

DAVID Y. IGE
GOVERNOR



SARAH ALLEN
ADMINISTRATOR

BONNIE KAHAKUI
ASSISTANT ADMINISTRATOR

**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

P.O. Box 119
Honolulu, Hawaii 96810-0119
Tel: (808) 586-0554
email: state.procurement.office@hawaii.gov
<http://spo.hawaii.gov>
Twitter: [@hawaiispo](https://twitter.com/hawaiispo)

July 1, 2020

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

FROM: For Sarah Allen, Administrator *Bonnie A. Kahaku*

SUBJECT: **Change No. 1**
SPO Price List Contract No. 20-02
PHARMACEUTICAL – NARCAN/ NALOXONE HCL
MMCAP Contract No. MMS16000
Contract Expires: August 31, 2020

The following changes have been made to the Price List Contract:

1. The contract is extended to August 31, 2020.
2. The contact information for Hawaii Health Systems Corporation and County of Hawaii is updated.
3. The State General Excise Tax (GET) and County Surcharge is updated.

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

Includes Change No. 1

Effective: 7/1/2020

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

**PHARMACEUTICAL – NARCAN/ NALOXONE HCL
July 1, 2020 – August 31, 2020**

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

The State of Hawaii is a member of the Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP) Infuse, a voluntary group purchasing organization operated by the State of Minnesota's Department of Administration for government healthcare facilities. The mission of MMCAP Infuse 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 Infuse contracts.

The State Procurement Office, on behalf of the executive branch and the purchasing agencies listed, has joined the MMCAP Infuse pharmaceutical contract with ADAPT Pharma Inc. This MMCAP Infuse 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	Joe Evanoff	315-7449		jevanoff@hhsc.org
Judiciary	Tritia Cruz	538-5805	538-5802	tritia.l.cruz@courts.hawaii.gov
C&C Honolulu	Procurement Specialist	768-5535	768-3299	bfs purchasing@honolulu.gov
County of Hawaii	Diane Nakagawa	961-8440		Diane.Nakagawa@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 contractor 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.

STATE GENERAL EXCISE TAX (GET) AND COUNTY SURCHARGE shall not exceed the following rates if seller elects to pass on the charges to its customers.

COUNTY	COUNTY SURCHARGE TAX RATE	STATE GET	MAX PASS-ON TAX RATE	EXPIRATION DATE OF SURCHARGE TAX RATE
C&C OF HONOLULU	0.50%	4.0%	4.7120%	12/31/2030
HAWAII	0.50%	4.0%	4.7120%	12/31/2030
COUNTY OF MAUI (including Molokai and Lanai)	0.0%	4.0%	4.1666%	No county surcharge
KAUAI	0.50%	4.0%	4.7120%	12/31/2030

The GET or use tax and county surcharge may be added to the invoice as a separate line item and shall not exceed the current max pass-on tax rate(s) for each island.

County surcharges on state general excise (GE) tax or Use tax may be visibly passed on but is not required. For more information on county surcharges and the max pass-on tax rate, please visit the Department of Taxation's website at <http://tax.hawaii.gov/geninfo/countysurcharge>.

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.