LIMITED SOURCES JUSTIFICATION
ORDER >$3,000
FAR PART 8.405-6(g)

2237 Transaction # or Vista Equipment Transaction # 528-13-3-3515-0010

This acquisition is conducted under the authority of the Multiple Award Schedule Program. The material or service listed in par. 3 below is Limited Source procurement, 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:
Manufacturer/Contractor: Care fusion Solutions   V797P4012B
Manufacturer/Contractor POC & phone number: Lisa Impens (847)473-7472
Mfgr/Contractor Address: 3750 Torrey View Court; San Diego CA 92130
Dealer/Rep address/phone number: N/A

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

(1) AGENCY AND CONTRACTING ACTIVITY:

Department of Veterans Affairs
800 Irving Ave
Syracuse, NY 13210

VISN: 2

(2) NATURE AND/OR DESCRIPTION OF ACTION BEING APPROVED:
Non-competitive delivery order with Care Fusion, a large business contractor. Contract will cover supplying twenty eight stationary medication stations, 1 medication console-server, 1 Clinical Care-Fusion Engine Interface. The automated dispensing units and other items provided will be deployed to the general medical wards, general surgical wards, ICU, ED, Rome Outpatient Clinic, Binghamton Outpatient Clinic, Watertown Outpatient Clinic, Spinal Cord Injury Unit, Pharmacy, Biomed/IT and procedure areas (endoscopy-bronchoscopy) located in the Spinal Cord Injury building as appropriate.

(3) (a) A DESCRIPTION OF THE SUPPLIES OR SERVICES REQUIRED TO MEET THE AGENCY'S NEED:
The supplies being purchased are listed below:
    Albany:
        A. Upgrade 30 automated medication dispensing units & console
            • Medication Stations - 6 drawer/5 cubie Profile/BioID units x 5
            • Medication Stations - 4 drawer/3 cubie Profile/BioID units x 6
            • Medication Stations - 6 drawer/5 cubie BioID units x 3
            • Medication Stations - 4 drawer/3 cubie BioID units x 3
            • Medication Stations - 2 drawer/2 cubie BioID units x 4
            • Medication Stations - 7 drawer aux/6 cubie x 5
            • Medication Station - Single Column Aux/4 doors x 2
            • CIISafe - DI Main/1 RAD/XP V7/ Exp dt trk/7 door BioID x 1
            • Double Column Narc Vault Aux - 8 doors x 1

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- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1
  (Inpatient order profile communication)

B. Expansion
- Medication PWorkstation – printer, monitor, UPS x 1
- Medication Station - 2 drawer/2 cubie Profile/BioID unit x 1
- Medication Station - Single Column Aux/4 doors x 1
- Smart Remote Manager – Med x2
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1 (CBOCs)
  (Outpatient order profile communication)
- Medication Stations - 4 drawer/3 cubie Profile/BioID units x 11 (CBOCs)
- Codonics SLS500i Safe Label System, unit x9

C. Connections
- Provide Connectivity to the current Pyxis Anesthesia 3500 units and one central server
  and interface
- Interface connection to Syracuse CCE for all units for the entire facility that is
  compatible with the existing Anesthesia 3500 Pyxis units and will also interface with the
  Alaris 8015 Pumps
- Provide interface between CBOC designated units and the Outpatient package in VISTA
  for Profile capability for outpatients

Bath:

A. Upgrade 18 automated medication dispensing units & console
- Medication Stations - 6 drawer/5 cubie Profile/BioID units x 8
- Medication Stations - 2 drawer/2 cubie Profile/BioID units x 1
- Medication Stations - 6 drawer aux/5 cubie BioID units x 8
- Medication Station - Single Column Aux/2 doors x 1
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1
  (Inpatient order profile communication)

B. Expansion
- Medication PWorkstation - printer, monitor, UPS x 1
- Smart Remote Manager – Med x7
- Medication Stations - 4 drawer/3 cubie Profile/BioID units x 2 (CBOCs)
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1 (CBOCs)
  (Outpatient order profile communication)
- Codonics SLS500i Safe Label System, unit x1

C. Connections
- Interface connection to Syracuse CCE for all units for the entire facility that will also
  interface with the Alaris 8015 IV Smart Pumps
- Provide interface between CBOC designated units and the Outpatient package in VISTA
  for Profile capability for outpatients

Canandaigua:

   A. Upgrade 15 automated medication dispensing units & console
- Medication Stations - 6 drawer/5 cubie Profile/BioID units x 2
- Medication Stations - 4 drawer/4 cubie/perm bin drw Profile/BioID units x 6
- Medication Stations - 2 drawer/2 cubie BioID units x 1
- Medication Stations - 7 drawer aux/6 cubie x 1
- Medication Stations - 6 Drawer aux/5 cubie x 6
- Medication Station - Single Column Aux/4 doors x 1
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1 (Inpatient order profile communication)

   B. Expansion
- Medication PWorkstation – printer, monitor, UPS x 1
- Codonics SLS500i Safe Label System, unit x1

   C. Connections
- Interface connection to Syracuse CCE for all units for the entire facility that will also interface with the Alaris 8015 Pumps

Batavia:

   A. Expansion
- Medication Station - 2 drawer/2 cubie Profile/BioID unit x 1
- Smart Remote Manager – Med x1

   B. Connections
- Provide Connectivity to the current Buffalo Pyxis System and one central server and interface
- Interface Buffalo/Batavia System connection to Syracuse CCE that will also interface with the Alaris 8015 Pumps

Buffalo:

   A. Expansion
- Medication Stations - 4 drawer/3 cubie Profile/BioID units x 7 (CBOCs)
- Codonics SLS500i Safe Label System, unit x15
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1 (CBOCs) (Outpatient order profile communication)

   B. Connections
- Provide Connectivity to the current Buffalo Pyxis System and one central server and interface
- Interface Buffalo/Batavia System connection to Syracuse CCE that will also interface with the Alaris 8015 Pumps
- Provide interface between CBOC designated units and the Outpatient package in VISTA for Profile capability for outpatients

Syracuse:

    A.   Expansion
- Scanner for 3500 A-carts   x 11
- Medication Stations - 4 drawer/3 cubie Profile/BioID units x 5 (CBOCs)
- 1 Profile console - 1 server for all units/printer, monitor, UPS x 1 (CBOCs) (Outpatient order profile communication)
- Codonics SLS500i Safe Label System, unit x13

    B.   Connections
- Provide Connectivity to the current Buffalo Pyxis System and one central server and interface
- Provide interface between CBOC designated units and the Outpatient package in VISTA for Profile capability for outpatients

(b) ESTIMATED DOLLAR VALUE: $

(c) ESTIMATED AWARD DATE: 6/28/2013

(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). Describe in detail why only this suggested source can furnish the requirements to the exclusion of other sources.

The VISN 2 Medical Centers are seeking to purchase an Automated Medication Dispensing System, referred to as a point-of-use system. The system must automate the distribution, management, and control of medications. The system must provide communication and access to medications in a manner that supports nursing and pharmacy's ability to work in an efficient manner. The configuration should include a network of secure-medication storage units; allow locations in patient care areas throughout the hospital. The network of secured storage units must accommodate the medication needs of the emergency department, medical/surgical wards, intensive care unit, ORs, procedure areas, and outpatient clinics. The system must be compatible with and integrate seamlessly with other point-of-use systems within the facility, including the current Anesthesia Pyxis 3500 units. The system must provide an interface that would support the integration of other medication delivery related technologies (i.e. Alaris 8015 Pump System) for the purpose of report generation and data management. The system must have the ability to integrate with other automated dispensing systems within VISN2 and provide an interface that would support facilities within VISN 2.

The system must streamline medication distribution and inventory management practices and provide needed routine reporting. Available Reports related to the safe, accurate, and timely stocking, withdrawal, return and wasting of medications must be inherent to the system. The system is required to provide pharmacy an automated process and reporting system that efficiently supports the pharmacy in replacing medication inventories.

Medication orders and order status must be transmitted electronically so information is easily accessible. The system must support Joint Commission compliance and meet FDA requirements for the technology involved. The point of use system must protect against unauthorized access, document use, and integrate pharmacist order review by interacting with both the inpatient and outpatient medication electronic ordering systems currently used by the facilities. The point of use system must be compatible with the current Pandora software used by the facilities to provide controlled substance quality assurance reports and the system must also provide its own management/tracking of all controlled substance practices as required by facility policies (IE, removal, wasting, and return) and federal regulation. System must remind/alert nurses if they have controlled substance waste that has not been documented with regard to a prior controlled substance removal.

The automated system or device should provide inherent safety features of unit-dose drug distribution systems. Required safety features include that medications are contained in, and administered from, single-unit or unit-dose packages. The automated system or device should support medications being dispensed in ready-to-administer form to every extent possible. The system will ensure that medications are available for administration to the patient only at the time at which they are to be administered and according to facility policies. The system will provide an electronic patient medication profile that is maintained for each patient, is easily accessible to the identified health care professional and must integrate with the pharmacy computerized medication ordering system (VISTA) both for inpatients and outpatients (at CBOCs). Profiling functionality should include transmission of all components of medication and i.v. orders, including drug, dose and/or infusion rate, route, frequency, dosing schedule, and order start/stop times. Profiling capability must ensure that all patient care areas use the profiling functionality, including ambulatory and outpatient areas such as the emergency department, whenever possible. The profiling capability must limit the variety and quantity of medications that are accessible without pharmacist review (override). The system must provide the option to require a double-check (witness) at the time of dispensing of an identified high-alert medication from automated devices. The system must have the ability to block the loading of identified medications from specific automated dispensing units.

The system will ensure that medications are accessible to different categories of health care professionals with the ability to limit access based on facility policy or federal law. The system will contain the needed technology to use fingerprint scanning as a form of access and also support the utilization of BCMA during stocking and/or removal of medications from the involved unit.

The automated systems or devices should ensure safe medication storage, distribution, access, and use wherever they are deployed, including meeting required environmental conditions for the storage and handling of medications. The automated system must have the capability of tracking medication expiration dates and electronically provide pharmacy the needed information to identify and replace inventories before expiration.

The automated dispensing system must interface with the VA pharmacy computerized medication ordering-dispensing software system (VISTA). The interfaces must meet HL7 standards and must be easily customizable and provide a mechanism for thorough testing prior to implementation.

We need to continue with Care Fusion - Pyxis due to:

- Fleet Standardization
  - Will be standardized in the ORs and throughout the facilities. Tertiary Center ORs already have Pyxis without plans to change. This improves patient safety by requiring clinical staff to only need to know one kind of automated dispensing unit for care.
  - Fleet standardization has many advantages
    - We have Care fusion equipment for most of our automated medication dispensing units
    - Brands will not interface with each other
    - We have the infrastructure to connect all areas with no major construction or IT related costs.
    - We will be able to connect our separate Anesthesia 3500 Pyxis Units and Pyxis 4000 units on to the same server at each facility. This avoids having to maintain two different systems and servers.
    - Clinical and Bio Med staff members are fully trained in use of Pyxis equipment.
    - Equipment will fit into current enclosures, racks, and room bedsides. Electrical utilities and data lines are already installed. This limits the amount of in-house infrastructure work that must be completed for installation of new equipment.
    - Reduction in the number of contractors, contracts and vendors servicing, maintaining, troubleshooting and repairing this equipment (reduces inventory management and technology oversight) is also a benefit.
    - Continuity/Familiarity: we have been using Pyxis automated dispensing units throughout the VISN 2 facilities. Nursing staff, Pharmacy staff, Biomed, and IT are familiar with the product and having one unified system will maximize efficiencies for all stakeholders and support patient safety.

  - Connectivity to the VA Systems
    - Is compatible to and will provide Connectivity to our hospital Data System

(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:

These automated dispensing units are made by Care fusion Solutions and are supplied via GSA Contract V797P-4012B. This order presents the best value as it is the same equipment already standardized across platforms at the local level. The savings comes in the ease of support for local support systems since staff is familiar with current systems and how to troubleshoot. Additionally, upgrading existing equipment affords the added benefit of allowing trade-in credits for the older units, significantly defraying the cost of purchasing new from scratch.

Best value is also realized by an avoidance of costs related to start up, training, and maintenance of additional systems. The costs associated with training staff: man-hours for clinical staff, technical training for biomedical staff, as well as the potential for an additional line-item cost for on-site training for a different brand name item. The cost for staff training as well as maintenance costs could reach thousands of dollars in direct and indirect costs if VISN 2 facilities were to purchase a product from a vendor other than the Pyxis 4000 upgrades.

A cost analysis was conducted by the customer to compare the VISN's already existing infrastructure and weighing the overall costs with purchasing a whole new, VISN-wide system from another manufacturer. The following was an estimated cost breakdown of retrofitting VISN 2 with another product line:

On the other hand, another cost analysis was conducted to show the VISN's already existing Pyxis 3500/4000 inventory and the costs associated with upgrading and expanding the existing system:

VISN 2	Inventory	Upgrade	Expansion	Total

To date, there is an estimat   ed in Pyxis 3500/ 4000 technology. By completing the purchase for the VISN and allowing each site to upgrade and/ or expand as needed, the VISN   its VISN wide medication dispensing standardization efforts. This effort will require the estimated

If a new system were to be introduced, it is estimated to cost roughly   start-up costs and product re-procurement. Lastly, th   existing   inventory would be wasted thereby costing the government an additional   if a new system were to be procured and installed VISN-wide.

Lastly, this order is in compliance with the VA National Acquisition Center in Federal Supply Classifications of group 65. FSC 65 is a mandatory source of supply which must be utilized if the required items are available. (FAR part 808.002(a)(3). GSA FSS Pricing is already determined to be Fair and Reasonable.

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

Research was conducted amongst all contract holders on FSS schedule 65. Many vendors were found that could potentially provide an alternative solution to the requirement.

(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION:
A review of the requirement with the vendor will be conducted to determine opportunities for cost savings.

contract pricing.

SUPPLIES OR SERVICES IS MADE:

The Contracting office and Pharmacy will continue to evaluate alternative opportunities for its medstation needs. Although current market research indicates that that there are no known, 100% compatible solutions at this time, all efforts will be made to find alternative solutions for future requirements. The VA will continue to monitor and survey the market for and existing, VA and FDA approved (510) solutions.

(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.

(10) APPROVALS IN ACCORDANCE WITH FAR 8.405-6(d)(2): For a proposed order or BPA with an estimated value exceeding $650,000, but not exceeding $12.5 million, the justification must be approved by the competition advocate of the activity placing the order, or by an official named in paragraph (d)(3) or (d)(4) of this section. The authority is not delegable.

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