**GENERAL OVERVIEW:**

Villa Feliciana Medical Complex (VFMC) is engaged in the operation of a State of Louisiana owned facility for which it requires pharmacy services in accordance with applicable Local, State and Federal laws and regulations. VFMC requires the successful vendor of pharmacy services to provide all approved drugs, intravenous solutions, biologicals, enteral feedings, pharmaceutical supplies, and over-the-counter medications and supplies are required by the individuals residing at the VFMC main campus.

The pharmacy services vendor agrees that all drugs, intravenous solutions, biologicals, enteral feedings, pharmaceutical supplies, and over-the-counter medications and supplies that are Medicaid and/or Medicare/Insurance eligible Items, shall be directly billed to Medicaid and/or Medicare/Insurance, as applicable, utilizing the appropriate billing Information as it relates to the Individuals supported by VFMC. All non-eligible Medicaid and/or Medicare/Insurance items shall be billed directly to VFMC by numbered invoice as outlined in Section 5. - PHARMACY VENDOR INVOICING section of these specifications.

No provision of the contract shall limit, in any manner, any Medicaid and/or Medicare recipient's right to choose a qualified provider of prescription drugs as set forth in 42 USCA 1396a(23), the US Code State Plans for Medical Assistance.

It is preferred that the pharmacy services vendor have at least one year of service performance and delivery experience in providing pharmacy services to hospitals, long term care facilities and nursing homes. The pharmacy services vendor should provide evidence and references of said service, as well as, documentation of its quality assurance program with the bid. If not submitted with the bid the documentation must be submitted within five business days of written request. Failure to comply with this request may eliminate your bid from consideration.

The pharmacy services vendor understands and agrees to adhere to the HIPAA Business Associate Addendum, Addendum D, to Purchase Contracts and/or Purchase Orders resulting from this solicitation. The pharmacy services vendor must sign the HIPAA Business Associate Addendum to Purchasing Contracts and/or Purchase Orders and submit with the bid response.

The pharmacy services vendor should note that VFMC supports approximately 190 individuals on the main campus.

The pharmacy services vendor’s place of business shall allow a one to three hour maximum response time to the VFMC main campus located at 5002 Highway 10, Jackson, LA, to ensure the requirements of on-site delivery of medications as identified in Section I: Medications Ordering, Re-ordering, Packaging, and Delivery.

The pharmacy services vendor shall contact Administration at (225) 634-4036 to schedule a MANDATORY JOB SITE VISIT. The Mandatory Job Site Verification form included with this solicitation is to be signed at the conclusion of the site visit by both the pharmacy services vendor's representative and the VFMC representative AND is to accompany the pharmacy services vendor’s bid that is submitted to the Office of State Procurement. If the vendor has

visited the site within the last 120 days, a mandatory site visit is not required. Failure to provide a copy of the agreed upon Physician Order form and Mandatory Administration Record (MAR) with the bid or within five business days of request to the Office of State Procurement, may eliminate your bid from consideration.

**SPECIFIC REQUIREMENTS OF VILLA FELICIANA MEDICAL COMPLEX:**

1. **MEDICATIONS ORDERING, REORDERING, PACKAGING AND DELIVERY**

Prescriptive and over-the-counter (OTC) medications and/or supplies prescribed by VFMC physician(s) shall be individually labeled and/or packaged appropriately with the resident's name and administration order on each label including expiration date.

Over-the-counter (OTC) medications as prescribed by Standing Physician(s) Orders or those that are prescribed on an as-needed basis may be supplied as stock medications at VFMC. A list of most frequently used Over-the-Counter Medications per Physician(s) Orders is to be provided at the scheduled site visit.

NOTE: OTC medications and/or other supplies will be purchased via State Contract award; it is not the intent of the Purchasing Contract and/or Purchase Order to replace existing state contracts for these items.

The pharmacy services vendor shall provide a 30 day supply of prescriptive and OTC medications when initially dispensed unless otherwise specified by the Physician(s) or Facility.

The pharmacy vendor shall provide a reordering system for the routinely ordered prescriptive medications that will ensure VFMC residents will not run out of the prescribed medications/ supplies. The reordering system should not require any VFMC staff member to write out each item to be re-ordered; one acceptable method is a Peel-off pharmacy label system. Routinely prescribed medications shall be reviewed and signed off by the prescribing Physician(s) at least every six months.

Narcotics shall be dispensed in nine inch tall 28, 29, 30 or 31 day blister cards that will reflect the day and month, using the concept of either sectional pass or timed pass as agreed upon between the pharmacy services vendor and VFMC. The pharmacy services vendor shall supply divider cards with each resident’s name on a 3" plastic clip to use on each home to label the location for each resident’s stock of blister cards in bins and/or medication carts. In addition, all new residents shall have a divider card and name tag with the resident's name attached with the new orders.

Routinely ordered prescriptive or OTC medications, other than liquid or injection, shall be dispensed using individualized perforated dosage pouches on weekly dispensing rolls which include on the package- designated time of administration and name of medication in package with color of pill.

Routinely ordered prescriptive or OTC liquid or injection solutions shall be filled, labeled and packaged in accordance with pharmacy board regulations, exclusive of boxed medications which will have one label on the box and one label on the container. Any deviation from the



blister card packaging will be under the discretion and approval from the facility. If alternate packaging is agreed upon by the facility, the pharmacy service vendor will provide medication carts designed to accommodate the alternative packaging.

The pharmacy services vendor shall provide routine non-emergency delivery service of all prescribed medications/supplies at least once daily including weekends as needed. For all holidays (state, federal or religious) and other non-operational days, the pharmacy services vendor shall provide an on-call pharmacist for the dispensing of prescriptive medications and/or supplies and provide for the delivery of the items on the same day.

The pharmacy vendor shall provide an on-call pharmacist available for consultation

24 hours per day for immediate response to new medication orders, changes in existing medication orders or changes to existing delivery schedules. Delivery of those new medications is expected within a one to three hour maximum time frame unless otherwise agreed upon with VFMC staff.

All deliveries shall be sorted by the buildings and wards and delivered in accordance with the instructions provided by VFMC.

In the rare or unusual event the pharmacy services vendor cannot furnish an ordered medication on a prompt and timely basis, the pharmacy services vendor shall make arrangements with another pharmacy supplier in the community local to VFMC to provide such service. The pharmacy services vendor shall enter any new medications into the patient profiles and check all interactions and any formulary restrictions/protocols prior to the delivery of medications. Such described rare or unusual events shall not be used on a routine basis and the pharmacy services vendor agrees to notify VFMC of each occurrence.

The pharmacy services vendor shall demonstrate an effective and foolproof procedure for ensuring uninterrupted pharmacy services to residents and staff of VFMC before, during, and after natural disasters, acts of terrorism, chemical spills or any other emergency that might require evacuation of patients and staff. Additionally, the pharmacy services vendor must back up all pharmacy data each day at the close of business and store that CD, DVD, external hard drive, or USB flash drive containing the VFMC residents' data in a secure location at a different address than that of the pharmacy so that the data is easily retrievable even if the pharmacy is destroyed.

# MEDICATION ADMINISTRATION RECORDS AND REPORTS

After Physician(s) Orders have been reviewed by VFMC's nursing staff, then reviewed, and signed by the prescribing physician, the orders will be forwarded to the pharmacy services vendor so that the orders can be filled.

Physician(s) Orders shall include all medications, routine or PRN, all treatments, diet, lab work, etc., as they currently exist at the time of production.

The pharmacy services vendor shall produce, maintain and/or update each resident's Medication Administration Record (MAR) on a monthly basis. The MAR shall have all routinely ordered medications separated from the as needed (PRN) medications. The pharmacy services vendor

shall include on the MAR the diagnosis, if provided by the Physician(s), associated with each medication the resident receives. Vendor is to provide MARs on a monthly basis if requested by the facility.

MARs should be received by the VFMC nursing staff or designated staff seven to ten calendar days prior to the start of the next MARs cycle. Any corrections/changes needed on the MARs will be reported to the pharmacy services vendor who will address, correct and send to VFMC prior to the start of the next cycle.

The pharmacy services vendor shall maintain a current drug profile on every VFMC resident. Printouts of drug usage reports shall be required. The pharmacy services vendor shall provide VFMC and the resident’s prescribing physician(s) with a potential severe drug interaction at the time an order is received.

All reports and forms shall contain current resident information.

The pharmacy services vendor shall provide a list of long-term care plans and formularies of Medicare Part “D" Plan Options.

# PHARMACY SERVICES

The pharmacy services vendor shall provide a, Non-site pharmacist at VFMC not to exceed

20 hours per month. The pharmacist shall provide general supervision of VFMC's procedures for the control and accountability of all drugs, Intravenous solutions, enteral feedings, biologicals and supplies throughout the facility. The pharmacy services shall ensure that policies and

procedures comply with applicable Council Standards, Center for Medicaid and Medicare Services (CMS) standards, local , state, and federal laws/regulations and report variances to VFMC and required entitles.

The on-site pharmacist’s responsibilities include but are not limited to:

* + Review the records for receipt and disposition of controlled drugs and the maintenance of such records in sufficient detail to allow for an accurate reconciliation monthly.
	+ Dispose of discontinued and/or expired medications/supplies.
	+ Review the current drug profile/regimen of each VFMC resident and report in writing any irregularity to the VFMC’s nursing or designated staff(s) and the resident’s Interdisciplinary Team at least quarterly or more frequently as agreed upon with VFMC.
	+ Review and/or update the Physician(s) Orders as noted by Physician change at least quarterly or more frequently as needed.
	+ Review and/or update MARs, medication interactions and other appropriate clinical reviews monthly.
	+ Conduct inspections in each resident’s home, its related drug storage area and emergency drug kits monthly.
	+ Meet with attending Physician(s) and/or nurses to educate and report non-compliance with policies and guidelines, include assisting with the development of policies and procedures for routine and emergency/disaster drug control at least annually.
	+ Participate in meetings of Interdisciplinary Teams, Quality Assurance Committee, Infection

Control Committee and/or other committees, with reasonable prior notice and during regularly scheduled visitors as agreed upon with VFMC.

* + - Perform all other responsibilities required of a pharmacy service as set forth by applicable local, State and Federal laws and regulations.
		- Conduct, when requested by VFMC, programs for in service education for subjects related to the pharmaceutical services rendered; said service to be conducted by the pharmacist or other pharmacy services vendor designee.
		- Provide a written monthly report to VFMC’s nursing or designated staff for all on-site activities. All reports of any on-site activity or review shall be submitted within five working days from the day of the review.

# EQUIPMENT

The pharmacy services vendor shall supply and maintain at least one emergency drug kit per patient care building operated by the VFMC. Medications maintained in the kits shall be determined through coordination with the VFMC's physician(s) and/or nursing staff. The pharmacy services vendor shall ensure that each emergency kit contains items that are not expired, and each item used must be replenished within 24 hours of removal or within the delivery time identified in Section I: Medication Ordering, Reordering, Packaging and Delivery. The VFMC nursing staff will notify the pharmacy services vendor when a drug or supply item has been removed from the emergency kit.

The pharmacy services vendor shall be able to accept daily orders using fax machines supplied by the pharmacy services vendor, if one is not already available.

The pharmacy services vendor shall provide a sufficient amount of medication carts (at least one

 per unit when requested. These carts must be furniture-like in appearance to maintain a home-like environment. They shall provide a sufficient amount of wound care carts (at least one

 per building) that match with the medication carts and are capable of storing wound care supplies and biologicals, and someone capable of maintaining the medication cart(s) whether provided by the pharmacy services vendor or VFMC. This includes the ability to order parts such as tops, drawers, trashcans, wheels, etc. This service should extend beyond the normal operating hours of the pharmacy services vendor.

The Pharmacy services vendor shall supply all needed Infusion pumps and fluids as needed and shall provide servicing of these pumps to ensure proper working order.

The pharmacy service shall provide, as needed, all pumps, poles, machines, etc. necessary to induce or dispense medications or feedings as stipulated by VFMC.

# PHARMACY VENDOR INVOICING

Upon delivery of each day's medications, the pharmacy services vendor's driver shall have one

of VFMC's nursing staff sign a drug manifest verifying the receipt of the medications/supplies. The manifest shall include the medication and quantity being delivered, the name of the resident for whom the medication is prescribed and the cost. The signed manifest shall be forwarded to the VFMC’s Accounting Office at least monthly or as agreed upon with the VFMC so that it can be compared to the pharmacy services vendor’s invoice when received.

The pharmacy services vendor shall bill all third party payers including Medicaid and Medicare for all insurance eligible items in an accurate and timely manner. The pharmacy services vendor shall also be responsible for the accurate billing to VFMC for all non-covered Medicaid, Medicare or third party insurer medications/supplies ordered by VFMC physician(s). The pharmacy services vendor shall secure coverage when any non-covered non-formulary medication is ordered for a resident.

The pharmacy services vendor agrees to provide VFMC with a monthly invoice itemized by building/ward, date of prescriptive or OTC medication, the Average Wholesale Price (AWP) for each item applicable and amount of discount applied. The invoices will also include name of prescriptive or OTC Medication not covered by Medicaid, Medicare or third party insurer and the amount of the non-covered prescriptive or OTC medication plus the amount of the discount applied. Invoices from the vendor are to include proof of denial and reason for denial.

The vendor shall bill VFMC for all dispensed and packaged prescriptive medications that was denied by Medicaid, Medicare, or third party at the Average Wholesale Price plus a percentage discount, which will apply on all items.

The vendor shall invoice prescriptions for non-formulary, all prescriptions for Medicare part A, all prescriptions for any temporary and ELMHS patient transfers into VFMC, and all prescriptions for VFMC whether covered by Medicare, Medicaid or third party insurance at the AWP plus discount applied.

The vendor shall invoice all equipment and supplies necessary to induce or dispense prescriptive medications, enteral, biological, intravenous solutions, and OTC medications at the Average Wholesale Price plus a percentage discount or stipulate free of charge.

Vendor's discount percentage off Average Wholesale Price shall not exceed 100%.

# Method of Award:

Award to be made to the vendor with the greatest discount off the Average Wholesale Price

(AWP)