

## **Supplier Portal Security Authorization Form**

The CVS Supplier Portal is the website you, as a CVS Supplier, will use to access and maintain pricing information and to review invoices. To ensure the security of this site, CVS maintains stringent policies and standards related to access rights. Please provide us with the below requested information. CVS will not grant access rights to the DSD Vendor Portal until a completed form is returned.

You may type your name in the signature boxes which by doing so agree will serve as an electronic signature.

Company Name					
CVS Supplier #					
*CVS Supplier # is a 4-digit code beginning with an alpha character followed by 3 numbers. This is found on any remittance from CVS.					
Primary Requestor					

signature

Secondary Requestor				
Name				
Phone Number				
Email				
Signature:	signature			

<sup>\*</sup>The Primary and Secondary Requestor are authorized individuals at your company responsible for submitting names of approved employees who require access to the CVS Vendor Portal to perform work activities to fulfill this obligation. We request a primary and a backup requestor.

The Requestor is expected to notify CVS of any changes to access rights (e.g. employee with access rights leave the company, request for additional access rights, etc.) via the CVS Supplier Portal Hotline at (401) 770-4410.

	Internal Use Only
CVS Representative Submitting Form & Date	
Qualified Supplier (Yes or No)	
If Not Qualified, State Reason	
Corrected Supplier # (Yes or No)	
New Supplier (Yes or No)	



## **Access Acknowledgement**

In accepting CVS Supplier Portal access, you and your organization agree to the following terms:

- Any and all information, data, applications and computer infrastructure, which
  you are exposed to, either unintentionally or intentionally, are the property of
  CVS and is considered confidential.
- An ID and password will be assigned to the person noted below. This ID and its password are for this person only and as such are not to be shared with any other individuals in, or outside your organization.
- Access restrictions are granted based on Authorized Manager requests.
- All downloading or uploading of information must be authorized in advance.
- Probing CVS internal network servers and routers is forbidden.
- Unauthorized access to CVS internal network servers and routers is forbidden.
- Failure to comply with these requirements could result in the following:
  - Voiding of all CVS Contractual obligations.
  - Loss of remote access privileges.
  - Criminal and/or Civil Action against you and your organization.

The below listed individuals will access and utilize the CVS Supplier Portal to manage pricing and/or research invoice data.

Last Name	First Name	M. Initial	Phone Number	Email	Role (Options Below)	Signature User Agrees to CVS Access Acknowledgement
						signature
						signature
						signature
						signature
						signature
						signature
						signature
						signature
						signature
						signature

## Role Options:

- 1 Cost Management
- 2 Invoice Inquiry
- 3 Cost Management & Invoice Inquiry

You will be notified of your ID and password within 2 weeks of form submission. For questions, please call the CVS Supplier Portal Hotline at (401) 770-4410. Please continue to the DEX Questionnaire on the following page if attached.

Please forward saved & completed form to your FMM Admin for their approval. (FMM Listing is attached on page ))



## **DEX QUESTIONNAIRE**

Provided below is CVS DEX Info Comm. ID: 6138950000	ormation: DUNS Number:	00-178-6664	UCS Version:	004010HCS			
Please provide CVS with the vendo			OCC VCISION.	004010000			
Vendor DEX Information							
Vendor Name							
Vendor #							
Vendor COMM ID (10 digits)							
Vendor DUNS # (9 digits)							
Primary DEX Contact Inform	nation						
Name							
Phone Number							
Email							
If yes, your drivers are DEX capable please continue with the rest of the questionnaire. If no, your drivers are NOT DEX capable, you may skip the rest of the questionnaire and submit the form.  If YES drivers are DEX capable, please provide your current UCS version:  If YES drivers are DEX capable, do they deliver to another CVS store where they are able to DEX successfully?  YES  NO  If YES, your drivers DEX successfully at another CVS store, please provide:							
CVS Store #							
Address							
City			State				
Date of Recent Delivery							
If NO your drivers are DEX capable and do not currently deliver to another CVS store, please complete the information requested below providing preferred CVS store to perform the DEX certification testing process:							
CVS Store #							
Address							
City			State				

Please review the additional DEX information provided on the following page.





Additional DEX information can be found at the

CVS Suppliers website (http://www.cvssuppliers.com/) in the Download Library (http://www.cvssuppliers.com/download all).

The two documents relevant to CVS DEX are:

The DEX/UCS Template - http://www.cvssuppliers.com/sites/suppliers.sub.cvsc.addventures.com/files/Vendor%20DEX%20Template.pdf

CVS requires a DEX Certification Test to validate vendor DEX settings setup and software/hardware compatibility. The DEX test can potentially be performed at a local CVS store convenient to the vendor that is aligned to and serviced by the vendor in the CVS DSD Tool.

The CVS DEX test will typically consist of the following actions in production:

- Vendor Driver / Testing Representative transmits test invoice
- CVS Store Personnel simulates receiving the delivery and confirm delivery qtys
- Successful completion/closure of the invoice in the CVS system and DEX POD print out

It is recommended that for the DEX test the vendor please submit:

- At least 5 valid UPCs that are accepted by CVS during DSD delivery
  - o if supported using various units of measure
- If applicable/used by the vendor, items with allowance codes (be sure allowance codes validate)

While not required for DEX certification, the vendor may also want to perform a test credit / return transaction via DEX as well. Typically this portion of the test would essentially have a credit / return performed for the product simulated in delivery DEX transaction basically reversing the delivery.

The DEX test can be performed with a driver and an actual delivery or strictly with a vendor testing representative, but depending on the vendor's system a separate invoice may need to be prepared for the DEX test in advance. A separate invoice must be then be prepared for the actual delivery for the store to perform a receiver scan / detail check-in. In this case the store would be able to use the product from the actual delivery for the DEX test. Otherwise, the vendor or testing representative should please make sure to bring actual product for the store to scan for their portion of the DEX test or what many vendors will do is provide scan sheets with bar codes (which can be used only for TESTING purposes) for the store to scan for the CVS store side of the DEX.

All testing invoices will be deleted/reversed as they were used for testing purposes only. Successful DEX test invoices will be reviewed by CVS Accounts Payable to ensure there are not any issues. After the DEX test is submitted, DEX certification approval and maintenance to update the vendor receiving type to DEX can take 1-2 weeks.

CVS DEX Information:

Comm. ID: 6138950000 DUNS Number: 00-178-6664 UCS Version: 004010UCS

FMM ID	NAME	ADDRESS	PHONE #	FAX#	E-MAIL ADDRESS	AREA	REGIONS/DISTRICTS	BY STATE
FMM ID 1 - Assistant	Sharon Owens	127 South Main St. Ste. 200 Davidson, NC 28036	(704) 895-6368 x8015	(401) 216-0187	Sharon.Owens@CVSHealth.com	8	25, 27, 38, 39, 40	GA, KY, NC, SC, VA
FMM ID 3 - Assistant	Tiffanie Simmons	11729 Beltsville Drive Beltsville, MD 20705	(301) 572-4556	(401) 216-0466	Tiffanie.Simmons@CVSHealth.com	3	21, 22, 23, 24, 33	DC, DE, MD, OH, PA, VA, WV
FMM ID 4 - Assistant	Andrea Shepard	25 Blackstone Valley Place Suite 302 Lincoln, RI 02865	(401) 770-7109	(401) 652-9846	Andrea.Shepard@CVSHealth.com	1	2, 3, 11,13, 18, 30	CT, NH, MA, ME, NY, RI, VT, PA
FMM ID 5 - Assistant	Vicky Piazza	1920 Enterprise Parkway Twinsburg, OH 44087	(330) 487-6827	(401) 652-1758	Vicky, Piazza@CVSHealth.com	2	6, 7, 8, 9, 12, 79	DE, NJ, NY, PA
FMM ID 6 - Assistant	Marjorie Cooper	3501 East Frontage Road Concourse Center 1 Ste. 300 Tampa, Florida 33607	(401) 665-6619	(401) 652-9820	Marjorie.Cooper@CVSHealth.com	12	51, 61, 62, 63, 64	FL
FMM ID 7 - Assistant	Charlotte Dwigans	2800 Enterprise Street Indianapolis, IN 46219-0903	(401) 665-7325	(401) 652-0272	Charlotte.Dwigans@CVSHealth.com	7	34, 35, 36, 53, 57	IN IL KY MO TN VA WI MN MI
FMM ID 9 - Assistant	Colleen Sakosky	4901 Haggerty Rd, Bloomfield, Mi 48323	(401) 665-9625	(401) 216-3731	Colleen.Sakosky@CVSHealth.com	9	28, 31, 32, 41, 42	MI, OH, AL
FMM ID 10 - Assistant	Regina Wentworth	4808 Davis Blvd. N. Richland Hills, TX 76180	(817) 605-8901 x8032	(401) 652-1201	Regina.Wentworth@CVSHealth.com	4	59, 66, 67, 68, 69	TX, OK, LA, MS, AR
FMM ID 12 - Assistant	Sharon Goger	777 S. Harbor Blvd. Ste. E163 La Habra, CA 90631	(714) 681-5521	(401) 265-9539	Sharon.Goger@CVSHealth.com	14	52, 54, 60, 65, 72	AZ, NM, So. CA, So. NV
FMM ID 14 - Assistant	Cindy Grant	4424 Treat Blvd. Concord, CA 94521	(925) 695-2321	(401) 652-1926	Cynthia.Grant@CVSHealth.com	18	70, 73, 74, 77	IA, IL, KS, MN, MO, MT, ND, NE, No. CA, No. NV, WA, UT
PR	Maximino Rodriguez	Montehiedra Office Center 9615 Los Romero Ave. Suite 515 San Juan, PR 00926	(787) 708-3496		Maximino.Rodriguez@CVSHealth.com	17	71	Puerto Rico Hispanic Formats All
PR	Nyvette Marquez	Montehiedra Office Center 9615 Los Romero Ave. Suite 515 San Juan, PR 00926	(401) 665-3167		Nyvette.Marquez@CVSHealth.com	17	71	Puerto Rico Hispanic Formats Beauty, Baby & OTC
ні	Jon Higa	1025 Opakapaka St. Kapolei, HI 96707	(401) 665-3563	(401) 216-3755	Jon.Higa@CVSHealth.com	18	75	н