

LIMITED SOURCES JUSTIFICATION

ORDER >\$3,000

FAR PART 8.405-6

2237 Transaction # or Vista Equipment Transaction #: 657-15-1-2750-0031

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: Toshiba America Medical Systems

Manufacturer/Contractor POC & phone number: Bob Nitsch 314-809-7287

Mfgr/Contractor Address: 1965 Evergreen Blvd Suite 300 Duluth, GA. 30096-1208

Dealer/Rep address/phone number: Bob Nitsch Area Service Director 314-809-7287

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

(1) AGENCY AND CONTRACTING ACTIVITY:

Department of Veterans Affairs

Marion VA Medical Center

2401 West Main St.

Marion, IL 62959

VISN:

15

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

This service agreement will provide parts, labor, testing, and calibration to maintain two (2) Toshiba Aquilion CT scanners. Machine one is an Aquilion 64 Slice CT scanner and machine two is an Aquilion 32 Slice CT scanner. This will be a firm-fixed price task order against NAC contract V797P-6033B. The contractor shall provide all labor, personnel, equipment, tools, materials, and services necessary to maintain the Toshiba CT scanners as defined in this Statement of Work (SOW) to the John J. Pershing VA Medical Center in Marion, Illinois. The current maintenance agreement will expire on January 31, 2015. The Marion VA Medical Center is requesting a procurement of a Base Year with Four Option Years for the service.

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

This service is for the procurement of a service contract to perform on-site preventative maintenance and repairs to ensure that the two CT scanners are operational and meet NFPA-99, OSHA, and CDRH specifications. The equipment is located at the Marion VA Medical Center 2401 West main, Marion, IL. 62959.

Total estimated cost for these services is \$124,020.00 per year. This will be a base year with four additional option years for a total price of approximately \$620,100.00.

(b) ESTIMATED DOLLAR VALUE: \$124,020.00 per year. This will be a base year with four additional option years for a total price of approximately \$620,100.00.

(c) REQUIRED DELIVERY DATE: January 31, 2015.

(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 system can only be serviced by the Toshiba America Medical Systems which is the Original Equipment Manufacturer of the Aquilion equipment. In order to troubleshoot and repair the equipment, access to Toshiba diagnostic software is required. This diagnostic software is proprietary and available only through Toshiba.

☒ A patent, copyright or proprietary data limits competition. The proprietary data is:
(If FAR 8.405-6(a)(2)iii

Toshiba is the Original Equipment Manufacturer of the Aquilion CT scanners, which is a Toshiba America Medical Systems (TAMS) proprietary product, covered by TAMS patents and other intellectual property rights. TAMS maintains certain proprietary service technologies relating to the equipment.

☐ These are "direct replacements" parts/components for existing equipment.

☐ 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.

N/A

☐ The new work is a logical follow-on to an original Federal Supply Schedule order provided that the original order was placed in accordance with the applicable Federal Supply Schedule ordering procedures. The original order must not have been previously issued under sole source or limited source procedures.

N/A

☐ An urgent and compelling need exists, and following the ordering procedures would result in unacceptable delays.

N/A

(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:

As this is a task order under an FSS contract, the prices are already determined to be fair and reasonable and no separate determination of fair and reasonable pricing need be made. FAR 8.404(d).

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

In accordance with FAR Part 10.002, market research was conducted to identify any other potential sources for the above mentioned requested items and services. Market research was conducted with current award, previous awards, a search of other VISN contracts within the VHA and other agency contracts available on the Federal Business Opportunities (FBO) website. Also, a search was initiated on the VetBiz.gov website that yielded no results, nor did an SBA Dynamic Small Business Search or a general internet search. All of the contracts for maintenance (both VHA and other agency) on this type of Toshiba equipment were procured using the authority in FAR 6.302-1. The market research substantiates the requesters claim that TAMS is the only contractor that can perform this work due to the propriety nature of the replacement parts and diagnostic software that must be utilized in performance this contract.

(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION:

The current warranty will expire on January 1, 2015. This is a major medical system that is critical to the healthcare delivery capabilities of this facility. If the requested service and maintenance are not performed serious damage to the system could occur because of the inability to predict system malfunctions. Because of the critical diagnostic nature (possibly lifesaving) of this medical system and the need to have it operationally available, without which will cause considerable delays, loss of communications between the caregiver and the patient and possibly substantial duplication of cost to the government.

(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:

None

(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

Kenneth Holup

NAME

Marion VA Medical Center

FACILITY

Biomedical

TITLE

DATE 12/29/14

Engineering

SERVICE LINE/SECTION

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

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

KEVIN C. WALLACE, Contracting Officer

NAME AND TITLE

DATE

NETWORK 15 CONTRACTING OFFICE

FACILITY

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

SIGNATURE

CHRISTINE L. SCENA

NAME

NETWORK CONTRACT MANAGER

NETWORK 15 CONTRACTING OFFICE

DATE

QA Reviewed