

**ATTACHMENT B: STATEMENT OF WORK
AND VENDOR PERFORMANCE REQUIREMENTS**

I. OPERATIONAL REQUIREMENTS

1. Vendor Service Area

As of the Contract Commencement Date, Vendor will provide all Products and related Services, including those Products and Services of its subsidiaries, covered under this Contract, on a timely basis, to all of the MMCAP Participating Facilities located within the Service Area listed in *Attachment D* of this Contract. MMCAP reserves the right to add or delete MMCAP Members at any time, during the Contract term.

2. Required Vendor Personnel

Vendor must maintain sufficient personnel, including but not limited to, the personnel listed below, who can provide comprehensive and timely customer services and support to the MMCAP Participating Facilities and the MMCAP Office. Vendor's personnel must have professional qualifications, training and experience, to provide support related to the Products and Services covered by this Contract. In addition, Vendor represents and warrants that its personnel have validated competencies in accordance with all applicable law and regulatory agencies, related to Services and Products covered by this Contract. Upon request, Vendor will provide written documentation to the MMCAP Office and/or the MMCAP Participating Facilities and/or MMCAP Member State Contact, substantiating competencies of its personnel, servicing this Contract.

Vendor personnel must include but are not limited to the following:

- Primary Account Representative, alternate Account Representative, sales representatives;
- customer service representatives;
- clinical representatives;
- distribution center representatives;
- MMCAP Contract representatives for the MMCAP Office;
- MMCAP Contract representatives for the MMCAP Members;
- MMCAP account representatives;
- Product marketing specialists;
- Product training and education specialists;
- supply chain improvement specialists;
- Product ordering system technical support and training specialists;
- Contract implementation and transition team;
- account payable/receivable specialists, capable of addressing and timely solving invoice/credit rebill inquiries.

3. Customer Service to MMCAP Office.

3.1. The Vendor will provide its customer service function to the MMCAP Office, by assigning a Primary Account Representative to the MMCAP Office, and must provide a minimum of 72 hours' advanced notice to MMCAP, if that person is reassigned. The Primary Account Representative will be responsible to discuss at a minimum, but not limited, the following topics:

- Customer satisfaction;
- Vendor performance;
- specific account performance;
- required reports;
- other Contract related issues.

a. The Vendor's designated Primary Account Representative for the MMCAP Office will be as follows (or the Vendor's named successors):

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Name	Title	Office Address	Contact Information
David Delgado	Majority Owner/Contract Manager	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: 612-743-8877 Fax: 877-557-9123 Email: ddelgado@medicalsolutionsinc.com
			Phone: Mobile Phone: Fax: Email:
			Phone: Mobile Phone: Fax: Email:

b. The alternate Account Representatives will be:

Name	Title	Office Address	Contact Information
Lynn Meyers	Key Account/MMCAP Contract Sales	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: 612-747-1622 Fax: 877-557-9123 Email: lmeyers@medicalsolutionsinc.com
			Phone: Mobile Phone: Fax: Email:
			Phone: Mobile Phone: Fax: Email:

c. Additional functional contacts are:

Name	Title	Office Address	Contact Information
Curt Wilson	Customer Service/Technical Support	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: 651-283-9126 Fax: 877-557-9123 Email: cwilson@medicalsolutionsinc.com
Jenette Satriano	Accounting/Customer Service	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: Fax: 877-557-9123 Email: jsatriano@medicalsolutionsinc.com
			Phone: Mobile Phone: Fax: Email:

Medical Solutions, Inc. MMCAP Contract No. MMS18013

d. In the event the MMCAP Office determines the Primary Account Representative is non-responsive, the MMCAP Office will escalate issues to the following individuals to take appropriate corrective action for problem resolution:

Name	Title	Office Address	Contact Information
Curt Wilson	Customer Service/Technical Support	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: 651-283-9126 Fax: 877-557-9123 Email: cwilson@medicalsolutionsinc.com
Lynn Meyers	Key Account/MMCAP Contract Sales	10401 93rd Ave. N, Ste, 100 Maple Grove, MN 55369	Phone: 888-557-8020 Mobile Phone: 612-747-1622 Fax: 877-557-9123 Email: lmeyers@medicalsolutionsinc.com
			Phone: Mobile Phone: Fax: Email:

e. The Vendor shall notify the MMCAP Office of changes in the Vendor's key administrative personnel, in advance and in writing. Any employee of Vendor, who, in the opinion of the MMCAP Office, the MMCAP Participating Facilities or the MMCAP Participating Member State Contacts is unacceptable, will be removed from the project upon written notice to the Vendor; provided, however, any such removal must be for lawful reasons. In the event that an employee is removed pursuant to a written request from MMCAP's authorized representative, the Vendor will have ten (10) business days in which to fill the vacancy with an employee, in Vendor's sole discretion.

There will be no charge to the MMCAP Office, MMCAP Member States or the MMCAP Participating Facilities, for assigning replacement personnel. Vendor agrees that each such replacement personnel have the necessary orientation, background, knowledge, skills, and abilities, to perform in the position replaced. Such replacement personnel might be subject to advance approval by the MMCAP Office, the MMCAP Participating Facilities, and the MMCAP Member State Contact.

3.2. Customer Service Department

Vendor must maintain through the term of this Contract, a toll-free customer service call center. If the Responder is servicing the entire national MMCAP Membership then the call center operational hours must cover all the U.S. time zones, including Alaska and Hawaii, during normal business hours, and have a system to respond to emergency calls during its non-operational hours. If the Responder is proposing for a specific region then its call center must adequately cover the specific geographical area and time zones contained within the proposed region.

The call center representatives must be capable of responding to telephone or electronic message inquiries (e.g. email, or text inquiries, from hand-held messaging devices), from the MMCAP Participating Facilities and the MMCAP Office. The call center representatives must also have the corporate authority, experience and training to respond to any inquiry related to the MMCAP Contract.

Vendor shall provide the MMCAP Participating Facilities access to the Vendor's customer service department, which at a minimum, consists of the following:

- Customer support center located at: 10401 93rd Avenue N. Suite 100, Maple Grove, MN 55369;

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- Customer service hours of operation are 7:00AM CST- 6:00PM CST, excluding the following national holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and Christmas Day.
- Access to customer service representatives, with principal responsibilities in the areas of but not limited to: order entry, shipping, delivery, ordering, stocking issues, and other general customer service requests, can be reached toll free at 888-557-8020; by fax at, 877-557-9123 or by e-mail at sales@medicalsolutionsinc.com.
- Technical support is available 7:00AM CST- 6:00PM CST. Technical support can be reached toll free by calling 888-557-8020, or by email at sales@medicalsolutionsinc.com. Additional technical support will come from the manufacturers. See *Section 2.11, of II. Contract Transition and Implementation*, for more details on technical support for Product ordering.
- **Emergency Call Procedures:** To be used for life critical emergency situations only, that requires Product before the Next Scheduled Delivery Day.
 - During normal business hours (Monday-Friday) 7:00AM CST- 6:00PM CST, call customer service at 888-557-8020.
 - Outside normal business hours, please call 888-557-8020 and follow prompt to be routed to voicemail/forwarding or contact the individual cell phones listed.

3.3. MMCAP Participating Facility Customer Account Representatives

Vendor will have a designated account representative appointed by the Vendor's Primary Account Manager, who can address Contract related issues, as initiated by MMCAP Participating Facilities located in each MMCAP Member State. Upon request, the representatives will meet with MMCAP Office, MMCAP Member State/City Representatives and the MMCAP Participating Facilities, to discuss at a minimum, but not limited to, the following:

- Customer satisfaction;
- Vendor performance;
- State account performance;
- Reports (e.g., Contract compliance);
- Invoices for charge-backs and/or Products not billed to Medicare;
- Other contract related issues.

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