies statewide
- Clinical programs & Services that include Formulary Management, and Utilization management
- Expertise in Analytics & ADAP specific reporting requirements including client Level data reports
- Rebate (supplemental and regular) administration Services
- Private Insurance Member Payment Services
- Comprehensive Data Warehouse tools

In addition to our core services, as NEDAP's current PBM, SGRX has supported and developed:

- 340B inventory management database;
- 340B compliance management,
- Data Warehouse;
- Monitoring Medicaid, CMS, and HMS data matching and recoupment.

SGRX has extensive experience managing State Drug Assistance programs including serving as the Nebraska ADAPs PBM partner since 2012. Since the inception of our partnership SGRX has supported the Nebraska Drug Assistance program by providing a variety of customized services including online electronic claims processing, pharmacy network management, eligibility management, formulary management, rebate administration, and program specific reporting. In addition, SGRX has worked diligently on providing a hands-on approach to customer service. SGRX's dedicated ADAP account team consist of an Account Executive, Coordinator, Reporting/IT Analyst & Clinical Account Manager working closely with the programs' core management team to ensure all clients are able to utilize the program effectively. Our team has been responsible for routine onsite plan performance reviews during which the following are discussed: Utilization Statistics, Operational Initiatives, & Future Strategic Initiatives. These forums are used to ensure we are effectively collaborating with the pharmacy providers to manage costs, monitor efficacy & entrance of new drugs, and importantly discuss & implement initiatives designed to help eliminate potential barriers to care.

We are very excited about the opportunity to continue our partnership with the State of Nebraska. While the proposed "all-inclusive" administrative fee is very competitive, we are confident that no other PBM can match the level of customer service we provide our ADAP clients. To that end, we are confident that the resources available under the SGRX umbrella will make us a continued worthy partner for the State of Nebraska ADAP. This serves as confirmation that SGRX can continue providing all services listed in the "Responsibilities" described in this RFP and that SGRX will continue to comply with all the requirements of this RFP.

Thank you very much for the opportunity to participate in the RFP process.

Sincerely,



Ime Ekpenyong
Chief Executive Officer

I. TERMS AND CONDITIONS

Contractors should complete Sections II through VI as part of their proposal. Contractor is expected to read the Terms and Conditions and should initial either accept, reject, or reject and provide alternative language for each clause. The contractor should also provide an explanation of why the contractor rejected the clause or rejected the clause and provided alternate language. By signing the solicitation, contractor is agreeing to be legally bound by all the accepted terms and conditions, and any proposed alternative terms and conditions submitted with the proposal. The State reserves the right to negotiate rejected or proposed alternative language. If the State and contractor fail to agree on the final Terms and Conditions, the State reserves the right to reject the proposal. The State of Nebraska is soliciting proposals in response to this solicitation. The State of Nebraska reserves the right to reject proposals that attempt to substitute the contractor's commercial contracts and/or documents for this solicitation.

The contractors should submit with their proposal any license, user agreement, service level agreement, or similar documents that the contractor wants incorporated in the Contract. The State will not consider incorporation of any document not submitted with the contractor's proposal as the document will not have been included in the evaluation process. These documents shall be subject to negotiation and will be incorporated as addendums if agreed to by the Parties.

If a conflict or ambiguity arises after the Addendum to Contract Award have been negotiated and agreed to, the Addendum to Contract Award shall be interpreted as follows:

1. If only one Party has a particular clause then that clause shall control;
2. If both Parties have a similar clause, but the clauses do not conflict, the clauses shall be read together;
3. If both Parties have a similar clause, but the clauses conflict, the State's clause shall control.

B. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The contract resulting from this solicitation shall incorporate the following documents:

1. Request for Proposal and Addenda;
2. Amendments to the solicitation;
3. Questions and Answers;
4. Contractor's proposal (Solicitation and properly submitted documents);
5. The executed Contract and Addendum One to Contract, if applicable; and,
6. Amendments/Addendums to the Contract.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a future contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each lower numbered document having preference over any higher numbered document: 1) Amendment to the executed Contract with the most recent dated amendment having the highest priority, 2) executed Contract and any attached Addenda, 3) Amendments to solicitation and any Questions and Answers, 4) the original solicitation document and any Addenda, and 5) the Contractor's submitted Proposal.

Any ambiguity or conflict in the contract discovered after its execution, not otherwise addressed herein, shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

C. NOTIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
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Contractor and State shall identify the contract manager who shall serve as the point of contact for the executed contract.

Communications regarding the executed contract shall be in writing and shall be deemed to have been given if delivered personally or mailed, by U.S. Mail, postage prepaid, return receipt requested, to the parties at their respective addresses

set forth below, or at such other addresses as may be specified in writing by either of the parties. All notices, requests, or communications shall be deemed effective upon personal delivery or five (5) calendar days following deposit in the mail.

Either party may change its address for notification purposes by giving notice of the change, and setting forth the new address and an effective date.

D. NOTICE (POC)

The State reserves the right to appoint a Buyer's Representative to manage [or assist the Buyer in managing] the contract on behalf of the State. The Buyer's Representative will be appointed in writing, and the appointment document will specify the extent of the Buyer's Representative authority and responsibilities. If a Buyer's Representative is appointed, the Contractor will be provided a copy of the appointment document, and is expected to cooperate accordingly with the Buyer's Representative. The Buyer's Representative has no authority to bind the State to a contract, amendment, addendum, or other change or addition to the contract.

E. GOVERNING LAW (Statutory)

Notwithstanding any other provision of this contract, or any amendment or addendum(s) entered into contemporaneously or at a later time, the parties understand and agree that, (1) the State of Nebraska is a sovereign state and its authority to contract is therefore subject to limitation by the State's Constitution, statutes, common law, and regulation; (2) this contract will be interpreted and enforced under the laws of the State of Nebraska; (3) any action to enforce the provisions of this agreement must be brought in the State of Nebraska per state law; (4) the person signing this contract on behalf of the State of Nebraska does not have the authority to waive the State's sovereign immunity, statutes, common law, or regulations; (5) the indemnity, limitation of liability, remedy, and other similar provisions of the final contract, if any, are entered into subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity; and, (6) all terms and conditions of the final contract, including but not limited to the clauses concerning third party use, licenses, warranties, limitations of liability, governing law and venue, usage verification, indemnity, liability, remedy or other similar provisions of the final contract are entered into specifically subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity.

The Parties must comply with all applicable local, state and federal laws, ordinances, rules, orders, and regulations.

F. BEGINNING OF WORK

The contractor shall not commence any billable work until a valid contract has been fully executed by the State and the successful Contractor. The Contractor will be notified in writing when work may begin.

G. AMENDMENT

This Contract may be amended in writing, within scope, upon the agreement of both parties.

H. CHANGE ORDERS OR SUBSTITUTIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The State and the Contractor, upon the written agreement, may make changes to the contract within the general scope of the solicitation. Changes may involve specifications, the quantity of work, or such other items as the State may find necessary or desirable. Corrections of any deliverable, service, or work required pursuant to the contract shall not be deemed a change. The Contractor may not claim forfeiture of the contract by reasons of such changes.

The Contractor shall prepare a written description of the work required due to the change and an itemized cost sheet for the change. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, a pro-rated value, or through negotiations. The State shall not incur a price increase for changes that should have been included in the Contractor's proposal, were foreseeable, or result from difficulties with or failure of the Contractor's proposal or performance.

No change shall be implemented by the Contractor until approved by the State, and the Contract is amended to reflect the change and associated costs, if any. If there is a dispute regarding the cost, but both parties agree that immediate implementation is necessary, the change may be implemented, and cost negotiations may continue with both Parties retaining all remedies under the contract and law.

In the event any product is discontinued or replaced upon mutual consent during the contract period or prior to delivery, the State reserves the right to amend the contract or purchase order to include the alternate product at the same price.

*****Contractor will not substitute any item that has been awarded without prior written approval of SPB*****

I. VENDOR PERFORMANCE REPORT(S)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The State may document any instance(s) of products or services delivered or performed which exceed or fail to meet the terms of the purchase order, contract, and/or solicitation specifications. The State Purchasing Bureau may contact the Vendor regarding any such report. Vendor performance report(s) will become a part of the permanent record of the Vendor.

J. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

If Contractor breaches the contract or anticipates breaching the contract, the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach, a proposed cure, and may include a request for a waiver of the breach if so desired. The State may, in its discretion, temporarily or permanently waive the breach. By granting a waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity, or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

K. BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Either Party may terminate the contract, in whole or in part, if the other Party breaches its duty to perform its obligations under the contract in a timely and proper manner. Termination requires written notice of default and a thirty (30) calendar day (or longer at the non-breaching Party's discretion considering the gravity and nature of the default) cure period. Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing time to cure a failure or breach of contract does not waive the right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby. OR In case of breach by the Contractor, the State may, without unreasonable delay, make a good faith effort to make a reasonable purchase or contract to purchased goods in substitution of those due from the contractor. The State may recover from the Contractor as damages the difference between the costs of covering the breach. Notwithstanding any clause to the contrary, the State may also recover the contract price together with any incidental or consequential damages defined in UCC Section 2-715, but less expenses saved in consequence of Contractor's breach.

The State's failure to make payment shall not be a breach, and the Contractor shall retain all available statutory remedies and protections.

L. NON-WAIVER OF BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The acceptance of late performance with or without objection or reservation by a Party shall not waive any rights of the Party nor constitute a waiver of the requirement of timely performance of any obligations remaining to be performed.

M. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the provision held to be invalid or illegal.

N. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

1. GENERAL

The Contractor agrees to defend, indemnify, and hold harmless the State and its employees, volunteers, agents, and its elected and appointed officials (“the indemnified parties”) from and against any and all third party claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses (“the claims”), sustained or asserted against the State for personal injury, death, or property loss or damage, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, Subcontractors, consultants, representatives, and agents, resulting from this contract, except to the extent such Contractor liability is attenuated by any action of the State which directly and proximately contributed to the claims.

2. INTELLECTUAL PROPERTY (Optional)

The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the indemnified parties from and against any and all claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, Subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement claim that will affect the State’s use of the Licensed Software without the State’s prior written consent, which consent may be withheld for any reason.

If a judgment or settlement is obtained or reasonably anticipated against the State’s use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor’s sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State’s behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State’s election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this solicitation.

3. PERSONNEL

The Contractor shall, at its expense, indemnify and hold harmless the indemnified parties from and against any claim with respect to withholding taxes, worker’s compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel, including subcontractor’s and their employees, provided by the Contractor.

4. SELF-INSURANCE

The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State

Miscellaneous (Section 81-8,294), Tort (Section 81-8,209), and Contract Claim Acts (Section 81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 et seq. and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. The Parties acknowledge that Attorney General for the State of Nebraska is required by statute to represent the legal interests of the State, and that any provision of this indemnity clause is subject to the statutory authority of the Attorney General.

O. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Parties agree to pay all expenses of such action, as permitted by law and if ordered by the court, including attorney's fees and costs, if the other Party prevails.

P. ASSIGNMENT, SALE, OR MERGER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Either Party may assign the contract upon mutual written agreement of the other Party. Such agreement shall not be unreasonably withheld.

The Contractor retains the right to enter into a sale, merger, acquisition, internal reorganization, or similar transaction involving Contractor's business. Contractor agrees to cooperate with the State in executing amendments to the contract to allow for the transaction. If a third party or entity is involved in the transaction, the Contractor will remain responsible for performance of the contract until such time as the person or entity involved in the transaction agrees in writing to be contractually bound by this contract and perform all obligations of the contract.

Q. CONTRACTING WITH OTHER NEBRASKA POLITICAL SUB-DIVISIONS OF THE STATE OR ANOTHER STATE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor may, but shall not be required to, allow agencies, as defined in Neb. Rev. Stat. §81-145, to use this contract. The terms and conditions, including price, of the contract may not be amended. The State shall not be contractually obligated or liable for any contract entered into pursuant to this clause. A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

The Contractor may, but shall not be required to, allow other states, agencies or divisions of other states, or political subdivisions of other states to use this contract. The terms and conditions, including price, of this contract shall apply to any such contract, but may be amended upon mutual consent of the Parties. The State of Nebraska shall not be contractually or otherwise obligated or liable under any contract entered into pursuant to this clause. The State shall be notified if a contract is executed based upon this contract.

R. FORCE MAJEURE

Accept	Reject	Reject & Provide	NOTES/COMMENTS:
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(Initial)	(Initial)	Alternative within Solicitation Response (Initial)	
IE			

Neither Party shall be liable for any costs or damages, or for default resulting from its inability to perform any of its obligations under the contract due to a natural or manmade event outside the control and not the fault of the affected Party ("Force Majeure Event"). The Party so affected shall immediately make a written request for relief to the other Party, and shall have the burden of proof to justify the request. The other Party may grant the relief requested; relief may not be unreasonably withheld. Labor disputes with the impacted Party's own employees will not be considered a Force Majeure Event.

S. CONFIDENTIALITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

All materials and information provided by the Parties or acquired by a Party on behalf of the other Party shall be regarded as confidential information. All materials and information provided or acquired shall be handled in accordance with federal and state law, and ethical standards. Should said confidentiality be breached by a Party, the Party shall notify the other Party immediately of said breach and take immediate corrective action.

It is incumbent upon the Parties to inform their officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable by 5 U.S.C. 552a (m)(1), provides that any officer or employee, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than \$5,000.

T. OFFICE OF PUBLIC COUNSEL (Statutory)

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract.

U. LONG-TERM CARE OMBUDSMAN (Statutory)

Contractor must comply with the Long-Term Care Ombudsman Act, per Neb. Rev. Stat. §§ 81-2237 et seq. This section shall survive the termination of this contract.

V. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.
2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day's written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination the Contractor shall be entitled to payment, determined on a pro rata basis, for products or services satisfactorily performed or provided.
3. The State may terminate the contract immediately for the following reasons:

- a. if directed to do so by statute;
- b. Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
- c. a trustee or receiver of the Contractor or of any substantial part of the Contractor's assets has been appointed by a court;
- d. fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
- e. an involuntary proceeding has been commenced by any Party against the Contractor under any one of the chapters of Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor;
- f. a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
- g. Contractor intentionally discloses confidential information;
- h. Contractor has or announces it will discontinue support of the deliverable; and,
- i. In the event funding is no longer available.

W. CONTRACT CLOSEOUT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Upon contract closeout for any reason the Contractor shall within 30 days, unless stated otherwise herein:

1. Transfer all completed or partially completed deliverables to the State;
2. Transfer ownership and title to all completed or partially completed deliverables to the State;
3. Return to the State all information and data, unless the Contractor is permitted to keep the information or data by contract or rule of law. Contractor may retain one copy of any information or data as required to comply with applicable work product documentation standards or as are automatically retained in the course of Contractor's routine back up procedures;
4. Cooperate with any successor Contractor, person or entity in the assumption of any or all of the obligations of this contract;
5. Cooperate with any successor Contractor, person or entity with the transfer of information or data related to this contract;
6. Return or vacate any state owned real or personal property; and,
7. Return all data in a mutually acceptable format and manner.

Nothing in this Section should be construed to require the Contractor to surrender intellectual property, real or personal property, or information or data owned by the Contractor for which the State has no legal claim.

II. CONTRACTOR DUTIES

A. INDEPENDENT CONTRACTOR / OBLIGATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

It is agreed that the Contractor is an independent contractor and that nothing contained herein is intended or should be construed as creating or establishing a relationship of employment, agency, or a partnership.

The Contractor is solely responsible for fulfilling the contract. The Contractor or the Contractor's representative shall be the sole point of contact regarding all contractual matters.

The Contractor shall secure, at its own expense, all personnel required to perform the services under the contract. The personnel the Contractor uses to fulfill the contract shall have no contractual or other legal relationship with the State; they shall not be considered employees of the State and shall not be entitled to any compensation, rights or benefits from the State, including but not limited to, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

By-name personnel commitments made in the Contractor's proposal shall not be changed without the prior written approval of the State. Replacement of these personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

All personnel assigned by the Contractor to the contract shall be employees of the Contractor or a subcontractor, and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor or a subcontractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor or the subcontractor respectively.

With respect to its employees, the Contractor agrees to be solely responsible for the following:

1. Any and all pay, benefits, and employment taxes and/or other payroll withholding;
2. Any and all vehicles used by the Contractor's employees, including all insurance required by state law;
3. Damages incurred by Contractor's employees within the scope of their duties under the contract;
4. Maintaining Workers' Compensation and health insurance that complies with state and federal law and submitting any reports on such insurance to the extent required by governing law;
5. Determining the hours to be worked and the duties to be performed by the Contractor's employees; and,
6. All claims on behalf of any person arising out of employment or alleged employment (including without limit claims of discrimination alleged against the Contractor, its officers, agents, or subcontractors or subcontractor's employees)

If the Contractor intends to utilize any subcontractor, the subcontractor's level of effort, tasks, and time allocation should be clearly defined in the contractor's proposal. The Contractor shall agree that it will not utilize any subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or subcontractor employee.

Contractor shall insure that the terms and conditions contained in any contract with a subcontractor does not conflict with the terms and conditions of this contract.

The Contractor shall include a similar provision, for the protection of the State, in the contract with any Subcontractor engaged to perform work on this contract.

B. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:

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The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at <http://das.nebraska.gov/materiel/purchasing.html>
2. The completed United States Attestation Form should be submitted with the solicitation response.
3. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.
4. The Contractor understands and agrees that lawful presence in the United States is required and the Contractor may be disqualified or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. §4-108.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT / NONDISCRIMINATION (Statutory)

The Contractor shall comply with all applicable local, state, and federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their Subcontractors, from discriminating against any employee or bidder for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all Subcontracts for goods and services to be covered by any contract resulting from this solicitation.

D. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Contractor may be required to work with or in close proximity to other contractors or individuals that may be working on same or different projects. The Contractor shall agree to cooperate with such other contractors or individuals, and shall not commit or permit any act which may interfere with the performance of work by any other contractor or individual. Contractor is not required to compromise Contractor's intellectual property or proprietary information unless expressly required to do so by this contract.

E. DISCOUNTS

Prices quoted shall be inclusive of ALL trade discounts. Cash discount terms of less than thirty (30) days will not be considered as part of the proposal. Cash discount periods will be computed from the date of receipt of a properly executed claim voucher or the date of completion of delivery of all items in a satisfactory condition, whichever is later.

F. PRICES

All prices, costs, and terms and conditions submitted in the proposal shall remain fixed and valid commencing on the opening date of the proposal until the contract terminates or expires.

The State reserves the right to deny any requested price increase. No price increases are to be billed to any State Agencies prior to written amendment of the contract by the parties.

The State will be given full proportionate benefit of any decreases for the term of the contract.

G. COST CLARIFICATION

The State reserves the right to review all aspects of cost for reasonableness and to request clarification of any proposal where the cost component shows significant and unsupported deviation from industry standards or in areas where detailed pricing is required.

H. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The contract price shall include the cost of all royalties, licenses, permits, and approvals, whether arising from patents, trademarks, copyrights or otherwise, that are in any way involved in the contract. The Contractor shall obtain and pay for all royalties, licenses, and permits, and approvals necessary for the execution of the contract. The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, software, and other items used to execute this contract.

I. OWNERSHIP OF INFORMATION AND DATA / DELIVERABLES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The State shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or obtained by the Contractor on behalf of the State pursuant to this contract.

The State shall own and hold exclusive title to any deliverable developed as a result of this contract. Contractor shall have no ownership interest or title, and shall not patent, license, or copyright, duplicate, transfer, sell, or exchange, the design, specifications, concept, or deliverable.

J. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor shall throughout the term of the contract maintain insurance as specified herein and provide the State a current Certificate of Insurance/Acord Form (COI) verifying the coverage. The Contractor shall not commence work on the contract until the insurance is in place. If Contractor subcontracts any portion of the Contract the Contractor must, throughout the term of the contract, either:

1. Provide equivalent insurance for each subcontractor and provide a COI verifying the coverage for the subcontractor;
2. Require each subcontractor to have equivalent insurance and provide written notice to the State that the Contractor has verified that each subcontractor has the required coverage; or,
3. Provide the State with copies of each subcontractor's Certificate of Insurance evidencing the required coverage.

The Contractor shall not allow any Subcontractor to commence work until the Subcontractor has equivalent insurance. The failure of the State to require a COI, or the failure of the Contractor to provide a COI or require subcontractor insurance shall not limit, relieve, or decrease the liability of the Contractor hereunder.

In the event that any policy written on a claims-made basis terminates or is canceled during the term of the contract or within two (2) years of termination or expiration of the contract, the contractor shall obtain an extended discovery or reporting period, or a new insurance policy, providing coverage required by this contract for the term of the contract and two (2) years following termination or expiration of the contract.

If by the terms of any insurance a mandatory deductible is required, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

Notwithstanding any other clause in this Contract, the State may recover up to the liability limits of the insurance policies required herein.

1. WORKERS' COMPENSATION INSURANCE

The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contactors' employees to be engaged in work on the project under this contract and, in case any such work is sublet, the Contractor shall require the Subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the Subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. **The policy shall include a waiver of subrogation in favor of the State. The COI shall contain the mandatory COI subrogation waiver language found hereinafter.** The amounts of such insurance shall not be less than the limits stated hereinafter. For employees working in the State of Nebraska, the policy must be written by an entity authorized by the State of Nebraska Department of Insurance to write Workers' Compensation and Employer's Liability Insurance for Nebraska employees.

2. COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE

The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any Subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any Subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

The Commercial General Liability Insurance shall be written on an **occurrence basis**, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. **The policy shall include the State, and others as required by the contract documents, as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory. The COI shall contain the mandatory COI liability waiver language found hereinafter.** The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

REQUIRED INSURANCE COVERAGE	
COMMERCIAL GENERAL LIABILITY	
General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	\$2,000,000
Personal/Advertising Injury	\$1,000,000 per occurrence
Bodily Injury/Property Damage	\$1,000,000 per occurrence
Medical Payments	\$10,000 any one person
Damage to Rented Premises (Fire)	\$300,000 each occurrence
Contractual	Included
XCU Liability (Explosion, Collapse, and Underground Damage)	Included
Independent Contractors	Included
Abuse & Molestation	Included
<i>If higher limits are required, the Umbrella/Excess Liability limits are allowed to satisfy the higher limit.</i>	
WORKER'S COMPENSATION	
Employers Liability Limits	\$500K/\$500K/\$500K
Statutory Limits- All States	Statutory - State of Nebraska
USL&H Endorsement	Statutory
Voluntary Compensation	Statutory
COMMERCIAL AUTOMOBILE LIABILITY	
Bodily Injury/Property Damage	\$1,000,000 combined single limit
Include All Owned, Hired & Non-Owned Automobile liability	Included
Motor Carrier Act Endorsement	Where Applicable
UMBRELLA/EXCESS LIABILITY	
Over Primary Insurance	\$5,000,000 per occurrence
PROFESSIONAL LIABILITY	
Professional liability (Medical Malpractice) Qualification Under Nebraska Excess Fund	Limits consistent with Nebraska Medical Malpractice Cap
All Other Professional Liability (Errors & Omissions)	\$1,000,000 Per Claim / Aggregate
CYBER LIABILITY	
Breach of Privacy, Security Breach, Denial of Service, Remediation, Fines and Penalties	\$10,000,000
MANDATORY COI SUBROGATION WAIVER LANGUAGE	
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."	
MANDATORY COI LIABILITY WAIVER LANGUAGE	
"Commercial General Liability & Commercial Automobile Liability policies shall name the State of Nebraska as an Additional Insured and the policies shall be primary and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory as additionally insured."	

3. EVIDENCE OF COVERAGE

The Contractor shall furnish the Contract Manager, with a certificate of insurance coverage complying with the above requirements prior to beginning work at:

Department of Health and Human Services
 Attn: ADAP Manager
 301 Centennial Mall S
 Lincoln, NE 68509

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Reasonable notice of cancellation of any required insurance policy must be submitted to the contract manager as listed above when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

4. DEVIATIONS

The insurance requirements are subject to limited negotiation. Negotiation typically includes, but is not necessarily limited to, the correct type of coverage, necessity for Workers' Compensation, and the type of automobile coverage carried by the Contractor.

K. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust laws of the United States and the antitrust laws of the State.

L. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

By submitting a proposal, bidder certifies that no relationship exists between the bidder and any person or entity which either is, or gives the appearance of, a conflict of interest related to this Request for Proposal or project.

Bidder further certifies that bidder will not employ any individual known by bidder to have a conflict of interest nor shall bidder take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its contractual obligations hereunder or which creates an actual or appearance of conflict of interest.

If there is an actual or perceived conflict of interest, bidder shall provide with its proposal a full disclosure of the facts describing such actual or perceived conflict of interest and a proposed mitigation plan for consideration. The State will then consider such disclosure and proposed mitigation plan and either approve or reject as part of the overall bid evaluation.

M. STATE PROPERTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor shall be responsible for the proper care and custody of any State-owned property which is furnished for the Contractor's use during the performance of the contract. The Contractor shall reimburse the State for any loss or damage of such property; normal wear and tear is expected.

N. SITE RULES AND REGULATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor shall use its best efforts to ensure that its employees, agents, and Subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with the State to ensure access to the facility and the equipment has

been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to in writing between the State and the Contractor.

O. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its goods or services are endorsed or preferred by the State. Any publicity releases pertaining to the project shall not be issued without prior written approval from the State.

P. NEBRASKA TECHNOLOGY ACCESS STANDARDS (Statutory)

Contractor shall review the Nebraska Technology Access Standards, found at <https://nitc.nebraska.gov/standards/2-201.pdf> and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

Q. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided upon request to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue delivery of goods and services as specified under the specifications in the contract in the event of a disaster.

R. DRUG POLICY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Contractor certifies it maintains a drug free work place environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

S. WARRANTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Despite any clause to the contrary, the Contractor represents and warrants that its services hereunder shall be performed by competent personnel and shall be of professional quality consistent with generally accepted industry standards for the performance of such services and shall comply in all respects with the requirements of this Agreement. For any breach of this warranty, the Contractor shall, for a period of ninety (90) days from performance of the service, perform the services again, at no cost to Customer, or if Contractor is unable to perform the services as warranted, Contractor shall reimburse

Customer the fees paid to Contractor for the unsatisfactory services. The rights and remedies of the parties under this warranty are in addition to any other rights and remedies of the parties provided by law or equity, including, without limitation actual damages, and, as applicable and awarded under the law, to a prevailing party, reasonable attorneys' fees and costs.

PAYMENT

T. PROHIBITION AGAINST ADVANCE PAYMENT (Statutory)

Neb. Rev. Stat. §§81-2403 states, “[n]o goods or services shall be deemed to be received by an agency until all such goods or services are completely delivered and finally accepted by the agency.”

U. TAXES (Statutory)

The State is not required to pay taxes and assumes no such liability as a result of this solicitation. The Contractor may request a copy of the Nebraska Department of Revenue, Nebraska Resale or Exempt Sale Certificate for Sales Tax Exemption, Form 13 for their records. Any property tax payable on the Contractor's equipment which may be installed in a state-owned facility is the responsibility of the Contractor

V. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Invoices for payments must be submitted by the Contractor to the agency requesting the services with sufficient detail to support payment.

Invoices shall be submitted monthly with the submission of the progress and performance reports by the 15th of each month. Invoices shall be submitted electronically. Email address will be provided upon contract execution.

The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

W. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials.

The State and/or its authorized representatives shall have the right to enter any premises where the Contractor or Subcontractor duties under the contract are being performed, and to inspect, monitor or otherwise evaluate the work being performed. All inspections and evaluations shall be at reasonable times and in a manner that will not unreasonably delay work.

X. PAYMENT (Statutory)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

Payment will be made by the responsible agency in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2403). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any goods and services provided by the Contractor prior to the Effective Date of the contract, and the Contractor hereby waives any claim or cause of action for any such services.

Y. LATE PAYMENT (Statutory)

The Contractor may charge the responsible agency interest for late payment in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408).

Z. SUBJECT TO FUNDING / FUNDING OUT CLAUSE FOR LOSS OF APPROPRIATIONS (Statutory)

The State's obligation to pay amounts due on the Contract for a fiscal years following the current fiscal year is contingent upon legislative appropriation of funds. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal year(s) for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of termination. All obligations of the State to make payments after the termination date will cease. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

AA. RIGHT TO AUDIT (First Paragraph is Statutory)

The State shall have the right to audit the Contractor's performance of this contract upon a thirty (30) days' written notice. Contractor shall utilize generally accepted accounting principles, and shall maintain the accounting records, and other records and information relevant to the contract (Information) to enable the State to audit the contract. (Neb. Rev. Stat. §84-304 et seq.) The State may audit and the Contractor shall maintain, the Information during the term of the contract and for a period of five (5) years after the completion of this contract or until all issues or litigation are resolved, whichever is later. The Contractor shall make the Information available to the State at Contractor's place of business or a location acceptable to both Parties during normal business hours. If this is not practical or the Contractor so elects, the Contractor may provide electronic or paper copies of the Information. The State reserves the right to examine, make copies of, and take notes on any Information relevant to this contract, regardless of the form or the Information, how it is stored, or who possesses the Information. Under no circumstance will the Contractor be required to create or maintain documents not kept in the ordinary course of contractor's business operations, nor will contractor be required to disclose any information, including but not limited to product cost data, which is confidential or proprietary to contractor.

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
IE			

The Parties shall pay their own costs of the audit unless the audit finds a previously undisclosed overpayment by the State. If a previously undisclosed overpayment exceeds one-half of one percent (0.5%) of the total contract billings, or if fraud, material misrepresentations, or non-performance is discovered on the part of the Contractor, the Contractor shall reimburse the State for the total costs of the audit. Overpayments and audit costs owed to the State shall be paid within ninety (90) days of written notice of the claim. The Contractor agrees to correct any material weaknesses or condition found as a result of the audit.

III. PROJECT DESCRIPTION AND SCOPE OF WORK

The bidder should provide the following information in response to this solicitation.

A. PROJECT OVERVIEW

Nebraska Department of Health and Human Services (DHHS) is requesting proposals from qualified bidders to provide pharmacy benefits manager services to the Ryan White Program.

Nebraska's AIDS Drug Assistance Program (ADAP) is located within the Ryan White Part B Program. It includes two components, the Medication Assistance Program, which provides HIV-related medications from an approved formulary directly to enrolled ADAP clients who do not have health insurance, and the Insurance Assistance Program, which provides health insurance coverage and/or covers health-insurance related expenses to ensure access to HIV-related pharmaceuticals from an approved formulary for enrolled ADAP clients. Both programs are available to eligible residents of Nebraska. There are two (2) client enrollment sites for Nebraska's ADAP. DHHS completes client enrollment, approves client eligibility, and manages the ADAP formularies for the Medication Assistance and Insurance Assistance Programs.

ADAP is a state and territory-administered program authorized under Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) that provides FDA-approved medications to low-income people living with HIV who have limited or no health coverage from private insurance, Medicaid, or Medicare. ADAP funds may also be used to

purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of drug treatments.

Pharmacy-related services for ADAP include:

- Establishing statewide accessibility to HIV-related pharmaceuticals for clients enrolled in ADAP;
- Coordinating insurance benefits, including payment of health insurance premiums;
- Processing point-of-sale pharmaceutical purchases, including payment of health insurance plan deductible, co-insurance, and/or co-payment amounts;
- Adjudicating pharmaceutical-related claims;
- Coordinating with Medicare, Medicaid, and private insurance carriers;
- Collecting and reporting data on pharmaceutical and insurance-related claims; and
- Billing third-party payers when clients are found to be retro-eligible for other benefit programs.

Direct pharmacy services include:

- Distributing medications for ADAP to health providers, clinics, and individuals throughout the state.

The source of funding is derived from both state and federal funds. ADAP funds, in part, are authorized through the United States Department of Health and Human Services, Health Resources and Services Administration (HRSA). The enabling legislation is under Part B of Title XXVI of the Public Health Service (PHS) Act, as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87), which specifies many of the eligibility criteria, fundable services, and data requirements described in this Request for Proposal document.

B. PROJECT REQUIREMENTS

The Ryan White HIV/AIDS Program (RWHAP) legislation requires that each ADAP must cover at least one drug from each class of HIV antiretroviral medications on their ADAP formulary. RWHAP funds may only be used to purchase FDA-approved medications. Within these requirements, each ADAP decides which medications to include on its formulary and how those medications will be distributed.

DHHS requires that ADAP eligibility criteria must be consistently applied across the State, and that all formulary medications and ADAP-funded services must be equally and consistently available to all eligible enrolled people throughout the State.

1. Pharmacy Benefit Management

The Contractor must provide pharmacy benefit management for ADAP's Insurance Assistance Program. Services shall include statewide access to pharmaceuticals for ADAP clients with health insurance. This must include a mail-order option, but may also include a network of retail pharmacies throughout the state. Pharmaceuticals shall also be shipped to health care clinics, substance abuse treatment providers, and individuals throughout the State of Nebraska. Other services include point-of-sale claims adjudication; screening for other benefit homes or programs that a client may be enrolled in; client adherence counseling; utilization management; data collection, analytics, and reporting; and customer service, including access to real-time claims data for ADAP staff.

2. Insurance Benefit Management

The Contractor must provide insurance benefit management for ADAP's Insurance Assistance Program. Services shall include payment of ADAP-supported health insurance premiums, monitoring and reporting to ADAP, and assistance with adjudication of issues related to payment and eligibility for clinical or pharmaceutical services.

3. Direct Pharmacy Services

The Contractor must provide pharmacy services to include distribution of prescription medications for the treatment of HIV/AIDS. HIV-related medication prescriptions are filled for clients enrolled in ADAP's Medication Assistance Program (i.e., for clients without health insurance). Storage, handling, and shipment procedures must be in compliance with the [Ryan White ADAP](#), the [Office of Pharmacy Affairs](#), and with federal and state laws.

ADAP's Medication Assistance Program requires the Contractor to offer supportive pharmacy services, including adherence counseling, to enrolled clients. Other ADAP pharmacy services include providing technical support to ADAP staff, medical providers, and case managers on special projects related to improving patient adherence and pharmacy service delivery; and administering a back-billing program for ADAP clients found to be retro-eligible for other payers, such as Medicaid and commercial insurance.

The Contractor will order medications directly from a wholesaler designated by the Contractor. All ADAP medications must be purchased at non-340B prices and, where applicable, inventoried separately from medications purchased at 340B prices for other programs.

The approved formulary for ADAP is listed as Attachment C, medications may be added to or removed from the formularies by DHHS during the project period. This may be based upon action by the Food and Drug Administration (FDA), new or revised U.S. Public Health Services guidelines, and/or other factors.

C. BUSINESS REQUIREMENTS

The bidder shall be a pharmacy or health organization licensed to dispense pharmaceuticals in the State of Nebraska, or shall have the ability to establish a contract with such a pharmacy (or pharmacies). The Contactor or its contract pharmacy shall be an enrolled Medicaid provider no later than two months after contract execution. The Contractor shall be capable of billing public or commercial insurance plans when ADAP clients are found to have had coverage from another payer, or to be retro-eligible for other health insurance plans or payers.

Bidders must also:

1. Document financial responsibility sufficient to cover costs of ADAP client health insurance premium payments and cost-sharing prior to reimbursement from DHHS and to sustain any and all losses through the contract caused by failure to follow proper ADAP approval processes;
2. Maintain adequate records for complete financial and programmatic audits; and
3. Provide required reports in the specified timeframes.

D. SCOPE OF WORK

1. Transition Plan

The bidder shall develop a plan to transition DHHS' pharmacy services from the current single contract-pharmacy model to the bidder's proposed model within 60 days in such a way as to ensure seamless continuation of pharmacy services to DHHS clients. The Contractor will implement the plan after contract execution.

2. Pharmacy Benefits Management services – ADAP Insurance Assistance Program

a. Pharmacy Network

The Contractor shall establish statewide availability of prescription medications on the ADAP Insurance Assistance Program formulary for ADAP enrollees. The network shall include a mail-order option with overnight shipping capability for newly enrolled ADAP clients (or upon request of ADAP staff), and may include the following types of pharmacies:

- i. Over-the-counter (chain store and independent pharmacies);
- ii. Institutional (i.e., University based hospitals, county hospitals, Health Maintenance Organizations);
- iii. Specialty (i.e., HIV targeted services).

For mail-order prescriptions, medications must be shipped within three (3) days of receipt of a prescription.

If a network of pharmacies is established by the Contractor, the Contractor shall enter into contractual agreements with the pharmacies. The contracts shall require the pharmacies to operate in compliance with service standards and ADAP guidelines, provide medication adherence counseling to ADAP clients, maintain adequate inventory, and fill prescriptions promptly.

The Contractor will inform ADAP when there are changes in the pharmacy network with a monthly report, and shall notify ADAP within one (1) business day when there are problems or emergent situations.

The Contractor will communicate at least monthly with pharmacies in the network to inform them of program issues, such as formulary updates, changes in how ADAP interacts with insurance companies or other government payers, and other relevant issues. The Contractor shall submit to ADAP communications that go to the pharmacy network fourteen (14) calendar days prior to release. Communications that go to the pharmacy network shall be approved by ADAP staff.

b. Provision of Basic Treatment Adherence

The Contractor shall ensure that all ADAP clients receive basic treatment adherence counseling at each fill and refill.

c. Coordination of Benefits/Claims Processing

The Contractor shall:

- i. Provide for electronic claims processing that allows pharmacies to do online adjudication and split billing/cross-over claims, such that pharmacies and/or clients are not required to submit manual claims for secondary payers.
- ii. Coordinate primary, secondary, and tertiary payers of prescription claims and be able to transmit primary, secondary, and/or tertiary insurance information to a pharmacy in its network.
- iii. Exhaust all means of prescription claim payment with ADAP as the final payer so that ADAP remains the payer of last resort.
- iv. Coordinate coverage and benefits with other health insurance providers to ensure that applicable expenditures are credited toward meeting the client's out-of-pocket expenditure requirements of the health insurance plan.
- v. Coordinate coverage and benefits with Medicare Part D Prescription Drug Plans, when applicable, and ensure that ADAP expenditures are credited toward meeting clients' true out-

of-pocket (TrOOP) expenditure requirements as specified by guidance from HRSA ([see Section III.3.D of the ADAP Manual](#)) and the Centers for Medicare and Medicaid Services (CMS). This includes participating in data sharing with CMS and maintaining an ADAP-specific unique Prescription Benefit International Number (RxBIN) and a unique Pharmacy Benefit Processor Control Number (PCN) to code for coverage that is supplemental to Medicare Part D.

d. Payment of Claims and Other Related Insurance Costs and Reimbursement

- i.** Ensure health insurance co-payment, deductible, and co-insurance costs are paid at the time of prescription purchase for ADAP Insurance Assistance clients. The insurance costs shall be passed on to DHHS without markup or fees.
- ii.** Provide payment to network pharmacies, if applicable, on a regular basis and in accordance with guidance and standards from the National Council for Prescription Drug Programs (NCPDP) ([see link to NCPDP](#)).
- iii.** Avoid paying for ineligible charges, such as non-formulary medications, or paying claims for inactive or ineligible ADAP clients. Charges for ineligible services or medications shall not be passed on to DHHS.
- iv.** Ensure that Nebraska ADAP reserves the exclusive right to all available 340B partial pay rebates from the transactions in which ADAP participates as a payer of insurance deductibles, co-payments, or coinsurance on behalf of ADAP enrollees ([see link to information on partial-pay rebates](#)), and ensure that all ADAP client cost-share payments are properly tracked and reported to ADAP.

e. Data and Reporting

The Contractor shall maintain a secure data system that is capable of receiving and managing confidential client eligibility information, processing claims; creating reports; and transferring data securely. The electronic claims data system must:

- i.** Allow for confidential communications of claims, product cost, individual prescription history, and client demographics. The Contractor will work with DHHS to accomplish any necessary data transfers to the ADAP and HRSA.
- ii.** Allow unlimited remote access to ADAP staff. Access to others shall be determined by DHHS and administered by the Contractor (i.e., training, user set up, password reset, technical support, etc.).
- iii.** Allow for notification to participating pharmacies regarding termination of ADAP members.
- iv.** Provide monthly drug utilization review reports, due fifteen (15) calendar days following the end of the month, to ADAP. The report shall include the total of each category for clients that are enrolled in services for the month and the clients that utilized the service for the month:
 - a)** full ADAP;
 - b)** Medication Co-Pays;
 - c)** Medication Co-insurance;
 - d)** Medication Deductibles;
 - e)** off market place, COBRA;
 - f)** employer insurance;
 - g)** self-insured;
 - h)** Medicare, and;
 - i)** Medicaid.
- v.** Provide an electronic billing invoice via flat CSV file to ADAP listing all clients for whom prescriptions were filled for the week and showing all costs associated with the Ryan White program. The report will show an itemized list of: Date of Service, Total Amount Billed, Client State ID, Doctor's Name, RX Number, Product Name, NDC Number, Quantity Filled, Amount Paid by insurance, ADAP payment category [full ADAP, ADAP copayment, ADAP co-insurance, ADAP deductible], Insurance Name and Type, Amount Due From ADAP, Client Drug Total, and other information as needed.
- vi.** Prepare and provide a quarterly report via flat CSV file to the ADAP listing each HIV medication on the formulary, amount billed, quantity, NDC, and how many clients served each month within the quarter, and other information required.
- vii.** Prepare and provide a quarterly report via flat CSV file to the ADAP showing all Gilead medications (NDC labeler 61958) provided to ADAP clients each month inclusive of all information required by the pharmaceutical manufacturer (see Attachment D).
- viii.** Prepare and provide a quarterly aggregate report via flat CSV file to the Ryan White Program Manager of all Gilead medications provided to Ryan White clients each month inclusive of all information required by the pharmaceutical manufacturer (report template to be provided by Nebraska ADAP).
- ix.** Allow for drug utilization monitoring and implementation of cost-containment measures, such as annual expenditure caps or prior authorizations on specific medications.
- x.** Comply with Confidentiality, IT Standards, and Security requirements
<https://nitc.nebraska.gov/standards/index.html>

f. Back-billing and Eligibility Screening

The Contractor shall ensure that ADAP is the payer of last resort by screening for existing insurance coverage and eligibility.

- i. Provide recoupment (e.g., back-billing) services when other coverage is found or client becomes retro-eligible with other payers, such as Medicaid, Medicare and commercial insurance companies.
- ii. Provide a monthly report, due fifteen (15) calendar days after month end, notifying ADAP of other coverage that is identified.

g. Overpayment or Payment of Invalid Claim

In the event the contractor pays an Invalid Claim or makes an Overpayment, the contractor, at the State's discretion, will undertake one or more of the following actions unless the payment of the Invalid Claim or Overpayment is the result of inaccurate or untimely information provided by the State:

- i. Contact the recipient of the improper payment and request a refund from the recipient. If the recipient fails to refund the amount of the improper payment, the contractor will offset the amount of the improper payment against future payments for Claims submitted by the same recipient.
- ii. In the event of an overpayment as a result of the contractor's failure to require the dispensing pharmacy to collect the correct amount of co-pay(s) and/or deductible(s), the contractor will refund the amount of the overpayment to the State provided that the contractor is not precluded by the State from recovering past and/or present Members' non-payment or underpayment of copayments, and the State provides all available address and similar information with respect to past and present Members who benefited from the Member nonpayment or underpayment of the copayment; and/or reimburse the State.

h. Technical and Customer Support

- i. Provide technical and customer support to ADAP staff, network pharmacies, case managers, and clients, including responding to calls or inquiries from DHHS staff within one (1) state business day.
- ii. Advise and/or cooperate with the formulary advisory committee, a public planning body, and federal grant officials. This should be a quarterly call.
- iii. Communicate various types of claims, eligibility, and other information related to the claims services to and from ADAP staff, clients, network pharmacies, and other authorized third persons for purposes of pharmacy benefit administration.
- iv. Maintain a phone number that can be called toll free from any part of the state. ADAP-enrolled individuals may use this phone number to access pharmacy support services and to request prescription refills. Phone number shall be accessible 8:00 AM CST – 6:00 PM CST, Monday through Friday.
- v. Contact ADAP enrollees, healthcare providers, and case managers to identify and assist individuals who are not taking medications as prescribed by the physician (e.g., reducing dosage or discontinuing a medication without consultation with the physician); to assist the individual with adherence to complex regimens; and to determine when each prescription refill is needed so as to ensure that the individual does not accumulate excess medications. Patient contact and pharmacy support services shall be provided for all ADAP-enrolled individuals receiving medications regardless of the purchase method for the medications.

3. Insurance Benefit Management Services – ADAP Insurance Assistance Program

a. Payment of Insurance Premiums

The Contractor shall provide premium payment assistance for ADAP clients in the Insurance-Assistance Program who have ADAP-sponsored health insurance plans. In administering the program, the Contractor shall:

- i. Ensure payment of insurance premiums to health plans selected by ADAP for approved clients within five (5) business days once approval is received from the ADAP office, unless faster payment is requested from DHHS staff.
- ii. Pay up to six (6) months of premiums per client invoice, or as directed by the ADAP.
- iii. Ensure access to sufficient capital to pay premiums until such time that the Contractor can be reimbursed by DHHS.
- iv. Ensure payments are made only on behalf of approved and active clients.
- v. Administer cancellations of policies when authorized by ADAP, by the last day of the calendar month.
- vi. Work with ADAP staff to adjudicate issues related to premium payment, client eligibility for services, and claims.
- vii. DHHS will provide information on clients every six (6) months, or if there are any insurance changes.

b. Data Reporting

The Contractor shall maintain a secure client-level data and/or customer support system for ADAP staff. The system shall:

- i. Provide access to ADAP staff and ADAP enrollment staff during regular working hours.
- ii. Allow real-time determination of premium amounts paid, pending, or owed.
- iii. Provide monthly client-level reports of premium payments made.
- iv. Comply with Confidentiality, IT Standards, and Security requirements
<https://nitc.nebraska.gov/standards/index.html>

4. Direct Pharmacy Services – ADAP Medication Assistance Program

a. Manage Inventory – The Contractor shall:

- i. Order ADAP-approved medications directly from a wholesale distributor designated by the Contractor. All HIV-related ADAP medications must be purchased at non-340B prices and inventoried separately from medications purchased at 340B prices for other programs.
- ii. Ensure and provide an attestation that all ADAP prescriptions are filled from non-340B priced and purchased inventory.
- iii. Maintain statewide availability of prescription medications listed on the ADAP formulary through adequate inventory supply.
- iv. Develop and provide an informational sheet for every prescription dispensed that discusses side effects and drug interaction concerns. The information sheet must be provided each time the medication is dispensed.

b. Dispensing and Statewide Delivery

For ADAP, the Contractor shall:

- i. For clients who are not covered by the insurance program (ADAP Medication Assistance), ship dispensed medications within three (3) days to the client's mailing address, to the office of the client's physician, or to a representative designated by the client, as requested by the client.
- ii. Ship medications by U.S. Postal Service Priority Mail or by an expedited delivery service.
- iii. Ensure that medications are not sent to an address outside the state, except with approval of DHHS.
- iv. Dispense and deliver medications in one-month supplies with refills shipped one week before the current fill is set to run out. The client notified by the pharmacy when it is time to refill two weeks before the current fill is set to run out. Notifications issued by the pharmacy can be via either phone, email, or SMS. Dispensing of more than a one-month supply shall require the approval of DHHS.
- v. Costs for shipping, mailing containers, and repackaging supplies for medications and other biologicals are the responsibility of the Contractor.

c. Provide Patient Contact and Pharmacy Support Services – the Contractor shall:

- i. Maintain a phone number that can be called toll free from any part of the state. ADAP-enrolled individuals may use this phone number to access pharmacy support services and to request prescription refills.
- ii. Contact ADAP enrollees, healthcare providers, and case managers to identify and assist individuals who are not taking medications as prescribed by the physician (e.g., reducing dosage or discontinuing a medication without consultation with the physician); to assist the individual with adherence to complex regimens; and to determine when each prescription refill is needed so as to ensure that the individual does not accumulate excess medications. Patient contact and pharmacy support services shall be provided for all ADAP-enrolled individuals receiving medications regardless of the purchase method for the medications.

d. Other Contractor requirements:

- i. Develop a policy and procedure manual as it relates to handling of prescriptions supplies and non-340B medications.
- ii. Develop a contingency plan for temporarily dispensing and delivering medications to DHHS clients in the event of a national or state emergency that precludes normal operations and procedures.
- iii. Be responsible for all record keeping of prescriptions, as required by any applicable law.
- iv. Follow all state and federal statutes and regulations related to the dispensing of non-340B medications.
- v. Provide additional services, such as evaluation of patient satisfaction, implementation of patient messaging systems, development of expanded patient adherence programs, or implementation of quality improvement programs or cost-containment strategies, that fit within the context of this RFP, as needed and requested by DHHS.

5. Grievance Procedures

- a. The Contractor will provide grievance procedures for clients and pharmacy providers to address grievances regarding the provisions of the services or related to a Contractor contract or administration issue. Grievance procedures for pharmacy providers will be as follows:
 - i. Disagreement or disputes related to specific prior authorization requests should be resolved with the Contractor's pharmacy technician whenever possible or the pharmacy provider should request assistance from the pharmacy technician supervisor.

- ii. All other issues and disputes should be directed to one of the members of the Contractor's executive staff. Pharmacy providers should include any documentation with as much information as possible to support the grievance. Grievances will be reviewed objectively and fairly by the Contractor considering information provided by all sides. A response will be conveyed to the involved parties within 72 hours.
 - iii. If the grievance is not resolvable by the Contractor, the pharmacy provider will have the right to contact the DHHS Contract Manager.
 - iv. Written grievances that pharmacy providers forward to DHHS Contract Manager require supporting documentation. The Contractor will forward to DHHS Contract Manager copies of the Contractor actions taken to resolve the grievance upon notification by DHHS Contract Manager.
- b. Grievance procedures for clients are as follows:
- i. Disagreement or disputes should be resolved with the Contractor staff person concerned whenever possible.
 - ii. If the disagreement or dispute is not resolvable at the staff level, the client may request a meeting with the immediate supervisor of the staff person.
 - iii. If the disagreement or dispute still is unresolved at the first level supervisor or with the pharmacy manager, the client should be instructed to contact the Contractor executive staff to document the grievance and/or forward it by fax or mail to the Contractor executive staff.
 - iv. The situation will be investigated considering information provided by all sides. The client must provide necessary documentation when applicable to support the grievance being reviewed. The facts and documentation will be reviewed objectively and fairly. All parties involved in the grievance will be interviewed and a resolution determined.
 - v. If the grievance is not resolvable by the Contractor, clients may then complete the Contractor grievance form and forward it to HD. The Contractor will maintain records of all documented pharmacy provider and client grievances. As part of the Contractor's Quality Assurance Plan, the Contractor will document all grievances and review them for the effectiveness of the process and appropriateness of the response. The Contractor will share its findings with HD.

E. REQUIRED REPORTING

DHHS requires periodic reporting of compliance with proposed action plan, provision of services, and incurred expenses by the Contractor. The required reports and related information will be submitted within the ADAP Program Manager. The reports and submission requirements are subject to change at the sole discretion of DHHS.

Anticipated reports include:

The Contractor shall submit progress/performance reports monthly or upon request during the term of this contract. The monthly reporting period shall be the first business day of the month to the last business day of the month. Reports shall be submitted no later than the fifteenth (15) business day of the subsequent month. Reports must be submitted in electronic media. Additionally, the Contractor agrees to meet with Department staff upon request. Oral presentations by the Contractor shall not routinely be required; however, such presentations may be required upon request.

1. Pharmacy Benefit Management Reports

The Contractor shall submit monthly reports with the following information:

- a. ADAP Insurance Assistance Program summary report. The report shall include client-level and aggregate information on prescription refills and client cost-sharing. Fields and format to be determined during contract negotiation.
- b. ADAP Adherence Summary. The report shall include a list of clients who were late or missed filling prescriptions. Fields and format to be determined during contract negotiation.

2. Insurance Benefit Management Reports

The Contractor shall submit a monthly report with the following information:

ADAP Premium Payment Report. The report shall include client-level and aggregate information on insurance premium payments made on behalf of ADAP Insurance Assistance clients. Fields and format to be determined during contract negotiation.

3. ADAP Medication Assistance Program Reports

The Contractor shall submit monthly reports with the following information:

- a. ADAP Inventory Reconciliation Report. The bidder shall maintain adequate records to track inventory and shall submit a monthly report reconciling beginning inventory, ending inventory, additions to inventory, and dispenses for the inventory of DHHS-owned medications.

4. Claim Vouchers

The Contractor shall submit the State of Nebraska billing invoices on a monthly basis by the 15th of each month. Invoices may be submitted simultaneously with or after the corresponding monthly report but an invoice must not include charges for any service not yet reported.

IV. PROPOSAL INSTRUCTIONS

This section documents the requirements that should be met by contractors in preparing the Technical and Cost Proposal. Bidders should identify the subdivisions of "Project Description and Scope of Work" clearly in their proposals; failure to do so may result in disqualification. Failure to respond to a specific requirement may be the basis for elimination from consideration during the State's comparative evaluation.

Proposals are due by the date and time shown in the Schedule of Events. Content requirements for the Technical and Cost Proposal are presented separately in the following subdivisions; format and order:

A. PROPOSAL SUBMISSION

1. CORPORATE OVERVIEW

The Corporate Overview section of the Technical Proposal should consist of the following subdivisions:

a. BIDDER IDENTIFICATION AND INFORMATION

The bidder should provide the full company or corporate name, address of the company's headquarters, entity organization (corporation, partnership, proprietorship), state in which the bidder is incorporated or otherwise organized to do business, year in which the bidder first organized to do business and whether the name and form of organization has changed since first organized.

ScriptGuideRX, Inc. (SGRX), is a privately-held corporation providing Pharmacy Benefit Management, Insurance Benefit Management & 340B Administration services to private & public entities nationwide since 2001. The company was incorporated in 1990, and the name and organization has not been changed since we incorporated. Our corporate headquarter address is: 15400 E. Jefferson Avenue, Grosse Pointe Park, MI 48230.

b. FINANCIAL STATEMENTS

The bidder should provide financial statements applicable to the firm. If publicly held, the bidder should provide a copy of the corporation's most recent audited financial reports and statements, and the name, address, and telephone number of the fiscally responsible representative of the bidder's financial or banking organization.

If the bidder is not a publicly held corporation, either the reports and statements required of a publicly held corporation, or a description of the organization, including size, longevity, client base, areas of specialization and expertise, and any other pertinent information, should be submitted in such a manner that proposal evaluators may reasonably formulate a determination about the stability and financial strength of the organization. Additionally, a non-publicly held firm should provide a banking reference.

The bidder must disclose any and all judgments, pending or expected litigation, or other real or potential financial reversals, which might materially affect the viability or stability of the organization, or state that no such condition is known to exist.

The State may elect to use a third party to conduct credit checks as part of the corporate overview evaluation.

Audited financial statement and banking reference enclosed.

c. CHANGE OF OWNERSHIP

If any change in ownership or control of the company is anticipated during the twelve (12) months following the proposal due date, the contractor should describe the circumstances of such change and indicate when the change will likely occur. Any change of ownership to an awarded bidder(s) will require notification to the State.

No change in control of the company is anticipated.

d. OFFICE LOCATION

The bidder's office location responsible for performance pursuant to an award of a contract with the State of Nebraska should be identified.

15400 E. Jefferson Avenue, Grosse Pointe Park, MI 48230.

e. RELATIONSHIPS WITH THE STATE

The bidder should describe any dealings with the State over the previous two (2) years. If the organization, its predecessor, or any Party named in the bidder's proposal response has contracted with

the State, the contractor should identify the contract number(s) and/or any other information available to identify such contract(s). If no such contracts exist, so declare.

While SGRX is the current administrator of the State of Nebraska's Drug Assistance Program, no direct contract with the State currently exist.

f. BIDDER'S EMPLOYEE RELATIONS TO STATE

If any Party named in the contractor's proposal response is or was an employee of the State within the past two (2) years, identify the individual(s) by name, State agency with whom employed, job title or position held with the State, and separation date. If no such relationship exists or has existed, so declare.

No such relationship exists.

If any employee of any agency of the State of Nebraska is employed by the bidder or is a Subcontractor to the contractor, as of the due date for proposal submission, identify all such persons by name, position held with the contractor, and position held with the State (including job title and agency). Describe the responsibilities of such persons within the proposing organization. If, after review of this information by the State, it is determined that a conflict of interest exists or may exist, the contractor may be disqualified from further consideration in this proposal. If no such relationship exists, so declare.

No such relationship exists.

g. CONTRACT PERFORMANCE

If the bidder or any proposed Subcontractor has had a contract terminated for default during the past two (2) years, all such instances must be described as required below. Termination for default is defined as a notice to stop performance delivery due to the contractor's non-performance or poor performance, and the issue was either not litigated due to inaction on the part of the contractor or litigated and such litigation determined the contractor to be in default.

It is mandatory that the contractor submit full details of all termination for default experienced during the past two (2) years, including the other Party's name, address, and telephone number. The response to this section must present the contractor's position on the matter. The State will evaluate the facts and will score the contractor's proposal accordingly. If no such termination for default has been experienced by the contractor in the past two (2) years, so declare.

If at any time during the past two (2) years, the contractor has had a contract terminated for convenience, non-performance, non-allocation of funds, or any other reason, describe fully all circumstances surrounding such termination, including the name and address of the other contracting Party.

Both employer groups below transitioned for a self-insured relationship to a full-insured arrangement. SGRX does not offer a full insured arrangement for employer groups.

City of Roseville
Paul Van Damme
29777 Gratiot Avenue Roseville, MI 48066

Soave
Marcia Moss
3400 E. Lafayette, Detroit, MI 48207

h. SUMMARY OF BIDDER'S CORPORATE EXPERIENCE

The bidder should provide a summary matrix listing the bidder's previous projects similar to this solicitation in size, scope, and complexity. The bidder must have at least 3 years of experience providing pharmacy-related services, including direct pharmacy services, ensuring statewide coverage of pharmacy services, providing adherence counseling, adjudicating pharmacy-related claims; paying health insurance premiums; working with 340B programs and drugs; making co-payments on behalf of clients; providing secure data systems; and working with state ADAP programs. The State will use no more than three (3) narrative project descriptions submitted by the contractor during its evaluation of the proposal.

The bidder should address the following:

- iii. Provide narrative descriptions to highlight the similarities between the bidder's experience and this solicitation. These descriptions should include:
 - a) The time period of the project;
 - b) The scheduled and actual completion dates;
 - c) The Contractor's responsibilities;
 - d) For reference purposes, a customer name (including the name of a contact person, a current telephone number, a facsimile number, and e-mail address); and
 - e) Each project description should identify whether the work was performed as the prime Contractor or as a Subcontractor. If a contractor performed as the prime Contractor, the description should provide the originally scheduled completion date and budget, as well as the actual (or currently planned) completion date and actual (or currently planned) budget.
- iv. Contractor and Subcontractor(s) experience should be listed separately. Narrative descriptions submitted for Subcontractors should be specifically identified as Subcontractor projects.
- v. If the work was performed as a Subcontractor, the narrative description should identify the same information as requested for the Contractors above. In addition, Subcontractors should identify what share of contract costs, project responsibilities, and time period were performed as a Subcontractor.
- vi. Bidders are required to provide information about key personnel specific to this project, which include staff position, staff name, their role and responsibilities for this project, as well as their experience and education related to providing these types of services.

ScriptGuideRX, Inc. (SGRX) is a privately held Pharmacy Benefit Manager (PBM) / Third Party Administrator (TPA) providing services to private and public entities including State AIDS Drug Assistance Programs (ADAP) since 2001. Included in the list of other Third Party Services are Insurance Benefit Management Services & our 340B Program Administrative Services. Over the past 10 years SGRX has successfully implemented PBM / TPA services as the Primary Contractor for the following States: Michigan, Nebraska, Montana, Utah, Wyoming, Mississippi, US Virgin Islands, Hawaii, the Tennessee Insurance Assistance Program administered by Nashville CARES, and most recently, the State of South Carolina.

Michigan Department of Health & Human Services

109 Michigan Avenue, 9th Floor, Lansing, MI 48913

Contact Person: Tom Dunn

Phone: 517-373-3725 Email: dunnt2@michigan.gov

Contract Period: 1/2010-Current

Services: Pharmacy Benefit Management, Insurance Benefit Management & 340B Program Services

Montana Department of Public Health & Human Services

1400 E. Broadway St. Helena, MT 59620

Contact Person: Robert Elkins

Email: relkins2@mt.gov

Phone: 406-444-2457

Services: Pharmacy Benefit Management, Insurance Benefit Management & 340B Program Services

Contract Period: 4/2012-Current

Utah Department of Health

142104 Salt Lake City, Utah 84114

Tyler Fisher

Support Services
Phone: 801-538-6353
Email: tfisher@utah.gov
Services: Pharmacy Benefit Management & Insurance Benefit Management
Contract Period: 1/2013-Current

i. SUMMARY OF BIDDER'S PROPOSED PERSONNEL/MANAGEMENT APPROACH

The bidder should present a detailed description of its proposed approach to the management of the project.

The bidder should identify the specific professionals who will work on the State's project if their company is awarded the contract resulting from this solicitation. The names and titles of the team proposed for assignment to the State project should be identified in full, with a description of the team leadership, interface and support functions, and reporting relationships. The primary work assigned to each person should also be identified.

The bidder should provide resumes for all personnel proposed by the contractor to work on the project. The State will consider the resumes as a key indicator of the contractor's understanding of the skill mixes required to carry out the requirements of the solicitation in addition to assessing the experience of specific individuals.

Resumes should not be longer than three (3) pages. Resumes should include, at a minimum, academic background and degrees, professional certifications, understanding of the process, and at least three (3) references (name, address, and telephone number) who can attest to the competence and skill level of the individual. Any changes in proposed personnel shall only be implemented after written approval from the State.

SGRX was established in 1990 and has been providing PBM services since 2001. Over the past 10 years SGRX has successfully implemented PBM services for the following ADAP programs: Wyoming, Michigan, Nebraska, Montana, Utah, Mississippi, The US Virgin Islands, Tennessee Insurance Assistance Program administered by Nashville CARES, and South Carolina. SGRX is a certified Minority Business Enterprise under the National Minority Supplier Development Council and has a management team with over 30 years of combined management experience.

As Nebraska ADAP's current PBM, the dedicated account team that is assigned to the Nebraska ADAP program has over 20 years of experience managing ADAPs. SGRX's management has significant experience working with ADAPs to help ensure its clients have adequate access to care at all times, including the management of a pharmacy network that ensures all clients have access to a pharmacy with a reasonable distance, and the availability of home delivery or mail order options for those that do not have adequate access or seek the convenience of mail order programs.

The SGRX ADAP Core Team (ACT) consists of ten members that will continue to be involved in the Nebraska ADAP project.

ADAP Core Team (ACT)



Ime Ekpenyong,
Ph.D.
Chief Executive
Officer



Vikki Columbus,
R.Ph.
Chief Pharmacy
Officer



Latecia Jones
Director of Account
Services and
Implementations



**Heather
Hage-Kosalski, BSc**
Account Services
Coordinator



Jean Christian,
BSIT
Technology
Manager



**Marjorie
Ambrosio-Whitson,**
R.Ph.
MTM Manager



Tiffany Brown, CPhT
Member Services
& Prior Authorization
Supervisor



Carla Empson,
MBA
Rebate Manager



Brian Brumme
Accounting
Manager



JoAnn Russell
Insurance Benefit
Manager

Executive Sponsor: Ime Ekpenyong Ph.D., SGRX's CEO has over 15 years of experience in the ADAP segment and 20 years in Medicaid. Ime brings a wealth of knowledge relative to the many unique requirements of ADAP programs, 340B and HRSA. Ime is intimately involved in this project and will continue to provide invaluable oversight over the ADAP Core Team. Ime will ensure that NEDAP receives the resources needed to accomplish program goals and provide innovative new ways to serve NEDAP clients.

Clinical Executive: Vikki Columbus RPh. SGRX's Chief Pharmacy Officer has 15 years of experience working with ADAP programs, and prior to entering the PBM industry, she served as Director for a State Managed Medicaid program. Vikki will continue to provide oversight of all Clinical and Client Services provided to the NEDAP. Additionally, Vikki will serve as the liaison with the Wyoming Clinical Leadership to support their Formulary Advisory Committee, if requested.

Account Manager: Latecia Jones, SGRX's Director of Account Services and Implementations is the account manager for NEDAP and comes to SGRX with over 10 years of experience working the State ADAP program in her previous position with a Michigan based Specialty Pharmacy provider. Latecia has been with SGRX since 2019. She is very familiar with our staff, those customers we service and has broad knowledge of the ADAP marketplace. She was our Account Manager and we were so impressed with her, we recruited her and now she is working for us.

Latecia is the NEDAP contact for contract related issues and any other issues the program experiences. At the State's request, Latecia will continue to be available to meet biweekly for review meetings. During these meetings Latecia will review any outstanding service issues and identify opportunities to reduce the cost of

services to the NEDAP program. If a time arises where Latecia is unavailable, the Daily Operations Manager will be available to assist the NEDAP when a need arises.

Daily Operations Manager: Heather Hage-Kosalski, BSc is SGRX's Account Services Coordinator and will continue to be your Daily Operations Manager. Heather has been with SGRX for nearly 10 years and has experience managing and overseeing daily operations for ADAP clients. She will communicate with the NEDAP's staff on an ongoing basis about daily operations, act as a liaison between the State, clients, clinicians and pharmacy staff as needed. She will respond to any outstanding issues in a timely manner and work with Territory staff to ensure consistency and efficiency. Heather will be responsible for overseeing daily operations and discussing daily operations with NEDAP staff.

Technology Manager: Jean Christian, BSIT is SGRX's Technology Manager and will continue to serve as the Technology Manager for NEDAP. Jean will provide technical expertise and information needed to establish secure electronic communications and meet all compliance and reporting requirements outlined in this RFP.

Jean has been with SGRX for over 10 years and has experience providing technical expertise and meeting reporting requirements for ADAP clients. Jean will assist the NEDAP team on any and all data needs, reporting requirements and provide general technology support. If Jean is unavailable for any reason, Chuck Magee will serve as her alternate.

Medication Therapy Management: Marjorie Ambrosio-Whitson, RPh is the Vice President of Clinical Operations. Marjorie has been with SGRX since 2019. Marjorie has 6 years of experience providing MTM services. She also improved a large Michigan health plan's MTM CMS score from a 2 Star to a 4 Star rating within a year.

Marjorie also has a great deal of Specialty Drug Knowledge. She developed a Medicare Part B Medical Drug (J-Code) prior authorization program with a large Michigan health plan. Because of this experience, SGRX has successfully implemented a Comprehensive Medical Drug (J-Code) drug review program in collaboration with a plan's medical department and SGRX's clinical department.

Customer Service Supervisor: Tiffany Brown, CPhT is our Customer Service Supervisor. Tiffany has been with SGRX since 2014. Tiffany has many years of experience managing customer service personnel. Our Customer Service team consists of 8 representatives with over 5 years of experience in ADAP, Medicaid, Medicare Part D and Qualified Health Plan claims adjudication.

Rebate Management: Carla Empson, MBA is the Business Development-Rebate Manager. She has been with SGRX since 2012. Carla currently processes rebate invoices for our ADAP clients.

Accounting Manager: Brian Brumme will serve as our Accounting Manager and will be responsible for providing the required financial reports and invoicing for the NEDAP. Brian Brumme recently joined SGRX in 2019. However, Brian brings extensive Healthcare related finance experience.

Project Manager, Insurance Benefit Management (IBM): Joann Russell has been with SGRX since 2014. JoAnn oversees a business unit responsible for making monthly or quarterly premium payments to the respective insurance carriers or plan administrator for all verified policies. She works with ADAP & carriers to triage issues including tracking of checks/payments and auditing.

SGRX employs a mix of experienced pharmacists, pharmacy technicians, and nurses to staff its customer service department. These staff are hired based on their knowledge in the areas of claims processing, cultural competence, problem recognition, problem solving. Of foremost importance is their ability to compassionately address the caller's needs. It is a prerequisite for employment on the SGRX member services and PA teams that each staff member is at minimum certified as a pharmacy technician.

SGRX employs a horizontal staffing model where member/customer service staff has immediate access to clinical and account management staff. All staff are cross trained to service inquiries and requests for assistance as the calls come. This level of redundancy ensures that the service level to the customer and clients are not impacted if a staff member leaves unexpectedly.

Each cross-trained staff member can access member profiles and see real time status of any transaction occurring between a provider and the SGRX claims payment system. The system provides robust messaging to assist the staff in ascertaining why a given transaction is not processing e.g. "refill too soon", PA required, etc.

j. SUBCONTRACTORS

If the contractor intends to Subcontract any part of its performance hereunder, the contractor should provide:

- vii.** name, address, and telephone number of the Subcontractor(s);
- viii.** specific tasks for each Subcontractor(s);
- ix.** percentage of performance hours intended for each Subcontract; and
- x.** total percentage of Subcontractor(s) performance hours.

SGRX does not intend to use any subcontractors on any part of its performance.

2. TECHNICAL APPROACH

The technical approach section of the Technical Proposal should consist of the following subsections:

- a.** Understanding of the project requirements;

As the current administrator of the pharmacy benefit management, insurance benefit management and 340b programs for the State of Nebraska's Drug Assistance Program, SGRX fully understand the requirement of this project. SGRX has been providing similar services to State Drug Assistance programs since 2010. We have worked diligently to customize our services to fit each state's needs, and ensure

each state has information necessary to satisfy the programs federal requirements.

- b. Proposed development approach;

SGRX's pharmacy network consists of over 60,000 pharmacy locations nationwide, including most major chains and independents. Our pharmacy network also includes multiple mail order and specialty pharmacy providers. In the State of Nebraska, SGRX has over 440 pharmacy locations in its pharmacy network. SGRX's flexible pharmacy network approach includes the ability to implement a variety of network types including open, limited & hybrid networks.

- c. Technical considerations;

SGRX will continue to provide the DHHS staff with secure, unlimited remote access to our claims system for real time access to client demographics, prescription history, and medication costs. On-site system training will also be provided for Wyoming ADAP staff utilizing the application.

- d. Detailed project work plan; and

Copy of sample work plan is enclosed.

- e. Deliverables and due dates.

SGRX will comply with all deliverables & dates included in the proposal.

Form A
Contractor Proposal Point of Contact
Request for Proposal Number 6396 Z1

Form A should be completed and submitted with each response to this solicitation. This is intended to provide the State with information on the contractor's name and address, and the specific person(s) who are responsible for preparation of the contractor's response.

Preparation of Response Contact Information	
Contractor Name:	ScriptGuideRX (SGRX)
Contractor Address:	15400 E. Jefferson Avenue, Grosse Pointe Park, MI 48230
Contact Person & Title:	SuVon Treece, Manager, Sales & Marketing Communications
E-mail Address:	streece@sgrxhealth.com
Telephone Number (Office):	313-821-3200 ext. 209
Telephone Number (Cellular):	313-443-2368
Fax Number:	313-264-0987

Each contractor should also designate a specific contact person who will be responsible for responding to the State if any clarifications of the contractor's response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Contractor Name:	ScriptGuideRX (SGRX)
Contractor Address:	15400 E. Jefferson Avenue, Grosse Pointe Park, MI 48230
Contact Person & Title:	Ime Ekpenyong, CEO
E-mail Address:	iekpenyong@sgrxhealth.com
Telephone Number (Office):	313-821-3200 ext. 203
Telephone Number (Cellular):	313-498-8981
Fax Number:	313-821-3201

SEE Attached for Completed Form B

6396 Z1 ATTACHMENT A
DHHS HIPAA BUSINESS ASSOCIATE AGREEMENT PROVISIONS
SERVICES CONTRACTS

1. BUSINESS ASSOCIATE. “Business Associate” shall generally have the same meaning as the term “business associate” at 45 CFR § 160.103, and in reference to the party in this Contract, shall mean Contractor.
2. COVERED ENTITY. “Covered Entity” shall generally have the same meaning as the term “covered entity” at 45 CFR § 160.103, and in reference to the party to this Contract, shall mean DHHS.
3. HIPAA RULES. “HIPAA Rules” shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.
4. OTHER TERMS. The following terms shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Protected Health Information, and Use.
5. THE CONTRACTOR shall do the following:
 - 5.1. Not use or disclose Protected Health Information other than as permitted or required by this Contract or as required by law. Contractor may use Protected Health Information for the purposes of managing its internal business processes relating to its functions and performance under this Contract. Use or disclosure must be consistent with DHHS’ minimum necessary policies and procedures.
 - 5.2. Implement and maintain appropriate administrative, physical, and technical safeguards to prevent access to and the unauthorized use and disclosure of Protected Health Information. Comply with Subpart C of 45 CFR Part 164 with respect to electronic Protected Health Information, to prevent use or disclosure of Protected Health Information other than as provided for in this Contract and assess potential risks and vulnerabilities to the individual health data in its care and custody and develop, implement, and maintain reasonable security measures.
 - 5.3. To the extent Contractor is to carry out one or more of the DHHS’ obligations under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to DHHS in the performance of such obligations. Contractor may not use or disclosure Protected Health Information in a manner that would violate Subpart E of 45 CFR Part 164 if done by DHHS.
 - 5.4. In accordance with 45 CFR §§ 164.502(E)(1)(ii) and 164.308(b)(2), if applicable, ensure that any agents and subcontractors that create, receive, maintain, or transmit Protected Health Information received from DHHS, or created by or received from the Contractor on behalf of DHHS, agree in writing to the same restrictions, conditions, and requirements relating to the confidentiality, care, custody, and minimum use of Protected Health Information that apply to the Contractor with respect to such information.
 - 5.5. Obtain reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies the Contractor of any instances of which it is aware that the confidentiality of the information has been breached.
 - 5.6. Within fifteen (15) days:
 - 5.6.1. Make available Protected Health Information to DHHS as necessary to satisfy DHHS’ obligations under 45 CFR § 164.524;
 - 5.6.2. Make any amendment(s) to Protected Health Information as directed or agreed to by DHHS pursuant to 45 CFR § 164.526, or take other measures as necessary to satisfy DHHS’ obligations under 45 CFR § 164.526;
 - 5.6.3. Maintain and make available the information required to provide an accounting of disclosures to DHHS as necessary to satisfy DHHS’ obligations under 45 CFR § 164.528.

- 5.7. Make its internal practices, books, and records relating to the use and disclosure of Protected Health Information received from, or created or received by the Contractor on behalf of the DHHS available to the Secretary for purposes of determining compliance with the HIPAA rules. Contractor shall provide DHHS with copies of the information it has made available to the Secretary.
- 5.8. Report to DHHS within fifteen (15) days, any unauthorized use or disclosure of Protected Health Information made in violation of this Contract, or the HIPAA rules, including any security incident that may put electronic Protected Health Information at risk. Contractor shall, as instructed by DHHS, take immediate steps to mitigate any harmful effect of such unauthorized disclosure of Protected Health Information pursuant to the conditions of this Contract through the preparation and completion of a written Corrective Action Plan subject to the review and approval by DHHS. The Contractor shall report any breach to the individuals affected and to the Secretary as required by the HIPAA rules.

6. TERMINATION.

- 6.1. DHHS may immediately terminate this Contract and any and all associated contracts if DHHS determines that the Contractor has violated a material term of this Contract.
- 6.2. Within thirty (30) days of expiration or termination of this Contract, or as agreed, unless Contractor requests and DHHS authorizes a longer period of time, Contractor shall return or at the written direction of DHHS destroy all Protected Health Information received from DHHS (or created or received by Contractor on behalf of DHHS) that Contractor still maintains in any form and retain no copies of such Protected Health Information. Contractor shall provide a written certification to DHHS that all such Protected Health Information has been returned or destroyed (if so instructed), whichever is deemed appropriate. If such return or destruction is determined by the DHHS to be infeasible, Contractor shall use such Protected Health Information only for purposes that makes such return or destruction infeasible and the provisions of this Contract shall survive with respect to such Protected Health Information.
- 6.3. The obligations of the Contractor under the Termination Section shall survive the termination of this Contract.

BIDDER SIGNATURE

A handwritten signature in black ink, consisting of a stylized initial 'H' followed by a long horizontal stroke that ends in a downward hook.

Attachment B

Business Requirements Traceability Matrix

Request for Proposal Number 6396 Z1 REVISED

Bidders are instructed to complete a Business Requirements Traceability Matrix for pharmacy benefits manager services to the Ryan White Program. Bidders are required to describe in detail how their proposed solution meets the conformance specification outlined within each Business Requirement.

The traceability matrix is used to document and track the business requirements from the proposal through testing to verify that the requirement has been completely fulfilled. The contractor will be responsible for maintaining the contract set of Baseline Requirements.

The traceability matrix should indicate how the bidder intends to comply with the requirement and the effort required to achieve that compliance. It is not sufficient for the bidder to simply state that it intends to meet the requirements of the RFP. DHHS will consider any such response to the requirements in this RFP to be non-responsive and the bid may be rejected. The narrative should provide DHHS with sufficient information to differentiate the bidder's business solution from other bidders' solutions.

The bidder must ensure that the original requirement identifier and requirement description are maintained in the traceability matrix as provided by DHHS. Failure to maintain these elements may render the bid non-responsive and result in for rejection of the bidder. How to complete the traceability matrix:

Column Description	Bidder Responsibility
Req #	The unique identifier for the requirement as assigned by DHHS, followed by the specific requirement number. This column is dictated by this RFP and must not be modified by the bidder.
Requirement	The statement of the requirement to which the bidder must respond. This column is dictated by the RFP and must not be modified by the bidder.

Cross Program Requirements

Business Requirements	
Req #	Requirement
CP-1	Describe the plan to transition pharmacy services from the current central pharmacy model to the proposed model of service within sixty of signing the contract such that pharmacy services to DHHS clients will not be interrupted.
	<p>Response:</p> <p>SGRX's pharmacy network consist of over 60,000 pharmacy locations nationwide including all major chains, independents, mail order & specialty pharmacy providers. SGRX's network has over 440 pharmacy locations in the State of Nebraska. Our approach to the transition will include collaborating on a communication strategy that will ensure timely communication with all key stakeholders including patients, physicians & pharmacies. We will complete the outreach to all stakeholders within 30 days of the contract's execution, allowing an additional 30days for testing/auditing of claims, the results of which will be shared with NEDAP prior to executing. As the incumbent PBM, the infrastructure is in place for provision of all existing services unrelated to the site of fulfillment. As we have familiarity with the clients and their utilization patterns and pharmacy relationships already in place, we will provide a seamless transition to NEDAP clients and staff</p>

Pharmacy Benefit Management Services Requirements

Business Requirements	
Req #	Requirement
PBM-1	Describe the pharmacy or pharmacy network that will fill prescriptions for ADAP-enrolled Insurance Assistance clients, how Bidder will communicate with pharmacies, and how Bidder will establish and maintain a mail-order pharmacy with overnight shipping capability.
	<p>Response:</p> <p>SGRX will work with the Ryan White program to ensure that all ADAP-enrolled Insurance Assistance clients are able to fill their prescriptions at all SGRX's participating pharmacy providers in the State of Nebraska. This network consists of over 440 pharmacy locations including all major chains and independents. The Nebraska Pharmacy network includes locations in 106 cities covering 302 zip codes. In addition SGRX has a longstanding contractual relationship with multiple mail order and specialty pharmacy providers that cover the entire United States and territories and offer 24 hour delivery. SGRX will also work with local providers to identify those that provide home delivery services. SGRX will propose including this information in applicable member communications that are customized by ZIP. To support our pharmacy network partners, SGRX has a pharmacy help desk that runs 24 hours to assist in troubleshooting any issues or questions that may arise.</p>
PBM-2	Describe how Bidder shall ensure that ADAP Insurance Assistance clients receive basic treatment adherence counseling at time of prescription fill.
	<p>Response:</p> <p>SGRX's participating provider network will consist of pharmacies that are credentialed and contractually required to provide adherence counseling at every fill. SGRX's Medication Therapy Management team will also work with the program to ensure nonadherent patients are identified via monthly adherence reports. SGRX MTM staff, consisting of Pharmacists, Nurses and Licensed Pharmacy Technicians will work with the program to customize a communication plan for patients that are not adherent.</p> <p>The adherence reports are reviewed individually by a SGRX clinical pharmacist to determine whether there is a clinically significant adherence issue presented (i.e. ruling out discontinued drugs or other reasons for missed or early fills). Additionally, we utilize Medication Possession Ratio and Percent of Days Covered reports to identify patients with sub-optimal adherence. For our ADAP clients, we provide reporting on all antiretroviral agents, as well as other adherence - sensitive categories such as asthma and diabetes depending on the coverage. Because it has been demonstrated that early adherence to therapy improves long-term outcomes, we have also created a first fill report that can be used to identify members that are filling</p>

	Antiretrovirals for the first time so that introductory information can be sent out and follow up by case management can be facilitated.
PBM-3	Describe how Bidder shall coordinate benefits and claims processing. Response: SGRX's online, claim adjudication system is known as RxAgile, supported by RxSense. RxAgile is capable of processing over 400 million claims a year with no upgrade. The system is currently being utilized by all SGRX's participating providers including those providing pharmacy services to SGRX's State Drug Assistance Programs. This claims system is compatible with all of the pharmacy software systems utilized by the pharmacy providers in SGRX's pharmacy network. SGRX will work with the participating pharmacies to ensure that their systems are properly configured to allow for transmission of Coordination of Benefits (COB) claims including primary, secondary and tertiary claims. SGRX's implementation process involves working closely with the selected pharmacy network to setup the appropriate BIN/PCN combinations, and payment process. SGRX has the capability to pay pharmacies bi-weekly or monthly, and via EFT or check. This is the process that SGRX has successfully implemented with many of our other ADAP clients
PBM-4	Describe how Bidder shall pay claims and other insurance related costs and reimbursement. Response: SGRX's finance team is responsible for managing payment of claims and insurance related costs to our pharmacy providers. Pharmacy claims costs are paid to pharmacies bi-monthly. Our customers are billed twice a month & the invoices are accompanied by patient & group level detail reports generated from our claims processing system. Our claims processing system is compatible with all pharmacy software systems which allows for access to real-time data, daily.

PBM-5	<p>Describe how Bidder shall provide a secure data system with 24-hour remote access to electronic pharmacy claims and reporting by ADAP staff.</p> <p>Response: SGRX uses modern software for claims adjudication, eligibility, invoicing & reporting. All software is provided by and maintained by a single system, RxAgile. This creates continuity as well as guarantees efficiency and ease of use. These applications are also available via secure web access from any computer.</p> <p>SGRX will continue to provide unlimited remote access to the Ryan White staff. Our remote access system fulfills all the needs listed above. Remote access will continue to be available at no additional charge. On-site system training will also be provided for all staff utilizing the application.</p>
PBM-6	<p>Describe how Bidder shall develop and maintain back-billing and eligibility screening processes that comply with all state and federal laws and policies.</p> <p>Response: SGRX's recoupment process involves collaborating with the Ryan White staff and pharmacy providers to ensure that claims paid for by the program that should've been another payer's responsibility are reversed/processed through the appropriate payer in a timely manner. Primary payers typically include Medicaid, Medicare Part D, and private insurance payers. SGRX's pharmacy network agreement requires all participating ADAP pharmacy providers work with SGRX to ensure ADAP is a payer of last resort.</p>
PBM-7	<p>Describe how Bidder shall correct overpayments of claims and payments of invalid claims.</p> <p>Response: SGRX's pharmacy network agreement also allows for the ability to obtain the difference between overpayments and the appropriate amounts upon identification of the issue at hand. Once an overpayment is identified, SGRX will work with the pharmacy to have the claim reprocessed. Subsequently, the amount due back to the program will be applied as a credit to subsequent invoices. The reversed and paid claims are clearly visible in the client level claims detail report that accompanies the respective invoice.</p>
PBM-8	<p>Describe how Bidder shall provide technical and customer support.</p> <p>Response: The SGRX ADAP Core Team (ACT) consists of ten members that will continue to be involved in this project. Details for each team member is included in the enclosed proposal. SGRX's customer service staff is currently responsible for client and pharmacy support services. The clients RX ID cards have a dedicated number that can be called 24hrs/7days a week. SGRX's customer service calls are answered within 20 seconds of receipt of the call, on average. Relative to its existing ADAP clients, SGRX is primarily responsible for managing calls from participating pharmacy providers and clients afterhours and on weekends.</p>

Insurance Benefit Management Services Requirements

Business Requirements	
Req #	Requirement
IBM-1	Describe how Bidder shall establish and administer an insurance premiums payment process.
	<p>Response:</p> <p>SGRX has been providing Insurance Benefit Management & Medical Claims management services to State AIDS Drug Assistance Programs (ADAP) since 2010. Included in the list of existing customers are the State of Michigan, Nebraska, Montana, Mississippi, the US Virgin Islands & the State of Tennessee. Services include processing payments for eligible clients with Private Insurance, Medicare, COBRA & also, payment of medical copays, deductibles and laboratory tests. SGRX paid approximately \$10M to insurance carriers in 2019. Our core services include managing relationships between all stakeholders including plan sponsors, insurance carriers & clients. SGRX’s pay premiums to a variety of carriers nationwide including national & regional carriers such as BCBS, Cigna, United Health Care & Humana.</p> <p>SGRX provides premium payments services to ADAP programs throughout the US and Virgin Islands. We create a customized premium master database to track current members premiums based on the information provided by each State program. Once that initial database is created, we maintain the current premium information provided by our customer/s to ensure timely member premium payments. The following services are currently provided and can be easily modified to meet additional customer requirements:</p> <ul style="list-style-type: none"> • Tracking and storing member details as well as insurance carrier, and premium payment details (e.g. member demographics, SSN, DOB, premium amounts). This is the Master Premium Report. This report is based on the customer’s specific needs. • Process new member payments as needed throughout the month • Maintain the Master Premium Report adding new starts received from the customer. • Change premium amounts on a monthly basis from “adjustments” received from the customers due to premium amount changes (e.g. member change of income, premium tax credit change, overpayment on account) • Generation of premium checks and premium payment reports • Historical tracking and accounting of premium payments • Supports ADR reporting requirements related to premium payments • Maintain open communication with the customer to ensure all premium payments are processed accurately and in a timely manner
IBM-2	Describe how Bidder shall provide for the reporting of premium payment information.

	<p>Response: SGRX's IBM team works directly with each of its customers to ensure that all required data elements are shared with the program at the requested due dates. SGRX provides monthly & annual reports. Member level details including client demographics and carrier specific information is shared with all IBM customers through monthly, quarterly & annual reconciliation reports.</p>
--	--

Direct Pharmacy Services Requirements

Business Requirements	
Req #	Requirement
DPS-1	Describe how the Bidder will notify the client when it is time to refill two weeks before the current fill is set to run out.
	<p>Response: SGRX's pharmacy network consist of pharmacy providers that deploy multiple mechanisms for notifying clients when refills are due including phone calls, text messages, and emails. The notification mode is confidentially communicated between pharmacy & patient after the initial fill of the prescription. In addition, SGRX will work with the pharmacy to analyze adherence reports designed to help follow up with patients that did not pick up their refills timely.</p>
DPS-2	Describe how Bidder will dispense and offer statewide delivery.
	<p>Response: SGRX's network of pharmacies have the ability to offer delivery statewide. The current Nebraska Pharmacy Network consist of over 440 pharmacy locations, located in 106 cites, covering 302 zip codes. In addition, this Pharmacy Network is supported by national mail order and specialty pharmacy providers that provide 24 hour delivery, nationwide. SGRX will continue to work diligently to identify additional mail order pharmacy providers within our network to ensure clients have access to mail order providers.</p>
DPS-3	Describe how Bidder will provide patient contact and pharmacy support services.
	<p>Response: Participating pharmacy providers will provide seamless transition between pharmacies where applicable by ensuring the appropriate prescriptions are transferred, timely. Services offered by participating pharmacies include adherence counseling, compliance packing, delivery & drive-through services. SGRX also offers Medication Therapy Management services designed to complement support services provided by the participating providers. SGRX's MTM program is designed to optimize therapeutic outcomes for clients, and improved clinical outcomes of the entire program. The team consists of nurses, pharmacy technicians & pharmacists.</p>

DPS-4	<p>Describe how Bidder shall dispense and deliver medications in one—month supplies with refills shipped one week before the current fill is set to run out.</p> <p>Response: SGRX claims system is designed to allow a maximum of one-month supplies unless otherwise specified by the DHHS staff. Participating Pharmacies will only be allowed to process refills after 75% of the fill has been used, unless otherwise requested by the DHHS staff.</p>
DPS-5	<p>Describe how Bidder shall ensure that ADAP initial fills are delivered within 24 hours to the client following the receipt of the prescription or request from DHHS staff.</p> <p>Response: DHHS Staff will have direct access & contact information for the SGRX team and participating pharmacy to request expedited fills where applicable. SGRX team will work to closely monitor from handoff to pickup to ensure timely deliver to clients.</p>
DPS-6	<p>Describe how you Bidder shall ensure that required reports are accurate and are submitted within the required timeframes as set forth in the required reporting.</p> <p>Response: SGRX will develop a project plan with DHHS program staff to identify needed reports, reporting parameters, dates and method of delivery via secure email or FTP. Initial test reports will be sent to DHHS program staff to confirm formatting and content accuracy. SGRX will employ automated reporting to ensure timely delivery of required reports develop reporting automating.</p> <p>SGRX will deliver the required reports by the dates set forth in the proposal. SGRX will work with the program staff to determine how reports will be sent either via secure email or FTP.</p>

SCRIPTGUIDE RX, INC.
dba - SGRX
GROSSE POINTE PARK, MICHIGAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION
FOR THE YEAR ENDED DECEMBER 31, 2019



SCHULZE, OSWALD, MILLER & EDWARDS PC
CERTIFIED PUBLIC ACCOUNTANTS
989-354-8707

SGRX
GROSSE POINTE PARK, MICHIGAN
TABLE OF CONTENTS
FOR THE YEAR ENDED DECEMBER 31, 2019

	<u>PAGE</u>
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
Balance Sheet	2
Income Statement	3
Statement of Cash Flows	4
Statement of Changes in Equity	5
Notes to financial statements	6 - 9

Schulze Oswald Miller & Edwards PC

120 N. Ripley Street • Alpena, MI 49707
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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
SGRX

We have audited the accompanying financial statements of SGRX (the "Company"), which comprise the statement of financial position as of December 31, 2019, and the related statements of operations and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the *Financial Reporting Framework for Small- and Medium-Sized Entities* issued by the American Institute of Certified Public Accountants described in Note 1; this includes determining that the *Financial Reporting Framework for Small- and Medium-Sized Entities* is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the company's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of ScriptGuide Rx, Inc., as of December 31, 2019, and the results of its operations and its cash flows for the year then ended in accordance with *Financial Reporting Framework for Small and Medium-Sized Entities* described in Note 1.

Basis of Accounting

We draw attention to Note 1 of the financial statements, which describes the basis of accounting. The financial statements are prepared in accordance with *Financial Reporting Framework for Small- and Medium-Sized Entities*, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Schulze, Oswald, Miller & Edwards PC

Schulze, Oswald, Miller & Edwards PC
Alpena, Michigan
June 25, 2020

SGRX
GROSSE POINTE PARK, MICHIGAN
BALANCE SHEET
DECEMBER 31, 2019

ASSETS

Current Assets	
Checking	\$ 15,977,185
Savings Account	142,744
Accounts Receivable	10,723,210
Employee Advances	1,880
Lease Deposits	5,000
Shareholder Loan	28,290
Prepaid Income Tax	44,382
Prepaid Payroll Tax	7,794
Other Current Assets	-
Total Current Assets	26,930,485
Fixed Assets	
Communication Equipment	36,973
Computers and Equipment	112,471
Furniture and Fixtures	15,825
Leasehold Improvements	18,267
Automobiles	71,686
Accumulated Depreciation	(217,242)
Total Fixed Assets	37,980
TOTAL ASSETS	\$ 26,968,465

LIABILITIES AND EQUITY

Current Liabilities	
Accounts Payable	\$ 11,036,256
340B Payable	4,705,985
Company Credit Cards	46,405
Claims Reserve Clients	111,854
Claims Reserve Midap	1,200,000
Health Insurance Reimbursement	3,324
Premium Payable	2,528,708
Rebates Payable	7,443,133
Total Current Liabilities	27,075,665
Long-Term Liabilities	
Car Note	30,234
Chemical Credit Line	162,046
Total Long-Term Liabilities	192,280
TOTAL LIABILITIES	27,267,945
EQUITY	
Common Stock	36,000
Paid in Capital	13,229
Retained Earnings	(348,709)
TOTAL EQUITY	(299,480)
TOTAL LIABILITIES AND EQUITY	\$ 26,968,465

SEE INDEPENDENT ACCOUNTANTS AUDIT REPORT AND ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

SGRX
GROSSE POINTE PARK, MICHIGAN
INCOME STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2019

INCOME	
340B	\$ 8,903,705
IBM	11,695,087
PBM	72,620,006
Other Income	309,558
TOTAL INCOME	93,528,356
COST OF GOODS SOLD	
Cost of Service	88,713,803
Medical Payments	212,123
TOTAL COST OF GOODS SOLD	88,925,926
GROSS PROFIT	4,602,430
SELLING, GENERAL AND ADMINISTRATIVE EXPENSES	
Advertising	49,865
Bad Debt	18,570
Bank Service Charges	10,643
Board Members	24,000
Car and Truck Expenses	6,161
Commissions and fees	20,697
Contractors	401,502
Depreciation Expense	36,898
Dues and Subscriptions	24,581
Education and Seminars	12,454
Employee Benefits	76,801
Insurances (other than health)	43,222
Interest Expense	15,904
Legal and Professional fees	7,252
Meals and Entertainment	59,353
Office Supplies/Postage	75,082
Other Expense	806
Payroll Expenses/Taxes	149,512
Penalties and Fees	3
Miscellaneous	538
Rent	75,930
Repairs and Maintenance	5,011
Software	259,944
Taxes & Licenses	1,534
Travel	254,218
Utilities	51,289
Wages	2,815,891
TOTAL SELLING, GENERAL AND ADMINISTRATIVE EXPENSES	4,497,661
NET OPERATING INCOME	104,769
NET INCOME (LOSS)	\$ 104,769

SEE INDEPENDENT ACCOUNTANTS AUDIT REPORT AND ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

SGRX
GROSSE POINTE PARK, MICHIGAN
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED DECEMBER 31, 2019

CASH FLOW FROM OPERATING ACTIVITIES

Net income	\$	104,769
Adjustment to reconcile net income to net cash provided by operating activities:		
Depreciation		36,898
Accounts receivable		(2,066,256)
Other Current Assets		139,074
Accounts payable		3,091,818
Premiums payable		2,143,535
Rebates payable		3,416,515
Other payables		(2,652,805)
		4,213,548
Net cash provided by operating activities		4,213,548

INVESTING ACTIVITIES

Purchase of fixed assets		(20,898)
		(20,898)
Net cash used in investing activities		(20,898)

FINANCING ACTIVITIES

Car note payable		(19,469)
Lines of credit		(37,791)
		(57,260)
Net cash provided by financing activities		(57,260)

NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS

		4,135,390
CASH AND CASH EQUIVALENTS - beginning of year		11,984,539
CASH AND CASH EQUIVALENTS - end of year	\$	16,119,929

SUPPLEMENTAL DATA:

Interest paid	\$	15,904
Income taxes paid	\$	22,554

SEE INDEPENDENT ACCOUNTANTS AUDIT REPORT AND ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

SGRX
GROSSE POINTE PARK, MICHIGAN
STATEMENT OF CHANGES IN EQUITY
FOR YEAR ENDED DECEMBER 31, 2019

	CAPITAL STOCK USD	PAID IN CAPITAL USD	RETAINED EARNINGS USD	TOTAL EQUITY USD
BALANCE AT JANUARY 1, 2019	\$ 36,000	\$ 13,229	\$ (453,478)	\$ (404,249)
Changes in accounting policy	-	-	-	-
RESTATED BALANCE	36,000	13,229	(453,478)	(404,249)
CHANGES IN EQUITY FOR THE YEAR 2019				
Issue of share capital	-			-
Paid in capital		-		-
Income for the year			104,769	104,769
Revaluation gain	-			-
BALANCE AT DECEMBER 31, 2019	\$ 36,000	\$ 13,229	\$ (348,709)	\$ (299,480)

SEE INDEPENDENT ACCOUNTANTS AUDIT REPORT AND ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

SGRX
GROSSE POINTE PARK, MICHIGAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019

NOTE 1 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared in accordance with the *Financial Reporting Framework for Small- and Medium-Sized Entities* issued by the American Institute of Certified Public Accountants, special purpose framework and not U.S. generally accepted accounting principles (U.S. GAAP). The accounting principles that compose the framework are appropriate for the preparation and presentation of small- and medium- sized entity financial statements, based on the needs of the financial statement users and cost and benefit considerations. This special purpose framework, unlike U.S. GAAP, does not require the recognition of deferred taxes. We have chosen the option to recognize only current income tax assets and liabilities.

SGRX revenues are generated primarily through delivery of Pharmacy Benefit Management ("PMB") and Third-Party Administration ("TPA") services to private and public entities nationwide. PMB services represented 77% of SGRX's 2019 revenue and TPA services accounted for the remainder of the revenues.

Nature of Operations

SGRX, an independent corporation, has been providing PBM and TPA and services to private and public entities nationwide, since 2001. SGRX works with clients, drug manufacturers, and pharmacies, to improve members' health outcomes and satisfaction, increase efficiency, and manage drug costs.

SGRX's services include:

Pharmacy Benefit Management

- Rx Claims Management
- Rebates Management

Insurance Benefit Management

- Premium collection and payment services

340B Administration

Consulting

Use of Estimates

The preparation of financial statements in conformity with the *Financial Reporting Framework for Small and Medium-Sized Entities* requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Statement of Assets, Liabilities, and Equity Classification

The Company includes in current assets and liabilities amounts receivable and payable to pharmacies, premiums and rebates, which may extend beyond one year. A one-year time period is used as the basis for classifying all other current assets and liabilities.

SGRX
GROSSE POINTE PARK, MICHIGAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019

NOTE 1 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Cash and Cash Equivalents

For purposes of the consolidated statements of cash flows, the Company considers all highly liquid debt instruments purchased with an original maturity of three months or less to be cash equivalents.

Accounts Receivable

Contracts receivable from services provided are recorded because all receivables are from contracts and SGRX has no history of material uncollectible accounts. Receivables are reported at their gross amount.

Property and Equipment

Property and equipment are stated at cost. Depreciation is computed primarily using the straight-line method over the estimated useful lives of the assets, which range from 5 to 10 years. Leasehold improvements are amortized over the shorter of the useful life of the related assets or the lease term. Expenditures for repairs and maintenance are charged to expense as incurred. For assets sold or otherwise disposed of, the cost and related accumulated depreciation are removed from the accounts, and any related gain or loss is reflected in income for the period.

Revenue and Cost Recognition

Rx Claims Management - All amounts invoiced for the Rx claims management services are recorded as revenue on the books. SGRX tracks its admin fees. Payments due to pharmacies are recorded in accounts payable.

Rebates Management - SGRX manages rebates on drugs with pharmaceutical companies for their clients. For some clients, SGRX charges a percentage of the rebates collected as admin fees for this service. All rebates funds received from the pharmaceutical companies are recorded as revenue. As the funds are requested by and disbursed to clients, cost of service is recorded.

IBM (premiums) - SGRX collects and pays insurance premiums for clients' members. All amounts invoiced related to IBM services are recorded as revenue. Premium payments to members are recorded as cost of service when made.

340B Administration - SGRX manages the 340B program for its clients for an admin fee invoiced monthly.

Consulting - SGRX often incurs client reimbursable expenses through its consulting services.

SGRX
GROSSE POINTE PARK, MICHIGAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019

NOTE 1 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Income Taxes

For financial reporting purposes, the Company has elected to use the taxes payable method. Under that method, income tax expense represents the amount of income tax the Company expects to pay based on the Company's current year taxable income.

Current year taxable income varies from income before current year tax expense primarily due to the use of the completed-contract method and the use of an accelerated depreciation method for tax reporting purposes.

Business tax credits are applied as a reduction to the provision for federal income taxes using the flow-through method.

Evaluation of Subsequent Events

The Company has evaluated subsequent events through June 25, 2020, which is the date the financial statements were available to be issued.

Additionally, with the uncertainties of COVID-19 occurring after the date of the report but prior to the release of the report it could negatively impact the financial condition of the Company. However, the related financial impact and duration cannot be reasonably estimated at this time.

NOTE 2 - ACCOUNTS RECEIVABLE

Accounts receivable at December 31, 2019 expected to be collected within one year are \$10,723,210. The balance is made up of approximately five separate accounts derived from the separate revenue types.

NOTE 3 - TRANSACTIONS WITH RELATED PARTY

Amounts due from a shareholder and expected to be collected within one year is \$28,290.

NOTE 4 - PROPERTY AND EQUIPMENT

Communication equipment	\$ 36,973
Computers and equipment	112,471
Furniture and fixtures	15,825
Leasehold improvements	18,267
Automobiles	71,686
	<u>255,222</u>
Accumulated depreciation	<u>(217,242)</u>
Net property and equipment	<u>\$ 37,980</u>

Depreciation expense related to property, plant, and equipment was \$36,898 in December 31, 2019.

SGRX
GROSSE POINTE PARK, MICHIGAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019

NOTE 5 - FINANCING ACTIVITIES

Line of Credit

The Company has a line of credit agreement with Chemical Bank of \$200,000. The outstanding balance is \$162,046 at December 31, 2019. The line bears interest at 4.25%. The line is reviewed annually and is due on demand. Under terms of the line of credit, the Company is required to maintain a specified debt service coverage ratio and debt to tangible net worth ratio, as those terms are defined.

Notes Payable

The following is a summary of all notes payable

Note payable to State Bank, collateralized by an automobile (carrying amount of \$30,234), due in monthly installments of \$2,546 plus interest at 4% through January 2021	\$ 30,234
	<hr/>
	30,234
Current maturities	29,887
Balance	<u>\$ 347</u>

Principal payments on note payables are due as follows:

Year ending December 31,

2020	\$	29,887
2021	\$	347

NOTE 6 - CONTINGENCIES

To date, the company has not been involved in legal proceedings detrimental to their financial statements. There are no pending legal proceedings to which the Company is a party for which management believes the ultimate outcome would have a material adverse effect on the Company's financial position.

Schulze Oswald Miller & Edwards PC

120 N. Ripley Street • Alpena, MI 49707
P.O. Box 69 • Rose City, MI 48654



Alpena 989-354-8707 • Fax 989-354-8708
Rose City 989-685-2411 • Fax 989-685-2412

COMMUNICATION OF NO MATERIAL WEAKNESSES IN A SEPARATE REPORT

To the Board of Directors and Management
SGRX
Gross Pointe Park, Michigan

In planning and performing our audit of the financial statements of SGRX as of and for the year ended December 31, 2019, in accordance with auditing standards general accepted in the United States of America, we considered SGRX's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we do not express an opinion on the effectiveness of the Company's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis.

Our consideration of internal control was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that were not identified.

This communication is intended solely for the information and use of management, the board of directors, and others within the Company, and is not intended to be, and should not be, used by anyone other than these specified parties.

Schulze, Oswald, Miller & Edwards PC

Schulze, Oswald, Miller & Edwards PC
Alpena, Michigan
June 25, 2020

Schulze Oswald Miller & Edwards PC

120 N. Ripley Street • Alpena, MI 49707
P.O. Box 69 • Rose City, MI 48654



Alpena 989-354-8707 • Fax 989-354-8708
Rose City 989-685-2411 • Fax 989-685-2412

COMMUNICATION WITH THOSE CHARGED WITH GOVERNANCE AT AUDIT CONCLUSION – ALL GOVERNANCE MEMBERS ARE INVOLVED IN MANAGEMENT

To the Board of Directors
SGRX
Gross Pointe Park, Michigan

We have audited the financial statements of SGRX for the year ended December 31, 2019, and we will issue our report thereon dated June 25, 2020. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our engagement letter dated April 10, 2020. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by SGRX are described in Note 1 to the financial statements, no new accounting policies were adopted and the application of existing policies was not changed during the year ended December 31, 2019. We noted no transactions entered into by SGRX during the year for which there is a lack of authoritative guidance of consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimate affecting the financial statements was capital asset depreciation.

Management's estimate of the capital asset depreciation is based on the estimated useful lives of ScriptGuide Rx, Inc.'s capital assets. We evaluated the key factors and assumptions used to develop the capital asset depreciation in determining that it is reasonable in relation to the financial statements taken as a whole.

Certain financial statement disclosures are particularly sensitive because of their significance to financial statement users. The most sensitive disclosure affecting the financial statement was:

The disclosure of Capital Assets in Note 4 to the financial statements estimate of the useful lives of depreciable capital assets is based on the length of time it is believed that those assets will provide some economic benefit in the future.

The disclosures in the financial statements are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in performing and completing our audit.

Uncorrected Misstatements

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Management has corrected all such misstatements.

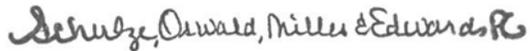
Disagreements with Management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as SGRX's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

This information is intended solely for the use of the Board of Directors of SGRX and is not intended to be, and should not be, used by anyone other than these specified parties.



Schulze, Oswald, Miller & Edwards PC
Alpena, Michigan



November 23, 2020

Scriptguiderx Inc.
15400 E. Jefferson Ave.
Grosse Pointe Park, MI 48230

Re: Banking Reference

To Whom It May Concern:

Please be advise Scriptguiderx Inc. has maintained their relationship with TCF Bank as satisfactory since 2002. Any questions or concerns you may have please contact Wendy LaPointe at (586) 598-8135 or email wendy.lapointe@tcfbank.com.

Sincerely,

A handwritten signature in black ink, appearing to read 'Wendy LaPointe', written over a white background.

Wendy LaPointe
Banking Center Manager

What's in it for we.™

Cost Proposal

RFP 6396 Z1

Pharmacy Benefits Manager for the Ryan White Program

Bidder must provide all-inclusive pricing based off the estimated per member per month usage. Bidder must provide pricing for each year of the initial term and each renewal option.

Estimated Quantity	PER MEMBER PER MONTH						
	Initial Year One	Initial Year Two	Initial Year Three	Initial Year Four	Initial Year Five	Optional Renewal Year One	Optional Renewal Year Two
800	\$12.50	\$12.25	\$12.00	\$11.75	\$11.50	\$11.25	\$11.00

Form B: REQUEST FOR PROPOSAL FOR CONTRACTUAL SERVICES FORM

CONTRACTOR MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the contractor guarantees compliance with the procedures stated in this Solicitation, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that contractor maintains a drug free work place.

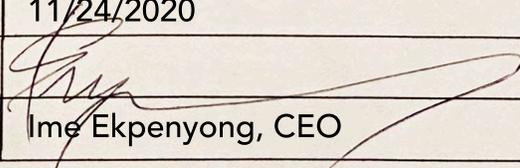
Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

____ NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this Solicitation.

____ I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

____ I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD (NOT ELECTRONICALLY)

FIRM:	ScriptGuideRX (SGRX)
COMPLETE ADDRESS:	15400 E. Jefferson Ave., Grosse Pointe Park MI 48230
TELEPHONE NUMBER:	313-821-3200
FAX NUMBER:	313-821-3201
DATE:	11/24/2020
SIGNATURE:	
TYPED NAME & TITLE OF SIGNER:	Ime Ekpenyong, CEO



NEDAP Implementation Project Plan

% Complete	Task Name	Duration	Start	Finish
0%	NEDAP	32 days	Sat 12/19/20	Mon 2/1/21
0%	LOI signed by NEDAP	1 day	Mon 12/21/20	Mon 12/21/20
0%	Contract signed by SGRX and NEDAP	10 days	Mon 12/21/20	Fri 1/1/21
0%	Kick off meeting with SGRX and NEDAP	3 days	Mon 12/21/20	Wed 12/23/20
0%	Implementation document	7 days	Mon 12/21/20	Tue 12/29/20
0%	Create	7 days	Mon 12/21/20	Tue 12/29/20
0%	Sign off by NEDAP	3 days	Mon 12/21/20	Wed 12/23/20
0%	Sign off by SGRX	3 days	Mon 12/21/20	Wed 12/23/20
0%	Formulary	10 days	Mon 12/21/20	Fri 1/1/21
0%	Review existing formulary	5 days	Mon 12/21/20	Fri 12/25/20
0%	Identify affected members from claims history	5 days	Mon 12/21/20	Fri 12/25/20
0%	SGRX to perform formulary disruption analysis	5 days	Mon 12/21/20	Fri 12/25/20
0%	Create abbreviated Formulary document	7 days	Mon 12/21/20	Tue 12/29/20
0%	Load formulary into production	10 days	Mon 12/21/20	Fri 1/1/21
0%	Benefit Coding	20 days	Mon 12/21/20	Fri 1/15/21
0%	Review NEDAP customer\client\group hierarchy	5 days	Mon 12/21/20	Fri 12/25/20
0%	Code NEDAP customer\client\group into PHS	7 days	Mon 12/21/20	Tue 12/29/20
0%	Code formulary into PHS	20 days	Mon 12/21/20	Fri 1/15/21
0%	Code plan benefit	20 days	Mon 12/21/20	Fri 1/15/21
0%	Code maintenance drug list	20 days	Mon 12/21/20	Fri 1/15/21
0%	Code Specialty Matrix	20 days	Mon 12/21/20	Fri 1/15/21
0%	Code Exclusion list	20 days	Mon 12/21/20	Fri 1/15/21
0%	Audit Coding setup	20 days	Mon 12/21/20	Fri 1/15/21
0%	Validation and testing on benefit coding setup	10 days	Mon 12/21/20	Fri 1/1/21
0%	Replay of claims	10 days	Mon 12/21/20	Fri 1/1/21
0%	Analysis performed on replay data and provided to NEDAP	5 days	Mon 12/21/20	Fri 12/25/20
0%	NEDAP approval	5 days	Mon 12/21/20	Fri 12/25/20
0%	Pharmacy Network	30 days	Mon 12/21/20	Fri 1/29/21
0%	Build Pharmacy Network in PHS	30 days	Mon 12/21/20	Fri 1/29/21
0%	Provide current network	5 days	Mon 12/21/20	Fri 12/25/20
0%	Identify outlying pharmacies	7 days	Mon 12/21/20	Tue 12/29/20

NEDAP Implemenation Project Plan

% Complete	Task Name	Duration	Start	Finish
0%	Contract with outlying pharmacies	30 days	Mon 12/21/20	Fri 1/29/21
0%	Retail rate sheet	30 days	Mon 12/21/20	Fri 1/29/21
0%	Rate sheet to Coding	2 days	Mon 12/21/20	Tue 12/22/20
0%	NEDAP to update card template with SGRX logo	5 days	Mon 12/21/20	Fri 12/25/20
0%	Develop plan sheet for Pharmacy communication	5 days	Mon 12/21/20	Fri 12/25/20
0%	Specialty/Mail Service	20 days	Mon 12/21/20	Fri 1/15/21
0%	Setup network for Mail Service	20 days	Mon 12/21/20	Fri 1/15/21
0%	Identify Specialty utilizers from claims history file	5 days	Mon 12/21/20	Fri 12/25/20
0%	Provide list of Specialty utilizers to vendor for Prescriber outreach	5 days	Mon 12/21/20	Fri 12/25/20
0%	SGRX outreach to Specialty utilizers	5 days	Mon 12/21/20	Fri 12/25/20
0%	Systems Training	4 days	Mon 12/21/20	Thu 12/24/20
0%	RxSense Claims Adjudication Tool	3 days	Mon 12/21/20	Wed 12/23/20
0%	Provides a list of users and security level	3 days	Mon 12/21/20	Wed 12/23/20
0%	Users setup in system	3 days	Mon 12/21/20	Wed 12/23/20
0%	SGRX to send Citrix setup instructions	2 days	Mon 12/21/20	Tue 12/22/20
0%	Test Connectivity	3 days	Mon 12/21/20	Wed 12/23/20
0%	Training	2 days	Mon 12/21/20	Tue 12/22/20
0%	RxSense Reporting Tool	4 days	Mon 12/21/20	Thu 12/24/20
0%	Determine which standard reports NEDAP will use and frequency	3 days	Mon 12/21/20	Wed 12/23/20
0%	Reporting tool demonstration	1 day	Mon 12/21/20	Mon 12/21/20
0%	Provides a list of users and security level	3 days	Mon 12/21/20	Wed 12/23/20
0%	Users setup in system	3 days	Mon 12/21/20	Wed 12/23/20
0%	Reporting tool training	2 days	Mon 12/21/20	Tue 12/22/20
0%	Training	2 days	Mon 12/21/20	Tue 12/22/20
0%	Schedule the reports to run after go live date of 2/1/21	4 days	Mon 12/21/20	Thu 12/24/20
0%	Insurance Benefit Management	20 days	Mon 12/21/20	Fri 1/15/21
0%	NEDAP to provide existing ADAP Members who qualify for premium assistance	5 days	Mon 12/21/20	Fri 12/25/20
0%	NEDAP to provide existing ADAP insurance company vendors	5 days	Mon 12/21/20	Fri 12/25/20
0%	Determine process workflow	5 days	Mon 12/21/20	Fri 12/25/20
0%	Determine process reporting shcedule	20 days	Mon 12/21/20	Fri 1/15/21
0%	Determine payment scheudle	20 days	Mon 12/21/20	Fri 1/15/21

NEDAP Implementation Project Plan

% Complete	Task Name	Duration	Start	Finish
0%	Finance	15 days	Mon 12/21/20	Fri 1/8/21
0%	Determine Payment Method	15 days	Mon 12/21/20	Fri 1/8/21
0%	Determine Invoice Method and Format	15 days	Mon 12/21/20	Fri 1/8/21
0%	Determine billing schedule	15 days	Mon 12/21/20	Fri 1/8/21
0%	Define process for reconciliation of claim handling between Reporting and Invoicing	15 days	Mon 12/21/20	Fri 1/8/21
0%	Verify that the invoice can be broken down by client	15 days	Mon 12/21/20	Fri 1/8/21
0%	Confirm Rebate Requirements and Rates	15 days	Mon 12/21/20	Fri 1/8/21
0%	Confirm administration fees	15 days	Mon 12/21/20	Fri 1/8/21
0%	Confirm any other contracted fees	15 days	Mon 12/21/20	Fri 1/8/21
0%	Claims Detail File	15 days	Mon 12/21/20	Fri 1/8/21
0%	Daily Accumulator/PCT Files	15 days	Mon 12/21/20	Fri 1/8/21
0%	Develop process flow	5 days	Mon 12/21/20	Fri 12/25/20
0%	Test transfer process	10 days	Mon 12/21/20	Fri 1/1/21
0%	Move to production	15 days	Mon 12/21/20	Fri 1/8/21
0%	Communications	10 days	Mon 12/21/20	Fri 1/1/21
0%	Member Communications	10 days	Mon 12/21/20	Fri 1/1/21
0%	Create member formulary change letter	5 days	Mon 12/21/20	Fri 12/25/20
0%	Signoff on member formulary change letter	3 days	Mon 12/21/20	Wed 12/23/20
0%	Send ID cards and communicate formulary changes to members	10 days	Mon 12/21/20	Fri 1/1/21
0%	Provider Communications	10 days	Mon 12/21/20	Fri 1/1/21
0%	Create top prescriber formulary change letter	5 days	Mon 12/21/20	Fri 12/25/20
0%	Signoff on top prescriber formulary change letter	3 days	Mon 12/21/20	Wed 12/23/20
0%	Notify top prescribers of formulary changes	10 days	Mon 12/21/20	Fri 1/1/21
0%	Pharmacy Communication	5 days	Mon 12/21/20	Fri 12/25/20
0%	Pharmacy communication #1 sent	1 day	Mon 12/21/20	Mon 12/21/20
0%	Pharmacy communication #2 sent	5 days	Mon 12/21/20	Fri 12/25/20
0%	Pharmacy Go-Live Communication	1 day	Mon 12/21/20	Mon 12/21/20
0%	Pharmacy Post Go-Live Communication	1 day	Mon 12/21/20	Mon 12/21/20
0%	Go Live	1 day	Mon 2/01/21	Mon 2/01/21
0%	Post Implementation Meeting	1 day	Mon 2/02/21	Tues 02/02/21

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
WALGREENS #00541	1301 O STREET	LINCOLN	NE	685081512	LANCASTER
WALGREENS #03694	1802 GALVIN RD S	BELLEVUE	NE	680053813	SARPY
SHAVERS PHARMACY	508 NIOBRARA	HEMINGFORD	NE	69348	BOX BUTTE
MILLER PHARMACY EAST	1900 E MILITARY	FREMONT	NE	680255494	DODGE
RIGHT DRUG STORE	113 E KIMBALL	CALLAWAY	NE	688250130	CUSTER
SERVICE DRUG STORE	133 E 8TH ST	COZAD	NE	691301729	DAWSON
MANION'S DRUG STORE	719 MAIN STREET	CREIGHTON	NE	687290085	KNOX
BERTS PHARMACY	1021 W 14TH ST	HASTINGS	NE	689013046	ADAMS
FOUR STAR DRUG OF BETHANY	1340 N 66TH ST	LINCOLN	NE	685051897	LANCASTER
THE APOTHECARY SHOP	100 VALLEYVIEW DR	PENDER	NE	680470139	THURSTON
KELLER PHARMACY	101 W 3RD ST	PONCA	NE	687700365	DIXON
LA VISTA PHARMACY	7101 S 84TH ST	LA VISTA	NE	681282177	SARPY
HASSELBALCH PHARMACY	143 S 3RD ST	TECUMSEH	NE	684500537	JOHNSON
SUPER SAVER PHARMACY	5710 S 144TH ST	OMAHA	NE	68137	DOUGLAS
KEITHS MEDICAL PARK PHARMACY	2115 N KANSAS AVE	HASTINGS	NE	689012615	ADAMS
WALGREENS #06962	3121 S 24TH ST	OMAHA	NE	681081824	DOUGLAS
SHOPKO PHARMACY	5646 N 90TH ST	OMAHA	NE	681341808	DOUGLAS
WALMART PHARMACY 10-0637	200 FRONTIER STREET	LEXINGTON	NE	68850	DAWSON
WALGREENS #12115	2320 23RD AVE	COLUMBUS	NE	686013304	PLATTE
WALMART PHARMACY 10-0790	1902 WEST B	MCCOOK	NE	69001	RED WILLOW
E STREET DISCOUNT PHARMACY	470 E STREET	DAVID CITY	NE	686321637	BUTLER
HAEBERLE'S GRAND CENTRAL PHARMACY	7 W 25TH ST	KEARNEY	NE	68847	BUFFALO
SHOPKO PHARMACY #2704	1300 STONE ST	FALLS CITY	NE	683552657	RICHARDSON
SHOPKO PHARMACY #2662	211 S 23RD ST	PLATTSMOUTH	NE	680482903	CASS
KMART PHARMACY3814	4700 SECOND AVE	KEARNEY	NE	68848	BUFFALO
WALMART PHARMACY 10-1637	6304 NORTH 99TH STREET	OMAHA	NE	68122	DOUGLAS
SKAGWAY PHARMACY	1607 S LOCUST ST	GRAND ISLAND	NE	68802	HALL
RUSS PHARMACY	1709 WASHINGTON ST	LINCOLN	NE	68502	LANCASTER
HY-VEE PHARMACY #2 (1461)	2107 TAYLOR AVENUE	NORFOLK	NE	68701	MADISON
RUSS'S PHARMACY #16	4400 SOUTH 33RD STREET COURT	LINCOLN	NE	68516	LANCASTER
COMMUNITY PHARMACY AT REGIONAL WEST	3911 AVENUE B	SCOTTSBLUFF	NE	69361	SCOTTS BLUFF
SUPER SAVERS PHARMACY	3318 23RD ST	COLUMBUS	NE	68601	PLATTE
WALGREENS #05966	2605 S 171ST ST	OMAHA	NE	681302389	DOUGLAS
CVS PHARMACY #16903	17810 W CENTER RD	OMAHA	NE	68130	DOUGLAS
SAMS PHARMACY	4900 NORTH 27TH STREET	LINCOLN	NE	68521	LANCASTER

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
OMNICARE OF OMAHA	11028 Q STREET	OMAHA	NE	68510	LANCASTER
ONEWORLD PHARMACY	4920 S 30TH ST	OMAHA	NE	68107	DOUGLAS
NEIN PHARMACY	1012 MAIN ST	BRIDGEPORT	NE	69336	MORRILL
VARNEY HEALTH MART	744 SOUTH E ST	BROKEN BOW	NE	688220070	CUSTER
WALMART PHARMACY 10-3395	3501 SOUTH LOCUST STREET	GRAND ISLAND	NE	68801	HALL
CROSIER PARK PHARMACY	405 EAST 14TH STREET	HASTINGS	NE	68901	ADAMS
CVS PHARMACY #08626	7002 O ST	LINCOLN	NE	685102425	LANCASTER
WALGREENS #11205	6005 N 72ND ST	OMAHA	NE	681342300	DOUGLAS
WALMART PHARMACY 10-3823	3400 NORTH 85TH STREET	LINCOLN	NE	685079435	LANCASTER
GENOA COMMUNITY PHARMACY	508 WILLARD AVE.	GENOA	NE	68640	NANCE
CVS PHARMACY #06733	1919 N 90TH ST	OMAHA	NE	681141316	DOUGLAS
SUPER SAVER PHARMACY #27	840 FALLBROOK BLVD	LINCOLN	NE	68521	LANCASTER
WALMART PHARMACY 10-4138	13105 BIRCH DR	OMAHA	NE	681645222	DOUGLAS
WALMART PHARMACY 10-3151	5018 AMES AVE	OMAHA	NE	681042323	DOUGLAS
WALMART PHARMACY 10-3152	2451 N 90TH ST	OMAHA	NE	681346009	DOUGLAS
WALMART PHARMACY 10-4139	360 N SADDLE CREEK RD	OMAHA	NE	681312230	DOUGLAS
SHOPKO PHARMACY #2212	301 E US HIGHWAY 20	GORDON	NE	693431650	SHERIDAN
COSTCO PHARMACY #1285	1620 PINE LAKE RD	LINCOLN	NE	685123612	LANCASTER
KOHL'S PHARMACY & HOMECARE	12739 Q ST	OMAHA	NE	68137	DOUGLAS
WALGREENS #03269	705 N BURLINGTON AVE	HASTINGS	NE	689014419	ADAMS
KOHL'S RXMPSS	5110 L STREET	OMAHA	NE	68117	DOUGLAS
SKAGWAY PHARMACY	620 W STATE ST	GRAND ISLAND	NE	68801	HALL
MILLER PHARMACY NORTH	322 E 22ND STREET	FREMONT	NE	680252608	DODGE
WEST HOLT PHARMACY	313 W PEARL	ATKINSON	NE	68713	HOLT
GRANT PHARMACY	218 CENTRAL AVE	GRANT	NE	69140	PERKINS
BERTS PHARMACY	700 W 2ND ST	HASTINGS	NE	689015103	ADAMS
MUERI DRUG	544 SEWARD ST	SEWARD	NE	684342008	SEWARD
BARNAS DRUG INC	124 W 3RD ST	WILBER	NE	684650547	SALINE
KMART PHARMACY7493	5808 S 144TH STREET	OMAHA	NE	68137	DOUGLAS
KMART PHARMACY7579	13450 MAPLE ROAD	OMAHA	NE	68164	DOUGLAS
WALMART PHARMACY 10-0645	2400 PASEWALK AVE	NORFOLK	NE	68701	MADISON
WALGREENS #03716	2516 2ND AVE	KEARNEY	NE	688474415	BUFFALO
WALMART PHARMACY 10-0776	3010 E 23RD AVE N	FREMONT	NE	68025	DODGE
WALGREENS #01430	1701 SOUTH ST	LINCOLN	NE	685022734	LANCASTER
SHOPKO PHARMACY	510 E PHILIP AVE	NORTH PLATTE	NE	691015538	LINCOLN

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
WALMART PHARMACY 10-0598	5411 N. SECOND AVENUE	KEARNEY	NE	68847	BUFFALO
ASHLAND PHARMACY, MEDICINE SHOPPE 2058	1401 SILVER ST	ASHLAND	NE	68003	SAUNDERS
WALMART PHARMACY 10-1326	2250 NO. DIERS AVE	GRAND ISLAND	NE	68803	HALL
WALGREENS #10502	1030 W 21ST ST	SOUTH SIOUX CITY	NE	687762661	DAKOTA
WALMART PHARMACY 10-0350	101 EAST DAVID DRIVE	YORK	NE	68467	YORK
PRIEFERT PHARMACY	428 LINCOLN AVE	HEBRON	NE	683701526	THAYER
SHOPKO PHARMACY #2657	150 S 1ST ST	BLAIR	NE	680082540	WASHINGTON
SHOPKO PHARMACY #2691	100 TEXAS TRAIL DR	OGALLALA	NE	691533035	KEITH
DIABETES SUPPLY CENTER OF THE MIDLANDS	2910 S 84TH ST	OMAHA	NE	681243213	DOUGLAS
TOOLEY DRUG INC CLINICAL PHARMACY	4306 38TH ST	COLUMBUS	NE	68601	PLATTE
HY-VEE DRUGSTORE (7062)	8404 N 30TH STREET	OMAHA	NE	68112	DOUGLAS
QUANTUM MED PHARMACY	3744 S 132ND ST	OMAHA	NE	68144	DOUGLAS
LOUDERBACK DRUG	201 S MAIN ST	MADISON	NE	68748	MADISON
WALGREENS #04753	1404 SUPERIOR ST	LINCOLN	NE	685211945	LANCASTER
SHOPKO PHARMACY	3400 N 27TH ST	LINCOLN	NE	685211314	LANCASTER
SAFeway PHARMACY #2563	230 MOREHEAD	CHADRON	NE	693372325	DAWES
WALGREENS #05874	2630 PINE LAKE RD	LINCOLN	NE	685123648	LANCASTER
MILFORD PHARMACY	610 1ST ST	MILFORD	NE	68405	SEWARD
HY-VEE PHARMACY (1620)	2501 CORNHUSKER PLAZA	SOUTH SIOUX CITY	NE	68776	DAKOTA
BARR PHARMACY	1651 WASHINGTON ST	BLAIR	NE	68008	WASHINGTON
WALGREENS #05741	3001 DODGE ST	OMAHA	NE	681312627	DOUGLAS
HY-VEE PHARMACY #9 (1472)	17810 WELCH PLAZA	OMAHA	NE	68135	DOUGLAS
WALMART PHARMACY 10-5170	3001 SILVERBERG DRIVE	SIDNEY	NE	69162	CHEYENNE
SAMS PHARMACY 10-8146	13130 L STREET	OMAHA	NE	68137	DOUGLAS
SHOPKO PHARMACY #2695	2353 SOUTH E	BROKEN BOW	NE	68822	CUSTER
CRAWFORD PHARMACY	312 SECOND ST	CRAWFORD	NE	69339	DAWES
SHOPKO PHARMACY #2673	1511 EAST 4TH	ANISWORTH	NE	69210	BROWN
HY-VEE PHARMACY #1 (1385)	5010 O STREET	LINCOLN	NE	68510	LANCASTER
WALMART PHARMACY 10-4358	1606 SOUTH 72ND STREET	OMAHA	NE	68124	DOUGLAS
U SAVE PHARMACY ELKHORN	940 N. 204TH AVE	ELKHORN	NE	68022	DOUGLAS
HY-VEE PHARMACY SOLUTIONS	10004 S 152ND STREET	OMAHA	NE	68138	SARPY
NO FRILLS PHARMACY	1221 SOUTH 203RD STREET	OMAHA	NE	68130	DOUGLAS
CVS PHARMACY #04929	10770 FORT ST	OMAHA	NE	681341230	DOUGLAS
UROLOGY CANCER CENTER	17607 GOLD PLAZA	OMAHA	NE	68130	DOUGLAS
SAMS PHARMACY 10-4873	8480 ANDERMATT DR	LINCOLN	NE	68526	LANCASTER

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
SAFEWAY PHARMACY #0549	500 E. THIRD STREET	ALLIANCE	NE	693013832	BOX BUTTE
U SAVE PHARMACY GRETNA	611 N HIGHWAY 6	GRETNA	NE	68028	SARPY
WALMART PHARMACY 10-3153	6710 S 167TH ST	OMAHA	NE	68135	DOUGLAS
WALMART PHARMACY 10-7129	201 PONY EXPRESS LANE	OGALLALA	NE	69153	KEITH
KOHL'S PHARMACY & HOMECARE	800 N 27TH ST	LINCOLN	NE	685032523	LANCASTER
SAM'S CLUB PHARMACY 10-6181	9851 S 71ST PLAZA	PAPILLION	NE	68133	SARPY
WALGREENS #03182	7045 O STREET	LINCOLN	NE	685102426	LANCASTER
WALGREENS #15237	2929 N 60TH ST	OMAHA	NE	681062929	DOUGLAS
WALGREENS #07272	13155 W CENTER RD	OMAHA	NE	681443740	DOUGLAS
FARRELL'S PHARMACY	120 WEST B ST	MCCOOK	NE	69001	RED WILLOW
KOHL'S PHARMACY	5000 DODGE ST	OMAHA	NE	68132	DOUGLAS
JOHNSON PHARMACY	151 MAPLE ST	FRIEND	NE	683591030	SALINE
BEMIS DRUG LLC	129 S CHESTNUT ST	KIMBALL	NE	691451208	KIMBALL
LT PEDLEY DRUG	419 N COLORADO	MINDEN	NE	68959	KEARNEY
WANEK PHARMACY	410 MAIN STREET	NELIGH	NE	68756	ANTELOPE
HERITAGE PHARMACY	517 MAIN ST	PLATTSMOUTH	NE	680481992	CASS
CUNNINGHAM DRUG	220 E 12TH ST	SCHUYLER	NE	686611906	COLFAX
STEIER PHARMACY	6828 N 72ND ST	OMAHA	NE	68122	DOUGLAS
MAIN ST APOTHECARY	201 E 2ND ST	LAUREL	NE	687450515	CEDAR
LAKE CREST PHARMACY	620 MAIN STREET	ADAMS	NE	68301	GAGE
PAC N SAVE DISCOUNT PHARMACY	1519 W HWY 34	SEWARD	NE	68434	SEWARD
WALMART PHARMACY 10-0774	818 EAST 23RD ST.	COLUMBUS	NE	68601	PLATTE
ARAPAHOE PHARMACY	507 NEBRASKA AVE	ARAPAHOE	NE	68922	FURNAS
REIMER PHARMACY	312 BROADWAY	FULLERTON	NE	68638	NANCE
SUPER SAVER PHARMACY #9	2662 CORNHUSKER HWY	LINCOLN	NE	68521	LANCASTER
MEDICINE MAN PHARMACY	15615 PACIFIC ST STE 8	OMAHA	NE	681182118	DOUGLAS
CODY'S USAVE PHARMACY	2220 J STREET	AUBURN	NE	68305	NEMAHA
NATIONAL PHARMACY	3306 A STREET	LINCOLN	NE	685104512	LANCASTER
HY-VEE PHARMACY #2 (1466)	14591 STONY BROOK BLVD.	OMAHA	NE	68137	DOUGLAS
CVS PHARMACY #17208	7200 DODGE ST	OMAHA	NE	68114	DOUGLAS
RUSS'S PHARMACY #2	130 N 66TH ST	LINCOLN	NE	685052402	LANCASTER
SAFEWAY PHARMACY #2555	1944 ILLINOIS ST	SIDNEY	NE	691621427	CHEYENNE
EMPLOYER'S HEALTH CARE PHARMACY	810 N DIERS AVE	GRAND ISLAND	NE	688034955	HALL
SHOPKO PHARMACY #2659	2410 DAHLKE AVE	AUBURN	NE	683053025	NEMAHA
BAKERS PHARMACY	888 SADDLECREEK RD	OMAHA	NE	68106	DOUGLAS

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
WALMART PHARMACY 10-3267	18201 WRIGHT ST.	OMAHA	NE	68130	DOUGLAS
WALGREENS #07383	205 W 27TH ST	SCOTTSBLUFF	NE	693614307	SCOTTS BLUFF
WALMART PHARMACY 10-3278	8700 ANDERMATT DRIVE	LINCOLN	NE	68526	LANCASTER
BAKERS PHARMACY	12025 W CENTER RD	OMAHA	NE	68144	DOUGLAS
HY-VEE PHARMACY #10 (1474)	3410 NORTH 156TH STREET	OMAHA	NE	68116	DOUGLAS
CVS PHARMACY #08610	2755 S 48TH ST	LINCOLN	NE	68506	LANCASTER
LINCOLN NEIGHBORHOOD PHARMACY	6811 O ST	LINCOLN	NE	68510	LANCASTER
WALMART PHARMACY 10-4322	1800 EAST 29TH STREET	CRETE	NE	68333	SALINE
WALGREENS #11204	20201 MANDERSON ST	ELKHORN	NE	680223234	DOUGLAS
SHOPKO PHARMACY #2523	525 E HIGHWAY 20	VALENTINE	NE	69201	CHERRY
WALGREENS #11203	17909 BURKE ST	OMAHA	NE	681182252	DOUGLAS
SHOPKO PHARMACY #2698	718 4TH STREET	GOTHENBURG	NE	69138	DAWSON
WALGREENS #11356	11343 S 96TH ST	PAPILLION	NE	680464280	SARPY
HILLTOP DRUGS ETC	108 W 11TH ST	NELIGH	NE	68756	ANTELOPE
WALGREENS #12405	102 E PHILIP AVE	NORTH PLATTE	NE	691015537	LINCOLN
CVS PHARMACY #05863	14460 W MAPLE RD	OMAHA	NE	681165163	DOUGLAS
WALMART PHARMACY 10-4568	1882 HOLLY ST	BLAIR	NE	680086309	WASHINGTON
CVS PHARMACY #00473	1550 SOUTH ST L	LINCOLN	NE	68502	LANCASTER
WALMART PHARMACY 10-3154	2109 TOWNE CENTER DR	BELLEVUE	NE	68123	SARPY
WALGREENS #05143	7151 CASS ST	OMAHA	NE	681322652	DOUGLAS
KOHL'S PHARMACY	2923 LEAVENWORTH ST	OMAHA	NE	681052739	DOUGLAS
SEIG PHARMACY	6655 SORENSEN PKWY	OMAHA	NE	68152	DOUGLAS
BREHM DRUG	608 HOWARD AVE	SAINT PAUL	NE	68873	HOWARD
ABC DRUG	2123 CENTRAL AVE	KEARNEY	NE	68847	BUFFALO
SCRIBNER DRUGSTORE	416 MAIN ST	SCRIBNER	NE	680573196	DODGE
WELLS DRUG	113 S 4TH ST	ALBION	NE	686201215	BOONE
BURWELL PHARMACY	137 GRAND AVE	BURWELL	NE	688239802	GARFIELD
NOBLE DRUG	702 4TH AVE	HOLDREGE	NE	689492292	PHELPS
O'NEILL FAMILY PHARMACY	317 E DOUGLAS STREET	ONEILL	NE	687631829	HOLT
KMART PHARMACY3907	3535 W 13TH STREET	GRAND ISLAND	NE	68803	HALL
WALGREENS #03467	1515 W 2ND ST	GRAND ISLAND	NE	688015715	HALL
VALLEY PHARMACY	2118 CENTRAL AVE	KEARNEY	NE	688475304	BUFFALO
WALGREENS #04754	8380 HARRISON ST	LA VISTA	NE	681282918	SARPY
WALGREENS #06936	4310 AMES AVE	OMAHA	NE	681112149	DOUGLAS
WALGREENS #04088	2502 N 48TH ST	LINCOLN	NE	685043629	LANCASTER

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
WALGREENS #09899	1525 E 23RD ST	FREMONT	NE	680252434	DODGE
HY-VEE PHARMACY #8 (1471)	747 NORTH 132ND STREET	OMAHA	NE	68154	DOUGLAS
WALMART PHARMACY 10-1460	3803 OSBORNE DRIVE WEST	HASTINGS	NE	68901	ADAMS
WALMART PHARMACY 10-0418	2831 HWY 15	FAIRBURY	NE	68352	JEFFERSON
WALGREENS #03186	3701 NORTH 132ND ST	OMAHA	NE	681641849	DOUGLAS
CVS PHARMACY #16146	4001 N 132ND ST	OMAHA	NE	68164	DOUGLAS
WALGREENS #03202	7202 NORTH 30TH ST	OMAHA	NE	681122819	DOUGLAS
WALMART PHARMACY 10-2579	510 LINDEN STREET	CHADRON	NE	69337	DAWES
SUPER SAVER PHARMACY #17	2525 PINE LAKE ROAD	LINCOLN	NE	68512	LANCASTER
SHOPKO PHARMACY #2692	1150 EAST 3RD ST.	SUPERIOR	NE	689780006	NUCKOLLS
SHOPKO PHARMACY #2670	615 DEARBORN & HWY 35 EAST	WAYNE	NE	687872244	WAYNE
FAMILY VALUE PHARMACY	2115 14TH ST	AUBURN	NE	68305	NEMAHA
MILLER PHARMACY SPECIALTIES	322 E. 22ND STREET	FREMONT	NE	68025	DODGE
WALMART PHARMACY 10-5141	16960 WEST MAPLE ROAD	OMAHA	NE	68116	DOUGLAS
CVS PHARMACY #16297	4800 3RD AVE	KEARNEY	NE	68845	
WALGREENS #10437	5225 N 90TH ST	OMAHA	NE	681342831	DOUGLAS
SOUTHEAST NEBRASKA CANCER CENTER	201 S 68TH STREET PL STE 200	LINCOLN	NE	685102496	LANCASTER
CVS PHARMACY #05714	4840 DODGE ST	OMAHA	NE	681323111	DOUGLAS
PHARMACY EXPRESS IN TOWER PLAZA	349 N 78TH STREET	OMAHA	NE	681143640	DOUGLAS
ROCK COUNTY PHARMACY	801 S STATE ST	BASSETT	NE	687145062	ROCK
HYRUM'S FAMILY VALUE PHARMACY	2115 14TH ST	AUBURN	NE	68305	NEMAHA
KOHL'S PHARMACY & HOMECARE	800 N 27TH ST	LINCOLN	NE	685032523	LANCASTER
KOHL'S PHARMACY & HOMECARE	5110 L STREET	OMAHA	NE	68117	DOUGLAS
WALGREENS #04443	9001 W CENTER RD	OMAHA	NE	681242046	DOUGLAS
THIELE DRUG CO INC	304 BOX BUTTE AVE	ALLIANCE	NE	693013342	BOX BUTTE
GERING PHARMACY	1400 10TH STREET	GERING	NE	69341	SCOTTS BLUFF
PLAZA FOODS PHARMACY	401 S BELTLINE HWY W	SCOTTSBLUFF	NE	69361	SCOTTS BLUFF
U SAVE PHARMACY OGALLALA	23 N SPRUCE ST	OGALLALA	NE	69153	KEITH
HOFMANN PHARMACY	103 E 2ND STREET	TILDEN	NE	68781	MADISON
WALGREENS #05540	6905 S 36TH ST	BELLEVUE	NE	681471231	SARPY
SHOPKO PHARMACY	2005 KRENZIEN DR	NORFOLK	NE	687014601	MADISON
SHOPKO PHARMACY	14445 W CENTER RD	OMAHA	NE	681445401	DOUGLAS
WALMART PHARMACY 10-1585	1401 SOUTH DEWEY ST.	NORTH PLATTE	NE	69101	LINCOLN
SONNYS PHARMACY	310 N MAIN	BRIDGEPORT	NE	69336	MORRILL
DEINES PHARMACY	910 E COURT ST	BEATRICE	NE	68310	GAGE

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
WALMART PHARMACY 10-1671	8525 S 71ST PLZ	PAPILLION	NE	681332100	SARPY
CVS PHARMACY #16148	718 N WASHINGTON ST	PAPILLION	NE	68046	SARPY
MCKINNEYS PHARMACY	215 ENTERPRISE DR	GRETNA	NE	680280688	SARPY
WALGREENS #05190	2323 L STREET	OMAHA	NE	681071847	DOUGLAS
SHOPKO PHARMACY	6845 S 27TH ST	LINCOLN	NE	685124823	LANCASTER
BAKERS PHARMACY	5555 N 90TH ST	OMAHA	NE	68134	DOUGLAS
BAKERS PHARMACY	5222 S 136TH ST	OMAHA	NE	68137	DOUGLAS
BAKERS PHARMACY	801 GALVIN RD	BELLEVUE	NE	68005	SARPY
WALGREENS #06884	4000 S 70TH ST	LINCOLN	NE	685064658	LANCASTER
CVS PHARMACY #16867	3808 TWIN CREEK DR	BELLEVUE	NE	68123	SARPY
SUPER SAVER PHARMACY #4	233 N 48TH ST	LINCOLN	NE	68504	LANCASTER
WALMART PHARMACY 10-5361	12850 L STREET	OMAHA	NE	68137	DOUGLAS
SHOPKO PHARMACY #2672	404 E HWY 20	ONEILL	NE	68763	HOLT
MEDICAP	2555 KENSINGTON DRIVE	LINCOLN	NE	68521	LANCASTER
WALGREENS #12854	502 S 11TH ST	NEBRASKA CITY	NE	684102728	OTOE
CVS PHARMACY #03478	2609 S 132ND ST	OMAHA	NE	681442595	DOUGLAS
HY-VEE PHARMACY #11 (1478)	1000 SOUTH 178TH STREET	OMAHA	NE	68118	DOUGLAS
CVS PHARMACY #05634	8315 W CENTER RD	OMAHA	NE	681243111	DOUGLAS
CVS PHARMACY #02741	6901 S 84TH ST	LA VISTA	NE	681282127	SARPY
MEDS & MORE	1226 W PASEWALK AVE	NORFOLK	NE	68701	MADISON
WALMART PHARMACY 10-2432	2501 GRAINGER PARKWAY	LINCOLN	NE	68512	LANCASTER
MITCHELL DRUG LLC	1456 CENTER AVE	MITCHELL	NE	69357	SCOTTS BLUFF
THE APOTHECARY SHOP	958 WELLNESS WAY SUITE 2	PENDER	NE	680474509	THURSTON
WALGREENS #07693	225 N SADDLE CREEK RD	OMAHA	NE	681312228	DOUGLAS
KOHL'S PHARMACY	3427 S 84TH ST	OMAHA	NE	68124	DOUGLAS
KEITHS DRIVE IN DRUG	500 N HASTINGS	HASTINGS	NE	689015173	ADAMS
CREIGHTON UNIVERSITY MEDICAL CENTER CLIN	2412 CUMING ST STE 201	OMAHA	NE	681312137	DOUGLAS
PLAINVIEW FAMILY PHARMACY	103 S MAIN	PLAINVIEW	NE	687690217	PIERCE
SHOPKO PHARMACY	2208 N WEBB RD	GRAND ISLAND	NE	688031739	HALL
CVS PHARMACY #17446	12500 K PLAZA	OMAHA	NE	68137	DOUGLAS
AMBER PHARMACY	10004 S 152ND ST	OMAHA	NE	68138	SARPY
HY-VEE PHARMACY (1078)	3010 23RD ST	COLUMBUS	NE	68601	PLATTE
WALGREENS #05360	5062 S 155TH ST	OMAHA	NE	681375002	DOUGLAS
MEDICAP PHARMACY	2706 2ND AVE	KEARNEY	NE	688474430	BUFFALO
U SAVE PHARMACY OF NORFOLK	1001 W BENJAMIN AVENUE	NORFOLK	NE	68701	MADISON

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
CVS PHARMACY #17371	8201 S 40TH ST	LINCOLN	NE	68516	LANCASTER
WALGREENS #10892	533 S LINCOLN AVE	YORK	NE	684674211	YORK
OMNICARE OF NORTH PLATTE	3700 W PHILIP AVE AT THE ATRIUM	NORTH PLATTE	NE	69101	LINCOLN
WALGREENS #12538	1230 N WEBB RD	GRAND ISLAND	NE	688033304	HALL
WALGREENS #11355	9512 S 71ST PLAZA	PAPILLION	NE	681332152	SARPY
HY VEE PHARMACY 7 LTC	3505 L STREET	OMAHA	NE	68107	DOUGLAS
KOHL'S PHARMACY & HOMECARE	2923 LEAVENWORTH ST	OMAHA	NE	681052739	DOUGLAS
WALGREENS #03621	9001 BLONDO STREET	OMAHA	NE	681346029	DOUGLAS
KEY-MED PHARMACY CO.	7328 MAPLE ST	OMAHA	NE	681346896	DOUGLAS
SWINARSKI PHARMACY	624 HOWARD AVE	SAINT PAUL	NE	688732023	HOWARD
U SAVE PHARMACY GI CLINIC	2444 W FAIDLEY AVE	GRAND ISLAND	NE	68803	HALL
HENDERSON PHARMACY	1060 N MAIN ST	HENDERSON	NE	68371	YORK
VALLEY PHARMACY INC	211 W 33RD ST	KEARNEY	NE	68845	
ANDERSON PHARMACY	1429 M ST	ORD	NE	68862	VALLEY
U-SAVE PHARMACY	216 E 7TH ST	WAYNE	NE	68787	WAYNE
SPRINGFIELD DRUG	205 MAIN ST	SPRINGFIELD	NE	680590130	SARPY
KMART PHARMACY4130	5000 "L" STREET	OMAHA	NE	68117	DOUGLAS
HY-VEE PHARMACY #1 (1465)	5150 CENTER	OMAHA	NE	68106	DOUGLAS
GOOD LIFE PHARMACY	125 S 16TH ST	ORD	NE	68862	VALLEY
CHI HEALTH PHARMACY - IMMANUEL	6901 N 72ND ST	OMAHA	NE	68122	DOUGLAS
WALMART PHARMACY 10-0885	1326 280TH ROAD	SEWARD	NE	68434	SEWARD
DAVID CITY DISCOUNT PHARMACY	422 5TH ST	DAVID CITY	NE	68632	BUTLER
WALMART PHARMACY 10-1332	1601 CORNHUSKERS DRIVE	SOUTH SIOUX CITY	NE	68776	DAKOTA
GOOD LIFE PHARMACY	727 O ST	LOUP CITY	NE	68853	SHERMAN
HY-VEE PHARMACY #5 (1390)	7151 STACY LANE	LINCOLN	NE	68516	LANCASTER
WALGREENS #04531	1300 NORFOLK AVE	NORFOLK	NE	687014834	MADISON
BAKERS PHARMACY	17370 LAKESIDE HILLS PLAZA	OMAHA	NE	68130	DOUGLAS
RUSS'S PHARMACY #21	1550 S CODDINGTON	LINCOLN	NE	68522	LANCASTER
MARKS PHARMACY CAMBRIDGE	624 PATTERSON ST	CAMBRIDGE	NE	690220117	FURNAS
HY-VEE PHARMACY (1185)	840 EAST 23RD STREET	FREMONT	NE	68025	DODGE
WALGREENS #01162	8300 NORTHERN LIGHTS DR	LINCOLN	NE	685053705	LANCASTER
URBAN CLINIC PHARMACY INC	1760 COUNTY RD J	WAHOO	NE	68066	SAUNDERS
AFFINITY BIOTECH, INC.	1810 N 203RD ST	OMAHA	NE	680222885	DOUGLAS
WALMART PHARMACY 10-4600	11350 WICKERSHAM BLVD	GRETNA	NE	68028	SARPY
U SAVE PHARMACY 4TH STREET	423 W 4TH ST	GRAND ISLAND	NE	688014503	HALL

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
NEBRASKA ORTHOPAEDIC HOSPITAL RETAIL PH	2808 S 143RD PLZ	OMAHA	NE	68144	DOUGLAS
COSTCO PHARMACY #1237	12515 PORTSIDE PKWY	LA VISTA	NE	681285622	SARPY
EDS REXALL	2701 S 10TH ST	OMAHA	NE	68108	DOUGLAS
SCHUYLER PHARMACY INC	122 W 16TH ST	SCHUYLER	NE	68661	COLFAX
WESTERN DRUG	806 ILLINIOS	SIDNEY	NE	69162	CHEYENNE
CLABAUGH PHARMACY	501 COURT ST	BEATRICE	NE	683103989	GAGE
DEPOT DRUG	221 S JEFFERS ST STE 2	NORTH PLATTE	NE	69101	LINCOLN
WALMART PHARMACY 10-0867	3322 AVENUE I	SCOTTSBLUFF	NE	693614589	SCOTTS BLUFF
OSMOND PHARMACY	322 STATE STREET	OSMOND	NE	687650036	PIERCE
SEWARD FAMILY PHARMACY	250 N COLUMBIA AVE	SEWARD	NE	68434	SEWARD
YUNGDAHLS APOTHECARY	309 COMMERCIAL ST	STROMSBURG	NE	68666	POLK
SAINT FRANCIS MEDICAL CENTER PHARMACY	2620 W FAIDLEY AVENUE	GRAND ISLAND	NE	68803	HALL
SHOPKO PHARMACY #2694	312 FLACK AVE	ALLIANCE	NE	693013542	BOX BUTTE
WALMART PHARMACY 10-2847	10504 SOUTH 15TH STREET	BELLEVUE	NE	68123	SARPY
BAKERS PHARMACY	505 N 155TH PLAZA	OMAHA	NE	68154	DOUGLAS
SHOPKO PHARMACY #2660	930 MAIN AVE	CRETE	NE	683332254	SALINE
BAKERS PHARMACY	3614 TWIN CREEK DR	BELLEVUE	NE	68123	SARPY
WALGREENS #02472	18040 R PLAZA	OMAHA	NE	681351922	DOUGLAS
SHOPKO PHARMACY #2661	500 W PLAZA DR	WEST POINT	NE	687881835	CUMING
CVS PHARMACY #17105	6636 N 73RD PLZ	OMAHA	NE	68122	DOUGLAS
SUTTON PHARMACY	210 NORTH SAUNDERS AVENUE	SUTTON	NE	68979	CLAY
HY-VEE PHARMACY (1221)	115 WILMAR AVE	GRAND ISLAND	NE	68803	HALL
RELYCARE LTC BELLEVUE	2227 THURSTON CIR	BELLEVUE	NE	680052157	SARPY
FAMILY FARE PHARMACY 3811	1221 SOUTH 203RD STREET	OMAHA	NE	68130	DOUGLAS
CVS PHARMACY #10293	1301 WEST NORFOLK AVE	NORFOLK	NE	68701	MADISON
U SAVE PHARMACY - KEARNEY	3611 2ND AVE	KEARNEY	NE	68847	BUFFALO
SVANDA PHARMACY	314 GRAND AVE	RAVENNA	NE	688691393	BUFFALO
WALGREENS #04974	5038 CENTER ST	OMAHA	NE	681063111	DOUGLAS
HY-VEE PHARMACY #6 (1535)	9707 Q STREET	OMAHA	NE	68127	DOUGLAS
HY-VEE PHARMACY #4 (1467)	10808 FORT STREET	OMAHA	NE	68164	DOUGLAS
WALMART PHARMACY 10-1943	4700 N 27TH STREET	LINCOLN	NE	68521	LANCASTER
HY-VEE PHARMACY #3 (1469)	8809 W CENTER ROAD	OMAHA	NE	68124	DOUGLAS
BAKERS PHARMACY	4405 N 72ND ST	OMAHA	NE	68134	DOUGLAS
WALGREENS #10408	4811 O ST	LINCOLN	NE	685101920	LANCASTER
WALMART PHARMACY 10-4209	2101 S. 11TH STREET	NEBRASKA CITY	NE	68410	OTOE

Nebraska Pharmacy Directory
 Provided by ScriptGuideRX

PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
CVS PHARMACY #17392	16959 EVANS PLAZA	OMAHA	NE	68116	DOUGLAS
SEVEN VALLEYS HEALTH MART	200 E PACIFIC ST	CALLAWAY	NE	688250130	CUSTER
CVS PHARMACY #03085	1701 GALVIN RD S	BELLEVUE	NE	680053810	SARPY
WALMART PHARMACY 10-3172	5051 L ST	OMAHA	NE	681171328	DOUGLAS
HY-VEE PHARMACY (1323)	5212 3RD AVENUE	KEARNEY	NE	688452831	
CVS PHARMACY #10441	2307 23RD ST	COLUMBUS	NE	686013303	PLATTE
WALGREENS #16270	240 S 77TH ST	OMAHA	NE	681144579	DOUGLAS
KOHL'S PHARMACY & HOMECARE	622 N 114TH ST	OMAHA	NE	68154	DOUGLAS
NADENS PHARMACY	1312 Q ST	FRANKLIN	NE	68939	FRANKLIN
STEFFEN DRUG	214 NORTH BROADWAY	HARTINGTON	NE	687390248	CEDAR
SYRACUSE U-SAVE PHARMACY	1710 POPLAR	SYRACUSE	NE	68446	OTOE
BEATRICE COMMUNITY HOSPITAL PHARMACY	4800 HOSPITAL PARKWAY	BEATRICE	NE	683102039	GAGE
DEPOT DRUG	1400 DOUGLAS ST	OMAHA	NE	68179	DOUGLAS
WALGREENS #13137	13510 Q ST	OMAHA	NE	681373116	DOUGLAS
WALGREENS #02845	5701 VILLAGE BLVD	LINCOLN	NE	685164759	LANCASTER
ELGIN PHARMACY	112 S. 2ND STREET	ELGIN	NE	68636	ANTELOPE
CAMPBELL DRUG	311 MAIN ST	OSHKOSH	NE	69154	GARDEN
WALMART PHARMACY 10-2784	3620 NORTH 6TH STREET	BEATRICE	NE	68310	GAGE
WALGREENS #05059	10725 FORT ST	OMAHA	NE	681341229	DOUGLAS
BAKER'S PHARMACY #316	7312 N 30TH ST	OMAHA	NE	681122821	DOUGLAS
WALGREENS #07563	8989 W DODGE RD	OMAHA	NE	681143301	DOUGLAS
SHOPKO PHARMACY #2690	1533 BURLINGTON ST	HOLDREGE	NE	689491309	PHELPS
CVS PHARMACY #08615	1411 SUPERIOR STREET	LINCOLN	NE	68521	LANCASTER
LIESKE'S PHARMACY	1312 Q ST	FRANKLIN	NE	68939	FRANKLIN
CVS PHARMACY #04033	5611 S 27TH ST	LINCOLN	NE	685121613	LANCASTER
WALMART PHARMACY 10-3173	9460 GILES RD	LA VISTA	NE	681283064	SARPY
WISNER APOTHECARY	1024 AVENUE E STE 100	WISNER	NE	687912248	CUMING
WALGREENS #00515	2600 SOUTH 48TH STREET	LINCOLN	NE	685062502	LANCASTER
WAHOO PHARMACY AND GIFTS	526 N LINDEN ST	WAHOO	NE	68066	SAUNDERS
WEAVER PHARMACY	1014 G ST	GENEVA	NE	68361	FILLMORE
SHOPKO PHARMACY	4200 S 27TH ST	LINCOLN	NE	685025858	LANCASTER
WALGREENS #05736	815 N 27TH ST	LINCOLN	NE	685032524	LANCASTER
BAKERS PHARMACY	1531 N BELL ST	FREMONT	NE	68025	DODGE
WALGREENS #11957	1260 WASHINGTON ST	BLAIR	NE	680081732	WASHINGTON
HY-VEE DRUGSTORE LTC (7062)	8404 N. 30TH	OMAHA	NE	68112	DOUGLAS

Nebraska Pharmacy Directory
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PHARMACY_NAME	ADDRESS_1	CITY	STATE	ZIP_CODE	COUNTY
STOCKMEN'S DRUG	116 N MAIN ST	GORDON	NE	693431501	SHERIDAN
STOCKWELL PHARMACY	3811 S 27TH ST	LINCOLN	NE	685025700	LANCASTER
WAGEY DRUG COMPANY INC	800 N 27TH ST	LINCOLN	NE	685032599	LANCASTER
CORNER DRUG	301 N OAKLAND AVENUE	OAKLAND	NE	68045	BURT
SUPERIOR PHARMACY	348 N CENTRAL AVE	SUPERIOR	NE	68978	NUCKOLLS
ALLISON PHARMACY	1118 J ST	AUBURN	NE	683051531	NEMAHA
BLAKE'S PHARMACY	213 MAIN ST	LOUISVILLE	NE	680370339	CASS
SHOPKO PHARMACY	3020 S 84TH ST	OMAHA	NE	681243215	DOUGLAS
SHOPKO PHARMACY	601 GALVIN RD S	BELLEVUE	NE	680052249	SARPY
SA RX HINKY DINKY PHARMACY	2145 S 17TH ST	LINCOLN	NE	685023711	LANCASTER
HY-VEE PHARMACY #7 (1468)	3505 L STREET	OMAHA	NE	68107	DOUGLAS
SAFEWAY PHARMACY #0557	611 N SPRUCE ST	OGALLALA	NE	691532140	KEITH
CVS PHARMACY #16055	333 N 48TH ST	LINCOLN	NE	68504	LANCASTER
CVS PHARMACY #08616	5566 S 56TH ST	LINCOLN	NE	68516	LANCASTER
CVS PHARMACY #08294	4808 W O ST	LINCOLN	NE	685101908	LANCASTER
RONS PHARMACY	537 WEST GAGE ST	BLUE HILL	NE	689300307	WEBSTER
VALLEY PHARMACY	123 E GARDINER ST	VALLEY	NE	680649798	DOUGLAS
SHOPKO PHARMACY	100 S 66TH ST	LINCOLN	NE	685102301	LANCASTER
HY-VEE PHARMACY #1 (1460)	120 E NORFOLK	NORFOLK	NE	68701	MADISON
HY-VEE PHARMACY (1514)	11650 S 73RD ST	PAPILLION	NE	68046	SARPY
WALGREENS #11089	5500 RED ROCK LN	LINCOLN	NE	685166512	LANCASTER
COSTCO PHARMACY #1012	12300 W DODGE RD	OMAHA	NE	681542382	DOUGLAS
RXSOLUTIONS	1225 GOLDEN GATE DR	PAPILLION	NE	68046	SARPY
LLOYDS DRUG MART	2600 W NORFOLK AVE	NORFOLK	NE	687014496	MADISON
MEDICINE SHOPPE	601 COURT STREET	BEATRICE	NE	68310	GAGE
KMART PHARMACY7024	802 E 27TH STREET	SCOTTS BLUFF	NE	69361	SCOTTS BLUFF
HY-VEE PHARMACY #2 (1386)	1601 N 84TH STREET	LINCOLN	NE	68505	LANCASTER
BAKERS PHARMACY	13250 W MAPLE RD	OMAHA	NE	68164	DOUGLAS
HY-VEE PHARMACY #1 (1460) LTC	120 E. NORFOLK AVNUE	NORFOLK	NE	68701	MADISON
KOHL'S PHARMACY & HOMECARE	1413 S WASHINGTON	PAPILLION	NE	68046	SARPY
SAFEWAY PHARMACY #0556	601 BROADWAY	SCOTTSBLUFF	NE	693613517	SCOTTS BLUFF
RELYCARE PHARMACY	1221 N COTNER BLVD	LINCOLN	NE	68505	LANCASTER
HY-VEE PHARMACY #4 (1388)	6001 VILLAGE DRIVE	LINCOLN	NE	68516	LANCASTER
FOUR STAR DRUG OF PIEDMONT	1265 S COTNER BLVD	LINCOLN	NE	685104924	LANCASTER
REDLINE SPECIALTY PHARMACY	2415 OSBORNE DRIVE EAST, STE 100	HASTINGS	NE	68901	ADAMS

Nebraska Pharmacy Directory
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WALGREENS #06802	15525 SPAULDING PLAZA	OMAHA	NE	681166211	DOUGLAS
MEDWELL RX	13831 CHALCO VALLEY PKWY STE 101	OMAHA	NE	681386145	SARPY
CVS PHARMACY #02931	14303 U ST	OMAHA	NE	681372666	DOUGLAS
HY-VEE PHARMACY (1527)	16418 WESTSIDE DRIVE	PLATTSMOUTH	NE	68048	CASS
BAILEY DRUG	260 N STATE ST	OSCEOLA	NE	68651	POLK
OMNICARE OF NEBRASKA	8402 S. 117TH STREET	LA VISTA	NE	681285512	SARPY
HY-VEE PHARMACY #5 (1470)	7910 CASS STREET	OMAHA	NE	68114	DOUGLAS
GOOD LIFE PHARMACY	124 S 4TH ST	ALBION	NE	68620	BOONE
ACCREDO HEALTH GROUP INC	19060 Q ST	OMAHA	NE	68135	DOUGLAS
BARMORE DRUG STORE INC	600 N WASHINGTON	LEXINGTON	NE	688500500	DAWSON
GERIMED INC	7915 N 30TH ST	OMAHA	NE	681122444	DOUGLAS
WALGREENS #04772	3005 LAKE ST	OMAHA	NE	681113780	DOUGLAS
KOHL'S PHARMACY	622 N 114TH ST	OMAHA	NE	68154	DOUGLAS
TOMS REXALL DRUG	124 N MAIN ST	WEST POINT	NE	687881498	CUMING
HY-VEE PHARMACY #3 (1387)	5020 N 27TH STREET	LINCOLN	NE	68521	LANCASTER
SHOPKO PHARMACY #2658	123 N 24TH ST	BEATRICE	NE	683103426	GAGE
PLUM CREEK LONG TERM CARE PHARMACY	109 EAST 6TH	LEXINGTON	NE	688501938	DAWSON
CVS PHARMACY #10243	1710 W 2ND ST	GRAND ISLAND	NE	688035409	HALL
PETES PHARMACY	643 G ST	PAWNEE CITY	NE	684200072	PAWNEE
ESSENTIAL PHARMACY COMPOUNDING	620 N 114TH ST	OMAHA	NE	68154	DOUGLAS
MIDWEST LTC PHARMACY	3003 FRONTAGE ROAD	GRAND ISLAND	NE	68803	HALL
GENOA, A QOL HEALTHCARE COMPANY, LLC	8550 CUTHILLS CIR	LINCOLN	NE	68526	LANCASTER
HY-VEE PHARMACY (7090)	500 PLAZA DRIVE	WEST POINT	NE	687882612	CUMING
WISNER PHARMACY	913 AVE E	WISNER	NE	687910476	CUMING
COMMUNITY PHARMACY SERVICES	21689 NORTHSTAR DR	GRETNA	NE	68028	SARPY
RELYCARE LTC LINCOLN	1219 NORTH COTNER BLVD	LINCOLN	NE	68505	LANCASTER
THE NEBRASKA MED CTR BELLEVUE PHARMACY	2510 BELLEVUE MEDICAL CENTER DR STE	BELLEVUE	NE	68123	
KORBEL DRUG	405 5TH ST	FAIRBURY	NE	683522598	
CORNER DRUG	401 G ST	CENTRAL CITY	NE	688261755	MERRICK
KOHL'S PHARMACY	12739 Q ST	OMAHA	NE	68137	DOUGLAS
FOUR STAR DRUG OF WAVERLY	13851 GUILDFORD STREET	WAVERLY	NE	68462	LANCASTER
FAITH REGIONAL HEALTH SERVICES - THE PILLB	2700 WEST NORFOLK AVE	NORFOLK	NE	687014438	MADISON
GOOD LIFE LONG TERM CARE	125 S 16TH ST STE A	ORD	NE	68862	VALLEY
KOHL'S PHARMACY	1413 S WASHINGTON	PAPILLION	NE	68046	SARPY
SCHUYLER PHARMACY	122 W. 16TH STREET	SCHUYLER	NE	68661	COLFAX

Nebraska Pharmacy Directory
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ELMWOOD PHARMACY	808 S 52ND	OMAHA	NE	68106	DOUGLAS
KOHL'S PHARMACY & HOMECARE	5000 DODGE ST	OMAHA	NE	68132	DOUGLAS
NEBRASKA LONG TERM CARE LLC	910 COURT ST	BEATRICE	NE	68310	GAGE
ALLENS DISCOUNT PHARMACY	1115 W 2ND ST	HASTINGS	NE	68901	ADAMS
UNIVERSITY HEALTH CENTER PHARMACY	550 N 19TH ST	LINCOLN	NE	685880046	
GRETNA DRUG	820 VILLAGE SQUARE	GRETNA	NE	68028	SARPY
DARTMED PHARMACY	16707 Q STREET	OMAHA	NE	68135	DOUGLAS
VILLAGE PHARMACY	317 N WEBSTER ST	RED CLOUD	NE	689702549	WEBSTER
FALLS CITY PHARMACY	120 E 18TH ST	FALLS CITY	NE	68355	RICHARDSON
NEBRASKA MEDICINE PHARMACY AT LAURITZE	4014 LEAVENWORTH ST	OMAHA	NE	681985610	
WESTERN DRUG OF CHAPPELL	650 2ND ST	CHAPPELL	NE	69129	DEUEL
GLOBE REXALL DRUG	424 E ST	FAIRBURY	NE	683522535	JEFFERSON
THE NEBRASKA MEDICAL CENTER CLINIC PHAR	989200 NEBRASKA MEDICAL CENTER	OMAHA	NE	681989200	DOUGLAS
NEIGHBORHOOD LTC PHARMACY	6811 O ST STE B	LINCOLN	NE	685102422	LANCASTER
CURASCRIP SP SPECIALTY PHARMACY	10841 Q STREET	OMAHA	NE	68137	DOUGLAS
U SAVE PHARMACY	211 W LEOTA	NORTH PLATTE	NE	691016503	LINCOLN
TRAV'S U-SAVE PHARMACY	1414 16TH ST	CENTRAL CITY	NE	688261812	MERRICK
U-SAVE PHARMACY	5011 S 108TH ST	OMAHA	NE	68137	DOUGLAS
U SAVE PHARMACY MAPLE	2728 N 108TH ST	OMAHA	NE	68164	DOUGLAS
U SAVE PHARMACY	16869 AUDREY ST	OMAHA	NE	68136	SARPY
U-SAVE PAVILION PHARMACY	611 W FRANCIS ST STE 130	NORTH PLATTE	NE	691010614	LINCOLN
KOHL'S RX	2915 LEAVENWORTH ST	OMAHA	NE	681052739	DOUGLAS
KOHL'S RX	12741 Q ST	OMAHA	NE	681373211	DOUGLAS
KOHL'S RX	808 N. 27TH STREET	LINCOLN	NE	685032523	LANCASTER
KOHL'S RX	1413 S WASHINGTON ST STE 125	PAPILLION	NE	680464165	SARPY
KOHL'S RX	5002 DODGE ST	OMAHA	NE	681322906	DOUGLAS
KOHL'S RX	624 N 114TH ST	OMAHA	NE	681541571	DOUGLAS
KOHL'S RX	5108 L ST	OMAHA	NE	681171330	DOUGLAS

Heather Hage-Kosalski

(586)871-4766

hhkosalski@gmail.com

SUMMARY

- Outstanding communication and interpersonal skills.
- Exceptional organizational and management skills.
- Proficient in using computer applications, such as Microsoft Office, Access, Excel, Word and Power Point.
- Microsoft Access Certified.

PROFESSIONAL EXPERIENCE

October 2010 through Present- ScriptGuideRX, Inc./ Grosse Pointe Park, Michigan

Pharmacy Network Administration/Account Management

- Provide day-to-day operational support for pharmacy providers.
- Investigate reimbursement issues and pharmacy claim items.
- Ensure contract credentialing review and procedures are followed.
- Work with clients on auditing initiatives.
- Provide support and cross trained on departmental staff duties.
- Day-to-day point of contact for all clients.
- Customer/Client escalations management.
- Recoupment effort of almost five million dollars to date.
- Member service support and specialist in problem and issue resolution.
- Assist with RFP's.
- After hours calls and escalations.
- Assist in implementation of client RX savings initiatives.

March 2005 through October 2010- Atlas Global Bistro/Detroit, Michigan

General Manager

- Hospitality and culinary management of establishment.
- Front and back of house operations.
- Budgeting and cost controls.
- Assisted in Five Star dining and menu development.
- Developed teambuilding and training sessions for staff in front and back of house.
- Certified in safety and sanitation controls.
- Vendor and inventory management.
- Guest service excellence training.
- Strategic marketing and sales strategy planning.
- Payroll and P&L management.
- Profit and growth strategies.
- Assisted in all areas of restaurant, including servicing guests, mixology, and food preparation.

December 1996 through July 2001-Henry Ford Health System/Detroit, Michigan

Dietetics/Oncology

- Collaborated with doctors and nurses to identify and connect with patients nutritional counseling needs.
- Established treatment plans and communicated with patients regarding program compliance.
- Provided daily individual instruction to patients.
- Participated in various patient program committees to improve quality of care.
- Primary focus on neutropenic patients/bone marrow transplant.

EDUCATION

- Bachelor of Science; Food and Nutrition Science & Biology. *Wayne State University, Detroit Michigan*
- MHA- In Progress- Fall 2020 Estimated Completion-*University of Phoenix*

REFERENCES

- Jennifer H Perrino
470 Shelbourne Ct
GPF, MI 48236
313-610-5138
- Christa S Bazinski
47044 Mariner
Macomb, MI 48042
586-707-7274
- Laura L Pazzouli
89 SHorecrest
GPS, MI 48236
586-915-2400

Ime Ekpenyong, MBA
iekpenyong@scriptguiderx.com
(313).498.8981

- Over 12 years of combined Pharmacy Benefit Management experience in the areas of Customer Service, Sales, Project Management, and Client Services
- Energetic, personable, and results-driven professional with solid relationship-building expertise.
- Creative marketing and promotional mind-set – able to develop, solutions designed to satisfy clients' needs.
- Highly efficient, organized, and self-motivated individual with an infectious enthusiasm for leadership.
- Proficient with industry leading claims adjudication systems including PHS (AmeRX) & RxClaim, reporting tools, and Microsoft applications

PROFESSIONAL EXPERIENCE:

ScriptGuideRX, Grosse Point Park, MI
VP, Account Management

02.2010 – Present

- Managing overall client satisfaction, retention and renewal
- Identifying, developing and implementing solutions designed to exceed clients' needs include trend management
- Monitors help desk effectiveness including establishment of effective mechanisms for tracking and resolving all client and member issues and complaints.
- Ensure timely and accurate responses to both client issues on a day-to-day basis

CVS Caremark (formerly RxAmerica), Salt Lake City, UT

07.2007 – 01.2010

Sr. Account Executive

- Manage a team of Account Executives, Account Manager & Account Coordinators responsible for satisfying their respective clients profitably.
 - Responsible for overseeing clients with approximately \$1 billion in revenue.
- Work with direct reports to establish individual business plans and strategic joint account plans.
- Consistently partner with consultants, and clients to identify clients objectives, and offer recommendations designed to meet client's needs.
 - Manage installation of new programs and services for existing clients.
- Address non-routine member issues, special requests, and "plan maintenance" issues and /or concerns timely.
- Conduct monthly, quarterly or annual review of plan performance with clients and / or consultants.
- Oversee management of contract renewal process for existing clients.
- Participate in "Best & Final" presentations for prospective clients.

RxAmerica, Salt Lake City, UT

05.2005 – 07.2007

Account Manager

- Define, coordinate, and implement business solutions designed to ensure total client satisfaction.
- Consistently partner with consultants, and clients to identify clients objectives, and offer recommendations designed to meet client's needs.
 - Manage installation of new programs and services for existing clients.
- Address non-routine member issues, special requests, and "plan maintenance" issues and /or concerns timely.
- Conduct monthly, quarterly or annual review of plan performance with clients and / or consultants.
- Manage contract renewal process for existing clients.

MEDCO, Dublin, OH

10.2000 – 05.2005

Supervisor, Resolution Specialist Team

- Resolution Expert Supervisor responsible for managing team of 15-20 Resolution Experts to meet department. productivity goals, scheduling and adherence expectations.
- Acted as customer service ambassador during tours for potential and existing clients.
- SIX SIGMA specialist (Green Belt) involved in local and national projects, responsible for ensuring maximization of productivity levels.
- Assisted in achieving Call Center goals of 85% TSF, 30 second ASA, and an Abandonment Rate of less than 3%.
- Partnered with training department to create training documents, workshops, and client specific training initiatives.

MEDCO, Columbus, OH

05.2000 – 10.2000

Resolution Specialist

- Facilitated weekly team meeting for Resolution Expert team.
- Assisted with the training and development of new-hire staff associates.
- Answered letters of complaint and questions.
- Handled informational & escalated issues.
- Worked on special projects as assigned by Customer Service management.

MEDCO, Columbus, OH

04.1998 – 05.2000

Customer Service Representative

- Provide prescription plan benefits to participating members.
- Request refills and supplies requests from members.
- Engage representatives in role-playing situations for quality.

EDUCATION:

Ohio State University
Bachelor of Science, 1999
Food Science & Nutrition

Capital University, Columbus, OH
Masters of Business Administration, 2004
Focus: General Business

Capella University
Candidate, PhD in Organizational Management
Focus: Leadership

REFERENCES:

Tom Goss
660 Woodward Ave Detroit, MI
313.475.7408

Boniface Tubie
20755 Greenfield Rd, Southfield, MI 48075
248.914.0121

Ellen Anderson
3968 Mt Elliot Drive, Detroit, MI 48207
313.770.8561

JoAnn W. Russell
419 Biddle
Wyandotte, MI 48192
734-301-0953

**SKILLS
SUMMARY**

Experience in Customer Service, A/P, A/R, G/L, Account Reconciliations, Wire Transfers and interpreting legal contracts for billing purposes. Excellent people skills and efficient in accounting procedures and software programs.

EXPERIENCE

ScriptGuideRX – Prescription Benefit Management 2014-*Present*
Financial Analyst

Grosse Pointe Park, Michigan

- Account for member changes and additions for over 1,500 member premium payments to insurance companies on behalf of 3 ADAP programs
- Prepare all spreadsheets for payments to be made by Accounts Payable for the ADAP premiums, medical claims, and direct member reimbursements
- Balance the above monthly/annually to the general ledger reserve accounts
- Maintain member eligibility in the Pro Health Software system
- Post insurance payments to patients' accounts
- Run monthly reports in Crystal Reporting for all Clients used for billing and reporting

Allen Park Family Physicians-Henry Ford Healthcare System 2010-2014
Medical Billing Specialist

Allen Park, Michigan

- Implemented EPIC Software in the billing office and successfully completed training classes requires by the HFHS
- Checked daily encounter forms against the doctor's billing in EPIC for diagnostic and procedure codes to insure all services rendered were noted for accurate billing
- Verify patients' insurance coverage using multiple websites and contacts
- Posted and balanced charges to patients' accounts daily
- Submit electronic claims to insurance companies for payment
- Post insurance payments to patients' accounts
- Troubleshoot and rectify claim rejections
- Explain patients' balance and insurance inquiries

Town Clerk/Treasurer/Office Manager
Town of Eutawville

2003-2009

Eutanville, South Carolina

- Represent the Town by answering all incoming calls and assist walk-ins in a professional and caring manner.
- Invoice, collect and balance all payments for the town's water accounts.
- Solely responsible for all receivables, payables and salaries.
- Maintain, balance, analyze and reconcile five checking accounts and prepare Financial Statements based on this analysis.
- Reconcile and remit monthly, quarterly, and yearly forms and payments for Withholding Taxes and Employee Retirement.

Accounting Technician II - International
Wilbur Smith Associates, Inc.

2001-2003

Columbia, South Carolina

- Corresponded with international customers and engineers concerning project targets and deadlines for invoicing purposes.
- Invoicing based on analysis of expense.
- Convert invoicing to appropriate international currency.
- Record incoming wire transfers converting to US currency.
- Interpretation of international contracts.
- Organization and maintenance of assigned project files.
- Analysis of accrual, advance and international bank accounts.

Senior Accountant/Sponsors Desk
Central Piedmont Community College

1993-2000

Charlotte, North Carolina

- Assisted all sponsored students and their counselors to ensure proper class scheduling and billing.
- Coordinated in-house software development for sponsored and scholarship student certifications and billing.
- Developed & maintained procedures for billing & account reconciliations for all sponsored students.

EDUCATION

CBCS, Certified Billing Coding Specialist
CMAA, Certified Medical Administrative Assistant
Dale Carnegie Course for Effective Speaking & Human Relations
Central Piedmont Community College, Charlotte, NC
Wayne County Community College, Detroit, MI
High School Diploma, Southgate High School, Southgate, MI

REFERENCES

- Dr. Ronald G. & Alana Baker
17440 Midway Ave.
Allen Park, MI 48101
(313) 655-6321
- Ms. Margaret Salyers
56 Endicott
Howell, MI 48101
(734) 308-6373
- Mrs. Jeannine Harris
15735 Angelique
Allen Park, MI 48101
(313) 515-5298

Latecia M. Jones

810.938.2868

LMDuckettJones@gmail.com

Business Development/ Managed Market Access

Strategic sales leader with a foundation in specialty pharmacy managed market access, experience in pharmaceutical sales, and knowledge in managed care reimbursement rules and regulations. Career includes a record of success in executing market strategies and partnering with payers, physicians, key influencers and sales teams to deliver sales growth and increase market-share. Skilled at building strategic relationships and collaborating across disciplines to increase revenue and maximize bottom line results.

Highlights & Qualifications

- Payer Policy Knowledge: PMB, Commercial, Medicare & Medicaid
- Managed Market Access Expertise
- Payer & Physician Education & Training
- Key Account Management
- Contracting & Program Management
- Strategic Sales Planning
- Analytic & Metrics Data Interpretation
- Product Launches /Product Introductions

Experience

ScriptGuideRx

November 2019 to Present

- Manage and grow ADAP clients.
- Create new business opportunities in the PBM space through extensive prospecting, diverse industry expertise and providing innovative client solutions.
- Create and lead new sales channel strategies.
- Implement new customers using extensive project management skills, teamwork across all levels of the organization, detailed planning and constant internal and external communication.

Grainger

March 2019 to November 2019

Account Manager, Commercial

- Manages \$2.5 Million book of business
- Deliver profitable sales volume and drive strategic objectives with targeted commercial accounts.
- Leverage business partner resources and key suppliers to develop solution based programs and strategies to solve complex customer issues.

Xcenda (Amerisource Bergen)

May 2018 to March 2019

Field Reimbursement Manager (Contract)

- Advise and consult large-hospital systems and community oncologist practices for payer reimbursement throughout 6 States within the Southeast United States.
- Address health policy barriers and educate Providers and field sales force on payer landscape.
- Trouble-shoot patient access challenges and claim issues regarding coverage, coding, and payment for Medicare, Medicaid and commercial payers.
- Facilitate and assist with benefits investigations, billing & coding, payer denials, appeals, prior authorizations and patient assistance programs
- Educate and train health care professionals: financial navigators, billers, clinic administrators, social workers, nurse case managers, pharmacists, and pharmacy technicians on updated program and payer (Private, Medicare and Medicaid's local and national coverage determination) requirements
- Assist to ensure patient affordability through alternative funding and patient assistance programs

Diplomat Specialty Pharmacy

October 2013 to May 2018

Strategic Account Manager, Managed Markets.

- Developed and implemented strategies for each assigned National Managed Care Accounts, including PBMs, Health Plans, State Medicaid, Medicare and Employer Groups.
- Managed \$80 Million book of business
- Specialty Disease Knowledge: Infusion, Rheumatology, Immunology, Neurology, Oncology, Hepatitis C, Orphan, and Rare Disease

Latecia M. Jones

810.938.2868

LMDuckettJones@gmail.com

Experience

Publicis Touchpoint Solutions

January 2012 to October 2012

Professional Pharmaceutical Sales Representative

- Contract Pharmaceutical Sales position with AstraZeneca Pharmaceuticals.
- Promoted Crestor to Cardiologist, Internal Medicine, and Family Practice Physicians for a fixed duration of 10 months in Central Northeast Michigan

May 2007 – November 2010

Pfizer Inc.

Professional Pharmaceutical Health Care Representative

- Achieved \$2.3 million in sales in Ann Arbor/ Detroit territories
- Responsible for selling to Primary Care, Internal Medicine, and Long Term Care Physicians; Cardiologist; Urologist; Rheumatologists, Orthopedic Surgeons, Podiatrists, and Psychiatrists.
- Products promoted included Celebrex, Lyrica, Aricept and Geodon, Viagra, Lipitor, Caduet, Chantix, Toviaz and Premarin.

Health Solutions Inc.

2006 –2007

Health Promotion Program Manager

- Managed worksite wellness programs for over 14 sites in the state of Michigan for Health Solutions account with the Delphi Corporation

Faith Access to Community Economic Development

2002 –2005

Oncology Program Manager

- Facilitated the design, implementation, and evaluation of a statewide community based health initiative to reduce the cancer health disparities for African Americans in Michigan in collaboration with the Michigan Department of Community Health

American Cancer Society

2000 –2002

Community Health Outreach Specialist

- Coordinated a citywide peer education program to increase awareness of cancer in the African American community, Neighbors for Life funded by the Community Foundation of Greater Flint.

Education

University of Michigan-Flint

Bachelor of Science in Health Care: Health Education and Human Behavior

Major GPA: 3.75

Community Engagement

Alpha Kappa Alphas Sorority Inc.

2018 - Present

Youth Leadership Institute, (Chair, Board of Directors)

2016 – Present

Black Young Professionals Metro Detroit (Vice President, Board of Directors)

2015 – Present

Toast Masters International

2015 – Present

Genesee County Young Professionals

2014 – Present

Gen Forward Philanthropist, Community Foundation of Greater Flint

2014 – Present

References

Sonya Smith McNeal

Director Pharma Account Management

251 Eagle Lake Drive

Maple Grove MN 55369

612-636-6001

John Wright

Regional Manager

5567 Hampshire Dr

West Bloomfield, 48322 Michigan

248-756-6320

Maryum Rasool

Executive Director

4119 Saginaw St

Flint, MI 48505

810-210-2869

EDUCATION

- Washington State University, Pullman WA**
Foundation of Managed Care Pharmacy 2002
Completed "Format for Formulary Submission" course designed to facilitate the incorporation of clinical and pharmacoeconomic outcomes information in the review of medication dossiers for formulary consideration.
- Pharmacy Partners in Diabetes Care** 1999
Completed an intensive course to implement and enhance diabetes-care skills such as medical nutrition therapy, exercise strategies, treatment assessment, blood glucose monitoring, and third party billing.
- Ferris State University College of Pharmacy, Big Rapids MI** 1996
Attended courses designed to promote excellence in geriatric and long term care pharmacy practice.
- Wayne State University, Detroit MI** 1991 to 1994
College of Pharmacy and Allied Health
Graduated with Bachelor of Science Degree in Pharmacy.
- University of Windsor, Windsor ON** 1988 to 1991
Completed pre-pharmacy requirements with a major in biology.
-

PROFESSIONAL EXPERIENCE

- Vice President of Clinical Services and Sales, ScriptGuideRx, Grosse Pointe Park MI** 2.2010-present
- Responsible for all strategic and operational facets of Clinical Departments including Clinical Operations, Clinical Services, Clinical Programs and Formulary
 - Chair of Pharmacy and Therapeutics Committee. Ensure that guiding principles of Clinical Efficacy, Safety and Client Value are upheld during decision making process
 - Ensure that all Client clinical needs are supported appropriately
 - Support sales process by providing Clinical Opportunity Analyses
 - Oversee Pharmaceutical Manufacturer contracting and relationships
 - Facilitate operational efficiencies via in-sourcing of claims processing
- Director of Clinical Account Management, RxAmerica / CVS Caremark, Detroit MI** 12.2005-2.2010
- Directed the creation of new Clinical Programs (Retrospective Drug Utilization Review Catalogue, Pipeline Reports, Disease Management Processes, Web-based pharmacist Prior Authorization program, Journal Club, Generic Sampling Program) and improvement of existing Clinical Programs (Step Therapies, Prior Authorizations, Risk Share Modeling) based on customer needs. Customer focused approach resulted in reduced administrative burden and increased customer satisfaction.

- P&L responsibility for Clinical Programs and Behavioral Health Programs
- Lead ten direct reports in the delivery of Clinical Account offerings to current and prospective customers
- Facilitated a creative learning atmosphere where all levels of staff were encouraged to contribute to development of innovative programs. Developed an information sharing environment, leading to reduced re-work and increased efficiency.
- Streamlined existing processes resulting in empowerment of customers to make more educated, proactive formulary decisions based on market trends.
- In collaboration with Business Leadership Team partners, reorganized all interdepartmental functions. By engaging staff level employees, created a more energized workforce that was directly involved creating and documenting more efficient processes.
- Oversaw the establishment and execution of financial plans (and associated Clinical Initiatives) for risk based customers
- Established standardized and customizable Clinical Tool Inventory easily accessible to Marketing and Sales, improving consistency and efficiency

Clinical Account Manager, RxAmerica, Detroit MI

4.2004-12.2005

- Negotiated contracts with new customers
- Facilitated the implementation of new customers
- Designed formulary benefits based on clinical and economic analyses
- Identified and facilitated new programs and services to meet specific customer needs
- Developed National Committee for Quality Assurance (NCQA) customer support program
- Implemented on-line Prior Authorization program for Michigan customers.

Director of Pharmacy, Great Lakes Health Services, Southfield MI

4.2003-4.2004

- As member of the Executive Committee, aligned departmental goals with organizational strategy
- Executed the data requirements of the department via the Pharmacy Benefit Manager, Michigan Department of Community Health and it's Pharmacy Benefit Manager
- Directed the goals and objectives for Pharmacy Programs including strategies for achievement
- Directed professional and technical pharmacy staff in the Clinical and Administrative Prior Authorization Review process
- Developed and implemented a plan for pharmaceutical cost and utilization control.
- Directed all procurement of pharmaceuticals, processing of Pharmacy claims by the PBM and auditing of network pharmacies.
- Directed a PBM Request For Proposal, conversion and successful implementation
- Directed development and implementation of pharmacy related disease management initiatives within the organization.
- Served as the Chairperson of the Pharmacy and Therapeutics Committee.
- Integrated pharmacoeconomic analyses into Pharmacy and Therapeutics reviews

Clinical Pharmacist, Great Lakes Health Services, Southfield MI

10.2000 to 4.2003

- Supported JCAHO and NCQA efforts
- Implemented Prior Authorization, Stepped Care Therapy and Managed Drug criteria for medications on the Drug Formulary
- Assured departmental compliance with Governmental, Legislative and Accrediting Bodies
- Facilitated CME programs for physicians based on disease management initiatives

- Developed pharmacy driven disease management programs, including medication dosing guides, treatment algorithms, and formulary management initiatives.
- As a member of the Pharmacy and Therapeutics Committee, performed Drug Utilization Reviews, clinical reviews and formulary cost containment plans.

Pharmacist/Diabetes Educator, Rite Aid Pharmacy, Warren MI 3.1996 to 10.2000

- Responsible for the procurement, filling and dispensing of medications
- Interacted with local physicians, dietitians, and pharmaceutical vendors to optimize patient wellness.
- Conducted individual patient appointments and group classes designed to teach and assess patient self-care for patients with Diabetes
- Established annual inventory budget and controlled adherence through weekly auditing.
- Trained newly hired pharmacists and precepted third, fourth and fifth year interns.
- Documented clinical interventions for third party payers.

Clinical Staff Pharmacist, Hutzel Hospital, Detroit MI 11.1995 to 3.1996

- Performed pharmacokinetic consultations including antimicrobial selection and drug serum monitoring.
- Consulted with physicians, nurses and other health care practitioners in order to optimize drug therapy.
- Supervised and executed the making and safe handling of chemotherapeutic agents.
- Solved drug information inquiries for health care professionals.

Pharmacist, Arbor Drugs, St. Clair Shores MI 7.1994 to 11.1995

- Responsible for dispensing, compounding and inventory control
- Conducted patient counseling
- Precepted third year interns and trained newly hired pharmacists
- Involved in scheduling and oversight of pharmacy technicians

MEMBERSHIPS

Academy of Managed Care Pharmacy
Member since 2000

Michigan Pharmacist's Association
Member since 2001

Wayne State University Department of Pharmacy Practice
Member of volunteer faculty. Licensed as a preceptor since 1995.

References

Mark Singleton, COO Veridicus Health 801-719-8951

**Jennifer Hammond, VP Marketing CVS Caremark
801-680-6475**

**Dr. Gregory Berger, Chief Medical Officer, Reliance ACO
313-282-3705**

BAFO Cost Proposal

RFP 6396 Z1

Pharmacy Benefits Manager for the Ryan White Program

BIDDER NAME: ScriptGuideRX (SGRX)

Bidder must provide all-inclusive pricing based off the estimated per member per month usage. Bidder must provide pricing for each year of the initial term and each renewal option.

Estimated Quantity	PER MEMBER PER MONTH						
	Initial Year One	Initial Year Two	Initial Year Three	Initial Year Four	Initial Year Five	Optional Renewal Year One	Optional Renewal Year Two
800	\$10.50	\$10.25	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00

REVISED BAFO Cost Proposal

RFP 6396 Z1

Pharmacy Benefits Manager for the Ryan White Program

BIDDER NAME: ScriptGuideRX

Bidder must provide all-inclusive pricing based off the estimated per member per month usage. Bidder must provide pricing for each year of the initial term and each renewal option.

The pricing submitted by the Bidder shall include all costs associated with the services defined in this RFP. This includes, but is not limited to, incorporating any rebate administration fees in the per member per month rate.

The State will only pay the monthly per member per month rate, and **reimburse** for insurance premiums as identified in Section V.3.a.

Estimated Quantity	PER MEMBER PER MONTH						
	Initial Year One	Initial Year Two	Initial Year Three	Initial Year Four	Initial Year Five	Optional Renewal Year One	Optional Renewal Year Two
800	\$14.50	\$14.50	\$14.50	\$14.25	\$14.25	\$14.00	\$14.00

Bidder shall confirm compliance by selecting either yes or no below, with Sections V.C.1. and V.D.3.a.ii and iii. of the RFP.

Yes	X
No	