## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via		IIIICTY 2 0000204	000	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-0000301	920	
specifications, terms	ormal bid, Invitation for Offer, or s, and conditions set forth in the a	dvertisement and vendor's	<b>Date</b> 10/01/22	Revision	Page 1	
	es become a part of this numbere services delivered meet or excee		Ship To:	4038 - Corpus Christi:902 Airport HEALTH & HUMAN SERVICES COMMISSION 902 Airport Rd		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Corpus Christi TX 78405 United States		
Vendor: 19	53849613 4		Bill To:	Invoice - DADS		

PHARMACY CORPORATION OF AMERICA

PHARMERICA PO BOX 644458

PITTSBURGH PA 152644458

**United States** 

HEALTH & HUMAN SERVICES COMMISSION

4001 S Hwy 36 Brenham TX 77833 United States

Fax: 979/277-1865

				Purchaser:	Lyncook,Shawi	n Patrick	512	/406-2685	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended	Amt	<b>Due Date</b>	

FY23 Funding EX/0 Legal Cite 2155.144; Client Purchase Requisition 207644

Pricing per Current Medicaid/Medicare approved rates and/or negotiated rate per individual needs. \$80 per hour for consultation services and \$10 dollars per chart review (IMRR).

PO Service Dates: 10/01/2022 to 08/31/2023

Unilateral Contract: 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.

Vendor contact

First and Last Name: John P. Calvillo Phone number: 877-449-6661

Email address: John.Calvillo@Pharmerica.com

Agency contact

First and Last Name: Monica Martinez Phone number: 361-241-5312

Email address: Monica.Martinez3@hhs.texas.gov

Facility: Corpus Christi SSLC, Castle River GH River Forest GH, Corpus Christi, TX 78410

PCS contact

Shawn 'Patrick' LynCook

512-406-2685

shawn.lyncook@hhs.texas.gov

1-1 948-72 1.00 LOT 5000.00000 \$5,000.00 10/04/2022

FY23 DA740/F6401 PharMerica-Weslaco Goods/Services

> \$5,000.00 Schedule Total

## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Te	rms Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-	-3-0000301920
	by informal bid, Invitation for Offer, or R		Date	Revision	Page
	s, terms, and conditions set forth in the ad-		10/01/22		2
guarantees go requirements		numbered purchase order	Ship To:	4038 - Corpus Christi:902 Airp HEALTH & HUMAN SERVIC 902 Airport Rd	
	ts, shipping papers, invoices, and corres rchase Order Number.	spondence must be identified		Corpus Christi TX 78405 United States	
Vendor:	1953849613 4		Bill To:	Invoice - DADS	
	PHARMACY CORPORATION OF A	AMERICA		HEALTH & HUMAN SERVIC	CES COMMISSION
	PHARMERICA			4001 S Hwy 36	
	PO BOX 644458			Brenham TX 77833	
	PITTSBURGH PA 152644458			United States	

**Fax:** 979/277-1865

•				Purch	, ,		12/406-2685
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					Item Total for Line 1	\$5,000.00	
2-1	FY23 DA740/F6402 PharMerica- Weslaco Goods/Services	948-72	1.00	LOT	5000.00000	\$5,000.00	10/04/2022
					Schedule Total	\$5,000.00	
					Item Total for Line 2	\$5,000.00	
					<b>Total PO Amount</b>	\$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

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

**United States** 

Authorized By		
Shall	CTCD, CTCM	10/04/2022