

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000292323
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Date 09/01/22
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 6484 - Mexia:424 Mesquite Dr HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States

Vendor: 1751739434 6
RENAL CARE GROUP TEXAS INC
DBA CARTHAGE DIALYSIS CENTER
PO BOX 130758
TYLER TX 757130758
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
424 Mesquite Dr
PO Box 1132
Mexia TX 76667
United States

Fax: 254/562-1894
Email: 718Accounting@hhs.texas.gov

Purchaser: Payne,Bruce

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 funding
EX/0 client svcs TGC 2155.144(b)(b-1)(2)
Requisition 190841

PO Service Dates 09/01/2022 to 08/31/2023

Attached Terms and Conditions apply to this Purchase Order.

Goods and/or services are to be delivered and invoiced after September 1, 2022.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08/31/2023 are automatically canceled.

Vendor: 1751739434
Renal Care Group Texas, Inc.
Fresenius Kidney Care Palestine Home Therapies Dialysis Center
201 Medical Drive
Palestine, Texas 75801

Vendor Contact: Rebekah Raybon/Monica Conaway
Vendor Phone: 803-438-8082/903-729-0151
Vendor Fax: 903-729-0535
Vendor Email: Rebekah.raybon@fmc-na.com/Monica.conaway@fmc-na.com

Lead Contact: Stacy Johnson
Lead Contact Email: stacy.johnson2@hhs.texas.gov
Lead Contact Phone: 254-562-2821

Contract Manager: Laura Watson
Contract Manager Email: Laura.Watson@hhs.texas.gov
Contract Manager Phone: 254.562.1141

PCS contact:
Bruce Payne CTCD, CTCM
512-406-2515
bruce.payne@hhs.texas.gov

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Purchaser: Payne, Bruce

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	FY23 (Service)-Peritoneal Dialysis Services for individual with end-stage renal disease residing at MSSLC.	948-48	1.00	LOT	10000.00000	\$10,000.00	09/01/2022

Schedule Total \$10,000.00

Item Total for Line 1 \$10,000.00

Total PO Amount \$10,000.00

No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract.

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By

Bruce Payne, CTPM, CTCM

06/24/2022