

LIMITED SOURCES JUSTIFICATION

**ORDER >\$3,000
FAR PART 8.405-6(g)**

2237 Transaction # or Vista Equipment Transaction #: 552-15-1-775-0003

This acquisition is conducted under the authority of the Multiple Award Schedule Program. The material or service listed in par. 3 below is sole source, therefore, consideration of the number of contractors required by FAR Subpart 8.4 – Federal Supply Schedules, is precluded for the reasons indicated below.

Restricted to the following source: Provide *original manufacturer's* name for material or contractor's name for service. (If a sole source manufacturer distributes via dealers, ALSO provide dealer information.)

Manufacturer/Contractor: Sysmex America Inc./V797D-40235

Manufacturer/Contractor POC & phone number: 800.462.1262

Mfr/Contractor Address: 577 Aptakistic Road, Lincolnshire, IL 60069

Dealer/Rep address/phone number: Savante Dunn, 224.543.9376

☒ The requested material or service represents the minimum requirements of the Government.

(1) AGENCY AND CONTRACTING ACTIVITY:

Department of Veterans Affairs
Network Contract Office (NCO) 10
3140 Governors Place Dr., Suite 210
Kettering, OH 45409

VISN: 10

(2) NATURE AND/OR DESCRIPTION OF ACTION BEING APPROVED:

Procurement is a firm-fixed price sole source requirement for supplies and reagents to operate current Sysmex equipment utilized in Hematology testing at Cost per Reportable at the Dayton VA Medical Center.

(3)(a) A DESCRIPTION OF THE SUPPLIES OR SERVICES REQUIRED TO MEET THE AGENCY'S NEED:

VA Medical Center Dayton, Ohio is requesting sole source procurement with Sysmex under FSS contract: FSS V797D-40235 to continue to provide supplies and reagents for Cost per Reportable Hematology testing the located at the Dayton VA Laboratory building 310 for October 1, 2014 to September 30, 2015.

(b) ESTIMATED DOLLAR VALUE: \$126,000

(c) REQUIRED DELIVERY DATE: 10/1/2014

(4) IDENTIFICATION OF THE JUSTIFICATION RATIONALE (SEE FAR 8.405-6), AND IF APPLICABLE, A DEMONSTRATION OF THE PROPOSED CONTRACTOR'S UNIQUE QUALIFICATIONS TO PROVIDE THE REQUIRED SUPPLY OR SERVICE.

☒ Specific characteristics of the material or service that limit the availability to a sole source (unique features, function of the item, etc.). Describe in detail why only this suggested source can furnish the requirements to the exclusion of other sources.

The requested supplies, equipment and reagents are specific to the current Sysmex equipment in use at the Dayton VA Medical Center.

☒ The material/service must be compatible in all aspects (form, fit and function) with existing systems presently installed/performing. Describe the equipment/function you have now and how the new item/service must coordinate, connect, or interface with the existing system.

The supplies and reagents are specific to the current equipment, Sysmex which can only be provided by Sysmex America Inc.

(5) DESCRIBE WHY YOU BELIEVE THE ORDER REPRESENTS THE BEST VALUE CONSISTENT WITH FAR 8.4 TO AID THE CONTRACTING OFFICER IN MAKING THIS BEST VALUE DETERMINATION:

The items/services are on FSS/NAC contract # V797D-40235

According the FAR 8.404 – Use of Federal Supply Schedules, section (d) Pricing. Supplies offered on the schedule are listed at fixed prices. Services offered on the schedule are priced either at hourly rates, or at a fixed price for performance of a specific task (e.g., installation, maintenance, and repair). GSA has already determined the prices of supplies and fixed-price services, and rates for services offered at hourly rates, under schedule contracts to be fair and reasonable. Therefore, ordering activities are not required to make a separate determination of fair and reasonable pricing, except for a price evaluation as required by 8.405-2(d). By placing an order against a schedule contract using the procedures in 8.405, the ordering activity has concluded that the order represents the best value (as defined in FAR 2.101) and results in the lowest overall cost alternative (considering price, special features, administrative costs, etc.) to meet the Government's needs.

Additionally, the estimated cost for the cost reportable supplies and reagents is unchanged from the last two years.

(6) DESCRIBE THE MARKET RESEARCH CONDUCTED AMONG SCHEDULE HOLDERS AND THE RESULTS OR A STATEMENT OF THE REASON MARKET RESEARCH WAS NOT CONDUCTED:

No market survey conducted. This procurement is to continue uninterrupted services available on VA FFS contract V797D-40235

(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION: None.

(8) A STATEMENT OF THE ACTIONS, IF ANY, THE AGENCY MAY TAKE TO REMOVE OR OVERCOME ANY BARRIERS THAT LED TO THE RESTRICTED CONSIDERATION BEFORE ANY SUBSEQUENT ACQUISITION FOR THE SUPPLIES OR SERVICES IS MADE:

Requirement is restricted due to previous competitive procurement which resulted in the procurement of Sysmex analyzers, supplies, and reagents. All subsequent procurements of this nature must be Sysmex due to the compatibility requirements. In the future, the agency will continue to review the market to evaluate if more than one responsible vendor exists that could provide a similar system, software, and service.

(9) REQUIREMENTS CERTIFICATION: I certify that the requirement outlined in this justification is a Bona Fide Need of the Department of Veterans Affairs and that the supporting data under my cognizance, which are included in the justification, are accurate and complete to the best of my knowledge. I understand that processing of this limited sources justification restricts consideration of Federal Supply Schedule contractors to fewer than the number required by FAR Subpart 8.4. *(This signature is the requestor's supervisor, fund control point official, chief of service or someone with responsibility and accountability.)*

_____ SIGNATURE		_____ DATE
<u>Monica Haworth</u> NAME	<u>Laboratory Manager</u> TITLE	<u>Pathology & Laboratory Medicine</u> SERVICE LINE/SECTION
<u>Dayton VAMC</u> FACILITY		

(10) APPROVALS IN ACCORDANCE WITH FAR 8.405-6(h):

a. CONTRACTING OFFICER'S CERTIFICATION (required): I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.

_____ CONTRACTING OFFICER'S SIGNATURE	_____ DATE
<u>JASON E LAWSON, CONTRACTING OFFICER</u> NAME AND TITLE	<u>Dayton VAMC</u> FACILITY

c. NCM/PCM/DESIGNEE: I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.

_____ SIGNATURE	_____ DATE
TERRY SPITZMILLER DIRECTOR OF CONTRACTING NETWORK CONTRACTING OFFICE (NCO) 10	