

OFFICIAL BID PRICE SHEET

710-25-024 Pharmacy Services

COST PROPOSAL MUST BE SUBMITTED SEPARATELY SEALED FROM THE TECHNICAL PROPOSAL. ANY REFERENCE TO ACTUAL COST(S) INCLUDED WITH THE TECHNICAL PROPOSAL SHALL RESULT IN REJECTION OF THE PROPOSAL.

Percentage(s) must be included to determine the highest total discount resulting in lowest cost. Bidder must submit a printed copy of the completed *Official Bid Price Sheet* with bid submission. The percentages included below will be based on the National Average Drug Acquisition (NADAC) list. Where NADAC is unavailable, the Wholesale Average Cost (WAC) will apply. DHS will not accept any rates above NADAC or WAC for medications and products.

Instructions: Enter the percentage discount below acquisition cost for each line item. This includes all medications, liquids, vaccines/injectables, and dry oral medications.

ITEM	DESCRIPTION	% Below Acquisition Cost
1	Over-the-Counter (OTC) medication including blister pack where appropriate	25.00%
2	Brand Name Prescription medication not covered by Medicaid or other insurance including blister pack where appropriate	25.00%
3	Generic Prescription medication not covered by Medicaid or other insurance including blister pack where appropriate	25.00%
4	Wound care products not covered by Medicaid or other insurance	25.00%
TOTAL DISCOUNT		100.00%

AUTHORIZED SIGNATURE:

By my signature below, I certify that I am authorized by the respondent to submit this bid on his/her behalf.

Vendor Name:

Pharmacy Care of Arkansas, LLC

Date: 11-19-24

Signature:

W. Perry Malone Jr

Title: President

Printed Name:

W. Perry Malone