Index No.: LDC101
Contract No.: OT901311
Eff. Date: 09/24/12

STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICES
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

AMENDMENT FOR CHANGE
AMENDMENT NO. 27

TO: LIMITED DISTRIBUTION – the Department of Mental Health, Office of Support Services, 2150 W. Broad Street, Columbus, OH 43223, the Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, OH 43229, and State Universities

FROM: ROBERT BLAIR, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES

SUBJECT: CONTRACT FOR PHARMACEUTICAL CONTRACT 2010-2011

Attached are pages 31, 32, 36, 63, 76, 153, 161, 167, 187, 188, 210 through 218, 235, and 313 to this contract. Remove these pages from the existing contract and replace with the attached pages on the effective and/or revision date.

This amendment is issued to advise of changes in price, termination for convenience of selected items, and other changes as indicated herein.

All other prices, terms and conditions remain unchanged.

Questions regarding this Amendment and/or the Requirements Contract may be directed to:

Terry Spiropoulos, CPPB
terry.spiropoulos@das.state.oh.us

This Amendment, the main Requirements Contract and any additional amendments thereto are available from the DAS Web site at the following address:

http://www.ohio.gov/procure

Affected Contractor(s):

76401
Capital Wholesale Drug Co.
873 Williams Avenue
Columbus, OH 43212
grich61695@aol.com

100570
Prescription Supply Inc.
2233 Tracy Rd.
Northwood, OH 43619-1326
wvanmetre@prescriptionsupply.com

71418
Relia-Med Distributors, LLC
183 Trails End
Westerville, OH 43082
bjholland98@hotmail.com

131828
Sanofi Pasteur, Inc.
Discovery Drive
Swiftwater, PA 18370
jill.bingham@sanofipasteur.com

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
5827 1 210-08-1813 C	Acyclovir (Zovirax) 400mg Tablets	100	BTL	225	12.75	TEVA 00093-8943-01	
6156 1 210-08-1819 S	Atazanavir (Reyataz) 150mg Capsules	60	BTL	60	1,057.39	BMS 00003-3624-12	**
859 1 210-08-1820 S	Atazanavir (Reyataz) 200mg Capsules	60	BTL	60	1,059.20	BMS 00003-3631-12	**
11925 1 210-08-1825H	Lopinavir 200mg and Ritonavir 50mg (Kaletra) Tablets	120	BTL	220	740.16	ABBOTT 00074-6799-22	
774 1 210-08-1830	Indinavir Sulfate 400mg (Crixivan) Capsules	90	BTL	60	237.51	MERCK 00006-0573-54	
19528 1 210-08-1838S	Darunavir Tablets 400mg (Prezista)	60	BTL	60	1,071.09	JOM 59676-0561-01	
19529 1 210-08-1840S	Darunavir Tablets 600mg (Prezista)	60	BTL	60	1,071.09	JOM 59676-0562-01	
5268 1 210-08-1853 T	Didanosine EC Caps (Videx EC) 125mg	30	BTL			NO AWARD	*

* To advise of change in award status - item was not renewed in this contract and is expired. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

** To advise of price increase effective for orders issued on or after September 29, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
5269 1 210-08-1854	Didanosine DR Caps 200mg	30	BTL	75	105.29	AUROBINDO 65862-0311-30	
932 1 210-08-1855	Didanosine DR Caps 250mg	30	BTL			STILL UNDER EVALUATION	
933 1 210-08-1856	Didanosine DR Caps 400mg	30	BTL			STILL UNDER EVALUATION	
789 1 210-08-1862 N	Efavirenz (Sustiva) Capsules 200mg	90	BTL	60	618.26	BMS 00056-0474-92	*
5872 1 210-08-1864 T	Efavirenz (Sustiva) Tablets 600mg	30	BTL	60	617.73	BMS 00056-0510-30	*
10311 1 210-08-1865T	Efavirenz 600mg Emtricitabine 200mg Tenofovir 300mg (Atripla) tabs	30	BTL	60	1,773.98	BMS 15584-0101-01	
6158 1 210-08-1868 T	Emtricitabine (Emtriva) 200mg Capsules	30	BTL	60	471.04	GILEAD 61958-0601-01	
862 1 210-08-1870 T	(Truvada) Emtricitabine 200mg Tenofovir 300mg Tabs	30	BTL	60	1,208.34	GILEAD 61958-0701-01	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
5405 1 210-08-1943 S	Stavudine 40mg (Zerit) Capsules	60	BTL	225	46.75	CAMBER 31722-0518-60	
5535 1 210-08-1950 T	Tenofovir Disoproxil Fumarate 300mg (Viread) Tabs	30	BTL	60	823.80	GILEAD 61958-0401-01	*
11927 1 210-08-1952 H	Tipranavir Capsules (Aptivus) 250mg	120	BTL	60	1,158.48	B-I 00597-0003-02	
857 1 210-08-1970 T	Valacyclovir (Valtrex) 500mg Caplets	30	BTL	20	62.63	WATSON 00591-3248-30	
858 1 210-08-1990 S	Zidovudine 300mg Tablets	60	BTL	240	13.88	CAMBER 31722-0509-60	
5807 1 210-08-2060 C	Hydroxychloroquine Sulfate (Plaquenil) 200mg Tablets	100	BTL	225	8.04	IPCA 63304-0296-01	
867 1 210-08-2210 U	Levofloxacin (Levaquin) 250mg Tablets	UD 100	PKG	60	1,815.80	JOM 50458-0920-10	
868 1 210-08-2211 U	Levofloxacin (Levaquin) 500mg Tablets	UD 100	PKG	60	2,081.06	JOM 50458-0925-10	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1204 1 210-24-0601 U	Atorvastatin Ca (Lipitor) Tablets 10mg	UD 100	PKG	60	391.08	PFIZER 00071-0155-40	*
845 1 210-24-0602 N	Atorvastatin CA (Lipitor) Tabs 20mg	90	BTL	60	480.06	PFIZER 00071-0156-23	
1205 1 210-24-0602 U	Atorvastatin CA (Lipitor) Tablets 20mg	UD 100	PKG	60	557.89	PFIZER 00071-0156-40	*
59864 1 210-24-0603 N	Atorvastatin CA (Lipitor) Tabs 40mg	90	BTL	60	478.18	PFIZER 00071-0157-23	*
11940 1 210-24-0604N	Atorvastatin (Lipitor) Tablets 80 mg	90	BTL	60	480.06	PFIZER 00071-0158-23	
1223 1 210-24-0605 U	Cholestyramine Resin Light (Questran Light) 4gm/5gm Packets (Contains aspartame)	UD 60	PKG	220	40.37	UPSHER 00245-0036-60	
7415 1 210-24-0606	Cholestyramine Resin Powder 4gm/9gm (Contains sucrose)	UD 60	PKG	220	43.00	PAR 49884-0465-65	
5951 1 210-24-0609 T	Ezetimibe (Zetia) 10mg Tablets	30	BTL	60	126.96	MERCK 66582-0414-31	

* To advise of price increase effective for orders issued on or after October 1, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
14718 1 210-24-0868M	Enalapril Maleate Tablet 20mg	1,000	BTL	30	16.25	WOCKHARDT 64679-0926-03	
946 1 210-24-0868U	Enalapril Maleate (Vasotec) 20mg Tablets	UD 100	PKG	160	8.02	WOCKHARDT 00904-5611-61	
7098 1 210-24-0870 C	Guanfacine Tablets 1mg	100	BTL	75	5.80	WATSON 00591-0444-01	
(TBD) 1 210-24-0872C	Prazosin HCl Capsules 1mg (Minipres)	100	BTL	240	8.98	TEVA 00093-4067-01	
(TBD) 1 210-24-0872U	Prazosin caps 1 mg	UD 100	PKG	60	12.59	MYLAN 51079-0630-20	*
11943 1 210-24-0874 C	Prazosin HCL 5mg Capsules (Minipres)	100	BTL	225	26.29	TEVA 00093-4069-01	
5338 1 210-24-0973 C	Metoprolol Succinate XL Tabs 25mg (Toprol XL)	100	BTL	20	53.44	WATSON 62037-0830-01	
5339 1 210-24-0974 C	Metoprolol Succinate XL Tabs 50mg (Toprol XL)	100	BTL	20	53.44	WATSON 62037-0831-01	

* To advise of price increase effective for orders issued on or after September 29, 2012.

ITEM ID NO. ** MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
17521 3 210-28-2250C	Dexmethylphenidate XR 5mg caps (Focalin XR)	100	BTL	220	563.35	NOVARTIS 00078-0430-05	
17522 3 210-28-2251C	Dexmethylphenidate XR 10mg caps (Focalin XR)	100	BTL	220	570.81	NOVARTIS 00078-0431-05	
17523 3 210-28-2252C	Dexmethylphenidate XR 20mg caps (Focalin XR)	100	BTL	220	587.27	NOVARTIS 00078-0432-05	
17524 3 210-28-2253C	Dexmethylphenidate XR 15mg caps (Focalin XR)	100	BTL	220	587.27	NOVARTIS 00078-0493-05	
22316 3 210-28-2268C	Lisdexamfetamine capsules 20 mg	100	BTL	220	535.26	SHIRE 59417-0102-10	
17525 3 210-28-2269C	Lisdexamfetamine capsules 40mg (Vyvanse)	100	BTL	220	535.26	SHIRE 59417-0104-10	
17526 3 210-28-2270C	Lisdexamfetamine capsules 30mg (Vyvanse)	100	BTL	220	535.26	SHIRE 59417-0103-10	
17527 3 210-28-2271C	Lisdexamfetamine capsules 50mg (Vyvanse)	100	BTL	220	535.26	SHIRE 59417-0105-10	*

* To advise of price increase effective for orders issued on or after September 25, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1618 3 210-28-9205 C	Entacapone Tablets 200mg (Comtan)	100	BTL	60	388.87	NOVARTIS 00078-0327-05	**
6391 3 210-28-9250 S	Memantine 5mg Tablets (Namenda)	60	BTL	60	231.79	FOREST 00456-3205-60	*
1622 3 210-28-9251 S	Memantine 10mg Tablets (Namenda)	60	BTL	60	231.96	FOREST 00456-3210-60	*
(TBD) 3 210-28-9266T	(Azilect) Rasagiline 1mg Tablets	30	BTL	220	322.06	TEVA 68546-0229-56	
5541 3 210-28-9273C	Ropinirole Tablets 0.25mg (Requip)	100	BTL	30	16.60	COREPHARMA 64720-0201-10	
10336 3 210-28-9275C	Ropinirole (Requip) Tablets 1 mg	100	BTL	225	16.30	COREPHARM 64720-0203-10	
1628 3 210-28-9279 C	Ropinirole (Requip) 5mg Tablets	100	BTL	30	17.30	COREPHARMA 64720-0207-10	
6441 1 210-36-1400	Carbonated Cola glucose Tolerance test Dextrose Soln 100 gm. (Trutol 100)	10oz 1	BTL			NO AWARD	

* To advise of price increase effective for orders issued on or after October 1, 2012.

** To advise of price increase effective for orders issued on or after September 29, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
7235 4 210-40-1907	Sevelamer carbonate Tablets 800mg	180	BTL			NO AWARD	
1470 4 210-40-1910	Sodium Polystyrene Sulfonate Susp. 15gm/60ml - No Refrigeration Required	10BTL./CS. 60ml.(BTL) 10	CS	220	69.30	CAROLINE MEDICAL 46287-0006-60	**
12730 4 210-40-2057 P	Dextrose 5% Inj. 500ml. (Plastic) (Baxter 2B0063Q) (Not AddVantage System)	500 ml 1	BAG			NO AWARD	*
12731 4 210-40-2059 P	Dextrose 5% Inj. 1000ml. (Plastic) (Baxter 2B0064) (Not AddVantage System)	1000ml 1	BAG	75	15.73	HOSPIRA 00409-7922-09	
269-40-34-380-4 4 210-40-2064 P	Dextrose 5% Sod CL 0.9% 1000ml Inj. (Plastic) (Baxter 2B1064) (Not AddVantage System)	1000ml 1	BAG	75	16.00	HOSPIRA 00409-7941-09	
12733 4 210-40-2074 P	Dextrose 5% Sod CL 0.45% Inj. 1000ml Inj. (Plastic) (Baxter 2B1074) (Not AddVantage System)	1000ml 1	BAG			NO AWARD	*
1640 4 210-40-2176	Glucose Tablets 300mg	6	BTL			NO AWARD	
12734 4 210-40-2264 P	(Not AddVantage System) Lactated Ringers Inj. (Plastic) (Baxter 2B2324)	1000ml 1	BAG	75	14.40	HOSPIRA 00409-7953-09	

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** To advise of price increase effective for orders issued on or after September 27, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN # PRICE	UNIT	MANUFACTURER NDC NUMBER	
6650 MBE; 2 210-56-1295 G	Powder for Oral Soln (Colyte) Polyethylene Glycol 3350 Electrolyte in Bottle	4 Ltr 1	BTL	** 85	10.34	GAVIS 43386-0060-19	
7313 MBE; 2 210-56-1300	Enema Fleet Mineral Oil	1	EA			NO AWARD	
7227 MBE; 2 210-56-1384	Lactulose Solution 10gm/15ml for Constipation	32 oz 1	BTL	** 235	12.10	QUALITEST 00603-1378-59	
1458 MBE; 2 210-56-1384 U	Lactulose Soln 10Gm/15ml 30cc	UD 40	CTN			NO AWARD	
6976 MBE; 2 210-56-1418	Methycellulose PWD (Citrucel) Orange, Jar	16 oz 1	EA	** 235	8.02	GLAXO SMITH KLINE 30068-0418-16	
1775 MBE; 2 210-56-1423 A	Mineral Oil American Heavy - Indication Constipation	16 oz 1	BTL	** 235	2.42	CUMBERLAND SWAN 84603-6001-68	*
10342 MBE; 2 210-56-1432	Phospha Soda (Fleet)	1.5 oz 1	BTL			NO AWARD	
1571 MBE; 2 210-56-1463 S	Polycarbophil, Calcium (Fiberlax) 500mg Tablet	60	PKG			NO AWARD	

* To advise of price increase effective for orders issued on or after September 27, 2012.

** Minority Business Enterprise awarded in accordance with Ohio Revised Code Ch. 125.081

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1783 MBE; 2 210-56-1485	(74008) (No Substitution) Psyllium Muciloid (Metamucil), Regular Flavor, Original Texture Powder	13 oz 1	CAN	** 85	3.96	PRIME 62107-0079-04	
6986 MBE; 2 210-56-1486	(74012) (No Substitution) Psyllium Muciloid Orange Flavor Original Texture Powder (Metamucil)	19 oz 1	CAN	** 235	8.38	PROCTER & GAMBLE 37000-0013-08	
6985 MBE; 2 210-56-1486 U	(74087) (No Substitution) Psyllium Muciloid, Orange Flavor Smooth Texture Powder (Metamucil)	UD 30	PKG	** 235	9.78	PROCTER & GAMBLE 37000-0023-04	***
1782 MBE; 2 210-56-1487 U	(74108) (No Substitution) Psyllium Muciloid, Orange Flavor (Metamucil) Smooth Texture, Sugar Free Powder	UD 30	PKG	** 235	9.86	PROCTER & GAMBLE 37000-0024-04	*
7041 MBE; 2 210-56-1526 C	187mg=8.6mg Sennosides From Senna Concen- trate Senna Concentrate, Senokot Tablets	100	BTL			NO AWARD	
(TBD) MBE; 2 210-56-1526U	Sennosides 8.6mg Tablets	UD 100	PKG			NO AWARD	
14804 MBE; 2 210-56-1528 S	Sennosides 8.6mg Docusate Sodium 50mg Senokot-S	60	BTL			NO AWARD	
1787 MBE; 2 210-56-1528 U	Sennosides 8.6mg Docusate Sodium 50mg Senokot-S	UD 100	PKG			NO AWARD	

* To advise of price increase effective for orders issued on or after September 27, 2012.

** Minority Business Enterprise awarded in accordance with Ohio Revised Code Ch. 125.081

*** To advise of price increase effective for orders issued on or after October 13, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
6076 4 210-72-4239	Lidocaine Inj 2% Epinephrine 1:100 , Vial	(25/pk) 20 ml 1	VL	75	40.05	HOSPIRA 00409-3182-01	
839 4 210-72-4244	(Xylocaine) Lidocaine HCL 2% 5ml Disp. Syringe	(10/pk) 5ml 1	SYR	75	16.45	HOSPIRA 00409-1323-05	
840 4 210-72-4245	Lidocaine HCL 2% Viscous (Xylocaine)	100 ml 1	BTL	75	1.74	HITECH 50383-0775-04	
269-80-55-050-8 1 210-80-0558 S	Hepatitis B Immune Globulin (Hbig) Pediatric Single Dose Prefilled Syringe, 0.5ml	0.5 ml 1	SYR			NO AWARD	
14807 1 210-80-0558 V	Hepatitis B Immune Globulin (Hbig) Adult Formula Single Dose Vial	1 ml 1	VL			NO AWARD	
10564 1 210-80-0711	Human Diploid Rabies Immune Globulin (HRIG) Vaccine 150IU/ml, Single Dose Vial	2 ml 1	VL			NO AWARD	*
10565 1 210-80-0711V	Human Diploid Rabies Immune Globulin (HRIG) Vaccine 150IU/ml, Vial	10 ml 1	VL			NO AWARD	*

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
(TBD) 1 210-80-0850	Diphtheria, Tetanus, acellular pertussis combined with Haemophilius influenza type B and inactivated polio single dose vial including Federal Excise Tax, Must have expiration date of at least one year from delivery date. (no substitution) (Pentacel) 5 vials/pkg.	Vial 5	PKG			NO AWARD	
(TBD) 1 210-80-0855	Diphtheria, Tetanus, acellular pertussis combined with inactivated polio single dose vial including Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Kinrix) (no substitution) 10 vials/package	Vial 10	PKG			NO AWARD	*
(TBD) 1 210-80-0855S	Diphtheria, Tetanus, acellular pertussis combined with inactivated polio single pre-filled syringe including Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Kinrix) (no substitution).5 syringes / Pkg.	Syr 5	PKG			NO AWARD	*
10566 1 210-80-0858	Diphtheria - Tetanus (DT) Pediatric Single Dose Vial including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from date of delivery.	10	PKG			NO AWARD	
10545 1 210-80-0859S	Tetanus & Diphtheria (Td) Toxoids adsorbed for Adult use Preservative Free 10 Pre Filled Syringes including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from date of delivery. (No Substitution) (DECAVAC)	Single-Dose Syringes 10	PKG			NO AWARD	*

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
14808 1 210-80-0859V	Tetanus & Diphtheria (Td) Toxoids adsorbed for Adult use Preservative Free 10 Single-Dose Vials including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from date of delivery. (No Substitution) (DECAVAC)	Single-Dose Vials 10	PKG			NO AWARD	*
14809 1 210-80-0860V	Tetanus & Diphtheria Toxoids Adsorbed for Adults 15 dose vials including Federal Excise Tax (FET)	(Vial) 7.5ml 1	VL			NO AWARD	
6518 1 210-80-0863S	Diphtheria Tetanus , acellular Pertussis combined with Hepatitis B & Inactivated Polio DTaP-HBV-IPV. Single Pre-filled Safety Tip-Lock Syringe W/O BD needle including Federal Excise Tax (FET). (Pediarix) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	5	PKG	60	305.66	GLAXO 58160-0811-46	
11949 1 210-80-0863V	Diphtheria Tetanus , acellular Pertussis combined with Hepatitis B & Inactivated Polio DTaP-HBV-IPV Single Dose Vial including Federal Excise Tax (FET) (No Substitution) (Pediarix) Must have expiration date of at least one (1) year from date of delivery.	10	PKG	60	611.32	GLAXO 58160-0811-11	
10567 1 210-80-0866	Diphtheria - Tetanus - accellular - Pertussis (DTaP) Single Dose Vial including Federal Excise Tax (FET) (Tripedia) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	10	PKG	260	236.70	SANOFI PASTEUR 49281-0298-10	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
10568 1 210-80-0870	Diphtheria - Tetanus - accellular - Pertussis (DTaP) Single Dose Vial including Federal Excise Tax (FET) (Daptacel) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	10	PKG			NO AWARD	*
1841 1 210-80-0872	Tetanus Diphtheria and accelular Pertussis (TDaP) (Boostrix) Single Dose Vial including any applicable Federal Excise Tax (FET) 10 Vials/Package	10	PKG			NO AWARD	*
(TBD) 1 210-80-0872S	Tetanus, diphtheria and acellular pertussis single dose syringe including any applicable Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Boostrix) (no substitution) 5 syringes/package	Syr. 5	PKG	60	164.59	GLAXO 58160-0842-46	
6519 1 210-80-0874	Tetanus Diphtheria and accelular Pertussis (TDaP) (Adacel) Single Dose Vial including any applicable Federal Excise Tax (FET) 10 Vials/Package	10	PKG			NO AWARD	*
(TBD) 1 210-80-0874S	Tetanus,Diphtheria and acellular Pertussis Single dose syringe including any applicable Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Adacel) 5 syringes / package	Syr. 5	PKG			NO AWARD	*
10570 1 210-80-1144 V	Tetanus Toxoid (No Tubex) adsorbed 5LF units Single Dose Vial including Federal Excise Tax (FET)	10	VL			NO AWARD	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
14810 1 210-80-1330	Hepatitis A Vaccine, Inactivated, Pediatric/Adolescent 25U/0.5ml (Vaqta) Single Dose Vial	10	VL			NO AWARD	
269-80-50-420-8 1 210-80-1333 V	Hepatitis A Vaccine, Inactivated, Adult 50U/1ml (Vaqta) Single Dose Vials	1 ml 1	VL			NO AWARD	
6639 1 210-80-1337 V	Hepatitis A Vaccine, Inactivated, Pediatric 720 EL.U/0.5ml (Havrix). (No Subsititution), Vial	0.5 ml 10	VL			NO AWARD	*
6640 1 210-80-1339 S	1440 EL.U/ml Hepatitis A Vaccine, Inactivated (Havrix) Adult w/ 1ml Disposable Tip-Lok Syringe	Each 5	SYR			NO AWARD	*
1688 1 210-80-1339 V	Hepatitis A Vaccine, Inactivated (Havrix) Adult 1440 EL.U/ml, 10 single-dose vials	1 ml 10	VL	60	263.70	GLAXO 58160-0826-11	
1690 1 210-80-1342	Hepatitis B Vaccine - Recombinant Adolescent/ Infant (Recombivax HB) 5mcg/0.5ml, Single Dose Vial (No Substitution) including Federal Excise Tax	10	PKG	60	240.16	MERCK 00006-4981-00	
1691 1 210-80-1345	Hepatitis B Vaccine - Recombinant (Engerix B) 20mcg/ml, Single Dose 1 ml Vial (No Substitution) including Federal Excise Tax (FET)	1 ml 10	VL			NO AWARD	*
6644 1 210-80-1345A	Hepatitis B Vaccine - Recombinant (Engerix B) 20mcg/ml, Syringes (No Substitution) incl. Federal Excise Tax (FET)	5	PKG			NO AWARD	

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1692 1 210-80-1347 A	Hepatitis B Vaccine - Recombinant (Engerix B) 10mcg/0.5ml, Pediatric Syringes (No Substitution) including Federal Excise Tax (FET)	5	PKG	60	123.95	GLAXO 58160-0820-51	
6642 1 210-80-1347 V	Hepatitis B Vaccine - Recombinant (Engerix B) 10mcg/0.5ml, Pediatric Single Dose Vial (No Substitution) including Federal Excise Tax (FET)	10	PKG			NO AWARD	*
6641 1 210-80-1352 S	Hepatitis A Inactivated & Hepatitis B Recombinant (Twinrix) (No Substitution) 720EL.U/ml Syringes including Federal Excise Tax (FET)	5	PKG			NO AWARD	*
1689 1 210-80-1352 V	Hepatitis A Inactivated & Hepatitis B Recombinant (Twinrix) (No Substitution) 720EL.U/ml Vial including Federal Excise Tax (FET)	10	PKG			NO AWARD	*
1842 1 210-80-1355	Haemophilus b Conjugate and Hepatitis B Vaccine (COMVAX) 10 Single Dose 0.5ml Vials including Federal Excise Tax. Must have expiration date of at least one (1) year from delivery date(No Substitution)	10	PKG			NO AWARD	
11944 1 210-80-1357	Hib - Haemophilus Influenza B (Hib), (PedVax) Single Dose Vial including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date (No Substitution)	10	(drp shp non return) PKG			NO AWARD	

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
10571 1 210-80-1357 A	Hib - Haemophilus Influenza B (Hib), (ActHib) Single Dose Vial including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date (No Substitution)	5	PKG			NO AWARD	*
269-80-49-150-5 1 210-80-1358	Preservative Free Hib titer - Haemophilus Influenza B (Hib), (HibTiter) Single Dose Vials including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date (No Substitution)	5	BOX			NO AWARD	
6697 1 210-80-1440	Measles, Mumps & Rubella Virus Vaccine Live, Box of 10 Single Dose 0.5ml Vials w/ necessary diluent and including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date	10	BOX			NO AWARD	*
1695 1 210-80-1447	Meningococcal Polysaccharide Vaccine 10 Dose Vial w/diluent.	10 dose 1	VIAL			NO AWARD	
19542 1 210-80-1447V	Meningococcal Polysaccharide Vaccine Single Dose Vial w/diluent.	5	(non return) PKG			NO AWARD	
19540 1 210-80-1447U	Meningococcal Polysaccharide Vaccine Individual Vial w/diluent.	1 dose 1	(non return) VL	60	113.29	SANOFI PASTEUR 49281-0489-01	

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
10572 1 210-80-1449 V	Meningococcal Conjugate (Groups A, C, Y and W-135) (Menactra) Single Dose Vial including any applicable Federal Excise Tax (FET) 5 Vials/Package	5	(non return) PKG			NO AWARD *
10573 1 210-80-1482	Inactivated Polio Vaccine (IPV) 10 Doses/Pkg. including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from delivery date.	(Vial) 10 dose 1	VL			NO AWARD
10575 1 210-80-1520 V	Rabies Vaccine (Imovax) adsorbed 2.5IU/ml Vial	1 ml 1	VL	260	225.73	SANOFI PASTEUR 49281-0250-51
14811 1 210-80-1521	Rabies Vaccine 2.5 IU, Powder for Inj (RabAvert)	1 ml 1	PKG	182	185.18	NOVARTIS 63851-0501-01
11945 1 210-80-1540	HPV - Quadrivalent Human Papillomavirus Types 6, 11, 16, and 18 Recombinant Single-dose Vials (Gardasil)	10	PKG	60	1,354.83	MERCK 00006-4045-41
11946 1 210-80-1540S	Papillomavirus Vaccine Quadrivalent Human (Gardasil), Syringe	1	SYR	60	125.58	MERCK 00006-4109-31
6698 1 210-80-1545 A	Pneumococcal Vaccine Polyvolent. 0.5cc Disp. Vial. Must have exp. date of at least one (1) year from date of delivery. 10 Vial/Pkg.	10	PKG			NO AWARD

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
269-80-70-075-6 1 210-80-1546 V	Pneumococcal Vaccine Polyvalent. 5 Doses/Vial. Must have expiration date of at least one (1) year from date of delivery.	5 dose 1	VL	60	310.29	MERCK 00006-4739-00
1696 1 210-80-1547 S	Pneumococcal 7-valent Conjugate Vaccine (Prevnar) Single Dose Syringe. Must have expiration date at least one (1) year from date of delivery.	Syr. 10	PKG			NO AWARD
14812 1 210-80-1569	Rotavirus, Oral, Pentavalent 2ml Single-dose Tubes (Rotateq)	10	PKG			NO AWARD *
(TBD) 1 210-80-1570	Rotavirus vaccine live single dose vials including any applicable Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Rotarix) (no substitutions) 10 vials/package	Vial 10	PKG			NO AWARD
269-80-84-600-5 1 210-80-1590	Combo (ProQuad) Single Dose Vial including any applicable Federal Excise Tax. Typhoid Vaccine, Single Dose Ampule	1 dose 1	EACH			NO AWARD
6699 1 210-80-1590 A	Typhoid Vaccine, Capsules	4	PKG	45	32.00	BERNA 58337-0003-01
6700 1 210-80-1600	Varicella (Chicken Pox) Vaccine (Varivax), Single Vial w/diluent and including Federal Excise Tax (FET) 10 Vials/Package	10	(drop ship) PKG			NO AWARD

* To advise of termination for convenience of line item, effective 10/22/12. Thereafter, item will be available to order on Contract Number RS900613, Index No. LDC102.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
6766 4 210-84-1100	Tretinoin (Retin-A) Cream 0.1%, Tube	20 gm 1	TB	75	15.14	ROUSES POINT 43478-0241-20	
1714 4 210-84-1101	Tretinoin (Retin-A) Cream 0.05%, Tube	20 gm 1	TB	75	13.98	ROUSES POINT 43478-0242-20	
6769 4 210-84-1102	Tretinoin (Retin-A) Gel 0.025%, Tube	15 gm 1	TB	75	10.22	ROUSES POINT 43478-0244-15	
1715 4 210-84-1103	Tretinoin (Retin-A) Gel 0.01%, Tube	15 gm 1	TB	90	12.90	ROUSESPOINT 43478-0245-15	
6436 4 210-84-1209	Aluminum Sulfate/ Calcium Acetate Packets (Domeboro)	UD 12	PKG			NO AWARD	
6778 4 210-84-1210	Aluminum Chloride 20% w/ DAB Applicator (Drysol)	35ml 1	BTL			NO AWARD	
2516 4 210-84-1275	Douche, Antisept Vinegar/Water (Massengill) Disp.Twin Pack	2-Btl 1	PKG	170	1.45	GLAXO SMITH KLINE 05310-0520-62	
6776 4 210-84-1600	A & D Whites Ointment, Tube	2 oz 1	TB	220	2.18	FOUGERA 00168-0035-01	*

* To advise of price increase effective for orders issued on or after September 29, 2012.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
27	09/24/12	To advise of changes in price, termination for convenience of selected items, and other changes as indicated herein.
26	08/31/12	To advise of change in price, as indicated herein.
25	08/28/12	To advise of changes in price and other changes, as indicated herein.
24	08/06/12	To advise of changes in price and award status, as indicated herein.
23	07/06/12	To advise of award of product with the addition of one (1) contractor, change in award status and other changes, as indicated herein.
22	06/12/12	To advise of changes in price and award status, as indicated herein.
21	04/30/12	To advise of changes in price, award status, and addition of Item ID numbers, as indicated herein.
20	04/25/12	To advise of renewal of the contract for an additional eleven (11) months, with the exception of three (3) contractors, and other changes, as indicated herein.
19	04/01/12	To advise of renewal of the contract for an additional one (1) month and changes in award status for items and other changes, as indicated herein.
18	03/09/12	To advise of price increase on products and change in NDC numbers, as indicated herein.
17	02/17/12	To add the supplemental Bid No. OT904412 to the contract, as indicated herein.
16	1/25/12	To advise of price increase on products, discontinued items, and other changes as indicated herein.
15	12/5/2011	To advise of price increase on products, as indicated herein.
14	10/21/11	To advise of price increase on products, as indicated herein.
13	09/29/11	To advise of renewal of the contract for an additional six (6) months, with the exception of three (3) contractors and selected items, change in contractor contact information, and other changes as indicated herein.
12	09/19/11	To advise of changes in price, as indicated herein.
11	08/13/11	To advise of changes in price and award status, as indicated herein.
10	07/29/11	To advise of changes in price and award status, as indicated herein.
9	06/29/11	To advise of price changes, discontinued items, and other changes, as indicated herein.
8	05/03/11	To advise of price changes, discontinued items, correction, and changes as indicated herein.
7	04/01/11	To advise of price increase on products, as indicated herein.
6	03/10/11	To advise of renewal of the contract for an additional six (6) months and changes in award status for items, as indicated herein.
5	12/16/10	To advise of award of products with the addition of one (1) contractor, re-award of product, and changes as indicated herein.
4	12/06/10	To advise of award of products with the addition of two (2) contractors, as indicated herein
3	11/03/10	To advise of award of products and a change in contractor's contact person information, as indicated herein.
2	10/13/10	To add the supplemental Bid No. OT901611 to the contract with the addition of one (1) contractor and to advise of changes, as indicated herein.
1	10/01/10	To add the supplemental Bid No. OT901511 to the contract with the addition of three (3) contractors and to advise of changes, as indicated herein.