

# Vendor Brochure

Prepared for use by Tricare Next Generation Southeast

Ft Benning – Martin Army Hospital  
Ft Gordon – Eisenhower Army Medical Center  
Ft Jackson – Moncrief Army Hospital  
Ft McPherson – Joel Army Health Clinic  
Ft Rucker – Lyster Army Hospital  
Ft Stewart – Winn Army Hospital  
Redstone Arsenal – Fox Army Health Center

Charleston AFB – 437<sup>th</sup> Medical Group  
Columbus AFB – 14<sup>th</sup> Medical Group  
Eglin AFB – 96<sup>th</sup> Medical Group  
Hurlburt Field – 16<sup>th</sup> Medical Group  
Keesler AFB – 81<sup>st</sup> Medical Group  
MacDill AFB – 6<sup>th</sup> Medical Group  
Maxwell AFB – 42<sup>nd</sup> Medical Group  
Moody AFB – 347<sup>th</sup> Medical Group  
Patrick AFB – 45<sup>th</sup> Medical Group  
Robins AFB – 78<sup>th</sup> Medical Group  
Shaw AFB – 20<sup>th</sup> Medical Group  
Tyndall AFB – 325<sup>th</sup> Medical Group

Naval Hospital Beaufort, SC  
Naval Hospital Charleston, SC  
Naval Hospital Jacksonville, FL  
Naval Hospital Pensacola, FL

TRBO, 40707 40<sup>th</sup> Street, Ft Gordon, GA 30905

(706-787-2093)

16 February 2004

## **Standardization Overview**

The purpose of the standardization program is to establish a Regional Incentive Agreement based on clinical evaluation for products, equipment and services (PES) used by the Military Medical Treatment Facilities (MTF) within TRICARE Next Generation Southeast.

In general the military medical facilities in TRICARE Next Generation Southeast located at Ft Gordon, Ft Stewart, Ft Benning, Keesler AFB, Eglin AFB, MacDill AFB, NH Jacksonville, NH Pensacola, NH Beaufort, NH Charleston, Ft Jackson, Ft Rucker, Redstone Arsenal, Ft McPherson, Shaw AFB, Charleston AFB, Moody AFB, Robins AFB, Patrick AFB, Hurlburt Field, Tyndall AFB, Maxwell AFB, Columbus AFB and their affiliate facilities, will act as an integrated purchasing alliance for the acquisition of PES. To the extent possible, the region will standardize the use of PES, and wherever possible will take advantage of committed volume purchase agreements called Regional Incentive Agreements (RIA), in order to obtain price reductions and overall supply chain savings.

## **Standardization Key Personnel**

The standardization process begins with the Tri-service Product Review Board (TPRB). The TPRB membership consists of clinical and logistical personnel representing the first nine facilities listed above. The TPRB identifies and pursues opportunities for standardization and volume purchasing within the region.

The **Tri-Service Regional Business Office** (TRBO) supports the TPRB and the standardization process in the form of “clearing” administrative roadblocks that the Tri-service Product Review Board (TPRB) and Clinical Product Team (CPT) may encounter. The CPT will be made up of the members of the TPRB (or their designee). The TRBO provides systems and technical support in the form of team communications and access to the electronic support of the TPRB and CPT. The TRBO consists of four individuals, Team Leader, 2 Clinical Analysts and Data Analyst. (Contact Information provided on page 15)

A **Clinical Product Team** (CPT) is formed for each product line selected for standardization. Each CPT will be composed of clinicians considered to be the subject matter experts from the TPRB. The CPT will determine the clinical needs of the Region, develop evaluation criteria for the standardization decision, decide on the evaluation method(s) used to select a product and make the final product recommendation to the TPRB for approval.

## Standardization Process

The standardization process will generally consist of the following steps:

- a. The TRICARE Next Generation Southeast TPRB will select product lines to standardize. The products are brought to the attention of the TPRB by the TRBO, or members of the TPRB.
- b. A Clinical Product Team (CPT) will be formed for each product line selected for standardization. Each CPT will be composed of clinicians from the 23 partner facilities.
- c. The CPT will determine the Regions' clinical needs and develop product and company criteria as well as evaluation criteria for the standardization decision.
- d. Solicitation via the Federal Business Opportunity (FBO) ( [www.fedbizopps.gov](http://www.fedbizopps.gov) ) will be made by the TRBO (attachment D). The final date for submitting a response will be stringently upheld.
- e. The TRBO will contact vendors who have responded to the FBO announcement and request company information and product literature. This letter will explain the evaluation criteria to be used and request a cross reference of products based on current product usage in TRICARE Next Generation Southeast. (Examples of first letter (attachment A), template for company and product information (attachment B), and company and product criteria (attachment C)).
- f. Those vendors whose response shows that they meet TRICARE Next Generation Southeast minimum needs (based on criteria and other pertinent information) will be invited to participate in clinical evaluations. Those vendors who are not invited will be so notified in writing. (See DAPA Requirements below)
- g. Vendors accepting the invitation will then be instructed where and when their products will be evaluated. (See Evaluation Process below) It will be the vendor's responsibility to get the items to that location in sufficient quantity for the evaluation period. This will be at the vendor's own expense. (See Rules Of Engagement below) The Government will provide the vendor the specific type of items we are reviewing, the dates, location, and point of contact at the facilities participating in the evaluation. (Usually up to 9 sites).
- h. The CPT ranks the vendors based on the best clinical quality for the needs of TRICARE Next Generation Southeast.
- i. The TRBO contacts the vendors requesting their "best and final" price, better than DAPA price, for their product.
- j. The CPT ranking and the "best and final" price from each of the vendor's is presented to the CPT by the TRBO. The product/vendor recommended by CPT

is presented to the TPRB for final selection and approval. Once a product is selected by the TPRB it will become the standardized product line.

- k. Once a selection is made, vendors will be notified of the decision in writing. A Regional Incentive Agreement (RIA) will be entered into with the selected vendor, providing for committed volume pricing. The TRBO will provide a list of facilities with their Department of Defense Account Code (DODAC). The selected vendor will then be responsible for loading the new pricing agreement information into the Universal Data Repository (UDR). The vendor will also be responsible for assisting the TRBO in the conversion within each facility of the new product and setting up all required in-service necessary before implementation of a product. It will be considered a "Regional DAPA" and will only affect specified facilities. All agreements will be reviewed periodically to ensure that TRICARE Next Generation Southeast is still getting the best value (usually on an annual basis) and the terms of the agreement are being met.

### **Solicitation and Identification of DAPA Holders**

Once the Clinical Product Team (CPT) is formed and the criteria set, the "players" must be identified. This is accomplished by placing announcements in the Federal Business Opportunities ([www.fedbizopps.gov](http://www.fedbizopps.gov)) identifying a particular product line we wish to standardize. This ad runs for a period of 15 to 30 days then the announcement is closed. Once the announcement closes TRBO personnel evaluate responses to identify potential players. In order to participate in the standardization process you must be a Distribution and Pricing Agreement (DAPA) holder.

TRICARE Next Generation Southeast has 2 key partners, the Prime Vendor (PV) and the Defense Supply Center, Philadelphia (DSCP). The product standardization effort is an integral part of the Prime Vendor program administered by DSCP. The Distribution and Pricing Agreements (DAPA), written by DSCP, are the essential instruments that make this process work. It is important to understand what a DAPA is, and what it is not. DAPA's are agreements, not contracts. RIAs are agreements that drive prices lower than the DAPA due to the increased, combined volume of the MTFs.

In the past, the government purchased items from industries through the use of purchase orders directly to the vendor or through large distribution depots operated by DSCP. In the late 1980s, early 1990s, there was a move away from stocking large quantities of items and instead using a "just in time" (JIT) approach. The depots have gone from 14,000 items managed on site to under 500. Today, there is a necessity to use flexible purchasing instruments and to partner with a distributor who can support our JIT approach.

Vendors who are interested in participating in this program register and provide the needed information to DSCP. As part of establishing the DAPA, the vendor provides their pricing on their items. The government, in this case the medical facilities, can make purchases against these DAPA's as they choose. Instead of large

government depots, these commercial items are distributed through Prime Vendors who have won that right through a competitive process for specified geographic areas. When a facility decides on a certain product available on DAPA, they notify their Prime Vendor of their intention to purchase the item and their estimated usage. The PV then stocks the item and distributes it to the facility, when ordered. For this service, they are paid a distribution fee. A PV handles requirements for multiple customers in a geographic area both government and civilian. Many times the same item may have 10 to 15 different prices attached to it depending on the facility ordering and the pricing agreement established. The PV makes their money off of the distribution fee, not the price of the item.

In order to make this new system work, we needed to supplement our staffs with contract personnel who can work this issue exclusively. DSCP and the intermediate commands partnered to award a contract for a Logistics Leader, a Nurse Clinical Analyst and a Data Analyst. This team, referred to as the Tri-Service Regional Business Office (TRBO) has the responsibility for coordinating the activities, monitoring the savings established, handling the vendor inquiries, and serving as a forward presence for DSCP.

DAPAs are issued by DSCP (Defense Supply Center – Philadelphia). If a company does not have a DAPA they may apply on line at <http://dmmonline.com>. Helpful information about DAPAs may be found at <http://medweb.dscp.dla.mil/dapa.html> and <http://dscp103.dscp.dla.mil/dmmonline/cbu/medsurgical/msdapaterms.htm>.

A company needs to demonstrate that they are attempting to obtain a DAPA to continue to participate in a TRICARE Next Generation Southeast standardization process. The DAPA must be in place by the time the standardization process has been completed. If a company makes the decision not to obtain a DAPA, we cannot consider them unless they are the only manufacturer of a one-of-a-kind, unique item. DAPAs are the pricing vehicle we must use. Because, they are agreements and not contracts, they are flexible enough to meet our needs.

Competition is not restricted based on prior affiliation, reputation, or expert knowledge. Competition is open to all DAPA holders who can fulfill the requirement established by the CPT. This makes it critically important that the CPT establish criteria that are both inclusive yet narrows the field to those companies that can truly provide the needed items in the quantities and timeliness required. Many companies may make a specific type of drape, but if our requirement is that the company is able to provide 80% of all drape items on the list, it will narrow the companies being considered. No CPT can sort through every company that may make one item for that particular product line. We may also narrow the field by requiring proven technologies that have been fielded in the past 5 years. That avoids the need to evaluate every new item being released. It is absolutely critical that the criteria be developed on the salient characteristics and in conjunction with the product literature for that line. Under no circumstance can the criteria be written to “pre-select” a certain company.

## Suggested Evaluation Methods

1. **Product Fair:** Vendors set up booths and display their products. Literature is available for review and products are available for hands-on inspection. CPT members as well as other clinicians evaluate products at the product fair. Typically held in 2-4 medical facilities. The Triservice Regional Business Office (TRBO) will collect the evaluation forms and tabulate the results. The results will be presented at a meeting of the CPT members to finalize their selection to be presented to the Triservice Product Review Board (TPRB) or the CPT may decide that alternative evaluation method is also necessary.
2. **Briefings and Clinical Trials:** Each vendor gives a timed briefing to CPT members and selected clinicians from within each department or unit on a given day, then distributes a predetermined amount of product(s) to CPT members who take the products back to their facility departments or units for trial for a week. The selected clinicians within each of the facilities then evaluate each of the products on trial. The number of vendors participating in a standardization effort will determine the length of this evaluation method. Each vendor is given one week for clinical trial (hands-on). CPT members would be responsible for maintaining and collecting product evaluation forms. All product evaluations would be returned to the Triservice Regional Business Office (TRBO) for tabulation. The CPT members would meet after the tabulations were complete to discuss the results of the evaluation and their final product recommendation to be presented to the Triservice Product Review Board (TPRB).
3. **Clinical Trials (Hands-on):** Evaluation of products can be conducted within each CPT member's medical facility. Vendors would not be present. Literature and product from each of the vendors would be distributed for evaluation to CPT members and their selected clinicians within their facilities for a one-week trial for each vendor's product(s). CPT members would be responsible for maintaining and collecting product evaluation forms. All product evaluations would be returned to the Triservice Regional Business Office (TRBO) for tabulation. The CPT members would meet after the tabulations were complete to discuss the results of the evaluation and their final product recommendation to be presented to the Triservice Product Review Board (TPRB).
4. **Desk Top Evaluation:** CPT members and clinicians meet to discuss and evaluate the products by reviewing literature provided by each vendor. Literature can be distributed to individual CPT members and clinicians before the group meeting. It is possible that the CPT may decide to have the vendors give briefings at a group meeting to present their products and answer questions.

A CPT is not restricted to these evaluation methods. They can select or combine any method that provides clinically significant results and fair to all participants.

The Triservice Product Review Board (TPRB) will have the final approval of product selection.

To meet the laws governing fairness in government contracting as well as to support statistical reliability and validity each vendor's products must receive equal evaluation time and adequate clinical representation during product evaluation.

### **Clinical Product Team Reviews Results**

During the agreed upon evaluation period, clinical trials are conducted. Results are collected and tabulated on the evaluation forms provided by the TRBO based on the criteria the CPT developed. When the evaluations are completed the results are sent to the Clinical Analyst from the TRBO at 40707 40<sup>th</sup> St, Ft Gordon, GA 30905. It is important that the completed evaluation forms be sent to the Tri-Service Regional Business Office for inclusion in the product file.

Results of the evaluation will not be discussed with anyone other than fellow CPT members and the staff of the TRBO. These selections are termed "**procurement sensitive**" and should not be discussed with anyone outside of the CPT. This applies to any participating vendors. As a result, it is imperative that the CPT members have no vested interest in the outcome. This means the decision is not open for discussion, since someone may use the information for personal gain. Each service has very specific guidelines for accepting gifts and incentive type items from vendors. It is the responsibility of each CPT member and clinician participating in the evaluation of potential standardization products to be aware of the appropriate regulation.

As the products are rated, no pricing is provided. This is on purpose! The first evaluation will be made solely on clinical acceptability and quality. The products are rated as "acceptable" or "unacceptable". The "acceptable" list will be ranked in order from "most acceptable" to "least acceptable". The CPT members will discuss and come up with a final ranking and rating on a clinical basis only. The top four or five product lines are identified to the Clinical Analyst and Logistic Lead to obtain pricing information.

## **Rules of Engagement**

The rules of engagement for vendors participating in a standardization effort in TRICARE Next Generation Southeast are as follows:

Standardization Evaluations will be conducted in areas designated by the TRBO.

Clinicians will use an evaluation tool, which will be collected by the TRBO.

CPT members can have no invested personal interest in the outcome in a standardization effort.

CPT members will be familiar with the specific guidelines for accepting gifts and incentive type items from vendors. Any violations of the guidelines will be reported to the appropriate officials.

The Tri-Services Regional Business Office (TRBO) will perform statistical analysis of data obtained from the evaluations.

Vendors will deliver products to designated location and specified time as agreed upon by the vendors and the TRBO.

Vendor's presence will be required during some of the evaluation methods used in TRICARE Next Generation Southeast.

Vendors will abide by the policies and procedures for visiting MTF's in TRICARE Next Generation Southeast as established by each individual facility. Failure to do so may result in the elimination of a vendor from the standardization effort or revoked privileges at that MTF.

When participating in a standardization effort, vendors must contact the TRBO prior to contacting any clinical personnel in reference to the product being considered for standardization.

Additional education or training on the selected products will be at the vendor's expense.

All evaluation methods will have a start and stop date set by the CPT that will be strictly enforced.

The government is not responsible for cost of sample items, shipping of these items, or any costs associated with the clinical trials.

Only products selected by the CPT will be reviewed during an evaluation. All other products presented during the evaluation will be rejected.

Unless specifically requested by the TRBO, **NO COMPANY REPRESENTATIVE SHOULD SPEAK TO ANY HOSPITAL STAFF MEMBER OR TPRB MEMBER REGARDING PRICE OR PRICE-RELATED FACTORS.**

The selected vendor will assist the TRBO in preparing a marketing sheet to aid in conversions at the medical treatment facilities.

As part of the conversion process the vendor is expected to contact logistics (Purchasing) to get a list of the user areas. They will then go to each of these areas and prepare a conversion chart (one copy for the user and one copy for logistics).

Failure to comply with any of the rules of engagement described above may result in disqualification of your company from further consideration. Please do not hesitate to contact our Team Leader in the Tri-Service Regional Business Office at 706-787-2093 for questions.

### **TRBO Request for “Final and Best” Price**

The TRBO will obtain data to estimate a pricing formula for the product being considered for a RIA. Because this is a DAPA and not a formal contract, there is a great deal more flexibility dealing with the vendors and soliciting this pricing. The vendors will know the estimated requirement, but will not know their “ranking”.

### **Final Selections and Recommendation**

Once the pricing information is received, the Logistical Lead will forward this information to the Clinical Analyst to be present to the CPT. The CPT members then select the “best value” based on clinical quality and price. Price is a criterion for selection, but not the top priority. CPT members then decide if the item ranked first for quality is worth the price. If the highest rated product in quality is also the lowest price, the task is complete. What often happens is that the highest ranked clinical quality is also the highest in price. The team must then balance the price against the clinical quality to decide on an item that is the best value to the government while still meeting an acceptable clinical quality. Finally the CPT presents their final recommendation to the Tri-Service Product Review Board (TPRB).

### **TPRB Makes Final Product Selection**

The TPRB considers all the information presented by the CPT, takes a vote, and makes the final product selection. The vendor is notified and DAPA pricing is adjusted to reflect the new lower price in the (UDR). It is the vendor’s responsibility to ensure that the lower price is loaded into the UDR, to coordinate with each facility for transition and in-service requirements for the new product(s). All regional MTFs are notified of the new product to be purchased and its price via a letter from the TRBO. The Prime

Vendor is notified that it has 30 days to adjust its stock to meet its customers' stock commitments with the standardized item.

### **Options and Modifications**

If, during the course of the RIA, a change to the agreement is needed, the vendor and the TRBO can modify the RIA. This is usually done to add or delete products, lower prices or add facilities (such as another region). Both parties sign a modification document (attachment F) and the vendor submits the new information to the DSCP and Prime Vendor. The TRBO will fax the agreement to DSCP.

If, at the end of the agreement period both parties wish to exercise one of the option periods, the process is similar. Both parties sign an option agreement (attachment E) and DSCP and the Prime Vendor are notified of the new dates and any changes made to the agreement. The TRBO will fax the agreement to DSCP.

## Attachment A

November 13, 2003

Tri-Services Regional Business Office  
40707 40<sup>th</sup> Street  
Ft Gordon, GA 30905

Dear Participating Vendor:

Department of Defense, Tricare Next Generation Southeast, comprised of 23 Medical Treatment Facilities is considering standardizing and establishing a single source for the items listed in the attached spreadsheet. The ensuing standardization initiative may result in a Regional Incentive Agreement (RIA) for the items.

As a Participating Vendor in this standardization initiative for this product group, you are requested to provide us with the information outlined on the attached Word documents. The attached Word documents contain information, which pertains to both your company and your company's products. Also, please review the attached spreadsheet regarding the product cross-reference and pricing data that Region 3, 4 & 15 requires. Instructions on how to complete the spreadsheet is contained on Tab 1 and the required information is on Tab 2. Additionally, It is requested that you provide product literature and DAPA pricing for the items listed. This information must arrive at the above address no later than close of business **(COB) Monday, 01 December 03**. Failure to respond within the requested time with the requested information may result in your company being excluded from this standardization effort.

Upon receiving the required information, our Tri-Service Regional Business Office (TRBO) may contact you to arrange a meeting with one of our Clinical Analysts and/or our Clinical Product Team (CPT) to discuss the evaluation protocol. The CPT is comprised of clinicians from facilities in the Region that may conduct an evaluation of your product with samples provided by you at no cost to the Government. The evaluation decision will be based on product acceptability using clinical criteria.

After completion of the clinical evaluation protocol, the TRBO may contact you to request your "best and final" prices. Once prices have been established you may be asked to enter into a Regional Incentive Agreement (RIA) with TRICARE Region 3, 4 & 15 for signature by your Corporate Office and the Regional Logistics Chief.

If your company is not a current DAPA holder for this product group, you are still eligible to participate in the standardization process for this region by contacting the Defense Support Center-Philadelphia (DSCP) at (215) 737-8307. Your company can be considered for standardization once DAPA paperwork is pending at DSCP. Vendor must be able to demonstrate that DAPA agreement will be in effect with DSCP prior to completion of the standardization process for the Medial/Surgical Product Line.

If you have any questions regarding this letter or the standardization program in TRICARE Next Generation Southeast please feel free to contact the Team Leader, Triservice Regional Business Office, 40707 40<sup>th</sup> Street, Ft. Gordon, GA 30905, (w) 706-787-2093, (f) 706-787-1099.

**Attachment B**  
**Vendor Criteria Template**  
**Company Information**

Vendor Name:

Address:

DAPA (Distribution and Price Agreement Holder)? Yes or No

Circle One: Manufacturer or Distributor

Vendor Point of Contact:

Phone Numbers: (O) ©

Fax: Email:

% R&D of Gross Sales:

Production & Inventory sufficient to provide product line for all MTFs involved?  
Yes or No

History of back-orders and/or recalls: Yes or No

- a) Dates and Duration
- b) Cause
- c) How is information communicated to customer?
- d) Resolution
- e) Interim customer support provisions?

Return goods policy? Yes or No

If yes describe:

Attachment B (cont)

**General Product Information**

Item Nomenclature:

Item Product Number/Catalog Number:

Owens classification code:

Universal Product Number (UPN):

Length of time product has been on the Market:

Regulatory Agency Approval (FDA, EPA, OSHA, CDC other)? Specify

Is the item on War Reserve Material Mobilization Stockage listing? Yes or No

Full product line (range of sizes, specifications as described by CPT)? Yes or No  
Specify on attached regional usage spreadsheet.

Latex Free wound care products? Yes or No if yes please provide a list or indicate on usage spreadsheet those latex free wound care products.

If applicable: Supporting clinical research and published articles? Specify

Cross references available to competitive products? Yes or No

**Services**

Provide distribution locations and supply chain partnerships that will affect facilities in TriCare Next Generation Southeast?

Customer service support through 1-800 number?

Listing with phone numbers for local sales representative's coverage in region available? Yes or No If yes please provide.

Are clinicians or sales representatives available for product in servicing and education during trial and implementation process? Yes or No

Will product in-servicing and education be available upon request after product implementation throughout the length of a possible agreement? Yes or No

Type of educational materials available: (circle those that apply) brochures, videotapes, interactive access to web or other (please list).

## Attachment C

### WOUND CARE CRITERIA

#### **COMPANY CRITERIA**

- Must carry a full line (80%) of wound care products
- Must currently possess a Distribution and Pricing Agreement (DAPA)
- Must have the ability to Service Entire Region
- Must provide the following services:
  - \*Utilization Reports
  - \*Education programs
  - \*Clinical Support
  - \*Return Goods Policy
  - \*Volume Discounts
  - \*History of backorders or recalls
- Must provide:
  - \* Customer Service
  - \*800 Numbers
  - \*Product Representative for each account
- Must provide proposed implementation plan
- Must provide your company's distribution network
- Must provide MSDS if required for product
- Must provide a list of non-latex products available from company

#### **PRODUCT CRITERIA**

- Wound Care products include but is not limited to the following products: band aids, tapes, non-stick pads, eye pads, non-adhering dressings
- Must carry a latex free product line as well
- Products come in a variety of types and sizes
- Sizes and types of products are easily identified by the packaging
- Dressings adhere securely to patients' skin but don't tear upon removal
- Design of dressings allows for easy application
- Design of dressing supports ability to write on the dressing without it rubbing off
- Packages are easy to open
- Literature is available for the above products



## TRICARE Next Generation Southeast POINTS OF CONTACT

RIC	228-377-9648	DSN 597-9648
RLC	706-787-1091	DSN 773-1091
Team Leader	706-787-2093	DSN 773-2093
Clinical Analyst	706-787-2094	DSN 773-2094
Clinical Analyst	706-787-2019	DSN 773-2019
Data Analyst	706-787-2092	DSN 773-2092

## Attachment D

PART: U.S. GOVERNMENT PROCUREMENTS

SUBPART: SUPPLIES, EQUIPMENT AND MATERIAL

CLASSCOD: 65--Medical, Dental and Veterinary Equipment and Supplies--Potential Sources Sought

OFFADD: Southeast Regional Contracting Office, Bldg 39706, 40<sup>th</sup> Street, Ft Gordon, GA 30905

SUBJECT: 65—ENDO-TRACHEAL TUBES

DUE: 28 FEBRUARY 03

POC: Nurse Methods Analyst (706) 787-2019

DESC: This COMMERCE BUSINESS DAILY announcement is a notice that TRICARE Next Generation Southeast which include all DoD Medical Treatment Facilities (MTFs) in the states of Alabama, Georgia, Florida, Mississippi, South Carolina, and Tennessee are in the process of standardizing endo-tracheal tubes as listed in the subject line above. These include: adult and pediatric sizes of endo-tracheal tubes of all types. Companies with current Distribution and Pricing Agreements (DAPA's) with the Defense Supply Center Philadelphia for these items are eligible to participate in the standardization process.

**Base company criteria** for this product line includes but is not limited to the following: must carry a full line of endo-tracheal tubes, must provide customer support in the form of a sales representative for each MTF within TRICARE Next Generation Southeast, must provide clinical support, education programs, and utilization reports, must provide company's return policy, must provide company's distribution network, must be able to provide product for all MTFs within TRICARE Next Generation Southeast, and must provide electronic and hard-copy of proposed pricing and competitive product cross-reference.

**Base product criteria** for this product line includes but is not limited to the following: must be latex-free, must be available in all sizes – adult and pediatric, must have full-length radiopaque line, must have non-traumatic tip, must be available cuffed and uncuffed, must be individually packages, preferably without expiration date. Respondents must address all criteria listed above. Please send your response along with product literature and representative product samples (enough to share with a 9 person Clinical Product Team) of your company's endo-tracheal tubes to the following address:

Nurse Methods Analyst

Southeast Regional Medical Command  
BLDG 40707, 40<sup>th</sup> Street  
Ft. Gordon, GA 30905

***All proposals and samples must be received by close of business 28 February 2003.***

LINKURL: hcaa.medcom.amedd.army.mil  
LINKDESC: hcaa.medcom.amedd.army.mil  
EMAILADD: @se.amedd.army.mil  
CITE: (W-157 SN50O1D8)

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Questions or comments regarding this service? Contact the GPO Access User Support Team by Internet e-mail at <http://cbdnet.access.gpo.gov/cbd-support.shtml?http://cbdnet.access.gpo.gov/password.html> or toll-free at 1-888-293-6498.

**Attachment E**

**REGIONAL INCENTIVE AGREEMENT (RIA) – OPTION**

**TRICARE Next Generation Southeast**

**DAPA HOLDER:** \_\_\_\_\_

**PRODUCT LINE:** \_\_\_\_\_

1. The Regional Incentive Agreement (RIA) entered into pursuant to the Distribution and Pricing Agreement (DAPA) Number \_\_\_\_\_, between Tricare Region(s) \_\_\_\_\_ and DAPA holder \_\_\_\_\_, dated \_\_\_\_\_ for \_\_\_\_\_ (product line) is hereby revised as follows:

2. It is hereby mutually agreed that the option provision under the Agreement is invoked. By reason of the foregoing, the Agreement is hereby extended from \_\_\_\_\_ to \_\_\_\_\_, for an additional one-year option period. In applicable and mutually agreed, the Government reserves the right to exercise any remaining option periods under this agreement.

3. Unless as stated on the enclosed, all terms and conditions of the Agreement remain unchanged. Both parties reserve the right to cancel this Agreement, without cause, in whole or in part, thirty (30) days after receipt of written notification.

\_\_\_\_ No other changes apply and no electronic DAPA submission is required.

\_\_\_\_ See the enclosed. The DAPA holder is required to electronically load changes made herein under their Distribution and Pricing Agreement (DAPA) within 15 days after date of signature.

**(VENDOR)**

**TRICARE Next Generation Southeast**

\_\_\_\_\_  
Authorized Negotiator

\_\_\_\_\_

Title:

Title:

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Enclosure:

RIA Option Prices and/or other changes

**Attachment F**

**REGIONAL INCENTIVE AGREEMENT (RIA) – MODIFICATION**

**TRICARE Next Generation Southeast**

**DAPA HOLDER:** \_\_\_\_\_

**PRODUCT LINE:** \_\_\_\_\_

1. The Regional Incentive Agreement (RIA) entered into pursuant to the Distribution and Pricing Agreement (DAPA) Number \_\_\_\_\_, between Tricare Region(s) \_\_\_\_\_ and DAPA holder \_\_\_\_\_, dated \_\_\_\_\_ for \_\_\_\_\_ (product line) is hereby revised as follows:

\_\_\_\_ 2. It is hereby mutually agreed that the Region is now eligible for Tier \_\_\_\_ pricing or an additional price reduction, as listed on the enclosed. The effective date of the revised pricing is ( ) \_\_\_\_ days from the effective date of this modification or ( ) the first day of the month in which the pricing becomes effective in the DAPA Database.

**OR**

\_\_\_\_ 2. It is hereby mutually agreed that the changes to the RIA (price, part number revisions, item deletion, etc.) listed on the enclosed are effective ( ) \_\_\_\_ days from the effective date of this modification or ( ) the first day of the month in which the pricing becomes effective in the DAPA Database.

3. Unless stated on the enclosed, all terms and conditions of the Agreement remain unchanged. Both parties reserve the right to cancel this Agreement, without cause, in whole or in part, thirty (30) days after receipt of written notification.

4. The DAPA holder is required to electronically load all changes made herein under their Distribution and Pricing Agreement (DAPA) within 15 days after date of signature.

**(VENDOR)**

**TRICARE Next Generation Southeast**

\_\_\_\_\_  
Authorized Negotiator

\_\_\_\_\_

Title:

Title:

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Enclosure:

RIA Changes

## Attachment G

<b>Tricare Region</b>	<b>Branch</b>	<b>PrintName</b>	<b>State</b>	<b>DODAAC</b>
03	Air Force	45TH MEDICAL GROUP - PATRICK AFB	FL	FM2520
03	Air Force	6TH MEDICAL GROUP - MACDILL AFB	FL	FM4814
03	Air Force	347TH MEDICAL GROUP - MOODY AFB	GA	FM4830
03	Air Force	78TH MEDICAL GROUP - ROBINS AFB	GA	FM2060
03	Air Force	20TH MEDICAL GROUP - SHAW AFB	SC	FM4803
03	Air Force	437TH MEDICAL GROUP - CHARLESTON AFB	SC	FM4418
03	Army	MARTIN ARMY COMMUNITY HOSPITAL	GA	W33BRA
03	Army	FORT STEWART, GA - 3RD ID DMSO	GA	W91ATX
03	Army	DWIGHT D. EISENHOWER ARMY MEDICAL CENTER	GA	W33M8S
03	Army	WINN ARMY COMMUNITY HOSPITAL	GA	W33DME
03	Army	MONCRIEF ARMY COMMUNITY HOSPITAL	SC	W37N03
03	Army	USAMMA – GOOSE CREEK, SC	SC	W90KEW
03	Navy	BLOUNT ISLAND COMMAND - JACKSONVILLE, FL	FL	MMV888
03	Navy	NAVAL HOSPITAL JACKSONVILLE	FL	N00232
03	Navy	NAVAL HOSPITAL CHARLESTON	SC	N68084
03	Navy	NAVAL HOSPITAL BEAUFORT	SC	N61337
03	Other	USCG AIR STATION, OPA LOCKA	FL	Z20140
04	Air Force	42ND MEDICAL GROUP - MAXWELL AFB	AL	FM3300
04	Air Force	96TH MEDICAL GROUP - EGLIN AFB	FL	FM2823
04	Air Force	16TH MEDICAL GROUP - HURLBURT FIELD	FL	FM4417
04	Air Force	325TH MEDICAL GROUP - TYNDALL AFB	FL	FM4819
04	Air Force	81ST MEDICAL GROUP - KEESLER AFB	MS	FM3010
04	Air Force	14TH MEDICAL GROUP - COLUMBUS AFB	MS	FM3022
04	Army	FOX ARMY COMMUNITY HEALTH CENTER	AL	W31P0Y
04	Army	LYSTER ARMY COMMUNITY HOSPITAL	AL	W31NWT
04	Navy	NAVAL HOSPITAL PENSACOLA	FL	N00203
04	Navy	US NAVAL HOME - GULFPORT, MS	MS	8444AA
04	Navy	US NAVAL HOME - GULFPORT, MS	MS	N39368
04	Other	USCG ATC MOBILE – MOBILE, AL	AL	Z65100
04	Other	LIGHTHOUSE FOR THE BLIND – NEW ORLEANS, LA	LA	UY5179
15	Army	JOINT TASK FORCE BRAVO - SOTO CANO AIRBASE, HONDURAS	HD	W8033C
15	Army	RODRIQUEZ ARMY HEALTH CLINIC - FORT BUCHANAN, PR	PR	WF3QDW
15	Navy	NAVAL HOSPITAL GUANTANAMO BAY CUBA	CU	N61564
15	Navy	U.S. NAVAL HOSPITAL - ROOSEVELT ROADS - CEIBA, PR	PR	N65428