

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-5-0000342235
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 09/01/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			Page 1

Vendor: 1870578776 2
APEX EDI INC
556 TECHNOLOGY AVE
OREM UT 84097-6210
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Exempt Reason: N/A

Purchaser: Sprague, Jacob

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY25 funding

SP/E

Requisition 259486 - Pricing per Quote 292365

PO Service Dates 09/01/2024 to 08-31-2025 Goods and/or services are to be delivered and invoiced after September 1, 2024

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 08/31/2025 are automatically canceled.

Vendor contact

APEX EDI INC
Patrick A. Lewis
205-994-5077
Patrick.Lewis@therapybrands.com

Agency contact

Gabriela Soto
Gabriela.Soto@dshs.texas.gov

PCS contact

Jacob Sprague
512-776-2320
Jacob.sprague3@hhs.texas.gov

1-1	APEX Monthly Allotment up to 100 Claims per month	961-16	12.00	EA	59.00000	\$708.00	09/01/2024
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Schedule Total \$708.00

ATTACHEMENT: DSHS 2024 - 2025 APEX PO QUOTE

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All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2
			Ship To: 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States

Vendor: 1870578776 2
APEX EDI INC
556 TECHNOLOGY AVE
OREM UT 84097-6210
United States

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DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
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Exempt Reason: N/A

Purchaser: Sprague, Jacob

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Item Total for Line 1						\$708.00	
2-1	Additional claims over 100 in a month	961-16	1000.00	EA	.48000	\$480.00	09/01/2024
Schedule Total						\$480.00	
Item Total for Line 2						\$480.00	
Total PO Amount						\$1,188.00	

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 	04/01/2024
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