



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

MANDATORY USE CONTRACT FOR: STATEWIDE DISPENSING PHARMACEUTICAL PROGRAM

CONTRACT NUMBER: CSP900412-1

EFFECTIVE DATES: 07/01/11 TO 06/30/12

The Department of Administrative Services has accepted Proposals submitted in response to Request for Proposal (RFP) No. CSP900412 that opened on April 1, 2011. The evaluation of the Proposal responses has been completed. The Offeror listed herein has been determined to be the highest ranking Offeror and has been awarded a Contract for the services listed. The respective Proposal response including, Contract Terms & Conditions, any Proposal amendment, special Contract Terms & Conditions, specifications, pricing schedules and any attachments incorporated by reference and accepted by DAS become a part of this Services Contract.

This Requirements Contract is effective beginning and ending on the dates noted above unless, prior to the expiration date, the Contract is renewed, terminated, or cancelled in accordance with the Contract Terms and Conditions.

This Requirements Contract is available to the Ohio Department of Health as applicable.

The agency is eligible to make purchases of the contracted services in any amount and at any time as determined by the agency. The State makes no representation or guarantee that department will purchase the volume of services as advertised in the Request for Proposal.

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

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

This Requirements Contract and any Amendments thereto are available from the DAS Web site at the following address:

www.ohio.gov/procure

COST SUMMARY

RFP - STATEWIDE DISPENSING PHARMACEUTICAL PROGRAM

CSP900412

UNSPSC CATEGORY CODE: 80141700

OAKS ITEM NUMBER: 19241

	30 Day Supply	90 Day Supply
Per Prescription Dispensing Fee:	\$ <u>12.75</u>	\$ <u>20.00</u>

Development of additional statistical reports as agreed upon with ODH. Development charges for such reports will be made on a time and materials basis: NO AWARD / per hour cost for time & material

Medicare D Fixed Unit Price Transaction Claim Fee: \$ 0.80

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

CONTRACT NO: CSP901412-1 (06/30/12)

132524
CVS Caremark
2211 Sanders Rd.
Northbrook, IL 60062

TERMS: Net 30 Days

Remit to address:
CVS Caremark
P. O. Box 99794
Chicago, IL 60690

CONTRACTOR'S CONTACT: Clay Keene,

Telephone: (646) 423-9919
FAX: (412) 717-9378
E-mail: clay.keene@caremark.com