

## **SWC# 440 Medical Supplies and Equipment** **Contract Information and Usage Instructions**

**Contract Period:** This is a cooperative statewide contract established through the Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP). To date, the State has signed one (1) participating addendum with Medical Solutions for an initial start date of September 6, 2019. The contract's initial end date is May 31, 2020 but it may be extended for up to three (3) additional one (1) year periods upon execution of a written amendment and acceptance of both parties, for a total term not to exceed five (5) years.

### **Summary/Background Information:**

The MMCAP cooperative contract for medical supplies was established to provide a reliable and competitively priced source for the purchase of medical supplies, such as diagnostic instruments, bandages/dressings, creams/ointments, gloves/protective wear, respiratory supplies, testing supplies, disposable medical/surgical supplies, scales/ramps, wheelchairs, syringes/needles, etc. MMCAP is a free, voluntary group purchasing organization operated and managed by the State of Minnesota Department of Administration for government healthcare facilities. MMCAP membership is comprised of thousands of participating facilities in all 50 states and the District of Columbia. **This contract requires MMCAP membership. Only MMCAP Participating Facilities may purchase Products and Services under the terms of this Contract.** MMCAP customers will need an MMCAP User ID and password to access MMCAP's website. Contact the Contract Administrator to verify MMCAP membership or to set up an account. Once MMCAP membership is obtained, contact vendor to set up an account.

### **State Contact Information**

#### **Contract Administrator:**

Karen Conway  
Category Specialist  
Central Procurement Office  
(615) 507-6211  
[Karen.Conway@tn.gov](mailto:Karen.Conway@tn.gov)

**Vendor Contact Information:**

Vendor Name: **Medical Solutions Inc.**  
Contract: 63982  
Vendor Number: 230402  
Vendor Contact: Dave Delgado  
Phone: (888) 557-8020  
(612)743-8877  
Email: [ddegado@medicalsolutionsinc.com](mailto:ddegado@medicalsolutionsinc.com)

**Vendor Contact Information:**

Vendor Name: **Medical Solutions Inc.**  
Vendor Contact: Lynn Meyers  
Phone: (888) 557-8020 Ext. 15  
(612)747-1622  
Email: [Lmeyers@medicalsolutionsinc.com](mailto:Lmeyers@medicalsolutionsinc.com)

**Vendor Contact Information: (Secondary)**

Vendor Name: **Medline Industries**  
Vendor Contact: Holly Carner  
Phone: Main: (563) 564-1984  
Email: [hcarner@medline.com](mailto:hcarner@medline.com)  
Customer Service Email: [customerservice@medline.com](mailto:customerservice@medline.com)

**Contract Detail and Usage Instructions:**

- **No Minimum Order Requirements** - During the term of this Contract, there shall be no minimum order requirements or extra charges assessed to orders, regardless of order size or payment amount.
- **Shipping Terms** – Shipments under this contract shall be FOB Destination, freight prepaid and allowed to the MMCAP Participating Facility's receiving dock or if applicable, its pharmacy, unless otherwise agreed to by Vendor and Participating Facility. Title to and risk of loss of the Products covered by this Contract transfers to the MMCAP Participating Facility upon delivery to the MMCAP Participating Facility, as set forth above. During the term of this Contract Vendor shall not add any fuel surcharges to the purchase of any Products covered by this Contract. Notwithstanding the foregoing, emergency orders, rush orders, orders for Products not regularly stocked by Vendor's local servicing Distribution Center, Products dropped shipped from Vendor's Contracted Supplier, and orders not regularly scheduled are subject to an added shipping and handling charge determined by Vendor and disclosed to a MMCAP Participating Facility upon request. Vendor shall have the right to ship the Products at all times via its own vehicle or a carrier selected by Vendor.

- **Delivery Schedule** – Vendor will provide a daily order and delivery schedule for each MMCAP Participating Facility. Vendor will have three (3-5) Business days, from the date the Product is ordered, to have the Product stocked and delivered at no extra cost to the Order Originator, barring any Manufacturer production issues. All expedited deliveries will be made next day, or on the Next Schedule Delivery Day, unless communicated otherwise. MMCAP Participating Facilities will provide the Vendor with Holiday Schedule throughout the term of this Contract, and Vendor will provide the MMCAP Participating Facilities a Holiday Delivery Schedule, which accommodated the delivery needs of the MMCAP Participating Facilities.
- **Delivery Time** - Vendor's daily order cut off time will be 12pm CST local time, with the delivery the next day, depending on location and distance from servicing distribution center. Orders received Monday through Thursday will be delivered in an average turnaround time from the placement of an MMCAP Member's order, to the expected delivery date of the Product of less than three (3-5) business days.
- **Prompt Pay Discounts** – Attachment M (Master Agreement, Attachment M, pg. 62)

Prompt Payment Terms
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AR 2% 10/ NET 30

- **Accessing Attachment A: Products and Services Pricing:** Medical Solutions Inc. price list is available as an attachment under the Edit Comments section of the Contract Entry Page Edison. The MMCAP Participating Member will receive the Contract pricing as set forth, in the following price list tabs: the Brand Label Core Products tab; the Equipment Schedule tab; the Private Label Core Products tab; The Breast Pumps Tab; the Breast Pump Accessories tab; the Non-Core Products tab; and the Additional Value Offerings tab. The price list for Attachment A on this Agreement is also located next to the Contract, on the MMCAP website (<http://www.mmd.admin.state.mn.us/MMCAP/Contracts/Default.aspx>), and login credentials are required in order to access it.

**Requisition and Purchase Order Generation:**

For information on how to create a requisition and/or purchase order please reference the Job Aid “Requisitions and Purchase Order Document Types” below:



Requisition and Purchase Order Doc 1

**Billing and Payment Instructions:**

Follow your agency specific rules for billing and payments.