Department of State Health Services

Purchase Order

						Dispatch via Print
Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship V i BEST V		Purchase Order		HHSTX-3-0000293939
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 09/01/22	RevisionPage 16694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
			Ship To:			
Vendor:	1271151230 6 DIRECT TEXAS LLC PO BOX 312100 NEW BRAUNFELS TX 781312100 United States			Bill To:	Invoice-DSHS I DEPARTMENT 1100 W 49th St PO Box 149347 Austin TX 7875 United States	T OF STATE HEALTH SERVICES (RBB) 7
				Fax: Email:	512/458-7442 invoices@dshs.	texas.gov
<u></u>			0	Purchaser:	Ryece,Robin	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

FY23 Funding IT/D Requisition: 189537 Contract Term: 09-01-22 to 08-31-23 DSHS Requisition #537-179191

Attached Terms and Conditions apply to this Purchase Order.

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/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

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

Vendor Contact Carolyn Lehmann +1 (830) 627-7744 carolyn@direct-texas.com

Agency Contact Debra Dale debra.dale@dshs.texas.gov

PCS Contact Robin Ryece +1 (512) 406-2607 robin.ryece@hhs.texas.gov

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NOTE TO VENDOR: Send invoices to DSHS at invoices@dshs.texas.gov

NOTE TO DSHS ACCOUNTS PAYABLE: Send approval claim form to Debra Dale at debra.dale@dshs.texas.gov

920

920-02

1.00 LOT

4612.50000

Department of State Health Services

Purchase Order

Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-3-0000293939 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 09/01/22 2 conforming responses become a part of this numbered purchase order. Contractor Ship To: 6694 - Austin:1111 W North Loop guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 1111 W North Loop All shipments, shipping papers, invoices, and correspondence must be identified Austin TX 78756 with our Purchase Order Number. United States Vendor: 12711512306 Bill To: Invoice-DSHS Fiscal Claims DIRECT TEXAS LLC DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO BOX 312100 NEW BRAUNFELS TX 781312100 PO Box 149347 United States Austin TX 78756 United States Fax: 512/458-7442 invoices@dshs.texas.gov Email: Ryece,Robin **Purchaser: Inventory Item ID - Line Description** UOM PO Price Line-Sch Class/Item Quantity Extended Amt **Due Date** Registry (TCR). G63000. Period 9/1/2022-8/31/2023 Schedule Total \$4,612.50 \$4,612.50 Item Total for Line 1 920-02 LOT 4612.50000 09/01/2022 2 - 11.00 \$4,612.50 Subscription for Health Professional Files with NPI Numbers. Files sent quarterly via upload to a Google folder to the Center for Health Statistics (CHS), System 13. C43000. Period 9/1/2022-8/31/2023 Schedule Total \$4,612.50 \$4,612.50 Item Total for Line 2 \$9.225.00 **Total PO Amount**

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	
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Kobin Kyece, CTCD	07/11/2022
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