

## **Template For Uniform Formulary Price Quotes and Uniform Formulary Blanket Purchase Agreement (BPA)**

**1. PRICE QUOTE FOR INCLUSION ON UNIFORM FORMULARY:** By submitting this Uniform Formulary (UF) Blanket Purchase Agreement (BPA) price quote, [(insert name of Company)]

\_\_\_\_\_ henceforth, Company, agrees to provide pharmaceutical agents to military treatment facilities (MTFs) and/or the TRICARE Mail Order Pharmacy (TMOP) at the prices quoted at the attached Table 1. These prices are lower than or equal to the Federal Supply Schedule (FSS) prices available to DoD for the pharmaceutical agent(s). This price quote is contingent upon the pharmaceutical agent(s) being included on the DoD Uniform Formulary (UF). If the price quote is also contingent upon the number of pharmaceutical agents selected for the UF, that fact will be identified at Appendix A to this document. The Department of Defense (DoD) Pharmacy and Therapeutics (P&T) Committee will consider the price quote as part of its evaluation of the relative cost effectiveness of pharmaceutical agents in recommending the selection of agents for the UF, and the classification of a pharmaceutical agent in the generic, formulary, or non-formulary cost share tier. Assuming the DoD P&T Committee's relative cost effectiveness analysis determines that a pharmaceutical agent should not be recommended for exclusion from the UF, the P&T Committee will apply the standards described in 32 C.F.R. 199.21(j) to determine whether the pharmaceutical agent should be placed in the generic or formulary cost share tier. Should the DoD P&T Committee review the therapeutic class relevant to the pharmaceutical agent(s) contained in the Company's BPA price quote, and the DoD P&T Committee makes recommendations consistent with the Company's BPA price quote, and the Director, TRICARE Management Activity (TMA), makes a final decision to accept that recommendation, a TMA contracting officer will establish a UF BPA that incorporates the UF prices quoted for the pharmaceutical agents in Table 1 by completing Paragraph 13 below. The establishment of a UF BPA with a pharmaceutical company for a generic (multi-source) pharmaceutical agent does not establish that pharmaceutical company as the sole source of supply for the pharmaceutical agent. However, in the event of existing Joint DoD/VA contracts, UF BPA quotes will not be accepted for generic (multi-source) pharmaceutical agents.

**2. PRICE QUOTE FOR INCLUSION ON BASIC CORE FORMULARY OR EXTENDED CORE FORMULARY:** The Basic Core Formulary (BCF) and Extended Core Formulary (ECF) are subsets of the UF. The DoD P&T Committee determines whether a pharmaceutical agent is to be evaluated for the BCF or the ECF. The Company agrees to provide pharmaceutical agents to MTFs at the prices quoted in Table 1 below, contingent upon the pharmaceutical agent(s) being included on the BCF or the ECF. These prices are lower than the FSS prices available to DoD for the pharmaceutical agent(s). If the price quote is also contingent upon the number of pharmaceutical agents selected for the BCF or the ECF, that fact will be identified at Appendix A to this document. The DoD P&T Committee will consider the BCF or ECF price quote as part of its evaluation of the relative cost effectiveness of pharmaceutical agents in recommending the selection of one or more agents for inclusion on the BCF or ECF. Should the DoD P&T Committee recommend the inclusion of the Company's pharmaceutical agent(s) on the BCF or the ECF, and the Director, TMA, makes a final decision to accept that recommendation, a TMA contracting officer will establish a UF BPA that incorporates the BCF or ECF prices quoted for the pharmaceutical agents in Table 1 by completing Paragraph 13 below. The establishment of a UF BPA with a pharmaceutical company for a generic (multi-source) pharmaceutical agent does not establish that pharmaceutical company as the sole

source of supply for the pharmaceutical agent. However, in the event of existing Joint DoD/VA contracts, UF BPA quotes will not be accepted for generic (multi-source) pharmaceutical agents.

**3. SCOPE:** Company's quoted prices will be provided to the DoD Prime Vendor Program.

**4. EFFECTIVE DATE and PERIOD OF RESULTING PRICING AGREEMENT:** The agreement will be signed on the date that the Director, TMA, makes the final decision regarding placement of the pharmaceutical agent(s) on the UF and BCF or ECF. Prices will be loaded into the electronic pricing database by Defense Supply Center Philadelphia (DSCP) immediately upon receipt. **Prices shall be effective in the DoD's Prime Vendor systems for MTF and TMOP purchases no more than 14 calendar days after the date this agreement is signed.** The agreement will continue until 1) the drug class that contains this pharmaceutical agent(s) is reevaluated or 2) it is otherwise terminated in accordance with Paragraph 8, Prices and Price Changes, or Paragraph 9, Termination, stated below. If the drug class containing this pharmaceutical agent(s) is reevaluated, this pricing agreement, and the prices contained therein, will terminate when the follow-on prices in any proposed UF BPA price quotes in the drug class reevaluation become effective, no more than 14 calendar days after the follow-on UF decision is signed by the Director, TMA.

**5. PARTICIPATING ENTITIES:** MTF prices will apply to all transactions made by DoD MTF pharmacies, USFHP Designated Providers, and the U.S. Coast Guard. TMOP prices will apply to all transactions made by the TMOP contractor to replenish stock used to fill prescriptions for TRICARE beneficiaries through the TMOP. "Other Government" ordering activities are excluded from utilizing these UF BPA prices.

**6. EXTENT OF GOVERNMENT OBLIGATION:** This price quotation imposes no obligation on DoD to purchase any product. If a BPA is signed by both parties, DoD will be obligated only to the extent of authorized transactions actually made pursuant to that agreement, according to the pharmaceutical agent's inclusion on the UF, cost share tier classification on the UF, and inclusion on the BCF or ECF.

**7. FINAL APPROVAL BY GOVERNMENT:** In submitting this UF BPA price quote, the Company understands that the DoD P&T Committee will consider these prices in determining the cost of the pharmaceutical agent to the government as part of its relative cost effectiveness evaluation. The prices in the UF BPA price quotation will not be incorporated into a DoD executed UF BPA until such time as the Director, TMA, approves the recommendation of the DoD P&T Committee.

**8. PRICES and PRICE CHANGES:**

(a) Company agrees to hold its UF BPA price quote for 180 days. Company agrees to provide its products at prices no higher than those submitted here, in any resulting UF BPA for at least one calendar year following the effective date of that UF BPA. However, during the time period that the UF BPA is in effect, Company may offer price decreases at any time for any duration.

(b) The price per dosage form unit for a given dosage form and strength of the pharmaceutical agent will be the same for all available package sizes (e.g., 30s, 100s, 1000s) within a given dispensing venue. Quotes must include all NDCs available for purchase by the Government and on the Company's FSS contract for quoted form and strength. Company requests for exception to the same price per dosage form unit across package sizes must be submitted in writing to the Contracting Officer not less than 14 calendar days prior to the quote due date. It is within the Government's sole discretion to grant an exception. If an exception is granted by the Government, the DoD P&T Committee's relative cost evaluation for that dosage form and strength will use the price per dosage form unit from the package size with the highest price per dosage form unit. Company requests to exclude hospital Unit Dose packaged NDCs must be submitted in writing to the Contracting Officer not less than 14 calendar days prior to the quote due date. The Government decision on exclusion of hospital Unit Dose packaged NDCs or exception(s) to the same price per dosage form unit across

package sizes will be provided to Company no more than seven calendar days after receipt of request. The Government decision is final and not subject to appeal.

(c) If after one calendar year following the effective date of any UF BPA, there has been an increase in the FCP reflected on Company's FSS contract, Company may increase its price under the UF BPA. However, in no event shall a price increase exceed the price change reflected by the Consumer Price Index (CPI) for All Urban Consumers, Current Series, as published by the Bureau of Labor statistics, U.S. Department of Labor, for Prescription Drugs and Medical Supplies, Series ID CUUR0000SEMA.

**9. TERMINATION:** Except as provided in Paragraph 4, Effective Date and Period of Resulting Pricing Agreement and Paragraph 8, Prices and Price Changes, above, either party may terminate any resulting UF BPA by providing written notice to the other. Such notice shall be effective one hundred twenty (120) days following receipt of this notice of termination by the other party. If the Company's existing FSS Contract for any pharmaceutical agent(s) quoted in this UF BPA terminates for any reason (except where new FSS Contract(s) for the same item(s) is/are negotiated), this UF BPA automatically expires.

**10. GENERAL PROVISIONS:** The Company must have an existing FSS Contract for any pharmaceutical agent(s) quoted in this UF BPA. All terms of Company's FSS Contract apply to this agreement. **(NOTE: The Veteran's Administration has ruled that an "FSS Interim Agreement" is an undefinitized Letter Contract as defined by Federal Acquisition Regulation Part 16.603 and does not support the execution of a UF BPA. Quotes submitted under FSS Interim Agreements will not be considered by the DoD P&T Committee when evaluating the relative cost effectiveness of a pharmaceutical agent.)**

a. Company's current **FSS Contract number(s)** \_\_\_\_\_ (list all applicable) include the pharmaceutical agent(s) quoted in this UF BPA.

b. DoD P&T Committee designated **Drug Class** quoted in this UF BPA \_\_\_\_\_

c. This UF BPA quote is made in accordance with **Condition Set #** \_\_\_\_\_ as defined at **Appendix A**

**11.** Send all submissions to: Adrian Blackman, Contract Specialist/CMB  
TRICARE Management Activity  
16401 East Centretch Parkway  
Aurora, CO 80011-9066

**12.** The Company point of contact for the administration and management of this agreement is:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FOR THE COMPANY

BY: (signature) \_\_\_\_\_ Date \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
[Name of COMPANY] \_\_\_\_\_

**13. (To be completed by Contracting Officer)**

A Uniform Formulary (UF) Blanket Purchase Agreement (BPA) is hereby established between the Company and the Department of Defense for the pharmaceutical agents and applicable prices quoted in the attached Table 1, based on the final decision of the Director, TMA to [check all that apply]:

- \_\_\_\_\_ Include the pharmaceutical agent(s) on the Uniform Formulary
- \_\_\_\_\_ Include the pharmaceutical agent(s) on the Basic Core Formulary
- \_\_\_\_\_ Include the pharmaceutical agent(s) on the Extended Core Formulary

BY: \_\_\_\_\_  
Name: William H. Coffenberry Date UF decision made  
TMA Contracting Officer

## Appendix A for the Feb 2010 DoD P&T Meeting

### Condition Sets for Uniform Formulary Voluntary Agreements for TRICARE Retail Refunds (UF-VARR)

The following Condition Sets, as authorized at each listed UF Drug Class Page, identify the conditions under which UF-VARR quotes are to be submitted by the Company.

The Company must submit a separate, complete UF-VARR quote for each Condition Set that applies to the Company's pharmaceutical agents in a given drug class. The Company must record the Condition Set # that applies to a given UF-VARR quote in the appropriate blank on Table 1, Uniform Formulary Refund Quote.

The refund quoted in **Table 1** will apply to the resulting UF-VARR if the quoted pharmaceutical agent is selected for inclusion on the UF in no worse than the formulary (2<sup>nd</sup>) cost share tier. The refund quoted in **Table 1** is **not** contingent on the quoted pharmaceutical agent being selected for inclusion on the BCF or ECF.

#### **DRUG CLASS: Basal Insulins subclass**

UF BPA Condition Set #	Condition Set	UF VARR Condition Set #
<b>C10201</b>	Basal Insulin Use: Two vials and two pens to the UF with one vial –pen combination of the same product line to the BCF. In addition, a prior authorization process would require all new basal insulin users to complete an adequate trial of the preferred agent before the alternate basal insulin is provided to a new user through an MTF pharmacy, the Mail Order, or a Retail network pharmacy. (2 vials and 2 pens UF, 1 vial-pen combination BCF)	<b>VC10201</b>
<b>C10202</b>	Basal Insulin Use: Two vials and two pens to the UF with one vial –pen combination of the same product line to the BCF with no prior authorization requirement. (2 vials and 2 pens UF, 1 vial-pen combination BCF)	<b>VC10202</b>
<b>C10203</b>	Basal Insulin Use: Two vials and one pen will be selected to the UF and one vial and zero to one pen for the BCF. One pen will be designated nonformulary. (2 vials and 1 pen UF, 1 vial and 0-1pen BCF)	<b>VC10203</b>
<b>C10204</b>	Basal Insulin Use: Two vials and two pens will be selected to the UF and one vial and zero to one pen for the BCF. (2 vials and 2 pens UF, 1 vial and 0-1 pen BCF)	<b>VC10204</b>
<b>C10205</b>	Basal Insulin Use: One to two vials and one to two pens will be selected to the UF and one vial and zero to one pen for the BCF. (1-2 vials and 1-2 pens UF, 1 vial and 0-1 pen BCF)	<b>VC10205</b>

#### **DRUG CLASS: ANTIHEMOPHILIC FACTORS**

UF BPA Condition Set #	Condition Set	UF VARR Condition Set #
<b>C10206</b>	Antihemophilic Factor VIII Use: Eleven factor VIII agents to the UF and one to the ECF. (11 Factor VIII UF, 1 ECF)	<b>VC10206</b>
<b>C10207</b>	Antihemophilic Factor IX Use: Five Factor IX agents to the UF and one to the ECF. (2 Factor IX UF, 1 ECF)	<b>VC10207</b>



