

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms No Shipment Involved	Ship Via NO SHIP	Purchase Order HHSTX-3-0000294387
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 1
			Ship To: 5070 - Harlingen: 1401 S Rangerville DEPARTMENT OF STATE HEALTH SERVICES 1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552 United States

Vendor: 1742028156 4
SOUTH TEXAS EMERGENCY CARE FOUNDATION IN
PO BOX 533668
HARLINGEN TX 785533668
United States

Bill To: Invoice-DSHS Accounts Payable
HEALTH & HUMAN SERVICES COMMISSION
6711 S New Braunfels
Ste 100
San Antonio TX 78223
United States

Fax: 210/531-7883
Email: SAHAccounting@dshs.texas.gov

Purchaser: Mckelvy,Michael

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 Legal Cite 2155.144 Client Purchase
PO must not exceed \$10,000.00
Requisition 0000199900
Quoted Rate: 4-28-2022 Medicaid, Medicare rates verified

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

Services to be performed: Ambulance Services

Attached Terms and Conditions apply to this Purchase Order.

Payment Inquiries and Invoices are to be submitted to SAHAccounting@dshs.texas.gov

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.

Vendor Contact
1742028156
South Texas Emergency Care Foundation
Leonard Callier
956-364-8427
LCallier@STEC-EMS.org

Agency contact
Maria G. Rodriguez, CTCM
956-364-8427
MariaG.Rodriguez2@hhs.Texas.gov

PCS contact
Mike McKelvy; CTCM, CTCM
512-406-2579
Mike.McKelvy@hhs.Texas.gov

1-1	FY23-Services, F3G010-RGSC, Provide, on an as needed basis, 24/7 emergency	990-37	1.00	LOT	6500.00000	\$6,500.00	09/01/2022
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	ambulance services for Rio Grande State Center - State Hospital						
					Schedule Total	<u>\$6,500.00</u>	
	FY23 CG2 RGSC AMBULANCE F4730						
	LINE 1: SH F3G010 F4730 724817						
	LINE 2: OPC F3G080 F5630 724817						
	LINE 3: SSLC DA720 F4730 724817						
	No Physician license required for this service - therefore - PCS 436 is not required						
					Item Total for Line 1	<u>\$6,500.00</u>	
2-1	FY23-Services, F3G080-RGSC, Provide, on an as needed basis, 24/7 emergency ambulance services for Rio Grande State Center - Outpatient Clinic	990-37	1.00	LOT	1000.00000	\$1,000.00	09/01/2022
					Schedule Total	<u>\$1,000.00</u>	
	FY23 CG2 RGSC AMBULANCE F4730						
	LINE 1: SH F3G010 F4730 724817						
	LINE 2: OPC F3G080 F5630 724817						
	LINE 3: SSLC DA720 F4730 724817						
					Item Total for Line 2	<u>\$1,000.00</u>	
3-1	FY23-Services, DA720-RGSC, Provide, on an as needed basis, 24/7 emergency ambulance services for Rio Grande State Center, State Supported Living Center	990-37	1.00	LOT	2500.00000	\$2,500.00	09/01/2022
					Schedule Total	<u>\$2,500.00</u>	
	FY23 CG2 RGSC AMBULANCE F4730						
	LINE 1: SH F3G010 F4730 724817						
	LINE 2: OPC F3G080 F5630 724817						
	LINE 3: SSLC DA720 F4730 724817						
					Item Total for Line 3	<u>\$2,500.00</u>	

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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



CTCD, CTCM

07/14/2022