Health and Human Services Commission

Purchase Order

Dispatch via Print

Net 30 If advertised specification	f advertised by informal bid, Invitation for Offer, or Request for Proposal; all pecifications, terms, and conditions set forth in the advertisement and vendor's		Purchase Order Date 09/01/22	HHSTX-3-000029399 Revision Pag		
guarantees g	responses become a part of this numbered pu oods or services delivered meet or exceed nu s. ts, shipping papers, invoices, and correspo rchase Order Number.	rchase order. Contractor imbered purchase order		Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSION 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States	
Vendor:	1750868320 2 THE WEST TEXAS REHABILITATIC 3001 S JACKSON ST SAN ANGELO TX 769045129 United States	ON CENTER		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602 United States	
				Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.us	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	Purchaser:	Atchley,Cindy Jean 432/263-9617 PO Price Extended Amt Due Date	

FY23 Funding EX/0 Legal Cite 2155.144; Client Purchase PO must not exceed \$10,000.00 PO Amount: \$10,000.00 Requisition 0000198106; (3) Lines Rate: Current Medicaid/Medicare approved rates

PO Service Dates: 09/01/2022-08/31/2023 no renewals

Client Therapy Services as needed: Various Therapy Services including Audiology/Orthotic/Occupational Therapy/Physical Therapy/Speech Therapy Services

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 and/or 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.

Vendor Contact: Scott Jameson Phone: 325-655-4069 Email: kbender@wtrc.com

For: Agency/Facility: HHSC/San Angelo State Supported Living Center (SGSSLC)

Facility Contract Manager: Ida Montez, CTCM Phone: 325-465-2203 Email: ida.montez@hhs.texas.gov

Facility SME Contact: Ida Montez Phone: 325-465-2203 Email: ida.montez@hhs.texas.gov

PCS Contact: Cindy Atchley, CTCD Phone: 432-263-9617 Email: cindy.atchley@hhs.texas.gov

Health and Human Services Commission

Purchase Order

Dispatch via Print Ship Via **Payment Terms Freight Terms** HHSTX-3-0000293996 Net 30 N/A, Service, Pick up, etc. NONE **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 6433 - Carlsbad:11640 US Hwy 87 N Ship To: guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 11640 US Hwy 87 N All shipments, shipping papers, invoices, and correspondence must be identified 11640 N US Hwy 87 with our Purchase Order Number. Carlsbad TX 76934 United States 17508683202 Bill To: Invoice - DADS Vendor: THE WEST TEXAS REHABILITATION CENTER HEALTH & HUMAN SERVICES COMMISSION 3001 S JACKSON ST 2501 Maple St SAN ANGELO TX 769045129 PO Box 451 Abilene TX 79602 **United States** United States Fax: 325/795-3807 Email: 710Accounting@hhsc.state.tx.us Purchaser: Atchley, Cindy Jean 432/263-9617 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM PO Price Extended Amt Due Date 9000.00000 1-1 948-86 1.00 LOT \$9,000.00 09/01/2022 FY23 Client Services as needed; Audiology/Orthotic/Occupational Therapy Services; DA1-SGSSLC; Reqn 198106 Schedule Total \$9,000.00 VENDORS SEND INVOICES VIA EMAIL TO: 710Accounting@hhsc.state.tx.us \$9,000.00 Item Total for Line 1 2-1 948-86 1.00 LOT 500.00000 \$500.00 09/01/2022 FY23 Client Services as needed: Physical Therapy Services; DA1-SGSSLC; Reqn 198106 \$500.00 Schedule Total VENDORS SEND INVOICES VIA EMAIL TO: 710Accounting@hhsc.state.tx.us Item Total for Line 2 \$500.00 3-1 948-86 1.00 LOT 500.00000 \$500.00 09/01/2022 FY23 Client Services as needed; Speech Therapy Services; DA1-SGSSLC; Reqn 198106 Schedule Total _____ \$500.00 VENDORS SEND INVOICES VIA EMAIL TO: 710Accounting@hhsc.state.tx.us Item Total for Line 3 \$500.00 **Total PO Amount** \$10,000.00

Health and Human Services Commission

Purchase Order

					Dispatch via Print	
Payment Terms Net 30	Freight Terms N/A, Service, Pick up, etc.	Ship Via NONE	Purchase Order	Н	HSTX-3-0000293996	
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			Date 09/01/22	Revision		
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.		Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSION 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States			
	1750868320 2 THE WEST TEXAS REHABILITATION 3001 S JACKSON ST SAN ANGELO TX 769045129 United States	CENTER	Bill To:	Invoice - DADS HEALTH & HUMAI 2501 Maple St PO Box 451 Abilene TX 79602 United States	N SERVICES COMMISSION	
			Fax: Email:	325/795-3807 710Accounting@hhs	c.state.tx.us	
			Purchaser:	Atchley,Cindy Jean		
Line-Sch In	ventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date	

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						
Cindy atchley, CTCD	<u>07/11/2022</u>					