

RESPONDENT-INTERVENOR'S NOTICE OF FILING – No. 20

Cigna Healthcare's Minimum Requirement
Questions SHP 0009425–27
(“Cigna Min. Reqs. Questions”)

Message

From: Vetter, Debby F GA3 [DEBBY.VETTER@Cigna.com]
Sent: 9/12/2022 3:17:52 PM
To: Vanessa Davison [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fb4c66a181084e49a440a3ad292444a5-Vanessa Dav]; SHP Contracting [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=233ec588edd74105b9bc4ce49947b65e-SHP Contracting]
CC: Roberts, Maureen B 620 [Maureen.Roberts@Cigna.com]; Day, James P 620 [James.Day@Cigna.com]
Subject: RFP # 270-20220830TPAS: Minimum Requirements Questions
Attachments: Mandatory Requirements Questions - Cigna FINAL.DOCX

As per the above reference RFP instructions, attached are the questions we have at this time for the Mandatory Requirements. Should you have any questions or need clarification, please let us know. Also if possible, please confirm receipt and that no additional parties need to receive our list of questions. If so, please advise and feel free to forward a copy or provide the recipient names so we may do so. Thank you.

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QUESTIONS FOR SUBMISSION

2.5 PROPOSAL QUESTIONS

Upon review of the RFP documents, Vendors may have questions to clarify or interpret the RFP in order to submit the best proposals possible. To accommodate the Proposal Questions process, Vendors shall submit any such questions by the above due dates. Questions received after these dates will not receive a response.

Written questions shall be emailed to Vanessa.Davison@nctreasurer.com with a copy to SHPContracting@nctreasurer.com by the date and time specified above.

When submitting Minimum Requirements questions, Vendors should enter "RFP # 270-20220830TPAS: Minimum Requirements Questions" as the subject for the email.

When submitting all other questions, Vendors should enter "RFP # 270-20220830TPAS Questions." Question submittals should include a reference to the applicable RFP section and be submitted in the format shown below in sequential order:

Question #	Reference	Vendor Question
1.	RFP # 270-20220830TPAS Questions - Attachment K, Page 5	Please clarify if the Plan is looking to carve out specialty pharmacy.
2.	RFP # 270-20220830TPAS Questions - Core RFP, Page 38	With regards to 5.1.3.j., how is the NC State Health Plan looking for carrier partners to work with Optum Insight? What data elements are needed to be provided between the two parties? What is the frequency of data to be transferred?
3.	RFP # 270-20220830TPAS Questions - Attachment C, Page 96	#28. Performance Bond – please confirm if a bond will be required for this bid and if so, will it be required at the proposal submission or upon award notification.
4.	RFP # 270-20220830TPAS Questions - 5.2.5.2 Services	xi. Vendor will transition specific specialty pharmacy medication coverage to the Plan's PBM, if requested by the plan.
5.	RFP # 270-20220830TPAS Questions - 5.2.5.2 Services	xii. Vendor will provide claims and analytical data to support the transition of specific specialty medications to the Plan's PBM.
6.	RFP # 270-20220830TPAS Questions - Attachment D	Does the vendor currently have any work done outside the United States (US)? If applicable, please provide details of the type of work outside the US.
7.	RFP # 270-20220830TPAS Questions - Attachment K	<ul style="list-style-type: none"> 5.1.2.d – What is the average weekly claims funding amount for 2022 that the Plan has approved? Are there any requirements on how long it takes for the Plan to approve the disbursements? 5.1.3.g – Does the Plan currently have Medicare-based reimbursement in place with their Vendor? If applicable, what services and providers are included? Does it apply to certain tiers and/or plans? 5.1.3.1 – Please describe the other possible reference-based pricing models the Vendor will need to consider? 5.1.5.a – Does the Plan currently received 100% of the medical specialty pharmacy rebates? 5.1.5.c – Does the Plan currently have a customized medical management program? If applicable, please describe in detail. 5.1.6 – Does the Plan or the Vendor currently cover the cost of the data feeds?
8.	RFP # 270-20220830TPAS Questions - Attachment L	<ul style="list-style-type: none"> 5.2.1.2.b – Does the Plan currently have dedicated resources from the Vendor? If applicable, please list their roles and responsibilities.
9.	RFP # 270-20220830TPAS Questions - Section 5.1.1 Medicare primary members	Are you also reviewing fully insured Medicare Advantage plans as a part of this RFP?
10.	RFP # 270-20220830TPAS Questions - Section 5.1.4.a Benefit Administration	Are there any other plan types that the vendor will administer? Eg. A fully insured Medicare Advantage plan?
11.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 4	Is the State willing to amend/negotiate this requirement?
12.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 5	Is the State willing to amend/negotiate this requirement?

Mandatory Requirement Questions for RFP # 270-20220830TPAS

13.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 6	Cigna agrees mutually acceptable terms and conditions to define the nature of the administrative services to be provided by Cigna is a necessity. Cigna has a standard Administrative Services Only (ASO) agreement which includes additional operational provisions that will need to be included in a contract with the State. Is the State agreeable to utilizing and/or incorporating the ASO agreement as part of the Contract between the State and Cigna?
14.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 8	Is the State willing to amend this requirement? Recognizing, in an industry where lawsuits are a commonplace, we are mostly involved in lawsuits arising in the course of ordinary business. Please refer to Form 10-K and Form 10-Q for an updated description of material legal proceedings. These documents are available online: https://www.cigna.com/about-us/investors/ .
15.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 9	Cigna includes a standard business associate agreement (BAA) part of our Administrative Services Organization (ASO) agreement. Is the State agreeable to utilizing our standard BAA?
16.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 10	Is the State willing to amend this requirement? Recognizing some of the questions would require the State sign an NDA and some of the requests are proprietary and confidential and cannot be distributed externally.
17.	RFP # 270-20220830TPAS Questions - Section 5.1, Question 11	Is the State willing to accept redlines to this document?
18.	RFP # 270-20220830TPAS Questions - 5.2.3.2. vii and viii	Will NC State Health plan be providing the contracts, rates, policies and procedures of their current Clear Pricing / Reference based pricing as a baseline for possible future arrangements with other carriers?
19.	RFP # 270-20220830TPAS Questions - 5.2.3.2 vii and viii	Will the NC State Health Plan provide a listing of the current providers in their network and the Clear Pricing contracts with the participating providers
20.	RFP # 270-20220830TPAS Questions - 5.2.3.2 vii and viii	<ul style="list-style-type: none"> Will the NC State Health Plan (NCSHP) provider contracts and rates transfer to Cigna for both designated Clear Pricing Project (CPP) and NCSHP? Can NCSHP provide Cigna a list of all CPP provider participants by service type (hospital, ancillary, physicians)? What percentage of the NCSHP network currently is designated as CPP? Is it NCSHP expectation that Cigna will negotiate direct NCSHP agreements and renewals on behalf of NCSHP? Is it assumed that all terms in CPP and NCSHP contracts, including policies, will also transfer? Will NCSHP provide Cigna all contract terms to review, including contract exceptions? If Cigna cannot administer and/or adjudicate specific terms in the contracts, will NCSHP agree to amend to allow Cigna policy and terms to be applied? Is it NCSHP expectation that Cigna will “customize” any policy, program, contract arrangement, etc. (e.g. value-based ACOs, earned incentive programs) upon request from NCSHP? What is NCSHP expectation if Cigna cannot administer the request? Are there any specific contract and network policies, provisions, network solutions, reimbursement terms, payment methodologies, etc. that are consider absolute to NCSHP without flexibility?

Questions received prior to the submission deadline dates in Section 2.4, the State's response, and any additional terms deemed necessary by the State will be posted in the form of an Addendum to this RFP on the Ariba landing page and can be accessed at the following link: <http://discovery.ariba.com/rfx/13956411>. No information, instruction, or advice provided orally or informally by any State personnel, whether made in response to a question or otherwise in connection with this RFP, shall be considered authoritative or binding. Vendors shall rely *only* on written material contained in an Addendum to this RFP