PHARMAC
TE PĀTAKA WHAIORANGA

Level 9, 40 Mercer Street, Wellington
PO Box 10254, Wellington 6143, New Zealand
P: +64 4 460 4990 | F: +64 4 460 4995
www.pharmac.govt.nz

4 August 2025

Dear Supplier

REQUEST FOR PROPOSALS – SUPPLY OF VARIOUS VACCINES AND INFLUENZA VACCINE

Pharmac invites proposals for the supply of publicly funded Various Vaccines (see next page for definition) and influenza vaccine in New Zealand.

This Request for Proposals (**RFP**) letter incorporates the following schedules:

- Schedule 1 specifies the vaccines for which Pharmac is requesting proposals and sets out the background to the RFP and the types of proposals sought;
- Schedule 2 describes the process that Pharmac expects to follow in relation to the RFP;
- Schedule 3 sets out information about the estimated size of the current subsidised market for the vaccines;
- Schedule 4 contains the RFP form in which you are to provide details of your proposal; and
- Schedule 5, which is available via GETS, sets out Pharmac's proposed contractual terms and conditions for the supply of vaccines, that will apply if your proposal is accepted by Pharmac.

If you wish to submit a proposal, you must submit it to Pharmac via the Government Electronic Tenders Service (GETS) no later than **5:00 p.m**. **(New Zealand time) on 19 September 2025.**

If you have any questions about this RFP, please submit them via the questions and answer function on GETS by **12:00 p.m. (New Zealand time) on 3 September 2025**.

We look forward to receiving your proposal.

Yours sincerely

Geraldine MacGibbon
Director Pharmaceuticals

Schedule 1: Vaccines, Background to RFP and Types of Proposals Sought

1. Vaccines

Pharmac is interested in considering proposals from suppliers of:

(a) non-influenza vaccines and a diagnostic agent ("Various Vaccines"); and
(b) influenza vaccines,

as set out in Tables 1 and 2 below:

Table 1. Currently funded vaccines included in the RFP

Vaccine description	Currently funded brand(s)
Various Vaccines	
Bacillus Calmette-Guerin vaccine	BCG Vaccine AJV
Diphtheria, tetanus and pertussis vaccine	Boostrix
Diphtheria, tetanus, pertussis and polio vaccine	Infanrix IPV
Diphtheria, tetanus, pertussis, polio, hepatitis B and Haemophilus influenzae type B vaccine	Infanrix-Hexa
Haemophilus influenzae type B vaccine	Act-HIB
Hepatitis A vaccine	Havrix 1440 & Havrix Junior
Hepatitis B recombinant vaccine	Engerix-B & Engerix-B Paediatric
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine	Gardasil 9
Measles, mumps and rubella vaccine	Priorix
Meningococcal ACWY vaccine	MenQuadfi and Nimenrix (ABA)
Meningococcal B vaccine	Bexsero
Pneumococcal (PCV13 or higher) conjugate vaccine	Prevenar 13
Pneumococcal (PPV23) polysaccharide vaccine	Pneumovax 23
Poliomyelitis vaccine	IPOL
Rotavirus oral vaccine	Rotarix
Tuberculin PPD (Mantoux) test	Tubersol
Varicella vaccine [chicken pox vaccine]	Varilrix
Varicella zoster vaccine [Shingles vaccine]	Shingrix
Influenza Vaccines	
Influenza vaccine (inactivated)	Influvac Tetra

Table 2. Currently unfunded vaccines included in this RFP

Influenza Vaccines
Adjuvanted influenza vaccine
High-dose influenza vaccine
Cell-based influenza vaccine

2. Background to RFP

Since 1997, the New Zealand Government has subsidised influenza vaccines for eligible people that meet set clinical criteria. Pharmac began managing the influenza vaccine in 2004 and the National Immunisation Schedule for Various Vaccines from 1 July 2012.

Pharmac is responsible for considering and deciding upon any changes to the vaccines listed in the National Immunisation Schedule, including the eligibility criteria, funding of new vaccines, and managing the supply and distribution of vaccines. We also work closely with the Ministry of Health and Health New Zealand in determining the need for vaccines, and securing supplies, during localised and/or national outbreaks of vaccine preventable diseases. Since July 2022, Pharmac has also been responsible for the management and funding of the COVID-19 vaccine (which is not included in this RFP).

The National Immunisation Schedule sets out the vaccines that are fully funded for babies, children, adolescents and adults. It is set out in Section I of the Pharmaceutical Schedule available at the following link:

https://schedule.pharmac.govt.nz/ScheduleOnline.php?code=A45

Further information about the series of vaccines, sequence and timing of immunisations is available at the following link:

https://www.health.govt.nz/our-work/preventative-health-wellness/immunisation/new-zealand-immunisation-schedule

The last RFP for the supply of Various Vaccines and influenza vaccines was released in November 2022.

This resulted in agreements with five suppliers—GSK, Pfizer, MSD, Sanofi, and Seqirus—and granted Principal Supply Status for supply of most of the Various Vaccines listed in Table 1, effective until 30 June 2027.

That RFP also resulted in an agreement with Viatris and awarded Principal Supply Status until 31 December 2026, for supply of the influenza vaccine stated in Table 1 above.

Pharmac is now seeking proposals for the supply of Various Vaccines and the influenza vaccine as stated in Table 1 and 2 above for:

- Various Vaccines
    - supply of Various Vaccines (except pneumococcal) for three years from 1 July 2027 (with a transition period of five months for any brand changes) and a Principal Supply Status (PSS) of two years and seven months. The principal supply period would begin 1 December 2027 and end on 30 June 2030.
    - supply of the pneumococcal conjugate and pneumococcal polysaccharide vaccines for a maximum of three years (2+1) from 1 July 2027, with a transition period of five months for any brand changes, and PSS for a maximum of two years and seven months. The PSS period would begin 1 December 2027 and end on 30 June 2029, with a one year right of renewal at Pharmac's sole discretion, to end 30 June 2030.

- Influenza vaccine
    - supply of the influenza vaccine for a maximum of four influenza seasons (2+1+1) from 1 February 2027. PSS would begin 1 April 2027 and end on 31 December 2028, with two optional extensions available at Pharmac's sole discretion for the 2029 and 2030 influenza seasons.

Influenza vaccine supply covers a different period to other vaccines as it aligns with the influenza season. The influenza vaccine must match Medsafe's annually recommended composition and must be manufactured for each influenza season.

In preparation for this RFP, Pharmac communicated directly with suppliers in early 2025, and in March 2025 a Future Procurement Opportunity (FPO) was released on the Government Electronic Tender Service (GETS).

Pharmac requested that suppliers submit applications to Pharmac for funding of any new or alternative brands of vaccines they may have available for supply, and any proposed changes to the funding eligibility criteria for the National Immunisation Schedule. For the avoidance of doubt, suppliers may still submit a response to this RFP, including for an alternative brand, where they have not yet submitted an application to Pharmac as at the date of the RFP.

Pharmac sought clinical advice in April 2025 from the Immunisation Advisory Committee on:

- Including adjuvanted trivalent influenza vaccine (aTIV) in the upcoming RFP
- Including cell-based trivalent influenza vaccine (TIVc) in the upcoming RFP
- Funding an additional dose of pertussis-containing vaccine in the second year of life

The Immunisation Advisory Committee's meeting records are available on our website at:

https://pharmac.govt.nz/about/expert-advice/specialist-advisory-committees/ -:~:text=Immunisation%20Advisory%20Committee

Below are some matters that you should consider in preparing a response to this RFP.

3. Requirements

3.1 Various Vaccine and Influenza Vaccine General Requirements

Medsafe Approval

Proposed vaccines need to be approved by Medsafe prior to the beginning of their respective supply date. Vaccines may either have Medsafe approval already, or the supplier must be able to provide assurance that they will be able to obtain Medsafe approval by the time the supply period begins.

Indication

Proposed vaccines must be indicated for the prevention of the disease for which it is commonly supplied.

Clinical Suitability

Proposed vaccines must be clinically suitable for the intended population, including (but not limited to) the following areas:

- Formulation
- Presentation
- Pack size
- Needle specification
- Shelf life from manufacture
- Storage/cold chain requirements
- Administration route
- Appropriateness for New Zealand context
- Appropriateness for inclusion on the National Immunisation Schedule.

Manufacture

Proposed vaccines must be manufactured, produced, processed, prepared, and packaged, labelled, presented, and described so as to comply with all legislation, regulations, relevant manufacturing principles, industry codes, the British, European or United States Pharmacopoeia Standards, and Medsafe requirements which apply to or affect the pharmaceutical

The closure of the proposed vaccines must be latex free and must comply with the toxicity testing requirements of the US Pharmacopoeia.

The proposed vaccines must comply with the guidelines for tamper evident packaging, as proposed in the draft document (or as finalised or updated from time to time) “Code of Practice for the Tamper Evident Packaging (TEP) of the Therapeutic Goods”.

Stable and Scalable Supply Chain

Suppliers should be able to demonstrate that they maintain a robust upstream supply chain and are able to produce sufficient quantities of the vaccine to meet contract requirements, with scalable production capabilities to meet changing demands.

Inventory Management

Proposed vaccines should have packaging dimensions that facilitate ease of transportation, storage prior to delivery, and efficient storage handling at the point of vaccination.

The supplier should establish appropriate run sizes, minimum order quantities, and ordering frequency to facilitate efficient inventory management.

Implementation

Suppliers may be required to work with Health New Zealand to provide input into any required implementation activities in the event their proposal is accepted.

Contract

Proposed contract terms and conditions for the supply of vaccines are referenced in Schedule 5. Please be aware that applicable contract terms may need to be adapted depending on the outcome of the RFP, for example clauses relating to PSS may need to be adapted in the influenza vaccine listing agreement if two vaccines are to be supplied.

3.2 Various Vaccine Specific Requirements

Eligibility Criteria

The current eligibility criteria for the Various Vaccines that are funded can be found on our website:

https://schedule.pharmac.govt.nz/ScheduleOnline.php?code=A45

As part of this RFP process, Pharmac may consider amending the eligibility criteria to widen access, subject to clinical advice, for the following vaccines:

Table 3. Various Vaccine widened access in scope of this RFP

Vaccine	Widened access description
Meningococcal A, C, Y And W-135 vaccine	Funding for people who are 14 years old. Catch up for adolescents 5 to 21 years (one year only).
	Funding for people who are 14 years old. Catch up for adolescents 13 to 21 years (one year only).
	Funding for children 1 year of age. Catch up for children 1 to 4 years (one year only)
Pneumococcal vaccine (PCV13)	Prevention of IPD, supplemental dose, individuals aged 12 to 59 months
Recombinant Zoster vaccine	Prevention of herpes zoster in adults aged 66 to 74 years, plus catch up for those aged 75 years and over
	Prevention of herpes zoster and post-herpetic neuralgia, people at 50 years of age and a catch-up program for people 51 to 64 years
	Catch-up programme due to COVID-19 pandemic disruption
	People over 65 years of age who require a Shingrix catch-up at least 5 years post Zostavax
Pertussis-containing vaccine	Additional dose of pertussis-containing vaccine in the second year of life

Principal Supply Status

Through this RFP, Pharmac may award PSS to a supplier for each vaccine. More information on PSS periods can be found in Section 4 of this Schedule.

The award of PSS means that the successful supplier's vaccine would be the principal funded brand in the New Zealand subsidised market.

The PSS period would include an Alternative Brand Allowance (ABA) of 5%. This means that an alternative brand can be funded for up to 5% of the market, if required. Pharmac retains its discretion as to who could access funding for an alternative brand and how funded access to it would be enabled.

The successful supplier would be awarded PSS for a vaccine. There would be a transition period of five months for Various Vaccines.

Pharmac would retain the right at its sole discretion to widen funded eligibility to a vaccine at any time during the PSS period.

Transition Periods

Where new brands of a vaccine are awarded PSS as a result of this RFP process, there would be dual brand listings in the Pharmaceutical Schedule, to allow for an orderly transition between brands. The anticipated transition periods are as follows:

Various Vaccines (except pneumococcal conjugate and pneumococcal polysaccharide vaccines vaccine)

(a) 1st transition period from 1 July 2027 to 30 November 2027; and

(b) 2nd transition period from 1 July 2030 to 30 November 2030.

Pneumococcal conjugate and pneumococcal polysaccharide vaccines

(a) 1st transition period from 1 July 2027 to 30 November 2027; and

(b) 2nd transition period from 1 July 2029 to 30 November 2029; or

(c) 2nd transition period from 1 July 2030 to 30 November 2030 if optional right of renewal is exercised.

For the avoidance of doubt a special contract term shall be included in any provisional agreement, which shall state the applicable transition periods.

Contract Term

Any contract(s) awarded as a result of this RFP process would be evergreen and would include a maximum PSS period, from no earlier than 1 December 2027 to no later than 30 June 2030. During this period the eligibility criteria may change and would be subject to any contractual provisions.

Distribution

The supplier is required to have a distribution network, which enables vaccines to be delivered in the required timeframes.

Suppliers are required to ensure that vaccines are packed and transported to meet all storage and cold chain distribution requirements under their Licence to Sell by Wholesale.

Pharmac would place purchase orders for vaccines with the supplier. Such purchase orders would be required to be delivered to a designated delivery point.

The designated delivery point may change during the PSS period and suppliers would be required to ensure continuity of supply in this event.

Forecasting

When requested, the supplier will be required to work with Pharmac to forecast vaccine usage to ensure stock levels are maintained to ensure continuity of supply.

3.3 Influenza Vaccine Specific Requirements

Eligibility Criteria

The current eligibility criteria for funded influenza vaccine are on our website as follows:

https://schedule.pharmac.govt.nz/ScheduleOnline.php?osq=Influenza%20vaccine&code=C4525013804

As part of this RFP process, Pharmac may consider amending the eligibility criteria to widen access for influenza vaccine for the following patient groups which have already been assessed by Pharmac:

Table 4. Influenza vaccine widened access in scope of this RFP

Vaccine	Widened access description
Influenza vaccine	Children aged 5 years or younger
	Children up to 18 years of age
	People over 50 years of age
	Open listing

As part of this RFP process, we may consider listing or awarding PSS to new types of influenza vaccines with indicative eligibility criteria as described below.

Adjuvanted Influenza Vaccine

Pharmac is interested in proposals that would enable funding for adults aged 65 years and over.

High-Dose Influenza Vaccine

Pharmac is interested in proposals that would enable funding for adults aged 65 years and over.

We would consider proposals that included a transition from a supplier's listing for a standard inactivated influenza vaccine to one of the above products from a later date if not Medsafe approved in time for the 2027 Southern Hemisphere influenza season.

Annual Strain Composition Updates

Influenza vaccine composition should be in line with the most recent Medsafe vaccine composition recommendations. Suppliers should have the capability to amend their strain composition in line with any updated recommendations by Medsafe.

The supplier should have the capability to update their vaccine composition to supply a vaccine to the latest Medsafe recommended southern hemisphere composition for the upcoming influenza season each year. The current vaccine composition recommendation includes a preference for trivalent vaccine that does not include a B/Yamagata lineage component.

The supplier should be able to manufacture the vaccine to the recommended composition as well as obtain market approval and any other necessary consent to supply the vaccine in New Zealand by no later than February of the year of the relevant Influenza Season during which the vaccine is expected to be supplied.

Principal Supply Status

Through this RFP, Pharmac may award PSS to a supplier.

The PSS period would include an Alternative Brand Allowance (ABA) of 5%. This means that an alternative brand can be funded for up to 5% of the market, if required. Pharmac retains its discretion as to who could access funding for an alternative brand and how funded access to it would be enabled.

If this RFP were to result in two vaccines being supplied for different age groups, the intent would be to offer PSS collectively at the vaccine level i.e. there would be a 5% ABA to be applied across the two vaccines for each vaccine being supplied.

Contract Term

The contract(s) for influenza vaccines as a result of this RFP process would be for supply in the community and Health NZ hospitals for a period of two influenza immunisation programme years from 1 February 2027 until 31 December 2028 with two consecutive optional extension periods of one year each, covering the 2029 and 2030 influenza seasons. During this period, the eligibility criteria may change and would be subject to any contractual provisions.

Distribution

Suppliers are required to ensure that vaccines are packed and transported meeting all storage and cold chain distribution requirements under their Licence to Sell by Wholesale, that complies with the most recent New Zealand Immunisation Advisory Centre (IMAC) Vaccine Storage and Distribution National Standards.

Distribution of influenza vaccine is the responsibility of suppliers, which provide, manage and pay for all activities relating to storage and delivery into and around New Zealand, right until it reaches the vaccinator (e.g. GP or pharmacist). It is Pharmac's preference that the supplier(s) continue to manage influenza vaccine distribution under any proposals received as a result of this RFP. Proposals should therefore include the cost of distribution to immunisation providers within the price of the influenza vaccine. Please note pharmacists administer and claim for funded influenza vaccine, which increases the

number of provider delivery points for the distributor. The supplier should also have the capability to collect unused vaccine from vaccinators and Health New Zealand hospitals.

Proposals should contain information on the distribution capabilities in managing the annual influenza immunisation programme including delivery timeframes, returns policy and any minimum order requirements.

Stock of influenza vaccine should be available for immunisation providers to order by 15 March in each year, to enable the annual influenza immunisation programme to commence from 1 April.

Suppliers should be aware of the high demand for the influenza vaccine in the early stages of each annual influenza immunisation programme. Data shows that each year about half of all vaccines ordered are ordered within the first month of the programme, and suppliers should be prepared for this busier period. Supply timelines and payment conditions would be included in any contract as a result of this RFP, to take into account the importance of delivery timeframes.

Delivery Timeframes

Delivery of the influenza vaccine is required on the same or following day if an order is received Monday - Thursday. If an order is received on a Friday, delivery of vaccines is required on the following Monday or Tuesday.

Ordering System

The supplier's distributor must provide a free phone, and online ordering that immunisation providers could use to place orders. The ordering system would need to be in place by 1 March 2027 to allow immunisation providers to order influenza vaccine prior to the start of the influenza programme from 1 April each year.

Reporting

The supplier will be required to provide comprehensive reports to Pharmac throughout the relevant annual influenza immunisation programme including details of sales broken down by vaccinator provider type (GP practice, pharmacy, other) and Health New Zealand regional subdivisions (similar to previous DHB areas), not just the total sales for the country. The reports will be required to be supplied to Pharmac on a weekly basis in an electronic Excel spreadsheet format with sales volumes reported on a per day basis. Suppliers would also need to meet any reasonable data requests from Pharmac, this could include stock on hand data.

Claiming

Currently, immunisation providers purchase influenza vaccine from the supplier's distributor and the provider is reimbursed through claims made to Health New Zealand's payment agent, Sector Operations Group, for the cost of the vaccine and the immunisation service. It is proposed that this purchase and claiming mechanism would remain unchanged.

Private (patient funded) vaccinations

For those patients that do not meet the eligibility criteria, annual influenza vaccination is available at a cost to the patient through the private market. In some cases, these are funded by an employer.

There is no requirement for the private market influenza vaccine to be purchased from the same supplier as the subsidised influenza vaccine.

However, for simplicity, Pharmac is aware that many immunisation providers only stock the subsidised brands and therefore the subsidised brands supply a large proportion of the private influenza vaccine market as well. Suppliers would need to consider the impact this may have on the volumes of vaccines required. They are expected to ensure that private market demand does not affect their ability to supply the subsidised market.

Promotion

Health New Zealand contracts the Immunisation Advisory Centre (IMAC) to coordinate influenza immunisation promotion, including the Influenza Kit. It is anticipated that supplier(s) would provide information and work with IMAC when requested. Further information about IMAC can be found at www.influenza.org.nz.

Pandemic Supply

Any contract(s) resulting from this RFP process would include provisions allowing supply to be suspended in the event of an influenza pandemic. The provisions would reflect compliance with any Ministry of Health and World Health Organization (WHO) requirements with regard to pandemic supply situations.

List Price

Pharmac is proposing to maintain the Pharmaceutical Schedule list price of influenza at $12.00 per dose. For the avoidance of doubt, the supplier may offer a list price different to $12.00 per dose. However, Pharmac strongly prefers no change to the proposed $12.00 per dose list price and reserves the right to negotiate the final list price with suppliers during contracting. Any proposed change to the list price would also be subject to public consultation. Please note, the net price submitted may be different to the list price via a rebate type arrangement, which may be classified as confidential between the supplier and Pharmac.

Underwriting of Influenza Stock

Pharmac is proposing to underwrite a proportion of influenza vaccine stock for each influenza season. Please see page 12 below for further details.

4. Types of Proposals Sought

Various Vaccines

Principal Supply Status

PSS would entail both principal supply in the community via a listing in Section I of the Pharmaceutical Schedule (i.e. the National Immunisation Schedule) and hospital supply in Part II of Section H of the Pharmaceutical Schedule.

Pharmac is willing to consider the following types of proposals for PSS, where the supplier is expected to meet the demand for all doses of that vaccine, from no earlier than **1 December 2027** to no later than **30 June 2030.** For the pneumococcal conjugate and pneumococcal polysaccharide vaccines, this period *includes* the optional one-year extension.

Outbreak Supply

(a) The vaccines stated below may also be used in the event of a disease outbreak. Suppliers of such vaccines would be required to deliver within a short timeframe,

but Pharmac would be free to seek alternative supply in the event the contracted supplier could not meet the outbreak demand.

(i) Meningococcal ACWY conjugate vaccine

(ii) Meningococcal B multicomponent vaccine

(iii) Measles, Mumps and Rubella

(iv) Hepatitis A

(v) Pertussis-containing vaccines

(b) Proposals should outline the supplier's or nominated distributor's capabilities in meeting any delivery timeframes, requirements (e.g. cold chain distribution) and its ability to comply with any national or international standards or guidelines.

(c) Any contract(s) resulting from this RFP process, for any of the vaccines listed in Table 1 or 2, would include provisions to cover a pandemic and/or local outbreak.

Other Types of Proposals

Suppliers may also wish to submit additional proposals that would enable Pharmac to fund changes to eligibility criteria as outlined in Schedule 1.

Please note if you wish to submit a proposal for widened eligibility, you **MUST** also submit a proposal for the current eligibility criteria.

Proposal Pricing

When submitting pricing please note the following:

(a) Pharmac is seeking a *purchase price* from suppliers for each vaccine. This is the price that Pharmac would be invoiced by a supplier, which is expected to be confidential between the supplier and Pharmac.

(b) Any vaccine listed as a result of this RFP in Section I or Part II of Section H of the Pharmaceutical Schedule would have a publicly listed price of $0.00 NZD to reflect the fact that the vaccine is provided free to immunisation providers as no subsidy is claimed in respect of the cost of the vaccine.

(c) Pharmac also requests suppliers provide a *manufacturer's price*, which is not confidential and could be used by Pharmac for public reporting and any funded vaccine distribution, which may occur where a price is required, such as for pharmacy distribution.

For the avoidance of doubt the *manufacturer's price* may be the same as the *purchase price*; this would depend on a supplier's sensitivity around the price for the vaccine being listed publicly.

Please note that supplier(s) of any vaccines would be required to continue to supply beyond any PSS period ending on 30 June 2030. Any resulting contract(s) would specify the supply arrangements after the end of the PSS supply period.

Influenza Vaccine

Principal Supply Status

PSS would entail principal supply in the community via a listing in Section I of the Pharmaceutical Schedule (i.e. the National Immunisation Schedule). Supply of the

influenza vaccine would be expected to begin from 1 February 2027, with listing on the Pharmaceutical Schedule from 1 March 2027.

PSS is anticipated to cover a period of two annual influenza immunisation programmes from 1 April 2027 until 31 December 2028 with two consecutive optional extension periods of one year each, covering the 2029 and 2030 influenza seasons, where the supplier meets the demand for all funded doses of annual influenza vaccine.

Pharmac would underwrite 75% of the net cost of doses, up to a maximum of 100,000 doses of the listed brand per influenza season if they are not distributed by the end of the influenza season. For illustration purposes only, where 120,000 doses have not been distributed, Pharmac will pay you the net cost for 75,000 doses, or where 50,000 doses have not been distributed, Pharmac will pay you the net cost for 37,500 doses. If this RFP were to result in two vaccines being supplied for different age groups, the intent would be to pro-rata the value of remaining stock based on proportion of each vaccine remaining.

Pharmac would be willing to consider proposals for:

- egg-based inactivated influenza vaccine
- cell-based inactivated influenza vaccine.

Any award of PSS would be for community supply only, and PSS would not apply for hospital supply.

We are aware that, under any arrangement, Pharmac would have some co-ordination role in the season planning, including confidential discussions with other potential private market suppliers to ensure that sufficient stock is planned to be available. Health New Zealand would similarly have some co-ordination role with any supplier(s) to the extent needed for implementation of the annual influenza immunisation programme.

Pharmac does not intend to contract with a distributor itself or to manage any payments for distribution services; this would be the supplier's responsibility.

In addition to the above proposals, suppliers may wish to offer to supply the following vaccines subject to the eligibility criteria described in section 3.3 of this Schedule:

- Adjuvanted influenza vaccine
- High-dose influenza vaccine

Please note, if you wish to submit a proposal for adjuvanted influenza vaccine or high-dose influenza vaccine you **MUST** also submit a proposal for inactivated influenza vaccine for the high-risk under 65 year patient group, according to current eligibility criteria. This would be considered as one proposal and therefore one supplier would be responsible for both the over 65 and under 65 markets. For the avoidance of doubt, we would not contract with different suppliers for the over 65 and under 65 markets.

Please note, if you wish to submit a proposal for widened eligibility, you **MUST** also submit a proposal for the current eligibility criteria.

Pharmac is not willing to consider the following types of proposals

(a) Any proposal that involves pharmaceuticals, vaccines or services other than the:

(i) vaccines set out in Schedule 1, *Table 1. Currently funded vaccines; or*

(ii) vaccines set out in Schedule 1, *Table 2. Currently unfunded vaccines.*

(b) Proposals that include expenditure risk sharing mechanisms based on patient level data.

(c) Proposals involving changes to the current eligibility restrictions other than those set out in this RFP.

(d) Proposals that bundle more than one vaccine which require Pharmac to purchase all vaccines in that bundle to have access to the pricing option, with the exception of:

(i) High-dose influenza vaccine or adjuvanted influenza vaccine for patients over 65 years, with inactivated influenza vaccine (egg-based or cell-based) for currently eligible patients under 65 years (including paediatric patients).

For avoidance of doubt, where a supplier needs to provide paediatric and adult presentations to cover the eligible population, this would be considered one individual bid (with two line-items) rather than a bundle.

Subject to the above, Pharmac is open to considering any other types of proposals that you may wish to put forward.

Schedule 2: RFP Process

Pharmac expects to follow the process set out below in the sequence indicated.

1. **Submission**

(a) You may submit more than one proposal. Each proposal will be considered as a separate proposal.

(b) Proposals must be submitted to Pharmac via the Government Electronic Tenders Service (GETS) no later than **5:00 p.m. (New Zealand time) on 19 September 2025**. Late proposals will only be considered at Pharmac's discretion, taking into account the need for fairness to other suppliers and the integrity of the RFP process.

(c) You cannot withdraw your proposal, once submitted, while the RFP process is continuing.

(d) If you have any enquiries about this RFP, you should submit them via GETS, using the questions and answers function by **12:00 p.m. (New Zealand time) on 3 September 2025**. Responses to all enquires will be published on GETS. If you do need to get in touch via email, please contact procurement@pharmac.govt.nz.

2. **Evaluation Model**

(a) Following the deadline for submitting proposals the Evaluation Committee, comprised of Pharmac staff and other relevant external members, will evaluate each proposal to select its preferred proposal(s).

(b) The evaluation model that will be used is weighted attribute. Price will be a weighted criterion.

(c) All proposals that meet the pre-conditions, specified in paragraphs 2.1 and 2.2 below, will be evaluated using the evaluation model as detailed below. Scores will assist in deciding which proposals are progressed, but ultimately the decision will be based on which proposal(s) we consider will provide the best overall public value in accordance with Pharmac's Factors for Consideration. More information on the Factors can be found at www.pharmac.health.nz/factors-for-consideration.

(d) We will use a "two-envelope" system to conduct evaluations. Suppliers must provide all financial information relating to price in a separate soft copy file.

(e) The Evaluation Committee will score each proposal according to the weighted criteria in Sections 2.1 and 2.2 below, using the rating scale to guide their evaluation, before examining the financial information of each proposal. The Evaluation Committee will assess which proposals to progress based on the scores and the total costs over the whole-of-life Contract.

(f) Each proposal will be evaluated on the basis that the price offered, the expenditure entailed, and any other terms included in the proposal, are the best that the supplier is able to offer. If you do not put forward your best terms you risk having your proposal excluded at the evaluation stage.

(g) Pharmac is not bound to select the lowest priced proposal or any proposal.

2.1 Evaluation Criteria and Weightings – Various Vaccines

Preconditions

(a) Each supplier must meet the following preconditions before their proposal will be considered for evaluation on its merits:

Table 1. Various Vaccine preconditions

1.	Proposed vaccine/s must have current Medsafe approval, or the supplier must be able to demonstrate that they will be able to attain Medsafe approval by the beginning of the supply period.
2.	The vaccine must be indicated for the prevention of the diseases for which it is commonly supplied.
3.	Proposal must include distribution arrangements to the Designated Delivery Point, that complies with the supplier's Licence to Sell by Wholesale.

(b) Having met all of the preconditions, qualifying proposals will proceed to the evaluation stage. Pharmac reserves the right, at its sole discretion, to not evaluate any proposal which does not meet the preconditions or does not include the information requested in this RFP.

Evaluation Criteria

(c) Proposals will then be evaluated on their merits using the following evaluation criteria and weightings.

Table 2. Various Vaccine evaluation criteria and weightings

Criterion	Weighting
Vaccine Suitability	15%
Vaccine suitability*	
Organisational and Operational Capability	10%
Company overview/track record	
Logistics/supply chain: inventory management, stability, scalability, distribution	
Sustainability	Information only
Modern slavery	Information only
Implementation support	Information only
Price	75%
Vaccine price	

Criterion	Weighting
Total weightings	100%

* While vaccine suitability is a scored criterion, if at any point in time during the evaluation process a vaccine is considered not clinically suitable in the New Zealand context, the vaccine may be eliminated from being considered further. This will require agreement from all members on the Evaluation Committee.

2.2 Evaluation Criteria and Weightings – Influenza Vaccine

Preconditions

(a) Each supplier must meet the following preconditions before their proposal will be considered for evaluation on its merits:

Table 3. Influenza vaccine preconditions

1.	Proposed vaccine/s must have current Medsafe approval, or the supplier must be able to demonstrate that they will be able to attain Medsafe approval by the beginning of the supply period.
2.	The vaccine indicated for the prevention of the diseases for which it is commonly supplied.
3.	The proposal must include distribution arrangements to the point of vaccination, that complies with the supplier's Licence to Sell by Wholesale

(b) Having met all of the preconditions, qualifying bids will proceed to the evaluation stage. Pharmac reserves the right, at its sole discretion, to not evaluate any proposal which does not meet the preconditions or does not include the information requested in this RFP.

Evaluation Criteria

(c) Proposals will then be evaluated on their merits using the following evaluation criteria and weightings.

Table 4. Influenza vaccine evaluation criteria and weightings

Criterion	Weighting
Vaccine Suitability	15%
Vaccine suitability*	
Organisational and Operational Capability	10%
Company overview/track record	

Criterion	Weighting
Logistics/supply chain: inventory management, stability, scalability, distribution	
Sustainability	Information only
Modern slavery	Information only
Implementation support	Information only
Price	75%
Vaccine price	
Total weightings	100%

* While vaccine suitability is a scored criterion, if at any point in time during the evaluation process a vaccine is considered not clinically suitable in the New Zealand context, the vaccine may be eliminated from being considered further. This will require agreement from all members on the Evaluation Committee.

2.2 Rating Scale

(a) The Evaluation Committee will use the following rating scale to evaluate suppliers' proposals for Various Vaccines and influenza vaccine against their respective criteria.

Table 5. Rating scale

Description	Definition	Rating
Excellent	Exceeds the requirement. Exceptional demonstration by the supplier of the relevant ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines. Response identifies factors that will offer potential added value, with supporting evidence.	9-10
Good	Satisfies the requirement with minor additional benefits. Above average demonstration by the supplier of the relevant ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines. Response identifies factors that will offer potential added value, with supporting evidence.	7-8
Acceptable	Satisfies the requirement. Demonstration by the supplier of the relevant ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines, with supporting evidence.	5-6
Minor reservations	Satisfies the requirement with minor reservations. Some minor reservations of the supplier's relevant ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines, with little or no supporting evidence.	3-4

Description	Definition	Rating
Serious reservations	Satisfies the requirement with major reservations. Considerable reservations of the supplier's relevant ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines, with little or no supporting evidence.	1-2
Unacceptable	Does not meet the requirement. Does not comply and/or insufficient information provided to demonstrate that the supplier has the ability, understanding, experience, skills, resources, and quality measures required to provide the vaccines, with little or no supporting evidence.	0

2.4 Overarching Considerations

(a) The Evaluation Committee will evaluate proposals in light of Pharmac's statutory objective, which is "to secure for eligible people in need of pharmaceuticals, the best health outcomes that are reasonably achievable from pharmaceutical treatment and from within the amount of funding provided". In doing so, the Evaluation Committee will be guided by the Factors for Consideration (Factors) that form part of Pharmac's then current Operating Policies and Procedures (OPPs), as published on Pharmac's website (www.pharmac.govt.nz), to the extent applicable. More information on the Factors can be found at www.pharmac.health.nz/factors-for-consideration.

(b) The requirement for Pharmac to pursue its statutory objective means that emphasis will be given to those aspects of proposals that demonstrate "health outcomes", and those aspects of proposals that demonstrate the impact on the "funding provided" for pharmaceuticals. Those Factors that relate directly to these aspects will be given the greatest weight by the Evaluation Committee, but all Factors are important.

2.5 Immunisation Advisory Committee

(a) Conforming proposals may be reviewed by the Immunisation Advisory Committee as a part of this evaluation process. Members of the Committee may be asked to comment on the clinical suitability of the proposals for the intended population.

(b) Information received from the Immunisation Advisory Committee may be used by the Evaluation Committee to inform their scoring in the evaluation process.

2.6 Pricing Analysis

(a) Pricing information will be required to be submitted in a prescribed format using the provided Microsoft Excel template ('Pricing Schedule') to ensure consistency of key price information capture to allow comparable evaluation of requirements.

(b) It is intended that a price normalisation formula will be used to determine the price scores of each supplier's proposal. Pricing analysis will also include comparisons across suppliers and widened access scenarios to show the impacts of pricing differences. The pricing normalisation formula intended for use is included below:

*(Lowest vaccine price*10)/vaccine price = normalised price*

2.7 Value for Money Assessment

(a) The value for money assessment will include consideration of the optimal combination of financial and non-financial factors through the lifecycle of the vaccines being procured. This includes fit for purpose, supplier capability, total cost and all other key considerations informing the non-price evaluation criteria. Any requested contract negotiations will also be assessed to consider the extent to which a provider might be seeking to alter the contractual risk allocation proposed by Pharmac in the RFP.

(b) The Evaluation Committee will consider the scores and overall value for money considering any additional information (e.g., answers to questions of clarification) to select the preferred supplier for each vaccine's current eligibility criteria, and each widened access criteria scenario, where applicable.

2.8 Progressing Current vs Widened Access Proposals

(a) This process will result in a preferred supplier being selected for each vaccine for both current eligibility criteria, and each option for widened access (where applicable).

(b) The Evaluation Committee will complete an analysis of each eligibility criteria scenario in accordance with the Factors for Consideration with a focus on health outcomes and the impact on the funding provided.

2.9 Due Diligence

(a) For preferred suppliers, we may:

(i) reference check the suppliers and any named personnel

(ii) make other checks against the supplier e.g. a search of the Companies Office or NZBN

(iii) inspect audited accounts for the last two financial years

(iv) undertake a credit check.

3 Pharmac may request further information

(a) Pharmac may request such further information as it considers necessary from or about you for the purposes of clarifying or evaluating your proposal, including (but not limited to):

(i) detailed information about your company structure, credit status and any other relevant company information; and

(ii) any other additional information about your vaccine.

(b) Pharmac may seek advice from the Immunisation Advisory Committee, PTAC, or relevant advisory committee, any relevant professional organisations or healthcare professionals with regards to your product including evaluation of any product samples.

(c) If Pharmac requests further information from or about you, it is not obliged to request the same or any other information from or about any other party, provided that in Pharmac's judgment this would not be unfair to any other party.

4 Negotiation

(a) Pharmac may negotiate with the submitter(s) of one or more preferred proposals, in the latter case only where the acceptance of either supplier's proposal would not exclude acceptance of the other proposal.

(b) Negotiations will proceed on the basis that the contractual terms and conditions set out in Schedule 5 shall apply.

(c) Given that Pharmac expects your proposal to be the best you can offer, Pharmac does not intend to initiate negotiation with you on price. However, Pharmac does not exclude the possibility that the final price agreed will be different from the price put forward in your proposal, as a result of the impact that other negotiated terms may have on price.

(d) Pharmac may negotiate and enter into a provisional agreement with a preferred supplier(s) on whatever special terms, in addition to Pharmac's terms and conditions, Pharmac considers appropriate.

(e) If Pharmac and the supplier(s) are unable to reach a provisional agreement within what Pharmac considers to be a reasonable time, Pharmac may terminate those negotiations and negotiate with a different supplier(s).

5 Consultation and Approval

(a) Any provisional agreement will be conditional on consultation with suppliers and other interested parties, to the extent Pharmac considers consultation to be necessary or appropriate, and on approval by the Pharmac Board (or approval by the Board's delegate acting under delegated authority).

(b) Pharmac will not consider any counteroffers received during consultation.

(c) The provisional agreement and responses to consultation will be considered by Pharmac's Board (or by the Board's delegate acting under delegated authority) in accordance with Pharmac's decision-making framework as outlined in its OPPs with reference to the Factors for Consideration.

(d) If the Board or its delegate does not approve the provisional agreement, then Pharmac may initiate negotiations for a provisional agreement with any other supplier(s).

(e) The RFP process will be complete once Pharmac has notified suppliers of either:

(i) the Board's or its delegate's decision to accept a negotiated agreement; or

(ii) the termination of the RFP process.

6 Miscellaneous

(a) Pharmac reserves the right, having regard to probity principles:

(i) to make such adjustments to the above RFP process as it considers appropriate, at any time during the process, provided that it notifies suppliers affected by those changes;

(ii) not to accept any proposal;

(iii) to seek clarification of any proposal;

(iv) to meet with any supplier in relation to its proposal;

(v) to enter into an agreement or arrangement that differs in material respects from that envisaged in this RFP letter;

(vi) to suspend this RFP process. For example, if during the RFP process (and before a provisional agreement is entered into) it becomes apparent to Pharmac that further consultation is appropriate or required we may suspend the RFP process in order to consult. In this situation we may ask you to adapt and resubmit your proposal in light of consultation, or alternatively we may request that new proposals be submitted;

(vii) to terminate this RFP process at any time, by notifying suppliers who submitted proposals, and, following termination, to negotiate with any supplier(s) on whatever terms Pharmac thinks fit; and

(viii) to readvertise for proposals.

(b) Pharmac may consult or seek clinical advice from the Immunisation Advisory Committee, PTAC or relevant advisory committee at any stage of the RFP process. Pharmac will notify you if the clinical advice results in any changes to the terms of the RFP.

(c) You must not initiate or engage in any communication with other suppliers in relation to the RFP, whether before or after submitting their proposal(s), until such time as a provisional agreement is accepted by Pharmac's Board or the Board's delegate.

(d) You must not at any time initiate any communication with Pharmac, the Ministry of Health, including its operating unit Medsafe, the Minister of Health or any Associate Ministers, Health New Zealand or advisors to Pharmac with a view to influencing the outcome of this RFP process.

(e) You must pay your own costs for preparing and submitting your proposal.

(f) Proposals are submitted in reliance on your own knowledge, skill, and independent advice, and not in reliance on any representations made by Pharmac.

(g) Your submission of a proposal will be taken as acceptance of the terms contained in this RFP letter. Pharmac may exclude your proposal if you do not comply with any of the terms contained in this RFP letter.

(h) This is an RFP and not a tender. Your proposal is not an offer capable of being converted into a contract for the supply of vaccines by Pharmac's apparent acceptance and instead a separate agreement needs to be negotiated.

(i) Pharmac is not liable in any way whatsoever for any direct or indirect loss (including loss of profit), damage or cost of any kind incurred by you or any other person in relation to this RFP.

(j) Pharmac will consider your proposal and information exchanged between us in any negotiations relating to your proposal, excluding information already in the public domain, to be confidential to us and our employees, legal advisors and other consultants, the Ministry of Health and Health New Zealand (**Confidential Information**). However, you acknowledge that it may be necessary or appropriate for Pharmac to release Confidential Information:

(i) pursuant to the Official Information Act 1982; or

(ii) in the course of consultation on a provisional agreement entered into with a supplier; or

(iii) in publicly notifying any approval by the Pharmac Board of that agreement; or

(iv) otherwise pursuant to Pharmac's public law or any other legal obligations.

Pharmac may consult with you before deciding whether to disclose Confidential Information for the purposes described in sub-clauses (i) to (iv) above. You acknowledge, however, that it is for Pharmac to decide, in its absolute discretion, whether it is necessary or appropriate to disclose information for any of the above purposes, provided that Pharmac shall act in good faith in disclosing any Confidential Information.

7 Anticipated Timetable

(a) Following receipt of proposals, Pharmac anticipates:

(i) the Evaluation Committee evaluating proposals in September/October 2025;

(ii) negotiating with submitter(s) of one or more preferred proposals in November/December 2025;

(iii) consulting on any provisional agreement in January/February 2026;

(iv) Pharmac's Board, or the Board's delegate, making a decision in May 2026;

(v) Public notification of any decisions in June 2026,

provided that the above time frames are only approximate and may be extended, without notice being required from Pharmac, if any stages of the RFP process take longer than anticipated.

(b) Under this indicative timetable, Pharmac expects to have changes made to the Pharmaceutical Schedule by 1 July 2027 for Various Vaccines and by March 2027 for influenza vaccines.

8 Governing Law

This RFP is governed by New Zealand law, and the New Zealand courts have exclusive jurisdiction in all matters relating to this RFP.

Schedule 3: Current Listing and Market Information

The following information relates to the estimated subsidised market size of Various Vaccines under the current eligibility criteria and restrictions, by financial year ending 30 June (FYR).

The information is approximate and indicative only. Pharmac makes no representation as to the accuracy of this information or as to the level of sales or likely sales of vaccines and, while Pharmac has taken all reasonable care in preparing the information set out below, it accepts no liability for any errors or omissions in the information. Pharmac is not obliged to notify you in the event of any change to the figures below.

Vaccine	**Formulation**	**Units (doses) per year**			
		2022 FYR	**2023 FYR**	**2024 FYR**	**2025 FYR**
Bacillus Calmette-Guerin vaccine	Inj *Mycobacterium bovis* BCG (Bacillus Calmette-Guerin), Danish strain 1331, live attenuated, vial with diluent	16,000	18,400	18,000	19,990
Diphtheria, tetanus and pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	258,200	287,620	283,160	316,750
Diphtheria, tetanus, pertussis and polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	55,520	63,820	53,295	61,310
Diphtheria, tetanus, pertussis, polio, hepatitis B and *Haemophilus influenzae* type B vaccine	Inj 30IU diphtheria toxoid with 40IU tetanus toxoid, 25mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-AgU poliovirus, 10 mcg hepatitis B surface antigen in 0.5ml syringe	177,080	171,570	160,770	167,590

Vaccine	Formulation	Units (doses) per year			
		2022 FYR	2023 FYR	2024 FYR	2025 FYR
Haemophilus influenzae type B vaccine	*Haemophilus influenzae* type B polysaccharide 10 mcg conjugated to tetanus toxoid as carrier protein 20-40 mcg; prefilled syringe plus vial 0.5 ml	53,490	63,931	54,280	63,102
Hepatitis A vaccine	Inj 720 ELISA units in 0.5 ml syringe	194	348	463	495
	Inj 1440 ELISA units in 1 ml syringe	818	1,252	1,392	1,684
Hepatitis B recombinant vaccine	Inj 10 mcg per 0.5 ml prefilled syringe	3,419	3,644	3,931	3,756
	Inj 20 mcg per 1 ml prefilled syringe	12,190	14,031	15,834	15,187
Human papillomavirus vaccine	Inj 270 mcg in 0.5 ml syringe	126,930	150,470	140,687	154,270
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID50, mumps virus 5,012 CCID50, Rubella virus 1,000 CCID50; prefilled syringe/ampoule of diluent 0.5 ml	196,770	191,120	149,450	168,770
Meningococcal B vaccine	Inj 175 mcg per 0.5 ml prefilled syringe	3,796	155,565	333,959	269,256
Meningococcal (groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial	12,515	17,893	15,264	14,650
Pneumococcal vaccine (PCV13)	Inj 30.8 mcg of pneumococcal polysaccharide serotypes 1, 3, 4, 5, 6A, 6B,	4,336	112,323	163,259	166,646

Vaccine	Formulation	Units (doses) per year			
		2022 FYR	2023 FYR	2024 FYR	2025 FYR
	7F, 9V, 14, 18C, 19A, 19F and 23F in 0.5 ml syringe				
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml vial (25 mcg of each 23 pneumococcal serotype)	3,484	6,068	4,821	4,373
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	5,582	6,413	7,699	8,440
Rotavirus oral vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	111,520	106,720	102,620	100,920
Varicella vaccine [Chickenpox vaccine]	Inj 2000 PFU prefilled syringe plus vial	64,077	75,030	66,150	73,090
Varicella zoster vaccine [Shingles vaccine] [1]	Inj 50 mcg per 0.5 ml vial plus vial	N/A	57,113	86,217	80,781
Tuberculin PPD (Mantoux) test	Inj 5 TU per 0.1ml, 1ml vial	4,280	2,214	2,680	2,440

[1] Note that there was a brand change of Varicella zoster vaccine [Shingles vaccine] in mid-2023, therefore data has not been provided for 2022. The 2023 data only includes a partial year's usage.

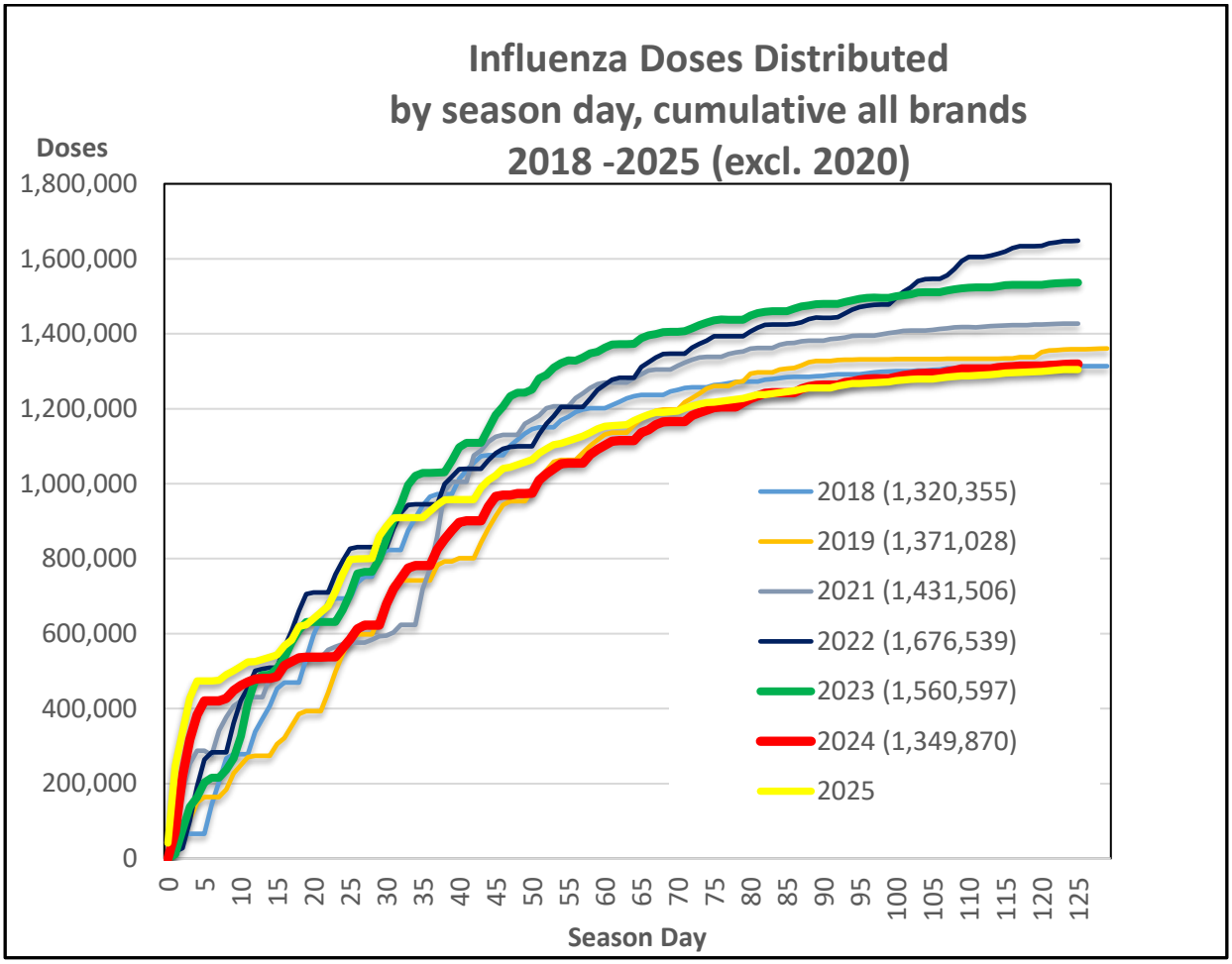
The following information relates to the estimated subsidised market size for the influenza vaccine, by calendar year (CY). Of note, the global COVID-19 pandemic and associated public health measures may have affected the uptake of this vaccine. The information is approximate and indicative only. Pharmac makes no representation as to the accuracy of this information or as to the level of sales or likely sales of influenza vaccine and, while Pharmac has taken all reasonable care in preparing the information set out below, it accepts no liability for any errors or omissions in the information. Pharmac is not obliged to notify you in the event of any change to the figures below.

Influenza Vaccine Usage Data	**2023 CY**	**2024 CY**	**2025 CY YTD[2]**
Funded influenza vaccine administered to those aged 65 and over	552,879	549,203	493,685
Private influenza vaccine administered to those 65 and over	9,078	21,121	36,659
Funded influenza vaccine administered to those under 65	376,446	269,136	166,707
Private influenza vaccine administered to those under 65	329,211	359,785	340,086
Total (funded and private) influenza vaccine administered to those under 65	705,657	628,921	506,793
Total (funded and private) influenza vaccines administered for the nominated year	**1,258,536**	**1,178,124**	**1,000,478**

Year CY	**Total influenza vaccines distributed (private and funded)**	**Total vaccines subsidised in the community and purchased by Health New Zealand -Te Whatu Ora hospitals**
2013	1,250,000	718,000
2014	1,210,000	699,000
2015	1,210,000	693,000
2016	1,250,000	695,000
2017	1,220,000	693,000
2018	1,310,000	739,000
2019	1,370,000	764,000
2020	1,780,000	928,000
2021	1,430,000	795,000
2022	1,660,000	850,000
2023	1,545,000	937,000
2024	1,340,000	814,000
2025	1,300,000	*728,000 (YTD)*

[2] Data up to 30 May 2025

As illustrated by the figure below, in a typical annual influenza immunisation programme, half of all vaccines are ordered within the first month. After approximately two months, demand for vaccines typically becomes flatter, and orders in the latter half of the programme are much lower. Demand patterns are also affected by weekends and public holidays. The year 2020 has been excluded from this analysis due to the impact of COVID-19 on vaccination rates.



In 2024 influenza vaccine was distributed to primary care, pharmacies, Health New Zealand hospitals and private providers. The breakdown is given in the table below:

Provider Type	% of total distributed in 2024 CY
Primary Care	51%
Pharmacy	32%
Health New Zealand	9%
Private Providers	8%

Schedule 4: Proposal Form

An editable version of this RFP Response form is available on the GETS listing for this RFP.

Instructions for Respondents

(a) Check that you have all the relevant documents, including:

- The Request for proposals (RFP) which outlines the procurement process.
- The RFP Response Form (this one) to fill out your response.
- The Pricing Response Form to provide the pricing details of your proposal.
- The Vaccine Presentation Spreadsheet to provide the presentation details of you proposed vaccine/s.

(b) Please follow the layout of this Response Form:

- Don't change the section headings and sequence as this needs to be consistent across all Respondents.
- Insert any extra images or graphs either as part of your answer or in a separate attachment (but make it clear in the Response Form that you have done so).
- Do not insert links to long documents. They may not be viewed.

(c) Everything highlighted in **PURPLE** in this document is information for the Respondent (you). Delete these **PURPLE** parts before sending the RFP Response Form.

(d) Write your response in the blue sections. Un-shade the blue once you have filled these out.

(e) Remember to make a note of the Deadline for Questions (**12:00 p.m. (New Zealand time) on 3 September 2025**). The Q & A section is helpful for all Respondents so feel free to ask us if anything is unclear.

Checklist for Respondents

Have you:		
1.	Filled in all sections of the Response Form.	☐
2.	File size: Your submission should be no greater than 50MB.	☐
3.	Prepared your proposal (a) This RFP requires a 'two-envelope' approach. This means all financial information relating to price, expenses and costs must be in the separate Pricing Response Form. (b) We prefer that you submit your response through GETS.	☐
4.	Deleted the PURPLE instructions from this Form.	
5.	Unshaded the blue highlighting where you have filled in your answer.	
6.	Arranged for the proposal to be submitted electronically before the Deadline for proposals (**5:00 p.m. (New Zealand time) on 19 September 2025**).	☐
7.	1. Included the following completed information in your submission: (a) RFP Response Form (b) RFP Pricing Response Form (c) Vaccine Presentation Spreadsheet (d) Evidence of meeting applicable pre-conditions e.g. Medsafe Gazette Notice for each vaccine (if applicable).	☐

PHARMAC
TE PĀTAKA WHAIORANGA

Request for Proposal (RFP) Response Form

In response to the Request for Proposals

By: Pharmac
For: The supply of Various Vaccines and the influenza vaccine

Date of this proposal: [insert date]

Pharmac Director, Pharmaceuticals
C/- Procurement Manager
Procurement Manager
Pharmac

Tēnā koe

Proposal for the supply of Various Vaccines and influenza vaccine – commercial in confidence

In response to your request for proposals (**RFP**) dated **4 August 2025** we put forward the following proposal in respect of vaccines.

1. About the Respondent

RESPONDENT TIP

- This section gives basic information about your organisation and identifies your Point of Contact for the RFP process.
- If an item is not applicable, e.g. you do not have a registered office, complete the box by stating 'not applicable'.
- This information will be used for proposals regarding both Various Vaccines and the influenza vaccine.

(a) Our company details

Trading name:	[insert the name that you do business under]
Full legal name (if different):	[if applicable]
Physical address:	[if more than one office – put the address of your head office]
Postal address:	[e.g. P.O Box address]
Registered office:	[if you have a registered office insert the address here]

Business website:	[URL address]
Type of entity (legal status):	[sole trader / partnership / limited liability company / other please specify]
Registration number:	[if your organisation has a registration number insert it here e.g. NZBN number]

(b) Our point of Contact

Contact person:	[insert name]]
Position:	[insert position]
Phone number:	[insert phone number]
Mobile number:	[insert mobile number]
Email address:	[insert email address]

2. Bid Details

RESPONDENT TIP

- Carefully read RFP. Then provide your response by demonstrating your organisation's ability to meet the criteria.
- Keep it simple. If an answer is in another document e.g. a marketing brochure, just cut and paste the relevant part into this form. Do not show the whole document unless necessary - we may not read it all.
- You may include extra information in your proposal but only if it adds value and is relevant.

2.1 Vaccines Bid For

RESPONDENT TIP

- Please select which vaccines you are submitting a proposal for below.
- Each vaccine will be treated as a separate proposal and evaluated in its own right.

Vaccine	Proposal Submitted For
Various Vaccines	
Bacillus Calmette-Guerin vaccine	☐
Diphtheria, tetanus and pertussis vaccine	☐
Diphtheria, tetanus, pertussis and polio vaccine	☐
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	☐

Haemophilus influenzae type B vaccine	☐
Hepatitis A vaccine	☐
Hepatitis B recombinant vaccine	☐
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	☐
Measles, mumps and rubella vaccine	☐
Meningococcal ACWY conjugate vaccine	☐
Meningococcal B multicomponent vaccine	☐
Pneumococcal conjugate vaccine (PCV13 or higher)	☐
Pneumococcal polysaccharide vaccine (PPV23)	☐
Poliomyelitis vaccine	☐
Rotavirus oral vaccine	☐
Varicella vaccine [Chicken pox vaccine]	☐
Varicella zoster vaccine [Shingles vaccine]	☐
Tuberculin test	☐
Influenza Vaccine	

Influenza vaccine	☐

3. Response to Requirements – Various Vaccines

3.1 Pre-conditions – Various Vaccines

RESPONDENT TIP

- The following pre-conditions relate to Various Vaccines.
- You must be able to answer 'yes' to each of these pre-conditions for each Various Vaccine you are submitting a proposal for. Make sure you can verify this.
- 'Yes' means you currently meet the pre-condition. If you cannot answer 'yes' to all, your proposal will not be evaluated further.

#	Pre-condition	Meets
1.	Proposed vaccine(s) must have current Medsafe approval, or the supplier must be able to demonstrate that they will be able to attain Medsafe approval by the beginning of the supply period. If proposed vaccines already have Medsafe approval, please provide evidence of this (e.g. Medsafe Gazette Notice).	[Yes/No]
[If Medsafe approval is not already achieved, please outline your plan to achieve Medsafe approval prior to the supply date here. If you are supplying a bid for more than one unapproved vaccine, please detail the plan for each proposed vaccine separately.]		
2.	The vaccine must be indicated for the prevention of the diseases for which it is commonly supplied.	[Yes/No]
3.	Proposal must include distribution arrangements to the Designated Delivery Point, that complies with your Licence to Sell by Wholesale.	[Yes/No]

3.2 Response to Evaluation Criteria – Various Vaccines

RESPONDENT TIP

- These are questions relating to the Various Vaccines. Your proposal will be scored against your answers to these criteria. Aim to give answers that are relevant, concise and comprehensive.
- Consider the % weighting for each criterion. The higher the weighting the more important it is. Take the weightings into account in deciding how much detail to include.
- If you have made any assumption about the Requirements or delivery, clearly state the assumption.
- There may be several questions that relate to one criterion. If these questions are not individually weighted assume that they are of equal importance.
- If you are bidding for more than one Various Vaccine, you may either submit a separate form for each, or ensure you make it clear in your answers which vaccine information is related to. If only one form is submitted that covers separate Various Vaccines and no differentiation is made, it will be assumed that the information included is true for all Various Vaccines bid for.

1. Vaccine Suitability – Various Vaccines	Weighting **15%**
a. Please fill in the "Vaccine Presentation" spreadsheet detailing the required information for your vaccine(s). This form can also be found in the Attachments section on GETS. Please ensure this form, along with your RFP Response Form and RFP Pricing Response Form, are submitted on GETS.	
[complete spreadsheet]	
b. Please provide information supporting the stability of vaccines when exposed to temperatures outside of the cold chain (2-8C):	
[insert answer here]	

2. Organisational and Operational Capability – Various Vaccines	Weighting 10%
Company Overview/Track Record	
a. Please describe your organisational structure. Explain why this is sufficient to deliver the Requirements:	
[insert answer here]	
b. Please provide information on your organisation's management and technical skills:	
[insert answer here]	
c. Please provide information about your organisation's financial resources:	
[insert answer here]	
d. Please provide information about your previous supply performance and expertise:	
[insert answer here]	
Logistics/Supply Chain	
a. Please describe how much visibility you have over your vaccine supply chain. Please include any relevant details of your supply chain plan, and how often this is reviewed:	
[insert answer here]	
b. Please describe how you plan to maintain adequate supply to New Zealand. Please also include how you will respond to changing volume demands:	
[insert answer here]	
c. Please describe how you manage supply issues, including mitigation techniques:	
[insert answer here]	

d. If your bid contains any of the Various Vaccines listed below, that may be required in the event of a disease outbreak, please describe how you would manage additional supply to New Zealand in a short timeframe:

- Meningococcal ACWY conjugate vaccine
- Meningococcal B multicomponent vaccine
- Measles, Mumps and Rubella
- Hepatitis A
- Pertussis-containing vaccines

[insert answer here]

Sustainability	(Info Only)

a. How does your organisation contribute to environmental sustainability? Please include both in general, and in relation to the requirements in this contract:

[insert answer here]

b. Has your organisation received any environmental fines/prosecutions?

[insert answer here]

c. Does your organisation comply with any recognised environmental standards?

[insert answer here]

Modern Slavery	(Info Only)

a. Briefly describe the reasonable steps your organisation takes to identify, assess and address modern slavery in your operations and supply chains relevant to this contract:

[insert answer here]

b. Does your organisation perform due diligence screening of all prospective suppliers to assess the risk of modern slavery or other human rights harms that may occur in its operations and supply chains? If yes, please outline how this is managed:
[insert answer here]
c. Does your organisation comply with any recognised standards regarding modern slavery and worker exploitation?
[insert answer here]
Implementation (Info Only)
d. Please outline how you will support Health New Zealand with any required implementation activities resulting from this RFP, if successful:
[insert answer here]

4. Response to Requirements – Influenza Vaccine

4.1 Pre-conditions – Influenza Vaccine

RESPONDENT TIP

- The following pre-conditions relate to the influenza vaccine.
- You must be able to answer 'yes' to each of these pre-conditions for each influenza vaccine you are submitting a proposal for. Make sure you can verify this.
- 'Yes' means you currently meet the pre-condition. If you cannot answer 'yes' to all, your proposal will not be evaluated further.

#	Pre-condition	Meets
1.	Proposed vaccine(s) must have current Medsafe approval, or the supplier must be able to demonstrate that they will be able to attain Medsafe approval by the beginning of the supply period.	[Yes/No]

	If proposed vaccines already have Medsafe approval, please provide evidence of this (e.g. Medsafe Gazette Notice).	
[If Medsafe approval is not already achieved, please outline your plan to achieve Medsafe approval prior to the supply date here. If you are supplying a bid for more than one unapproved vaccine, please detail the plan for each proposed vaccine separately.]		
2.	The vaccine must be indicated for the prevention of the diseases for which it is commonly supplied.	[Yes/No]
3.	Proposal must include distribution arrangements to the Point of Vaccination, that complies with your Licence to Sell by Wholesale. Please provide evidence of this with your submission.	[Yes/No]

4.2 Response to Evaluation Criteria – Influenza Vaccine

RESPONDENT TIP

- These are questions relating to the influenza vaccine. Your proposal will be scored against your answers to these criteria. Aim to give answers that are relevant, concise and comprehensive.
- Consider the % weighting for each criterion. The higher the weighting the more important it is. Take the weightings into account in deciding how much detail to include.
- If you have made any assumption about the Requirements or delivery, clearly state the assumption.
- There may be several questions that relate to one criterion. If these questions are not individually weighted assume that they are of equal importance.
- If you are submitting more than one bid for the influenza vaccine you may either submit a separate form for each, or ensure you make it clear in your answers which vaccine information is related to. If only one form is submitted that covers separate Various Vaccines and no differentiation is made, it will be assumed that the information included is true for all Various Vaccines bid for.

1. Vaccine Suitability – Influenza Vaccine	Weighting 15%
a. Please fill in the “Vaccine Presentation” spreadsheet detailing the required information for your vaccine/s. This attachment can be found in the Attachments section on GETS. Please ensure this form is submitted with your RFP Response Form, and RFP Pricing Response Form on GETS.	
[complete spreadsheet]	
b. Please provide information supporting the stability of vaccines when exposed to temperatures outside of the cold chain (2-8C):	
[insert answer here]	
2. Organisational and Operational Capability – Influenza Vaccine	Weighting 10%
Company Overview/Track Record	
a. Please describe your organisational structure. Explain why this is sufficient to deliver the Requirements:	
[insert answer here]	
b. Please provide information on your organisation’s management and technical skills:	
[insert answer here]	
c. Please provide information about your financial resources:	
[insert answer here]	
d. Please provide information about your previous supply performance and expertise:	
[insert answer here]	
Logistics/Supply Chain	

a. Please describe how much visibility you have over your supply chain and the impact that this has on your ability to deliver on contract requirements?
[insert answer here]
b. Please describe how you plan to maintain adequate supply to New Zealand, including how you will respond to changing volume demands:
[insert answer here]
c. Please describe how you manage supply issues, including any mitigation techniques:
[insert answer here]
d. Please describe how you will manage annual strain updates resulting from Medsafe recommendations. Please include an indicative timeline in your response:
[insert answer here]
e. Please describe the system that you have in place for vaccinators to place influenza vaccine orders.
[insert answer here]
Sustainability (Info Only)
a. How does your organisation contribute to environmental sustainability? Please include both in general, and in relation to the requirements in this contract:
[insert answer here]
b. Has your organisation received any environmental fines/prosecutions?
[insert answer here]
c. Does your organisation comply with any recognised environmental standards?

[insert answer here]

Modern Slavery	(Info Only)

a. Briefly describe the reasonable steps your organisation takes to identify, assess and address modern slavery in your operations and supply chains relevant to this contract:

[insert answer here]

b. Does your organisation perform due diligence screening of all prospective suppliers to assess the risk of modern slavery or other human rights harms that may occur in its operations and supply chains? If yes, please outline how this is managed:

[insert answer here]

c. Does your organisation comply with any recognised standards regarding modern slavery and worker exploitation?

[insert answer here]

Implementation	(Info Only)

a. Please outline how you will support Health New Zealand with any required implementation activities resulting from this RFP, if successful:

[insert answer here]

(v) **Price – Various Vaccines and the Influenza Vaccine**

RESPONDENT TIP

- This section relates to both Various Vaccines and the influenza Vaccine.
- Please do not submit any pricing information in this RFP Response Form. Instead, use the RFP Pricing Response form embedded below, or attached in the Attachments section on GETS.

- In your pricing information consider all risks, contingencies and other circumstances relating to the delivery of our Requirements and include adequate provision for them.
- Document any assumptions that you have made in costing the Requirements.
- Please submit a price for each vaccine based on current eligibility criteria. If you wish to submit a bid for widened access criteria, you must also bid for current eligibility criteria.

Price	Weighting 75%
Please provide the price for each vaccine included in your bid in the "Pricing Response Form". This form can be found in the "Attachments" section on GETS. Please remember to submit this form with the RFP Response Form, Vaccine Presentation Spreadsheet, and Medsafe Gazette Notice (if applicable) when you submit your proposal.	
[complete spreadsheet]	

5.1 Assumptions

RESPONDENT TIP

- An assumption is something that is accepted as true or as certain to happen without proof e.g. that Pharmac (or a third party) will provide certain information or assistance so that the Respondent can accurately cost and price its proposal.

Assumptions
Please state any assumptions you have made in relation to the cost and pricing information. Please specify by vaccine if you have made multiple bids.
[insert answer here]

(vi) **Proposed Contract**

RESPONDENT TIP

- The proposed contracts for Various Vaccines and the Influenza Vaccine can be found in the Attachments section on GETS. Pharmac needs to know whether you are prepared to do business based on the Proposed Contract.
- Please be aware that applicable contract terms may need to be adapted depending on the outcome of the RFP, for example clauses relating to PSS may need to be adapted in the influenza vaccine listing agreement if two vaccines are to be supplied.
- If you have any suggestions or changes that you wish to alter in the Proposed Contract, please note below (and you may be asked why it is important).
- In deciding which Respondents to shortlist Pharmac will take into account each Respondent's willingness to meet the Contract terms and conditions.

Choose one and delete the other:

Having read and understood the Proposed Contract, I confirm that these terms and conditions are acceptable. If successful, I agree to sign a Contract based on the Proposed Contract.

OR

Having read and understood the Proposed Contract in Section 5 of the RFP, I have the following suggestions to make. If successful, I agree to sign a Contract based on the Proposed Contract subject to negotiating the following clauses:

Clause	Concern	Proposed solution
[insert number]	[briefly describe your concern about this clause]	[describe your suggested alternative wording for the clause or your solution]
[insert number]	[briefly describe your concern about this clause]	[describe your suggested alternative wording for the clause or your solution]

(vii) **Declaration**

RESPONDENT TIP

- Here you are asked to make a formal declaration. Select 'agree' or 'disagree' at the end of each row. If you don't, you will be deemed to have agreed.
- Have the declaration signed by someone who is authorised to sign and able to verify the declaration, e.g. chief executive or a senior manager.

Respondent's declaration		
Topic	Declaration	Respondent's declaration
RFP Terms:	I/we have read and fully understand this RFP, including the RFP Terms. I/we confirm that the Respondent agrees to be bound by them.	[agree / disagree]
Requirements:	I/we have read and fully understand the nature and extent of Pharmac's Requirements. I/we confirm that the Respondent has the necessary capacity and capability to fully meet or exceed the Requirements and will be available to deliver throughout the relevant supply period.	[agree / disagree]
Ethics:	By submitting this proposal, the Respondent warrants that it: • has not entered into any improper, illegal, collusive or anti-competitive arrangements with any Competitor • has not directly or indirectly approached any representative of Pharmac (other than the Point of Contact) to lobby or solicit information in relation to the RFP • has not attempted to influence, or provide any form of personal inducement, reward or benefit to any representative of Pharmac.	[agree / disagree]

Conflict of Interest declaration:	The Respondent warrants that it has no actual, potential or perceived Conflict of Interest in submitting this proposal or entering into a Contract to deliver the Requirements. Where a Conflict of Interest arises during the RFP process the Respondent will report it immediately to Pharmac's Point of Contact.	[agree / disagree]
Details of conflict of interest:	[if you think you may have a conflict of interest briefly describe the conflict and how you propose to manage it or write 'not applicable'].	

DECLARATION BY THE RESPONDENT

I/we declare that in submitting the proposal and this declaration:

- the information provided is true, accurate and complete and not misleading in any material respect
- the proposal does not contain any material that will infringe a third party's intellectual property rights
- I/we have secured all appropriate authorisations to submit this proposal, to make the statements and to provide the information in the proposal and I/we am/are not aware of any impediments to enter into a Contract to deliver the Requirements.

  I/we understand that the falsification of information, supplying misleading information or the suppression of material information in this declaration and the proposal may result in the proposal being eliminated from further participation in the RFP process and may be grounds for termination of any Contract awarded as a result of the RFP.

By signing this declaration the signatory below represents, warrants and agrees that they have been authorised by the Respondent to make this declaration on its/their behalf.

Signature: _____

Full name: _____

Title/position: _____

Name of organisation: _____

Date: _____

Schedule 5: Proposed contract terms and conditions for supply of vaccines

Proposed contract terms and conditions for the Various Vaccines can be found in Attachment One. Please note that these terms only apply to Various Vaccines.

Proposed contract terms and conditions for the influenza vaccines can be found in Attachment Two. These contract terms and conditions are based on Pharmac's standard terms and conditions for listing pharmaceuticals on the Pharmaceutical Schedule. In addition, special terms have been included in the contract to cover specific requirements for influenza vaccines.