COUNTY OF ROCKLAND

Department of General Services **Purchasing Division**

Contract Award Notification

Title: Covid-19 Antigen Home Test Kits

Contract Period: November 10, 2023, through November 9, 2024, w/ (4) 1-year options

Original Date of Issue: November 10, 2023

Date of Revision:

Bid No: RFB-RC-2023-087

Catalog: Health & Hospitals

Authorized Users: County Agencies, All Political Subdivisions

Address Inquiries to:

Name: Michele Phillips Title: Purchaser I Phone: 845-364-2984 Fax: 845-364-3809

E-mail: phillipm@co.rockland.ny.us

Description

This contract is to provide catering services.

Contract Number	Vendor Number	Contractor & Address	Telephone No.	
BID 23-087	0000028370	The Maclean Group LLC d/b/a	916-579-2672	
		Maclean Health		
		2233 Watt Avenue, Ste 296		
		Sacramento, CA 95825		
		Contact: Angela Lucero	Fax: 916-270-2142	
		Alucero@macleanhealth.com		

COUNTY OF ROCKLAND DGS – PURCHASING DEPARTMENT BLDG. A, 6TH FLOOR, 50 SANATORIUM ROAD

POMONA, NY 10970

TELEPHONE NO.: 845-364-3820

FAX NO.: 845-364-3809

VENDOR: The Maclean

Group LLC

LINE	DESCRIPTION	ITEM	EST. QTY.	KIT	PRICE PER	EXTENDED	MANUFACTURE	MANUF.	QUANTITY
NO.		NUMBER		as	KIT as specified	PRICE	R NAME	PRODUCT	OF KITS
				specified				CODE	PER CASE
0-1	TESTS- COVID 19 ANTIGEN HOME TEST KIT, Over the Counter (OTC), At Home Test, nasal swab test kit, results in 15 minutes, For ages 14 years and older and 2 years old when collected by an adult, Shelf Life: 18-24 months Only FDA Authorized Antigen Diagnostic Tests for Covid-19 will be accepted. Current quantity needed is 5,250 Kits (10,500 tests). ONLY TWO TESTS PER KIT will be accepted, Delivery must be within 15 days ARO, FOB Destination Acon Laboratories, Inc: Flowflex REF# L031-125M5, or	19340580008	6000	KIT	\$ 2.40	\$ 14,400.00	WatMin USA - SpeedySwab	LFA0401-2N	500 Kits/Case 1000 Tests/Case
	approved equal 1 KIT=TWO TESTS								
	Price submitted must be per kit, not per test								
0-2	TESTS- COVID 19 ANTIGEN HOME TEST KIT, Over the Counter (OTC), At Home Test, nasal swab test kit, results in 15-30 minutes, For ages 14 years and older and 2 years old when collected by an adult, Shelf Life: 18-24 months Only FDA Authorized Antigen Diagnostic Tests for Covid-19 will be accepted. ONLY ONE TEST PER KIT will be accepted, Delivery must be within 15 days ARO, FOB Destination Acon Laboratories, Inc: Flowflex REF# L031-118B5, or approved equal Price submitted must be per kit (1 Kit=One Test).	19340580009	1000	KIT	\$ 1.20	\$ 1,200.00	WatMin USA - SpeedySwab	LFA0401-1N	500 Kits/Case 500 Tests/Case

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COUNTY OF ROCKLAND - DGS-PURCHASING

BLDG. A., 6TH FLOOR, 50 SANATORIUM RD, POMONA, NY 10970 TELEPHONE: 845-364-3820 / TELEFAX: 845-364-3809

TITLE: Covid-19 Antigen Home Test Kits

RFB #: RFB-RC-2023-087

SPECIFICATIONS

A Virtual Pre-Bid via Microsoft Teams will be hosted on September 28, 2023 at 11:00am - To Participate select the link below.

Microsoft Teams Meeting Link:

Click here to join the meeting

1. SCOPE

- 1.1. This solicitation is seeking competitive pricing from qualified supplier(s) to furnish and deliver Flow Flex Covid-19 Antigen Home Test Kits (2 tests per kit and 1 test per kit), or approved equal, with a minimum shelf life of 18-24 months.
- 1.2. All Tests submitted must be FDA-authorized at-home OTC Covid-19 diagnostic tests.
- 1.3. The Rockland County Department of Health has a current need for 5,250 two tests per kit, with expiration date 3/2025 or later only.
- 1.4. Expiration date of tests currently needed, must be minimum 15-18 months from date of order unless agreed to by the County of Rockland, in writing, at time of order.
- 1.5. Term will be for six (6) months with four(4) additional 6-month options to renew.
- 1.6. A Price Adjustment clause is included in this bid

2. REQUIREMENTS

- 2.1. Only tests with minimum shelf life 18-24 months will be accepted.
- 2.2. All Tests submitted must be FDA-authorized at-home OTC Covid-19 diagnostic tests.

 https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/home-otc-covid-19-diagnostic-tests
- 2.3. Nasal Swab tests only. No other tests will be accepted
- 2.4. Tests must provide results within 15-30 minutes
- 2.5. Approved for ages 14 years and older
- 2.6. Approved for ages 2 years and older if collected by an adult.
- 2.7. Bidder must be an Authorized Distributor of product being bid to ensure fulfillment of supply chain needs throughout the term of the contract. Authorization letter must be submitted with bid otherwise bid may be deemed non-responsive.

3. ORDERING

- 3.1. Orders will be placed on an as-need basis.
- 3.2. Minimum order: 1 Case

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TITLE: Covid-19 Antigen Home Test Kits RFB #: RFB-RC-2023-087

3.3. The County has a current need for 5,250 kits (2 Tests per Kit only) with expiration date 3/2025 or later.

- 3.4. Supplier must be able to provide tests with and expiration date that is minimum 15-18 months from date of all orders unless agreed to by the County at time of order.
- 3.5. Supplier must provide Lot Number for product being delivered prior to order so that the county can verify expiration date for product being ordered.
- 3.6. Supplier must accept purchase orders from any authorized ordering agency.

4. **DELIVERY**

4.1. Product pricing to include FOB destination pre-paid and allowed, delivery to be within 15 days after receipt of purchase order unless an alternate date is approved by the authorized requestor at the county, in writing.

5. NON-RESTRICTIVE USE OF BRAND NAME OR EQUAL SPECIFICATIONS

5.1. The use of a brand name is for the purpose of describing the standard of quality, performance, and characteristics desired and is not intended to limit or restrict competition.

6. ALTERNATES FOR APPROVAL

- 6.1. If submitting and alternate, supplier must send sample and product brochure prior to bid opening.
- 6.2. Sample must be marked with Supplier name and contact information.
- 6.3. A prepaid return label must be sent if the sample must be returned if not approved.
- 6.4. The County of Rockland Department of Health will have final decision on whether the alternate is an approved equal for their needs as specified.

7. PRICE ADJUSTMENT

7.1. The County recognizes this product or service has a price component that may have a commodity with changing costs. The Contractor/Supplier may request a Price Adjustment at the end of each six(6) month term

A Price Adjustment request must be made in writing and include the reason for the request, documentation supporting the request (ie, commodity increases), the current pricing, and the requested revised pricing.

The County will review the Price Adjustment request. If the Price Adjustment is deemed reasonable the Price Adjustment request will be accepted by written acknowledgement. If the request is not accepted the County may entirely reject the request or may counter with revised pricing. In either case the County will provide a written explanation in support of the decision.

The Director of Purchasing may use available indexes (e.g. CPI or PPI) to determine if the requested Price Adjustment is reasonable. Typically, a Price Adjustment that exceeds 5% will not be approved unless very unusual and significant changes have occurred in the industry.

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In the event industry costs decline, the County shall have the right to receive, from the Contractor, a reasonable reduction in prices/pricing that reflect such cost changes in the industry. The County will make a written request to the Contractor for a Price Adjustment in writing with supporting documentation.

8. AWARD

- 8.1. The County intends to Award this contract in its entirety, to the lowest responsive, responsible bidder that has supplied and met all of the requirements.
- 8.2. The county reserves the right to Award this contract on a line-by-line basis to the lowest responsive and responsible bidder, if it is in the best interest of the county.



DEPARTMENT OF GENERAL SERVICES, PURCHASING DIVISION

Dr. Robert L. Yeager Health Center
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Pomona, New York 10970
Phone: (845) 364-3820 Fax: (845) 364-3809
Email: purchasing@co.rockland.ny.us

Paul Brennan, FNIGP, NIGP-CPP, CPPO
Director of Purchasing

ADDENDUM # 1

RFB-RC-2023-087 Covid-19 Antigen Home Test Kits

The information in this addendum supersedes any contradictory information set forth in the contract documents. Acknowledge receipt of this addendum in the space provided on the signature page of the bid proposal. Failure to do so, may subject the bidder to disqualification. This addendum forms a part of the contract documents.

- Question#1: It states in the bid that deliveries will be made to "Multiple Government Agencies in Rockland County". Can you please give us an idea of how many agencies(deliveries) this includes?
- Response#1: Covid-19 tests have previously been requested by our Department of Health, Department of Social Services and our Correctional Facility. We cannot confirm how many agencies will utilize this contract. Quantities listed are estimates for the County of Rockland only. Actual quantities may be more or less.
- Question#2: Can you please provide the name of the previous awarded vendor as well as the price that you are currently paying for the Test Kits?
- Response#2: Rockland County has not previously awarded any term contracts for covid-19 Antigen Home tests as specified in this bid. The County previously purchased Genabio tests (1 test per kit) from Medical Group Care. The Awarded price was \$1.95 per test.
- Question#3: Regarding samples, please provide the name and address where the samples (and specifications) should be sent to.
- Response#3: Samples should be sent to: 50 Sanatorium Road, Building A, 6th Floor, Room 609, Pomona, NY 10970. Attn: Michele Phillips
- Question#4: We would like to inquire if it is possible to designate this project as reserved for a Certified New York Women-Owned Small Business (WOSB).

Response#4: Rockland County Procurement Policy does not allow awards to be reserved for any group.

Question#5: As an authorized and licensed distributor for multiple Covid-19 test kits, are we permitted to

submit more than one qualified bid that aligns with your specified criteria?

Response#5: Bidders can submit multiple bids for each item. However, award will only be awarded to

lowest responsive and responsible bidder(s). multiple bids for one line must be submitted

separately. All required documents must be uploaded with each bid.

Question#6: Will there be a requirement for Product Liability Insurance for all distributors in the event of a

product recall? Please rest assured that Pro1tek holds the necessary insurance to safeguard your

interests.

Response#6: Insurance requirements are listed in the Bid Package

SIGNED:

Paul J. Brennan

PAUL J. BRENNAN, FNIGP, NIGP-CPP, CPPO DIRECTOR OF PURCHASING

ADDENDUM

09/19/23