



FLORIDA VIRTUAL  
SCHOOL

# NOTICE

## ADDENDUM 1

FLORIDA VIRTUAL SCHOOL

December 11, 2020

**Karen Stolarenko, Senior Specialist, Solicitations**  
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Responses to be received, 2:00 PM EST, January 5, 2021 to Florida Virtual School Procurement Services Department, via Demandstar.com.

RFP01-2102618B01-MAJMED-XXXXXX for Administrative Services Only (ASO) Medical and Pharmacy Provider is hereby amended by the following change(s):

Refer to page 9, Section 2.4, Which reads as follows:

Criteria No.	Step 1: Main Criteria Description	Weight
1.	Approach to Work (See Excel Questionnaire)	25%
2.	Wellness Support	20%
3.	Public Sector References	5%
4.	Member Provider Disruption	15%
5.	Price Proposal	35%
	<b>TOTAL</b>	<b>100%</b>

Change to read as follows:

Criteria No.	Step 1: Main Criteria Description	Weight
1.	Approach to Work Approach to Work including: Questionnaire, Implementation Plan, Policy Terms and Conditions and Performance Guarantees	25%
2.	Wellness Support	20%
3.	Public Sector References	5%
4.	Member Provider Disruption	15%
5.	Price Proposal	35%
	<b>TOTAL</b>	<b>100%</b>

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1.

Q	Provide the current specific rates/admin fees (+ what services are included)
A	<b>See attached ASO agreement and addendums. The current rates are \$52.25 PEPM</b>

2.

Q	Provide the Employer contribution toward employee and dependent coverage.
A	<b>This question is not applicable to the bid. As FLVS is ASO and not going to bid for stop loss the employer/employee contributions are not relevant.</b>

3.

Q	Provide the Carrier large claimant report with diagnosis (preferably broken out for 2 years and matching monthly claims experience period)
A	<b>N/A FLVS is not going to bid for stop loss.</b>

4.

Q	Provide the monthly claims experience on carrier paper (preferably broken out for 2 years)
A	<b>See attached for the last 12 months. Two years is not relevant as we are not bidding stop loss.</b>

5.

Q	Provide the Aggregate Premium Rates, Aggregate Attachment Point & Aggregate Corrido
A	<b>N/A FLVS is not going out to bid for stop loss</b>

6.

Q	Provide the Current pharmacy rebate option (if not available, include comments in Inform)
A	<b>See attached RX pricing.</b>

7.

Q	Provide the Pharmacy utilization file (we need at a bare minimum): <ul style="list-style-type: none"><li>○ Quantity</li><li>○ Days' Supply</li><li>○ Date of Service</li><li>○ Pharmacy NABP/NCPDP/NPI</li></ul>
A	<b>We are providing the utilization report via PDF and excel along with the current Rx pricing. The utilization report should provide the needed information for underwriting to provide a Rx proposal</b>

8.

Q	Provide the Specific Premium Rates, Specific Deductible and commission level
A	<b>N/A FLVS is not going out to bid for stop loss</b>

9.

Q	Provide the Aggregate and Specific contract type – (i.e.: 15/12, 12/12, 12/15
A	<b>N/A FLVS is not going out to bid for stop loss</b>

10.

Q	Provide the carrier large claimant report with claims within 6 months of the effective
A	<b>N/A FLVS is not going out to bid for stop loss</b>

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11.

Q	Provide the claims experience to coincide with the large claims reporting dates.
A	<b>N/A FLVS is not going out to bid for stop loss</b>

12.

Q	Provide the current Rx benefits for all inforce plans
A	<b>Rx Benefits attached.</b>

13.

Q	Provide the current rates / fees. Admin Fee - What services are included? If available, please provide the current ASO agreement.
A	<b>ASO Agreement and amendments attached.</b>

14.

Q	Provide the census naming convention. Please confirm which plan aligns with the Blue Options Plan 03766 and Blue Choice Plan 0317 plan summaries.
A	<b>Blue Options 0376 is simply the :Blue Options plan on the census. This plan has the highest enrollment. The second highest enrollment is the HRA plan. Blue Choice0317 is listed on the census as Blue Choice.</b>

15.

Q	Please confirm if you are also requesting a Stoploss quote as well. The reason I ask is because in the Questionnaire, Administration-Self-funded section it indicates the following (see below). If so, please provide the current Stoploss contract. <b>Administration – Self funded -</b> Describe any requirements, reports, contracts, etc. to coordinate with a 3rd party stop loss carrier. <b>If your firm is also selected as the stop loss carrier</b> , will you agree to provide advanced funding for any approved claims at the specific and or aggregate levels?
A	<b>Respondents shall ignore this statement. FLVS is not going out to bid for stop loss.</b>

16.

Q	Whether companies from Outside USA can apply for this? (such as India or Canada)
A	<b>No.</b>

17.

Q	Whether we need to come over there for meetings?
A	<b>FLVS may periodically request onsite meetings. You should assume quarterly onsite meetings.</b>

18.

Q	Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)
A	<b>No, all services should be performed by US based employees.</b>

19.

Q	Can we submit the proposals via email?
A	<b>No, all responses MUST be uploaded to <a href="http://www.demandstar.com">www.demandstar.com</a> as described within the Request for Proposal document. No exceptions can be made.</b>

20.

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Q	For the Repricing, there were no member zip codes provided. Can they be provided?
A	<b>No. We will be completing the reprice on a line by line basis. See next question.</b>

21.

Q	On the repricing format, should respondents provide line by line or aggregate pricing? Can an amendment provide the 3 digit zip code?
A	<b>Yes, the reprice should be on a line by line basis. The line by line response shall be sent to Joshua Rubich with the following link <a href="https://ajg.sharefile.com/r-ra819034dd83d4799b3c787a294f3bd57">https://ajg.sharefile.com/r-ra819034dd83d4799b3c787a294f3bd57</a> . Gallagher will then take the line by line repricing and present to FLVS in aggregate. Our methodology will be to compare only those providers in which all carriers provided data on.</b>

22.

Q	Please confirm FLVS ERISA or Non-ERISA?
A	<b>FLVS is Non-ERISA. As a school we are a public entity.</b>

23.

Q	Can e-signatures be used on the required submission documents?
A	<b>Yes, e-signatures such as those produce by Adobe are acceptable on submitted documents.</b>

24.

Q	What should we do if we are unable to obtain a notary signature on required forms due to CoVid?
A	<b>The Notary stamps/signatures are required. However, if you are unable to access a notary in time to submit your proposal be sure to reference this information in the exceptions and alternatives to the RFP in Section 8. In the event that FLVS moves forward with an Intent to Award, the notary stamps shall be required prior to contract execution.</b>

25.

Q	In Section 3.4, tab 4 we are being asked to provide a list of all clients. Does FLVS really want every company?
A	<b>Respondents should provide a list of the most relevant clients that are similar in size and scope with FLVS over the past three years demonstrating their ability to support our needs through proven experience.</b>

26.

Q	Can you clarify pricing for carve out pharmacy?
A	<b>You are to provide an ASO fee assuming your firm will provide Rx benefits AND if you firm DOES NOT provide Rx benefits, i.e. Rx is carved out.</b>

27.

Q	Are we able to provide our admin and include "shared savings" for out of network claims?
A	<b>We are requesting that out of network claims have NO shared savings applied to them. In the event your firm is not contractually able to comply with this request you may provide a proposal with your fee including shared savings. You must include your book of business fees that you OR your outsourced networks, i.e. multi-plan, etc. would retain on a PEPM basis.</b>

28.

Q	Can you share more information on Pharmacy benefits? What benefits are offered? Existing rebate guarantees? Copay structure?
A	<b>FLVS has a copay structure (no deductible or coinsurance) .The Rx benefits are attached along with the</b>

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	<b>rebate structure as of 7/1/2020</b>
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29.

<b>Q</b>	Can you provide pricing rebate, percentages, quantities, etc?
<b>A</b>	<b>Yes, it is attached.</b>

30.

<b>Q</b>	<p>Please provide claims files that include the following information:</p> <p>For the requested data set, please list the following information:</p> <ul style="list-style-type: none"><li>• We <u>must</u> have the following fields:<ul style="list-style-type: none"><li>○ NDC_ID (11 digit)</li><li>○ Pharmacy NPI or NABP</li><li>○ Service Date</li><li>○ Day Supply</li><li>○ Payable Metric Quantity</li></ul></li><li>• It is helpful to have the following fields:<ul style="list-style-type: none"><li>○ 340B indicator</li><li>○ Compound indicator</li><li>○ U&amp;C price</li><li>○ Member identifier</li><li>○ Mail indicator</li></ul></li></ul>
<b>A</b>	<b>See question 7</b>

31.

<b>Q</b>	Please confirm if this is ERISA or non-ERISA plan.
<b>A</b>	<b>Non ERISA</b>

32.

<b>Q</b>	Please confirm that the proposal should be net of commissions. If commissions are included, please confirm the percentage or dollar amount.
<b>A</b>	<b>Confirmed. Net of commissions.</b>

33.

<b>Q</b>	Please provide the current medical fees.
<b>A</b>	<b>ASO agreement attached</b>

34.

<b>Q</b>	Please provide dispensing fees and rebates numbers.
<b>A</b>	<b>Attached.</b>

35.

<b>Q</b>	Please provide a copy of the employer/employee contribution structure.
<b>A</b>	<b>Not applicable.</b>

36.

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Q	How is the HRA administered? What is the amount of the HRA?
A	<b>HRA is administered by Discovery Benefits. This service is not part of this RFP.</b>

37.

Q	Please provide a copy of the claims experience including Rx and Medical Utilization report-
A	<b>See attached for the most recent 12 months.</b>

38.

Q	Can you confirm the breakdown of the default out of network fee schedule you are requesting of 140%? Physician _____% Facility _____% Combined ____140%
A	<b>The out of network methodology is a combination of U&amp;C and Medicare. Please confirm your flexibility to provide out of network reimbursement methodology at the request of FLVS.</b>

39.

Q	Please provide a place of service indicator in the re-pricing file so we can determine if a claim was IP, OP or Professional.
A	<b>This is listed in column "AB" of the file.</b>

40.

Q	Please provide the eligible charges before discount (ECBD) in the re-pricing file.
A	<b>The repricing should be done on the billed charges.</b>

41.

Q	Why is this group currently out to bid?
A	<b>As a public entity, FLVS places requirements out for bid in accordance with Florida Statutes.</b>

42.

Q	Are there any particular concerns or areas you'd like to see improvement with the current vendor?
A	<b>Please see requirements as defined within the RFP and its attachments. Responses shall address as specified.</b>

43.

Q	Please provide the current rates/fees and renewal rates/fees for all products requested.
A	<b>Rates are included in the ASO amendment</b>

44.

Q	Are there areas where BCBS is doing a particularly good job supporting FVS?
A	<b>This question has no relevance to the RFP.</b>

45.

Q	Please confirm how long FVS has been with BCBS?
A	<b>This question has no relevance to the RFP.</b>

46.

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Q	Please confirm any plan changes in the past two years?
A	<b>There have been no changes in the last two years.</b>

47.

Q	Please provide the existing performance guarantees in place with BCBS. Has BCBS paid out on any of the PGs?
A	<b>Incumbent performance has no relevance to this RFP.</b>

48.

Q	Please provide a plan Summary of Benefits or Certificate of Coverage.
A	<b>Benefits summaries have already been provided.</b>

49.

Q	Please provide a copy of the current BCBS ASO agreement.
A	<b>Attached.</b>

50.

Q	Please provide the current ASO fees with BCBS detailing the current Disease Management and/or Clinical Programs on a PEPM basis.
A	<b>Attached. DM and Clinical is included in the ASO fee.</b>

51.

Q	Please confirm that the requested RFP plan designs are to match the current plan designs. If not, what provisions are changing?
A	<b>Confirmed</b>

52.

Q	Please provide at least 24, and ideally 36 months of monthly claims experience and enrollment. (in Excel).
A	<b>Prior 12 months of monthly claims are attached.</b>

53.

Q	Please provide a large claims report from BCBS for the last 24 months.
A	<b>N/A FLVS is not going out to bid for stop loss.</b>

54.

Q	Please confirm the employer contributions. Have these contributions changed in the past 24 months?
A	<b>N/A</b>

55.

Q	Please provide a census file to include date of birth, gender, zip code, and enrollment by tier/plan (in Excel).
A	<b>Census file was already attached. Refer to appendix p.</b>

56.

Q	Please confirm proposals should be net of any commissions?
A	<b>Confirmed.</b>

57.

Q	Is BCBS providing an annual Wellness Budget?
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A	Yes, an annual wellness budget of \$25,000 is provided.
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58.

Q	Please confirm the current number of Retirees? (Census indicates only 10)
A	<b>Confirmed.</b>

59.

Q	Would FVS be interested in a separate Retiree Plan option proposal?
A	<b>No.</b>

60.

Q	Is BCBS providing any Onsite Staff for FVS?
A	<b>No.</b>

61.

Q	Is BCBS providing any dedicated Staff for FVS? If yes, please indicate the types of roles/positions
A	<b>BCBS provides a dedicate Account Executive, Account Manager, and Wellness Coordinator. These are direct contacts FLVS has with BCBS but to be clear these BCBS employees work on other accounts besides FLVS.</b>

62.

Q	Are there any current data feeds being received or provided to other vendors?
A	<b>There are bulk fees arrangements for Gallagher's data warehouse. In addition, Workday sends a feed to BCBS.</b>

63.

Q	Please provide a copy of the current BCBS Discount Guarantee.
A	<b>The BCBS discount guarantee is not applicable for your response.</b>

64.

Q	On the Medical Admin Fee Schedule (Tab 8) there is a reference to Radiology, would you please clarify if there is a current program with BCBS or what you are looking for here?
A	<b>No there is not an additional charge for this. If this is included simply mark "included."</b>

65.

Q	On the Medical Admin Fee Schedule (Tab 8) there is a reference to Outside Vendor Eligibility, would you please clarify is you are using and outside vendor for eligibility management and the costs?
A	<b>Workday</b>

66.

Q	Please provide a copy of the most recent BCBS Health Plan Summary Report. (Sometimes called the "Dashboard" showing engagement and population health measures.)
A	<b>We are providing a key indicator report in lieu of the Health Plan Summary Report.</b>

67.

Q	Would you clarify and provide more details on Section 6.23.1? (Payment of fees and claims in arrears)
A	<b>FLVS pays medical and Rx claims on a monthly basis after the claims have been paid by Florida Blue.</b>

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68.

Q	Please confirm and identify if any non-claim costs or capitations are being run through claim wire?
A	<b>Capitation costs are inclusive of the following:</b>  <ul style="list-style-type: none"><li>1. Labs</li><li>2. Chiropractic through ASH</li><li>3. Mental Health</li></ul> <b>Please be advised that effective 1/1/2021 BCBSFL is moving to fee for service for mental health</b>

69.

Q	Please describe in greater detail what wellness programs are in place today
A	<b>Attached you will find a one page on the current wellness program.</b>

70.

Q	Please describe what you vision is for future wellness program modifications/designs
A	<b>This would be determined with the ASO vendor going forward.</b>

71.

Q	Please describe what you current wellness incentive program includes/pays/rewards and what if any changes are you anticipating
A	<b>Attached you will find a one page on the current wellness program.</b>

72.

Q	Please send us a link to you current wellness programs so we can review
A	<b>Attached you will find a one page on the current wellness program.</b>

73.

Q	Please help us understand what is working well in the wellness area, what you would like to see improved and any results you may be achieving
A	<b>This is not relevant to this RFP.</b>

74.

Q	Do you have on site wellness ambassadors that the current wellness interfaces with , if please indicate how many are in place, where they are located and what functions do they perform
A	<b>No, as a virtual employer, we have no onsite wellness ambassadors.</b>

75.

Q	Are you interested in an EAP quote as well
A	<b>No.</b>

76.

Q	As discussed on the pre-submittal conference call, please provide the Rx Benefits, claims experience and repricing
A	<b>We are providing with attachments.</b>

77.

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<b>Q</b>	Award Notification Date – in review of the RFP, there is reference to several award notification dates. Can you advise which is correct? Timeline on page 9 shows 1/29 for notice of intent and Feb. 24 as award date 2.3.4.g notates as intent to award to be released approximately 2 weeks from the finalist selection. 3.2.2. gives reference to the award date of March 2021 as does 8.2.
<b>A</b>	<b>The schedule in the RFP is tentative. Approximate dates are provided as a timeline but some dates are subject to change. While we do not anticipate a change in schedule or a delay we are currently planning as follows:</b>  <b>Approximately 48 hours following respondent interviews FLVS will post its Notice of Intent. In some cases there may be as long as two weeks before notices are posted if circumstances require additional lead time. Once notice is posted there is a 72 hour waiting period. Following that, the top ranked firm will be contacted and the negotiation process will begin. The award date is approximate and will depend upon the FLVS Board schedule.</b>

78.

<b>Q</b>	Please advise the School's ERISA or Non-ERISA status.
<b>A</b>	<b>As a public entity FLVS is ERISA.</b>

79.

<b>Q</b>	Please advise whether the consecutive numbering requested is to be by section (tab) or start to finish of the proposal response. Page 10 B. Table of Contents: Clearly outline and identify the material and responses by tab and page number. Outline in sequential order the major areas of the response, including enclosures. Tabs should be used to separate each tabbed section. All pages must be consecutively numbered and correspond to the table of contents.
<b>A</b>	<b>All pages should be consecutively numbers for identification regardless of tab they fall under.</b>

80.

<b>Q</b>	Signature documents – since there will be no physical hardcopy items prepared for this submission, will an electronic signature by the officer be accepted or do these need to be original?
<b>A</b>	<b>Digital signatures are acceptable provided that are digital stamps such as adobe e-sign. Typing a name is not a digital signature.</b>

81.

<b>Q</b>	Notary – due to the current COVID situation and limited onsite staff at most businesses, many are waiving the notary requirement until a later date in the RFP evaluation process. Will this RFP require notary at time of submission?
<b>A</b>	<b>In response to Covid FLVS will accept the two forms without the notary stamp if the proposer cannot access a notary in time for the submission due date. However, the omission must be listed in the exceptions and alternatives area and the respondent must acknowledge that the stamped documents will be provided if they are ranked to be the awarded service provider.</b>

82.

<b>Q</b>	What is the expected date for the Answers to submitted questions to be released?
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A	We anticipate posting this addendum by 12/11/2020.
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83.

Q	Please provide clarification to the second part of 3.4 Tab 4 which is requesting summary information for all contracts of similar size and scope performed by the Proposer, or team, within the past five (5) years.” Is the intent of this solely for informational purposes to see other clients serviced by the bidding carrier or with the intent to make outreach to these as references? Some content request is considered proprietary. Is this part of the response subject to the reference scoring?
A	<b>FLVS requires your response to include adequate information that demonstrates your experience of similar size and scope. The experience should be relevant (public entity preferably schools), and recent (preferably within the last three years but no longer than five years). You do not need to include EVERY contract but rather provide enough to demonstrate your abilities, experience and fit with the specified requirements.</b>

84.

Q	Section 10 – References – please provide us a copy of the online web questionnaire that will be shared with the references provided to complete.
A	<b>FLVS is seeking letters of reference as part of your response. These letters will be used as full scoring criteria. The forms in section 10 provide us with the authorization to contact your references should we choose to verify the information. A questionnaire would be developed specific to this RFP should the committee require additional information.</b>

85.

Q	Please explain in detail your request in 3.6.1 around Shared Savings. i. Administrative Fee Pricing – FLVS is requesting inclusion of administrative fees without shared savings for out of network claims (Appendix M – Tab8)
A	<b>We are requesting that out of network claims have NO shared savings applied to them. In the event your firm is not contractually able to comply with this request you may provide a proposal with your fee including shared savings. You must include your book of business fees that you OR your outsourced networks, i.e. multi-plan, etc. would retain on a PEPM basis. In addition, the shared savings concept also applies to hospital bill audits, etc.</b>

86.

Q	What is the current Wellness Fund today?
A	<b>Current fund is \$25,000.</b>

87.

Q	Please provide the pharmacy benefit plan document.
A	<b>Rx benefit documents are attached.</b>

88.

Q	Claims Data Questions: Medical data with subscriber and members counts by month for at least the most recent 12 months inclusive of the corresponding high claimant information Could we get a pharmacy claims data to allow us to run a formulary and/or network disruption to evaluate current utilization? If so, we would need the data file to include the following key elements:
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	<ul style="list-style-type: none"><li>• Line-by-Line claim Information by Drug dispensed for a 12 month period (i.e. Calendar Year or Rolling 12)</li><li>• Date of Service/Drug Fill Date</li><li>• National Drug Code (NDC) = 11-digit number</li><li>• Pharmacy Number: NABP, NCPDP = 7-digit number or NPI = 10-digit number</li><li>• Quantity Dispensed (Total Unit Dosage in Metric Units)</li><li>• Days' Supply</li><li>• Metric Quantity (Number of metric units of medication dispensed)</li><li>• Retail/Mail Indicator</li><li>• Brand/Generic Indicator</li></ul>
<b>A</b>	<b>See question #7.</b>

89.

<b>Q</b>	Repricing: The file provided does not contain the Member Zip Code. Is it possible to get an updated file with this information?
<b>A</b>	<b>No, we are doing line by line pricing. See question #21</b>

90.

<b>Q</b>	Repricing: Summary repricing results are standardly the format released. Please advise if summary format is acceptable or if the intent by the School is to receive line-by-line repricing results? If line-by-line is desired, we will need to have an NDA (non-disclosure agreement) signed and returned. Would this be possible and if so, to whom should the document be forwarded to for completion?
<b>A</b>	<b>No, we are doing line by line pricing. See question #21. The NDA will be signed by Gallagher with aggregate results being reviewed by FLVS.</b>

Note: The following attachments uploaded to [www.flvs.net](http://www.flvs.net) and [www.demandstar.com](http://www.demandstar.com) are part of this Q&A Addendum.

Supporting documents referenced as QNA Attachments 1 through 8 include the following content:

1. ASO agreement and subsequent amendments
2. Rx pricing sheet
3. Rx plan summaries
4. Medical Claims
5. Pharmacy claims
6. Wellness Overview

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