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

FROM: Bonnie Kahakui, Acting Administrator  

SUBJECT: Change No. 1  
SPO Price List Contract No. 21-16  
PHARMACEUTICAL – NARCAN/ NALOXONE HCI  
MMCAP Infuse Contract No. MMS2000303  
Contract Expires: June 30, 2024

The following changes are made to the price list contract:

1. Remittance Address  
2. The Point of Contact for the Executive branch is updated.

The current price list contract incorporating Change No. 1 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 Christopher Amandi at (808) 587-4706 or Christopher.J.Amandi@hawaii.gov.
**WHERE TO FIND:**

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PHARMACEUTICAL – NARCAN/ NALOXONE HCL
December 18, 2020 – June 30, 2024

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 Emergent Devices 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:

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Name</th>
<th>Telephone</th>
<th>Fax</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive</td>
<td>Christopher Amandi</td>
<td>587-4706</td>
<td>586-0570</td>
<td><a href="mailto:Christopher.J.Amandi@hawaii.gov">Christopher.J.Amandi@hawaii.gov</a></td>
</tr>
<tr>
<td>UH</td>
<td>Karlee Hisashima</td>
<td>956-8687</td>
<td>956-2093</td>
<td><a href="mailto:karlee@hawaii.edu">karlee@hawaii.edu</a></td>
</tr>
<tr>
<td>HHSC</td>
<td>Nancy Delima</td>
<td>359-0994</td>
<td></td>
<td><a href="mailto:ndelima@hhsc.org">ndelima@hhsc.org</a></td>
</tr>
<tr>
<td>Judiciary</td>
<td>Tritia Cruz</td>
<td>538-5805</td>
<td>538-5802</td>
<td><a href="mailto:tritia.l.cruz@courts.hawaii.gov">tritia.l.cruz@courts.hawaii.gov</a></td>
</tr>
<tr>
<td>C&amp;C Honolulu</td>
<td>Procurement Specialist</td>
<td>768-5535</td>
<td>768-3299</td>
<td><a href="mailto:bfspurchasing@honolulu.gov">bfspurchasing@honolulu.gov</a></td>
</tr>
<tr>
<td>County of Hawaii</td>
<td>Diane Nakagawa</td>
<td>961-8440</td>
<td></td>
<td><a href="mailto:Diane.Nakagawa@hawaiicounty.gov">Diane.Nakagawa@hawaiicounty.gov</a></td>
</tr>
</tbody>
</table>

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 Infuse Facility Membership Application and Facility Agreement prior to ordering. Click on the MMCAP Infuse Application and Agreement link located on the MMCAP Infuse website under Membership Application (https://infuse-mn.gov/about/membershipapp/index.jsp). Submit the signed application and agreement to the State Procurement Office, Attention Bonnie Kahakui, for verification and submission to MMCAP Infuse.
DOCUMENTS REQUIRED BY CONTRACTOR TO OPEN A NEW ACCOUNT.
Contractor’s required forms include, but are not limited to:
- Emergent Declaration Form
- Emergent Credit Application
- Emergent Letter of Authorization
- State Pharmacy License

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

CONTRACTOR. Emergent Devices Inc. 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: Emergent Devices Inc.
Contact: Lizabeth Allen
Address: 100 Matsonford Road, Building 4, Suite 201
Radnor, PA 19087
Telephone: 310-749-9794 (mobile)
E-mail: allenl@ebsi.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. 21-16. No further compliance verification is required prior to issuing a purchase order when utilizing this contract.

PRODUCT AND PRICING.

<table>
<thead>
<tr>
<th>NDC:</th>
<th>69547-0353-02</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic Description:</td>
<td>Naloxone HCl</td>
</tr>
<tr>
<td>Strength:</td>
<td>4MG</td>
</tr>
<tr>
<td>Dosage Form:</td>
<td>Nasal Spray</td>
</tr>
<tr>
<td>Trade Description:</td>
<td>NARCAN 4 mg Nasal Spray</td>
</tr>
<tr>
<td>Additional Information:</td>
<td>2 pack</td>
</tr>
<tr>
<td>Price:</td>
<td>$75.00</td>
</tr>
</tbody>
</table>

NOTE: Minimum order of 12 units. The product is packaged 12 units to a case.
PRICING CHANGES. MMCAP Infuse Contract pricing is subject to change in accordance with MMS2000303 Section 1.6 Notice to MMCAP Infuse. Current as written, The MMCAP Infuse Contract Price on Attachment A may be changed by providing MMCAP Infuse at least two (2) business days’ prior written notice of the price change.

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

DIRECT ORDERS. To purchase directly, MMCAP Infuse 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 Infuse Participating Facility’s state pharmacy license. If the address on the pharmacy license if 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 Infuse Participating Facility.

To start the account set-up process, MMCAP Infuse Participating Facility must submit the above documentation to Vendor’s Customer Service by email to narcancustomerservice@ebsi.com. MMCAP Infuse 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 Infuse 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. 21-16 & MMCAP Infuse Contract No. MMS2000303 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.

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>COUNTY SURCHARGE TAX RATE</th>
<th>STATE GET</th>
<th>MAX PASS-ON TAX RATE</th>
<th>EXPIRATION DATE OF SURCHARGE TAX RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>C&amp;C OF HONOLULU</td>
<td>0.50%</td>
<td>4.0%</td>
<td>4.7120%</td>
<td>12/31/2030</td>
</tr>
<tr>
<td>HAWAII</td>
<td>0.50%</td>
<td>4.0%</td>
<td>4.7120%</td>
<td>12/31/2030</td>
</tr>
<tr>
<td>COUNTY OF MAUI (including Molokai and Lanai)</td>
<td>0.0%</td>
<td>4.0%</td>
<td>4.1666%</td>
<td>No county surcharge</td>
</tr>
<tr>
<td>KAUAI</td>
<td>0.50%</td>
<td>4.0%</td>
<td>4.7120%</td>
<td>12/31/2030</td>
</tr>
</tbody>
</table>

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](http://tax.hawaii.gov/geninfo/countysurcharge).

REMITTANCE. MMCAP-Infuse participating Purchasing Entities will remit payment to the following address:

Emergent Devices Inc.
P.O. Box 844816 Boston, MA 02284-4816
ATTN: Accounts Receivable

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](http://spo.hawaii.gov). Click on Forms on the home page.