Texas Panhandle Centers
Behavioral & Developmental Health
901 Wallace BLVD.
Amarillo, TX 79106

Texas Panhandle CENTERS
Behavioral & Developmental Health
Making Lives Better

Request For Proposals, NO. 12082704

PROPOSAL INSTRUCTIONS

On-Site Pharmacy Management, Patient Assistance Program (PAP) Administration, and Lowest Available Cost Medication Access Services

Proposals due: December 8, 2026 @ 2:00 p.m.

REQUEST FOR PROPOSALS

On-Site Pharmacy Management, Patient Assistance Program (PAP) Administration, and Lowest Available Cost Medication Access Services

1. INTRODUCTION

Purpose of the RFP: Texas Panhandle Centers (TPC), the Local Mental Health Authority (LIDDA) serving the upper 21 counties of the Texas Panhandle, is soliciting proposals for an On-Site Pharmacy Management, Patient Assistance Program (PAP) Administration, and lowest available cost medication access services to be utilized by TPC's outpatient clinics both in Amarillo and at regional locations. It is anticipated that the pharmacy will be located at 6600 Killgore Drive, Amarillo, Texas 79106 and that regional clinics will be serviced by that pharmacy.

It is the intention of TPC to accept Proposals for the services listed above. Interested parties may contact Dan Thompson, BH/IDD Liaison to the Executive Director, at larry.thompson@txpan.org, concerning questions about the this RFP.

Proposals will be received until 2:00 p.m. on December 8, 2026 (the "deadline"), at the Administration Office located 901 Wallace BLVD. Amarillo, TX 79106 or email proposal in PDF format to larry.thompson@txpan.org. Proposals received after such time will not be opened or considered. Following the proposal deadline, TPC reserves the ability to seek clarifications and ask questions of respondents concerning their respective proposal. The proposals will be reviewed by TPC Administration and a recommendation presented to the Board of Trustees for review and possible approval at a Board meeting no later than 30 days following the Proposal deadline.

TPC reserves the right to reject any and all proposals at its discretion and to waive any irregularities. TPC shall accept the proposal(s) as the Board determines to be in TPC's best interest.

WAIVER OF CLAIMS: BY TENDERING A RESPONSE TO THIS INVITATION, THE PROPOSER ACKNOWLEDGES THAT IT HAS READ AND FULLY UNDERSTANDS THE REQUIREMENTS FOR SUBMITTING A PROPOSAL AND THE PROCESS USED BY TPC FOR SELECTING A BEST PROPOSAL. FURTHER, BY SUBMITTING A PROPOSAL, THE PROPOSER FULLY, VOLUNTARILY AND UNDERSTANDINGLY WAIVES AND RELEASES ALL CLAIMS AGAINST TPC AND ALL OF ITS TRUSTEES, OFFICERS, AGENTS AND/OR EMPLOYEES THAT COULD ARISE OUT OF THE ADMINISTRATION, EVALUATION, RECOMMENDATION OR SELECTION OF ANY PROPOSAL SUBMITTED IN RESPONSE TO THIS RFP.

2. Organization Profile & Operational Scope

Clinical Operations & Demographics

- **Entity Classification:** Local Mental Health Authority (LMHA) / Community Center under Texas Health and Safety Code Chapter 534.
- **Core Services:** Outpatient Psychiatry, Adult Behavioral Health, Child & Adolescent Services, Substance Use Disorder (SUD) / Medication-Assisted Treatment (MAT), Crisis Respite, Assertive Community Treatment (ACT), Jail Services, Project to Assist in Transition from Homelessness (PATH), Outpatient Biopsychosocial Interventions (OBI), and Comprehensive Case Management / Service Coordination.
- **Patient Volume:**
    - Active Unduplicated Individuals Served: Approximately 10,000
    - Total Annual Outpatient Clinical Encounters with a Prescriber: Approximately 16,000 – 18,000
- **Prescribing Staff:** 5 Psychiatrists (MD/DO) and 4 Psychiatric-Mental Health Nurse Practitioners.

Prescription & Payer Profile

- **Estimated Annual Prescription Volume:** 20,000 – 30,000 prescriptions (including refills) generated across the provider network.
- **Primary Medication Categories:** First and Second-generation antipsychotics (oral and LAI formulations), mood stabilizers, antidepressants, anxiolytics, ADHD regimens, SUD therapeutics (Buprenorphine/Naloxone, oral/injectable Naltrexone), and key co-occurring chronic disease therapies (metabolic, hypertension, diabetes).
- **Payer Distribution:**
    - Texas Medicaid (STAR, STAR+PLUS, STAR Health): 26%
    - Medicare / Dual Eligible: 4%
    - Commercial / Third-Party Insurance: 32%
    - Uninsured / Indigent / Texas Resilience and Recovery (TRR) State-Funded: 38%
- **Electronic Health Record (EHR):** Streamline SmartCare

3. Scope of Work & Vendor Requirements

A. Pharmacy Space Buildout, Licensing, & Security

1. **Turnkey Facility Development:** Finance, design, build out, and equip the designated pharmacy space (approx. 1,300 – 1,400 sq. ft.) within the facility.
2. **Licensure & Compliance:** Obtain and maintain all required Class A community pharmacy licenses from the Texas State Board of Pharmacy (TSBP), DEA registrations (Schedules II–V), and state/federal regulatory permits.
3. **Security & Fixtures:** Provide secure, TSBP-compliant storage, commercial-grade refrigeration for biologics/injectables, time-delay vaults/safes for controlled substances, security camera coverage, and a private, HIPAA-compliant patient consultation area.

B. Patient Assistance Program (PAP) Full-Service Management

The vendor will assume complete operational and administrative responsibility for all manufacturer Patient Assistance Programs, minimizing clinical staff involvement:

1. **Eligibility & Enrollment:** Screen uninsured and underinsured patients, match them against manufacturer criteria, collect income verification, and complete all PAP enrollment/re-enrollment documentation.
2. **Prescriber Coordination:** Route required clinical attestations and prescriber signature pages efficiently without disrupting clinical appointment flow.
3. **PAP Inventory & Dispensing:** Receive, catalog, track, and securely store manufacturer-donated bulk or patient-specific PAP inventory in compliance with TSBP and manufacturer rules. Dispense PAP medications to qualifying patients at $0 copay (or nominal approved LMHA administrative charge, if applicable).
4. **Therapy Bridge Management:** Establish a rapid "bridge supply" protocol utilizing emergency indigent drug allocations, foundation funds, or retail bridge stock to prevent medication interruption while manufacturer PAP applications are pending.
5. **PAP Re-authorization Tracking:** Proactively track expiration dates and renewal cycles to ensure seamless re-orders without therapy gaps.
6. **Program Reporting:** Deliver regular reports detailing total PAP applications submitted, approval rates, brand-to-generic conversion savings, and total estimated drug acquisition savings delivered to the clinic and patients.

C. Lowest Available Cost Medication Access & Affordability Assurance

1. **Competitive Generic Pricing & Lowest-Cost Dispensing:** Provide highly competitive, discounted cash pricing on all behavioral health and chronic care generic medications, actively comparing wholesale source costs and discount channels to guarantee the patient receives the lowest available cash price at the point of sale.
2. **Patient Financial Navigation:** Actively assess patient financial barriers and explore all external affordability pathways – including manufacturer coupons, foundation grants, PAP, and discount networks – ensuring patients receive medications at the lowest accessible cost.
3. **Transparent Pricing for Specialty & Brand Medications:** For non-PAP brand and specialty medications, provide transparent, cost-effective pricing structures (such as actual acquisition cost plus a define dispensing fee) rather than inflated Average Wholesale Price (AWP) benchmarks.
4. **Crisis & Emergency Medication Bridge Reserve:** Maintain an immediate on-site contingency inventory for crisis walk-ins and rapid hospital discharges to guarantee same-day medication initiation at minimal or zero upfront cost, utilizing PAP bridge programs or available center assistance reserves.
5. **Affordability Affirmation:** Vendors must clearly detail their proprietary discount pricing tools, purchasing group contracts, or drug discount partnerships that enable them to consistently undercut retail chain cash prices.

D. Specialized Behavioral Health Clinical Dispensing

1. **Adherence Packaging:** Provide customized adherence packaging solutions (e.g., multi-dose blister cards, strip packaging, color-coded bubble packs) at no added cost to high-risk or complex

regimens.

2. **Long-Acting Injectable (LAI) Support:** Procure, inventory, and manage cold-chain storage for LAIs (e.g., Invega Sustenna/Trinza/Hafyera, Aristada, Vivitrol, Abilify Maintena). Establish standard operating procedures for direct in-clinic delivery to medical/nursing staff for scheduled administration.
3. **Medication-Assisted Treatment (MAT):** Support specialized dispensing protocols, split dosing, or controlled pickup intervals for SUD programs in alignment with clinic treatment plans.
4. **Prescription Delivery:** Provide localized home and residential program delivery (via courier or trackable mail) for patients facing severe transportation, mobility, or geographic barriers across the service area.

E. Clinical Coordination & Staffing

1. **Dedicated On-Site Team:** Recruit, employ, and manage a licensed Pharmacist-in-Charge (PIC) and Certified Pharmacy Technicians experienced in community mental health, trauma-informed care, and stigma-reduction practices.
2. **Prior Authorization (PA) Support:** Provide dedicated real-time PA processing, appeals support, and formulary navigation.
3. **Clinical Collaboration:** Participate in interdisciplinary treatment team reviews, offer Medication Therapy Management (MTM), monitor metabolic labs/polypharmacy alerts, and consult directly with LMHA prescribers.

F. Technology & Data Integration

1. **EHR Interoperability:** Pharmacy staff will receive limited access to TPC's EHR and will be expected to interface with said EHR to
2. **Adherence Data Sharing:** Provide real-time visibility to clinic case managers and prescribers regarding medication fill gaps, non-picked-up prescriptions, and discontinued therapies.

4. PROPOSAL SUBMISSION REQUIREMENTS

Vendors must format their responses according to the following outline:

Section 1: Vendor Profile, Qualifications & References

1. Corporate overview, years in business, executive leadership, and experience operating on-site pharmacies for Texas LMHAs, FQHCs, or Community Mental Health Centers (CMHCs).
2. Minimum of three (3) professional references from behavioral health clinics or public health authorities of comparable size.
3. Disclosure of any past or pending license suspensions, TSBP/DEA sanctions, HRSA findings, or material litigation within the past five (5) years.
4. Provide a concise overview of your proposal, highlighting key strengths, objectives, and your vision for this project.

Section 2: Patient Assistance Program (PAP) & Indigent Care Plan

1. Detailed description of the PAP workflow, from initial patient identification to delivery.

2. Proprietary or third-party software platforms utilized to manage PAP tracking, eligibility verification, and manufacturer ordering.
3. Dedicated staffing allocation for PAP intake and administration (on-site vs. centralized support).
4. Protocols for managing emergency bridge supplies during pending PAP determinations.

Section 3: Lowest Available Cost Medication Strategy

1. Detailed pricing strategy and methodology for delivering medications to cash-paying, uninsured, and underinsured patients at the lowest available market cost.
2. Approach to benchmarking generic medication cash prices against major commercial discount programs (e.g., wholesale clubs, discount card networks) to ensure competitive pricing.
3. Explanation of wholesale acquisition cost pass-through or cost-plus models for brand-name and specialty drugs that do not qualify for manufacturer PAP programs.

Section 4: Clinical Operations, Packaging & Technology

1. Operating plan detailing hours of operation, on-site staffing ratios, and after-hours emergency access.
2. Adherence packaging equipment, formats offered, and turn-around times.
3. LAI coordination protocols and delivery-to-clinic workflows.
4. Local delivery and courier logistics across the LMHA service area.
5. Technical strategy and historical experience interfacing with Streamline SmartCare.

Section 5: Financial Proposal & Facility Investment

1. **Capital Investment (CapEx):** Itemized breakdown of vendor investment for space design, architectural modification, security, cabinetry, IT infrastructure, and licensing.
2. **Facility Lease / Compensation:** Proposed fair-market monthly lease/space rental payment to Texas Panhandle Centers for the designated clinic footprint.
3. **Fee Structure:** Transparent schedule of any administrative fees, delivery costs, or 340B dispensing fees (if applicable).
4. **Three-Year Pro-Forma:** Financial forecast detailing projected capture rates, gross prescription revenues, drug acquisition costs (commercial, PAP, and potential 340B), operational overhead, and projected net financial contribution to the LMHA under both 340B and non-340B scenarios.

Section 6: Implementation & Transition Timeline

1. Detailed implementation schedule (Gantt chart preferred) from contract execution through TSBP inspection, buildout, EHR integration, and Go-Live.
2. Patient transition plan detailing how existing clinic prescriptions and ongoing PAP approvals will be transitioned without disrupting ongoing care.

5. EVALUATION CRITERIA

Proposals will be evaluated by an internal multidisciplinary evaluation committee using the following weighted criteria:

Evaluation Criteria	Weight	Focus Areas
PAP & Indigent Care Strategy	**35%**	Turnkey PAP application submission, bulk replacement tracking, bridge medication protocols, and patient financial advocacy.
Behavioral Health Clinical Operations	**25%**	Specialized packaging (blister/bubble packs), LAI coordination with clinic staff, MAT support, and local delivery infrastructure.
Lowest Available Cost Strategy & Patient Affordability	**20%**	Demonstrated capability to deliver medications at the lowest available market cost through aggressive generic purchasing and transparent pricing.
Financial Terms & Space Buildout	**15%**	Capital investment in clinic buildout, monthly lease payment to LMHA, and transparent fee schedule.
Qualifications & References	**5%**	Experience with Texas LMHAs/CMHCs and verified client references.

TPC reserves the right to interview one or more top-ranked respondents as part of the evaluation process.

6. SUBMISSION GUIDELINES

6.1 Procurement Schedule

Event	Date
RFP Issuance Date	11/22/2026
Deadline for Written Inquiries	12/01/2026
TPC Response to Inquiries	12/03/2026
Proposal Submission Deadline	12/08/2026, 2:00 p.m. CST
Finalist Interviews (as needed)	12/09/2026
Vendor Selection & Intent to Award	12/10/2026
Target Pharmacy Opening Date	09/01/2027

6.2 Proposal Format

Proposals must be organized as follows:

1. Cover Page (organization name, contact information, date)
2. Table of Contents
3. Vendor Profile, Qualifications & References
4. Patient Assistance Program (PAP) & Indigent Care Plan
5. Lowest Available Cost Strategy & Patient Affordability
6. Clinical Operations, Packaging & Technology
7. Financial Proposal & Facility Investment
8. Implementation & Transition Timeline
9. Appendices (supporting documentation)

6.3 Submission Instructions

Proposals must be submitted to Dan Thompson, BH/IDD Liaison to the Executive Director either electronically in PDF format via e-mail to larry.thompson@txpan.org or by mail/delivery to Texas Panhandle Centers, Attn: Dan Thompson, 901 Wallace Blvd., Amarillo, Texas 79106.

All proposals should state at the bottom of the envelope or in the e-mail subject line

Deadline: December 8, 2026, 2:00 PM CST

Format: Email proposal in PDF format to larry.thompson@txpan.org or mail/deliver to Texas Panhandle Centers, Attn: Dan Thompson, 901 Wallace Blvd., Amarillo, Texas 79106

All proposals should state at the bottom of the envelope or in the email subject line "RFP-12082704."

6.4 Contact Information

All proposal should be directed to:

Dan Thompson
BH/IDD Liaison to the Executive Director
Texas Panhandle Centers
Email: larry.thompson@txpan.org
Phone: (806) 351-3271

7. INQUIRIES AND CLARIFICATIONS

All questions concerning this RFP must be submitted in writing to Dan Thompson at the email address above.

8. TERMS AND CONDITIONS

8.1 Rights Reserved

Texas Panhandle Centers reserves the right to:

- Reject any or all proposals
- Waive informalities or minor defects in proposals
- Request additional information or clarification
- Negotiate with any proposer
- Cancel this RFP at any time
- Extend deadlines as necessary
- Supplement this RFP as necessary

8.2 Contract Terms

The final contract will include terms and conditions agreed upon during negotiations.

Texas Panhandle Centers is an Equal Opportunity Organization and does not discriminate on the basis of race, color, national origin, disability, age, sex, or religion.