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July 01, 2019

TO: Executive Departments/Agencies
University of Hawaii
Hawaii Health Systems Corporation
Judiciary
City & County of Honolulu
County of Hawaii

FROM: Sarah Allen, Administrator 

SUBJECT: **New Price List Contract**
SPO Price List Contract No. 20-02
PHARMACEUTICAL – NARCAN/ NALOXONE HCL
MMCAP Contract No. MMS16000
Contract Expires: June 30, 2020

This is a new State Procurement Office Price List Contract for the pharmaceutical product known as NARCAN or Naloxone HCL, effective July 1, 2019.

This price list contract is available on the SPO website: <http://spo.hawaii.gov>. Click on *Price & Vendor List Contracts* on the home page.

If you have any questions, please contact Carey Ann Sasaki at (808) 586-0575 or careyann.r.sasaki@hawaii.gov.

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**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

SPO Price List Contract No. 20-02
Issued: 7/1/2019

THIS SPO PRICE LIST CONTRACT IS FOR AUTHORIZED BUSINESS USE ONLY.

**PHARMACEUTICAL – NARCAN/ NALOXONE HCL
July 1, 2019 – June 30, 2020**

**INFORMATION ON MMCAP AND THE PHARMACEUTICAL – NARCAN/ NALOXONE HCL
CONTRACT**

The State of Hawaii is a member of the Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP), a voluntary group purchasing organization operated by the State of Minnesota's Department of Administration for government healthcare facilities. The mission of MMCAP is to provide member organizations, through combined purchasing power, to receive the best prices available for pharmaceuticals and related products to eligible government facilities.

The State of Minnesota is the lead agency and contract administrator for all awarded MMCAP contracts.

The State Procurement Office, on behalf of the executive branch and the purchasing agencies listed, has joined the MMCAP pharmaceutical contract with ADAPT Pharma Inc. This MMCAP contract offers the pharmaceutical product known as NARCAN or Naloxone HCL.

For additional information on this contract visit, <http://www.mmcap.org>



PARTICIPATING JURISDICTIONS. Agencies of the following purchasing jurisdictions may purchase from this price list contract:

- Executive Departments/Agencies University of Hawaii (UH)
- Hawaii Health Systems Corporation (HHSC)
- Judiciary
- City & County of Honolulu (C&C of Honolulu)
- County of Hawaii

Participating jurisdictions are not required but may purchase from this price list contract, and requests for exception from the contract are not required. Participating jurisdictions are allowed to purchase from other contractors; however, HRS Chapter 103D, and the procurement rules apply to purchases by using the applicable method of procurement and its procedures, such as small purchases or competitive sealed bidding. The decision to use this contract or to solicit pricing from other sources is at the discretion of the participating jurisdictions.

POINTS OF CONTACT. Questions regarding products, ordering, pricing, and status should be directed to the Contractor.

Procurement question or concerns may be directed as follows:

Jurisdiction	Name	Telephone	Fax	E-mail
Executive	Carey Ann Sasaki	586-0575	586-0570	careyann.r.sasaki@hawaii.gov
UH	Karlee Hisashima	956-8687	956-2093	karlee@hawaii.edu
HHSC	Jeff Dansdill	657-3721	NA	jedansdill@hhsc.org
Judiciary	Tritia Cruz	538-5805	538-5802	tritia.l.cruz@courts.hawaii.gov
C&C Honolulu	Procurement Specialist	768-5535	768-3299	bfspurchasing@honolulu.gov
County of Hawaii	Steve Wilhelm	961-8440	961-8248	purchasing@hawaiicounty.gov

ELIGIBLE AUTHORIZED PARTICIPATING FACILITIES. Only eligible authorized facilities, of a participating jurisdiction, are authorized to use this contract. Eligible authorized facilities, wanting to use this contract, are required to complete a **MMCAP Facility Membership Application and Facility Membership Agreement** prior to ordering. Submit a completed and signed application and agreement to the State Procurement Office, Attention Bonnie Kahakui, for verification and submission to MMCAP.

DOCUMENTS REQUIRED BY CONTRACTOR TO OPEN A NEW ACCOUNT.

Contractor's required forms include, but are not limited to:

- ADAPT (PIP) Declaration Form
- ADAPT Letter of Authorization – Direct Sales
- State Pharmacy License

Contact the ADAPT representative for the most updated forms and information regarding opening a new account.

CONTRACTOR. ADAPT is the only authorized to distribute NARCAN under the Master Agreement with the State of Minnesota and with the State Procurement Office in Hawaii.

Name: ADAPT Pharma
Contact: Jason Griffin
Address: 100 Matsonford Road, Building 4, Suite 201
Radnor, PA 19087
Telephone: 949-357-3930 (mobile)
E-mail: Jason.Griffin@adaptpharma.com

CONTRACTOR CODES for annotation on purchase orders are obtainable from the Alphabetical Contractor Edit Table available at your department's fiscal office. Departments are cautioned that the remittance address on an invoice may be different from the address of the contractor code annotated on the purchase order. Therefore, when processing an invoice for payment, be sure that the correct contractor code is used.

COMPLIANCE PURSUANT TO HRS §103D-310(c). Prior to awarding this contract, the SPO verified compliance of the Contractor(s) named in the SPO Price List Contract No. 20-02. No further compliance verification is required prior to issuing a purchase order when utilizing this contract.

PRODUCT AND PRICING.

NDC: 69547-0353-02
Generic Description: Naloxone HCL
Strength: 4MG
Dosage Form: Nasal Spray
Trade Description: NARCAN 4 mg Nasal Spray
Additional Information: 2 pack
Price: \$75.00

NOTE: Minimum order of 12 units. The product is packaged 12 units to a case.

PRICING CHANGES. MMCAP Contract pricing is subject to change in accordance with MMS16000 Section 2.4.1 MMCAP Contract Pricing. Current as written, The MMCAP Contract Price on Attachment A may be changed by providing MMCAP written notice of the price change by 4pm Central Time the business day prior to the effective date.

CUSTOMER SERVICE. Vendor Customer Service can be contacted at 1-844-462-7226 or customerservice@adaptpharmac.com

DIRECT ORDERS. To purchase directly, MMCAP Participating Facilities will provide Vendor with one of the following documents:

- Standing order signed by a physician; or
- Letter of Authorization signed by a physician, physician assistant, or nurse practitioner; or
- Copy of the MMCAP Participating Facility's state pharmacy license. If the address on the pharmacy license is different from the address the product is being shipped to, the Letter of Authorization must be completed by a pharmacist authorized to sign such document on behalf of the MMCAP Participating Facility.

To start the account set-up process, MMCAP Participating Facility must submit the above documentation to Vendor's Customer Service by fax 1-484-367-7815 or by email to customerservice@adaptpharma.com. MMCAP Participating Facilities must allow 2 business days to process the account set up once Vendor has all appropriate documentation.

Vendor has a minimum order quantity of 12 units, as the product is packaged 12 units to a case. It is at the Vendor's discretion to accept order when the quantity ordered is less than the minimum quantity.

SHIPPING. Shipping terms are FOB Destination. Once the Vendor sets up an account for the MMCAP Participating Facility and the order is processed, the units will be shipped via FedEx 2-day delivery. Orders are shipped Monday, Tuesday and Wednesday only for delivery Wednesday, Thursday and Friday.

PAYMENTS are to be made to the contractor's remittance address. Authorized participating facility shall have thirty (30) calendar days for payment after receipt of invoice. Purchase orders are the only acceptable form of payment. **pCard payment will not be accepted.**

SPO PL Contract No. 20-02 & MMCAP Contract No. MMS16000 shall be typed on purchase orders issued against this price list contract.

GENERAL EXCISE TAX. The Hawaii General Excise Tax (GET) shall not exceed 4.712% for the islands of Oahu and Kauai, 4.438% for the island of Hawaii, and 4.166% for the islands of Maui, Lanai, and Molokai.

REMITTANCE. MMCAP Participating Facilities will remit payment to the following address:

ADAPT Pharma Inc.
Attn: Traci Riley (traci.riley@adaptpharma.com)
PO BOX 65030
Baltimore, MD 21264-5030

VENDOR AND PRODUCT EVALUATION. Form SPO-012, Evaluation: Vendor or Product, for the purpose of addressing concerns on this price list contract, is available to agencies at the SPO website: <http://spo.hawaii.gov>. Click on *Forms* on the home page.

PRICE LIST CONTRACT AVAILABLE ON THE INTERNET at the SPO website: <http://spo.hawaii.gov>. Click on *SPO Price List/Contractor List Contracts* on the home page.