



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

19026E

EFFECTIVE BEGIN DATE: 08-01-2024
EXPIRATION DATE: 07-31-2025
PAGE: 1 of 4

VENDOR:

CARESTREAM HEALTH INC

00002094562

**150 Verona St
 Rochester, NY 14608**

VENDOR CONTACT:

Matt "Bob" Pedersen

PHONE: 612-283-6900

EMAIL: bob.pedersen@carestream.com

FOB: FOB Dest, Freight Prepaid

ISSUER:

Carlos Fuentes

EXT: PHONE: 515-240-2698

EMAIL: carlos.fuentes1@iowa.gov

Contract For: Medical Imaging Equipment and Maintenance

The parties agree to comply with the terms and conditions on the following attachments which are by this reference made a part of the Agreement.

Attachments are on file with the Department of Administrative Service - Central Procurement.

Attachment 1: Competitive Solicitation RFP0318588020.

Attachment 2: Contractor's Response to Competitive Solicitation RFP0318588020 (except for any contractor objection or amendment to the Competitive Solicitation Document requirements that the State has not explicitly agreed to in writing).

Attachment 3: Contractors Cost (final pricing documentation) Response to competitive solicitation document RFP0318588020.

Attachment 3A: Pricing for 2025 Equipment Addition

Attachment 4: Carestream - State of Iowa Contract

Carestream Project Manager: Bob Pedersen, 612-283-6900, bob.pedersen@carestream.com

Payment Terms: NET60

Delivery Dates: Four (4) to Six (6) weeks from Receipt of Order.

Delivery Terms: FOB Destination, Freight Prepaid

RENEWAL OPTIONS

AUTHORIZED DEPARTMENT

ALL

SUB Other Governmental Entities



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LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
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1	0.00000	EA	89880	\$ 236,376.920000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
DRX Ascend System

DRX Ascend System - 80kW Three Phase (380-480 VAC) Generator and 400kHU X-Ray Tube. Professional Services. DR Accessories. See Attached Pricing.

2	0.00000	EA	89880	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
Carestream Digital Options and Accessories

See Attached Pricing.

3	0.00000	EA	93895	\$ 128,000.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Equipment Maintenance and Repair
Annual Maintenance Service Plan: Year One - Year Six

Service Plan - SmartCare Complete.
 Standard Deductible Accident Protection.
 Premium Software Refresh
 Extended Tube Coverage
 Items Covered:
 Standard Deductible Accident Protection.
 Warranty Year: \$5000.00
 Year 1: \$20,500.00
 Year 2: \$20,500.00
 Year 3: \$20,500.00
 Year 4: \$20,500.00
 Year 5: \$20,500.00
 Year 6: \$20,500.00

4	0.00000	EA	89880	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
Carestream Digital Services

See Attached Pricing.



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LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
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5	0.00000	EA	89880	\$ 2,250.000000 \$ 0.000000
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REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
DRX Revolution System Serial ID 7760 2023 EOY Discount

Item#58084823 DRX Revolution System Serial ID 7760 - \$3000.00/Each
 2023 EOY Discount -\$750. = \$2250.00/Each.

6	0.00000	EA	89880	\$ 68,000.000000 \$ 0.000000
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REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
DRX CSI Plus New Detector (43 x 43)

Part # SSAL6764
 DRX CSI Plus New Detector (43 x 43)

7	0.00000	EA	89880	\$ 816.200000 \$ 0.000000
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REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

X-Ray Machines (Diagnostic) and Accessories (Except Dental)
DRX-1 System Battery 3 (35x43) Detector Replacement Battery

Part # SPAJ2900
 DRX-1 System Battery 3 (35x43) Detector
 Replacement Battery



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TERMS AND CONDITIONS

Referenced Terms

The parties agree to comply with the terms and conditions pursuant to the bid process which are by this reference made a part of the Agreement.

THIS MASTER AGREEMENT IS EFFECTIVE AS OF THE LATEST DATE SHOWN IN "EFFECTIVE BEGIN DATE" IN THE UPPER RIGHT HAND CORNER OR THE DATE BELOW SIGNED BY THE STATE OF IOWA.

CONTRACTOR		STATE OF IOWA	
CONTRACTOR'S NAME (If other than an individual, state whether a corp, partnership, etc.) Carestream Health, Inc.		AGENCY NAME DAS Central Procurement	
BY (Authorized Signature) <i>Lisa Frank</i>	Date Signed March 5, 2025	BY (Authorized Signature) <u><i>Carlos Fuentes</i></u> <small>Carlos Fuentes (Mar 6, 2025 09:28 CST)</small>	Date Signed 3/6/2025
Printed Name and Title of Person Signing Lisa Frank, Manager, Contract Operations		Printed Name and Title of Person Signing Carlos Fuentes, Statewide Procurement Officer	
Address 1		Address Hoover State Office Building, 1305 East Walnut Street Des Moines, IA 50319	










State of IA Master Agreement 19026E - For Your Signature


Final Audit Report

2025-03-06

Created:	2025-03-05
By:	Carlos Fuentes (Carlos.Fuentes1@iowa.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAbXGVylzeYSBAP7JRgAVUZd-C7WCnWM2w

"State of IA Master Agreement 19026E - For Your Signature" History

-  Document created by Carlos Fuentes (Carlos.Fuentes1@iowa.gov)
2025-03-05 - 4:00:09 PM GMT- IP address: 165.206.165.147
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-  Document signing delegated to Lisa Frank (lisa.frank@carestream.com) by LAUREN EDMONDSON (lauren.edmondson@carestream.com)
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 Agreement completed.

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