

ATTACHMENT A

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BLOOD SERVICES AGREEMENT PRICE SCHEDULE

I DISCOUNTS

- 1.1 Pricing in this agreement is based upon historical volumes under this total supply contract: the price of any product or service not set out in Attachment C shall be the lowest current published list price offered by the Blood Centers for that product or service, unless the parties establish a different price by written agreement.

2 NEW TESTS

- 2.1 The Blood Centers will continue to maintain these prices, provided no additional or modified tests are recommended by the Food and Drug Administration, America's Blood Centers or the American Association of Blood Banks. If new tests are required during this period, the Blood Centers agrees to invoice for only the associated material and labor expenses.

ATTACHMENT B

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SERVICES PROVIDED BY THE BLOOD CENTERS

1. REFERENCE LABORATORY

- 1.1 Between 8:00 AM and 11:00 PM on weekdays the Reference Laboratory will be staffed by specialist Reference Laboratory Technologists. This will ensure the immediate availability of expertise and significantly reduce the cost of urgent orders for antigen-negative units.
- 1.2 Historically antigen negative blood will be provided at \$41/antigen per unit.
- 1.3 Where requested patient antibody work-ups will be provided to allow antibody identification and provision of cross match compatible units. Antigen confirmed units will also be made available where a hospital elects to perform its own identification.

2 RETURN POLICY

Product	Policy
Whole Blood/RBC	Returnable with 10 days of shelf-life remaining units issued with ≤ 10 days to outdate are returnable if not used.
Platelets	Returnable with 24 hours of Shelf-life
Other Components	Returnable by agreement
Unsuitable Products	Returnable with full credit

3 HOSPITAL INVENTORY & PRODUCT DELIVERY

- 3.1 The Blood Centers will maintain a basic inventory equivalent to approximately 2 ½ - 5 days usage based on the hospital's prior year's usage and its distance from a Blood Centers distribution location.
- 3.2 One planned delivery, plus one platelet rotation delivery shall be provided to each hospital each weekday (Monday-Friday); and one planned delivery shall be provided on Saturday, Sunday and Holidays.

Planned Delivery Schedule		
Place order by:	Delivery by:	Charge
8:00 AM	4:00 PM	No Charge
ASAP	2 Hours	Yes
STAT	1 Hour	Yes
SDP Rotation	6:00 PM	No Charge

4 CUSTOMER SERVICE

The Blood Centers will assess the Quality of Service Delivery regularly by conducting a survey to monitor changes in blood needs, the pattern of service delivery, and any other specific hospital concerns.

5 MEDICAL/EDUCATIONAL SERVICES

A physician call schedule will be available to provide consultation through a toll-free number, 24 hours a day, 7 days a week.

In-service education, medical/technical seminars and workshops will be provided periodically. In addition, the AABB monthly teleconferences will be made available at all locations. Blood Center physicians are available to make presentations at Grand Rounds or at departmental meetings as requested.

6 SPECIAL DONATIONS

- 6.1 Prepayment: The Blood Centers will require prepayment for all autologous and designated units, with the exception of those covered by Medi-Care, Medi-Cal and Worker's Compensation.
- 6.2 Blood Centers physicians shall provide assistance to each hospital, when requested, in providing physician education relevant to the efficient and cost-effective management of autologous blood donations.
- 6.3 Billing: Billing for special donations will be consistent throughout the Hospital.

7 NEW TECHNOLOGY

- 7.1 The Blood Centers will maintain the prices (Attachment C) provided no additional or modified tests are recommended by the Food and Drug Administration, the State of California or the American Association of Blood Banks. If new tests are required during this period, the Blood Centers agree to invoice for associated material and labor expenses only.

ATTACHMENT C

Blood Centers of the Pacific

PROCESSING FEE SCHEDULE: CONTRACTED HOSPITALS

<u>Description</u>	FULL SERVICE
Whole Blood	\$300.00
Leukocytes Reduced	320.00
Autologous	300.00
 Red Blood Cells	
Leukocytes Reduced	\$274.00
Leukocytes Reduced, Irradiated	324.00
Leukocytes Reduced, Washed	374.00
PediPak (leukocytes reduced)	91.00
Autologous	300.00
Frozen (leukocytes reduced).....	374.00
Deglycerolized	449.00
Rejuvenated.....	524.00
 Platelets, Single Donor by Apheresis	\$640.00
Leukocyte reduced.....	640.00
Irradiated.....	690.00
Leukocytes Reduced, Irradiated	690.00
by Apheresis (HLA Matched)	950.00
Washed (leukocytes reduced).....	740.00
Contents variable	500.00
 Plasma, Fresh Frozen	\$75.00
PediPak.....	25.00/part
 Plasma, Frozen (FP24)	\$75.00
 Plasma, Cryo-depleted	\$75.00
 Cryoprecipitate	\$7500
Pooled (5 units).....	\$590.00
 Granulocytes by Apheresis	\$950.00
 Granulocyte concentrate (buffy coat)	\$110.00

PROCESSING FEE SCHEDULE: CONTRACTED HOSPITALS

Additional Processing Services

Leukocytes reduction by filtration RBC	\$20.00
Washing.....	100.00
Freezing.....	100.00
Deglycing.....	75.00
Rejuvenation	75.00
Volume reduction	50.00
Irradiation	50.00
CMV antibody negative.....	25.00
Hemoglobin S negative.....	15.00
Sterile docking	10.00
transfer bag	10.00
per PediPak	20.00

Special Donations*

Whole Blood Autologous ..	\$300.00
Red Blood Cell Autologous.....	300.00
Freezing/Storage for one year	100.00
Frozen Storage after one year	500.00/year
Fibrin Adhesive Autologous	174.00
Autologous surcharge (all other components) ...	100.00
Designated Donation Surcharge.....	100.00

***Prepayment of autologous fees and designated surcharge will be required when applicable.**

PROCESSING FEE SCHEDULE: CONTRACTED HOSPITALS

*** Immunohematology Services**

ABO Grouping	\$35.00
ABO/Rh (Includes Du when indicated)	75.00
Adsorption (Auto)	380.00
Adsorption (Allo).....	430.00
Adsorption (RESt).....	380.00
Antibody Screen	108.00
Cell Separation	430.00
Chloroquine/Glycine HCl	175.00
Compatibility Test.....	108.00
Direct Antiglobulin Test polyspecific	53.00
Direct Antiglobulin Test monospecific.....	108.00
DNA Genotyping	950.00
Donor Compatibility	108.00
Donor Units Negative for Antigens (per antigen)	65.00
Drug Study... ..	540.00
Elution.....	260.00
Neutralization.....	175.00
Red Cell Panel (Initial).....	175.00
Red Cell Panel (each Additional).....	175.00
Red Cell Panel (Rare).....	350.00
Red Cell Phenotype.....	275.00
Rh Phenotype (5 antigens).....	130.00
Titration.....	270.00
DTT Treatment	200.00
Enzyme Treatment	200.00
*<u>Component Surcharge</u>	
Confirmed Antigen Negative Units (per antigen)	\$65.00
Historically Antigen Negative Units (per antigen).....	45.00

Blood Centers of the Pacific

PROCESSING FEE SCHEDULE: CONTRACTED HOSPITALS

***Platelet Immunology**

PL ^{A1} Typing	\$110.00
Recruitment for crossmatch of identified donor	100.00
Platelet Crossmatch	430.00

After hours/Holiday Testing Surcharges
Immunoemotology and Platelet Diagnostic Labs

Weekdays 8:00 am to 5:00 pm	No surcharge
Weekdays 5:00 pm to 11:00 pm (samples received by 10:00 pm)	No surcharge
Weekdays 11:00 pm to 8:00 am	\$200.00/hour 175/hour
Weekends and Holidays	200.00/hour

*After hours/holiday testing surcharges apply