

HODZEA

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

# Request for Quotation

SH-P

T O REH90010

PAG	3 <b>E</b>
	1

\*\*\*\*\*\*\*ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

RFQ COPY TYPE NAME/ADDRESS HERE

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL STREET

WELCH, WV 24801

DATE PRIN	ΓΕD	TEI	RMS OF SAI	F	SHIP VIA		5	0.8	FREIGHTTERMS
05/14/2008									
BID OPENING DATE: 06/12		06/12/				BID	OPENING TIME 01:30PM		
LINE	QUA	NTITY	UOP	CAT.	ITEM NUMBI	E <b>R</b>	UNI	TPRICE	AMOUNT
		OF	EN-EN	D BLA	NKET CONTRA	ACT			
0001	OPEN E	1 END CON	JB ITRACT		193-12 Hematology	REAGE	NTS FOR	AUTO-	
	DETECT WILL F ANALYZ CHARGE MUST T WILL F VENDOR MAINTA FACILT CONSUN	FION OF PROVIDE PROVIDE POR LESS OF THE PROPERTY TO	THE TWO YSMEX SE WI A CO INED RETAI ANAL USE T FOR T	SPECI (2) N XT-2 TH TH MPUTE AND M N OWN YZERS HEM W HE LI	PERFORM EXTENDED FIED METHOMETHOME OF THE METHOMETHOME OF THE METHOMETHOME OF THE METHOME OF THE METHOMETHOME OF THE METHOMETHOME OF THE METHOMETHOME OF THE METHOMETHOMETHOMETHOMETHOMETHOMETHOMETHO	DS. SEUTOMATAL, ATD REAG, PRINBY THE ANGORDE	LECTED NED HEMAT NO ADDIENTS. THER, ETO VENDOR. ALYZERS R TO ALL D REAGEN	VENDOR TOLOGY TIONAL HIS SYSTE C., WHICH THE AND WILL LOW THE	
	LIFE C	T 3	RACT:	AN	IS CONTRACT	FOR A	PERIOD (		
SIGNATURE				oce HE	VERSE SIDE FOR TER TE	MS AND GOT LEPHONE	NUTHORNS	DATE	
TITLE		F	EIN				ADI	RESS CHANGES	TO BE NOTED ABOVE

# GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. All quotations are governed by the West Virginia Code and the Legislative Rules of the Purchasing Division.
- Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125.00 registration fee.
- 5. All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the term of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
- 6. Payment may only be made after the delivery and acceptance of goods or services.
- 7. Interest may be paid for late payment in accordance with the West Virginia Code.
- 8. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
- **12.** Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- **13. BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, this Contract may be deemed null and void, and terminated without further order.
- 14. HIPAA Business Associate Addendum The West Viginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (http://www.state.wv.us/admin/purchase/vrc/hipaa.htm) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Covered Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.

#### **INSTRUCTIONS TO BIDDERS**

- 1. Use the quotation forms provided by the Purchasing Division.
- 2. SPECIFICATIONS: Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as EQUAL to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Complete all sections of the quotation form.
- 4. Unit prices shall prevail in cases of discrepancy.
- 5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 6. BID SUBMISSION: All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications.

#### SIGNED BID TO:

Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130



VEZDOR

RFO COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

### Request for Quotation

WEH90010

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

OH-P

Ť

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

304-436-8710

SHIP VIA DATE PRINTED TERMS OF SALE F.O.B. FREIGHTTERMS 05/14/2008 BID OPENING DATE: 06/12/2008 BID OPENING TIME 01:30PM LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT YEAR OR UNTIL SUCH "REASONABLE TIME" THEREAFTER AS IS NECESSARY TO OBTAIN A NEW CONTRACT OR RENEW THE ORIGINAL CONTRACT. THE "REASONABLE TIME" PERIOD SHALL NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE. UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT. RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE (1) YEAR PERIODS. CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICE SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN. OPEN MARKET CLAUSE: THE DIRECTOR OF PURCHASING MAY AUTHORIZE A SPENDING UNIT TO PURCHASE ON THE OPEN MARKET, WITHOUT THE FILING OF A REQUISITION OR COST ESTIMATE, ITEMS SPECIFIED ON THIS CONTRACT FOR IMMEDIATE DELIVERY IN EMERGENCIES DUE TO UNFORESEEN CAUSES (INCLUDING BUT NOT LIMITED TO DELAYS IN TRANS-PORTATION OR AN UNANTICIPATED INCREASE IN THE VOLUME OF WORK.) SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE **FELEPHONE** TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

# Request for Quotation

8 H P

Ţ

WEH90010

PAGE 3

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

RFC	COPY	
TYPE	NAME/ADDRESS	HERE

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

DATE PRIN	TED TERMS OF	SALE SHIP VIA	FOB.	FREIGHT TERMS
05/14/	2008			
BID OPENING DATE:	06/12/200	8	BID OPENING TIME	01:30PM
LINE	QUANTITY UO	P CAT. ITEM NUMBER	UNIT-PRICE	AMOUNT
	1 - 1 -	NTITIES LISTED IN T	1 *	
		ONLY, BASED ON ESTI		_
		ING UNIT. IT IS UN		
		CT SHALL COVER THE		
	1	IVERY DURING THE TE LESS THAN THE QUAN		,
	MILITER MORE OR	LESS THAN THE QUAN	TITLES SHOWN.	
	ORDERING PROCED	URE: SPENDING UNITO	S) SHALL ISSUE A	
	1	ONTRACT ORDER (FORM	3	
	1	COMMODITIES COVERED	· · · · · · · · · · · · · · · · · · ·	
	THE ORIGINAL CO	PY OF THE WV-39 SHA	LL BE MAILED TO TH	E
	1	RIZATION FOR SHIPME	· •	
	I I	URCHASING DIVISION,	AND A THIRD COPY	
	RETAINED BY THE	SPENDING UNIT.		
	DANKBURTON. TH	THE EMPLIE THE MEANS	OR CONTRACTOR FILE	
	1	THE EVENT THE VEND PROTECTION, THIS CO	l l	1
	t t	VOID, AND IS TERMIN	1	1
	ORDER.	VOID, AND 13 TERMIN	ATED WITHOUT TOKING	
	THE TERMS AND C	CONDITIONS CONTAINED	IN THIS CONTRACT	
		ANY AND ALL SUBSEQ		
		H MAY APPEAR ON ANY		
	DOCUMENTS SUCH	AS PRICE LISTS, ORD	ER FORMS, SALES	
		IAINTENANCE AGREEMEN	TS, INCLUDING ANY	
	ELECTRONIC MEDI	UM SUCH AS CD-ROM.		T. T
	REV. 04/11/2001			
	INQUIRIES		•	
	,	INS SHALL BE ACCEPTE	D THROUGH CLOSE OF	Lucia
	BUSINESS ON	1 1	STIONS MAY BE	3.
		FAX, COURIER OR E-M		The state of the s
		RECEIVES AN UNFAI		
		STIONS WILL BE ANSW		Torontaine
	PUSSIBLE, E-MAI	L QUESTIONS ARE PRE	HERRED. ADDRESS	
		SEE REVERSE SIDE FOR TERMS	AND CONDITIONS	
SIGNATURE		(TELEP)	IONE D	ATE
TITLE	FEIN		ADDRESS CHAM	IGES TO BE NOTED ABOVE
L				



RFO COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

### Request for Quotation

REH90010

PAG	3E	
	4	

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

SH-P TO

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

304-436-8710

DATE PRINTED TERMS OF SALE SHIP VIA FO.B. FREIGHT TERMS 05/14/2008 BID OPENING DATE: 06/12/2008 **OPENING TIME** 01:30PM CAT QUANTITY LINE UOP ITEM NUMBER UNIT PRICE AMOUNT INQUIRIES TO: ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25311 FAX: 304-558-4115 E-MAIL: ROBERTA.A.WAGNEROWV.GOV EXHIBIT 4 LOCAL GOVERNMENT BODIES: UNLESS THE VENDOR INDICATES IN THE BID HIS REFUSAL TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO COUNTY, SCHOOL, MUNICIPAL AND OTHER LOCAL GOVERNMENT BODIES, THE BID SHALL EXTEND TO POLITICAL SUBDIVISIONS OF THE STATE OF WEST IF THE VENDOR DOES NOT WISH TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO ALL POLITICAL SUBDIVISIONS OF THE STATE, THE VENDOR MUST CLEARLY INDICATE SUCH REFUSAL IN HIS BID. SHALL NOT PREJUDICE THE AWARD OF THIS CONTRACT IN ANY MANNER. REV. 3/88 THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT INTENDED TO REFLECT A PREFERENCE OR FAVOR ANY **VENDORS WHO ARE BIDDING** PARTICULAR BRAND OR VENDOR. ALTERNATES SHOULD SO STATE AND INCLUDE PERTINENT LITERATURE AND SPECIFICATIONS. FAILURE TO PROVIDE SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE **FELEPHONE** TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



VEZCOR

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

# Request for Quotation

WEH90010

PAGE 5

#ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

ر--₽

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

DATE PRINTED TEI	RMS OF SALE SHIP VIA	F.O.B. FREIGHT TERMS
05/14/2008		
BID OPENING DATE: 06/12/	/2008 BID OP	PENING TIME 01:30PM
LINE QUANTITY	UOP CAT ITEM NUMBER	UNIT PRICE AMOUNT
REJECTION OF TO WAIVE MIN IN ACCORDANCE	FOR ANY ALTERNATES MAY BE GR THE BID. THE STATE RESERVE FOR IRREGULARITIES IN BIDS OR THE WITH SECTION 148-1-4(F) OF THE SINGLE	S THE RIGHT SPECIFICATIONS THE WEST
CURRENTLY UT IS ISSUED TH MUST ACCEPT CARD FOR PAY	CARD ACCEPTANCE: THE STATE OF ILIZES A VISA PURCHASING CAR ROUGH A BANK. THE SUCCESSFUTHE STATE OF WEST VIRGINIA VIMENT OF ALL ORDERS PLACED BY CONDITION OF AWARD.	D PROGRAM WHICH LL VENDOR VISA PURCHASING
	VENDOR PREFERENCE CERTIFICA	ATE .
PREFERENCE I 5A-3-37 (DOE	ON AND APPLICATION* IS HEREBY IN ACCORDANCE WITH WEST VIRGI ES NOT APPLY TO CONSTRUCTION TION IS MADE FOR 2.5% PREFERE	NIA CODE, CONTRACTS).
REASON CHECK		NCE FOR THE
HAS RESIDED	R IS AN INDIVIDUAL RESIDENT V CONTINUOUSLY IN WEST VIRGINI MEDIATELY PRECEDING THE DATE ON; OR	A FOR FOUR
TION RESIDEN QUARTERS OR WEST VIRGINI	IS A PARTNERSHIP, ASSOCIATI IT VENDOR AND HAS MAINTAINED PRINCIPAL PLACE OF BUSINESS IA FOR FOUR (4) YEARS IMMEDIA	ITS HEAD- CONTINUOUSLY IN TELY PRECEDING
INTEREST OF PARTNERSHIP,	THIS CERTIFICATION; OR 80% OBIDDER IS HELD BY ANOTHER IN ASSOCIATION OR CORPORATION TAINED ITS HEADQUARTERS OR P	DIVIDUAL, RESIDENT VENDOR
SIGNATURE	SEE REVERSE SIDE FOR TERMS AND CONDIT	TIONS:  DATE
TITLE	EIN	ADDRESS CHANGES TO BE NOTED ABOVE



RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

## Request for Quotation

WEH90010

PAGE

#ADDRESS.CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

SH-p

Ţ

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

DATE PRINTED	TERMS OF S.	YLE SHIF	VIA	FOB.	FREIGHT TERMS
05/14/2008					
BID OPENING DATE:	06/12/2008		BID O	PENING TIME	01:30PM
LINE QU	ANTITY UOP	CAT ITEM N	JMBER	UNIT PRICE	AMOUNT
YEARS		Y PRECEDING TH		IA FOR FOUR (4 THIS	)
A MIN HAS M BUSIN FOUR	HAS AN AFF IMUM OF ONE AINTAINED I ESS WITHIN	CORPORATION ILIATE OR SUBS HUNDRED STATE TS HEAQUARTERS WEST VIRGINIA MMEDIATELY PRE	IDIARY WHI RESIDENTS OR PRINCI CONTINUOUS	ICH EMPLOYS S AND WHICH IPAL PLACE OF	
I I	PPLICATION N CHECKED:	IS MADE FOR 2.	5% PREFERI	ENCE FOR THE	
75% 0 ARE R THE S PRECE	G THE LIFE F THE EMPLO ESIDENTS OF TATE CONTIN	OF THE CONTRAC	T, ON AVEI N THE PRO. WHO HAVE TWO YEAR!	JECT BEING BID RESIDED IN	
NONRE Which of Bu	UM OF ONE HI SIDENT VEND MAINTAINS SINESS WITH	NONRESIDENT JNDRED STATE R OR WITH AN AFF ITS HEADQUARTE IN WEST VIRGIN	ESIDENTS ( ILIATE OR RS OR PRI IA EMPLOY:	OR IS A SUBSIDIARY NCIPAL PLACE ING A MINIMUM	
DURIN 75% O SUBSI WHO H	G THE LIFE   F THE EMPLO DIARY'S EMP AVE RESIDED	_	T, ON AVER S' AFFILIA IDENTS OF CONTINUOUS	RAGE AT LEÁST ATE'S DR WEST VIRGINIA SLY FOR THE TW	3
		DS IF THE SECR A BIDDER RECEI	VING PREFE	ERENCE HAS	
SIGNATURE			TELEPHONE	DA*	TE
TITLE	FEIN			ADDRESS CHANG	GES TO BE NOTED ABOVE



RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

# Request for Quotation

MEH90010

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

SH-PTO

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV
24801 304

DATE PRINT	ED	TEI	IMS OF SAI	£	SHIP)	/IA	FO.B.	FREIGHT TERMS
05/14/	2008		ang pang tanahan ngaran kebabahan keh	ranan manana mang ng bananang n				
BID OPENING DATE:		06/12/	2008			BID	OPENING TIME	01:30PM
LINE	QUA	NTITY	UOP	CAT.	ITEM NUI	VIBER	UNITPRICE	AMOUNT
			<u> </u>	<u> </u>				
7	FAILED	то со	NTINU	Е ТО	MEET THE	REQUIRE	MENTS FOR SUCH	
							E DIRECTOR OF	
							CT OR PURCHASE	
1 1	!		E	3			AGAINST SUCH	
	BIDDER	R IN AN	AMOU	NT NO	T TO EXCE	ED 5% 0	F THE BID AMOUN	Т
}	AND TH	IAT SUC	H PEN	ALTY	WILL BE P	AID TO	THE CONTRACTING	
						AID BAL	ANCE ON THE	
	CONTRA	CT OR	PURCH	ASE O	RDER.		A Parameter and the Control of the C	
	DV OUT	. M T C C T C		THE	~~~~~	T		
i :			i .	I .	1	-	DER AGREES TO	
							RMATION TO THE DEPARTMENT OF	
1			i	i	CLOSE TO		1	
1 1			i .	E .	ſ		IFYING THAT	
1 3	1			i .	ł		TAXES, PROVIDED	
1 1	1		i .	<b>}</b>	h -		THE AMOUNTS OF	
1 1				i			EEMED BY THE TA	•
	COMMIS	SSIONER	то в	E CON	FIDENTIAL	•		
1 1	1		i	Į.			G (WEST VIRGINI	A
1 1			E.	i .			THAT THIS	·
l f			l .	E .			L RESPECTS; AND	!
1 1	1		ì	}	ł		AND IF ANYTHIN	G
1 1			E .	1	BIDDER WI		GES DURING THE	
1			ı		MRITING		1	
	IUKCIIA	AGLING D	TATOT	ON IN	WKITIKO	THULLDIA	L. L.   •	
				BIDDE	R:			
				DATE:				mac pase
				SIGNE	h	*** *** *** *** *** ***		Now were
					• •			
		25,100,100,100,100						
SIGNATURE				SEERE	VERSE SIDE FOR T	ERMS AND CO	NDITIONS  DAT	E
			-1k1					
TITLE	•	ļ i	EIN				ADDRESS CHANG	ES TO BE NOTED ABOVE



RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

# Request for **Quotation**

RFO.NUMBER
WEH90010

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

60 H − H C

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV 24801 304

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHTTERMS
05/14/2008				
BID OPENING DATE:	DEPONICACIONO DE CONTROLO DE LA CONTROLO DE CONTROLO D	BID	OPENING TIME 01	:30PM
BID OPENING DATE:  LINE QUA  * CHEC IN EIT ARE EN MAXIMU (REV.  A SIGN	THER "A" OR "B", NTITLED TO RECEI IM 5% PREFERENCE 12/00)	E: ON OF PREFERENCE OR BOTH "A" AND VE. YOU MAY REQU FOR BOTH "A" AND TICE SUBMITTED TO: MINISTRATION	UNITPRICE  CONSIDERATION(S) "B" WHICH YOU EST UP TO THE	:30PM  AMOUNT
C	2019 WASHINGTON CHARLESTON, WV E NOTE: A CONVEN		BE APPRECIATED.	
	IVELOPE OR THE B	N THIS INFORMATIO ID MAY NOT BE CON		
RFQ. N BID OP		RW/FILE 22- WEH90010 6/12/2008		
•	SEER	EVERSE SIDE FOR TERMS AND CON	IDITIONS	
SIGNATURE		TELEPHONE	DATE	
TITLE	FEIN		ADDRESS CHANGES	TO BE NOTED ABOVE



RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

## Request for Quotation

RFONUMBER
WEH90010

PA	GE

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 304-558-0067

\$H+₽ ∓0

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV 24801 304

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB.	FREIGHTTERMS
05/14/2008				
	06/12/2008	BID O	PENING TIME 01	:30PM
LINE QUAN	NTITY UOP CAT NO.	ITEM NUMBER	UNITPRICE	AMOUNT
PLEASE TO CON	PROVIDE A FAX N TACT YOU REGARDI	UMBER IN CASE IT	IS NECESSARY	
CONTAC	T PERSON (PLEASE	PRINT CLEARLY):		
*****	THIS IS THE EN	D OF RFQ WEH900	10 ***** TOTAL:	
			`	
				TO THE PROPERTY OF THE PROPERT
	SEE BE	ERSE SIDE FOR TERMS AND CONDI	ITIONS	
SIGNATURE	7 And has 11.2 by . 3	TELEPHONE	DATE	
TITLE	FEIN PEON INCESTO		ADDRESS CHANGES	TO BE NOTED ABOVE

# REQUEST FOR QUOTATION

## Department of Health and Human Resources Welch Community Hospital RFQ #WEH90010

#### GENERAL INFORMATION

Purpose:

The Acquisition and Contract Administration Section of the Purchasing Division "State" for the Department of Health and Human Resources, Bureau for Behavioral Health Facilities, Welch Community Hospital, "Agency" is soliciting Quotations to provide reagents/consumables for the hematology analyzer systems for Welch Community Hospital. Hematology analyzers are to be provided by the vendor free of charge in exchange for the purchase of reagents/consumables. The vendor will retain ownership of the analyzers and will maintain the analyzers in working order to allow the facility to use them with the requested reagents/consumables for the life of the contract.

Project:

The mission or purpose of this project is to provide two (2) new hematology analyzers for the Laboratory at Welch Community Hospital as well as the purchase of necessary reagents/consumables to be used as needed with the vendor-provided hematology analyzers.

#### **OPERATING ENVIRONMENT**

#### Location

Facility is located in McDowell County at Welch Community Hospital, 454 McDowell Street, Welch WV 24801

**Background:** 

Welch Community Hospital is a 124 bed hospital, 59 of which are Long Term care beds. Acute care beds include: 8 Intensive care beds; 2 pediatric beds; 10 obstetrical beds and 45 medical/surgical beds. The hospital serves the counties of McDowell, Wyoming and Mingo with a total market population of about 83,000.

The following numbers represent the typical utilization encountered by the outpatient service area of Welch Community Hospital for the 2007 fiscal year:

Emergency Room Patients – 10,441 Observation Visits – 542 Clinic Patients – 25,524 Surgeries – 343 Deliveries – 78 Laboratory Tests – 771,015 Radiology – 15,063 CAT Scans – 2,529 Ultrasound – 1,869
Mammography – 633
Respiratory Tests – 21,402
Electrocardiograms – 4,231
Admissions – 974
Long Term Card ADC (48 Patients per day) – 94%
Overall ADC (60 Patients per day) – 66%
Total Patient Days (17,514 Long Term Care and 4,496 Acute Care Days) – 22010

### Outpatient Services Provided Are:

Primary Care and Family Practice in a Certified Rural Health Setting
Pediatric Clinic
Newborn Care
Internal Medicine
Surgery
Emergency Room Services
Radiology Services Including:
Diagnostic
CAT Scan
Ultrasound

Mammography

**MRI** 

EKG, Cardiac Doppler Studies, Stress Testing and Respiratory Therapy Services Laboratory Services

### PROCUREMENT SPECIFICATIONS

### General Requirements

The purpose of this project is to provide two (2) new fully automated hematology analyzers, Sysmex XT-2000 with auto loader, or equal, at no additional cost to Welch Community Hospital. The vendor will retain ownership of the analyzers and will maintain the analyzers in working order to allow the facility to use them with the requested reagents and/or consumables.

Welch Community Hospital desires a Vendor with a proven track record for providing necessary supplies and maintaining of equipment. Vendor must have provided such services for at least three (3) years.

Vendor shall provide references of at least three (3) clients for which they have provided these similar services.

### Scope of Work:

The vendor shall provide hematology analyzer equipment and reagent/consumables as needed for the Laboratory at Welch Community Hospital, more specifically; vendor shall include, but not be limited to the following requirements:

1. The equipment should be a single platform that can perform all our test methods.

WEH - Reagents/Consumables

- 2. WBC, Retic-Flourescent Flow Cytometry.
- 3. RBC/PLT-Hydro Dynamic Focused Impedance.
- 4. Hemoglobin-SLS.
- 5. The system must have Random Access Reporting for CBC, or CBC plus Diff, Retic.
- 6. Sample Size 15ul close/85ul open.
- 7. Throughput-80/hr.
- 8. Autoloader-50 samples and Cap piercing.
- 9. Additional Parameters-Body Fluids.
- 10. No pre-treatment for Retic.
- 11. System must include computer, monitor and laser printer.
- 12. System must provide data storage for at least 10,000 samples, including graphics, at least 5,000 patients' information, and 1,000 selective test orders.
- 13. System must provide interface capabilities with host, line printer, and graphic printer.
- 14. System must include hand-held barcode scanner.
- 15. The vendor will ensure that a local engineer/technician is available to provide service within 12 hours or less of receiving a service call during normal business hours 8:00 am to 5:00 pm, 24 hours or less during all other hours of operation, including weekends and holidays. Also, Technical support shall be available via telephone 24 hours a day/7 days a week to troubleshoot problems and/or answer staff questions.
- 16. The vendor will ensure hospital's laboratory staff receives proper in-service training whenever there are updates made to the equipment. Preferably this should be conducted on site whenever possible.
- 17. Test kits are to be shipped as requested. Reagents are to be shipped within six (6) days of receiving an order.
- 18. Test kits must have a minimum shelf life of ninety (90) days or more beyond date of receipt. Also, the vendor will ensure that each of the reagents delivered to the hospital have the maximum shelf life available for that specific product.
- 19. The number of tests requested is for bidding purposes only. The vendor will be required to provide actual quantities needed, be it more or less.

- 20. Reagents will not have to be mixed before using and be immediately ready to put on the analyzer. Reagents must not need to be frozen or reconstituted-they must be ready to use out of the refrigerator.
- 21. All products and equipment are to be quoted FOB Destination, unless otherwise stated in vendor's quotation.

#### Term of Contract

This contract shall be for the period of one year with the option of four (4) one (1) year renewals.

#### Cost Evaluation:

Bid Response must include the cost for EACH lab test as well as the cost for the consumables that may be purchased throughout the term of the contract. It shall be understood that the quantities are estimates based on previous activity and are not binding. Supplies shall be provided as ordered regardless of the actual quantities ordered, whether more or less.

Evaluation will be based on the overall lowest price of the estimated annual usage of consumables.

It is preferred that each responder use the Cost Proposal Sheet provided.

References shall be provided upon request.

#### Cost Sheet WEH90010

\*The estimated annual usage per unit is based on the following estimated number of test (CBC - 24,500) annually to be performed using the Sysmex XT-2000 or equal: There will be no charge for individual test performed, only for the cost of the reagents/consumables.

Item No.	Description	Vendor Item Number	*Estimated Annual Usage Per Unit	Estimated Annual Cost
1	E-CHECK 4X4.5ML X3 LOW/NORMAL/HIGH		18	\$ \$
2	STROMATOLYSER FB, FL		9	\$ \$
3	STROMATOLYSER 4DL		15	\$ \$
4	STROMATOLYSER 4DS		11	\$ \$
5	CellPack, 20L		68	\$ \$
6	RET-SEARCH II		6	\$ \$
7	SULFOLYSER, FL		6	\$ \$
8	SULFOLYSER REAGENT, 3X500		5	\$ \$
				\$ \$
***************************************				\$ \$
				\$ \$
				\$ \$
L	Grand Total			\$

NOTE: ITEMS LISTED ARE THOSE REPRESENTATIVE OF ITEMS THAT ARE CURRENTLY USED FOR TESTING. ONLY THOSE ITEMS WILL BE CONSIDERED IN THE EVALUATION.

Award will be based on the overa	all lowest price of the estimated an	nual usage of reagents/	
consumables		•	
Vendor will invoice hospital for reagents/consumables and payment will be made in arrears.			
Vendor Signature	Vendor Name	Date	
Volidor digirataro	T GITTET TENTITE		

# STATE OF WEST VIRGINIA Purchasing Division

# PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate

#### **DEFINITIONS:**

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

**EXCEPTION:** The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

**LICENSING:** Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agencies or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.

**CONFIDENTIALITY:** The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendors should visit **www.state.wv.us/admin/purchase/privacy** for the Notice of Agency Confidentiality Policies.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), it is hereby certified that the vendor acknowledges the information in this said affidavit and are in compliance with the requirements as stated.

Vendor's Name:	
Authorized Signature:	Date:

Purchasing Affidavit (Revised 06/15/07)