

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

AMENDMENT FOR CHANGE
AMENDMENT NO. 2

TO: LIMITED DISTRIBUTION - Department of Mental Health, Office of Support Services, 2150 West Broad Street, Columbus, Ohio 43223 and to Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, Ohio 43229

FROM: HUGH QUILL, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES

SUBJECT: TERM CONTRACT - INFLUENZA VACCINE 2010-2011

This amendment is issued to advise of award of products with the addition of Part B to the contract, and grammatical and other changes, as indicated herein.

Attached are pages 2, and 24 through 51 to this contract. Remove these pages from the existing contract and replace with/ add the attached pages on the effective and/or revision date.

All other prices, terms and conditions remain unchanged.

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

Terry Spiropoulos
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):

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

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* To advise of change in Table of Contents.

CONTRACTOR INDEX

CONTRACTOR AND TERMS

131828
Sanofi Pasteur Inc.
Discovery Drive
Swiftwater, PA 18370

REMITTANCE ADDRESS:
Sanofi Pasteur Inc.
12458 Collections Center Drive
Chicago, IL 60693

CONTRACTOR'S CONTACT: Jill Bingham

BID/CONTRACT REFERENCE # (Sanofi Pasteur): - 420368

BID CONTRACT NO.: SA901110-1 (12/31/10)

DELIVERY: Orders completed by 10/31/10

TERMS: 2%,30 Days, Net 31 Days

Toll Free: (800) 822-2463
Telephone: (570) 957-3486
FAX: (570) 957-3272

E-mail: jill.bingham@sanofipasteur.com

Contractor's preferred method of receiving purchase orders: FAX: (570) 957-0940 SEE NOTE BELOW

NOTE: Additional savings may be available for orders placed through Sanofi Pasteur's website at: www.vaccineshoppe.com and through Fluzone Partners Program. Sanofi Pasteur Inc.'s Bid/Contract #420368. Orders must be placed no later than March 31, 2010.

ITEM ID NO.: 4474 - Freight charges on orders totaling less than \$300.00.

* To advise of correction in Page Number.

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* Indicates Summary of Amendments information moved to end of document, page 51.

PART B

STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICE
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395PRIMARY CONTRACT No.: **SA901110**

INFLUENZA VACCINE 2010-2011

The Department of Administrative Services hereby gives Notice of its acceptance of your bid submitted in response to Invitation to Bid No. OT906910 that opened on 04/14/10. Your company has been determined to be the lowest responsive and responsible and has been awarded a Contract for the item(s) listed therein. The bid response, to include the [Terms and Conditions for Bidding, Standard Contract Terms and Conditions, and Supplemental Contract Terms and Conditions](#), special contract terms & conditions, any bid addenda, specifications, pricing schedules and any attachments incorporated by reference and accepted by DAS become a part of this Supplemental Requirements Contract. As indicated in the Invitation to Bid, any award(s) resulting from this bid will be incorporated into the above referenced Primary Requirements Contract. In the event that any of the terms, conditions or specifications of the Requirements Contract differ, the terms, conditions or specifications of this Supplemental Requirements Contract shall prevail.

This Supplemental Requirements Contract is effective beginning 04/30/10 and will expire on 12/31/10 unless, prior to the expiration date, the Contract is renewed, terminated or cancelled in accordance with the Contract Terms and Conditions.

This Supplemental Requirements Contract is available to Department of Mental Health, Office of Support Services, 2150 West Broad Street, Columbus, Ohio 43223 and to Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, Ohio 43229, as applicable.

Agencies are eligible to make purchases of the listed supplies and/or services in any amount and at any time as determined by the agency. The State makes no representation or guarantee that agencies will purchase the volume of supplies and/or services as advertised in the Invitation to Bid.

Questions regarding this Supplemental Requirements Contract may be directed to:

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

The signed Supplemental Requirements Contract and Amendment(s) thereto, are available for review at and/or downloading from the DAS Web site at the following address:



<http://www.ohio.gov/procure>

Signed: _____ Date _____
Hugh Quill, Director

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SPECIAL INSTRUCTIONS TO BIDDERS

MANDATORY REQUIREMENTS: Bidders are responsible to ensure they submit ALL mandatory requirements with their Invitation to Bid (ITB) submittals. In the case where the Bidder does not submit one or more of the mandatory requirements with their ITB submittal, the Bidder will be deemed not responsive. As a result, the ITB submittal will be immediately disqualified with no further consideration given for potential awarding of the Contract for the ITB. The Bidder is strongly encouraged to carefully read this ITB, check, and re-check as needed to ensure the mandatory requirements are completely met and submitted.

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS: The following Amendments to the Contract Terms and Conditions do hereby become a part hereof. In the event that an amendment conflicts with the Contract Terms and Conditions, the Amendment will prevail.

SUPPLEMENTAL BID: Any award made as a result of this bid will become a part of Contract No. SA901110 effective 04/28/10.

MANDATORY/REQUIRED SUBMISSIONS: Mandatory submissions must be included with the Invitation to Bid (ITB) submittal. Required documentation/materials should be submitted with the ITB submittal. If not submitted with the ITB submittal, the Bidder must provide the said required documentation/materials within five (5) business days after notification, to the Office of Procurement Services. Failure to provide mandatory submissions with the ITB submittal or failure to provide the required documentation/materials, as applicable, within the stated time period will result in the Bidder being deemed not responsive and the ITB submittal will be immediately disqualified with no further consideration given for potential awarding of the Contract. For specific submission requirements, bidders should refer to MANDATORY SUBMISSION - BIDDER QUALIFICATIONS below, Specifications, Section V, "Documentation", Page 11, and the Bid Submission Check List on Page 20 for a listing of those mandatory submissions due with the ITB submittal and required submissions that should be included with the ITB submittal, but which do not become mandatory until requested by DAS.

MANDATORY SUBMISSION - BIDDER QUALIFICATIONS: Bidders must provide the following mandatory submissions with their Invitation to Bid (ITB) submittal, Items A through G below:

- A. Page 1 (cover page) of this Invitation to Bid (ITB), completed, with original signature and per instructions.
- B. Bidders shall complete the Item Price Pages on Pages 17 through 19 of this Invitation to Bid (ITB) and submit them with their ITB submittal, for each line item being offered. Bidders shall indicate on the Item Price Pages for each item offered in the spaces provided; the 1) Item Offered, 2) Manufacturer Name and Plant Location, 3) Unit (if applicable), 4) N.D.C. Number for each item offered (if established), and 5) Price Per Unit (including Federal Excise Tax). If the N.D.C. number of the item is not yet established, Bidder should attach the manufacturer's descriptive literature to identify the exact product being offered. Items offered by bidders in the ITB will be the same products supplied, upon award of any ensuing contract.
- C. Bidders shall complete and submit the AUTOMOBILE LIABILITY INSURANCE REQUIREMENTS AND CHECKLIST below on Page 14 of this ITB.
- D. Bidders shall complete and submit the DISCLOSURE OF SUBCONTRACTORS / JOINT VENTURES on Page 14 of this ITB.
- E. **REQUIRED CERTIFICATION FOR BIDDING, PAGE 2** of this ITB: Page 2 of this ITB must be submitted with the ITB submittal. For qualification, Section B only must be completed to be eligible for domestic Ohio preference (Buy Ohio/Border State status). The information will be used to determine the Buy Ohio/Border State status of the Bidder. Failure to submit a Required Certification For Bidding, Page 2 with the ITB submittal will deem the Bidder not responsive and no further consideration for award will be provided.

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS (Cont'd.)

- F. Bidders shall complete the OHIO LICENSE section on Page 10 of this ITB and attach a copy of their Ohio Wholesale Distributor of Dangerous Drug License.
- G. Bidders shall complete, execute, and submit with their bid the notarized CERTIFICATE on Page 13 of this ITB. Failure to submit the certificate, notarized by a notary public with an official seal, may deem the Bidder not responsive and no further consideration for award will be provided.

Invitation to Bid (ITB) submittals are due on the date and time specified on Page 1 of this ITB as denoted by "OPENING DATE". For more information, and in addition to the items A through G listed above, see Specifications, Section V, "Documentation", Pages 11 through 12, and the Bid Submission Check List on Page 20 of this Invitation to Bid (ITB).

DESCRIPTIVE LITERATURE: The Bidder may be required to submit descriptive literature of the supplies and/or services being offered. If requested, the literature will be used in the evaluation process to determine the lowest responsive and responsible bidder. If not provided as part of the bid response, the Bidder must provide said literature within ten (10) calendar days after request/notification by the Office of Procurement Services to do so. Any references, that may appear in the descriptive literature, that may alter the terms and conditions and specifications of the bid (i.e. F.O.B. Shipping Point or Prices Subject to Change), will not be part of any contract and will be disregarded by the state of Ohio. Failure of the bidder to furnish descriptive literature either as part of their bid response or within the time specified herein will deem the bidder not responsive.

SPECIFICATION QUESTIONS: Information regarding submission of questions and clarifications for this bid is provided on page one (1) of the bid. Through the indicated inquiry closure date, bidders may visit the State Procurement website to post bid related questions at <www.ohio.gov/procure>. Answers to all bidder questions will be posted on the State Procurement website and linked to the bid number. The State will make every effort to respond to website inquiries within forty-eight (48) hours of receipt. The State will not respond to any verbal or written questions received through any other medium. No prospective bidder shall respond to any verbal instructions or changes to this bid. Only bid communications, issued by the Ohio Department of Administrative Services, Office of Procurement Services, in a public, published format, will be considered valid.

DELIVERY AND ACCEPTANCE: Vendor shall acknowledge all purchase orders within ten (10) days after receipt. All merchandise shall be shipped in accordance with required delivery/receipt dates as specifically stated in the purchase order and for store door delivery. Supplies will be delivered to the participating agency, in accordance with paragraphs S-8, S-9, and S-10 of the SUPPLEMENTAL CONTRACT TERMS AND CONDITIONS. Any item(s) ordered from a contract awarded pursuant to this bid shall be shipped F.O.B. destination, freight prepaid. Shipment shall be made to Ohio Department of Mental Health, Office of Support Services, 2150 West Broad Street, Columbus, Ohio 43223 and to the Ohio Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, Ohio 43229, unless otherwise indicated herein. Delivery quantities and dates may be adjusted by mutual agreement between the Agency and Contractor. Acceptance (transfer of title) will occur upon the inspection and written confirmation by the ordering agency that the supplies delivered conform to the requirements set forth in the Contract. Unless otherwise provided in the Contract, acceptance shall be conclusive except as regards to latent defects, fraud, or such gross mistakes as amount to fraud.

For Item Numbers 210-80-1359V-DS and 210-80-1360V-DS only, the following exceptions to the above Delivery and Acceptance terms and conditions shall apply: As indicated on the purchase order issued by the Ohio Department of Health (ODH), supplies will be delivered to among approximately 250 dispensing provider office locations within the state of Ohio. Delivery quantities, dates, and locations may be adjusted by mutual agreement between the ODH and Contractor. The ODH shall reserve the right to adjust the delivery location of the purchase order before shipment occurs. Acceptance (transfer of title) will occur upon the inspection and written confirmation by the receiving dispensing provider, or the ODH, that the supplies delivered conform to the requirements set forth in the Contract. Unless otherwise provided in the Contract, acceptance shall be conclusive except as regards to latent defects, fraud, or such gross mistakes as amount to fraud.

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS (Cont'd.)

EVALUATION: Bids will be evaluated in accordance with Article I-17 of the "Instructions to Bidders". In addition, the State will multiply the unit cost by the estimated usage specified in the bid for each line item to arrive at a total for each line item. If the estimated usage is unknown, then one (1) will be used as the estimated usage, for calculation purposes only.

CONTRACT AWARD: The contract will be awarded to the lowest responsive and responsible bidder by line item, meeting all bid specifications and requirements listed herein.

FIRM FIXED-PRICE CONTRACT: The contract is a Firm Fixed-Price Contract. The Contractor(s) is required to provide to the using agency supplies or services at the listed price(s) for the duration of the contract, and any extensions thereto.

USAGE REPORTS: Every six (6) months the contractor must submit a report (written or on disk) indicating sales generated by this contract. The report shall list usage by customer, by line item, showing the quantities/dollars generated by this contract. The report shall be forwarded to the Office of Procurement Services, 4200 Surface Road, Columbus, OH 43228-1395, Attn: Terry Spiropoulos.

MINIMUM ORDER: No order shall be placed against a contract awarded pursuant to this bid for less than twenty-five (\$25.00) dollars. The minimum dollar value any of order placed against a contract awarded pursuant to this bid for delivery F.O.B. destination, transportation charges prepaid, at any one time to one destination, shall not be less than three hundred (\$300.00) dollars.

OHIO LICENSE: All bidders must hold a current Ohio Wholesale Distributor of Dangerous Drug License if the products offered are dangerous (legend) drugs. Failure to list a current Ohio Wholesale Distributor of Dangerous Drug License on Page 10 indicates that the bidder is not appropriately licensed to sell dangerous drugs in the state of Ohio and will result in the bidder being deemed as not responsive.

SPECIAL CONDITIONS: The Director, Department of Administrative Services reserves the right to bid large or unusual requirements, for items that may be a part of the awarded contract, under a separate bid. The State may elect to participate in any Centers for Disease Control (CDC) contract that may be available to the Ohio Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, Ohio 43229.

PLACEMENT OF ORDERS: Purchase orders for any item(s) listed in a contract awarded pursuant to this bid will be placed directly with the successful contractor(s) by the using agency. No order shall specify delivery to exceed thirty (30) days beyond the expiration and/or cancellation date of the contract.

RETURN GOODS: All bidders are requested to submit their company's policy on Returned Goods with their bid.

FEDERAL TAXPAYER IDENTIFICATION FORM W-9 - Notice to Bidders: All bidders should download a Federal Request for Taxpayer Identification Number and Certification W-9 Form and submit it as part of their Invitation to Bid (ITB) submittal. The W-9 form must be completed and must display an original signature. Copied or stamped signatures are not acceptable.

To download the W-9 form from your internet explorer:

- type: <http://www.irs.gov>
- under Forms and Publications, select Form W-9
- download and print the PDF file

This completed form should be returned as part of the ITB submission. Failure to submit a completed W-9 Form may deem the Bidder not responsive. This requirement applies to all bidders: Bidders who have not previously done business with the State as the awardee of an Office of Procurement Services competitively bid Invitation to Bid, Request for Proposal, or State Term Schedule and also to currently awarded contractors as well. The DAS Central Accounting System requires that all contractor W-9 forms be periodically updated by submission of a new form.

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS (Cont'd.)

If a current W-9 is not provided with the ITB submission the Bidder will have five (5) business days after request / notification by the Office of Procurement Services to do so. Failure of the Bidder to furnish the said information either as part of their ITB submission or within the time specified herein will deem the Bidder not responsive.

AFFIRMATIVE ACTION PROGRAM VERIFICATION: The Ohio Revised Code (ORC) requires all contractors from whom the State or any of its political subdivisions make purchases have a written affirmative action program for the employment and effective utilization of economically disadvantaged persons. An Affirmative Action Program Verification Form must be submitted to the Equal Opportunity Division to comply with the affirmative action requirements pursuant to the Ohio Revised Code 125.111(B). The form verifies the company's commitment to implement steps to ensure equal employment opportunity within their organization. Prior to the award of a contract a prospective vendor must have filed verification with the state of Ohio EOD that the contractor has a written affirmative action program. Verifications may be submitted online at the following URL: <http://das.ohio.gov/Divisions/EqualOpportunity/AffirmativeActionProgramVerification/tabid/133/Default.aspx>

For questions or help with filing a Verification, please contact the Affirmative Action/EEO Unit at (614) 466-8380. Prospective vendors should submit with their bid a copy of the Affirmative Action Program Verification letter of approval, showing that they have an Affirmative Action Program on file with the state of Ohio DAS/EOD. A copy of the letter of approval may be obtained at the following URL:
<http://odnapps01/das-eod/BMSWEBAAVP.nsf/B2AEE95274ADF1028525735A005C938D>

If said information is not provided with the Invitation to Bid (ITB) submission, the Bidder will have five (5) business days after request/notification by the Office of Procurement Services to do so. Failure of the Bidder to furnish the said information either as part of their ITB submittal or within the time specified herein may deem the Bidder not responsive.

INSURANCE REQUIREMENTS: Bidders should provide, with their Invitation to Bid (ITB) submittal, documentation of the following insurance coverage, as required by the Supplemental Contract Terms and Conditions, Articles S-12 and S-13 (refer to the ITB Page 1, link to [Instructions: Terms and Conditions for Bidding, Standard Contract Terms and Conditions, and Supplemental Contract Terms and Conditions](#)):

1. Ohio Bureau of Workers' Compensation Certificate or in the case of non-state of Ohio bidders, proof of workers compensation insurance in your state of domicile.
2. Employer's Liability (Stop Gap) insurance with limits of not less than one million (\$1,000,000.00) dollars.
3. Automobile Liability with limits in accordance with Federal and State laws.
4. Commercial General Liability (CGL) Insurance:
 - a. Limits of \$500,000.00 per occurrence.
 - b. Limits of \$1,000,000.00 annual aggregate.
 - c. To be compliant, the CGL policy must include the following three endorsements:
 - 1) a blanket waiver of subrogation.
 - 2) a statement that the Contractor's CGL coverage is primary over any other coverage.
 - 3) designate the state of Ohio as an additional insured.

If the Bidder does not currently carry the amounts of coverage and/or the required endorsements specified above, the Bidder should provide a letter from their insurance company stating that the Bidder's coverage will be increased to the specified amounts and/or the required endorsements will be added to the policy upon award of the ensuing Contract. The letter from the insurance company should also be submitted with the ITB submittal. If a compliant insurance certificate is not provided with the ITB submittal, the Bidder will have five (5) business days after request / notification by the Office of Procurement Services to do so. Failure of the Bidder to furnish the said information either as part of their ITB submittal, or within the time specified herein, will deem the Bidder not responsive and no further consideration for award will be provided.

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS (Cont'd.)

INSURANCE DOCUMENTS: Upon the policy renewal date, the contractor must submit, within thirty (30) days, updated insurance documents showing compliance with all applicable coverages required by this contract. As required, the documents must include a current Workers' Compensation Certificate and an Acord Certificate of all applicable insurance coverages and must include all required Commercial General Liability endorsements as described in Articles S-12 and S-13 of the Supplemental Contract Terms and Conditions of this contract.

Failure to maintain compliant insurance coverage per Article S-12 and S-13 of the Supplemental Contract Terms and Conditions will be considered a default and will be cause for cancellation of the contract under the Standard Contract Terms and Conditions, Section I, Item C, Part 1.

These documents shall be forwarded to the Office of State Purchasing, 4200 Surface Road, Columbus, OH 43228-1395, Attn: Terry Spiropoulos (E-Mail: terry.spiropoulos@das.state.oh.us).

Failure to maintain compliant insurance coverage per Article S-12 and S-13 of the Supplemental Contract Terms and Conditions will be considered a default and will be cause for cancellation of the contract under the Standard Contract Terms and Conditions, Section I, Item C, Part 1.

These documents shall be forwarded to the Office of State Purchasing, 4200 Surface Road, Columbus, OH 43228-1395, Attn: Terry Spiropoulos (E-Mail: terry.spiropoulos@das.state.oh.us).

STATE OF OHIO OFFICE OF BUDGET MANAGEMENT ELECTRONIC FUNDS TRANSFER PAYMENTS PROGRAM: The awarded contractor should consider registering for the state of Ohio, Office of Budget Management's Electronic Funds Transfer Payments program. By registering and participating in this program, contractors reduce costs for both the contractor and state of Ohio and insure that payments for goods or services are transmitted promptly and accurately. To register for this program, go to: <http://ohiosharedservices.ohio.gov/Vendors.aspx?Page=2> . Under Ohio Shared Services Vendor and Accounts Payable Forms, download and print form, "Authorization Agreement for Direct Deposit of EFT Payments (OBM-1234) (PDF Version)", review, complete, sign and submit it in accordance with the instructions on the form.

SPECIFICATIONS

I. SCOPE AND CLASSIFICATION:

- A. Scope: The State of Ohio, Department of Administrative Services, Office of Procurement Services, on behalf of the Ohio Department of Health and the Ohio Department of Mental Health, is seeking bids for Influenza Vaccines, 2010-2011 year. Products shall be delivered FOB destination, prepaid, as specified in the paragraph, "Delivery and Acceptance." This procurement of Influenza Virus Vaccine shall be compliant with the specifications and requirements listed herein. The term of any contract issued pursuant to this ITB shall be approximately eight (8) months from April 28, 2010 through December 31, 2010.
- B. Classification
1. Influenza Virus Vaccine, Inactivated, Trivalent Split, to include the Antigens as formulated in accordance with the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year.
 2. Influenza Virus Vaccine Live Attenuated, Intranasal Spray, to include the Antigens as formulated in accordance with the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year.

SPECIFICATIONS ((Cont'd.))

II. APPLICABLE DOCUMENTS

- A. Applicable section(s) of Food, Drug, and Cosmetic Act
- B. Applicable section(s) of the Code of Federal Regulations, Title 21
- C. Applicable section(s) of the Ohio Pure Food, Drug, and Cosmetic Law, ORC Chapter 3715
- D. Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book), FDA Publication

III. REQUIREMENTS

A. Products

1. Item Number #210-80-1359 V: This item was previously awarded under Bid/ Qualification Summary Number #SR901110 and is listed here for reference only. This item is NOT available for bidding and NOT part of this Invitation to Bid for bidding purposes.
2. Item Number #210-80-1359 S: This item was previously awarded under Bid/ Qualification Summary Number #SR901110 and is listed here for reference only. This item is NOT available for bidding and NOT part of this Invitation to Bid for bidding purposes.
3. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult No Preservative Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Single-Dose, 0.5 ml Pre-Filled Syringes (packaged in boxes of 5 or 10 Pre-Filled Syringes / box).
Item Number #210-80-1360 S.
4. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Non-Returnable, 10-Dose, 5 ml Vials.
Item Number #210-80-1360 V.
5. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Non-Returnable, 10-Dose, 5 ml Vials.
Item Number #210-80-1361 V.
6. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult Preservative Free Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Single-Dose, 0.5 ml Pre-Filled Syringes (packaged in boxes of 10 Pre-Filled Syringes / box).
Item Number #210-80-1361 S.

SPECIFICATIONS ((Cont'd.))

7. Item Number #210-80-1359: This item was previously awarded under Bid/ Qualification Summary Number #SR901110 and is listed here for reference only. This item is NOT available for bidding and NOT part of this Invitation to Bid for bidding purposes.
 8. Influenza Virus Vaccine, Live Attenuated, Intranasal Spray, licensed for administration to ages 2-49 years, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Single-Use, 0.2 ml Sprays (packaged in boxes of 10 Single-Use Sprayers / box).
Item Number #210-80-1361.
 9. Item Number #210-80-1359V-DS: This item was previously awarded under Bid/ Qualification Summary Number #SR901110 and is listed here for reference only. This item is NOT available for bidding and NOT part of this Invitation to Bid for bidding purposes.
 10. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Non-Returnable, 10-Dose, 5 ml Vials.
Directly shipped to dispensing provider offices within Ohio.
Item Number #210-80-1360V-DS.
 11. Influenza Virus Vaccine, Inactivated, Trivalent Split, Adult High-Dose Preservative Free Formulation, licensed for administration to ages 65 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), in Single-Dose, 0.5 ml Pre-Filled Syringes (packaged in boxes of 10, or less, Pre-Filled Syringes / box). (Example: Sanofi Pasteur Fluzone High-Dose, or equivalent).
Item Number #210-80-1358 S.
- B. Use: All types of pharmaceuticals and chemicals, as listed herein, shall be suitable for human medicinal use.
- C. Compliance: Manufacturing firms of the supplied items shall adhere to the most updated regulations under the Federal Food, Drug, and Cosmetic Act, embodied in "Drugs: Current Good Manufacturing Practice in manufacture, processing, packaging, or holding"; and Part 210 and 211, Title 21 Code of Federal Regulations, Food and Drugs.
- For all items, with FDA required 'New Drug Applications' or 'Abbreviated New Drug Applications', manufacturers shall hold an NDA or ANDA, which shall be in effect at the time of the bid. Bidders may be required to submit a copy of the NDA or ANDA approval letter or approval number and date of approval before or during the contract award.
- D. Change of Source(s): The successful bidder(s) shall not change, unless approved by the State in writing, the manufacturing source(s) from which they specified in their bid. Failure to comply with this requirement may subject the resulted contract to cancellation.

SPECIFICATIONS ((Cont'd.))

- E. Special Charges: There shall be no assessment, surcharge, small order charge, broken case charge, minimum order charge, single item charge nor any other unspecified additional charge allowed by the State that is not specifically mentioned in this bid or in any contract awarded pursuant to this bid. The contractor must provide merchandise/service in unit quantity(s) as indicated in the bid/bid response/contract.
- F. Return Goods: All bidders are requested to submit their company's policy on Returned Goods with their bid.

IV. CONTRACTOR QUALIFICATIONS

- A. Authorized Distributor: If the bidder is not the manufacturer of the product offered, the bid response should include a letter from the manufacturer, on manufacturer's letterhead, that the bidder is authorized to represent the manufacturer in this bid effort. The letter must guarantee that all requirements of this bid will be supported by the manufacturer to include, at least as a minimum: delivery of product within the specified time frame, proper handling and quality of product delivered, and compliance with all bid specifications.
- B. Ohio License: All bidders must hold a current Ohio Wholesale Distributor of Dangerous Drug License if the products offered are dangerous (legend) drugs. Enter your Ohio Wholesale Distributor of Dangerous Drugs License Number and Expiration Date below and attach a copy of your Ohio license to this page. For more information contact the Ohio State Board of Pharmacy at (614) 466-4143.

Failure to accurately complete this section indicates that the bidder is not appropriately licensed to sell dangerous drugs in the state of Ohio and will result in the bidder being deemed as not responsive.

Please state your Ohio license number: _____

License number expiration date: _____

(Staple a copy of your current Ohio Wholesale Distributor of Dangerous Drug License here.)

SPECIFICATIONS (Cont'd.)

V. DOCUMENTATION:

A. MANDATORY WITH THE INVITATION TO BID (ITB) SUBMITTAL

1. All MANDATORY SUBMISSION – BIDDER QUALIFICATIONS, Items A through G on Pages 3 and 4, with all requested information and all requested documentation submitted.
2. ITB Cover Page, Page 1, with requested information filled-in and submitted with original Authorized Signature (signed in blue ink). Note: This is again Item A, as referenced above.

NOTE: The certification on Page 13 must be notarized

Failure to submit the above documents will deem the Bidder not responsive and no further consideration for award will be provided.

B. REQUESTED WITH THE INVITATION TO BID (ITB) RESPONSE

1. Copy of completed Internal Revenue Service (IRS) form W-9, indicating the Taxpayer Identification Number (TIN).
2. Certificate of Insurance and copy of current Workers' Compensation Certificate (see Supplemental Contract Terms and Conditions, paragraphs S-12 and S-13)
3. Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization (see page 2, paragraph D of the ITB)
4. Returned Good Policy (see Page 10, Specifications, paragraph III.F, of the ITB)
5. Bidders responding to this ITB must be authorized dealers or manufacturers of the products they are bidding. Bidders should submit, with the ITB submittal, certification attesting that they are the manufacturer or an authorized dealer of the manufacturer of the products being bid. This certification must be on the manufacturer's letterhead, signed by a duly authorized manufacturer's representative.
6. Descriptive literature or manufacturer's specification sheets or correct NDC numbers, describing each item being offered, should be submitted with the ITB submittal. Specification sheets should be labeled with the name of the manufacturer, the NDC number, description, indications, and the number of the item bid corresponding to the line item of the item on the Item Price Pages 17 through 19 of this ITB. The state acknowledges that it may receive bids from multiple distributors bidding the same manufacturer's products. In such situations, specification sheets/samples may be submitted by manufacturer(s) on behalf of multiple distributors, provided that such specification sheets/samples are accompanied by written documentation on the manufacturer's letterhead, signed by an authorized representative of the manufacturer, listing the named distributor(s) for whom the specification sheets/samples are provided. Any bidder not appearing on this listing and who have failed to furnish requested specification sheets/samples may be considered not responsive and no further consideration for award will be provided.
7. Bidders should complete and submit with their ITB the BIDDER DISCLOSURE STATEMENTS on Page 15 of this ITB.

SPECIFICATIONS ((Cont'd.))

8. Affirmative Action Program Verification letter of approval. In accordance with a requirement set forth in the Ohio Revised Code (ORC Section 125.111), bidders must complete filing of an Affirmative Action Plan to the Department of Administrative Services (DAS), Equal Opportunity Division (EOD) prior to award of a contract.

The Affirmative Action Program Verification may be filed online, via the Ohio Business Gateway, by using the following web addresses:

<http://www.das.ohio.gov/Divisions/EqualOpportunity/AffirmativeActionProgramVerification/tabid/133/Default.aspx>

<http://www.das.ohio.gov/LinkClick.aspx?fileticket=kVpWauy2c%2fk%3d&tabid=133>

<https://ohiobusinessgateway.ohio.gov/OBG/Membership/Security.mvc/Login>

After the registration process, a copy of the letter of approval may be obtained at the following web address:

<http://odnapps01/das-eod/BMSWEBAAVP.nsf/B2AEE95274ADF1028525735A005C938D>

Search for the company name, click on the name, and a printable copy of the letter of approval should appear. This letter shows verification of filing of Affirmative Action Plan.

You may call the EOD office at 614-466-8380 to inquire, if needed.

If documents listed in paragraphs B.1 through B.8 above are not provided with the ITB submittal, the Bidder will have five (5) business days after request / notification by the Office of Procurement Services to do so. Failure of the Bidder to furnish the said information either as part of their ITB submittal, or within the time specified herein, may deem the Bidder not responsive.

SPECIFICATIONS (Cont'd.)

Each bidder is requested to provide the following information with the bid proposal.

PURCHASE ORDERS AGAINST THIS BID
SHALL BE MAILED TO:

REMITTANCE ADDRESS AGAINST THIS BID
SHALL BE MAILED TO:

FIRM NAME

FIRM NAME

STREET ADDRESS

STREET ADDRESS

CITY & STATE ZIP CODE

CITY & STATE ZIP CODE

CERTIFICATE: Each bidder shall be required to execute the following notarized certificate covering the bid for those items which Bidder proposes to furnish. Failure to execute the certificate will result in the Bidder being deemed as not responsive.

All ingredients used in the preparation of all drugs, chemicals and pharmaceuticals for which we have rendered bids against this bid/contract are tested regularly by chemical assay, biologically and/or physiologically as required. All ingredients comply with U.S.P. requirements or better. All finished products are assayed chemically, biologically and physiologically as required and meet standards or other applicable standards for identity, strength, quality and purity, including potency and where applicable, content uniformity, disintegration times or dissolution rates. All injectable materials are checked for sterility as required. Our standards meet all the minimum requirements of any applicable regulations of the National Institute of Health or the Food and Drug Administration.

A complete record of control is kept covering our test records of all ingredients as received and all products as manufactured and also a record of chemical, biological, physiological and sterility assays of all finished products with a reference file of samples from the batches tested.

Manufacturer or Bidder

By: _____

Title: _____

Date: _____

State of _____

County of _____

On this ____ day of _____, _____ before me a notary public, in authority of his office under the by-laws of the above corporation, stated the above certificate is true and correct.

In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Notary Public

THE ABOVE FORM MUST BE COMPLETED AND SIGNED AND NOTARIZED

SPECIFICATIONS (Cont'd.)

Automobile Liability Insurance Requirements and Checklist:

AUTOMOBILE LIABILITY INSURANCE REQUIREMENTS AND CHECKLIST - Reference: Supplemental Contract Terms & Conditions, Page 10, Paragraph S-13.:

Automobile Liability - Automobile Insurance is required for anyone coming onto State Property to deliver goods or to perform services using a vehicle, which is owned, leased or rented by the Contractor. Any Bidder, Broker, or Subcontractor who will be on State Property, but not delivering goods or performing services, is required to carry Automobile Liability insurance that complies with the State and Federal laws regarding financial responsibility.

Contractor will indicate, by checking the appropriate box(es) below, which mode of transportation will apply to this contract.

- Bidder/Broker ("The Contractor") or their Sub Contractor will make delivery or be performing services using a vehicle that is owned, leased or rented. Provide Certificate of Insurance documenting automobile liability with a Combined Single Limit of \$500,000.00.
- Goods/Services will be delivered via common carrier.
- No employee or representative of the contractor will have cause to be on State property to make deliveries or to perform services.

Disclosure of Subcontractors/Joint Ventures :

DISCLOSURE OF SUBCONTRACTORS / JOINT VENTURES (See Standard Contract Terms and Conditions, Section (roman numeral) V. General Provisions:, Paragraph Q.): Bidders seeking to enter into a supplies contract shall disclose the following:

List names of subcontractors who will be performing work under the Contract. (Use additional sheets if necessary)

By the signature affixed to Page 1 of this Invitation to Bid (ITB), Bidder hereby certifies that the above information is true and accurate. The Bidder agrees that no changes will be made to this list of subcontractors or locations where work will be performed or data will be stored without prior written approval of DAS. Any attempt by the Bidder/Contractor to change or otherwise alter subcontractors or locations where work will be performed or locations where data will be stored, without prior written approval of DAS, will be deemed as a default. If a default should occur, DAS will seek all legal remedies as set forth in the Terms and Conditions which may include immediate cancellation of the Contract. Failure to complete this page may deem your bid not responsive.

SPECIFICATIONS (Cont'd.)

BIDDER DISCLOSURE STATEMENTS: The Bidder must provide a declarative (yes/no) answer, below, regarding the following questions. If any answer is affirmative, the Bidder must provide full details about the matter. While not an automatic cause for disqualification, an affirmative answer may result in an evaluation of the Bidder's responsibility. A decision will then be made based on the seriousness of the matter, the matter's possible impact on the performance of the Contract, and the best interests of the State. Within the past five (5) years:

ITEM	DISCLOSURE STATEMENT	YES	NO
A	Has the Bidder and/or subject company had a contract cancelled for default or cause?		
B	Has the Bidder and/or subject company been assessed any penalties including liquidated damages, under any of its existing or past contracts with any organization or governmental entity?		
C	Has the Bidder and/or subject company been the subject of any governmental action limiting the right of the Bidder and/or subject company to do business with that entity or any other governmental entity?		
D	Has trading in the stock of the subject company ever been suspended? Give date and explanation.		
E	Has the Bidder and/or subject company previously operated as a like-kind business under any other business name and/or taxpayer identification number?		
F	Has the Bidder and/or subject company, any company officer, or any owner of a twenty (20%) percent interest or greater in the subject company, filed for bankruptcy, reorganization, a debt arrangement, moratorium, or any proceeding under any bankruptcy or insolvency law, or any dissolution or liquidation proceeding?		
G	Has the Bidder and/or subject company, any company officer, or any owner of a twenty (20%) percent interest or greater in the company been convicted of a felony or is currently under indictment on any felony charge?		
H	Has the Bidder and/or subject company, any company officer, or any owner of a twenty (20%) percent interest or greater in the company had a finding for recovery action issued by the Ohio Auditor of State for a sum of funds due the state of Ohio?		

By the signature affixed to Page 1 of this Invitation to Bid (ITB), Bidder hereby certifies that the above information is true and accurate. This form should be completed and returned as part of the bid response.

If this document is not provided with the ITB submittal, the Bidder will have five (5) business days after request / notification by the Office of Procurement Services to do so, and this Disclosure Statement document must attached to a signed cover letter, on official company letterhead, with reference to the Bid Number from Page 1 of this ITB. Bidder or Authorized Agent must also sign and date, below, if this form was not submitted with the Bid response. Failure of the Bidder to furnish the said information either as part of their ITB submittal, or within the time specified herein, may deem the Bidder not responsive.

 Signature of Bidder or Authorized Agent

 Date

ITEM PRICE PAGES

NOTICE: Prior to proceeding, bidders should read this Invitation to Bid (ITB) in its entirety, including the Instructions, Terms and Conditions for Bidding, and Standard Contract Terms and Conditions, Supplemental Contract Terms and Conditions, through the link on Page 1, and the MANDATORY SUBMISSION - BIDDER QUALIFICATIONS clause on Pages 3 and 4 of this ITB. Products offered below in your Bid submission will be the same products supplied, upon award of any ensuing contract.

BID UNIT PRICE: Bid prices in the Item Price Page(s) will be per dose. Although the Unit Quantity/package size may vary among items, all bid prices offered by the bidders shall be for one (1) dose including Federal Excise Tax (FET). The purpose for this is to simplify bidding and to eliminate pricing errors. Any contract resulting from this ITB will reflect the correct unit quantity size(s) and corresponding pricing.

MANDATORY INFORMATION REQUIRED WITH YOUR ITB SUBMITTAL: Bidders shall indicate on the following item Price Pages, all of the items they are offering in their Bid submission by indicating the Item Offered, Manufacturer Name and Plant Location, Unit (if applicable), N.D.C. Number, and Price Per Unit, including Federal Excise Tax for each item bid in the columns so labeled. See also "Bid Unit Price", above.

BID SUBMISSION CHECKLIST

Mandatory Submissions – Must accompany the Invitation to Bid (ITB) submittal *

<u>Submitted</u>	<u>Submittal Description</u>	<u>Page Reference</u>
<input type="checkbox"/>	Bid cover page, signed in blue ink *	Page 1
<input type="checkbox"/>	All <u>MANDATORY SUBMISSION - BIDDER QUALIFICATIONS</u> Qualification/Certification Information and Documents as required, per Pages 3 and 4, Paragraphs A through G *	Pages 3 – 4

Required Submittals – Should be submitted with the Invitation to Bid (ITB) submittal, but if not must be submitted within five (5) business days of notification **

<input type="checkbox"/>	Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization (DMA) Form	Page 2 (D)
<input type="checkbox"/>	IRS Federal Taxpayer Identification Form W-9	Page 5
<input type="checkbox"/>	State of Ohio Bureau of Workers Compensation Certificate of Insurance or other appropriate Workers Compensation Insurance Certificate	Page 6
<input type="checkbox"/>	Insurance Requirements ***	Page 6
<input type="checkbox"/>	Copy of Returned Goods Policy	Page 5
<input type="checkbox"/>	Affirmative Action Program Verification Letter of Approval	Page 6

Desirable Submittal(s) – Suggested but not required ****

<input type="checkbox"/>	State of Ohio OBM Form EFT – Direct Deposit Form (OBM-1234) See: <u>STATE OF OHIO OFFICE OF BUDGET MANAGEMENT</u> <u>ELECTRONIC FUNDS TRANSFER PAYMENTS PROGRAM</u>	Page 7
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* Mandatory submissions must be submitted with the ITB response. Refer Bid Pages 3 and 4, MANDATORY SUBMISSION / BIDDER QUALIFICATIONS and MANDATORY/REQUIRED SUBMISSIONS. Failure to submit the above Mandatory submission documents will deem the Bidder not responsive and no further consideration for award will be provided.

** Required documentation/materials should be submitted with the ITB response. If not submitted with the ITB response, the Bidder must provide the said documentation/materials within five (5) business days after notification to the Office of Procurement Services. Failure to submit the above required documentation/materials within the time specified will deem the Bidder not responsive and no further consideration for award will be provided. Refer Bid Pages 3 and 4, MANDATORY/REQUIRED SUBMISSIONS.

*** Submit an Acord Certificate or similar certificate from your insurance agent/carrier showing compliance with the required coverage amounts. (See INSURANCE REQUIREMENTS, Page 6, and the Supplemental Contract Terms and Conditions, Sections S-12 and S-13).

**** Desirable Submittals are those submittals which the state of Ohio DAS Office of Procurement Services recommends be submitted with your Bid but which are not mandatory or required for participation in the bid process.

Note: This checklist is provided solely for the Bidder's benefit. Submission of the mandatory/required materials does not guarantee that the Bidder will be deemed compliant with all of the specifications and requirements as stated in this ITB. Completing this checklist does not absolve the bidder's responsibility to thoroughly review and understand all of the specifications and requirements as stated in this ITB.

CONTRACTOR INDEX

SEE PART A, Page 28

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
2	04/30/10	To advise of award of products with the addition of Part B to the contract and other changes, as indicated herein.
1	02/17/10	To advise of change in Contract Number from SR901110 to SA901110, as indicated herein.

PRICE SCHEDULE

ITEM I.D. NO. REFERENCE NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT *
12915 210-80-1359 V	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 6 months and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	<u>10 Dose</u> 5 ml	Each Vial	49281-0386-15	\$ 101.20 *
12924 210-80-1359 S	Influenza Virus Vaccine, Trivalent Split, Adult No Preservative Formulation, licensed for administration to ages 36 months and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	Single <u>Dose</u> 0.5 ml	10 Syr./ Box	49281-0010-50	\$ 112.30 *

* To advise of change in pricing unit and grammatical changes, as indicated herein.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.

PRICE SCHEDULE (Cont'd.)

ITEM I.D. NO. REFERENCE NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT *
12925 210-80-1360 S	Influenza Virus Vaccine, Trivalent Split, Adult No Preservative Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).			*	*		SEE PART B *
1693 210-80-1360 V	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).			*	*		SEE PART B *
12927 210-80-1361 V	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).			*	*		SEE PART B *

* To advise of grammatical changes, as indicated herein.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.

PRICE SCHEDULE (Cont'd.)

ITEM I.D. NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT *
6696 210-80-1361 S 1694	Influenza Virus Vaccine, Trivalent Split, Adult Preservative Free Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).			*	*		SEE PART B *
210-80-1359 12926	Influenza Virus Vaccine, Trivalent Split, Pediatric No Preservative Formulation, licensed for administration to ages 6 – 35 months, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	Single Dose 0.25 ml	10 Syr./ Box	49281-0010-25	\$ 121.50 *
210-80-1361	Influenza Virus Vaccine Live, Intranasal Spray, licensed for administration to ages 2-49 years, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).			Single Use Spray 0.2 ml	10 Sprays / Box		NO AWARD

* To advise of change in pricing unit and grammatical changes, as indicated herein.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.

PRICE SCHEDULE (Cont'd.)

ITEM I.D. NO. REFERENCE NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT *
15817 210-80-1359V-DS (TBD)	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 6 months and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), directly shipped to dispensing provider offices within Ohio.	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	<u>10 Dose</u> 5 ml	Each Vial	49281-0386-15	\$ 101.20 *
210-80-1360V-DS	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), directly shipped to dispensing provider offices within Ohio.			*	*		SEE PART B *

* To advise of change in pricing unit and grammatical changes, as indicated herein.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.

PRICE SCHEDULE

ITEM I.D. NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT
12925	Influenza Virus Vaccine, Trivalent Split, Adult No Preservative Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	Single Dose 0.5 ml	10 Syr./ Box	49281-0010-50	\$ 112.30
210-80-1360 S							
1693	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	10 Dose 5 ml	Each Vial	49281-0386-15	\$ 101.20
210-80-1360 V							
12927	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	10 Dose 5 ml	Each Vial	49281-0386-15	\$ 101.20
210-80-1361 V							

* To advise of award of product.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.

PRICE SCHEDULE (Cont'd.)

ITEM I.D. NO.	ITEM REQUESTED	ITEM OFFERED	MANUFACTURER NAME AND PLANT LOCATION	UNIT SIZE	UNIT QTY.	N.D.C. NUMBER	** PRICE/UNIT
6696 210-80-1361 S	Influenza Virus Vaccine, Trivalent Split, Adult Preservative Free Formulation, licensed for administration to ages 4 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET).	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	Single Dose 0.5 ml	10 Syr./ Box	49281-0010-50	\$ 112.30
17901 210-80-1360V-DS	Influenza Virus Vaccine, Trivalent Split, Adult Formulation, licensed for administration to ages 18 years and over, to include the Antigens as formulated in accordance with the CDC, prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET), directly shipped to dispensing provider offices within Ohio.	Fluzone Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	10 Dose 5 ml	Each Vial	49281-0386-15	\$ 101.20
17902 210-80-1358 S	Influenza Virus Vaccine, Trivalent Split, Adult High-Dose Preservative Free Formulation, licensed for administration to ages 65 years and over, to include the Antigens as formulated in accordance with the recommendations of the Centers for Disease Control and Prevention (CDC), prevention and control of Influenza, recommendations of the Advisory Committee on Immunization Practices (ACIP) for the 2010-2011 year, including Federal Excise Tax (FET). (Example: Sanofi Pasteur Fluzone High-Dose, or equivalent).	Fluzone High-Dose Influenza Virus Vaccine	Contractor: Sanofi Pasteur Mfg: Sanofi Pasteur, Swiftwater, PA	Single Dose 0.5 ml	10 Syr./ Box	49281-0387-65	\$ 257.50

* To advise of award of product.

** Price includes Federal Excise Tax (FET) at a rate of \$0.75 per dose.