



MMCAP INFLUENZA VACCINE CONTRACT SUMMARY

FFF Enterprises, Inc.

Contract Number

MMCAP MMS14003
In MN SWIFT #74018

Term of Contract

January 24, 2014 through December 31, 2017. Contract may be extended for up to one (1) additional one (1) year extension.
Full line Influenza Vaccine Distributor Contract.

Product Ordering

Phone: 1.800.843.7477
Fax: 1.800.418.4333
Website: www.myfluvaccine.com

Customer Service

Phone: 1.800.843.7477
Hours of Operation: 24/7/365 days a year

Vendor Contract Administrator

Name: Luke Noll
Title: Director Vaccine Product Sales and Corporate Accounts
Company Name: FFF Enterprises, Inc.
Address: 41093 County Center Drive
City, ST ZIP: Temecula, CA 92591
Phone: 1.800. 843.7477, ext. 1128
Email: lnoll@fffenterprises.com

Shipping and Delivery

- Shipping included in the cost of the product
- Damaged products should be reported to vendor immediately upon receipt-contact customer service for instructions
- FOB Destination
- Orders may be cancelled or modified at any time up until shipment
- Influenza vaccine should be pre-booked January – April each year for delivery in August-October.

Payment Terms

- 0.25% 20 days; Net 60 days
- Credit applications may be required as per the discretion of the Vendor's Credit Department

Product Pricing

All Products listed in the *Products* section of the contract are fixed pricing. Pricing is found at www.mmcap.org in the Programs section under Influenza Pricing and Pre-booking information link.

Member Shareback = none at this time

Administrative Fee paid to = MMCAP- GSK products 0.5%, all other products 3%

Contract Cancellation

MMCAP or the Vendor may cancel the Contract at any time with or without cause upon 60 days written notice to the other party.

GlaxoSmithKline

Contract Number

MMCAP MMS13001
In MN SWIFT # 59732

Term of Contract

January 1, 2013 through December 31, 2017.

Product Ordering

Phone: 1.866.475.8222
Email: vaccine.service-center@gsk.com
Website: www.gskvaccinesdirect.com

Customer Service

Phone: 1.866.475.8222
Hours of Operation: Monday-Friday 8:00a.m. to 6:00p.m. EST

Vendor Contract Administrator

Name: Linda Bell
Title: National Accounts Director
Company Name: GlaxoSmithKline
Address: One Franklin Plaza-3F0605, 1600 Vine Street
City, ST ZIP: Philadelphia PA 19102
Phone: 1.585.317.4778
Email: linda.b.bell@gsk.com

Shipping and Delivery

- Shipping included in the cost of the product
- Damaged products should be reported to vendor immediately upon receipt-contact customer service for instructions
- FOB Shipment
- Orders may be cancelled or modified at any time up until shipment
- Influenza vaccine should be pre-booked January – April each year for delivery in August-October.

Payment Terms

- Net 30 days from date of invoice
- Cash, check and EFT are accepted
- Credit applications may be required as per the discretion of the Vendor's Credit Department

Product Pricing

All Products listed in the *Products* section of the contract are fixed pricing. Pricing is found at www.mmcap.org in the Programs section under Influenza Pricing and Pre-booking information link.

Special form

For initial account set up GSK requires a GPO declaration form to be filled out, listing MMCAP as the GPO of choice. This form can be requested by emailing mn.multistate@state.mn.us . Please list **GSK GPO Declaration Form needed** in the subject line of your email.

Member Shareback = none at this time

Administrative Fee paid to MMCAP = 1.5%

Contract Cancellation

MMCAP or the Vendor may cancel the Contract at any time with or without cause upon 30 days written notice to the other party.

McKesson Medical Surgical, MN Supply, Inc.

Contract Number

MMCAP MMS14005

In MN SWIFT #76489

Term of Contract

February 18, 2014 through December 31, 2017. The Contract may be extended for up to one (1) additional one (1) year extensions. Full line Influenza Vaccine Distributor Contract.

Product Ordering

Phone: 1.800.328.8111, Option 1

Fax: 1.866.889.4203

Email: fluvaccine@mckesson.com

Website: <https://mms.mckesson.com>

Customer Service

Phone: 1.800.328.8111

Hours of Operation: Monday-Friday 8:00a.m. – 5:00p.m. CST; closed major holidays.

Vendor Contract Administrator

Name: Lori Lumpkin

Title: Manager, Government Customers & Contracts

Company Name: McKesson Medical Surgical, MN Supply Inc.

Address: 8121 10th Avenue North

City, ST ZIP: Golden Valley, MN

Phone: 804.475.1564

Email: llumpkin@pssd.com

Shipping and Delivery

- Shipping included in the cost of the product
- Damaged products should be reported to vendor immediately upon receipt-contact customer service for instructions
- FOB Destination
- Orders may be cancelled or modified at any time up until shipment
- Influenza vaccine should be pre-booked January – April each year for delivery in August-October.

Payment Terms

- Net 30 days from date of invoice
- Cash, check, credit card and EFT are accepted
- Credit applications may be required as per the discretion of the Vendor's Credit Department

Product Pricing

All Products listed in the *Products* section of the contract are fixed pricing. Pricing is found at www.mmcap.org in the Programs section under Influenza Pricing and Pre-booking information link.

Member Shareback

None at this time

Administrative Fee paid to MMCAP

3%

Contract Cancellation

MMCAP or the Vendor may cancel the Contract at any time with or without cause upon 60 days written notice to the other party.

Sanofi Pasteur, Inc.

Contract Number

MMCAP MMS13000
In MN SWIFT # 59734

Term of Contract

December 21, 2012 through December 31, 2017.

Product Ordering

Phone: 1.800.822.2463
Website: www.vaccineshoppe.com

Customer Service

Phone: 1.800.822.2463
Hours of Operation: Monday-Friday; fluctuates on major holidays.

Vendor Contract Administrator

Name: Pamela Garcia-Gomez
Title: Deputy Director, State Government Contracts
Company Name: Sanofi Pasteur, Inc.
Address: Discovery Drive
City, ST ZIP: Swiftwater, PA 18370
Phone: 570.957.0330
Email: pamela.gomez@sanofipasteur.com

Shipping and Delivery

- Shipping included in the cost of the product
- Damaged products should be reported to vendor immediately upon receipt-contact customer service for instructions
- FOB Shipment
- Orders may be cancelled or modified at any time up until shipment
- Influenza vaccine should be pre-booked January – April each year for delivery in August-October.

Payment Terms

- 2% 30 days, Net 31
- Cash, check, credit card and EFT are accepted
- Credit applications may be required as per the discretion of the Vendor's Credit Department

Product Pricing

All Products listed in the *Products* section of the contract are fixed pricing. Pricing is found at www.mmcap.org in the Programs section under Influenza Pricing and Pre-booking information link.

Member Shareback

None at this time

Administrative Fee paid to MMCAP

1.5%

Contract Cancellation

MMCAP or the Vendor may cancel the Contract at any time with or without cause upon 60 days written notice to the other party.