



CONTRACT NUMBER: N19069	SUBRECIPIENT * <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
FFATA FORM REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	PERSONAL SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

* see Attachment 2

THIS AGREEMENT is made by and between the state of Washington Department of Health, hereinafter referred to as DOH, and the party whose name appears below, hereinafter referred to as the Contractor.

CONTRACTOR NAME and ADDRESS:

**Ramsell Public Health Rx, LLC
200 Webster Street, Suite 200
Oakland, CA 94607**

UBI #: 602-114-176

IT IS MUTUALLY AGREED THAT:

PURPOSE: The purpose of this contract is to provide pharmacy benefits management services for clients of the DOH Early Intervention Program.

STATEMENT OF WORK: The Contractor shall provide the all necessary personnel, equipment, materials, goods and services and otherwise do all things necessary for or incidental to the performance of the work as described in **Exhibit A**, attached hereto and incorporated herein.

PERIOD OF PERFORMANCE: Subject to its other provisions, the period of performance under this contract shall be **from January 1, 2012 through June 30, 2013** unless sooner terminated as provided herein. No billable activity may take place until this contract has been signed by both parties.

DEPARTMENT OF ENTERPRISE SERVICES APPROVAL: In the event this agreement is designated above as a personal service: Under the provisions of Chapter 39.29 RCW, personal services contract(s) and amendments may be required to be filed with the Department of Enterprise Services (DES) for approval. No contract or amendment required to be so filed is effective and no work thereunder shall be commenced nor payment made therefore until ten (10) working days following the date of filing, and, if required, until approved by DES. In the event DES fails to approve the contract or amendment, the contract shall be null and void.

FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA): If checked above, this contract is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how federal funds are spent.

To comply with the act and be eligible to enter into this contract, your organization must have a Data Universal Numbering System (DUNS®) number. A DUNS® number provides a method to verify data about your organization. If you do not already have one, you may receive a DUNS® number free of charge by contacting Dun and Bradstreet at www.dnb.com.

Information about your organization and this contract will be made available on www.USASpending.gov by DOH as required by P.L. 109-282. DOH's form, **Federal Funding**

Accountability and Transparency Act Data Collection Form, is considered part of this contract and must be completed and returned along with the contract.

CONSIDERATION: The maximum consideration available under this contract shall not exceed **\$1,875,000.00** without a properly executed written amendment signed by representatives of both parties authorized to do so.

Source of funds: Federal: \$-0- State: \$1,875,000 Other: \$-0- Total: \$1,875,000

Federal funding for this contract were received by DOH through OMB Catalogue of **Federal Domestic Assistance Number: N/A**. Contractor agrees to comply with all applicable rules and regulations associated with these funds.

Unless otherwise indicated in this contract, any state funds which are unexpended as of June 30th will not be available for carry over into the next state fiscal year (July – June).

INVOICES AND PAYMENT: Contractor will submit invoices to the DOH Project Manager for all amounts to be paid. Invoices must reference this contract number and provide detailed information as requested. All invoices must be approved by DOH prior to payment; approval will not be unreasonably withheld. DOH will authorize payment only upon satisfactory completion and acceptance of deliverables and for allowable costs as outlined in the statement of work and/or budget. DOH will return all incorrect or incomplete invoices and will not pay for services that occur outside the period of performance. The Contractor will not invoice for services if they are entitled to payment, have been, or will be paid by any other source for that service.

DOH will issue payment within 30 days of receiving a correct and complete invoice and approving the deliverable(s). DOH must receive correct and complete invoices within 60 days of the contract expiration date. Late invoices will be paid at the discretion of DOH and are contingent upon the availability of funds. Failure to submit a properly completed IRS form W-9 may result in delayed payments.

GOVERNANCE: In the event of an inconsistency in this contract, unless otherwise provided herein, the inconsistency shall be resolved by giving precedence in the following order:

- Applicable Federal and State statutes and regulations
- Special Terms and Conditions
- Attachment 1, General Terms and Conditions
- Exhibit A, Statement of Work
- Any other provision of the contract whether incorporated by reference or otherwise.

UNDERSTANDING: This contract, including referenced exhibits, attachments & documents included herein by reference, contains all the terms and conditions agreed upon by the parties. No other understandings, oral or otherwise, regarding the subject matter of this contract shall exist or bind any of the parties hereto.

APPROVAL: This contract shall be subject to the written approval of DOH Contracting Officer and shall not be binding until so approved. Only the Contracting Officer or his/her designee, by written delegation made prior to action, shall have the expressed, implied, or apparent authority to alter, amend, modify, or waive any clause or condition of this contract. Furthermore, any alteration, amendment, modification, or waiver of any clause or condition of this contract is not effective or binding unless made in writing and signed by the Contracting Officer.

IN WITNESS WHEREOF: DOH and the Contractor have signed this agreement.

CONTRACTOR SIGNATURE	DATE
print or type name & title below:	
DOH CONTRACTING OFFICER SIGNATURE	DATE

This contract has been approved as to form by the attorney general.

**NOTE: THE CONTRACTOR'S SIGNATURE IS ALSO REQUIRED ON ATTACHMENT 2,
FEDERAL CERTIFICATIONS AND ASSURANCES (pages 88 and 91)**

EXHIBIT A STATEMENT OF WORK

DOH Contract #N19069 Exhibit A – Statement of Work

Communications

In written/fax/email/web communication with pharmacies, the Contractor will refer to this program as the Washington State Department of Health HIV Early Intervention Program (EIP). In written/fax/email/web communication with clients, the Contractor will refer to this program as Early Intervention Program (EIP). In all communication with pharmacies, clients, and others, the contractor will refer to itself as Ramsell Public Health Rx, or Ramsell.

Pharmacy network

The Contractor will establish and maintain a statewide pharmacy network to serve DOH clients comparable to Exhibit C, WA Statewide Pharmacy Network, which includes the following:

1. Over-the-counter (chain store and independent pharmacies)
2. Institutional (i.e. University based hospitals, county hospitals, Health Maintenance Organizations such as Group Health or Kaiser)
3. Specialty (i.e. HIV targeted services)
4. Mail order

The Contractor will maintain an open enrollment process that will allow additional pharmacies to enter the network that meet the following criteria:

- 1) Have no licensure encumbrance by any state or federal law;
- 2) Have a license issued by the residing State; and
- 3) Be willing to accept reimbursement provided by the Contractor.

In the open enrollment process, pharmacies enter a contractual agreement with the Contractor. The contract will stipulate that pharmacy providers are independent contractors. As independent contractors, the Contractor will not supervise, direct or otherwise intervene in their provision of pharmacy services. The contract shall also state that providers must operate in compliance with service standards, maintain adequate inventory, and fill prescriptions promptly.

The pharmacies must maintain insurance and hold the Contractor and DOH harmless and maintain adequate insurance. The contractual agreement between the Contractor and the pharmacies will include the following language regarding the Hold Harmless clause and insurance:

Hold Harmless The Provider shall look only to Ramsell for compensation for services rendered to a Member for covered services under a SPONSOR Agreement. The Provider agrees not to bill, charge, collect a deposit from, seek compensation from, seek remuneration from, surcharge or have any recourse against Member or persons acting on behalf of Member (other than Ramsell), except to the extent that shares of cost are specified in the applicable SPONSOR Agreement. Provider agrees not to maintain any action at law or in equity against a Member to collect sums that are owed by Ramsell to Provider under the terms of this Agreement, even in the event Ramsell fails to pay, becomes insolvent or otherwise breaches the terms and conditions of this Agreement. This section shall survive termination of this Agreement and shall be construed to be for the benefit of Members. This section is not intended to apply to services provided after this Agreement has been terminated, except as otherwise provided in this Agreement, or with respect to non-covered services. The Provider further agrees that this provision supersedes any oral or written agreement, hereinafter entered into between Provider and Member or persons

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acting on Member's behalf, insofar as such agreement relates to payment for services provided under the terms and conditions of this Agreement.

Pharmacy Liability Insurance Provider shall furnish and keep in full force and effect at all times during the term of this Agreement, the following insurance or, if self-insured provide to Ramsell written representations or certificates of such self-insurance satisfactory to Ramsell:

- A. Worker's Compensation
 - 1. Statutory Compensation Coverage
 - 2. Employer's Liability Insurance with limit not less than \$1,000,000.
- B. General Liability
 - 1. Limits of Liability: \$1,000,000.00 per occurrence combined single Limit Bodily Injury and Property Damage.
 - 2. Coverages: Bodily Injury, Broad Form Property Damages, Blanket Contractual Liability
- C. General Liability
 - 1. Limits as stated in #2.
 - 2. Coverage: Personal Injury
- D. General Liability
 - 1. Limits as stated in #2.
 - 2. Coverage: Products/completed operations (any deductible is not to exceed \$1,000.00 per occurrence on all Comprehensive General Liability coverage.)
- E. Professional Liability
 - For all professional employees licensed as a condition of employment, insuring against error or omission in rendering or failing to render professional services.
 - 1. Limits of Liability: \$1,000,000 per claim
 - 2. Deductible not to exceed \$1,000 per claim

Provider will provide evidence of such insurance or self-insurance to the satisfaction of Ramsell within thirty days after execution of this Agreement. Failure to maintain the aforementioned insurance shall constitute grounds for termination of this Agreement.

If a pharmacy provider does not meet the Contractor's service, inventory and timeliness standards, the Contractor will notify DOH to discuss whether the pharmacy provider should be allowed to enter or stay in the pharmacy network.

The Contractor will inform DOH when there are changes in the pharmacy network and notify DOH in a timely manner of problems or emergent situations.

The Contractor will routinely communicate with pharmacies in the network to inform them of program issues, such as formulary updates, changes in how DOH interacts with insurance companies or other government payers, and other relevant issues. The Contractor will use its Fax-Broadcast System, which allows it to distribute program information to network pharmacies via facsimile. The Fax-Broadcast System will function by faxing text documents to designated recipients overnight. The Contractor will also provide DOH with copies of broadcast faxes that go to the entire network.

The Contractor will also provide relevant information on its non-secured web site, which has a menu option for pharmacies. The web site has a section for non-participating pharmacies as well as pharmacy providers in the network. Pharmacies that have Internet access may use the web site to obtain updated program information. The network pharmacy section of the Contractor's web site will be password protected and contain the following:

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- A list of covered medications, with an option to print the most recent formulary;
- Pharmacy provider forms, with an option to print the selected form(s); and
- Pharmacy provider notices/documents that have been sent via the Contractor's fax-broadcast system.

The Contractor will also use its Pharmacy Provider Manual as an additional communication tool. The Contractor will provide the Pharmacy Provider Manual to DOH by January 1, 2012. The manual will contain the following items regarding Washington State's prescription drug program:

- General program information;
- Prescription processing: prior authorization procedures, exceptional prescription processing, supplemental forms used in prescription processing;
- Program administration information;
- Client service information; and
- Master forms for reproduction.

The Contractor may also communicate by mailing informational documents to its network pharmacy providers via US Postal Services or Federal Express.

Drug cards

The Contractor will produce prescription drug cards for use when clients go to the pharmacies to get their prescriptions filled. The Contractor will mail eligibility cards to DOH within seven business days of being notified by DOH that the client is eligible for the program. Any items mailed to DOH will be sent in corporate envelopes and identified as confidential and without any reference to HIV or AIDS on the outside of the envelope. DOH will mail the cards to clients.

The prescription drug cards will contain patient identification information that pharmacy providers use to identify eligible clients. Fields of information will be limited to client name, date of birth, gender, member ID number, eligibility begin and end date, Washington Department of Health Early Intervention Program or EIP and identifiers for other insurance coverage. The Contractor may include other fields of information with DOH approval. The cards will also have the Contractor's toll free phone number and logo preprinted on the cards. Information will be typed or printed on the cards. For confidentiality purposes, they must not include HIV or AIDS anywhere on the cards.

The Contractor must have procedures for pharmacies to verify the eligibility of a client when there is no eligibility card available. Providers may call the Contractor's toll free line and speak to any of the Contractor's help desk staff during regular business hours or they can use the Contractor's touch tone operated automated system 24 hours a day to verify a client's eligibility status.

The Contractor must be in compliance with HIPAA's Privacy Standard for Individually Identifiable Health Information.

Claims processing

The Contractor will provide electronic pharmacy claims processing for pharmacies in the network. Point-of-Sale (POS) claims will be transmitted and adjudicated online according to NCPDP standards. The Contractor will provide the capacity for pharmacies to transmit claims via old NCPDP standards as well the most up to date NCPDP standards as they are promulgated.

Pharmacy providers must request prior authorization from the Contractor to process claims for any APDP client with private or other insurance coverage. This will ensure that DOH is the payer of last resort while allowing the secondary claim to DOH to be transmitted and adjudicated on line.

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Pharmacies must bill the other payers prior to billing the Contractor. The pharmacy must fax to the Contractor the label (POS printout) showing the co-pay amount requested by the private insurance carrier along with a prior authorization form. The Contractor may also independently verify the status of a DOH client's private insurance benefit with the insurance carrier. Prior authorization (PA) numbers will be issued and returned to the pharmacy. The Contractor will ensure that pharmacies will be paid only the approved co-pay amount for these transactions.

Once the prior authorization is issued, the pharmacy may transmit the claim and receive online claim adjudication. Though the mechanism is in place to allow pharmacies to split bill, there are some pharmacies that are still limited by their pharmacy software system capabilities.

Pharmacies that cannot bill two insurance plans (i.e. split bill) through their POS system shall use the Contractor's prior authorization form to request manual secondary claim processing. In these instances, an approval response is generated for their PA request, with a notation that no further processing is required. The Contractor will process the claim and append that claim information to the individual client's claim history. The claim will appear on the explanation of benefits and will be billed appropriately to DOH just as any claim transacted and adjudicated online.

For those clients with primary payer sources other than DOH, the Contractor will assign group numbers that indicate the existence of other insurance coverage. The Contractor's database will contain fields recording private insurance deductibles and DOH co-payments.

The Contractor's prior authorization process will enforce DOH's formulary guidelines and restrictions on pharmacy claim processing. Prior authorization will be required for exceptional requests such as vacation fills, or early fills due to dosage change or lost medications.

Pharmacies will use the Contractor's Prior Authorization Request Form to obtain a prior authorization. Pharmacies will submit prior authorization (PA) request forms to the Contractor via the Contractor's toll-free fax. The form may be completed by the pharmacist or pharmacy technician and can accommodate up to eight separate transactions. There will be a section included on the form requiring the pharmacy to indicate the reason for the PA request. There will also be a section for comments/explanation for pharmacies to notate any additional information. In select situations, pharmacies may be requested to supply additional information before a prior authorization can be approved, such as a copy of the prescription, or completion of an additional form requiring additional clinical information to justify the prescription.

The Contractor pharmacy technician, under the oversight and supervision of one of the Contractor's pharmacists, will receive, review and process prior authorization requests. After review and processing of the prior authorization request, pharmacies will receive a computer generated fax back form containing a prior authorization number(s) for approval, or explanations for authorization denials. Exceptional requests will not transmit without the Contractor's prior approval. The Contractor will process prior authorization requests within one business day or faster.

The Contractor will generate quality assurance reports that verify the accuracy of invoices submitted to DOH, and to verify the accuracy of reimbursements issued to pharmacy providers.

The Contractor will generate the following reports:

- Pharmacy File Errors – i.e. Duplicate NABP codes;
- Drug File Errors – i.e. Duplicate NDC codes;
- Patient File Errors – i.e. Duplicate Patient ID or Federal ID Codes;
- History File Errors – i.e. Duplicate claim reference numbers, duplicate prescriptions;
- Incorrect Claim Prices – i.e. Variances in claim prices in comparison to drug prices from the Contractor's Drug Pricing Source ;
- Claim Back-out Processing – Identifies each pharmacy claim back-out.

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- Quality Performance Measures – The Contractor will work to develop a performance measure with DOH that monitors client antiretroviral adherence based on prescription refills or other Medication Possession Ratio semi-annually.

These reports identify for further review, transactions that are for unusual quantities and/or dosages, and those that may represent a duplicate transaction.

For online prescription transactions, the Contractor will use an electronic screening procedure to do the following:

- Flag transactions transmitted outside of a client’s eligibility dates with a message indicating, “**Filled after coverage terminated**” and for transactions transmitted for invalid clients, with a “**Non-matched Cardholder ID**” on-line message.
- Flag the day’s supply of a new fill or refill dispensed product, with an “**Incorrect Metric Quantity**” on-line message to enforce a 30-day minimum supply for maintenance drugs, unless client’s insurance requires more than 30-day fill at a time.
- Flag “**Too Soon Refill**” when less than 80% of the total quantity in the previous fill has been used. This technique is used to review and process changes in prescription directions, and prevent duplicate claim processing. All too-soon refill rejects cannot be transmitted without prior approval.
- Flag a pharmacy claim at the point of service with a message to the pharmacy alerting the pharmacist to a variety of treatment standards using the Proactive Drug Utilization Reviews (PRODUR). Examples of such standards include low or high doses, drug-drug interactions, therapeutic duplication of products, and allergies to specific products as reported to the pharmacy by the client.
- Flag non-formulary products with a “**NDC Not Covered**” on-line message, and prompt the pharmacy to inquire by phone for more detail or to initiate a prior authorization request. This prevents the dispensing of **non-formulary drugs without Prior Authorization**.
- Flag a pharmacy claim when plan limitations are exceeded.
- Flag specific transactions for clients having other primary/secondary coverage, with a message transmitted on-line to the pharmacy that states, “**Prior Authorization Required**”. This forces the pharmacy to obtain prior approval from the Contractor for clients with other third party prescription benefits.
- Flag specific formulary products, with a “**Prior Authorization Required**” on-line message. For example, this message would be used to force a pharmacy to obtain prior approval before dispensing a drug with state imposed criteria for use.

The Contractor must achieve HIPAA compliance according to the federal timelines. Pharmacy claims processed through the Contractor’s Point of Sale network will be transmitted and adjudicated through NDC/HealthTrans.

The Contractor will have the capacity and infrastructure to fully implement the data exchange necessary to meet the requirements of the CMS ADAP Data Sharing Agreement. The purpose of the ADAP data sharing agreement process is to coordinate the prescription drug benefits between Medicare Part D plans and ADAPs, as specifically required by the MMA and subsequent law. This collection of all prescription drug related benefits will facilitate the tracking of TrOOP (True Out-of-Pocket) expenses incurred by each Medicare beneficiary. Monthly tasks necessary to complete the requirements of the CMS DSA are:

1. Each month the Contractor (as the ADAP designated partner) submits an electronic input file of all enrollees to the COBC over the Internet using Secure FTP or HTTPS or via an existing T-1 line.

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2. The COBC edits the input file for consistency, and attempts to match those enrollees with Medicare Part D enrollment.
3. Where the COBC determines that an enrollee on the ADAP file is a Medicare Part D beneficiary, the COBC updates that record to the CMS Medicare Beneficiary Database (MBD), which holds prescription drug coverage information on all Medicare Part D beneficiaries. The MBD will send daily updates of all prescription drug coverage of Part D beneficiaries to the TrOOP Facilitation Contractor and to the Part D plan that the beneficiaries are enrolled in.
4. The COBC then submits a response file to the Contractor via the same method used to submit the input file. This file contains a response record for each input record the ADAP submitted. The response record shows if the ADAP enrollee is a Part D beneficiary, if the COBC applied the record to the MBD, if the record was not applied to the MBD, and why (e.g., the record contained errors or the record did not provide enough information about the enrollee), in which Part D plan the beneficiary is enrolled, and other Part D enrollment information.
5. The Contractor then examines the response file to determine whether: The records were applied; the COBC was not able to match the ADAP enrollee in the CMS systems; or the records were not applied because of errors. (The Contractor must correct any records so that from subsequent full replacement input files the corrected records can be applied to the MBD.)
6. The Contractor updates its internal records on the Part D enrollment of its enrollees.
7. When the Contractor submits the next monthly full input file, it also sends corrections of all the errors from the previous submission.
8. The Contractor must obtain and use a unique TrOOP facilitation RxBIN and RxPCN as identifiers to the benefits coordination network.

Formularies

DOH will define the program's formularies, which includes individual drugs and classes of drugs. The Contractor will provide the following formulary management services:

1. Selection and maintenance of all current data elements for drugs included on each formulary.
2. Notification of pharmacies, and DOH staff of formulary changes.
3. Electronic update of formulary prices every week.
4. Provision of secure telephony access for all pharmacies to verify any formulary drug with the use of their NABP number and the National Drug Code.
5. Maintenance of a Contractor web site providing formulary information.
6. Enforcement of prior authorization or code 1 diagnosis requirements for selected formulary items.

DOH will direct the Contractor to add or subtract specific drugs or classes of drugs. The Contractor will automatically add drugs to the approved classes when new drugs in those classes are approved by the federal Food and Drug Administration. The Contractor will add or subtract individual drugs identified by DOH within 24 hours. The Contractor will notify DOH of the need to add or subtract drugs in the approved classes within 2 business days of FDA approval or updates.

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For the purpose of adding drugs to approved classes when the FDA adds new drugs to those classes, entire classes of drugs will be linked by a unique identifier code, known as the “therapeutic class code” within the Red Book database, or known as the “HIC3” code within the First DataBank database. The Contractor will flag these classes for notification to and approval from DOH for addition to the formulary to ensure that they are added upon FDA approval.

The Contractor will take the following steps when DOH requests a formulary change:

1. Drug activation will be initiated within the the Contractor system and at the claims adjudicator HealthTrans LLC. The drug selection may be National Drug Code (NDC#) specific, generic formulation code (GFC#) or generic code sequence number (GCN#) specific, or drug class specific. A start date and any dispensing restrictions will be posted. Reimbursement rates for state invoicing and pharmacy reimbursement will be entered.
2. Preparation of a fax broadcast within 24 hours that will notify all pharmacies within the dispensing network of the planned change. DOH will also receive a copy of this fax broadcast.

Technical support to DOH, pharmacies and clients

The Contractor will provide technical support to DOH staff, pharmacies, and clients. The Contractor will maintain a staff that includes licensed pharmacists, pharmacy technicians, and additional staff that assist in the enrollment and eligibility process. The Contractor’s Client Support Representatives will provide support to clients and DOH staff. The Contractor’s Provider Support Representatives consist of pharmacy technicians that provide technical support to pharmacy providers, clients, and DOH staff.

The Contractor will maintain business hours of Monday through Friday 9am-7pm, Saturday 9am-5pm and Sunday 11am-4pm Pacific Time. The Contractor will provide direct telephone access to its staff during business hours and to a Contractor supervisor Monday – Friday and on-call during weekend hours. Pharmacy providers, clients, and/or DOH staff who call the Contractor to speak to a live person will have a maximum hold time of 3 minutes.

The Contractor will also provide a secure telephony system (Electronic Eligibility Verification System (EEVS)) for pharmacy providers and DOH staff to access 24 hours a day. To use the Contractor’s EEVS, pharmacy providers and/or DOH staff may call the Contractor toll-free and select the appropriate phone menu option. By entering an assigned password, pharmacy providers may use the Contractor’s EEVS to verify client eligibility status and program formulary status. DOH staff may use the Contractor’s EEVS to verify client eligibility status.

Internet web site

The Contractor will provide an Internet web site that will be available 24-hours a day. the Contractor’s web site will contain secure and non-secure web sites. The non-secure web site will be available to anyone with Internet access and feature the following:

- Updated program information (i.e. program eligibility requirements);
- A search tool used to identify participating pharmacy providers by city, zip code, or county; and
- The formulary, with an option to print the latest version.

The Contractor’s non-secured web site will have a menu option for pharmacies. This portion of the web site will have a section for non-participating pharmacies as well as pharmacy providers in the network. Pharmacies that have Internet access may access the Contractor’s non-secured web site to obtain information on how to become a participating pharmacy. The participating pharmacy section of the Contractor’s web site will be password protected and will contain the following:

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- The DOH formulary, with an option to print the latest version;
- The Contractor pharmacy provider forms, with an option to print the selected form(s); and
- Pharmacy provider notices/documents that have been sent via our fax-broadcast system.

Grievance Procedures

The Contractor will provide grievance procedures for clients and pharmacy providers to address grievances regarding the provisions of the services or related to a Contractor contract or administration issue.

Grievance procedures for pharmacy providers will be as follows:

1. Disagreement or disputes related to specific prior authorization requests should be resolved with the Contractor pharmacy technician concerned whenever possible or the pharmacy provider should request assistance from the pharmacy technician supervisor.
2. All other issues and disputes should be directed to one of the members of the Contractor's executive staff. Pharmacy providers should include any documentation with as much information as possible to support the grievance. Grievances will be reviewed objectively and fairly considering information provided by all sides. A response will be conveyed to the involved parties within 72 hours.
3. If the grievance is not resolvable by the Contractor, the pharmacy provider will have the right to contact the DOH contract monitor who oversees the contract performance of the Contractor.
4. Written grievances that pharmacy providers forward to DOH require supporting documentation. The Contractor will forward to DOH copies of the Contractor actions taken to resolve the grievance upon notification by DOH.
5. Both the pharmacy provider and the Contractor will be obliged to work towards a resolution as stated in the Pharmacy Provider Contract.

Grievance procedures for clients are as follows:

1. Disagreement or disputes should be resolved with the Contractor staff person concerned whenever possible.
2. If the disagreement or dispute is not resolvable at the staff level, the client may request a meeting with the immediate supervisor of the staff person.
3. If the disagreement or dispute still is unresolved at the first level supervisor or with the pharmacy manager, the client should be instructed to contact the Contractor executive staff to document the grievance and/or forward it by fax or mail to the Contractor executive staff.
4. The situation will be investigated considering information provided by all sides. The client must provide necessary documentation when applicable to support the grievance being reviewed. The facts and documentation will be reviewed objectively and fairly. All parties involved in the grievance will be interviewed and a resolution determined.
5. If the grievance is not resolvable by the Contractor, clients may then complete the Contractor grievance form and forward it to DOH.

The Contractor will maintain records of all documented pharmacy provider and client grievances. As part of the Contractor's Quality Assurance Plan, the Contractor will document all

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grievances and review them for the effectiveness of the process and appropriateness of the response. The Contractor will share its findings with DOH.

Data system and enrollment processes

The Contractor will receive updated client demographic and eligibility information from DOH via facsimile, Internet-based ADAP Enrollment Application, and/or other electronic data transfer means such as secure transfer file. Once received, the Contractor's Client Support Services Representatives will update client information simultaneously in the Contractor and HealthTrans client databases. The update process will take approximately three to twenty-four hours, during office hours seven days a week. During emergency enrollment situations during the Contractor's business hours, DOH staff may call the Contractor to enroll a client within 30 minutes after the call.. Only authorized DOH personnel, including DOH Client Service Representatives and their supervisor, may enroll clients.

On a weekly basis, the Contractor will archive on CDROM all faxes received through the Contractor's fax system. The Contractor will use these archives as part of its Quality Assurance process to make sure that enrollments are processed within the required timeframes.

The Contractor's database will track information required for prescription invoicing, demographic reporting and other data elements as requested by DOH for use in obtaining drug manufacturer rebates. Client prescription transaction information is downloaded on a daily basis from NDC/HealthTrans. This information will be posted to the Contractor database within two hours of the download.

- **NDC/HealthTrans:** The Contractor will submit client, drug formulary and pharmacy provider files electronically to NDC for Point-of-sale (POS) reference. The Contractor will also configure within the NDC mainframe, dispensing controls, reimbursements, and client eligibility status that trigger POS responses to the pharmacies. The Contractor and NDC/HealthTrans systems will operate twenty-four hours, seven days a week.
- **Contractor's In-house Data Processing:** The Contractor's data systems will be scalable and accommodate increases in the client database and claims processing that will result from services provided to DOH.
- **Contractor's Fax Servers:** The Contractor's fax servers will receive client enrollment and re-certification applications twenty-four hours, seven days a week. These fax documents will be processed by the Contractor's Client Support Services Representatives during business hours and shredded for purposes of confidentiality. All faxes received will be stored electronically and can be reproduced or viewed if necessary.

Data Security

DOH has classified this data as **Restricted**. Restricted data is the most sensitive information collected by the department. Its unauthorized access or disclosure would have significant adverse impact on the agency, business partners, employees or the public.

The Contractor will provide the technical environment necessary to secure the client demographic and eligibility information received under this contract. The Hardware, Communications, and Software will be housed in a secure and fault-tolerant data center with an appropriate level of security controls for the protection of high impact information systems, as defined by the Federal Information Processing Standards (FIPS) 199. At a minimum the Contractor must have implemented physical, environmental, and administrative security controls that meet or exceed those described for high impact information systems in FIPS 200 and in the National Institute of Standards and Technology (NIST) Special Publications SP800-53 Rev 3 and SP800-53 A Rev 1.

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The Contractor will have successfully implemented security controls that meet or exceed those described in the following NIST publications: SP800-40, SP800-41, SP800-44, SP 800-50, SP 800-61 Rev. 1, SP 800-63 Rev. 1, SP800-64 Rev. 2, SP 800-81 Rev. 1, SP800-83, SP800-92, SP 800-94, SP800-114, SP800-115, SP800-122, SP800-123, SP800-128, SP800-137, and as applicable, SP800-95, SP800-97, SP800-125, SP800-144.

Should the Contractor host Internet facing applications that access the restricted data it will have successfully implemented application authentication controls that provide a high level of confidence in the identity of individuals. Identity proofing mechanisms must meet or exceed those described in NIST SP 800-63 for information requiring assurance level 3 or higher. The Contractor will have also implemented application development practices consistent with NIST SP800-64.

The Contractor will have implemented security controls that allow remote access into the network only with two-factor authentication. One of the factors must be provided by a device separate from the computer gaining access.

The Contractor will assure that the data is encrypted, using key lengths of 128 bits or greater, when transmitted across open untrusted networks and when at rest, using algorithm modules validated by the National Institute of Standards and Technology (NIST) Cryptographic Module Validation Program (CMVP)

<http://csrc.nist.gov/groups/STM/cavp/validation.html>

<http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/1401vend.htm>

The system must be backed up at least once daily and encrypted using algorithm modules validated by the National Institute of Standards and Technology (NIST) Cryptographic Module Validation Program (CMVP). The encryption key lengths must be a minimum of 128 bits, with 256 bits used whenever possible. The backups must be stored offsite at a facility secured in a manner that is consistent with the access controls and the physical and environmental protection controls described in NIST SP800-53 for high impact systems.

The Contractor must be able to recover the system within 24 hours following a disaster or major disruption.

Compliance with the Washington State Office of the Chief Information Officer (OCIO) IT Security Standards is required. For the purposes of this RFQQ, compliance with HIPAA security and privacy requirements and the above referenced FIPS and NIST publications indicates compliance with the OCIO requirements.

The Contractor will provide the Department proof of compliance with HIPAA security and privacy requirements prior to being awarded a contract. The Contractor will complete an independent security audit within six months of being awarded a contract to confirm compliance with the terms of the scope of services for the security and confidentiality of information collected, transmitted, processed or stored under the contract. The Contractor will provide DOH with the results of this audit and plans to correct identified deficiencies.

The Contractor will conduct internal security audits annually and independent security audits at least once every three years. The audits must confirm compliance with the terms of the scope of services for the security and confidentiality of information collected, transmitted, processed or stored under the contract. The audits must also confirm continued compliance with HIPAA security and privacy requirements. The Contractor will provide DOH with the results of these audits and plans to correct identified deficiencies.

EXHIBIT A STATEMENT OF WORK

Reports

Ramsell will provide DOH staff with training and technical assistance on their online reporting system and on other ways we can use this site to generate our own reports and monitor/improve work processes. Ramsell will provide reports to DOH via their online system for weekly data files on prescription utilization with the necessary data elements to effectively submit pharmaceutical rebate requests and reports on agreed upon quality performance measures. DOH expects all Ramsell reports to be checked for accuracy and quality assurance before being sent to DOH, such as no "0" identification numbers, when client Identification number is not known.

Examples of reports:

Drug Usage by Manufacturer (Quarterly).

This data should match the invoice weekly files for the quarter.

- Name of Manufacturer
- NDC Number
- Drug Name
- Quantity (or units)
- Rx Count (or # of claims/prescriptions)
- Total Cost
- Average Cost

Antiretroviral Adherence Performance Measure (Semi-annually)

The Contractor is to provide semi-annual reports to DOH on the number of times their adjudication system with pharmacies identifies and rejects an inappropriately prescribed antiretroviral drug dosage, so that DOH can use this information in our quality management reports.

DOH also anticipates brainstorming with Contractor staff to develop a stronger process and possible additional Contractor reporting on client antiretroviral adherence and utilization.

The reporting formats and processes will be determined at a later date.

The Contractor will also maintain the capacity to provide ad hoc reports to DOH. The cost of the reports will depend on the complexity and desired turnaround time, and will be negotiated between the Contractor and DOH at the time DOH requests the reports. Once the Contractor receives a written request for information from DOH, the Contractor will review the specifications. If any clarification is needed, the Contractor will seek clarification in writing. At the completion of the data request assessment, the Contractor will notify DOH of the date when the requested reports will be available. This time frame can be anywhere from 48 hours to 10 days.

Weekly reimbursement

The Contractor will pay pharmacies and submit invoices to DOH for reimbursement on a weekly basis. Prior to submitting the weekly invoice, the Contractor will verify and correct each claim identified in its claim error reports. Once all transactions are complete, the Contractor will process a weekly invoice to DOH in a format specified by DOH. The invoice shall include all fees and costs and be accompanied by a cover page that includes miscellaneous charges or credits to DOH. The Contractor will pay pharmacies on a weekly basis beginning January 23, 2012. The three-week waiting period from the start date of the contract is necessary to allow time to cycle through pharmacy claim reversals, back-outs and suspensions.

Once per month, the Contractor will provide a data file in a suitable electronic format specified by DOH that contains all of the previous month's claims-level detail and any necessary

EXHIBIT A STATEMENT OF WORK

adjustments from prior transactions. DOH will reconcile the monthly data with the invoices that the Contractor submitted for the month prior to paying the final claim for the month. The Contractor will also provide paper backup documentation on a monthly basis that includes claims-level detail that is organized by client group number.

To pay pharmacies, the Contractor will generate a weekly Pharmacy Payment Report. The Contractor's Pharmacy Payment Report will list all pharmacies eligible for pharmacy payment within the invoicing period. This report will be generated within five days of the end of the invoicing period. Once the Pharmacy Payment Report has been generated, payments are sent to the providers either by check or electronic funds transfer, within ten days from the date the Pharmacy Payment Report was generated. The Contractor will send with each payment, a remittance advice giving the provider a line item detail of the claims submitted and the corresponding payment. The remittance advice will include information regarding paid claims, pharmacy back-out claims, and claims that have been suspended as a result of our claims processing quality assurance protocols. The remittance advice will not include client names.

Coordinate with other payers

Many DOH clients receive partial services from other state agencies or large managed care organizations, including such entities as Group Health Cooperative, Kaiser Permanente, University of Washington and the Washington State Health Insurance Pool. The Contractor will make a concerted effort to coordinate with these entities to develop working arrangements that will facilitate payment for services, eliminate client payment burdens, and assure clients' coordination of benefits. The Contractor will report its efforts to DOH.

Client confidentiality

Client confidentiality will be a priority for the Contractor. For hard copy records, anything that must be kept for an unspecified amount of time must be kept in file cabinets located in an employee only area. Documents that the Contractor may dispose of after processing must be gathered and shredded on premises on a daily basis. The Contractor's office will remain locked at all times to protect its hard copy documentation as well as its computer network. Authorized personnel must have keys and a staff member must let in all visitors. The office shall be protected by a monitored alarm system that will automatically notify the police department when triggered.

The Contractor's Personnel Policy and Procedures manual will address confidentiality. All employees will sign oaths of confidentiality, which must meet DOH criteria for confidentiality. The Contractor will conduct an annual confidentiality workshop for employees that will reinforce the importance of confidentiality. The workshop will use exercises, such as role-play, to identify situations in its day-to-day activities when confidentiality can be compromised and how to handle those situations. The Contractor's Executive Committee, who is responsible for overseeing day-to-day operations, and an independent contractor, develop the workshop's content. The Contractor will provide DOH with a copy of the confidentiality section of its Personnel Policy and Procedures manual by January 1, 2012.

The Contractor must be in compliance with HIPAA's Privacy Standard for Individually Identifiable Health

**EXHIBIT B
BUDGET**

Exhibit B – Budget

Reimbursement Amounts

DOH will reimburse Ramsell Public Health Rx according to the rates defined below:

Cost Element	DOH will pay Ramsell Public Health Rx	Ramsell Public Health Rx will pay pharmacies	Ramsell Public Health Rx charge to pharmacies
1. Drug ingredient cost for:			
1a. non-PHS pharmacies Brand Products	WAC + 6.25%	WAC + 6.25%	
1b. non-PHS pharmacies Generic Products	Lower of MAC/AWP – 36%	Lower of MAC/AWP – 36%	
1c. PHS pharmacies Brand Products	WAC – 26.88%	WAC – 26.88%	
1d. PHS pharmacies Generic Products	Lower of MAC/AWP – 50%	Lower of MAC/AWP – 50%	
2. Dispensing fees for:			
2a. HIV antiretrovirals	\$4.50	\$4.50	
2b. Non-antiretrovirals	\$3.00	\$3.00	
3. Claims processing fee per approved transaction	\$3.50		
4. Miscellaneous fees charged to pharmacies			
4a. Data transmission fee per approved transaction.			\$0.10
4b. Claims processing fee for manual claims.			\$0.25

Monthly Minimum Fee

The Contractor will charge a monthly minimum administration fee for services provided. The monthly minimum fee will only apply when the monthly administration fees are less than the monthly minimum amount. The monthly minimum fee based on prescription utilization assumptions is \$19,000.

Claims Processing Fee

DOH will pay a processing fee of \$3.50 for every approved prescription submitted by any participating pharmacy provider. DOH will pay this in addition to the net reimbursable amount

EXHIBIT B BUDGET

eligible for payment to any participating pharmacy provider for any processed and approved prescription (Drug ingredient plus dispensing fee).

When Ramsell Public Health Rx issues a credit to DOH for any reversed transaction that has been invoiced and paid by DOH, the credit will equal the net amount paid, excluding the \$3.50 claims processing fee paid to Ramsell Public Health Rx. Ramsell Public Health Rx will issue credits to DOH for any reversed transaction that has been invoiced and paid by DOH on or before the final invoice cycle within each quarter.

Ramsell Public Health Rx charges to pharmacies

Ramsell Public Health Rx will charge a \$0.10 data transmission fee to participating pharmacy providers per approved transaction. When pharmacies cannot “split bill” through point of service due to limitations of their ‘turnkey’ pharmacy system, Ramsell Public Health Rx will deduct \$0.25 per line item from the calculated pharmacy reimbursement to process the claim within Ramsell Public Health Rx manual claim processing system. Ramsell Public Health Rx will not pass either of these charges on to DOH.

Assignment of Benefits

Ramsell Public Health Rx will charge DOH a per-member per month (PMPM) fee of \$25 for assignment of benefits (pay and chase) clients. Assignment of benefits clients are those clients with a primary insurance plan that requires that client pay 100% upfront payment to the pharmacy and to be subsequently reimbursed. The number of members per month included in the monthly charge will be based on those with prescription usage. These clients will be identified monthly by their assigned group numbers and program utilization

Reimbursement Schedule

Ramsell Public Health Rx will reimburse pharmacies, and DOH will reimburse Ramsell Public Health Rx on the weekly schedule defined in the Statement of Work. DOH will commence a weekly payment schedule beginning January 23, 2012.

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
1ST AVENUE PHARMACY	6 EAST 1ST AVENUE	SPOKANE	WA	99202	509-624-3017	Spokane
ABERDEEN HEALTH MART PHARMACY	1812 SUMNER AVE. SUITE H	ABERDEEN	WA	98520	360-533-1525	Grays Harbor
ALBERTSON*S 265	6520 NORTH NEVADA	SPOKANE	WA	99208	509-489-5287	Spokane
Albertsons	17520 SR 9 SE	Clearview	WA	98290	360-668-2012	Snohomish
Albertsons	2108 W. Main Street	Battle Ground	WA	98604	360-687-4130	Clark
Albertsons	301 Marysville Mall #60	Marysville	WA	98270	360-659-8952	Snohomish
Albertsons	520 128th St., SW	Everett	WA	98204	425-347-1007	Snohomish
Albertsons	114 E. Lauridsen	Port Angeles	WA	98362	360-452-4410	Clallam
Albertsons	14215 SE Petrovitsky Rd.	Renton	WA	98058	425-235-7772	King
Albertsons	2222 NW Bucklin Hill Road.	Silverdale	WA	98383	360-692-8596	Kitsap
Albertsons	2755 77th Avenue South	Mercer Island	WA	98040	206-232-2222	King
Albertsons	33620 21st Ave. SW	Federal Way	WA	98023	253-838-9571	King
Albertsons	3520 Pacific Ave. S.E.	Olympia	WA	98501	360-491-0330	Thurston
Albertsons	1450 S.W. Erie Street	Oak Harbor	WA	98277	360-279-8829	Island
Albertsons	5520 Sidney Road	Port Orchard	WA	98367	360-876-2698	Kitsap
Albertsons	5000 E. Fourth Plain Blvd.	Vancouver	WA	98661	360-693-5030	Clark
Albertsons	1320 Lee Blvd.	Richland	WA	99352	509-946-0656	Benton
Albertsons	8196 S.R. 140	Kingston	WA	98346	360-297-1811	Kitsap
Albertsons	11401 State Avenue	Marysville	WA	98270	360-651-7229	Snohomish
Albertsons	140 W. Gage Blvd.	Richland	WA	99352	509-627-5133	Benton
Albertsons	11012 Canyon Rd., E	Puyallup	WA	98373	253-537-3808	Pierce
Albertsons	4301 212th St., S.W.	Mountlake Ter	WA	98043	425-775-5011	Snohomish
Albertsons	6100 Pacific Avenue	Lacey	WA	98503	360-491-8474	Thurston

**EXHIBIT C
WA Statewide Pharmacy Network**

Pharmacy Name	Address	City	State	Zip	Phone	County
	S.E.					
Albertsons	3925 236th Ave. N.E.	Redmond	WA	98053	425-836-8706	King
Albertsons	2800 Milton Way, Ste. 10	Milton	WA	98354	253-952-8436	Pierce
Albertsons	19500 Highway 99	Lynnwood	WA	98036	425-670-9723	Snohomish
Albertsons	12725 First Ave South	Burien	WA	98168	206-242-7942	King
Albertsons	3010 E. 57th Avenue	Spokane	WA	99223	509-443-6502	Spokane
Albertsons	8851 E. Trent Avenue	Millwood	WA	99212	509-924-9052	Spokane
Albertsons	13050 Aurora Ave. N.	Seattle	WA	98133	206-306-9377	King
Albertsons	6623 Evergreen Way	Everett	WA	98203	425-353-7539	Snohomish
Albertsons	12811 Beverly Park Rd.	Lynnwood	WA	98037	425-347-3145	Snohomish
Albertsons	1304 N. Liberty Lake Rd.	Liberty Lake	WA	99019	509-891-6967	Spokane
ALBERTSONS	2900 WHEATON WAY	BREMERTON	WA	98310	360-377-0933	Kitsap
Albertsons	10616 16th Ave., SW	Seattle	WA	98146	206-243-4433	King
Albertsons	14500 15th Avenue N.E.	Shoreline	WA	98155	206-365-0398	King
Albertsons	1128 North Miller St.	Wenatchee	WA	98801	509-663-8547	Chelan
Albertsons	2401 North Pearl St.	Tacoma	WA	98406	253-752-7919	Pierce
Albertsons	5204 W. Clearwater	Kennewick	WA	99336	509-735-8311	Benton
Albertsons	1610 West Lincoln	Yakima	WA	98902	509-452-6567	Yakima
Albertsons	3322 132nd Street SE	Bothell	WA	98012	425-338-1891	Snohomish
Albertsons	3905 Bridgeport Way W.	Tacoma	WA	98466	253-565-7997	Pierce
Albertsons	14300 N.E. 20th Ave.	Vancouver	WA	98686	360-576-4844	Clark
Albertsons	400 Bridge St.	Clarkston	WA	99403	509-758-7475	Asotin
Albertsons	12312 State Route 395	Spokane	WA	99218	509-466-0357	Spokane
Albertsons	20600 108th Avenue S.E.	Kent	WA	98031	253-850-0880	King
Albertsons	1434 Olney Ave., SE	Port Orchard	WA	98366	360-895-0613	Kitsap
Albertsons	5530 E. Lake Sammamish Pky.S.E.	Issaquah	WA	98027	425-391-7867	King

**EXHIBIT C
WA Statewide Pharmacy Network**

Pharmacy Name	Address	City	State	Zip	Phone	County
Albertsons	8611 Steilacoom Blvd. SW	Tacoma	WA	98498	253-582-4149	Pierce
Albertsons	13606 East 32nd Avenue	Spokane	WA	99206	509-892-3659	Spokane
Albertsons	E. 510 37th	Spokane	WA	99203	509-455-4437	Spokane
Albertsons	705 Trosper Road S.W.	Tumwater	WA	98512	360-705-3679	Thurston
Albertsons	401 S. 40th St.	Yakima	WA	98908	509-965-2336	Yakima
Albertsons	No. 10 Pines Rd.	Spokane	WA	99216	509-922-1084	Spokane
ALBERTSONS #206	9001 N INDIAN TRAIL ROAD	SPOKANE	WA	99208	509-465-8590	Spokane
ALLENMORE PHARMACY	1901 S. UNION STE A252	TACOMA	WA	98405	253-383-5519	Pierce
ARLINGTON PHARMACY	540 N. WEST AVENUE	ARLINGTON	WA	98223	360-435-5771	Snohomish
ASSURED PHARMACY	12071 124TH AVENUE NE	KIRKLAND	WA	98034	425-820-1030	King
BARTELL DRUG	5700 E LAKE SAMMAMISH PARKWAY SE	ISSAQUAH	WA	98029	425-391-6408	King
BARTELL DRUGS	18001 BOTHELL- EVERETT HIGHWAY #101	BOTHELL	WA	98012	425-402-6485	Snohomish
BARTELL DRUGS # 1	1628 Fifth Ave	Seattle	WA	98101	206-622-0582	King
BARTELL DRUGS # 3	3040 NE 127th ST	Seattle	WA	98125	206-362-7572	King
BARTELL DRUGS # 4	5605 22nd Ave NW	Seattle	WA	98107	206-783-3051	King
BARTELL DRUGS # 6	8862 161st AVE NE	Redmond	WA	98052	425-883-9532	King
BARTELL DRUGS # 8	9600 15th Ave SW	Seattle	WA	98106	206-763-2728	King
BARTELL DRUGS # 9	120 North 85th ST	Seattle	WA	98103	206-784-7601	King
BARTELL DRUGS #10	1101 Madison ST	Seattle	WA	98104	206-340-1171	King
BARTELL DRUGS #11	4344 University Way NE	Seattle	WA	98105	206-632-3514	King
BARTELL DRUGS #12	22833 Bothell-Everett	Bothell	WA	98021	425-481-7810	Snohomish

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
	Hwy					
BARTELL DRUGS #13	424 Bellevue WY N	Bellevue	WA	98004	425-454-3194	King
BARTELL DRUGS #14	1820 North 45th S	Seattle	WA	98103	206-632-3314	King
BARTELL DRUGS #16	4706 42nd Ave SW	Seattle	WA	98116	206-932-8045	King
BARTELL DRUGS #18	14440 124th Ave S	Kirkland	WA	98034	425-821-3601	King
BARTELL DRUGS #19	3902 "A" ST	Auburn	WA	98002	253-939-8563	King
BARTELL DRUGS #20	3620 FACTORIA BLVD SE	BELLEVUE	WA	98006	425-644-7529	King
BARTELL DRUGS #21	6619 132nd Ave NE	Kirkland	WA	98033		King
BARTELL DRUGS #22	21615 Pacific Hwy	Des Moines	WA	98198	206-878-4627	King
BARTELL DRUGS #23	1407 Broadway	Seattle	WA	98122	206-726-3495	King
BARTELL DRUGS #24	6401 12th Ave NE	Seattle	WA	98115	206-525-3754	King
BARTELL DRUGS #25	11020 19TH SE	Everett	WA	98208	425-337-7197	Snohomish
BARTELL DRUGS #26	22803 44th Ave W	Mntlk Terra	WA	98043	425-771-3738	Snohomish
BARTELL DRUGS #27	11919 NE 8TH STREET	BELLEVUE	WA	98005	425-454-0146	King
BARTELL DRUGS #28	14130 Juanita Drive	Bothell	WA	98011		King
BARTELL DRUGS #29	526 228th Ave NE	Redmond	WA	98053		King
BARTELL DRUGS #30	6939 Coal Creek Pkwy	Newcastle	WA	98059	425-644-4416	King
BARTELL DRUGS #31	2700 NORTH EAST STREET UNIVERSITY	SEATTLE	WA	98105	206-525-0705	King
BARTELL DRUGS #32	27055 Pacific Hwy	Des Moines	WA	98198	253-839-1693	King
BARTELL DRUGS #33	1115 13th Street	Snohomish	WA	98290		Snohomish
BARTELL DRUGS #34	12946 KENT-KANGLEY RD	KENT	WA	98031	253-631-6874	King
BARTELL DRUGS #37	1404 Third Avenue	Seattle	WA	98101	206-624-1401	King
BARTELL DRUGS #38	2222 32nd Ave Wes	Seattle	WA	98199	206-282-2881	King
BARTELL DRUGS #39	5500 Olympic Drive	GIG HARBOR	WA	98335	253-858-7444	Pierce
BARTELL DRUGS #40	10116 NE 8th Street	Bellevue	WA	98004	425-454-2468	King
BARTELL DRUGS #41	14901 4TH AVENUE SOUTH WEST	SEATTLE	WA	98166	206-242-1202	King
BARTELL DRUGS #42	600 First Avenue	Seattle	WA	98109	206-284-1354	King
BARTELL DRUGS #43	14277 Pacific Hwy	Tukwila	WA	98168	206-431-9652	King

**EXHIBIT C
WA Statewide Pharmacy Network**

Pharmacy Name	Address	City	State	Zip	Phone	County
BARTELL DRUGS #44	10625 NE 68th	Kirkland	WA	98059		King
BARTELL DRUGS #45	4700 NE 4th Stree	Renton	WA	98059	425-793-1015	King
BARTELL DRUGS #46	621 SR 9 NE	Lake Steven	WA	98258	425-334-4028	Snohomish
BARTELL DRUGS #47	22117 SE 237th ST	MAPLE VALLEY	WA	98038	425-432-1234	King
BARTELL DRUGS #48	1825 Broadway	Everett	WA	98201	425-303-2583	Snohomish
BARTELL DRUGS #51	6602 64th ST NE	Marysville	WA	98270	360-658-5218	Snohomish
BARTELL DRUGS #52	7370 170th Ave NE	Redmond	WA	98052	425-895-8242	King
BARTELL DRUGS #53	17633 Highway 99	Lynnwood	WA	98037	425-743-7555	Snohomish
BARTELL DRUGS #54	3601 6th Ave	Tacoma	WA	98406	253-761-1248	Pierce
BARTELL DRUGS #56, ADMIRAL WAY	2345 42ND AVENUE SW	SEATTLE	WA	98116	206-932-7437	King
BARTELL DRUGS #57	2700 BRIDGEPORT WAY, SUITE D	UNIVERSITY PLACE	WA	98466	253-460-1879	Pierce
BARTELL DRUGS #58	23028 100TH AVE W	EDMONDS	WA	98020	425-670-2860	Snohomish
BARTELL DRUGS #59	653 156TH AVENUE, N.E.	BELLEVUE	WA	98007	425-641-9127	King
BARTELL DRUGS #61	910 4TH AVENUE	SEATTLE	WA	98164	206-624-8394	King
BARTELL DRUGS #62	18420 AURORA AVENUE, NORTH	SHORELINE	WA	98133	206-542-2948	King
BARTELL DRUGS #63	2345 RAINIER AVENUE, SOUTH	SEATTLE	WA	98144	206-325-5725	King
BARTELL DRUGS #64	7205 267TH STREET N.W.	STANWOOD	WA	98292	360-939-0572	Snohomish
BARTELL DRUGS #65	5006 132ND STREET S.E., BLDG. A	EVERETT	WA	98208	425-357-6162	Snohomish
BARTELL DRUGS #67	1929 QUEEN ANNE AVENUE, NORTH	SEATTLE	WA	98109	206-285-1737	King
BARTELL DRUGS #68	17254 140TH, S.E.	RENTON	WA	98058	425-226-7000	King
BARTELL DRUGS #70	3625 148TH STREET SW #B	Lynnwood	WA	98037	425-742-1120	Snohomish
BATES PHARMACEUTICAL	3704 N NEVADA	SPOKANE	WA	99207	509-489-4500	Spokane

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
SERVICES						
BATES PHARMACY & MEDICAL SUPPLY	3704 N. NEVADA	SPOKANE	WA	99207	509-489-4500	Spokane
BELFAIR QFC PHARMACY 101	NE 201 STATE RT 300	BELFAIR	WA	98582	360-275-9671	Mason
BELLEGROVE PHARMACY	1200 112TH AVENUE NE #A100	BELLEVUE	WA	98004	425-455-2123	King
BI-MART PHARMACY #648	11912 NE FOURTH PLAIN BOULEVARD	VANCOUVER	WA	98662	360-944-8368	Clark
BI-MART PHARMACY #605	309 S 5TH AVNEUE	YAKIMA	WA	98902	509-452-6648	Yakima
BI-MART PHARMACY #619	1649 PLAZA WAY	WALLA WALLA	WA	99362	509-529-9350	Walla Walla
BI-MART PHARMACY #621	608 E MOUNTAIN VIEW AVENUE	ELLENSBURG	WA	98926	509-925-6996	Kittitas
BI-MART PHARMACY #626	1207 N 40TH AVENUE	YAKIMA	WA	98908	509-457-1628	Yakima
BI-MART PHARMACY #636	110 WEST SOUTH HILL ROAD	SUNNYSIDE	WA	98944	509-839-0766	Yakima
BI-MART PHARMACY #642	780 GRANT ROAD	EAST WENATCHEE	WA	98802	509-884-4022	Douglas
BI-MART PHARMACY #650	2601 FALK ROAD	VANCOUVER	WA	98668	360-695-7578	Clark
BI-MART PHARMACY #661	3003 ADDY STREET	WASHOUGAL	WA	98671	360-835-0681	Clark
BI-MART PHARMACY #674	2221 1ST STREET	CHENEY	WA	99004	509-235-4705	Spokane
BIOSCRIP PHARMACY #4025 SEA	1001 BROADWAY SUITE 102	SEATTLE	WA	98122	206-324-2335	King
BIOSCRIP PHARMACY	2787 CHARTER STREET	Columbus	OH	43228	877-842-5097	Unspecified

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
SERVICES						
BRIDGEPORT PHARMACY	20700 BOND ROAD NE #10	POULSBO	WA	98370	360-779-1121	Kitsap
BRIDGEPORT PHARMACY ENUMCLAW	3201 GRIFFIN AVE	ENUMCLAW	WA	98022	360-802-2441	King
BRIDGEPORT PHARMACY SERVICES	7424 BRIDGEPORT WAY WEST #109	LAKEWOOD	WA	98499	253-582-2282	Pierce
BRIDGEPORT PROFESSIONAL PHARMACY	7424 BRIDGEPORT WAY WEST #109	LAKEWOOD	WA	98499	253-582-1662	Pierce
BURLINGTON COST CUTTER PHARMACY #55	1500 S. BURLINGTON BLVD.	BURLINGTON	WA	98233	360-757-3772	Skagit
CATHLAMET PHARMACY (HI-SCHOOL PHARMACY)	74 MAIN STREET	CATHLAMET	WA	98612	360-795-3691	Wahkiakum
CENTRAL WA HOSPITAL PROFESSIONAL PHARMACY	933 RED APPLE RD. #A	WENATCHEE	WA	98801	509-667-3333	Chelan
CHAS	5921 N MARKET STREET	SPOKANE	WA	99208	509-343-1116	Spokane
CHAS	3919 N. MAPLE STREET	SPOKANE	WA	99205	509-343-1116	Spokane
CHAS - DEER PARK	401 S. MAIN AVENUE	DEER PARK	WA	99006	509-343-1116	Spokane
CHAS - DENNY MURPHY	1001 W. 2ND AVENUE	SPOKANE	WA	99201	509-343-1116	Spokane
CHAS - VALLEY	9227 EAST MAIN AVE	SPOKANE	WA	99206	509-343-1116	Spokane
CITY CENTER DRUG	108 E WISHKAH	ABERDEEN	WA	98520	360-532-5182	Grays Harbor
COMMUNITY	11225 PACIFIC AVENUE	TACOMA	WA	98444	253-536-6257	Pierce

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
HEALTH CARE PHARMACY						
COMMUNITY HEALTH CARE PHARMACY	10510 GRAVELLY LAKE DRIVE SW	TACOMA	WA	98499	253-589-7190	Pierce
COMMUNITY HEALTHCARE PHARMACY	1102 SOUTH I STREET	TACOMA	WA	98405	253-284-2324	Pierce
CORKS PHARMACY	821 S. AUBURN ST.	KENNEWICK	WA	99336	509-586-3128	Benton
COST LESS PRESCRIPTIONS	5431 PACIFIC AVE.	TACOMA	WA	98408	253-474-9493	Pierce
CUMULUS PARK PHARMACY	16410 SMOKEY POINT BLVD	ARLINGTON	WA	98223	360-653-2500	Snohomish
DIPLOMAT SPECIALITY PHARMACY	214 E FULTON STREET	GRAND RAPIDS	MI	49503	616-356-1800	Unspecified
DIPLOMAT SPECIALITY PHARMACY	4100 S SAGINAW #D	FLINT	MI	48507	810-230-5045	Unspecified
DIPLOMAT SPECIALITY PHARMACY	500 SE 15TH STREET #120	FORT LAUDERDALE	FL	33316	954-527-0440	Unspecified
DIPLOMAT SPECIALITY PHARMACY	G-3320 BEECHER ROAD	FLINT	MI	48532	810-732-8720	Unspecified
DIPLOMAT SPECIALITY PHARMACY	405 LAKE COOK ROAD #A20	DEERFIELD	IL	60015	847-664-8100	Unspecified
DOANES PHARMACY	119 COTTAGE AVENUE	CASHMERE	WA	98815	509-782-2717	Chelan
DONS PHARMACY	1151 WATER STREET	PORT TOWNSEND	WA	98368	360-385-0969	Jefferson
E. WENATCHEE	315 VALLEY MALL	E. WENATCHEE	WA	98802	509-884-5625	Douglas

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
FOOD PAVILION PHARMACY #866	PARKWAY					
EASTERN PHARMACY	515 MINOR AVENUE #120	SEATTLE	WA	98104	206-622-6094	King
EDMONDS PHARMACY	7631 212TH STREET SW	EDMONDS	WA	98026	485-977-4850	Snohomish
EVERETT CLINIC PHARMACY AT MAIN	3909 HOYT AVENUE	EVERETT	WA	98201	425-317-3620	Snohomish
FAIRWAY DRUG (MPC)	1758 FRONT STREET #106	LYNDEN	WA	98264	360-354-1226	Whatcom
FAMILY MEDICAL CENTER PHARMACY	1120 W. ROSE ST.	WALLA WALLA	WA	99362	509-526-6967	Walla Walla
FIESTA PHARMACY	115 S 10TH AVENUE	PASCO	WA	99301	509-545-0596	Franklin
FIFTH & BROWN PHARMACY	104 W 5TH AVENUE	SPOKANE	WA	99204	509-838-4117	Spokane
FRED MEYER	101 Wellsian Way	Richland	WA	99352	509-943-8358	Benton
FRED MEYER	301 E. Wallace Kneeland B	Shelton	WA	98584	360-432-5373	Mason
FRED MEYER	400 South Thor St.	Spokane	WA	99202	509-532-4033	Spokane
FRED MEYER	5050 State Highway 303 NE	Bremerton	WA	98311	360-792-2833	Kitsap
FRED MEYER	201 S. Water St.	Ellensburg	WA	98926	509-962-0533	Kittitas
FRED MEYER	801 Auburn Way North	Auburn	WA	98002	253-931-5584	King
FRED MEYER	1206 North 40th Ave	Yakima	WA	98908	509-576-6833	Yakima
FRED MEYER	12221 120th Ave NE	Kirkland	WA	98034	425-820-3233	King
FRED MEYER	6901 South 19th Street	Tacoma	WA	98466	253-534-3033	Pierce
FRED MEYER	12120 N. Division	Spokane	WA	99208	509-465-4433	Spokane
FRED MEYER	11325 SE Mill Plain Blvd	Vancouver	WA	98684	360-256-4406	Clark
FRED MEYER	17801 108th Ave. SE	Renton	WA	98055	425-235-5383	King
FRED MEYER	13000 Lake City Way	Lake City	WA	98155	206-440-2419	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
	NE					
FRED MEYER	9925 State Ave.	Marysville	WA	98270	360-653-0733	Snohomish
FRED MEYER	25250 Pacific Hwy, South	Kent	WA	98031	253-941-2905	King
FRED MEYER	1100 N Meridian	Puyallup	WA	98371	253-804-8183	Pierce
FRED MEYER	2041 148th NE	Bellevue	WA	98007	425-865-8593	King
FRED MEYER	1215 W 6th Street	The Dalles	OR	97058	541-296-1748	Unspecified
FRED MEYER	16735 SE 272nd	KENT	WA	98042	253-639-7433	King
FRED MEYER	7411 NE 117th Ave.	Vancouver	WA	98662	360-896-3533	Clark
FRED MEYER	6100 E. LK. Sammamish Pk.	Issaquah	WA	98029	425-416-1133	King
FRED MEYER	100 NW 85th	Seattle	WA	98117	206-783-2272	King
FRED MEYER	8530 Evergreen Way	Everett	WA	98208	425-348-8433	Snohomish
FRED MEYER	12906 Bothell-Everett Hig	Everett	WA	98208	425-357-2033	Snohomish
FRED MEYER	305 Bridgeport Way E	University Pl	WA	98467	253-460-4033	Pierce
FRED MEYER	4615A 196th Ave. SW	Lynnwood	WA	98036	425-670-0233	Snohomish
FRED MEYER	16600 SE McGillivary Blvd	Camas	WA	98607	360-260-3333	Clark
FRED MEYER	17404 Meridian East	Puyallup	WA	98373	253-445-7873	Pierce
FRED MEYER	21045 Bothell-Everett Hig	Bothell	WA	98021	425-398-7033	Snohomish
FRED MEYER	3184 Ocean Beach Hwy.	Longview	WA	98632	360-425-6222	Cowlitz
FRED MEYER	920 S Burlington Blvd	Burlington	WA	98233	360-757-9133	Skagit
FRED MEYER	2811 West 10th Ave	Kennewick	WA	99337	509-735-8733	Benton
FRED MEYER	11 Grant Road	East Wentache	WA	98802	509-881-2388	Douglas
FRED MEYER	7700 Highway 99	Vancouver	WA	98665	360-695-1243	Clark
FRED MEYER	2201 Grand Blvd.	Vancouver	WA	98661	360-619-1733	Clark
FRED MEYER	18805 State Route 2	Monroe	WA	98272	360-805-8133	Snohomish
FRED MEYER	18325 Aurora Ave. North	Seattle	WA	98133	206-546-0753	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
FRED MEYER	20904 Mwy 410	Bonney Lake	WA	98390	253-891-7333	Pierce
FRED MEYER	401 NW 12th Ave	Battleground	WA	98604	360-666-5133	Clark
FRED MEYER	14300 First Avenue South	Seattle	WA	98168	206-433-6446	King
FRED MEYER	915 NW 45th Street	Seattle	WA	98107	206-297-4333	King
FRED MEYER	East 525 Francis Ave	Spokane	WA	99207	509-489-2085	Spokane
FRED MEYER	East 15609 Sprague Road	Veradale	WA	99037	509-921-5383	Spokane
FRED MEYER	800 Lakeway Dr.	Bellingham	WA	98225	360-676-1105	Whatcom
FRED MEYER	700 Sleater Kinney Rd. SE	Lacey	WA	98503	360-438-6483	Thurston
FRED MEYER	7250 Pacific Ave	Tacoma	WA	98408	253-475-1994	Pierce
FRED MEYER	10201 SE 240TH	Kent	WA	98031	253-859-5533	King
FRED MEYER	800 NE Tenney Road	Vancouver	WA	98685	360-571-2573	Clark
FRED MEYER	33702 21st Ave. SW	Federal Way	WA	98023	253-952-0133	King
FRED MEYER	4505 S 19th	Tacoma	WA	98405	253-752-9110	Pierce
FRED MEYER	1900 SE Sedgwick Rd.	Port Orchard	WA	98366	360-874-7173	Kitsap
FRED MEYER	417 Broadway E Box #2	Seattle	WA	98102	206-323-6586	King
FRED MEYER #459	365 Renton Center Way SW	Renton	WA	98055	425-204-5233	King
FRED MEYER #659	555 TROSPER ROAD SW	TUMWATER	WA	98501	350-453-7933	Thurston
FRED MEYER PHARMACY #664	17667 NE 76TH STREET	REDMOND	WA	98052	425-556-8033	King
FRED MEYER PHARMACY #665	1201 VALLEY AVENUE	SUMNER	WA	98390	253-826-8433	Pierce
FRIDAY HARBOR DRUG	210 SPRING STREET W.	FRIDAY HARBOR	WA	98250	360-378-4421	San Juan
GHC SP LONG TERM CARE PHARMACY #50	12400 E. MARGINAL WAY SOUTH	SEATTLE	WA	98168	206-326-3437	King
GHP - AMB	12400 E. MARGINAL	SEATTLE	WA	98168		King

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Pharmacy Name	Address	City	State	Zip	Phone	County
TUKWILA PHARMACY	WAY SOUTH					
GROUP HEALTH (EASTSIDE HOSPITAL)	2700 152ND AVE. NE	REDMOND	WA	98052	425-883-5401	King
GROUP HEALTH (FEDERAL WAY MED CTR)	301 S. 320TH ST.	FEDERAL WAY	WA	98003	253-874-7048	King
GROUP HEALTH (KENT MEDICAL CENTER)	26004 104TH AVE. SE, SUITE 101	KENT	WA	98031	425-251-4067	King
GROUP HEALTH (NORTHGATE MED CTR)	9800 4TH AVE. NE	SEATTLE	WA	98115	206-302-1334	King
GROUP HEALTH (POULSBO MED CTR)	19379 7TH AVE. NE	POULSBO	WA	98370	360-394-1011	Kitsap
GROUP HEALTH (RAINIER MED CTR)	5316 RAINIER AVE. S	SEATTLE	WA	98118	206-326-3921	King
GROUP HEALTH (BELLEVUE MEDICAL CENTER PHARM)	11511 NE 10TH ST	BELLEVUE	WA	98004	425-502-3820	King
GROUP HEALTH (BURIEN MEDICAL CENTER)	140 SW 146TH ST.	SEATTLE	WA	98166	206-901-2346	King
GROUP HEALTH (CENTRAL HOSPITAL)	201 16TH AVE. E	SEATTLE	WA	98112	206-326-3421	King
GROUP HEALTH (CENTRAL MEDICAL CTR SOUTH)	125 16TH AVENUE EAST	SEATTLE	WA	98112	206-326-3437	King
GROUP HEALTH (DOWNTOWN SEATTLE MED CTR)	1420 FIFTH AVENUE STE 375	SEATTLE	WA	98101	206-381-4639	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
GROUP HEALTH (EVERETT MED CTR)	2930 MAPLE ST.	EVERETT	WA	98201	425-261-1565	Snohomish
GROUP HEALTH (FACTORIA MED CTR)	13451 SE 36TH ST.	BELLEVUE	WA	98006	425-562-1303	King
GROUP HEALTH (LIDGERWOOD HEALTH CTR)	N 6002 LIDGERWOOD	SPOKANE	WA	99207	509-482-4402	Spokane
GROUP HEALTH (LYNNWOOD MED CTR)	20200 54TH AVENUE WEST	LYNNWOOD	WA	98036	425-672-6464	Snohomish
GROUP HEALTH (MONROE MED CTR)	14701 179TH AVE. SE	MONROE	WA	98272	360-805-2020	Snohomish
GROUP HEALTH (NORTHSHORE MED CTR)	11913 NE 195TH ST.	BOTHELL	WA	98011	425-489-3116	King
GROUP HEALTH (OLYMPIA MED CTR)	700 N. LILLY RD	OLYMPIA	WA	98056	360-923-7602	Thurston
GROUP HEALTH (PORT ORCHARD MED CTR/TREMONT)	1400 POTTERY AVE.	PORT ORCHARD	WA	98366	360-895-5500	Kitsap
GROUP HEALTH (PUYALLUP MED CTR)	611 31ST AVE SW	PUYALLUP	WA	98373	253-445-7161	Pierce
GROUP HEALTH (REDMOND MEDICAL CENTER)	7765 159TH PL NE # 100	REDMOND	WA	98052	425-883-5260	King
GROUP HEALTH (RENTON MED CTR)	275 BRONSON WAY NE	RENTON	WA	98056	425-254-2705	King
GROUP HEALTH (RIVERFRONT MED)	W 322 NORTH RIVER DR	SPOKANE	WA	99201	509-324-6464	Spokane

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
CTR)						
GROUP HEALTH (SILVERDALE MED CTR)	10452 SILVERDALE WAY NW	SILVERDALE	WA	98383	360-307-7410	Kitsap
GROUP HEALTH (SOUTH REGAL HEALTH CARE CTR)	S 3104 REGAL ST.	SPOKANE	WA	99223	509-535-2277	Spokane
GROUP HEALTH (TACOMA MED CTR)	209 S. MLK JR WAY	TACOMA	WA	98405	253-596-3350	Pierce
GROUP HEALTH (TACOMA SOUTH MED CTR)	9505 S. STEELE ST	TACOMA	WA	98444	253-597-6820	Pierce
GROUP HEALTH (VERADALE HEALTH CARE CTR)	E 14402 SRAGUE AVENUE	SPOKANE	WA	99207	509-922-2625	Spokane
GROUP HEALTH (WEST OLYMPIA MED CTR)	3030 LIMITED LANE NW	OLYMPIA	WA	98502	360-352-6008	Thurston
GROUP HEALTH (WEST SEATTLE MED CTR)	4700 42ND AVE., SW	SEATTLE	WA	98116	206-933-2121	King
HADFIELDS PHARMACY	7320 216TH STREET S.W., SUITE 100	EDMONDS	WA	98026	425-673-3710	Snohomish
HAGGEN #11	2814 MERIDIAN ST.	BELLINGHAM	WA	98225	360-671-3305	Whatcom
HAGGEN #53	2900 WOBURN	BELLINGHAM	WA	98226	360-715-5321	Whatcom
HAGGEN #55	26603 72ND AVE. NW	STANWOOD	WA	98292	360-629-5520	Snohomish
HAGGEN #63	1815 MAIN ST.	FERNDALE	WA	98248	360-380-7210	Whatcom
HAGGEN #69	2601 E. DIVISION	MT. VERNON	WA	98273	360-848-6930	Skagit
HAGGEN #71	8915 MARKET PLACE SUITE 100	EVERETT	WA	98205	425-377-7110	Snohomish
HAGGEN #73	4545 CORDATA PARKWAY	BELLINGHAM	WA	98226	360-676-7373	Whatcom

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Pharmacy Name	Address	City	State	Zip	Phone	County
HAGGEN #77	3711 88TH ST. NE	MARYSVILLE	WA	98270	360-530-7761	Snohomish
HAGGEN FAIRHAVEN MARKET #25	1401 12TH STREET	BELLINGHAM	WA	98225	360-733-9277	Whatcom
HAGGEN FOOD & PHARMACY #23	20115 74TH AVENUE NE	ARLINGTON	WA	98223	360-403-3861	Snohomish
HALLS DRUG	505 S. TOWER	CENTRALIA	WA	98531	360-736-0703	Lewis
HALLS MEDICAL CENTER PHARMACY	1805 COOK HILL RD.	CENTRALIA	WA	98531	360-736-3301	Lewis
HARBORVIEW MEDICAL CENTER PHARMACY	325 9TH AVE, BOX #359912	SEATTLE	WA	98104	206-744-3953	King
HART & DILATUSH PHARMACY	601 W RIVERSIDE #140	SPOKANE	WA	99201	509-624-2111	Spokane
HEALTH CENTER PHARMACY	106 HALL HEALTH	SEATTLE	WA	98195	206-685-1021	King
HILLTOP PHARMACY (ND)	1223 E DIVISION STREET	MT VERNON	WA	98274	360-428-1710	Skagit
HI-SCHOOL PHARMACY #2100	1365 LEWIS RIVER RD.	WOODLAND	WA	98674	360-225-9475	Cowlitz
HI-SCHOOL PHARMACY #3500	250 E. JEWETT BLVD.	WHITE SALMON	WA	98672	509-493-2323	Klickitat
HI-SCHOOL PHARMACY #4200	505 NE 87TH AVE. SUITE 110	VANCOUVER	WA	98664	360-253-4379	Clark
HI-SCHOOL PHARMACY #600	6926 NE FOURTH PLAIN RD. SUITE B	VANCOUVER	WA	98661	360-693-8374	Clark
HOAGLAND PHARMACY	2330 YEW STREET	Bellingham	WA	98229	360-685-5012	Whatcom
HOLLAND DRUG	810 METCALF	SEDRO WOOLLEY	WA	98284	360-855-0251	Skagit
HOWARDS DRUG (MPC)	119 E THIRD AVENUE	SELAH	WA	98942	509-697-6125	Yakima
ILWACO PHARMACY	101 1ST AVENUE S	ILWACO	WA	98624	360-642-3133	Pacific

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
ISLAND DRUG (HI-SCHOOL PHARMACY)	11042 ST RT 525	CLINTON	WA	98236	360-341-3885	Island
ISLAND DRUG (HI-SCHOOL PHARMACY)	230 SE PIONEER WAY	OAK HARBOR	WA	98277	360-675-6688	Island
KAISER	4855 SW WESTERN AVENUE	BEAVERTON	OR	97005	503-626-4141	Unspecified
KAISER	10180 S.E. SUNNYSIDE ROAD	CLACKAMAS	OR	97015	503-571-4222	King
KAISER	3500 N INTERSTATE AVE	PORTLAND	OR	97227		King
KAISER	5725 NE 138TH AVE	PORTLAND	OR	97230	503-261-6060	Spokane
KAISER - MOTHER JOSEPH PLAZA PHARMACY	9427 SW BARNES ROAD	PORTLAND	OR	97225	503-203-2010	Unspecified
KAISER (CASCADE PARK)	12607 S.E. MILL PLAIN BLVD.	VANCOUVER	WA	98684	360-896-4466	Clark
KAISER (FISHER*S LANDING)	16703 S.E. MCGILLIVARY BLVD.	VANCOUVER	WA	98683	360-735-5645	Clark
KAISER (LONGVIEW-KELSO)	1230 7TH AVENUE	LONGVIEW	WA	98632	360-636-6226	Cowlitz
KAISER (SALMON CREEK)	14406 N.E. 20TH AVENUE	VANCOUVER	WA	98686	360-571-3072	Clark
KAISER (VANCOUVER)	2211 E. MILL PLAIN BLVD.	VANCOUVER	WA	98661	503-261-7958	Clark
KAISER IDC PHARMACY	3414 N. KAISER CENTER DRIVE	PORTLAND	OR	97227	503-249-3422	King
KAISER INTERSTATE CENTRAL PHARMACY	3600 N. INTERSTATE AVENUE	PORTLAND	OR	97227	503-249-3390	Unspecified
KAISER	7101 NE 137TH AVE	VANCOUVER	WA	98682	360-944-2700	Clark

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Pharmacy Name	Address	City	State	Zip	Phone	County
PERMANENTE ORCHARDS PHARMACY						
KAISER SKYLINE PHARMACY	5125 SKYLINE ROAD S	SALEM	OR	97306	503-588-5988	Unspecified
KELLEY -ROSS LONG TERM CARE	2324 EASTLAKE AVENUE EAST #400	SEATTLE	WA	98102	206-838-4590	King
KELLEY-ROSS PHARMACY, INC	616 OLIVE WAY	SEATTLE	WA	98101	206-622-3565	King
KELLEY-ROSS PHARMACY, LLC	1120 HARVARD AVENUE	SEATTLE	WA	98122	206-324-6990	King
KIRKS PHARMACY	104 MASHELL AVENUE N	EATONVILLE	WA	98328	360-832-3121	Pierce
KIRKS PHARMACY AT HARTLAND	3909 10TH STREET SE #2	PUYALLUP	WA	98374	253-848-2011	Pierce
KIRKS PHARMACY AT SUNRISE	11212 SUNRISE BLVD E #204	PUYALLUP	WA	98374	253-770-3408	Pierce
KITSAP PHARMACY	20148 10TH AVENUE NE	POULSBO	WA	98370	360-779-5335	Kitsap
KMART #3389	4141 MARTIN WAY	LACEY	WA	98506	360-923-9344	Thurston
KMART #3443	13200 AURORA AVE. N	SEATTLE	WA	98133	206-418-0147	King
KMART #3969	1020 NORTH STRATFORD RD.	MOSES LAKE	WA	98837	509-766-1802	Grant
KMART #4081	15015 MAIN ST.	BELLVUE	WA	98007	425-643-3778	King
KMART #4147	4110 E. SPRAUGE AVE.	SPOKANE	WA	99202	509-534-7367	Spokane
KMART #4155	6606 N. DIVISION ST.	SPOKANE	WA	99208	509-483-0466	Spokane
KMART #4208	22511 HIGHWAY 99	EDMONDS	WA	98026	425-774-0477	Snohomish
KMART #4225	7345 DELRIDGE WAY SW	SEATTLE	WA	98106	206-767-0355	King
KMART #4253	1414 E 72ND ST.	TACOMA	WA	98404	253-537-6668	Pierce
KMART #4439	2304 E. NOB HILL BLVD.	YAKIMA	WA	98901	509-575-7552	Yakima

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Pharmacy Name	Address	City	State	Zip	Phone	County
KMART #4480	440 RAINIER AVE. S	RENTON	WA	98055	425-227-0190	King
KMART #7034	220 EAST ISAACS AVE	WALLA WALLA	WA	99362	509-525-5301	Walla Walla
KMART #7331	1201 NORTHWEST LOUISIANNA	CHEHALIS	WA	98532	360-748-9681	Lewis
KMART #7621	32165 STATE ROUTE 20	OAK HARBOR	WA	98277	360-679-5546	Island
LA CONNER DRUG STORE (HI-SCHOOL PHARMACY)	708 E MORRIS	LA CONNER	WA	98257	360-466-3124	Skagit
LINCOLN PHARMACY	821 S 38TH ST	TACOMA	WA	98418	253-473-1155	Pierce
LONG BEACH PHARMACY	101 BOLSTAD AVENUE	LONG BEACH	WA	98631	360-642-3200	Pacific
Longs Drug Store #435	5401 6th Ave #600	Tacoma	WA	98000	253-752-1484	Pierce
Longs Drug Store #444	15716 First Ave South	Burien	WA	98000	206-243-4600	King
Longs Drug Store #445	3820 Rainier Ave South	Seattle	WA	98000	206-722-7100	King
Longs Drug Store #446	735-C N W Gilman Blvd	Issaquah	WA	98000	425-313-0333	King
Longs Drug Store #448	12 North 9th Ave	Yakima	WA	98000	509-452-2600	Yakima
Longs Drug Store #457	15400 NE 20th St	Bellevue	WA	98000	425-653-2040	King
Longs Drug Store #458	1209 S 320th St	Federal Way	WA	98000	253-946-1222	King
Longs Drug Store #478	3307 Evergreen Blvd Buidling	Washougal	WA	98000	360-335-9255	Clark
Longs Pharmacy #531	8441 SE 68th St	Mercer Island	WA	98000	206-232-3000	King
LOPEZ ISLAND PHARMACY	157 VILLAGE RD.	LOPEZ ISLAND	WA	98261	360-468-2616	San Juan

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Pharmacy Name	Address	City	State	Zip	Phone	County
MARK*S CAMANO PHARMACY	370 N. EAST CAMANO DRIVE SUITE 6	Camano Island	WA	98282	360-387-5757	Island
MAXIMUM HEALTH CARE CONCEPTS INC	1328 N. ASH STREET	SPOKANE	WA	99201	509-326-0306	Spokane
MEDICAL CENTER PHARMACY	3525 ENSIGN RD. NE #H	OLYMPIA	WA	98506	360-491-7521	Thurston
MERIDIAN COST CUTTER PHARMACY #67	4131 MERIDIAN	BELLINGHAM	WA	98226	360-671-7456	Whatcom
METROPOLITAN MEDICATIONS LLC	5707 LACEY BLVD #103	LACEY	WA	98503	360-459-5200	Thurston
MILL PLAIN MEDICAL & PHARMACY (HI-SCHOOL)	8614 E. MILL PLAIN BLVD,	VANCOUVER	WA	98664	360-253-8993	Clark
MOMS DBA CAPITOL HILL PHARMACY	1017 E UNION STREET	SEATTLE	WA	98122	206-568-2486	King
MOMS DBA CHERRY STREET PHARMACY	1120 CHERRY STREET SUITE 200	SEATTLE	WA	98104	206-624-1391	King
MOSES LAKE MARKET FOOD PAVILION #861	911 N STRATFORD RD.	MOSES LAKE	WA	98837	509-765-9591	Grant
MT. VERNON FOOD PAVILION #15	1515 N. 18TH ST.	MT. VERNON	WA	98273	360-428-3663	Skagit
MULTICARE CLINIC PHARMACY	521 MARTIN LUTHER KING JR WAY	TACOMA	WA	98405	253-403-4920	Pierce
NE WASHINGTON MEDICAL GROUP PHARMACY	1200 E COLUMBIA	COLVILLE	WA	99114	509-684-7727	Stevens
NOOKSACK VALLEY	208 E MAIN STREET	EVERSON	WA	98247	360-966-3481	Whatcom

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
DRUG STORE						
NORTHWEST HEALTH SYSTEMS	1011 E 2ND AVENUE #6	SPOKANE	WA	99202	509-744-9891	Spokane
NORTHWEST MEDICATION MANAGEMENT	4120 STONE WAY N	SEATTLE	WA	98103	206-547-1765	King
OCEAN PARK PHARMACY	1501 BAY AVENUE	OCEAN PARK	WA	98640	360-665-6137	Pacific
OLYMPIC DRUG (HI-SCHOOL PHARMACY)	13898 NE 28TH STREET	VANCOUVER	WA	98682	360-896-8932	Clark
OLYMPIC PHARMACY	4700 PT. FOSDICK DR. STE 120	GIG HARBOR	WA	98335	253-858-9941	Pierce
OWL TRISTATE PHARMACY	1275 HIGHLAND AVENUE	CLARKSTON	WA	99403	509-758-5533	Asotin
PHARM-A-SAVE	207 E STANLEY #A	GRANITE FALLS	WA	98252	360-691-7778	Snohomish
PIONEER MEDICAL CENTER PHARMACY	1550 S. PIONEER WAY #105	MOSES LAKE	WA	98837	509-765-8891	Grant
PRESCRIPTION SOLUTIONS (RXSOLUTIONS INC)	2858 LOKER AVENUE EAST, SUITE 100	Carlsbad	CA	92010	760-804-6490	Unspecified
PRESCRIPTION SOLUTIONS (RXSOLUTIONS INC)	6800 W 115TH STREET, SUITE 600	OVERLAND PARK	KS	66211	760-804-6430	Unspecified
PROCARE PHARMACY	1001 MADISON STREET #150	SEATTLE	WA	98104	206-381-1259	King
PROVIDENCE MEDICAL CENTER PHARMACY	1330 ROCKEFELLER AVENUE, SUITE 140	EVERETT	WA	98201	425-261-3555	Snohomish
PUGET SOUND	1112 6TH AVE. SUITE 101	TACOMA	WA	98405	253-272-1107	Pierce
PUGET SOUND	1112 6TH AVENUE	TACOMA	WA	98405	253-572-0180	Pierce

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
PHARMACY	#101					
PURDY COSTLESS	14218 92ND AVE NW	GIG HARBOR	WA	98329	253-857-7797	Pierce
QFC	417 BROADWAY E. BOX 2	SEATTLE	WA	98102	206-323-6586	King
QFC	4919 EVERGREEN WAY	EVERETT	WA	98203	425-259-3444	Snohomish
QFC	18921 BOTHELL WAY NE	BOTHELL	WA	98011	425-487-3031	King
QFC	2615 BROADWAY	EVERETT	WA	98201	425-259-6262	Snohomish
QFC	1031 11TH AVE. NE	BELLEVUE	WA	98004	425-454-3358	King
QFC #50126	4775 Whitman Lane SE	Lacey	WA	98509	360-438-6314	Thurston
QFC #50127	6200 Pacific Ave. S.	Lacey	WA	98503	360-456-6887	Thurston
QFC #50204	3900 W Powell Blvd	Gresham	OR	97030	503-661-9777	Unspecified
QFC #50205	554 E. Burnside	Portland	OR	97215	503-239-7710	Unspecified
QFC #50210	1148 NW Norman Ave	Gresham	OR	97030	503-665-1611	Unspecified
QFC #50807	2746 NE 45th	Seattle	WA	98105	206-729-3080	King
QFC #50809	325 Park Place Center	Kirkland	WA	98033	425-822-4123	King
QFC #50821	1540 Gilman Blvd.	Issaquah	WA	98027	425-392-7500	King
QFC #50822	3550 128th SE	Bellevue	WA	98006	425-378-0202	King
QFC #50823	8532 15th Ave. NW	Seattle	WA	98117	206-297-8688	King
QFC #50829	439 E. Second St.	North Bend	WA	98032	425-888-2357	King
QFC #50840	4560 Klahanie Dr. SE	Issaquah	WA	98027	425-392-8551	King
QFC #50841	990 B. East Washington	Sequim	WA	98382	360-683-1156	Clallam
QFC #50845	1301 W. Meeker	Kent	WA	98032	253-854-4025	King
QFC #50851	22828 100th Ave. W.	Edmonds	WA	98020	425-776-2144	Snohomish
QFC #50856	926 164th SE	Mill Creek	WA	98012	425-743-4806	Snohomish
QFC #50860	8867 161st. Ave. NE	Redmond	WA	98052	425-869-7474	King
QFC #50863	1009 Monroe St.	Enumclaw	WA	98022	360-825-9360	King
QFC #50866	11100 Roosevelt Way NE	Seattle	WA	98125	206-361-0188	King
QFC #50867	31217 Pacific Hwy. S	Federal Way	WA	98003	253-941-0841	King
QFC #50870	1890 Irondale Rd.	Port Hadlock	WA	98339	360-385-1900	Jefferson

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
QFC #50872	9999 Holman Rd. NW	Seattle	WA	98117	206-782-4100	King
QFC #883	4550 42ND AVENUE SW	SEATTLE	WA	98116	206-923-6391	King
QFC PHARMACY	1510 145TH PLACE SE	BELLEVUE	WA	98007	425-653-2431	King
QFC PHARMACY	1600 W.DRAVUS	SEATTLE	WA	98671	206-283-0366	Spokane
QFC PHARMACY 705212	3505 SE 192ND	VANCOUVER	WA	98665		Clark
QFC PHARMACY #50828	11224 NE 124TH STREET	KIRKLAND	WA	98034	425-820-0440	King
QFC PHARMACY #50890	7501 35TH AVENUE N.E.	SEATTLE	WA	98115	206-524-1800	King
QFC PHARMACY #858	1531 NE 145TH STREET	SEATTLE	WA	98115	206-366-4672	King
QFC PHARMACY #878	23475 N.E. NOVELTY HILL ROAD	REDMOND	WA	98053	425-636-0440	King
QFC PHARMACY 705816	600 NW RICHMOND BEACH ROAD	SHORELINE	WA	98177		King
QFC PHARMACY 705828	11224 N E 124TH STREET	KIRKLAND	WA	98034		King
QFC PHARMACY 705842	17411 SE 272ND STREET	COVINGTON	WA	98042		King
QFC PHARMACY 705881	500 MERCER STREET	SEATTLE	WA	98109		King
QUILED A PHARMACY	9528A STATE AVENUE	MARYSVILLE	WA	98270	360-653-4857	Snohomish
RANKOS PHARMACY	101 N. TACOMA AVENUE	TACOMA	WA	98403	253-383-2411	Pierce
RITE AID	606 OMACHE DRIVE	OMAK	WA	98841	509-826-2806	Okanogan
RITE AID	MID VALLEY MALL	SUNNYSIDE	WA	98944	509-839-2711	Yakima
RITE AID	13201 AURORA AVE., N.	SEATTLE	WA	98133	206-364-7676	King
RITE AID	TWIN LAKES	FEDERAL WAY	WA	98023	253-952-2803	King

EXHIBIT C
WA Statewide Pharmacy Network

Pharmacy Name	Address	City	State	Zip	Phone	County
RITE AID	205 PINE STREET	SNOHOMISH	WA	98290	360-563-0223	Snohomish
RITE AID	301 EAST WISHKAH STREET	ABERDEEN	WA	98520	360-533-6320	Grays Harbor
RITE AID	21302 SR 410 EAST	BONNEY LAKE	WA	98390	253-862-2822	Pierce
RITE AID	3116 NE SUNSET BLVD.	RENTON	WA	98056	425-793-0787	King
RITE AID	AUBURN NORTH SHOPPING CENTER	AUBURN	WA	98002	253-939-5355	King
RITE AID	3227 NORTHWEST AVENUE	BELLINGHAM	WA	98225	360-647-2175	Whatcom
RITE AID	700 SOUTH MAIN STREET	ELLENSBURG	WA	98926	509-925-4232	Kittitas
RITE AID	8156 GUIDE MERIDIAN RD.	LYNDEN	WA	98264	360-354-4284	Whatcom
RITE AID	BLAINE MARKETPLACE	BLAINE	WA	98230	360-332-1616	Whatcom
RITE AID	5606 SUMMIT VIEW AVE.	YAKIMA	WA	98908	509-965-2037	Yakima
RITE AID	1268 LEE BOULEVARD	RICHLAND	WA	99352	509-946-4684	Benton
RITE AID	WASHINGTON PLAZA	SEQUIM	WA	98382	360-681-0129	Clallam
RITE AID	905 YELM AVENUE EAST	YELM	WA	98597	360-458-9616	Thurston
RITE AID	1200 HARRISON AVENUE	CENTRALIA	WA	98531	360-807-2014	Lewis
RITE AID	ARGONNE MISSION CENTER	SPOKANE	WA	99212	509-928-9121	Spokane
RITE AID	14880 N.E. 24TH ST.	REDMOND	WA	98052	425-883-0900	King
RITE AID	5700 100TH STREET SW STE 100	LAKWOOD	WA	98499	253-588-3666	Pierce
RITE AID	RENTON VILLAGE S/C	RENTON	WA	98055	425-226-4390	King
RITE AID	MERCER ISLAND S/C	MERCER ISLAND	WA	98040	206-236-0776	King
RITE AID	621 SOUTH LINCOLN ST.	PORT ANGELES	WA	98362	360-452-9784	Clallam
RITE AID	310 N. MYRTLE STREET	ABERDEEN	WA	98520	360-533-5531	Grays Harbor

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
RITE AID	2603 THIRD AVENUE	SEATTLE	WA	98121	206-441-8790	King
RITE AID	POULSBO VILLAGE	POULSBO	WA	98370	360-697-2209	Kitsap
RITE AID	2204-B W. NOB HILL BLVD.	YAKIMA	WA	98902	509-453-4414	Yakima
RITE AID	232 ROOSEVELT AVENUE	ENUMCLAW	WA	98022	360-825-2558	King
RITE AID	11220 CANYON ROAD, EAST	PUYALLUP	WA	98373	253-537-3071	Pierce
RITE AID	VALLEY NORTH SHOPPING CENTER	WENATCHEE	WA	98801	509-663-7805	Chelan
RITE AID	16222 MILL CREEK BLVD	MILL CREEK	WA	98012	425-741-8649	Snohomish
RITE AID	HARBOR PLAZA	GIG HARBOR	WA	98335	253-851-6939	Pierce
RITE AID	SOUTH SOUND SHOPPING CENTER	LACEY	WA	98503	360-491-4111	Thurston
RITE AID	655 NW RICHMOND BEACH ROAD	SHORELINE	WA	98177	206-542-9688	King
RITE AID	SUNSET SQUARE	BELLINGHAM	WA	98226	360-671-5041	Whatcom
RITE AID	CANYON PARK SHOPPING CENTER	BOTHELL	WA	98021	425-481-8667	King
RITE AID	SEHOME VILLAGE	BELLINGHAM	WA	98225	360-734-8254	Whatcom
RITE AID	19107 BOTHELL WAY, N.E.	BOTHELL	WA	98011	425-489-1814	King
RITE AID	251 MARYSVILLE MALL	MARYSVILLE	WA	98270	360-659-0492	Snohomish
RITE AID	BEAR CREEK VILLAGE	REDMOND	WA	98052	425-883-1516	King
RITE AID	VALLEY PLAZA	PUYALLUP	WA	98372	253-848-3564	Pierce
RITE AID	ISLAND PLAZA S/C	OAK HARBOR	WA	98277	360-679-3522	Island
RITE AID	110 PORT ANGELES PLAZA	PORT ANGELES	WA	98362	360-457-3456	Clallam
RITE AID	WESTWOOD TOWN CENTER	SEATTLE	WA	98126	206-938-4253	King
RITE AID	WINSLOW VILLAGE S/C	BAINBRIDGE	WA	98110	206-842-4065	Kitsap

**EXHIBIT C
WA Statewide Pharmacy Network**

Pharmacy Name	Address	City	State	Zip	Phone	County
		ISLAND				
RITE AID	22515 HIGHWAY 99	EDMONDS	WA	98020	425-670-2667	Snohomish
RITE AID	EASTGATE PLAZA	BELLEVUE	WA	98006	425-746-4028	King
RITE AID	VAUGHN CENTER	LYNNWOOD	WA	98036	425-774-6669	Snohomish
RITE AID	VALLEY MALL	UNION GAP	WA	98903	509-453-3603	Yakima
RITE AID	1065 N.W. GILMAN BLVD.	ISSAQUAH	WA	98027	425-392-2865	King
RITE AID	GRANT COUNTY MALL	MOSES LAKE	WA	98837	509-765-1219	Grant
RITE AID	WOODMONT PLACE S/C	KENT	WA	98032	253-941-4660	King
RITE AID	ALDERWOOD PLAZA S/C	LYNNWOOD	WA	98037	425-771-9427	Snohomish
RITE AID	COVINGTON SQUARE	KENT	WA	98042	253-630-9880	King
RITE AID	2707 RAINIER AVENUE SOUTH	SEATTLE	WA	98144	206-721-5018	King
RITE AID	1850 SOUTH MILDRED ST	TACOMA	WA	98466	253-460-9599	Pierce
RITE AID	506 CROSSROADS SQUARE	SEDRO WOOLLEY	WA	98284	360-856-2153	Skagit
RITE AID	110 SW 148TH STREET	BURIEN	WA	98166	206-835-0166	King
RITE AID	11505-C NE 4TH PLAIN	VANCOUVER	WA	98662	360-254-3108	Clark
RITE AID	9120 NORTH DIVISION	SPOKANE	WA	99208	509-464-4480	Spokane
RITE AID	5217 CALIFORNIA AVE., S.W.	SEATTLE	WA	98136	206-937-2191	King
RITE AID	COLLEGE PLAZA	EVERETT	WA	98201	425-258-4542	Snohomish
RITE AID	303 91ST AVENUE NE, SUITE D401	LAKE STEVENS	WA	98258	425-335-4513	Snohomish
RITE AID	FRANKLIN PARK MALL	SPOKANE	WA	99207	509-489-6010	Spokane
RITE AID	EVERGREEN PLAZA	EVERETT	WA	98203	425-252-4109	Snohomish
RITE AID	1300 MADISON STREET	SEATTLE	WA	98104	206-322-9316	King
RITE AID	10103 EVERGREEN WAY	EVERETT	WA	98204	425-347-2180	Snohomish

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
RITE AID	PANTHER LAKE	KENT	WA	98031	253-854-2999	King
RITE AID	3202 132ND STREET, S.E.	BOTHELL	WA	98012	425-379-7105	Snohomish
RITE AID	12811 MERIDIAN STREET, EAST	PUYALLUP	WA	98373	253-770-4115	Pierce
RITE AID	120 106TH AVENUE	BELLEVUE	WA	98004	425-454-6513	King
RITE AID	1912 N. PEARL STREET	TACOMA	WA	98406	253-879-0140	Pierce
RITE AID	SHADLE SHOPPING CENTER	SPOKANE	WA	99205	509-328-7887	Spokane
RITE AID	OLD ORCHARD SHOPPING CENTER	KENT	WA	98031	253-854-5343	King
RITE AID	LAKE FOREST PARK TOWNE CENTER	SEATTLE	WA	98155	206-363-6364	King
RITE AID	215 NORTH 4TH AVENUE	PASCO	WA	99301	509-547-2231	Franklin
RITE AID	9200 RAINIER AVE., S.	SEATTLE	WA	98118	206-760-1076	King
RITE AID	900 EAST MERIDIAN	MILTON	WA	98354	253-952-2680	Pierce
RITE AID	13511 SOUTHEAST THIRD WAY	VANCOUVER	WA	98685	360-885-0839	Clark
RITE AID	SPANAWAY VILLAGE S/C	TACOMA	WA	98444	253-531-7427	Pierce
RITE AID	GREEN FIRS VILLAGE	TACOMA	WA	98466	253-564-2255	Pierce
RITE AID	112 NORTH HOWARD ST. #115	SPOKANE	WA	99201	509-838-1851	Spokane
RITE AID	WHEATLAND SHOPPING CENTER	PULLMAN	WA	99163	509-334-7222	Whitman
RITE AID	4220 WHEATON WAY	BREMERTON	WA	98310	360-479-3450	Kitsap
RITE AID	HARBOUR POINTE S/C	MUKILTEO	WA	98275	425-514-0620	Snohomish
RITE AID	1400 CORNWALL AVENUE	BELLINGHAM	WA	98225	360-733-1980	Whatcom
RITE AID	SILVERDALE PLAZA	SILVERDALE	WA	98383	360-692-3410	Kitsap
RITE AID	MANITO SHOPPING	SPOKANE	WA	99203	509-838-3508	Spokane

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
	CENTER					
RITE AID	4514 SOUTH REGAL STREET	SPOKANE	WA	99223	509-448-9063	Spokane
RITE AID	2929 EAST 29TH AVENUE	SPOKANE	WA	99223	509-535-9056	Spokane
RITE AID	OYSTER BAY PLAZA	BREMERTON	WA	98312	360-479-2415	Kitsap
RITE AID	1517 COMMERCIAL AVE.	ANACORTES	WA	98221	360-293-3784	Skagit
RITE AID	101 NORTH ELY STREET	KENNEWICK	WA	99336	509-783-1438	Benton
RITE AID	RIVERWAY PLAZA	KELSO	WA	98626	360-577-2693	Cowlitz
RITE AID	3905 FACTORIA SQ. MALL, S.E.	BELLEVUE	WA	98006	425-644-2925	King
RITE AID	3 TRIANGLE SHOPPING CENTER	LONGVIEW	WA	98632	360-423-4833	Cowlitz
RITE AID	7041 PACIFIC AVE	TACOMA	WA	98406	253-474-8215	Pierce
RITE AID	PINE LAKE VILLAGE S/C	ISSAQUAH	WA	98027	425-391-1582	King
RITE AID	WOODINVILLE PLAZA	WOODINVILLE	WA	98072	425-485-6468	King
RITE AID	845 COLUMBIA CENTER	KENNEWICK	WA	99336	509-783-3413	Benton
RITE AID	4535 UNIVERSITY WAY, N.E.	SEATTLE	WA	98105	206-632-3975	King
RITE AID	201 BROADWAY EAST	SEATTLE	WA	98102	206-324-7111	King
RITE AID	3304 BETHEL ROAD, SE	PORT ORCHARD	WA	98366	360-876-0969	Kitsap
RITE AID	18022 68TH AVENUE NE	KENMORE	WA	98028	425-424-2320	King
RITE AID	1308 NORTH 20TH AVENUE	PASCO	WA	99301	509-545-9581	Franklin
RITE AID	26817 88TH AVE	STANWOOD	WA	98292	360-629-9519	Snohomish
RITE AID	8500 35TH AVENUE, N.E.	SEATTLE	WA	98115	206-527-8373	King
RITE AID	LEWIS COUNTY MALL	CHEHALIS	WA	98532	360-748-8801	Lewis
RITE AID	31009 PACIFIC HWY.	FEDERAL WAY	WA	98003	253-945-6011	King

**EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
	SOUTH					
RITE AID	4776 WHITMAN LANE SE	LACEY	WA	98513	360-923-0493	Thurston
RITE AID	17226 SMOKEY POINT BLVD	ARLINGTON	WA	98223	360-657-4410	Snohomish
RITE AID	1549 GEORGE WASHINGTON WAY	RICHLAND	WA	99352	509-946-5770	Benton
RITE AID	SKAGIT VALLEY MALL	MT. VERNON	WA	98273	360-424-7958	Skagit
RITE AID	MERIDIAN VILLAGE	BELLINGHAM	WA	98226	360-676-8570	Whatcom
RITE AID	22311 MOUNTAIN HWY. EAST	SPANAWAY	WA	98387	253-846-0542	Pierce
RITE AID	20240 BALLINGER WAY, NE	SHORELINE	WA	98155	206-368-0034	King
RITE AID	319 PIKE STREET	SEATTLE	WA	98101	206-223-0512	King
RITE AID	8230 MARTIN WAY EAST	LACEY	WA	98516	360-456-0444	Thurston
RITE AID	135 3RD AVENUE SW	EPHRATA	WA	98823	509-754-3513	Grant
RITE AID	802 THIRD AVENUE	SEATTLE	WA	98104	206-623-0577	King
RITE AID	2029 EAST ISAACS AVENUE	WALLA WALLA	WA	99362	509-529-1917	Walla Walla
RITE AID	9820 N.E. 132ND ST.	JUANITA	WA	98034	425-823-4466	King
RITE AID	1509 AUBURN WAY SOUTH	AUBURN	WA	98002	253-939-1939	King
RITE AID	18906 STATE ROUTE 2	MONROE	WA	98272	360-794-0943	Snohomish
RITE AID	CAPITAL VILLAGE	OLYMPIA	WA	98502	360-754-8014	Thurston
RITE AID	12420 NORTH DIVISION ST.	SPOKANE	WA	99218	509-466-1946	Spokane
RITE AID	TOTEM LAKE MALL	KIRKLAND	WA	98034	425-821-1500	King
RITE AID	OPPORTUNITY SHOPPING CENTER	SPOKANE	WA	99206	509-924-4922	Spokane
RITE AID	9830 PACIFIC AVE., S.	TACOMA	WA	98444	253-531-6533	Pierce
RITE AID	4613 N.E. SUNSET	RENTON	WA	98056	425-271-1340	King

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
	BLVD.					
RITE AID	WILLOWS SHOPPING CENTER	PUYALLUP	WA	98373	253-848-1544	Pierce
RITE AID	THRASHER*S CORNER	BOTHELL	WA	98012	425-485-8484	King
RITE AID	15405 EAST SPRAGUE AVENUE	VERADALE	WA	99037	509-924-5707	Spokane
RITE AID	1105 MARTIN LUTHER JR. WAY	TACOMA	WA	98405	253-779-0601	Pierce
RITE AID # 06539	608 W STANLEY STREET	GRANITE FALLS	WA	98252	360-691-4659	Snohomish
RITE AID #06488	105 WASHINGTON AVENUE NORTH	KENT	WA	98032	253-373-0156	King
RITE AID #6493	9502 176TH STREET EAST	Puyallup	WA	98375	253-846-5386	Pierce
RITE AID PHARMACY #06503	3733 116TH STREET NE	MARYSVILLE	WA	98271	360-653-5178	Snohomish
RITE AID PHARMACY #06521	22201 MERIDIAN EAST	GRAHAM	WA	98338	253-846-9455	Pierce
RITE AID PHARMACY #06544	23940 NE STATE ROUTE 3	BELFAIR	WA	98528	360-275-8964	Mason
RITE AID PHARMACY #6452	5715 4TH AVENUE	FERNDALE	WA	98248	360-384-1551	Whatcom
RITE AID PHARMACY #6498	2800 NE 162ND AVENUE	VANCOUVER	WA	98682	360-253-5613	Clark
RITE AID PHARMACY #6553	9007 N. INDIAN TRAIL ROAD	SPOKANE	WA	99208		Spokane
ROSAUERS PHARMACY #10	907 W. FOURTEENTH	SPOKANE	WA	99204	509-624-2371	Spokane
ROSAUERS PHARMACY #2	1808 W. THIRD AVENUE	SPOKANE	WA	99204	509-624-0126	Spokane
ROSAUERS PHARMACY #26	2610 E. 29TH AVENUE	SPOKANE	WA	99223	509-535-3623	Spokane

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Pharmacy Name	Address	City	State	Zip	Phone	County
ROSAUERS PHARMACY #29	9414 N. DIVISION	SPOKANE	WA	99218	509-467-6806	Spokane
ROSAUERS PHARMACY #3	10502 E. SPRAGUE	SPOKANE	WA	99206	509-924-5560	Spokane
ROSAUERS PHARMACY #39	410 S. 72ND AVENUE	YAKIMA	WA	98908	509-972-0284	Yakima
ROSAUERS PHARMACY #7	1724 W, FRANCIS	SPOKANE	WA	99205	509-325-3431	Spokane
ROY*S PHARMACY	P.O. BOX 665	TONASKET	WA	98855	509-486-2149	Okanogan
SAFEWAY	152 ROOSEVELT AVENUE EAST	ENUMCLAW	WA	98022	360-802-1534	King
SAFEWAY	2004 4TH STREET	LA GRANDE	OR	97850	541-963-5151	Unspecified
SAFEWAY	22000 SALAMO ROAD	WEST LINN	OR	97068	503-650-6426	Unspecified
SAFEWAY	6711 NE 63RD STREET	VANCOUVER	WA	98661	360-992-5686	Clark
SAFEWAY	501 N. MILLER	WENATCHEE	WA	98801	509-663-5575	Chelan
SAFEWAY	121 W. WALNUT	NEWPORT	WA	99156	509-447-3972	Pend Oreille
SAFEWAY	1990 14TH AVE SE	ALBANY	OR	97321	541-812-2397	Unspecified
SAFEWAY	2100 QUEEN ANNE AVE. NORTH	SEATTLE	WA	98109	206-284-4226	King
SAFEWAY	15570 S.W. PACIFIC HIGHWAY	TIGARD	OR	97224	503-598-6009	Unspecified
SAFEWAY	E 2509 29TH AVENUE	SPOKANE	WA	99223	509-532-9182	Spokane
SAFEWAY	516 FIRST AVE WEST	SEATTLE	WA	98119	206-494-1700	King
SAFEWAY	945 W. BAILEY HILL ROAD	EUGENE	OR	97402	541-344-9577	Unspecified
SAFEWAY	1645 140TH AVE NE	BELLEVUE	WA	98005	425-643-1778	King
SAFEWAY	138 W. ELLENDALE AVENUE	DALLAS	OR	97338	503-623-8827	Unspecified
SAFEWAY	106 W. MANSON ROAD	CHELAN	WA	98816	509-682-4087	Chelan
SAFEWAY	1705 S. HIGHWAY 97	REDMOND	OR	97756	541-504-4166	Unspecified
SAFEWAY	17051 S.E. 272ND	KENT	WA	98042	253-631-2450	King

EXHIBIT C
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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY	101 AUBURN WAY SOUTH	AUBURN	WA	98002	253-735-4404	King
SAFEWAY	110 EAST 3RD STREET	PORT ANGELES	WA	98362	360-457-0599	Clallam
SAFEWAY	7601 EVERGREEN WAY	EVERETT	WA	98203	425-355-9303	Snohomish
SAFEWAY	7300 ROOSEVELT WAY NE	SEATTLE	WA	98115	206-524-1649	King
SAFEWAY	1025 S.W. JEFFERSON	PORTLAND	OR	97201	503-721-9153	Unspecified
SAFEWAY	3285 COMMERCIAL STREET S.E.	SALEM	OR	97302	503-361-3346	Unspecified
SAFEWAY	4128 RUCKER AVE.	EVERETT	WA	98201	425-252-1911	Snohomish
SAFEWAY	680-F W. WASHINGTON	SEQUIM	WA	98382	360-681-2120	Clallam
SAFEWAY	911 11TH STREET	ANACORTES	WA	98221	360-293-4148	Skagit
SAFEWAY	2490 NORTH HWY 99	MC MINNVILLE	OR	97128	503-435-3125	Unspecified
SAFEWAY	3820 RAINIER AVENUE SOUTH	SEATTLE	WA	98118	206-725-9887	King
SAFEWAY	1535 NORTH FIRST STREET	STAYTON	OR	97383	503-769-5345	Unspecified
SAFEWAY	20830 108TH SE	KENT	WA	98031	253-852-9319	King
SAFEWAY	2525 S.E. TV HIGHWAY	HILLSBORO	OR	97123	503-681-0262	Unspecified
SAFEWAY	1725 PACIFIC AVENUE	WOODLAND	WA	98674	360-225-4375	Cowlitz
SAFEWAY	391 N. MAIN STREET	COLVILLE	WA	99114	509-684-8481	Stevens
SAFEWAY	17779 SW LOWER BOONES FERRY	LAKE OSWEGO	OR	97035	503-675-2509	Unspecified
SAFEWAY	4700 YELM ROAD S.E.	LACEY	WA	98503	360-438-0081	Thurston
SAFEWAY	4101 LOGAN ROAD	LINCOLN CITY	OR	97367	541-994-2500	Unspecified
SAFEWAY	10105 224TH STREET EAST	GRAHAM	WA	98338	253-847-7634	Pierce
SAFEWAY	4300 NE 4TH STREET	RENTON	WA	98059	425-235-6251	King
SAFEWAY	2740 S 6TH STREET	KLAMATH FALLS	OR	97603	541-273-3515	Unspecified
SAFEWAY	2615 N.E. 112TH AVENUE	VANCOUVER	WA	98684	360-449-5205	Clark

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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY	601 WEST NORTH	ENTERPRISE	OR	97828	541-426-3535	Unspecified
SAFEWAY	3020 NE 45TH	SEATTLE	WA	98105	206-524-9931	King
SAFEWAY	1735 VIRGINIA AVENUE	NORTH BEND	OR	97459	541-751-7006	Unspecified
SAFEWAY	711 WEST FIRST ST.	TOPPENISH	WA	98948	509-865-4700	Yakima
SAFEWAY	1500 E. MAIN	COTTAGE GROVE	OR	97424	541-942-7443	Unspecified
SAFEWAY	14444 - 124TH AVENUE N.E.	KIRKLAND	WA	98033	425-821-7455	King
SAFEWAY	8002 N. BURLINGTON	PORTLAND	OR	97203	503-286-9125	Unspecified
SAFEWAY	9620 28TH SW	SEATTLE	WA	98126	206-923-9110	King
SAFEWAY	201 S.W. 20TH	PENDLETON	OR	97801	541-278-4285	Unspecified
SAFEWAY	510 GRANT ROAD	EAST WENATCHEE	WA	98801	509-884-0678	Chelan
SAFEWAY	15332 AURORA AVENUE NORTH	SHORELINE	WA	98133	206-362-4940	King
SAFEWAY	13308 S. MERIDIAN ST.	PUYALLUP	WA	98373	253-435-1742	Pierce
SAFEWAY	1891 PIONEER PARKWAY EAST	SPRINGFIELD	OR	97477	541-747-6627	Unspecified
SAFEWAY	11501 CANYON RD. EAST	PUYALLUP	WA	98373	253-526-5296	Pierce
SAFEWAY	211 NORTH 8TH	KLAMATH FALLS	OR	97601	541-273-5506	Unspecified
SAFEWAY	1803 GEORGE WASHINGTON WAY	RICHLAND	WA	99352	509-946-1157	Benton
SAFEWAY	1100 SOUTH MARKET BOULEVARD	CHEHALIS	WA	98532	360-740-6750	Lewis
SAFEWAY	6745 SW BEAVERTNHLLSDALE HWY	PORTLAND	OR	97225	503-296-7226	Unspecified
SAFEWAY	1410 E. JOHN STREET	SEATTLE	WA	98112	206-323-4935	King
SAFEWAY	205 NORTH 5TH AVENUE	YAKIMA	WA	98902	509-457-8869	Yakima
SAFEWAY	12318 15TH NE	SEATTLE	WA	98125	206-367-0929	King
SAFEWAY	6701 E. MILL PLAIN	VANCOUVER	WA	98661	360-992-5726	Clark

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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY	3380 LANCASTER DRIVE NE	SALEM	OR	97303	503-391-6482	Unspecified
SAFEWAY	8145 S.W. BARBUR BLVD.	PORTLAND	OR	97219	503-892-4975	Unspecified
SAFEWAY	3215 HARRISON AVENUE NW	OLYMPIA	WA	98502	360-956-3827	Thurston
SAFEWAY	1423 N.W. MARKET	SEATTLE	WA	98107	206-782-8688	King
SAFEWAY	400 NORTH RUBY STREET	ELLENSBURG	WA	98926	509-962-5096	Kittitas
SAFEWAY	11031 19TH AVE. SOUTHEAST	EVERETT	WA	98204	425-337-0684	Snohomish
SAFEWAY	11606 N.E. 76TH.	VANCOUVER	WA	98662	360-944-2665	Clark
SAFEWAY	5920 NE MARTNLTHRKNG JR.BLVD	PORTLAND	OR	97211	503-288-3272	Unspecified
SAFEWAY	642 EAST THIRD	BEND	OR	97701	541-312-6486	Unspecified
SAFEWAY	14020 MAIN STREET N.E.	DUVALL	WA	98019	425-844-1199	King
SAFEWAY	221 NE 122ND	PORTLAND	OR	97230	503-261-2559	Unspecified
SAFEWAY	460 SW MOUNT SI BLVD.	NORTH BEND	WA	98045	425-831-2126	King
SAFEWAY	1001 S.W. HIGHLAND DRIVE	GRESHAM	OR	97030	503-667-9305	Unspecified
SAFEWAY	4011 S. 164TH ST.	SEATAC	WA	98188	206-248-0300	King
SAFEWAY	2501 SW CHERRY PARK WAY	TROUTDALE	OR	97060	503-674-7006	Unspecified
SAFEWAY	990 HIGHWAY 395 SOUTH	HERMISTON	OR	97838	541-564-1285	Unspecified
SAFEWAY	14020 E. SPRAGUE	SPOKANE	WA	99216	509-891-6319	Spokane
SAFEWAY	1233 N. LIBERTY LAKE ROAD	LIBERTY LAKE	WA	99019	509-893-1202	Spokane
SAFEWAY	905 EAST MEAD	YAKIMA	WA	98903	509-248-8782	Yakima

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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY	200 SOUTH 3RD STREET	RENTON	WA	98055	425-226-0325	King
SAFEWAY	3919 NORTH MARKET STREET	SPOKANE	WA	99207	509-482-3480	Spokane
SAFEWAY	600 FRANKLIN STREET	SHELTON	WA	98584	360-426-0718	Mason
SAFEWAY	20500 OLYMPIC PLACE	ARLINGTON	WA	98223	360-403-3378	Snohomish
SAFEWAY	1983 SOUTH MAIN ST.	LEBANON	OR	97355	541-259-5706	Unspecified
SAFEWAY	20151 S.E. HIGHWAY 212	BORING	OR	97009	503-658-7005	Unspecified
SAFEWAY	900 CALLOW AVENUE	BREMERTON	WA	98312	360-792-9262	Kitsap
SAFEWAY	101 GRAND COULEE HWY.	GRAND COULEE	WA	99133	509-633-0463	Grant
SAFEWAY	350 EAST 40TH	EUGENE	OR	97405	541-434-2185	Unspecified
SAFEWAY	246 WEST MONROE	BURNS	OR	97720	541-573-8586	Unspecified
SAFEWAY	W 902 FRANCIS AVENUE	SPOKANE	WA	99208	509-327-6114	Spokane
SAFEWAY	23632 HWY 99	EDMONDS	WA	98026	425-775-1030	Snohomish
SAFEWAY	315 EAST COLLEGE WAY	MT. VERNON	WA	98273	360-424-0467	Skagit
SAFEWAY	1715 BROADWAY	EVERETT	WA	98201	425-339-9448	Snohomish
SAFEWAY	6901 N.E. SANDY BLVD.	PORTLAND	OR	97213	503-280-1212	Unspecified
SAFEWAY	3707 NORTH MAIN	VANCOUVER	WA	98663	360-993-8604	Clark
SAFEWAY	1109 YELM AVE. E.	YELM	WA	98597	360-458-8835	Thurston
SAFEWAY	2710 1ST STREET	CHENEY	WA	99004	509-235-6030	Spokane
SAFEWAY	630 228TH AVE. N.E.	SAMMAMISH	WA	98074	425-868-6181	King
SAFEWAY	1600 PLAZA WAY	WALLA WALLA	WA	99362	509-522-4672	Walla Walla
SAFEWAY	1207 SOUTH 320TH STREET	FEDERAL WAY	WA	98003	253-946-1505	King
SAFEWAY	19150 WOODINVILLE-DUVALL RD	WOODINVILLE	WA	98072	425-788-6658	King
SAFEWAY	1455 N.E. DIVISION	GRESHAM	OR	97030	503-665-6337	Unspecified
SAFEWAY	95 82ND DRIVE	GLADSTONE	OR	97027	503-723-2685	Unspecified

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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY	13719 S.E. MILL PLAIN BLVD.	VANCOUVER	WA	98684	360-891-4254	Clark
SAFEWAY	1755 IVY STREET	JUNCTION CITY	OR	97448	541-998-4536	Unspecified
SAFEWAY	1112 SOUTH "M" STREET	TACOMA	WA	98405	253-572-7753	Pierce
SAFEWAY	700 HIGHWAY 101	FLORENCE	OR	97439	541-902-1905	Unspecified
SAFEWAY	138 SW 148TH STREET	BURIEN	WA	98166	206-243-2796	King
SAFEWAY	1302 SOUTH 38TH STREET	TACOMA	WA	98408	253-471-5511	Pierce
SAFEWAY	230 JOHNSON STREET	COOSBAY	OR	97420	541-267-1709	Unspecified
SAFEWAY	1129 HARRISON AVENUE	CENTRALIA	WA	98531	360-330-5229	Lewis
SAFEWAY	13101 SE KENT KANGLEY HWY.	KENT	WA	98031	253-638-0831	King
SAFEWAY	1655 MT. HOOD AVENUE	WOODBURN	OR	97071	503-981-2255	Unspecified
SAFEWAY	3169 CRATER LAKE HIGHWAY	MEDFORD	OR	97504	541-774-4346	Unspecified
SAFEWAY	W 1616 NORTHWEST BLVD.	SPOKANE	WA	99205	509-327-5010	Spokane
SAFEWAY	520 CLEVELAND AVENUE	TUMWATER	WA	98501	360-943-7600	Thurston
SAFEWAY	21301 HWY #410	BONNEY LAKE	WA	98390	253-862-2533	Pierce
SAFEWAY	520 MOUNT HOOD	THE DALLES	OR	97058	541-298-9634	Unspecified
SAFEWAY	28 N.E. PLUM STREET	MADRAS	OR	97741	541-475-7311	Unspecified
SAFEWAY	4831 POINT FOSDICK DRIVE NW	GIG HARBOR	WA	98335	253-851-6870	Pierce
SAFEWAY	37601 HIGHWAY 26	SANDY	OR	97055	503-668-2336	Unspecified
SAFEWAY	401 "A" AVENUE	LAKE OSWEGO	OR	97034	503-675-4486	Unspecified
SAFEWAY	20685 SW ROY ROGERS ROAD	SHERWOOD	OR	97140	503-625-4766	Unspecified
SAFEWAY	WEST 2825	KENNEWICK	WA	99336	509-783-2622	Benton

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Pharmacy Name	Address	City	State	Zip	Phone	County
	KENNEWICK AVENUE					
SAFEWAY	17202 15TH AVENUE N.E.	SEATTLE	WA	98155	206-364-4618	King
SAFEWAY	13485 N.W. CORNELL ROAD	PORTLAND	OR	97229	503-350-2086	Unspecified
SAFEWAY	1624 72ND STREET EAST	TACOMA	WA	98404	253-537-2435	Pierce
SAFEWAY	800 N.E. THIRD	CAMAS	WA	98607	360-834-6550	Clark
SAFEWAY	6194 S.W. MURRAY BLVD.	BEAVERTON	OR	97005	503-672-8186	Unspecified
SAFEWAY	221 WEST HERON STREET	ABERDEEN	WA	98520	360-532-8743	Grays Harbor
SAFEWAY	6700 N.E. 162ND AVENUE	VANCOUVER	WA	98682	360-944-2686	Clark
SAFEWAY	6911 COAL CREEK PKWY S.E.	NEWCASTLE	WA	98056	425-644-2726	King
SAFEWAY	2411 N PROCTOR	TACOMA	WA	98406	253-759-9889	Pierce
SAFEWAY	6850 N.E. BOTHELL WAY	KENMORE	WA	98028	425-486-1661	King
SAFEWAY	707 S 56TH STREET	TACOMA	WA	98408	253-471-1730	Pierce
SAFEWAY	14826 HWY 99 NORTH	LYNNWOOD	WA	98036	425-743-6808	Snohomish
SAFEWAY	26916 MAPLE VALLEY- BK DMD RD	MAPLE VALLEY	WA	98038	425-432-3077	King
SAFEWAY	450 S.W. 3RD	CORVALLIS	OR	97333	541-750-0166	Unspecified
SAFEWAY	3307 SE EVERGREEN, BLDG 5	WASHOUGAL	WA	98671	360-335-2006	Clark
SAFEWAY	5415 MAIN STREET	SPRINGFIELD	OR	97477	541-736-3418	Unspecified
SAFEWAY	3527 S.E. 122ND	PORTLAND	OR	97236	503-760-6688	Unspecified
SAFEWAY	601 S. PIONEER WAY	MOSES LAKE	WA	98837	509-764-4721	Grant
SAFEWAY	1525 WEST MAIN STREET	MOLALLA	OR	97038	503-829-4855	Unspecified
SAFEWAY	1401 NE MCWILLIAMS	BREMERTON	WA	98311	360-373-7226	Kitsap

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Pharmacy Name	Address	City	State	Zip	Phone	County
	ROAD					
SAFEWAY	8340 15TH NW	SEATTLE	WA	98117	206-782-7480	King
SAFEWAY	1540 MAIN STREET	SWEET HOME	OR	97386	541-367-0675	Unspecified
SAFEWAY	4990 NORTH RIVER ROAD	KEIZER	OR	97303	503-390-8819	Unspecified
SAFEWAY	900 E. MERIDIAN	MILTON	WA	98354	253-952-0390	Pierce
SAFEWAY	2836 PACIFIC AVENUE	FOREST GROVE	OR	97116	503-359-3923	Unspecified
SAFEWAY	N 1441 ARGONNE ROAD	SPOKANE	WA	99212	509-921-8032	Spokane
SAFEWAY	1539 N.E. STEPHENS	ROSEBURG	OR	97470	541-957-2546	Unspecified
SAFEWAY	1150 BASIN STREET SW	EPHRATA	WA	98823	509-754-3567	Grant
SAFEWAY	2650 NE HIGHWAY 20	BEND	OR	97702	541-383-6509	Unspecified
SAFEWAY	20711 BOTHELL- EVERETT HWY	BOTHELL	WA	98012	425-486-4473	Snohomish
SAFEWAY	115 EAST 7TH	GRANTS PASS	OR	97526	541-956-7546	Unspecified
SAFEWAY	1258 STATE AVENUE	MARYSVILLE	WA	98270	360-659-2882	Snohomish
SAFEWAY	3355 BETHEL ROAD S.E.	PORT ORCHARD	WA	98366	360-876-6064	Kitsap
SAFEWAY	1500 COBURG ROAD	EUGENE	OR	97401	541-485-8674	Unspecified
SAFEWAY	4515 S.E. WOODSTOCK	PORTLAND	OR	97206	503-771-8180	Unspecified
SAFEWAY	116 RIVERBEND DRIVE	LEAVENWORTH	WA	98826	509-548-5811	Chelan
SAFEWAY	3930 SE POWELL	PORTLAND	OR	97202	503-772-4445	Unspecified
SAFEWAY	215 E. ROSE STREET	WALLA WALLA	WA	99362	509-522-0227	Walla Walla
SAFEWAY	12519 NE 85TH STREET	KIRKLAND	WA	98033	425-822-9235	King
SAFEWAY	1265 CENTER STREET	SALEM	OR	97301	503-566-5545	Unspecified
SAFEWAY	455 NORTH COLUMBIA	MILTON FREEWATE	OR	97862	541-938-3289	Unspecified
SAFEWAY	401 S. ROOSEVELT	SEASIDE	OR	97138	503-738-4706	Unspecified
SAFEWAY	613 SIXTH	SUNNYSIDE	WA	98944	509-839-2103	Yakima
SAFEWAY	10100 NORTH NEWPORT HIGHWAY	SPOKANE	WA	99218	509-465-3676	Spokane
SAFEWAY	795 COLUMBIA RIVER	ST. HELENS	OR	97051	503-397-0662	Unspecified

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Pharmacy Name	Address	City	State	Zip	Phone	County
	HIGHWAY					
SAFEWAY	5512 161ST STREET E.	PUYALLUP	WA	98375	253-531-5831	Pierce
SAFEWAY	611 S. MERIDIAN	PUYALLUP	WA	98371	253-841-1534	Pierce
SAFEWAY	2930 OCEAN BEACH HIGHWAY	LONGVIEW	WA	98632	360-575-6246	Cowlitz
SAFEWAY	2622 CALIFORNIA AVE. S.W.	SEATTLE	WA	98116	206-937-2221	King
SAFEWAY	442 W. SIMS WAY	PORT TOWNSEND	WA	98368	360-385-2860	Jefferson
SAFEWAY	E 933 MISSION AVENUE	SPOKANE	WA	99202	509-482-2089	Spokane
SAFEWAY	23961 N.E. STATE ROUTE 3	BELFAIR	WA	98528	360-275-0953	Mason
SAFEWAY	2800 S.E. HAWTHORNE AVE.	PORTLAND	OR	97214	503-232-3538	Unspecified
SAFEWAY	13023 NE HIGHWAY 99	VANCOUVER	WA	98686	360-566-7986	Clark
SAFEWAY	1205 CAMPBELL STREET	BAKER CITY	OR	97814	541-523-6743	Unspecified
SAFEWAY	5270 SW PHILOMATH BLVD.	CORVALLIS	OR	97333	541-738-2106	Unspecified
SAFEWAY	2201 E MADISON	SEATTLE	WA	98112	206-494-1520	King
SAFEWAY	210 WASHINGTON AVENUE S.	KENT	WA	98032	253-852-5115	King
SAFEWAY	1100 N.E. BROADWAY	PORTLAND	OR	97232	503-528-0506	Unspecified
SAFEWAY	13314 BOTHELL- EVERETT HWY	MILL CREEK	WA	98012	425-337-4805	Snohomish
SAFEWAY	10507 GRAVELLY LK DRIVE S.W.	TACOMA	WA	98499	253-581-7181	Pierce
SAFEWAY	15099 SE MCCLOUGHLIN BLVD	MILWAUKIE	OR	97267	503-652-5629	Unspecified
SAFEWAY	253 HIGH SCHOOL ROAD N.E.	BAINBRIDGE ISL.	WA	98110	206-842-0127	Kitsap
SAFEWAY	11919 N. JANTZEN	PORTLAND	OR	97217	503-247-7985	Unspecified

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Pharmacy Name	Address	City	State	Zip	Phone	County
	AVENUE					
SAFEWAY	301 WHITESELL STREET NW	ORTING	WA	98360	360-893-0843	Pierce
SAFEWAY	1455 EDGEWATER N.W.	SALEM	OR	97304	503-365-2174	Unspecified
SAFEWAY	21401 PACIFIC HWY SOUTH	DES MOINES	WA	98198	206-824-4784	King
SAFEWAY	8704 GREENWOOD AVENUE NORTH	SEATTLE	WA	98103	206-494-0440	King
SAFEWAY	408 N.E. 81ST	HAZEL DELL	WA	98665	360-574-8824	Clark
SAFEWAY	1541 N.E. 181 STREET	PORTLAND	OR	97230	503-665-2565	Unspecified
SAFEWAY	1227 15TH AVENUE	LONGVIEW	WA	98632	360-575-6606	Cowlitz
SAFEWAY	19651 HWY 2	MONROE	WA	98272	360-794-9644	Snohomish
SAFEWAY	1003 MEDFORD SHOPPING CENTER	MEDFORD	OR	97504	541-608-3686	Unspecified
SAFEWAY	6201 6TH AVENUE	TACOMA	WA	98406	253-566-9217	Pierce
SAFEWAY	955 NORTH MAIN	TILLAMOOK	OR	97141	503-842-2612	Unspecified
SAFEWAY	250 TIGARD PLAZA	TIGARD	OR	97223	503-639-5419	Unspecified
SAFEWAY	3080 148TH SE	BELLEVUE	WA	98007	425-643-1778	King
SAFEWAY #1600	300 BELLVUE WAY	AUBURN	WA	98001	425-749-3889	King
SAFEWAY #2637	411 THREE RIVERS DRIVE	KELSO	WA	98626	360-636-5430	Cowlitz
SAFEWAY #27-1978	2637 N. PEARL STREET	TACOMA	WA	98407	253-759-9271	Pierce
SAFEWAY #2734	10020 N.E. 137TH	KIRKLAND	WA	98033	425-821-0708	King
SAFEWAY PHARMACY	19715 HIGHWAY 99	LYNNWOOD	WA	98036	425-778-4862	Snohomish
SAFEWAY PHARMACY #0423	7340 35TH AVENUE NE	SEATTLE	WA	98115	206-494-1255	King
SAFEWAY PHARMACY #0502	5702 SUMMITVIEW AVENUE	YAKIMA	WA	98908	509-965-3870	Yakima
SAFEWAY PHARMACY #0534	3532 172ND ST NE	ARLINGTON	WA	98223		Snohomish

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Pharmacy Name	Address	City	State	Zip	Phone	County
SAFEWAY PHARMACY #1173	1243 MARVIN ROAD NE	OLYMPIA	WA	98516	360-252-2235	Thurston
SAFEWAY PHARMACY #1494	2507 W WELLESLEY AVENUE	SPOKANE	WA	99205	509-325-4396	Spokane
SAFEWAY PHARMACY #1624	735 NW GILMAN BLVD	ISSAQUAH	WA	98027	425-507-1042	King
SAFEWAY PHARMACY #1922	2709 E HIGHWAY 101	PORT ANGELES	WA	98362	360-457-7865	Clallam
SAFEWAY PHARMACY #1965	9262 RAINIER AVENUE S	SEATTLE	WA	98118	206-494-1130	King
SAFEWAY PHARMACY #2645	5802 134TH PLACE SOUTH EAST	EVERETT	WA	98208	425-332-6179	Snohomish
SAFEWAY PHARMACY #4313	904 W MAIN STREET	BATTLE GROUND	WA	98604	360-723-9046	Clark
SAV-ON PHARMACY #476	19881 STATE ROAD 2	MONROE	WA	98272		Snohomish
SEATTLE MEDS	1305 MADISON ST	SEATTLE	WA	98104	206-382-2087	King
SELAH SAVE ON FOODS PHARMACY #845	800 NORTH PARK CENTER	SELAH	WA	98942	509-697-6188	Yakima
SHIRAZ SPECIALTY PHARMACY	205 E CASINO ROAD #B-16	EVERETT	WA	98208	425-356-3276	Snohomish
SHOPKO PHARMACY #134	1450 S GRAND AVENUE	PULLMAN	WA	99163	509-332-0503	Whitman
SHOPKO PHARMACY #2073	2530 RUDKIN ROAD	UNION GAP	WA	98903	509-248-9567	Yakima
SIXTH AVENUE MEDICAL PHARMACY	508 W. 6TH AVENUE	SPOKANE	WA	99204	509-455-9345	Spokane
SMOKEY PT. FOOD PAVILION PHARMACY #90	17020 SMOKEY POINT BLVD.	ARLINGTON	WA	98223	360-658-7742	Snohomish

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Pharmacy Name	Address	City	State	Zip	Phone	County
SOUTH BEND PHARMACY	FIRST AND WILLAPA	SOUTH BEND	WA	98586	360-875-5757	Pacific
SOUTHSIDE FOOD PAVILION	3125 OLD FAIRHAVEN PARKWAY	BELLINGHAM	WA	98225	360-715-0642	Whatcom
SPOKANE FALLS FAMILY CLINIC PHARMACY	120 W. MISSION AVENUE	SPOKANE	WA	99201	509-323-8757	Spokane
SPOKANE HEALTH CARE ASSOC. INC #1169	1328 N. ASH STREET	SPOKANE	WA	99201	509-326-0306	Spokane
SUNSET COST CUTTER PHARMACY #448	1275 E. SUNSET DR.	BELLINGHAM	WA	98225	360-650-1537	Whatcom
SUPER 1 PHARMACY #30 - ROSAUERS	200 E. MOUNTAIN VIEW AVENUE	ELLENSBURG	WA	98926	509-962-7777	Kittitas
SUPER 1 PHARMACY #35	1250 N. HIGHWAY #395	COLVILLE	WA	99114	509-684-3151	Stevens
TACOMA MEDICAL CENTER PHARMACY (ND)	1206 S 11TH STREET #1	TACOMA	WA	98405	253-383-5359	Pierce
TARGET #0636	9770 N NEWPORT HIGHWAY	SPOKANE	WA	99218	509-466-7226	Spokane
TARGET T-0627	301 STRANDER BLVD	SEATTLE	WA	98188	206-394-2100	King
THE EVERETT CLINIC PHARMACY AT HARBOUR POINT	4410 106TH PLACE SW	MUKILTEO	WA	98275	425-493-6005	Snohomish
THE EVERETT CLINIC PHARMACY AT MARYSVILLE	4420 76TH STREET NE	MARYSVILLE	WA	98270	360-651-7410	Snohomish
THE MEDICINE SHOPPE	1210 E. MAIN AVENUE	PUYALLUP	WA	98372	253-848-1597	Pierce
THE MEDICINE	1121 W. COURT	PASCO	WA	99301	509-547-7537	Franklin

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Pharmacy Name	Address	City	State	Zip	Phone	County
SHOPPE	STREET					
THE MEDICINE SHOPPE	207 PROFESSIONAL WAY	SHELTON	WA	98584	360-426-4272	Mason
THE MEDICINE SHOPPE #106 (SAINT MARK)	207 PROFESSIONAL WAY	SHELTON	WA	98584	360-426-4272	Mason
THE MEDICINE SHOPPE #112 (SAINT MARK)	1327 W NORTHWEST BLVD	SPOKANE	WA	99205	509-327-1505	Spokane
THE MEDICINE SHOPPE #1788 (SAINT MARK)	11 E H ST. DEER PARK	DEER PARK	WA	99006	509-276-7653	Spokane
THE MEDICINE SHOPPE #261 (SAINT MARK)	1210 E MAIN	PUYALLUP	WA	98372	253-848-1597	Pierce
THE VANCOUVER CLINIC	501 SE 172ND AVENUE	VANCOUVER	WA	98684	360-397-3602	Clark
THE VANCOUVER CLINIC PHARMACY	700 NE 87TH AVENUE	VANCOUVER	WA	98664	360-397-3314	Clark
THE VANCOUVER CLINIC PHARMACY SALMON CREEK	2525 NE 139TH STREET #160	VANCOUVER	WA	98686	360-397-3880	Clark
THRIFTY PAYLESS DBA RITE AID PHARMACY 06462	27000 MILLER BAY ROAD, NE4	KINGSTON	WA	98346	360-297-5200	Kitsap
THRIFTY PAYLESS DBA RITE AID PHARMACY 6455	17615 140TH AVENUE S.E.	RENTON	WA	98058	425-204-1585	King
THRIFTY PAYLESS INC DBA RITE AID PHARMACY	3307 EVERGREEN BLVD STE #4	WASHOUGAL	WA	98671	360-335-9255	Clark
THRIFTY PAYLESS	8441 SE 68TH STREET	MERCER ISLAND	WA	98040	206-232-3000	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
INC DBA RITE AID PHARMACY						
THRIFTY PAYLESS INC DBA RITE AID PHARMACY	12 NORTH 9TH AVENUE	YAKIMA	WA	98902	509-452-2600	Yakima
TICK KLOCK DRUG STORE	109 S MAIN STREET.	COLFAX	WA	99111	509-397-2111	Whitman
TIMS PHARMACY & GIFT SHOP	106 1ST STREET S	YELM	WA	98597	360-458-8467	Thurston
TOP FOOD & DRUG #67	17641 GARDEN WAY NE	WOODINVILLE	WA	98072	425-398-6710	King
TOP FOOD & DRUG #75	1213 E. WISHKAH STREET	ABERDEEN	WA	98520	360-532-8742	Grays Harbor
TOP FOOD AND PHARMACY #21	1201 N 175TH STREET	SEATTLE	WA	98133	206-533-2861	King
TOP FOODS	757 S. HAGGEN DR.	BURLINGTON	WA	98233	360-814-1561	Skagit
TOP FOODS	411 THREE RIVERS DR.	KELSO	WA	98626	360-999-9999	Cowlitz
TOP FOODS #13	15751 NE 15TH ST.	BELLVUE	WA	98008	425-748-1361	King
TOP FOODS #17	1406 LAKE TAPPS PARKWAY E	AUBURN	WA	98092	253-876-1761	Pierce
TOP FOODS #27	1605 SE EVERETT MALL WAY	EVERETT	WA	98204	425-348-9214	Snohomish
TOP FOODS #29	1313 COOPER POINT RD.	OLYMPIA	WA	98502	360-754-1504	Thurston
TOP FOODS #33	10 GRANT RD.	WENATCHEE	WA	98802	509-884-7373	Douglas
TOP FOODS #35	2203 SOUTH 1ST ST.	YAKIMA	WA	98903	509-452-0840	Yakima
TOP FOODS #39	31515 20TH AVE. S.	FEDERAL WAY	WA	98003	253-839-9322	King
TOP FOODS #41	3130 S. 23RD. ST.	TACOMA	WA	98405	253-591-3110	Pierce
TOP FOODS #45	21900 HWY 99	EDMONDS	WA	98026	425-672-1520	Snohomish
TOP FOODS #47	201 37TH AVE. SE	PUYALLUP	WA	98374	253-770-7720	Pierce
TOP FOODS #49	5600 MARTIN WAY	LACEY	WA	98516	360-923-2020	Thurston
TOP FOODS #51	26015 104TH AVE SE	KENT	WA	98031	253-850-6480	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
TOP FOODS #57	1301 AVENUE D	SNOHOMISH	WA	98290	360-568-5154	Snohomish
TOP FOODS #65	1702 AUBURN WAY NORTH	AUBURN	WA	98009	253-804-9616	King
TWIN HARBOR DRUG	723N MONTESANO STREET	WESTPORT	WA	98595	360-268-0116	Grays Harbor
U & I PHARMACY	29 148TH AVE. SE	BELLEVUE	WA	98006	425-747-3800	King
UW MEDICAL CENTER PHARMACY	1959 NE PACIFIC ST - BOX 356015	SEATTLE	WA	98195	206-598-3754	King
VALLEY VIEW CLINICAL PHARMACISTS	14692 179TH AVE. SE #200	MONROE	WA	98272	360-794-5555	Snohomish
VALU DRUG	201 PIONEER AVE #E	MONTESANO	WA	98563	360-249-4444	Grays Harbor
VILLAGE PHARMACY	815 FRONT STREET	LEAVENWORTH	WA	98826	509-548-7622	Chelan
VM BUCK PAVILION PHARMACY	1100 NINTH AVENUE	SEATTLE	WA	98101	206-223-6877	King
WALGREEN	222 PIKE ST.	SEATTLE	WA	98101	206-903-8392	King
WALGREEN	12315 N DIVISION STREET	SPOKANE	WA	99218	509-466-7461	Spokane
WALGREEN #09590	5602 PACIFIC AVENUE	TACOMA	WA	98408	253-203-0074	Pierce
WALGREEN #09113	4000 W. 27TH AVENUE	KENNEWICK	WA	99337	509-582-7781	Benton
WALGREEN #09379	8511 NE 162ND AVENUE	VANCOUVER	WA	98682	360-597-0123	Clark
WALGREEN #6258	11607 98TH AVENUE N.E.	KIRKLAND	WA	98034	425-825-8841	King
WALGREEN #7677	1502 LAKE TAPPS PKWY	AUBURN	WA	98092	253-394-0019	King
Walgreen Drug Stor #02948	12 E. EMPIRE AVE.	Spokane	WA	99207	509-325-0781	Spokane
Walgreen Drug Stor #03514	9505 Bridgeport Way, S.W.	Tacoma	WA	98499	253-582-2230	Pierce
Walgreen Drug Stor #03515	8701 Greenwood Ave., N.	Seattle	WA	98103	206-706-9140	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
Walgreen Drug Stor #03518	25605 104th Ave., S.E.	Kent	WA	98031	253-813-6968	King
Walgreen Drug Stor #03519	4315 6th Ave.	Tacoma	WA	98406	253-756-5159	Pierce
Walgreen Drug Stor #03581	8405 Pacific Ave.	Tacoma	WA	98444	253-536-3778	Pierce
Walgreen Drug Stor #03582	14352 Lake City Way, N.E.	Seattle	WA	98125	206-361-9753	King
Walgreen Drug Stor #03604	5409 15th Ave., N.W.	Seattle	WA	98107	206-781-0056	King
Walgreen Drug Stor #03632	2400 S. Jackson St.	Seattle	WA	98144	206-329-6850	King
Walgreen Drug Stor #03662	647 140th Ave., N.E.	Bellevue	WA	98005	425-603-1438	King
Walgreen Drug Stor #03723	7451 Cirque Dr., W.	University Pla	WA	98467	253-564-7569	Pierce
Walgreen Drug Stor #03733	7707 S.E. 27th St.	Mercer Island	WA	98040	206-232-1864	King
Walgreen Drug Stor #03765	20725 Highway 99	Lynnwood	WA	98036	425-712-0512	Snohomish
Walgreen Drug Stor #03788	14510 Aurora Ave., N.	Shoreline	WA	98133	206-361-8826	King
Walgreen Drug Stor #03840	14656 Ambaum Blvd., S.W.	Burien	WA	98166	206-901-1816	King
Walgreen Drug Stor #04064	8224 Steilacoom Blvd., S.W.	Lakewood	WA	98498	253-581-0494	Pierce
Walgreen Drug Stor #04156	12405 N.E. 85th St.	Kirkland	WA	98033	425-822-9202	King
Walgreen Drug Stor #04157	859 N.E. Northgate Way	Seattle	WA	98125	206-417-0520	King
Walgreen Drug Stor #04476	2702 N ARGONNE ROAD	MILLWOOD	WA	99206	509-892-1637	Spokane

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Pharmacy Name	Address	City	State	Zip	Phone	County
Walgreen Drug Stor #04627	275 Rainer Ave., S.	Renton	WA	98055	425-277-0212	King
Walgreen Drug Stor #04730	13110 Bothelle Everett Hwy.	Everett	WA	98208	425-379-7274	Snohomish
Walgreen Drug Stor #04759	17518 15th Ave., N.E.	Shoreline	WA	98155	206-361-7474	King
Walgreen Drug Stor #04760	12105 Pacific Ave., S.	Tacoma	WA	98444	253-535-9302	Pierce
Walgreen Drug Stor #04898	6330 35th Ave., S.W.	Seattle	WA	98126	206-938-2759	King
Walgreen Drug Stor #05150	3737 Pacific Ave.	Tacoma	WA	98418	253-473-5215	Pierce
Walgreen Drug Stor #05571	1510 Cooper Point Rd., S.W.	Olympia	WA	98502	360-570-8008	Thurston
Walgreen Drug Stor #05598	6807 Evergreen Way	Everett	WA	98203	425-438-9380	Snohomish
Walgreen Drug Stor #05697	15225 Pacific Ave., S.	Spanaway	WA	98444	253-538-6916	Pierce
Walgreen Drug Stor #05698	3099 Bethel Rd., S.E.	Port Orchard	WA	98366	360-876-5212	Kitsap
Walgreen Drug Stor #05816	9812 N.E. Highway 99	Vancouver	WA	98665	360-576-4902	Clark
Walgreen Drug Stor #05817	1708 W. Northwest Blvd.	Spokane	WA	99205	509-323-0309	Spokane
Walgreen Drug Stor #05818	2105 E. Wellesley Ave.	Spokane	WA	99207	509-483-0342	Spokane
Walgreen Drug Stor #05911	4090 Guide Meridian	Bellingham	WA	98226	360-734-0229	Whatcom
Walgreen Drug Stor #05912	3333 Wheaton Way	Bremerton	WA	98310	360-782-0907	Kitsap
Walgreen Drug Stor #05913	7905 Division St.	Spokane	WA	99028	509-467-8361	Spokane

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Pharmacy Name	Address	City	State	Zip	Phone	County
Walgreen Drug Stor #05914	15510 E. Sprague Ave.	Verdale	WA	99037	509-91-0735	Spokane
Walgreen Drug Stor #05950	4412 Rainier Ave., S.	Seattle	WA	98118	206-760-7880	King
Walgreen Drug Stor #06083	4540 Lacey Blvd., S.E.	Lacey	WA	98503	360-438-2353	Thurston
Walgreen Drug Stor #06304	27112 132nd Ave., S.E.	Kent	WA	98042	253-638-3324	King
Walgreen Drug Stor #06307	10200 Mukilteo Speedway	Mukilteo	WA	98275	425-315-9213	Snohomish
Walgreen Drug Stor #06423	6432 State Highway 303, N.E	Bremerton	WA	98311	360-307-8741	Kitsap
WALGREENS	11718 MERIDIAN E.	PUYALLUP	WA	98373	253-770-6484	Pierce
WALGREENS	9701 SILVERDALE WAY	SILVERDALE	WA	98383	360-692-7536	Kitsap
WALGREENS	1416 HARVEY RD	AUBURN	WA	98002	253-394-0022	King
WALGREENS	8500 15TH AVE. N.E.	SEATTLE	WA	98115	206-706-5210	King
WALGREENS	20812 BOTHELL EVERETT HWY	BOTHELL	WA	98021	425-398-0204	Snohomish
WALGREENS	9714 E MILL PLAIN BLVD	VANCOUVER	WA	98664	360-253-7254	Clark
WALGREENS	6300 E. LAKE SAMMONISH PKWY	ISSAQUAH	WA	98029	425-369-0265	King
WALGREENS	8333 MARTIN WAY EAST	LACEY	WA	98516	360-455-0029	Thurston
WALGREENS	11216 4TH AVE WEST	EVERETT	WA	98204	425-355-9940	Snohomish
WALGREENS	808 W. MAIN STREET	BATTLE GROUND	WA	98604	360-687-5136	Clark
WALGREENS	3540 PEARL ST.	TACOMA	WA	98407	253-759-2378	Pierce
WALGREENS	16824 HIGHWAY 99	LYNNWOOD	WA	98037	425-741-4302	Snohomish
WALGREENS	1070 E. SUNSET DR.	BELLINGHAM	WA	98226	360-647-2713	Whatcom
WALGREENS	1905 SE 164TH ST.	VANCOUVER	WA	98683	360-885-2938	Clark
WALGREENS	500 15TH AVE	SEATTLE	WA	98112	206-709-4569	King
WALGREENS	3011 NE SUNSET BLVD	RENTON	WA	98056	425-207-0053	King

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Pharmacy Name	Address	City	State	Zip	Phone	County
WALGREENS	11532 CANYON ROAD, EAST	PUYALLUP	WA	98373	253-539-4165	Pierce
WALGREENS #6260	729 MERIDIAN AVE., E.	EDGEWOOD	WA	98371	253-927-3380	Pierce
WALGREENS #01078	2005 W. COURT STREET	PASCO	WA	99301	509-545-4391	Franklin
WALGREENS #01085	3328 NE 3RD AVENUE	CAMAS	WA	98607	360-835-3303	Clark
WALGREENS #01086	13009 NE HWY 99	VANCOUVER	WA	98686	360-574-0914	Clark
WALGREENS #01089	13503 SE MILL PLAIN BLVD	VANCOUVER	WA	98684	360-256-9875	Clark
WALGREENS #01090	1900-C NE 162ND AVENUE	VANCOUVER	WA	98684	360-891-1809	Clark
WALGREENS #01091	3009 NE 72ND DRIVE	VANCOUVER	WA	98661	360-256-1503	Clark
WALGREENS #01093	2521 MAIN STREET	VANCOUVER	WA	98660	360-693-2524	Clark
WALGREENS #01993	12306 E. SPRAGUE AVE.	SPOKANE	WA	99216	509-921-0659	Spokane
WALGREENS #02647	200 E BROADWAY AVENUE	MOSES LAKE	WA	98837	509-765-1217	Grant
WALGREENS #02670	1050 N MILLER STREET	WENATCHEE	WA	98801	509-665-7539	Chelan
WALGREENS #06590	1531 BROADWAY	SEATTLE	WA	98122	206-204-0599	King
WALGREENS #06814	10302 SUNRISE BLVD E	PUYALLUP	WA	98374	253-604-1013	Pierce
WALGREENS #06901	28817 MILITARY ROAD SOUTH	FEDERAL WAY	WA	98003	253-839-1027	King
WALGREENS #07137	2650 BRIDGEPORT WAY W	UNIVERSITY PLACE	WA	98466	253-564-0351	Pierce
WALGREENS	22320 MERIDIAN	GRAHAM	WA	98338	253-875-1824	Pierce

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Pharmacy Name	Address	City	State	Zip	Phone	County
#07173	STREET					
WALGREENS #07352	1205 NE 50TH STREET	SEATTLE	WA	98105	206-204-0145	King
WALGREENS #07480	1701 AUBURN WAY S	AUBURN	WA	98002	253-394-0029	King
WALGREENS #07570	2205 BROADWAY	EVERETT	WA	98201	425-252-5213	Snohomish
WALGREENS #07700	34008 HOYT RD SW	FEDERAL WAY	WA	98023	253-838-5963	King
WALGREENS #07782	1901 MAIN STREET	FERNDALE	WA	98248	360-384-7658	Whatcom
WALGREENS #07908	27130 172ND AVENUE SE	COVINGTON	WA	98042	253-630-6791	King
WALGREENS #09380	6105 NE 114TH AVENUE	VANCOUVER	WA	98662	360-254-3848	Clark
WALGREENS #09423	23003 PACIFIC HWY S	SEATTLE	WA	98198	206-870-1832	King
WALGREENS #09765	5506 RD. 68	PASCO	WA	99301	509-547-1789	Franklin
WALGREENS #09812	2939 OCEAN BEACH HWY	LONGVIEW	WA	98632	360-232-1021	Cowlitz
WALGREENS #09911	4001 SUMMITVIEW AVENUE SUITE 1	YAKIMA	WA	98908	509-972-2986	Yakima
WALGREENS #10107	633 W TIETAN STREET	WALLA WALLA	WA	99362	509-529-1570	Walla Walla
WALGREENS #10395	1610 NW LOUISIANA AVENUE	CHEHALIS	WA	98532	360-740-1876	Lewis
WALGREENS #10478	1601 GEORGE WASHINGTON WAY	WEST RICHLAND	WA	99353	509-943-2605	Benton
WALGREENS #10788	1502 N LIBERTY LAKE RD	LIBERTY LAKE	WA	99019	509-570-0485	Spokane
WALGREENS	490 W WASHINGTON	SEQUIM	WA	98382	360-681-2018	Clallam

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Pharmacy Name	Address	City	State	Zip	Phone	County
#10926	STREET					
WALGREENS #10946	2830 S. GRAND AVE.	Spokane	WA	99202	509-455-3736	Spokane
WALGREENS #10994	320 HARRISON STREET	SEDRO WOOLLEY	WA	98284	360-855-0735	Skagit
WALGREENS #10995	3716 S 144TH STREET	TUKWILA	WA	98168	206-204-1284	King
WALGREENS #11214	31490 STATE ROUTE 20	OAK HARBOR	WA	98277	360-675-3497	Island
WALGREENS #11215	932 E FRONT STREET	PORT ANGELES	WA	98362	360-457-4456	Clallam
WALGREENS #11300	623 S BURLINGTON BLVD	BURLINGTON	WA	98233	360-707-2741	Skagit
WALGREENS #11527	2024 6TH AVENUE	TACOMA	WA	98403	253-272-2311	Pierce
WALGREENS #11635	6708 NE63RD STREET	VANCOUVER	WA	98661	360-696-0759	Clark
WALGREENS #11856	566 DENNY WAY	SEATTLE	WA	98109	206-204-1982	King
WALGREENS #12053	6400 W NOB HILL BOULEVARD	YAKIMA	WA	98908	509-965-0541	Yakima
WALGREENS #12168	3929 KITSAP WAY	BREMERTON	WA	98312	360-917-1041	Kitsap
WALGREENS #12275	610 W YAKIMA AVENUE	YAKIMA	WA	98902	509-469-0246	Yakima
WALGREENS #12497	4105 NE 4TH STREET	RENTON	WA	98059	425-207-1278	King
WALGREENS #12910	4840 BORGEN BOULEVARD NW	GIG HARBOR	WA	98332	254-853-9340	Pierce
WALGREENS #12933	718 91ST AVENUE NE	LAKE STEVENS	WA	98258	425-334-1523	Snohomish
WALGREENS	800 SWIFT	RICHLAND	WA	99352	509-943-9121	Benton

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Pharmacy Name	Address	City	State	Zip	Phone	County
#13128	BOULEVARD #160					
WALGREENS #13768	1200 N 14TH AVENUE #100	PASCO	WA	99301	509-547-1220	Franklin
WALGREENS #13769	400 E 5TH AVENUE	SPOKANE	WA	99202	509-838-0175	Spokane
WALGREENS #13967	1135 116TH AVENUE NE #105	BELLEVUE	WA	98004	425-453-1130	King
WALGREENS #6259	9456 16TH AVE. S.W.	SEATTLE	WA	98106	206-767-2294	King
WALGREENS #6302	16423 LARCH WAY	LYNNWOOD	WA	98037	425-741-8283	Snohomish
WALGREENS #7131	909 17TH ST	ANACORTES	WA	98221	360-299-2816	Skagit
WALGREENS 09373	17524 AURORA AVENUE N	SHORELINE	WA	98133	206-542-4964	King
WALGREENS 09596	585 GAGE BLVD	RICHLAND	WA	99352	509-628-3629	Benton
WALGREENS 10195	2800 W CLEARWATER AVENUE	KENNEWICK	WA	99336	509-783-5412	Benton
WALGREENS PHARMACY #10304	14308 MERIDIAN AVENUE E	PUYALLUP	WA	98374	253-604-1051	Pierce
WENATCHEE CLINIC PHARMACY	820 N. CHELAM AVENUE	WENATCHEE	WA	98807	509-662-5801	Chelan
WENATCHEE FOOD PAVILION	149 EASY STREET	WENATCHEE	WA	98801	509-665-0269	Chelan
WHITE CENTER PHARMACY	9601 16TH AVENUE SW	SEATTLE	WA	98106	206-763-2500	King
WIND RIVER PHARMACY (HI-SCHOOL PHARMACY)	280 2ND STREET	STEVENSON	WA	98648	509-427-5480	Skamania
WOODINVILLE PHARMACY INC	17000 140TH AVENUE NE #E101	WOODINVILLE	WA	98072	425-485-2900	King
WRAY*S MEADOWBROOK PHARMACY	7200 W. NOB HILL BLVD #1	YAKIMA	WA	98908	509-966-0202	Yakima

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WA Statewide Pharmacy Network**

Pharmacy Name	Address	City	State	Zip	Phone	County
WSU HEALTH & WELLNESS SERVICES PHARMACY	1125 SE WASHINGTON STREET	PULLMAN	WA	99164	509-335-5742	Whitman
YAKIMA VALLEY FARM WORKERS CLINIC PHARMACY	1000 WALLACE WAY	GRANDVIEW	WA	98930	509-882-3355	Yakima
YAKIMA VALLEY FARM WORKERS CLINIC PHARMACY	518 W. FIRST AVENUE	TOPPENISH	WA	98948	509-865-3355	Yakima
YAKIMA VALLEY FARM WORKERS CLINIC PHARMACY	602 E NOB HILL BOULEVARD	YAKIMA	WA	98901	509-452-9325	Yakima
YAUGER PARK PAHRAMCY	400 YAUGER WAY SW, SUITE B	OLYMPIA	WA	98502	360-357-3371	Thurston
YOKES #10	14202 NORTH MARKET STREET	MEAD	WA	99021	509-242-0201	Spokane
YOKES #3	210 E. NORTH FOOTHILLS DR.	SPOKANE	WA	99207	509-325-6933	Spokane
YOKES #7	810 S. MAIN ST.	DEER PARK	WA	99006	509-276-2939	Spokane
YOKES #8	12825 W. 14TH	ARWAY HEIGHTS	WA	99001	509-244-5822	Spokane
YOKES #9	3321 W. INDIAN TRAIL RD.	SPOKANE	WA	99208	509-325-8720	Spokane

GENERAL TERMS AND CONDITIONS**I. GENERAL TERMS (DEFINITIONS)**

As used throughout this contract, the following terms shall have the meanings set forth below:

- a) "Allowable Cost" shall mean an expenditure which meets the test of the appropriate OMB Circular (see "III. Federal Compliance"). The most significant factors affecting allowability of cost are; 1) they must be necessary and reasonable, 2) they must be allocable, 3) they must be authorized or not prohibited under state or local laws and regulations, and 4) they must be adequately documented.
- b) "Client" shall mean an agency, firm, organization, individual or other entity applying for or receiving services under this contract.
- c) "Cognizant State Agency" shall mean the state agency from whom the sub-recipient receives federal financial assistance. If funds are received from more than one state agency, the cognizant state agency shall be the agency who contributes the largest portion of federal financial assistance to the sub-recipient, unless a cognizant state agency has been designated by OFM.
- d) "Confidential Information " shall mean information that is exempt from disclosure under chapter 42.56 RCW, and other state or federal statutes and regulations
- e) "Contractor" shall mean that agency, firm, provider, organization, individual or other entity performing services under this contract. It shall include any subcontractor retained by the prime contractor as permitted under the terms of this agreement.
- f) "Contracting Officer" shall mean that individual(s) of the Office of Contract Services of DOH and his/her delegates within that office authorized to execute this agreement on behalf of the Department.
- g) "Department" shall mean the Department of Health (DOH) of the State of Washington, any division, section, office, unit or other entity of the department, or any of the officers or other officials lawfully representing the department.
- h) "Equipment" shall mean an article of non-expendable, tangible property having a useful life of more than one year and an acquisition cost of \$5,000 or more.
- i) "Personal Information" means information identifiable to any person, including, but not limited to, information that relates to a person's name, health, finances, education, business, use or receipt of governmental services or other activities, addresses, telephone numbers, social security numbers, driver license numbers, other identifying numbers, and any financial identifiers. Personal information includes "protected health information" as set forth in 45 CFR § 164.50 as currently drafted and subsequently amended or revised and any other information that may be exempt from disclosure to the public or other unauthorized persons under either chapter 42.56 RCW or other state and federal statutes.
- j) "Reimbursement" shall mean that the Department of Health will repay the Contractor for allowable costs incurred under the terms of this contract.
- k) "Sensitive Data" means data that is held confidentially, and if compromised may cause harm to individual citizens or create a liability for the State

- l) "Subcontractor" shall mean a person, partnership, or company, not in the employ of or owned by the contractor, who is performing all or part of those services under a separate contract with or on behalf of the Contractor. The terms "subcontractor" and "subcontractors" mean subcontractor(s) in any tier. See OMB Circular A-133 for additional detail.
- m) A "Subrecipient" is a contractor operating a federal or state assistance program receiving federal funds and having the authority to determine both the services rendered and disposition of program. See OMB Circular A-133 for additional detail.
- n) "Successor" is defined as any entity which, through amalgamation, consolidation, or other legal succession becomes invested with rights and assumes burdens of the first contractor/ vendor.
- o) A "Vendor" is an entity that agrees to provide the amount and kind of services requested by DOH; provides services under the contract only to those beneficiaries individually determined to be eligible by DOH; and, provides services on a fee-for-service or per-unit basis with contractual penalties if the entity fails to meet program performance standards. See OMB Circular A-133 for additional detail.

II. GENERAL CONDITIONS

1. **ACCESS TO DATA** - In compliance with chapter 39.29 RCW, the Contractor shall provide access to data generated under this contract to DOH, the Joint Legislative Audit and Review Committee, and the State Auditor at no additional cost. This includes access to all information that supports the findings, conclusions, and recommendations of the Contractor's reports, including computer models and methodology for those models. The Contractor agrees to make personal information covered under this agreement available to DOH for inspection or to amend the personal information, as directed by DOH. Contractor shall, as directed by DOH, incorporate any amendments to the personal information into all copies of such personal information maintained by the Contractor or its subcontractors.
2. **ADVANCE PAYMENTS PROHIBITED** - No payment in advance or in anticipation of services or supplies to be provided under this agreement shall be made by DOH.
3. **AMENDMENTS** – This contract may be amended by mutual written agreement of the parties. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind each of the parties.
4. **AMERICANS WITH DISABILITIES ACT (ADA) OF 1990, PUBLIC LAW 101-336, also referred to as the "ADA" 28 CFR Part 35** - The Contractor must comply with the ADA, which provides comprehensive civil rights protection to individuals with disabilities in the areas of employment, public accommodations, state and local government services, and telecommunications.
5. **ASSIGNABILITY** – Neither this contract nor any claim arising under this contract shall be transferred or assigned by the contractor without prior written consent of DOH.
6. **ATTORNEYS' FEES** – In the event of litigation or other action brought to enforce contract terms, each party agrees to bear its own attorney's fees and costs.
7. **CHANGE IN STATUS** - In the event of substantive change in the legal status, organizational structure, or fiscal reporting responsibility of the Contractor, Contractor agrees to notify DOH

of the change. Contractor shall provide notice as soon as practicable, but no later than thirty days after such a change takes effect.

- 8. CONFIDENTIALITY/SAFEGUARDING OF INFORMATION** - The use or disclosure by any party, either verbally or in writing, of any Confidential Information shall be subject to Chapter 42.56 RCW and Chapter 70.02 RCW, as well as other applicable federal and state laws and administrative rules governing confidentiality. Specifically, the Contractor agrees to limit access to Confidential Information to the minimum amount of information necessary, to the fewest number of people, for the least amount of time required to do the work. The obligations set forth in this clause shall survive completion, cancellation, expiration, or termination of this Agreement.

A. Notification of Confidentiality Breach

Upon a breach or suspected breach of confidentiality, the Contractor shall immediately notify the DOH Privacy Officer. For the purposes of this Agreement, "immediately" shall mean within one calendar day.

The contractor will take steps necessary to mitigate any known harmful effects of such unauthorized access including, but not limited to sanctioning employees, notifying subjects, and taking steps necessary to stop further unauthorized access. The Contractor agrees to indemnify and hold harmless Agency for any damages related to unauthorized use or disclosure by the Contractor, its officers, directors, employees, Subcontractors or agents.

Any breach of this clause may result in termination of the contract and the demand for return of all Information.

B. Subsequent Disclosure

The Contractor will not release, divulge, publish, transfer, sell, disclose, or otherwise make the Confidential Information known to any other entity or person without the express prior written consent of the Secretary of Health, or as required by law.

If responding to public record disclosure requests under RCW 42.56, the Contractor agrees to notify and discuss with the DOH Privacy Officer requests for all information that are part of this Agreement, prior to disclosing the information. DOH will provide to the Contractor the name and contact information for the DOH Privacy Officer. The Contractor further agrees to provide DOH a minimum of two calendar weeks to initiate legal action to secure a protective order under RCW 42.56.540.

- 9. CONFLICT OF INTEREST** - Notwithstanding any determination by the Executive Ethics Board or other tribunal, DOH may, in its sole discretion, by written notice to the Contractor, terminate this contract if it is found, after due notice and examination by DOH or its agent that there is a violation of the ethics in public service act, chapter 42.52 RCW, or any similar statute involving the contractor in the procurement of, or performance of this contract.

In the event this contract is terminated as provided above, DOH shall be entitled to pursue the same remedies against the Contractor as it could pursue in the event of a breach of the contract by the Contractor. The rights and remedies of DOH provided for in this section shall not be exclusive are in addition to any other rights and remedies provided by law. The

existence of facts upon which DOH makes a determination under this section shall be an issue and may be reviewed as provided in the “disputes” section of this contract.

10. COVENANT AGAINST CONTINGENT FEES – The Contractor warrants that no person or selling agent has been employed or retained to solicit or secure this contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, excepting bona fide employees or bona fide established agents maintained by the Contractor for the purpose of securing business. DOH shall have the right, in the event of breach of this clause by the Contractor, to annul this contract without liability, or in its discretion, to deduct from the contract price or consideration or recover by other means the full amount of such commission, percentage, brokerage or contingent fee.

11. DEBARMENT – The Contractor, by signature to this contract, certifies that the Contractor is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded in any Federal department or agency from participating in transactions. The Contractor agrees to include the above requirement in all subcontracts into which it enters to complete this contract.

12. DISPUTES – The parties shall use their best, good faith efforts to cooperatively resolve disputes and problems that arise in connection with this contract. Both parties will continue without delay to carry out their respective responsibilities under this contract while attempting to resolve the dispute under this section. When a genuine dispute arises between DOH and the Contractor regarding the terms of this agreement or the responsibilities imposed herein which cannot be resolved at the project management level, either party may submit a request for a dispute resolution to the DOH Contracts Unit which shall oversee the following dispute resolution process: DOH shall appoint a representative to a dispute panel; the Contractor shall appoint a representative to the dispute panel; DOH’s and Contractor’s representatives shall mutually agree on a third person to chair the dispute panel. The dispute panel shall thereafter decide the dispute with the majority prevailing.

A party's request for a dispute resolution must:

- be in writing,
- state the disputed issues,
- state the relative positions of the parties,
- state the Contractor's name, address, and his/her department contract number,
- be mailed to ATTN: Contracts and Procurement Manager, DOH Contracts Unit, PO Box 47905, Olympia, WA 98504-7905 within thirty (30) calendar days after the party could reasonably be expected to have knowledge of the issue which he/she now disputes.

This dispute resolution process constitutes the sole administrative remedy available under this contract. The parties agree that this resolution process shall precede any action in a judicial and quasi-judicial tribunal.

13. EFFECTIVE DATE – Unless otherwise specified under period of performance, the effective date of this agreement and subsequent amendments, if any, is the date of execution. The date of execution is the last date of signature of the parties to the agreement. No billable activity may take place prior to the date of execution. Contractor assumes all liability for any expenses incurred prior to the date of execution or in the event the agreement/amendment is not executed.

14. GOVERNING LAW - This contract shall be governed by the laws of the state of Washington and applicable federal laws and regulations. The venue of any legal action or suit concerning this agreement shall be the Thurston County Superior Court and all actions or suits thereon shall be brought therein.

15. INDEMNIFICATION - To the fullest extent permitted by law, the Contractor shall indemnify, defend, and hold harmless the state of Washington, DOH, and all officials, agents and employees of the State, from and against all claims for injuries and death arising out of or resulting from the performance of the contract. Contractor's obligation to indemnify, defend and hold harmless includes any claim by Contractors agents, employees, representatives, or any subcontractor or its employees.

Contractor expressly agrees to indemnify, defend, and hold harmless the State for any claim arising out of or incident to Contractor's or any subcontractor's performance or failure to perform the contract. Contractor's obligation to indemnify, defend, and hold harmless the State shall not be eliminated or reduced by any actual or alleged concurrent negligence of State or its agents, agencies, employees and officials.

Contractor waives its immunity under Title 51 RCW to the extent it is required to indemnify, defend and hold harmless State and its agencies, officials, agents or employees.

16. INDEPENDENT CAPACITY OF THE CONTRACTOR – The parties intend that an independent contractor relationship will be created BY this contract. The Contractor and his or her employees or agents performing under the contract are not employees or agents of DOH. The contractor shall not hold himself/herself out as nor claim to be an officer or employee of DOH or of the state of Washington by reason hereof, nor will the Contractor make any claim of right, privilege or benefit which would accrue to such employee under law. Conduct and control of the work will be solely with the Contractor.

17. INDUSTRIAL INSURANCE COVERAGE – The Contractor shall comply with the provisions of Title 51 RCW, Industrial Insurance. Prior to performing work under this contract, the Contractor shall provide or purchase industrial insurance coverage for the Contractor's employees, as may be required of an "employer" as defined in Title 51 RCW, and shall maintain full compliance with Title 51RCW during the course of this contract. If the Contractor fails to provide industrial insurance coverage or fails to pay premiums or penalties on behalf of its employees as may be required by law, DOH may collect from the Contractor the full amount payable to the Industrial Insurance accident fund. DOH may deduct the amount owed by the Contractor to the accident fund from the amount payable to the Contractor by DOH under this contract, and transmit the deducted amount to the Department of Labor and Industries, Division of Insurance Services. This provision does not waive any of the Department of Labor and Industries rights to collect from the Contractor.

Industrial insurance coverage through the Department of Labor & Industries is optional for sole proprietors, partners, corporate officers and others, per RCW 51.12.020.

18. INSURANCE - The Contractor shall provide insurance coverage as set out in this section. The intent of the required insurance is to protect the State should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Contractor or subcontractor, or agents of either, while performing under the terms of this contract.

The Contractor shall provide insurance coverage which shall be maintained in full force and effect during the term of this Contract, as follows:

- A. Commercial General Liability Insurance Policy - Provide a commercial general liability insurance policy, including contractual liability, in adequate quantity to protect against legal liability arising out of contract activity but no less than \$1,000,000 per occurrence. Additionally, the Contractor is responsible for ensuring that any subcontractors provide adequate insurance coverage for the activities arising out of subcontracts.
- B. Automobile Liability. In the event that services delivered pursuant to this contract involve the use of vehicles, either owned or unowned by the Contractor, automobile liability insurance shall be required. The minimum limit for automobile liability is:
 1. \$1,000,000 per occurrence, using a combined single limit for bodily injury and property damage
- C. The insurance required shall be issued by an insurance company/ies authorized to do business within the state of Washington, and shall name the state of Washington, its agents and employees as additional insureds under the insurance policy/ies. All policies shall be primary to any other valid and collectable insurance. Contractor shall instruct the insurers to give DOH 30 days advance notice of any insurance cancellation.

Upon request, Contractor shall submit to DOH, a certificate of insurance which outlines the coverage and limits defined in the *Insurance* section. If a certificate of insurance is requested, Contractor shall submit renewal certificates as appropriate during the term of the contract.

19. LICENSING, ACCREDITATION AND REGISTRATION - The Contractor shall comply with all applicable local, state, and federal licensing, accreditation and registration requirements/standards, necessary for the performance of this contract.

20. LIMITATION OF AUTHORITY - Only the Contracting Officer or his/her delegate by writing (delegation to be made prior to action) shall have the express, implied, or apparent authority to alter, amend, modify, or waive any clause or condition of this contract on behalf of DOH. No alteration, modification, or waiver of any clause or condition of this contract is effective or binding unless made in writing and signed by the Contracting Officer.

21. NONDISCRIMINATION -- During the performance of this contract, the Contractor shall comply with all federal and state nondiscrimination laws, regulations and policies.

22. NONDISCRIMINATION LAWS NONCOMPLIANCE - In the event of the Contractor's noncompliance or refusal to comply with any nondiscrimination law, regulation, or policy, this contract may be rescinded, canceled or terminated in whole or in part, and the Contractor may be declared ineligible for further contracts with DOH. The Contractor shall, however, be given a reasonable time in which to cure this noncompliance. Any dispute may be resolved in accordance with the disputes procedure set forth herein.

23. OVERPAYMENTS AND ASSERTION OF LIEN - In the event that DOH establishes overpayments or erroneous payments made to the Contractor under this contract, DOH may secure repayment, plus interest, if any, through the filing of a lien against the Contractor's real property, or by requiring the posting of a bond, assignment or deposit, or some other form of security acceptable to DOH, or by doing both.

24. PRIVACY - Personal information including, but not limited to "protected health information" collected, used or acquired in connection with this contract shall be used solely for the

purposes of this contract. Contractor and its subcontractors agree not to release, divulge, publish, transfer, sell or otherwise make known to unauthorized persons personal information without the express written consent of DOH or as provided by law. Contractor agrees to implement physical, electronic and managerial safeguards to prevent unauthorized access to personal information.

The DOH reserves the right to monitor, audit, or investigate the use of personal information collected, used or acquired by the contractor through this contract. The monitoring, auditing, or investigating may include but is not limited to "salting" by DOH. Contractor shall certify the return or destruction of all personal information upon expiration of this contract. Salting is the act of placing a record containing unique but false information in a database that can be used later to identify inappropriate disclosure of data contained in the database.

Any breach of this provision may result in termination of the contract and the demand for return of all personal information. The contractor agrees to indemnify and hold harmless DOH for any damages related to the contractor's unauthorized use of personal information.

For the purposes of this provision, personal information includes but is not limited to information identifiable to an individual that relates to a natural person's health, finances, education, business, use or receipt of governmental services, or other activities, names, addresses, telephone numbers, social security numbers, driver license numbers, financial profiles, credit card numbers, financial identifiers and other identifying numbers.

25. PUBLICITY - The Contractor agrees to submit to DOH all advertising and publicity matters relating to this Contract wherein DOH's name is mentioned or language used from which the connection of DOH's name may, in DOH's judgment, be inferred or implied. The Contractor agrees not to publish or use such advertising and publicity matters without the prior written consent of DOH.

26. RECORDS, DOCUMENTS, AND REPORTS - The Contractor shall maintain books, records, documents, data and other evidence relating to this contract and performance of the services described herein, including but not limited to accounting procedures and practices which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this contract. Contractor shall retain such records for a period of six (6) years following the date of final payment. At no additional cost, these records, including materials generated under the contract, shall be subject at all reasonable times to inspection, review or audit by DOH, personnel duly authorized by DOH, the office of the state auditor, and federal and state officials so authorized by law, regulation or agreement.

If the contract reimburses the Contractor for costs incurred in performance, the Contractor shall in addition maintain books, records, documents and other evidence of procedures and practices which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this agreement.

If any litigation, claim or audit is started before the expiration of the six (6) year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved.

27. REGISTRATION WITH DEPARTMENT OF REVENUE - The Contractor shall complete registration with the Washington State Department of Revenue, if applicable, and be responsible for payment of all taxes due on payments made under this contract.

28. RIGHT OF INSPECTION - The Contractor shall provide right of access to its facilities to DOH, or any of its officers, or to any other authorized agent or official of the state of Washington or the federal government, at all reasonable times, in order to monitor and evaluate performance, compliance, and/or quality assurance under this contract. The Contractor shall make available information necessary for DOH to comply with the client's right to access, amend, and receive an accounting of disclosures of their Personal Information according to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) or any regulations enacted or revised pursuant to the HIPAA provisions and applicable provisions of Washington State law. The Contractor's internal policies and procedures, books, and records relating to the safeguarding, use, and disclosure of personal information obtained or used as a result of this contract shall be made available to DOH and the U.S. Secretary of the Department of Health & Human Services, upon request.

29. RIGHTS IN DATA/COPYRIGHT - Unless otherwise provided, all materials produced exclusively under this contract shall be considered "works for hire" as defined by the U.S. Copyright Act and shall be owned by DOH. DOH shall be considered the author of such Materials. In the event the Materials are not considered "works for hire" under the U.S. Copyright laws, Contractor hereby irrevocably assigns all right, title, and interest in Materials, including all intellectual property rights, to DOH effective from the moment of creation of such materials.

Materials means all items in any format and includes, but is not limited to, data, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions that derive exclusively from the Contractor's work under this contract. Ownership includes the right to copyright, patent, register and the ability to transfer these rights.

For materials that are delivered under the contract, but that incorporate pre-existing materials not produced under the contract, Contractor hereby grants to DOH a nonexclusive, royalty-free, irrevocable license (with rights to sublicense others) in such materials to translate, reproduce, distribute, prepare derivative works, publicly perform, and publicly display. The Contractor warrants and represents that Contractor has all rights and permissions, including intellectual property rights, moral rights and rights of publicity, necessary to grant such a license to DOH.

The Contractor shall exert all reasonable effort to advise DOH, at the time of delivery of materials furnished under this contract, of all known or potential invasions of privacy contained therein and of any portion of such document which was not produced in the performance of this contract. DOH shall receive prompt written notice of each notice or claim of copyright infringement received by the Contractor with respect to any data delivered under this contract. DOH shall have the right to modify or remove any restrictive markings placed upon the data by the Contractor.

30. SECURITY OF INFORMATION- The Contractor assures that its security practices and safeguards are consistent with the Washington State Office of the Chief Information Officer (OCIO) IT Security Standards.

<http://ofm.wa.gov/ocio/policies/documents/141.10.pdf>

For the purposes of this contract, security practices and safeguards that meet or exceed the Federal Information Processing Standards (FIPS) and National Institute of Standards and

Technology (NIST) Special Publications referenced in the Security section of the Statement of Work meets the requirements of the OCIO IT Security Standards.

The Information Recipient agrees to adhere to the Data Security Requirements in Appendix B.

The Information Recipient further assures that it has taken steps necessary to prevent unauthorized access, use or modification of the information in any form.

Upon a breach or suspected breach of security, Contractor will notify the DOH IT Security Officer within one (1) business day of discovery.

Any breach of this clause may result in termination of the contract and the demand for return of all confidential information.

- 31. SAVINGS** - In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date of this contract and prior to normal completion, DOH may terminate the contract under the *Termination for Convenience* clause, without the ten (10) day notice requirement, subject to renegotiation at DOH's discretion under those new funding limitations and conditions.
- 32. SEVERABILITY** - If any provision of this agreement or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this agreement which can be given effect without the invalid provision, and to this end the provisions of this agreement are declared to be severable
- 33. SITE SECURITY** - While on DOH premises, Contractor, its agents, employees, or subcontractors shall conform in all respects with physical, fire or other security policies or regulations. Failure to comply with these regulations may be grounds for revoking or suspending security access to these facilities. DOH reserves the right and authority to immediately revoke security access to Contractor staff for any real or threatened breach of this provision. Upon reassignment or termination of any Contractor staff, Contractor agrees to promptly notify DOH.
- 34. SUBCONTRACTING** – Neither the Contractor, nor any subcontractors, shall enter into subcontracts for any of the work contemplated under this agreement without prior written approval of DOH. In no event shall the existence of the subcontract operate to release or reduce the liability of the contractor to DOH for any breach in the performance of the contractor's duties. This clause does not apply to Hospitals and/or Medical Clinics that must contract with specialty physicians (e.g. anesthesiologists, radiologists, physicians groups, independent practitioners, etc) nor does it include contracts of employment between the contractor and personnel assigned to work under this contract.

Additionally, the Contractor is responsible for ensuring that all terms, conditions, assurances and certifications set forth in this agreement are carried forward to any subcontracts. Contractor and its subcontractors agree not to release, divulge, publish, transfer, sell or otherwise make known to unauthorized persons personal information without the express written consent of DOH or as provided by law.

If, at any time during the progress of the work, DOH determines in its sole judgment that any subcontractor is incompetent or undesirable, DOH shall notify the Contractor, and the Contractor shall take immediate steps to terminate the subcontractor's involvement in the work.

The rejection or approval by DOH of any subcontractor or the termination of a subcontractor shall not relieve the Contractor of any of its responsibilities under the contract, nor be the basis for additional charges to DOH.

DOH has no contractual obligations to any subcontractor or vendor under contract to the Contractor. The Contractor is fully responsible for all contractual obligations, financial or otherwise, to their subcontractors.

- 35. SURVIVABILITY**—The terms and conditions contained in this contract which by their sense and context, are intended to survive the completion, cancellation, termination, or expiration of the contract shall survive, including but not limited to clauses 1, 8, 13, 14, 23, 24 and 29.
- 36. TAXES** – All payments accrued on account of payroll taxes, unemployment contributions, any other taxes, insurance or other expenses for the Contractor or its staff shall be the sole responsibility of the Contractor.
- 37. TERMINATION FOR CONVENIENCE** - Except as otherwise provided in this contract, the Contracting Officer may, by TEN (10) calendar days written notice, beginning on the second day after the mailing, terminate this contract in whole or in part when it is in the best interests of DOH.

If this contract is so terminated, DOH shall be liable only for payment in accordance with the terms of this contract for services rendered prior to the effective date of termination.

- 38. TERMINATION FOR DEFAULT** – In the event DOH determines the contractor has failed to comply with the conditions of this contract in a timely manner, DOH has the right to suspend or terminate this contract. Further, DOH may terminate this contract for default, in whole or in part, if DOH has a reasonable basis to believe that the contractor has:
- A. Failed to meet or maintain any requirement for contracting with DOH;
 - B. Failed to ensure the health or safety of any client for whom services are being provided under this contract;
 - C. Failed to perform under, or otherwise breached, any term or condition of this contract; and/or
 - D. Violated any applicable law or regulation.

Before suspending or terminating the contract, DOH shall notify the contractor in writing of the need to take corrective action. If corrective action is not taken within fourteen (14) days, the contract may be terminated or suspended. In the event of termination or suspension, the contractor shall be liable for damages as authorized by law including, but not limited to, any cost difference between the original contract and the replacement or cover contract and all administrative costs directly related to the replacement contract, e.g., cost of the competitive bidding, mailing, advertising and staff time. DOH reserves the right to suspend all or part of the contract, withhold further payments, or prohibit the contractor from incurring additional obligations of funds during investigation of the alleged compliance breach and pending corrective action by the contractor or a decision by DOH to terminate the contract. A termination shall be deemed to be a “termination for convenience” if it is determined that the contractor: (1) was not in default; or (2) failure to perform was outside of his or her control, fault or negligence. The rights and remedies of DOH provided in this contract are not exclusive and are in addition to any other rights and remedies provided by law.

39. TERMINATION PROCEDURE - Upon termination of this agreement DOH may require the Contractor to deliver to DOH any property specifically produced or acquired for the performance of such part of this agreement as has been terminated. The provisions of the *Treatment of Assets* clause shall apply in such property transfer.

DOH shall pay to the Contractor the agreed upon price, if separately stated, for completed work and services accepted by DOH. In addition DOH shall pay the amount agreed upon by the Contractor and the Contracting Officer for (a) completed work and services for which no separate price is stated, (b) partially completed work and services, (c) other property or services which are accepted by DOH, and (d) the protection and preservation of the property. If the termination is for default, the Contracting Officer shall determine the extent of the liability of DOH. Failure to agree with such determination shall be a dispute within the meaning of the *Disputes* clause of this contract.

DOH may withhold from any amounts due the Contractor for such completed work or services such sum as the Contracting Officer determines to be necessary to protect DOH against potential loss or liability.

The rights and remedies of DOH provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law or under this agreement.

After receipt of a notice of termination, and except as otherwise directed by the Contracting Officer, the Contractor shall:

- Stop work under the agreement on the date and to the extent specified in the notice;
- Place no further orders or subcontracts for materials, services, facilities except as necessary to complete such portion of the work not terminated;
- Assign to DOH, to the extent directed by the Contracting Officer, all of the rights, titles, and interest of the Contractor under the orders and subcontracts in which case DOH has the right, at its discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.
- Settle all outstanding liabilities and all claims arising out of orders or subcontracts, with the approval or ratification of the Contracting Officer to the extent he/she may require, which approval or ratification shall be final for all the purposes of this clause;
- Transfer title to DOH and deliver, as directed by the Contracting Officer, any property which, if the agreement had been completed, would have been required to be furnished to DOH;
- Complete performance of such part of the work not terminated by the Contracting Officer; and,
- Take such action as may be necessary, or as the Contracting Officer may direct, for the protection and preservation of the property related to this agreement which is in the possession of the Contractor and in which DOH has or may acquire an interest.

40. TREATMENT OF ASSETS - Equipment purchases, title, and treatment of assets are determined by fund source. OMB Circular A-102 and/or the Washington State Office of Financial Management's "OFM Directive A95-05" (effective July 1, 1995) regulate treatment of assets. Equipment acquisitions must be included in the official contract budget.

41. WAIVER OF DEFAULT - Waiver of any default or breach shall not be deemed to be a waiver of any subsequent default or breach. Any waiver shall not be construed to be a

modification of the terms of this Contract unless stated to be such in writing and signed by authorized representative of DOH.

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**FEDERAL COMPLIANCE
AND STANDARD FEDERAL CERTIFICATIONS AND ASSURANCES**

In the event federal funds are included in this agreement, added by future amendment(s), or redistributed between fund sources resulting in the provision of federal funds, the following sections apply: I. Federal Compliance and II. Standard Federal Assurances and Certifications. In the instance of inclusion of federal funds as a result of an amendment, the Contractor may be designated as a subrecipient and the effective date of the amendment shall also be the date at which these requirements go into effect.

- I. **FEDERAL COMPLIANCE** - The use of federal funds requires additional compliance and control mechanisms to be in place. The following represents the majority of compliance elements that may apply to any federal funds provided under this contract. (Refer to Catalog of Domestic Assistance number(s) cited in the "Payment" section of this contract for requirements specific to that fund source.) For clarification regarding any of these elements or details specific to the federal funds in this contract, contact:

Compliance and Internal Control Officer
Office of Financial Services
Department of Health
Post Office Box 47901
Olympia, Washington 98504-7901

1. **CIRCULARS 'COMPLIANCE MATRIX'** - The following compliance matrix identifies the OMB Circulars that contain the requirements which govern expenditure of federal funds. These requirements apply to the Department of Health, as the primary recipient of federal funds, and then follow the funds to the subrecipient. The federal Circulars which provide the applicable administrative requirements, cost principles and audit requirements are identified by subrecipient organization type.

COMPLIANCE MATRIX

ENTITY TYPE	OMB CIRCULAR		
	ADMINISTRATIVE REQUIREMENTS	COST PRINCIPLES	AUDIT REQUIREMENTS
State, Local and Indian Tribal Governments & Governmental Hospitals	A-102 & Common Rule	A-87	A-133
Non-Profit Organizations & Non-Profit Hospitals	A-110	A-122	A-133
Colleges or Universities & Affiliated Hospitals	A-110	A-21	A-133

2. **CITIZENSHIP/ALIEN VERIFICATION/DETERMINATION** - The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 (PL 104-193) states that federal public benefits should be made available only to U.S. citizens and qualified aliens. Entities that offer a service defined as a "federal public benefit" must make a citizenship/qualified alien determination/verification of applicants at the time of application as part of the eligibility criteria. Non-US citizens

and unqualified aliens are not eligible to receive the services. PL 104-193 also includes specific reporting requirements. Exemptions from the determination/verification requirement is afforded the following programs offered by the Department of Health: Family Planning, Breast & Cervical Health Program (BCHP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), WIC Farmers Market Program, Immunization Programs, and Ryan White CARE Act programs and other communicable disease treatment and diagnostic programs.

3. **CIVIL RIGHTS AND NONDISCRIMINATION** - During the performance of this agreement, the Contractor shall comply with all current and future federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (PL 88-352), Title IX of the Education Amendments of 1972 (20 U.S.C. §§ 1681-1683 and 1685-1686), section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794), the Age Discrimination Act of 1975 (42 U.S.C. §§ 6101-6107), the Drug Abuse Office and Treatment Act of 1972 (PL 92-255), the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (PL 91-616), §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290dd-3 and 290ee-3), Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), and the Americans with Disability Act (42 U.S.C., Section 12101 et seq.).
 4. **SINGLE AUDIT ACT** - A subrecipient (including private, for-profit hospitals and non-profit institutions) shall adhere to the federal Office of Management and Budget (OMB) Circular A-133, as well as all applicable federal and state statutes and regulations. A subrecipient who expends \$500,000 or more in federal awards during a given fiscal year shall have a single or program-specific audit for that year in accordance with the provisions of OMB Circular A-133.
- II. STANDARD FEDERAL CERTIFICATIONS AND ASSURANCES** - Following are the Assurances, Certifications, and Special Conditions that apply to all federally funded (in whole or in part) agreements administered by the Washington State Department of Health.

CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

The undersigned (authorized official signing for the contracting organization) certifies to the best of his or her knowledge and belief, that the contractor, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

- A. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- B. have not within a 3-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- C. are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and

- D. have not within a 3-year period preceding this contract had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the contractor not be able to provide this certification, an explanation as to why should be placed after the assurances page in the contract.

The contractor agrees by signing this contract that it will include, without modification, the clause titled *Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions* in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The undersigned (authorized official signing for the contracting organization) certifies that the contractor will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76 by:

- A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- B. Establishing an ongoing drug-free awareness program to inform employees about
 - i. The dangers of drug abuse in the workplace;
 - ii. The contractor's policy of maintaining a drug-free workplace;
 - iii. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - iv. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- C. Making it a requirement that each employee to be engaged in the performance of the contract be given a copy of the statement required by paragraph (a) above;
- D. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the contract, the employee will—
 - i. Abide by the terms of the statement; and
 - ii. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- E. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every contract officer or other designee on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- F. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (ii), with respect to any employee who is so convicted—
 - i. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

- ii. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- G. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A), (B), (C), (D), (E), and (F).

For purposes of paragraph (e) regarding agency notification of criminal drug convictions, DOH has designated the following central point for receipt of such notices:

Compliance and Internal Control Officer
Office of Grants Management
WA State Department of Health
PO Box 47905
Olympia, WA 98504-7905

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (nonappropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the contracting organization) certifies, to the best of his or her knowledge and belief, that:

- A. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- B. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
- C. The undersigned shall require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subcontracts, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the contracting organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the contracting organization will comply with the Public Health Service terms and conditions of award if a contract is awarded.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the contracting organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The contracting organization agrees that it will require that the language of this certification be included in any subcontracts which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

6. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS INSTRUCTIONS FOR CERTIFICATION

By signing and submitting this proposal, the prospective contractor is providing the certification set out below.

- A. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective contractor shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the

- prospective contractor to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- B. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective contractor knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause of default.
 - C. The prospective contractor shall provide immediate written notice to the department or agency to whom this contract is submitted if at any time the prospective contractor learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
 - D. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the person to whom this contract is submitted for assistance in obtaining a copy of those regulations.
 - E. The prospective contractor agrees by submitting this contract that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DOH.
 - F. The prospective contractor further agrees by submitting this contract that it will include the clause titled Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion -- Lower Tier Covered Transaction, provided by HHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
 - G. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
 - H. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
 - I. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, DOH may terminate this transaction for cause or default.

7. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS -- PRIMARY COVERED TRANSACTIONS

- A. The prospective contractor certifies to the best of its knowledge and belief, that it and its principals:
 - i. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

- ii. Have not within a three-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- iii. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- iv. Have not within a three-year period preceding this contract had one or more public transactions (Federal, State or local) terminated for cause or default.

B. Where the prospective contractor is unable to certify to any of the statements in this certification, such prospective contractor shall attach an explanation to this contract.

CONTRACTOR'S SIGNATURE IS REQUIRED

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Please also print or type name:	
ORGANIZATION NAME: (if applicable)	DATE

FEDERAL ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the contractor, I certify that the contractor:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the

basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age

Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874) and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1721 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead- based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, Audits of States, Local Governments, and Non-Profit Organizations.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

CONTRACTOR'S SIGNATURE IS REQUIRED

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Please also print or type name:	
ORGANIZATION NAME: (if applicable)	DATE

APPENDIX A

USE AND DISCLOSURE OF CONFIDENTIAL INFORMATION

People with access to confidential information are responsible for understanding and following the laws, policies, procedures, and practices governing it. Below are key elements:

A. CONFIDENTIAL INFORMATION

Confidential information is information federal and state law protects from public disclosure. Examples of confidential information are social security numbers, and healthcare information that is identifiable to a specific person under RCW 70.02. The general public disclosure law identifying exemptions is RCW 42.56.

B. ACCESS AND USE OF CONFIDENTIAL INFORMATION

1. Access to confidential information must be limited to people whose work specifically requires that access to the information.
2. Use of confidential information is limited to purposes specified in section III of this Agreement.

C. DISCLOSURE OF CONFIDENTIAL INFORMATION

1. An Information Recipient may disclose an individual's confidential information received or created under this Agreement to that individual or that individual's personal representative consistent with law.
2. An Information Recipient may disclose an individual's confidential information, received or created under this Agreement only as section III of the Agreement, and state and federal laws allow.

D. CONSEQUENCES OF UNAUTHORIZED USE OR DISCLOSURE

An Information Recipient's unauthorized use or disclosure of confidential information is the basis for the Information Provider immediately terminating the Agreement. The Information Recipient may also be subject to administrative, civil and criminal penalties identified in law.

E. ADDITIONAL DATA USE RESTRICTIONS: (if necessary)

Signature: _____

Date: _____

APPENDIX B
DATA SECURITY REQUIREMENTS

Protection of Data

The Contractor agrees to store electronic information (the data) received under this contract on one or more of the following media, and to protect it as described below:

A. Hard disk drives - Data stored on local workstation hard disks:

1. The data must be encrypted as described under F. Storage on portable devices or media. Encryption is not required when information classified as Potentially Identifiable Information is stored temporarily on local workstation hard disks. Temporary storage is thirty (30) days or less.
2. Access to the data is restricted to authorized users by requiring logon to the local workstation using a unique user ID and Complex Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Accounts lock after 5 unsuccessful access attempts and remain locked for at least 15 minutes, or require administrator reset.

Complex Passwords are:

- At least 8 characters in length
- Contain at least three of the following character classes: uppercase letters, lowercase letters, numerals, special characters.
- Changed at least every 120 days.

B. Network server disks -Data stored on hard disks mounted on network servers and made available through shared folders:

1. Access to the data is restricted to authorized users through the use of access control lists which will grant access only after the authorized user has authenticated to the network.
 - a. Authentication must occur using a unique user ID and Complex Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Accounts must lock after 5 unsuccessful access attempts, and remain locked for at least 15 minutes, or require administrator reset.
2. Data on hard disks mounted on such servers is located in a secured computer area, which is accessible only by authorized personnel with access controlled through use of a key, card key, or comparable mechanism.
 - a. If the servers are not located in a secured computer area **or** if the data is classified as Restricted and Confidential it must be encrypted as described under F. data storage on portable devices or media.
3. When the data is stored on these disks, deleting unneeded data is sufficient as long as the disks remain in a secured area and otherwise meet the requirements listed in the paragraphs above.
 - a. Destruction of the data as outlined in Section J. Data Disposition may be deferred until the disks are retired, replaced, or otherwise taken out of the secured area, at which time the data must be destroyed as outlined in Section J.

Appendix B Data Security Requirements

C. Optical discs (CDs or DVDs) in local workstation optical disc drives -

1. Optical discs containing the data must be encrypted as described under F. data storage on portable devices or media.
2. When not in use for the purpose of this Contract, such discs must be locked in a drawer, cabinet or other physically secured container to which only authorized users have the key, combination or mechanism required to access the contents of the container.

D. Optical discs (CDs or DVDs) in drives or jukeboxes attached to servers -

Restricted and Confidential data provided or stored on optical discs, must be encrypted as described under F. data storage on portable devices or media.

1. Optical discs containing the data must be encrypted as described under *F. Storage on portable devices or media*.
2. When in use optical discs must be attached to servers in an area that is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.
3. Logical Access to the data on these discs is restricted to authorized users through the use of access control lists which will grant access only after the authorized user has authenticated to the network.
4. Authentication must occur using a unique user ID and Complex Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Accounts must lock after 5 unsuccessful access attempts and remain locked for at least 15 minutes, or require administrator reset.
5. When not in use for the purpose of this Contract, such discs must be locked in a drawer, cabinet or other physically secured container to which only authorized users have the key, combination or mechanism required to access the contents of the container.

E. Access via remote terminal/workstation over the Internet or the State Governmental Network (SGN).

1. When the data is transmitted between the Information Provider and the Contractor, access is controlled by the Information Provider, who will issue authentication credentials.
2. Contractor will notify DOH immediately whenever:
 - An authorized person in possession of such credentials is terminated or otherwise leaves the employ of the Contractor
 - Whenever a person's duties change such that the person no longer requires access to perform work for this Contract.
3. The data must not be transferred or accessed over the Internet by the Contractor in any other manner unless specifically authorized within the terms of the Contract.
 - a) If so authorized the data must be encrypted during transmissions using a key length of at least 128 bits. Industry standard mechanisms and algorithms, such as those validated by the National Institute of Standards and Technology (NIST) are required.
 - b) When the data is classified as Restricted or confidential, authentication requires secure encryption protocols and multi-factor authentication mechanisms, such as hardware or software tokens, smart cards, digital certificates or biometrics.

Appendix B Data Security Requirements

F. Data storage on portable devices or media -

1. Examples of portable devices and media are: smart phones, tablets, laptop/notebook/netbook computers, flash memory devices (e.g. USB flash drives, personal media players), and portable hard disks.
2. The data must not be stored by the Contractor on portable devices or media unless specifically authorized within the terms of this Contract. If so authorized the data must be given the following protections:
 - a) Encrypt with a key length of at least 128 bits, using industry standard mechanisms validated by the National Institute of Standards and Technologies (NIST).
 - b) Access to devices or media is controlled with a user ID (when possible) and a Complex Password or stronger authentication method such as a physical token or biometrics.
 - c) Whenever technically possible access to the device must lock after 5 unsuccessful access attempts and remain locked for at least 15 minutes, or require administrator reset.
 - d) Devices must be locked whenever they are left unattended. When possible, devices must be set to lock automatically after an inactivity activity period of 5 minutes or less.
 - e) The device(s) and/or media must be physically protected by
 - Storing them in a secured and locked environment when not in use.
 - Using check-in/check-out procedures when they are shared, and
 - Taking frequent inventories

When physically transported outside of a secured area: portable devices and media containing the data must be under the physical control of the Contractor's staff with authorization to access the data.

G. Backup Media

The data may be backed up as part of Contractor's normal backup process provided that the process includes secure storage and transport, and the data is encrypted as described in F. data storage on portable devices or media.

H. Paper documents

Any paper records that contain data classified as restricted or confidential must be protected by storing the records in a secure area which is only accessible to authorized personnel. When not in use, such records is stored in a locked container, such as a file cabinet, locking drawer, or safe, to which only authorized persons have access.

I. Data Segregation

1. The data provided under this Contract must be segregated or otherwise distinguishable from all other data. This is to ensure that when no longer needed by the Contractor, all of the data can be identified for return or destruction. It also aids in determining whether the data has or may have been compromised in the event of a security breach.
2. When it is not feasible or practical to segregate the data from other data, then **all** commingled data is protected as described in this Appendix.

Appendix B
Data Security Requirements

3. Segregation is not required when, for the purposes of this Contract, data classified as Potentially Identifiable is combined with oversample data, which includes identical or very similar information.

J. Data Disposition

If data destruction is required by the Contract, the data must be destroyed using one or more of the following methods:

Data stored on:

Is destroyed by:

Server or workstation hard disks

Using a “wipe” utility which will overwrite the data at least three (3) times using either random or single character data, or

Degaussing sufficiently to ensure that the data cannot be reconstructed, or

Physically destroying the disk , or

Delete the data and physically and logically secure data storage systems that continue to be used for the storage of confidential data to prevent any future access to stored information. One or more of the preceding methods is performed before transfer or surplus of the systems or media containing the data.

Paper documents with confidential data

On-site shredding, pulping, or incineration, or

Recycling through a contracted firm provided the contract with the recycler assures that the confidentiality of data is protected.

Paper documents containing confidential information requiring special handling (e.g. protected health information)

On-site shredding, pulping, or incineration

Optical discs (e.g. CDs or DVDs)

Incineration, shredding, or completely defacing the readable surface with a course abrasive

Magnetic tape

Degaussing, incinerating or crosscut shredding

Removable media (e.g. floppies, USB flash drives, portable hard disks, Zip or similar disks)

Using a “wipe” utility which will overwrite the data at least three (3) times using either random or single character data

Physically destroying the disk

Degaussing magnetic media sufficiently to ensure that the data cannot be reconstructed

Appendix B
Data Security Requirements

K. Notification of Compromise or Potential Compromise

The compromise or potential compromise of the data is reported to the DOH IT Security Officer within two (2) business days of discovery.

APPENDIX C

CERTIFICATION OF DATA DISPOSITION

Date of Disposition _____

- All copies of any Datasets related to agreement DOH # N19069 have been deleted from all data storage systems. These data storage systems continue to be used for the storage of confidential data and are physically and logically secured to prevent any future access to stored information. Before transfer or surplus, all data will be eradicated from these data storage systems to effectively prevent any future access to previously stored information.
- All copies of any Datasets related to agreement DOH # N19069 have been eradicated from all data storage systems to effectively prevent any future access to the previously stored information.
- All materials and computer media containing any data related to agreement DOH # N19069 have been physically destroyed to prevent any future use of the materials and media.
- All paper copies of the information related to agreement DOH # N19069 have been destroyed on-site by cross cut shredding.
- All copies of any Datasets related to agreement DOH # N19069 that have not been disposed of in a manner described above, have been returned to DOH.
- Other

The data recipient hereby certifies, by signature below, that the data disposition requirements as provided in agreement DOH # N19069 have been fulfilled as indicated above.

Signature of data recipient

Date