

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

### Request for Quotation

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ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER

RFQ COPY TYPE NAME/ADDRESS HERE

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV 24801 304

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# **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.
- 4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division
- 5. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, 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
- 12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written
- 13. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 14. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia 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 Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 15. WEST VIRGINIA ALCOHOL & DRUG-FREE WORKPLACE ACT: If this Contract constitutes a public improvement construction contract as set forth in Article 1D, Chapter 21 of the West Virginia Code ("The West Virginia Alcohol and Drug-Free Workplace Act"), then the following language shall hereby become part of this Contract: "The contractor and its subcontractors shall implement and maintain a written drug-free workplace policy in compliance with the West Virginia Alcohol and Drug-Free Workplace Act as set forth in Article 1D. Chapter 21 of the West with the West Virginia Alcohol and Drug-Free Workplace Act, as set forth in Article 1D, Chapter 21 of the West Virginia Code. The contractor and its subcontractors shall provide a sworn statement in writing, under the penalties of perjury, that they maintain a valid drug-free work place policy in compliance with the West Virginia and Drug-Free Workplace Act. It is understood and agreed that this Contract shall be cancelled by the awarding authority if the Contractor: 1) Fails to implement its drug-free workplace policy; 2) Fails to provide information regarding implementation of the contractor's drug-free workplace policy at the request of the public authority; or 3) Provides to the public authority false information regarding the contractor's drug-free workplace policy."

## INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division.
- 2. SPECIFICATIONS: Items offered must be in compliance with the specifications. 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 case of discrepancy
- 5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the
- 6. BID SUBMISSION: All quotations must be delivered by the bidder to the office listed below prior to the date and time Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130,



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

### Request for Quotation

RFQ NUMBER
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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 304

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

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ROBERTA WAGNER B04-558-0067

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HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

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ROBERTA WAGNER

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HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

WELCH COMMUNITY HOS 454 MCDOWELL STREET WELCH, WV 24801 304

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ROBERTA WAGNER <u> 804-558-0067</u>

RFQ COPY TYPE NAME/ADDRESS HERE

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#### **GENERAL INFORMATION**

#### Purpose:

The Acquisition and Contract Administration Section of the Purchasing Division for the West Virginia Department of Health and Human Resources, Bureau of Behavioral Health and Health Facilities "Agency" is soliciting quotations to purchase a new colonoscopy system which shall include the following:

- one (1) Olympus CV-180 Evis Exera II video system center or equal
- one (1) new Olympus CLV-180 Evis Exera II Xenon light source or equal
- one (1) new Olympus PCF type H180AL/I Evis Exera II video colonoscopy or equal.
- one (1) new Olympus GIF-H180 video gastroscope or equal.
- one (1) OEP-4 Olympus High Definition (HD) color printer or equal
- one (1) OEV 191H 19 inch high definition LCD screen or equal
- one (1) Olympus QTV-S7ProH-HD-12 E Autoclavable Camera Head or equal.

### Specifications:

## 1. CV-180: Evis Exera II Video System Center-Olympus or equal.

- A Must be equipped with high-resolution high-definition (HD) and standard definition (D) and Narrow Band Imaging (NBI) processing capabilities to provide image quality for endoscopes and laparoscopes; enhancing observation of capillaries and mucosal tissues
- B Must have two types of structure enhancement: Type A for observation of larger mucosal structures with high contrast and Type B for observation of smaller structures, such as capillaries.
- C. Must have electronic magnification of 1 2x and 1 5x.
- D. Must include memory card digital image recording.
- E. Must have HD/SD serial digital interface.
- F. Must have picture in picture capabilities
- G. Must have digital to digital video recording capabilities.
- H. Must be compatible with the following Olympus surgical products:
  - 1. ERCP scope Olympus JF type 1T20
  - 2 Bronchoscope Olympus type 40

# 2. CLV-180: EVIS EXERA II high intensity 300 W xenon light source for Olympus color CCD video scope system or equal.

- A. Must be equipped with special coated filters for Narrow Band Imaging and emergency 100 W halogen lamp.
- B. Must include light control cable.
- C. Must include spare fuse.
- D. Must have foot holder.

# 3. Olympus PCF type H180AL/I Evis Exera II video colonoscope or equal:

- A. Must include one (1) Innoflex or equal adjustable stiffness video colonoscope with full screen image.
- B. Must be high definition.

- C. Must be Narrow Band Imaging compatible
- D. Must have close focus.
- E Must have wide-angle view
- F. Must be 12.8 mm diameter max.
- G. Must have 3.7mm channel min
- H Must have 170 degree field of view min.
- I. Must have 168 cm working length min.
- J. Must have angulation of 180 degrees/180 degrees (up/down) and 160 degrees/160 degrees (right/left)
- K. Must include biopsy forceps FB-220U (2 pcs ) or equal.
- L. Must include MAJ-855 auxiliary water tube (1 pc.) or equal.
- M. Must include MAJ-215 auxiliary water inlet cap (1Pc.) or equal.

#### 4. Olympus GIF-H180 video gastroscope or equal:

- A. Must include one (1) video gastroscope with full screen image
- B. Must be High Definition (HD).
- C. Must be Narrow Band Imaging compatible.
- D. Must have close focus
- E. Must be 9.8 mm diameter max.
- F. Must have 2 8 mm channel min.
- G. Must have 140 degree field of view min.
- H. Must have 103 cm working length min
- Must have angulation of 210 degree/90 degrees (up/down).
- J. Must be able to move 100 degrees/100 degrees (right/left).
- K Must include biopsy forceps FB-220K (2pcs.) or equal.
- L Must include mouthpiece MB-142 (2pcs ) or equal.

#### 5. OEP-4: Olympus HD color printer or equal

- A Must include printer cables. (MAJ-884 printer cable set, Olympus or equal)
- B. Must include upon order request color printing pack for HD color printer (200 sheets picture paper and 1 color print cartridge pack).

#### 6. OEV-191H: 19 inch high definition LCD screen or equal.

- A. Must include one (1) 19 inch high definition medical grade LCD flat panel w/RGB and Sync, Y/C, and composite video input/output.
- B Must include one (1) single monitor roll stand for LCD flat panel monitors

#### 7. Olympus OTV-S7ProH-HD-12E HD Autoclavable Camera Head or equal:

- A Must have quick-lock connection allowing the camera head to be locked onto the telescope with a snap for a tight fit.
- B. Must have one-touch zoom 1 2 and 1.5 times the original size

#### 8. Delivery, Installation, and In-service Training

- A Delivery should be within fifteen (15) days after receipt of the approved purchase order Vendor must furnish, deliver, setup and install the equipment and provide instructional training on the equipment usage and features upon delivery.
- B. Within seven (7) days of the vendor's receipt of the approved purchase order, the selected vendor must contact Nursing Administration at Welch Community Hospital for coordination of vendor's delivery, installation and healthcare providers' in-service training.

#### 9. Warranty/Maintenance

Equipment shall have a one year full-service warranty.

#### 10. Cost Evaluation

It is preferred that each bidder use the cost proposal sheet provided. Purchase Order will be awarded to a single vendor providing the lowest total price for the equipment meeting specifications.

#### 11. Payment

The Vendor shall submit invoices, in arrears, to the Facility at the address on the face of the purchase order labeled "Invoice To" pursuant to the terms of the contract. Payment will be made in arrears, upon completion of delivery, installation and in-service training. State law forbids payment of invoices prior to receipt of goods or services.

	Description	Quantity	Unit Price	Total				
1	Olympus CV-180 Evis Exera II video system center or equal.	1						
2	Olympus CLV-180 Evis Exera II Xenon light source or equal.	1						
3	Olympus PCF type H180AL/I Evis Exera II video colonoscopy or equal.	1						
4.	Olympus GIF-H180 video gastroscope or equal.	1						
5.	OEP-4 Olympus High Definition (HD) color printer or equal.	1						
5a	MAJ-884 printer cable set, Olympus or equal	1						
6.	OEV-191H 19 inch high definition LCD screen or equal.	1						
7.	Olympus QTV-S7ProH-HD-12 E Autoclavable Camera Head or equal.	1						
	(A)Total Equipment Cost							
	Delivery/Set-up/In-service training fees	Quantity	Unit Price	Total				
8.	Delivery & Set up Fee.	1		Total				
9.	In-Service Training Fee	1	71/47					
_	(B) Total of delivery	/set-up/in-ser	vice training fees					
			10.1					
	Warranty/ Maintenance	Quantity	Unit Price	Total				
10.	Year 1- Full-Service Endoscopy Repair Contract	1						
11.	Year 2- Full-Service Endoscopy Repair Contract	1						
12.	Year 3- Full-Service Endoscopy Repair Contract	1						
	(C) Total of Warranty/Maintenance Services							
	Printing Supplies	Estimated Annual Usage	Price per Package	Estimated Annual Cost				
13.	Color Printing Pack	30						
	(200 sheets picture paper & 1 color printer cartridge pack)		İ					
	(D) Estimate	d Annual Prin	ting Supply Cost					
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# State of West Virginia

### **VENDOR PREFERENCE CERTIFICATE**

Certification and application\* is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code** This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1	Application is made for 2.5% resident vendor preference for the reason checked:  Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of this continuously in Vest Virginia for four (4) years immediately preceding the state of the
	ing the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
	Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3.	Application is made for 2.5% resident vendor preference for the reason checked:  Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4.	Application is made for 5% resident vendor preference for the reason checked:  Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
<b>5</b>	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years
requirer against	understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the nents for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency cted from any unpaid balance on the contract or purchase order.
authoriz the requ deemed	nission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and es the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid lired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information by the Tax Commissioner to be confidential.
and acc	penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true curate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate is during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
Bidder:	Signed:
Date:	Title:

\*Check any combination of preference consideration(s) indicated above, which you are entitled to receive

# STATE OF WEST VIRGINIA Purchasing Division

### PURCHASING AFFIDAVIT

#### **VENDOR OWING A DEBT TO THE STATE:**

West Virginia Code §5A-3-10a provides that: 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.

#### PUBLIC IMPROVEMENT CONTRACTS & DRUG-FREE WORKPLACE ACT:

If this is a solicitation for a public improvement construction contract, the vendor, by its signature below, affirms that it has a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code**. The vendor **must** make said affirmation with its bid submission. Further, public improvement construction contract may not be awarded to a vendor who does not have a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code** and who has not submitted that plan to the appropriate contracting authority in timely fashion. For a vendor who is a subcontractor, compliance with Section 5, Article 1D, Chapter 21 of the **West Virginia Code** may take place before their work on the public improvement is begun.

#### ANTITRUST:

In submitting a bid to any agency for the state of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the state of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the state of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the state of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership or person or entity submitting a bid for the same materials, supplies, equipment or services and is in all respects fair and without collusion or fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

#### 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. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.

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

Vendor's Name:		
Authorized Signature:	Date:	: