



MONTANA DEPARTMENT OF ADMINISTRATION

Director's Office

Greg Gianforte, Governor
Misty Ann Giles, Director

doa.mt.gov

406.444.2460

doadirector@mt.gov

NOTICE OF INTENT TO AWARD

Solicitation Title/Event Name:

Solicitation Number:

Solicitation Close Date:

Notice of Intent to Award Post Date:

Issuing Contracts Officer contact information:

The State intends to award a contract to the apparent successful offeror(s) of the above-mentioned solicitation. The Notice of Intent to Award shall not be considered a binding commitment by the state.

Under the Montana Procurement Act, the State has made the relevant scoring matrix/bid tab for the above-mentioned solicitation available for public inspection. Comments from the public regarding the proposed award must be submitted to the Contracts Officer listed above within this 7-day notice period.

Apparent Successful Offeror(s)

Unsuccessful Offeror(s)

RFP MSF 80 - Pharmacy Benefit Manager

SCORE SUMMARY WORKSHEET

Category	Section	Possible Points	CorVel	Health E Systems	KeyScripts	Matrix	Mitchell/Enlyte	PMSI/Optum
Step 1								
Mandatory Pass / Fail Business and Technical Requirements								
Business Requirements								
Years of Experience	1.1.1							
Minimum Prescriptions Processed	1.1.2							
Prescription Network	1.1.3							
Service Level Agreements	1.1.4							
Reference Checks – Current Clients	1.1.5							
Reference Checks – Former Clients	1.1.6							
Financial Stability	1.1.7	P/F	Pass	Pass	Pass	Pass	Pass	Pass
SOC 2 Type II Audit Report	1.1.8							
Technical Requirements								
Single Sign On	1.2.1							
Service Oriented Architecture	1.2.2							
Security Posture	1.2.3							
Transfer of PDF Documents	1.2.4							
FEDRAMP Certification	1.2.5							
Scored Functional Requirements								
Offeror Qualifications	2.1	100	90.0	95	85	95	85	90
Pharmacy Network & PBM Services	2.2	125	95.0	105	75	120	110	95
Pricing Structure	2.3	100	70.0	90	59	95	93	70
Billing	2.4	100	80.0	85	75	95	90	70
Drug Utilization Management	2.5	100	90.0	95	87	95	95	90
System Functionality & Support	2.6	50	45.0	47	40	47	40	45
Scored Technical Requirements								
Technical Requirements	2.7							
Change Management	2.7.1							
MSF Software Requirements	2.7.2	50	40.0	45	45	45	45	30
Disaster Recovery/System Security	2.7.3							
Integration and Bill Data Transmission	2.7.4							
Cost								
Lowest overall cost receives the maximum points available		525	423.9	484.63	439.19	525.00	446.10	489.98

RFP MSF 80 - Pharmacy Benefit Manager

SCORE SUMMARY WORKSHEET

Category	Section	Possible Points	CorVel	Health E Systems	KeyScripts	Matrix	Mitchell/Enlyte	PMSI/Optum
Equal Pay for Montana Women								
Bonus Points - 5% of Total Points		65	65.0	65	65	65	65	0
Signed Certification - Agreement to adhere to State Policy								
SUBTOTAL BEFORE INTERVIEW		1215.00	998.94	1111.63	970.19	1182.00	1069.10	979.98
Step 2								
Interview/Presentation - Health E Systems and Matrix were finalists								
Interview/Presentation		150		120		135		
TOTAL				1231.63		1317.00		

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - Corvel

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Step 1				
Mandatory Pass / Fail Business and Technical Requirements				
Business Requirements				Pass
Years of Experience	1.1.1	P/F	Pass	
Minimum Prescriptions Processed	1.1.2			
Prescription Network	1.1.3			
Service Level Agreements	1.1.4			
Reference Checks – Current Clients	1.1.5			
Reference Checks – Former Clients	1.1.6			
Financial Stability	1.1.7			
SOC 2 Type II Audit Report	1.1.8			
Technical Requirements				
Single Sign On	1.2.1			
Service Oriented Architecture	1.2.2			
Security Posture	1.2.3			
Transfer of PDF Documents	1.2.4			
FEDRAMP Certification	1.2.5			
Scored Functional Requirements				
Offeror Qualifications	2.1	100	90	Stable company have been around for 35 years, liked comments about healthcare being local, regional service model, very stable, decades of experience, 20 years doing pharmacy, help desk staff with certified pharmtechs, partnered with CVS care, only integrated management company that's publically traded, been around a long time, provide all the products within workers' compensatoin managed care, financial stability

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Pharmacy Network & PBM Services	2.2	125	95	Concerns are they didn't provide sample contract, didn't feel that in 2.2.4 they provided much detail as to the solution, their Lockhart process seemed manual for claims examiners, they would provide outreach to independent pharmacies, all major pharmacies in their network, coordinating legacy claims to set up mail order program, provided an appropriate network, overnight shipping was a perk, really liked that if they couldn't get something shipped they'd contact a local pharmacy to fill the gap, they lease the CVS Caremark network, have 263 pharmacies including some Indian Health Service ones, have a pharmacy locator, liked mail order, didn't like the Lockhart explanation, manual and reliant on claims examiners, should have been automated within the system
Pricing Structure	2.3	100	70	Agreed with all the requests, pretty standard, adequate answers, not a lot of acquisition costs plus 10% was an unfavorable deviation from what we asked, situation where you have a vendor leasing PBM network, acquisition costs can get expensive, have manufacturers, wholesalers and markup. Corvel adds another 10% - if this occurs it's unfavorable and could be expensive, question about in terms of industry standard is this standard? Is it favorable or unfavorable compared to rest of the industry? Unstandard language, in terms of dollar size and frequency of this issue coming up, probably less common, does think it's important on financial matters and if we don't see things we asked for that is significant.

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
	2.4	100	80	Focus more on safe and cost-effective medications rather than rebates, POS edits available, errors can be initiated by MSF, CorVel or pharmacy, provide semi-monthly electronic bills, can provide whatever data we need, not sure about claimant reimbursements, no parameters on that re: IE providing receipts, POS edit description was good, don't do rebates, just pass savings along, if injured employee had to pay out-of-pocket they would present the bill to pharmacy, also have to factor that in when we look at their pricing, since they are not providing rebates, financially better to have it baked in, as long as can be confirmed. Better to get rebates right away instead of waiting 6 months to get them. Rebates generally take 4-6 months for them to get from the distributor, if baked in, they're fronting the rebate, less accounting to do. It is MSF's preference as to what we like.
Drug Utilization Management	2.5	100	90	Liked POS edits, does not appear they have point of prescribing edits, appear to have a plan to deal with flagged claims, temporary cards for first fills, good summary of DUR factors, didn't find text messaging to be very customizable, call center sounded good, can text the pharmacy cards, they would absorb cost if provided first fill and claim was denied, like ability to text or email first fill program, flexibility, would be able to provide whatever reports we needed.

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - Health E Systems

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Step 1				
Mandatory Pass / Fail Business and Technical Requirements				
Business Requirements				
Years of Experience	1.1.1	P/F	Pass	
Minimum Prescriptions Processed	1.1.2			
Prescription Network	1.1.3			
Service Level Agreements	1.1.4			
Reference Checks – Current Clients	1.1.5			
Reference Checks – Former Clients	1.1.6			
Financial Stability	1.1.7			
SOC 2 Type II Audit Report	1.1.8			
Technical Requirements				
Single Sign On	1.2.1			
Service Oriented Architecture	1.2.2			
Security Posture	1.2.3			
Transfer of PDF Documents	1.2.4			
FEDRAMP Certification	1.2.5			
Scored Functional Requirements				
Offeror Qualifications	2.1	100	95	One of very few mid-market PBMs in the workers' compensation space, market is pretty bifurcated towards very large or very small, so they are unique, liked that they had a very thorough response to subcontractor including security aspect, have been doing PBM services for over 20 years and over 99% of business is workers' compensation related, agreed to all necessary requirements, extensive response to subcontractor question, and a sole owner.

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Pharmacy Network & PBM Services	2.2	125	105	Using Evernorth/MyMatrix in more rural areas, not a bad thing, good as far as coverage but can be unfavorable as far as discount, adds one additional intermediary to the network versus if the company owned its own network, volume comes into play here also, can be a limitation, having their own network when smaller can be a limitation, noted their previous success working with rural pharmacies, over 200 network pharmacies in MT, do have text notifications available, pharmacies handle reminders, 60% of process is through direct contracts with pharmacies, remainder with EverNorth, have 13 of the 14 tribal pharmacies already in network, 8 of 9 clinic pharmacies in network, use a hybrid network, liked comments about rural areas and work in Wyoming, response to Lockhart light on details
Pricing Structure	2.3	100	90	Conditional positive - their response on rebates, not much concrete significance other than clearly willing to work with us on rebates, encouraging as to the workability of the vendor when it comes to all financial terms, willing to apply AWP, use Medispan to address pricing for pharmacy transactions, standard responses although agreeable, not much detail, confirmed what we asked for.
Billing	2.4	100	85	Conditional positive - their response on rebates, not much concrete significance other than clearly willing to work with us on rebates, encouraging as to the workability of the vendor when it comes to all financial terms, appears rebates factored into AWP discount, will do performance guarantees, unclear how they do injured employee reimbursements, will credit us back overpayments, said their standard billing for clients is weekly, but we requested semi-monthly, rebates factored into pricing is good, allowing for credits addressing overpayments clearly, how will they reimburse injured workers if pharmacy won't reimburse directly if automatically paid?

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Drug Utilization Management	2.5	100	95	Like that they use the same formulary guidelines that the state uses, everything else is pretty standard, keep in mind DUR is limited to just the cost side of what they are receiving, won't be able to do a lot of the DUR to include drugs that may be used by the patient on non-workers' compensation, robust, pharmacists available 24/7, text communications were customizable, seems like a decent amount of customization available, analytic strategies to address fraud, waste and abuse, demonstrated they are available, will complete customized reports we need, and have first fill for initial 10 days, can customize based on our requirements, can send additional info via text - educational.

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - KeyScripts

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Step 1				
Mandatory Pass / Fail Business and Technical Requirements				
Business Requirements				
Years of Experience	1.1.1	P/F	Pass	
Minimum Prescriptions Processed	1.1.2			
Prescription Network	1.1.3			
Service Level Agreements	1.1.4			
Reference Checks – Current Clients	1.1.5			
Reference Checks – Former Clients	1.1.6			
Financial Stability	1.1.7			
SOC 2 Type II Audit Report	1.1.8			
Technical Requirements				
Single Sign On	1.2.1			
Service Oriented Architecture	1.2.2			
Security Posture	1.2.3			
Transfer of PDF Documents	1.2.4			
FEDRAMP Certification	1.2.5			
Scored Functional Requirements				
Offeror Qualifications	2.1	100	85	They seem solid, response seems good, really small organization, not sure of level of sophistication and ability to respond, offering 24/7 phone support and translation services, owner/founder is directly involved in daily operations, flexible and accountable, established in 2006, privately owned and managed

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Pharmacy Network & PBM Services	2.2	125	75	They are leasing/subcontracting their network, \$90 million/year in revenue, on the high end of boutique, can be an impediment to leveraging the best financial deal/most competitive offering, nearly 300 pharmacies in Montana, mail order pharmacy provides some of the industry's quickest turnaround time, didn't go into much detail about Lockhart, concerned about lack of info about Lockhart, sample network pharmacy agreement, it appears it wasn't a workers' compensation-specific agreement, 2.2.4 - didn't provide a good explanation, didn't appear to acknowledge that we would be held harmless, apparent lack of sophistication
Pricing Structure	2.3	100	59	2.3.2 - not sure about their agreement to use the definitions of brand and generic provided in the RFP, would require further clarification, it's vague and may show they don't understand the question which is a concern, basically answered the same question twice, definition issue
Billing	2.4	100	75	All rebates are incorporated into pricing, problematic because of its brevity and noncompliance, didn't really answer the question, just because baked into rates doesn't mean they are excused from transparency in the process, answer to 2.4.1 was very brief, can do claimant reimbursements, but vague, they said they could send us back payments made in error but confused about how they would do that, can bill at any desired interval
Drug Utilization Management	2.5	100	87	Monitor ODG, texting, 24-hour pharmacist availability, adjudication edits were positives, seems customizable, ability to text pharmacy cards, indicated they would follow-up when needed, liked that they would allow someone to fill if can't reach examiner, liked that they could email or text RX cards, first fill program pretty standard, generic efficacy rate is 98.08 which is not great.

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - Matrix Health

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Step 1				
Mandatory Pass / Fail Business and Technical Requirements				
Business Requirements				
Years of Experience	1.1.1	P/F	Pass	
Minimum Prescriptions Processed	1.1.2			
Prescription Network	1.1.3			
Service Level Agreements	1.1.4			
Reference Checks – Current Clients	1.1.5			
Reference Checks – Former Clients	1.1.6			
Financial Stability	1.1.7			
SOC 2 Type II Audit Report	1.1.8			
Technical Requirements				
Single Sign On	1.2.1			
Service Oriented Architecture	1.2.2			
Security Posture	1.2.3			
Transfer of PDF Documents	1.2.4			
FEDRAMP Certification	1.2.5			
Scored Functional Requirements				
Offeror Qualifications	2.1	100	95	Notable positives, have done a good job of benefitting from the size of their parent, but retaining high-touch, more boutique DNA, company profile is favorable and has managed to keep some of the strengths of both, not easy being a small company embedded in an enormous company, have been able to create their own footprint, also some noteworthy flexibility, 30+ years doing PBM, 98% of business in workers' compensation, 91% of individual pharmacies are in network, have a lot of clients, very strong company

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Pharmacy Network & PBM Services	2.2	125	120	They have their own network and a lot of experience in refining it over time, that is unique, owning their own network means there's no middle party, 63,000 pharmacies contracted with, have workers' compensation-specific contracts, they do a pretty high volume, able to provide reports we need, focus on rural services, added independent RX initiative, now work with 30 in Montana, 90% of all independents are in network, do process Lockhart liens and have ability to automate, like their refill reminder service, nearly perfect accuracy for mail order, Lockhart ready, free standard shipping, but do charge for overnight shipping.
Pricing Structure	2.3	100	95	Notable positive in terms of transparency that they are able to support both models of factoring rebates into or out of price, and to report on value of rebates, if baked into price they are fronting MSF money, laying that out, there is value in that, like that they have both options, include refunds with regular invoicing, said they directly reimburse injured employees, liked the options for the rebates and also the POS edits, allows medications pursuant to surgery without prior authorization, allows physicians to see if medications will not be covered without prior authorization, like transparency, they're willing to work any way MSF would like, introduced a surgery formulary, injured employee reimbursements are clunky but they are willing to look at ACH.
Billing	2.4	100	95	
Drug Utilization Management	2.5	100	95	Solid, sophisticated response, Good DUR summary, texting option is not too flexible, 24/7 call service, in compliance with Montana Department of Labor formulary, have different tools to identify claims that pose a higher risk for abuse, customizable first fill program, texting capability to get them their pharmacy card, good reporting, standard DUR, implemented ODR this year, customer service is in the US.

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - Mitchell - Enlyte

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded	
Step 1					
Mandatory Pass / Fail Business and Technical Requirements					
Business Requirements				Pass	
Years of Experience	1.1.1	P/F			
Minimum Prescriptions Processed	1.1.2				
Prescription Network	1.1.3				
Service Level Agreements	1.1.4				
Reference Checks – Current Clients	1.1.5				
Reference Checks – Former Clients	1.1.6				
Financial Stability	1.1.7				
SOC 2 Type II Audit Report	1.1.8				
Technical Requirements					
Single Sign On	1.2.1				
Service Oriented Architecture	1.2.2				
Security Posture	1.2.3				
Transfer of PDF Documents	1.2.4				
FEDRAMP Certification	1.2.5				
Scored Functional Requirements					

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Offeror Qualifications	2.1	100	85	Favorable company profile, big but not the biggest, good expertise in this space and a good product infrastructure, being stand-alone, not group-health affiliated can be good or bad, have the necessary size and leverage and can give customized product, big enough that leasing of network does not have to be an impediment, solid company, don't own their network, but one of Scriptnets largest network clients, ownership was hard to follow but appears owned by private equity firm and lease their network, standard answers, founded in 1946, largest PBM service in workers' compensation not owned by a very large group health insurance company, workers' compensation PBM for 25 years
Pharmacy Network & PBM Services	2.2	125	110	Don't own their network, but they are one of Scriptnets largest network clients, liked Lockhart process, reminder scheduling, network looks good, 250 contracted pharmacies in MT, offer capability to auto-adjudicate, if injured employee has to pay for anything out of pocket they will contact pharmacy for reimbursement, overnight shipping at a cost, liked their legislative session work, review publications regarding medications across the country, 250 pharmacies in network seemed light, pro-actively requesting feedback from customers with interviews and surveys.
Pricing Structure	2.3	100	93	Responsive answer to the question, shows they know what they're talking about, provide two different pricing options, AWP prices updated daily, transparent AWP model, cost-plus pass through model, believe in full cost transparency, like the different pricing options and agreed to use Medispan

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Billing	2.4	100	90	2.4.1 - talk about pricing incorporating rebates, but also looks like they give the option for rebates, with all SLAs, the ideal guarantee is that if they fall short of the goal they have to make MSF whole, do want to tie them into fees in some way so if there's failure it would come out of their pocket, offer performance guarantees, have ability for pharmacists to override some edits, while others require MSF staff, like their programs for DUR that are at POS, like that they are willing to do performance guarantees, re: ambiguity piece, between 2.3 and 2.4 it's clear they offer both options, confused by their refund and billing process but said it was customizable, a little confused by injured employee reimbursement process.
Drug Utilization Management	2.5	100	95	Solid DUR clinical team, liked the DURs they had in place, liked the emergency process in place where they will issue a 3-day supply, texting for first fill program, didn't see them addressing 24/7 pharmacist availability, seems customizable with DUR, 24/7 access to bilingual call center, full time multi-lingual support staff, first fill process looks good, can do reports we need, have all contact capabilities

RFP MSF 80 - Pharmacy Benefit Manager

Individual Scoring Matrix - PMSI Optum

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Step 1				
Mandatory Pass / Fail Business and Technical Requirements				
Business Requirements				
Years of Experience	1.1.1	P/F		
Minimum Prescriptions Processed	1.1.2			
Prescription Network	1.1.3			
Service Level Agreements	1.1.4			
Reference Checks – Current Clients	1.1.5			
Reference Checks – Former Clients	1.1.6			
Financial Stability	1.1.7			
SOC 2 Type II Audit Report	1.1.8			
Technical Requirements				
Single Sign On	1.2.1			
Service Oriented Architecture	1.2.2			
Security Posture	1.2.3			
Transfer of PDF Documents	1.2.4			
FEDRAMP Certification	1.2.5			
Scored Functional Requirements				
Offeror Qualifications	2.1	100	90	Combination of big and small, largest health system in the world, doesn't think they've retained the boutique components, not automatically a problem, but something to be cognizant of, all else equal, would be less desirable. Subcontractor relationship is not a big deal, it's an administrative function, provided the information, 48 years of PBM services, 901 employees, do contract for mail and pharmacy cards, lots of acquisitions

RFP MSF 81 - Pharmacy Benefit Manager

Consensus Scoring Matrix

Category	Section	Possible Points	Points Awarded	Mandatory Justification Comments for Points Awarded
Pharmacy Network & PBM Services	2.2	125	95	Note that they have 211 pharmacies in Montana, ok but not ideal, some pharmacies may be more relevant than others, depends on which pharmacies are in network, 89% of injured employees have access to pharmacies within 7 miles from home, will focus on tribal and rural locations, they will send injured employees a list of the top chains near them, 211 pharmacies, will try to get mail order to certain places, complies with hold harmless, but would need further details, had no real plan to attract other pharmacies, mail order percentage is 11-14%, Lockhart lien and hold harmless responses were vague, no good plan to address rural coverage,
Pricing Structure	2.3	100	70	2.3.2 seems unclear, they say they are going to use a different definition for brand and generic - requires clarification, confused by their answers, doesn't appear they agree and offer their own option which is confusing
Billing	2.4	100	70	Use a rebate aggregator to compile rebates, talk about rebates then recommend going deeper at generic penetration, no mechanism to reimburse injured employees, bi-monthly billing, not recommending a rebate model, overpayments would get sent back with the next bill, felt like rebate process was clunky, didn't understand it
Drug Utilization Management	2.5	100	90	Good that they're citing to ODG and they are familiar with it, pharmacist is not available 24/7, customizable edits, call center, customizable escalations and authorizations, working on texting, customizable reports on demand, up to 30 days supply for first fill, reporting is good, hard and soft blocks, dashboards are available, rolling out ability to customize text messages in 2025

**Pharmacy Benefit Manager RFP
Cost Worksheet**

Lowest overall cost receives the maximum allotted points. All other proposals receive a percentage of the points available based on their cost relationship to the lowest. Example: Total possible points for cost are 300. Offeror A's cost is \$20,000. Offeror B's cost is \$30,000. Offeror A would receive 300 points. Offeror B would receive 200 points (\$20,000/\$30,000) = 67% x 300 points = 200).

Points Available	525	Cost
Lowest Cost		
Vendor Name	Points Earned	
CorVel	423.9	
Health E Systems	484.6	
KeyScripts LLC	439.2	
Matrix	525.0	
Mitchell/Enlyte	446.1	
PMSI/Optum	490.0	

	CorVel			Health E Systems			KeyScripts			Matrix			Mitchell/Enlyte			PMSI/Optum			Total Adjusted	Available Points
	% Discount	Price	Points	% Discount	Price	Points	% Discount	Price	Points	% Discount	Price	Points	% Discount	Price	Points	% Discount	Price	Points		
Retail - Brand - % of AWP	16	84	205.00	16.5	83.5	206.23	15	85	202.59	18	82	210.00	15.5	84.5	203.79	16	84	205.00		210
Retail - Generic - % of AWP	55	45	175.33	66.25	33.75	233.78	60	40	197.25	70	30	263.00	60	40	197.25	67	33	239.09		263
Mail Order - Brand - % of AWP	22	78	26.00	18	82	24.73	15	85	23.86	20	80	25.35	17.5	82.5	24.58	20	80	25.35		26
Mail Order - Generic - % of AWP	65	35	17.09	69	31	19.29	60	40	14.95	71	23	26.00	70	30	19.93	70	30	19.93		26
Total			423.42			484.03			438.65			524.35			445.55			489.37		489.98

RFP MSF 80 - Pharmacy Benefit Manager

0

SCORING GUIDE

In awarding points to the evaluation criteria, the evaluator/evaluation committee will consider the following guidelines:

Superior Response (95-100%): A superior response is an exceptional reply that completely and comprehensively meets all of the requirements of the RFP. In addition, the response may cover areas not originally addressed within the RFP and/or include additional information and recommendations that would prove both valuable and beneficial to the agency.

Good Response (75-94%): A good response clearly meets all the requirements of the RFP and demonstrates in an unambiguous and concise manner a thorough knowledge and understanding of the project, with no deficiencies noted.

Fair Response (60-74%): A fair response minimally meets most requirements set forth in the RFP. The offeror demonstrates some ability to comply with guidelines and requirements of the project, but knowledge of the subject matter is limited.

Failed Response (59% or less): A failed response does not meet the requirements set forth in the RFP. The offeror has not demonstrated sufficient knowledge of the subject matter.

Total Points Available						
Score	50	65	100	125	150	525
Superior (95-100%)	47.5 - 50	61.8 - 65	95 - 100	118.8 - 125	142.5 - 150	498.8 - 525
Good (75-94%)	37.5 - 47	48.8 - 61.1	75 - 94	93.8 - 117.5	112.5 - 141	393.8 - 493.5
Fair (60-74%)	30 - 37	39 - 48.1	60 - 74	75 - 92.5	90 - 111	315 - 388.5
Failed (0-59%)	0 - 29.5	0 - 38.4	0 - 59	0 - 73.8	0 - 88.5	0 - 309.8

Scoring Calculator

SH	100%
SL	95%
GH	94%
GL	75%
FH	74%
FL	60%
FDH	59%
FDL	0%

Score	Total Points Available					Change this value
	50	65	100	125	150	525
Superior (95-100%)	47.5 - 50	61.8 - 65	95 - 100	118.8 - 125	142.5 - 150	498.8 - 525
Good (75-94%)	37.5 - 47	48.8 - 61.1	75 - 94	93.8 - 117.5	112.5 - 141	393.8 - 493.5
Fair (60-74%)	30 - 37	39 - 48.1	60 - 74	75 - 92.5	90 - 111	315 - 388.5
Failed (0-59%)	0 - 29.5	0 - 38.4	0 - 59	0 - 73.8	0 - 88.5	0 - 309.8