

MISSISSIPPI STATE DEPARTMENT OF HEALTH
Notice of Proposed Sole Source Purchase #0301-109
RFX # 3150005237

The Mississippi State Department of Health anticipates purchasing the item(s) listed below as a sole source purchase. Anyone objecting to this purchase shall follow the procedures outlined below.

Commodity or commodities to be purchased (make, model, description):

Crossroads Dental Clinics' software and radiograph system is through Patterson Dental. The sensor that is needed must come from Patterson Dental because it is the only sensor that is compatible with the software and laptops, no other sensor will work due to compatibility.

The Schick Intraoral Sensor allows you to quickly view and take images based on your diagnostic needs. It has a dynamic image enhancer that allows you to manipulate the image enhancer to the sharpness level you desire quickly and easily.

The sensor is needed to take radiographs which will allow for a better diagnosis in providing a treatment plan for the patients.

Product List Number	Product Description	# Kits	Product Price (Kit)	Extended Price
71343946	Schick 33 S2 SNSR Start Kit 3.0 USB IN	1	6,534.61	6,554.61

Explanation of the need to be fulfilled by this item(s) and why it is the only one that can meet the specific needs of the department: Due to current state legislation (HB 633) and HHS grant guidelines, the PREP Program is required to implement evidence-based age-appropriate sex education. The curricula listed for purchase were specifically adapted for the Mississippi PREP Program and cannot be purchased from any other vendor.

Name of company/individual selling the item and why that source is the only possible source that can provide the required item(s): ETR Associates is the Sole Source of the items listed on Quote.

Estimated cost of item(s) and an explanation why the amount to be expended is considered reasonable:
\$27090.00

Explanation of the efforts taken by the department to determine this is the only source and the efforts used to obtain the best possible price:

ETR Associates provided a sole source letter with the requested invoice.

Any person or entity that objects and proposes that the commodity listed is not sole source and can be provided by another person or entity shall submit a written notice to: Jennifer Dotson, Mississippi State Department of Health Purchasing Department, 570 E. Woodrow Wilson, Room 134 Underwood Building, Jackson, MS 39216 or P. O. Box 1700, Jackson, MS 39215-1700.

Responses may be hand delivered, via regular mail, overnight delivery or by e-mail:
Jennifer.dotson@msdh.ms.gov . The envelope or e-mail should reference the sole source number.

The notice shall contain a detailed explanation of why the commodity is not a sole source procurement. Appropriate documentation shall also be submitted if applicable. The enclosed form (OSS) may be used if you so desire.

If after a review of the submitted notice and documents, Mississippi State Department of Health determines that the commodity in the proposed sole source request can be provided by another person or entity, then Mississippi State Department of Health will withdraw the sole source request publication from the procurement portal website and submit the procurement of the commodity to an advertised competitive bid or selection process.

If Mississippi State Department of Health determines after review that there is only one (1) source for the required commodity, the Mississippi State Department of Health will appeal to the Public Procurement Review Board. Mississippi State Department of Health will have the burden of proving that the commodity is only provided by one (1) source.

Notices/objections, etc. will be accepted at any time prior to: at November 2, 2023, 10:00 a.m. (CST)

PURCHASE JUSTIFICATION FORM

Requestor: JoAndrea Dockins, DDS

Date: September 19, 2023

Item(s) Requesting: Schick 33 S2 SNSR Start Kit 3.0 USB IN

Please state the reasons for purchasing this item and how the item(s) contributes to the service goals of the program as defined by the funding source (i.e. HRSA, CDC, etc):

The Schick Intraoral Sensor allows you to quickly view and take images based on your particular diagnostic needs. It has a dynamic image enhancer that allows you to manipulate image enhancer to the sharpness level you desire quickly and easily.

We only need the quote from Patterson because it is the device that hooks-up to there machine.

This is the Ryan White Clinic and the sensor is needed to take radiographs which will allow for a better diagnosis in providing a treatment plan for the patients.

Approved ☒ Disapproved ☐

Reason for Disapproval

Signature, Of Office Director

Heendra Johnson

Date

9/20/2023

Confidential**Product Proposal**

Customer Name: MISS STATE DEPT OF HEALTH
Crossroads Clinic

Customer Number: 200065859

Address: 350 W Woodrow Wilson
Ste 3516

Jackson MS 39216-4538 US

Phone: (601) 432-3232

Branch: Jackson (D)

Territory Rep: Lamar Ashley

Email: LAMAR.ASHLEY@PATTERSONDENTAL.COM

Your Specialist: John Presley

Email: JOHN.PRESLEY@PATTERSONDENTAL.COM

Date Proposed: 09/14/2023

Quote Good Thru: 12/07/2023

Product#	Vendor	Description	Unit	Qty	Retail Price	Sell Price	Total
71343946	SCHIEQ	SCHICK33 SZ SNR START KT 3.0 USB IN 6FT	EA	1	\$6,919.00	\$6,534.81	\$6,534.81
200000000	PDC	Installation Labor	HR	1		\$0.00	\$0.00
					Total Retail:		\$6,919.00
					Total Discount:		(\$384.39)
					Subtotal:		\$6,534.81
					Order Total Retail		\$6,919.00
					Order Total Discount		(\$384.39)
					Order Subtotal		\$6,534.81
					Shipping and Handling		\$20.00
					State Tax		\$0.00
					Local Tax		\$0.00
					Purchase Price:		\$6,554.81
					Less Downpayment:		\$0.00
					Balance due on invoice:		\$6,554.81



The prices in this proposal will remain in effect until the **earlier of the** expiration date set forth **above** or a manufacturer price increase. If Customer is applying for credit with Patterson Dental Supply, Inc., a Minnesota corporation ("Patterson"), Customer's order will not be binding on Patterson, even if Patterson has signed below, until Patterson, in its sole discretion, approves Customer's credit. Any sales tax and shipping/handling charges in this order are estimates. Patterson will invoice, and Customer agrees to pay, all applicable shipping/handling charges and **taxes and other governmental charges.**

Notice Relating to Discounting Practices: The pricing for products provided herein may reflect or be subject to rebates, credits, vouchers, or discounts or other price reductions (collectively, discounts), which customer may be obligated under federal law to report to Medicare, Medicaid or other state, federal or other payers, and to make this information available to these entities for review.

Schedules

☒ EQUIPMENT PAYMENT OPTIONS

☒ GENERAL TERMS AND CONDITIONS

☒ EQUIPMENT

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact the undersigned within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is FDIC, 2345 Grand Avenue, Kansas City, MO 64108.

By signing below, Customer contracts for the products and services specified in this Order on the terms contained in the schedules identified below (the "Schedules"). Customer acknowledges receipt of a copy of this Order and the Schedules (together, "this Agreement"). Customer agrees to be bound by the terms of this Agreement, including the WARRANTY LIMITATIONS.

MISS STATE DEPT OF HEALTH

570 E Woodrow Wilson Ave

Jackson, MS 39216-4538

PATTERSON DENTAL SUPPLY, INC.

1031 MENDOTA HEIGHTS ROAD

ST. PAUL, MN 55120

Signature _____

(Print Name) _____

Title _____

Date _____

Signature _____

(Print Name) _____

Title _____

Date _____