## Pharmaceutical Services – Western Maryland Hospital Center (WMHC) DHMH/OPASS 15-13448 eMM Bid # MDM0031014201

## Questions Received During Pre-Bid Conference Meeting (4/23/14)

1. **Question**: Are there five (5) different locations for the Pyxis machines? **Answer**: Yes, there will be five (5) locations. The smaller units will have a small one.

2. **Question**: Is there a space limitation or anything?

**Answer**: Ms. Galloway is not aware of any.

**Additional Answer**: When the facility put in comparable to these different pyxis or pyxis-like units, the nursing staff and clinical staff went over the pyxis size requirements. The machines will fit in the places reserved for its locations.

3. **Question**: Will there be internet access for those machines?

Answer: Yes.

4. **Question**: Is the contents of those machines that remain the pharmacies, we are not to bill WMHC for those contents?

**Answer**: That is correct. Those remain the responsibility of the pharmacy.

5. **Vendor Statement**: Page 23, Item h – Medicare is like Med A and doesn't bill to the facility.

**Response**: Item h will remain as written.

6. **Question**: For hospital patients are they billed to Medicare A?

**Answer**: Bill as in Item h above.

7. **Vendor Statement/Question**: Page 23, Item p – Inspections are completed monthly. Can the expiration be within one month of inspection?

**Answer**: Yes. *Refer to Addendum #1*.

8. **Vendor Statement**: Page 24, 3.2.5 Delivery of Medication, Item b. Cassette exchange of 8 to 14 days, right now WMHC has a twice a week exchange. With the turnover in the hospital, WMHC might want to consider that. Right now, WMHC has two deliveries a day. Should be clarified in IFB.

**Response**: Yes, delivery is Monday – Friday twice a day; Saturday and Sunday is one delivery. *Refer to Addendum #1* for complete revision.

9. **Vendor Statement**: Page 27, Item d – Assigned pharmacist or pharmacist designee shall attend and participate in all WMHC's Pharmacy and Therapeutics Committee meetings. Need to be changed from quarterly to monthly.

**Response**: Agreed. *Refer to Addendum #1*.

10. **Vendor Statement**: Need to change *quarterly* on page 27, item f "to review each client's meds *monthly*" and "will provide on the *monthly* med review form".

**Response**: Will update. Refer to Addendum #1.

11. **Vendor Statement**: Page 35, 3.6.4 Reimbursement – the sentence "In the instances where there is no insurance, the Contractor is to bill, and accept…" was under the old contract.

**Response**: Will be revised to read – In the instance where there is no insurance, the contractor is to bill WMHC (including any applicable co-pay). *Refer to Addendum #1*.

12. **Question**: Any increase in the amount of IVs and TPNs?

Answer: Depends on types of patients we get. WMHC does not expect any changes.

13. **Vendor Statement**: Currently WMHC receives IVs and TPNs daily so that needs changed in 3.2.4, item u.

**Response**: "Daily" will be added to 3.2.4, item u. *Refer to Addendum #1*.

14. **Question**: Are controlled substances in your unit dose or separate?

**Answer**: These will be in the pyxis-like system so WMHC will have better control of who is dispensing and for whom and our counts will be correct.

15. **Vendor Statement**: Dispensing controlled substances from pyxis will be a legal issue. Most centers use pyxis for a start dose. Controlled substance dispensed from pyxis will need to have a physician order for each dose taken.

**Response**: WMHC will use Pyxis/or a like system for all controlled drugs in the hospital and for first dose in the nursing home.

- 16. **Question**: Clarifying the hospital bill, how does that billing suppose to occur? **Answer**: Bill to the center monthly.
- 17. **Question**: Page 26, 3.2.6 C Medical Examination of Employees. Is this just employees coming into WMHC?

**Answer**: No, all employees coming in contact with the medications. Contractor can make a general statement that <u>all</u> employees (including off-site employees) meet the applicable health requirement. <u>Refer to Addendum #1</u>.

18. **Question**: Do I have to supply for all 150 employees?

**Answer**: Send a general statement that <u>all</u> employees coming into contact with the medications/supplies meet all applicable health requirements.

19. **Question**: Do you want the pharmacy to replenish those supplies? You don't want the nurses to do this?

**Answer**: The pharmacy should replenish. Nurses should not.

20. Question: Regarding Optimus as EHR. Do you have interface?

**Answer**: Yes, we have interface.

21. **Question**: Do you need pre-printed EMAR forms? **Answer**: No.