

**JUSTIFICATION FOR SINGLE SOURCE AWARDS IAW FAR 13.106-1**  
(OVER MICRO-PURCHASE THRESHOLD(\$3K) BUT NOT EXCEEDING THE SAT (\$150K))

IAW [FAR13.104](#), COs must promote competition to the maximum extent practicable to obtain supplies and services from the source whose offer is the most advantageous to the Government, considering the administrative cost of the purchase. When competition is not practicable, IAW [FAR13.106-1\(b\)](#), COs solicit from a single source for purchases not exceeding the simplified acquisition threshold. COs may solicit from one source if the CO determines that the circumstances of the contract action deem only one source reasonably available (e.g., urgency, exclusive licensing agreements, brand-name or industrial mobilization). IAW [FAR13.106-3\(b\)\(3\)](#), COs are required to include additional statements ***explaining the absence of competition*** (see [13.106-1](#) for brand name purchases) if only one source is solicited and the acquisition does not exceed the simplified acquisition threshold (does not apply to an acquisition of utility services available from only one source) or supporting the award decision if other than price-related factors were considered in selecting the supplier. This template when completed can be used to document single source awards IAW [FAR13.106-3\(b\)\(3\)](#). Note: Statements such as "only known source" or "only source which can meet the required delivery date" are inadequate to support a sole source purchase.

**1. PURCHASE REQUEST OR REQUISITION  
NUMBER:**

766-15-4-400-0973

**1A. PROJECT/TASK NUMBER**

**1B. ESTIMATED AMOUNT:**

\$ [REDACTED]

**2. BRIEF DESCRIPTION OF SUPPLIES OR SERVICES REQUIRED AND THE INTENDED USE:**

- HYPROMELLOSE 0.5% OPH SOLN 15ML—ISOPTO TEARS LUB EYE DROPS—H0433—NDC 00998-0408-15 or 05639-4004-08
- LACTASE 250MG CAPS, 100-COUNT—LACTRASE 250MG CAPSULES—L0302—NDC 00091-3505-01
- NEFAZODONE 200MG TABS, 60-COUNT—NEFAZODONE 200MG TABLETS—N0245—NDC 00093-1025-06
- ARTIFICIAL SALIVA, 240ML—MOUTHKOTE SPRAY 8OZ—S0002—NDC 05093-0098-08

**3. UNIQUE CHARACTERISTICS THAT LIMIT AVAILABILITY TO ONLY ONE SOURCE, WITH THE REASON NO OTHER SUPPLIES OR SERVICES CAN BE USED:**

The products listed above are being requested to fill prescriptions where the clinical provider specifically requested this brand for the veteran. When prescriptions are entered as "Dispense as Written" the pharmacy is not allowed to substitute any other brand in place of the prescribed Product, but can only fill the prescription with the brand that was ordered by the clinician.

**4. REASON THAT SUGGESTED SOURCE IS THE ONLY SOURCE, WHICH CAN PROVIDE THE SUPPLIES OR SERVICES:**

"Brand Specific" products are the same thing as "dispense as written" on a physician prescription. No NDC substitutions are permitted. In the VA, Pharmacy Benefits Management (PBM) has determined that CMOP IDs in the National Drug File (NDF) will most always identify "brand specific" products in the VA Print Name. This is not always inclusive where a particular NDC has been determined to be "formulation specific" by clinical evaluation performed by the PBM or in the case where only one product in the marketplace has been identified to contain the specific ingredients to match the product code.

**5. DESCRIPTION OF MARKET RESEARCH CONDUCTED AND RESULTS OR STATEMENT WHY IT WAS NOT CONDUCTED:**

A search of the National Acquisition Center Contract Catalog Search Tool and GSA Advantage did not yield results showing the required name brands ISOPTO TEARS LUBRICANT EYE DROPS, LACTRASE 250MG CAPSULES, NEFAZODONE 200MG TABLETS OR MOUTHKOTE SPRAY.

**6. Contracting Officer's Certification:** *Purchase is approved in accordance with FAR13.106-1(b). I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Facility:** \_\_\_\_\_