



Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 ONE CAPITOL HILL
 PROVIDENCE RI 02908

BUYER: Walsh, Gail M
 PHONE #: 401-574-8122

CREATION DATE : 13-APR-15
 BID NUMBER: 7549492
 TITLE: DENTAL PROSTHETICS - RI DEPT. OF CORRECTIONS
 BLANKET START : 01-JUL-15
 BLANKET END : 30-JUN-18
 BID CLOSING DATE AND TIME: 12-MAY-2015 02:00:00

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 DOA CONTROLLER
 ONE CAPITOL HILL, 4TH FLOOR
 SMITH ST
 PROVIDENCE, RI 02908
 US

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 DOC REHABILITATIVE SERVICES
 40 HOWARD AVE
 CRANSTON, RI 02920
 US

Requisition Number:

Note to Bidders: QUESTIONS CONCERNING THIS SOLICITATION MAY BE E-MAILED TO THE DIVISION OF PURCHASES AT GAIL.WALSH@PURCHASING.RI.GOV NO LATER THAN FRIDAY, APRIL 24, 2015 AT 5:00 PM (ET). QUESTIONS SHOULD BE SUBMITTED IN A MICROSOFT WORD ATTACHMENT. PLEASE REFERENCE THE BID# ON ALL CORRESPONDENCE. QUESTIONS RECEIVED, IF ANY, WILL BE POSTED ON THE DIVISION OF PURCHASES WEBSITE AS AN ADDENDUM TO THIS SOLICITATION. IT IS THE RESPONSIBILITY OF ALL INTERESTED PARTIES TO DOWNLOAD THIS INFORMATION.

Line	Description	Quantity	Unit	Unit Price	Total
1	PROVIDE DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS, AS PER ATTACHED SPECIFICATIONS BLANKET REQUIREMENTS: 7/1/15-6/30/18 (WITH THE OPTION TO RENEW FOR TWO (2) ADDITIONAL YEARS AT THE SOLE DISCRETION OF THE RHODE ISLAND DEPARTMENT OF CORRECTIONS) PLEASE PROVIDE A TOTAL PRICE PER YEAR BASED ON A QUANTITY OF ONE (1) FOR EACH ITEM ON THE ATTACHED PRICING LIST. LIST UNIT PRICING ON PRICING LIST. 7/1/15-6/30/16 - DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS	1.00	Total		
2	7/1/16-6/30/17 - DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS	1.00	Total		
3	7/1/17-6/30/18 - DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS	1.00	Total		
4	7/1/18-6/30/19 - DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS	1.00	Total		
5	7/1/19-6/30/20 - DENTAL PROSTHETICS FOR THE INMATE POPULATION OF THE RI DEPARTMENT OF CORRECTIONS	1.00	Total		

Delivery: _____

Terms of Payment: _____

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

DEPARTMENT OF CORRECTIONS



DENTAL PROSTHETICS SPECIFICATIONS

Provision of Dental Prosthetics services at the Rhode Island Department of Corrections on an as-needed basis. Contractor must provide an Infection control program to be used by the contracted service provider in accordance with ADA standards;

Vendors will submit all-inclusive cost proposal for procedures, which will include the cost of pickup and delivery, fittings, adjustments, fabrication, and materials as follows:

	Year 1	Year 2	Year 3	Year 4	Year 5
Complete denture - maxillary					
Complete denture – mandibular					
Maxillary partial – resin base					
Mandibular partial – resin base					
Repair complete denture base					
Replace teeth complete (each tooth)					
Repair resin denture base					
Repair cast framework					
Repair or replace broken clasp (wire)					
Repair or replace broken clasp (cast)					
Add tooth to existing partial denture					
Add clasp to existing partial denture					
Rebase complete maxillary denture					
Rebase complete mandibular denture					
Reline complete maxillary (lab)					
Reline complete mandibular (lab)					
Reline maxillary partial (lab)					
Reline mandibular partial (lab)					
Night guards					
Identifier (inmate ID numbers and name)					

The contractor(s) selected as a result of this solicitation will provide appropriately licensed professional staff to perform the requested services on an as-needed basis as determined by the Correctional Dental Associates and the Associate Director of Health Care Services.

All respondents will be responsible for providing their own insurance coverage and to maintain appropriate coverage throughout the term of the Agreement.

No estimate of, or commitment to, a specific level of spending is made by the request.

Services will be authorized on an as-needed basis with a term expiring on June 30, 2018 with the option to renew for two additional years. Any Award(s) resulting from this request will be subject to the State's General Conditions of Purchase, which is available from the Internet at www.purchasing.ri.gov as well as the terms of this request. Receipt of a contract award is not a guarantee of income. Once again, services will be requested on an as needed basis.

The vendor will be selected based on cost, quality of work, and reputation.

Contract Terms and Conditions

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Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

TERMS AND CONDITIONS FOR THIS BID

PURCHASE AGREEMENT BID

BIDDING (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. **ORDERING** (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

Mailing Address for Bid Proposals issued by the State of Rhode Island, Division of Purchases:

All Bid Proposals must be submitted to the following address:

State of Rhode Island
Department of Administration
Division of Purchases, 2nd Floor
One Capitol Hill
Providence, RI 02908

MULTI YEAR AWARD

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.

BID ALL ITEMS

BIDDERS MUST BID ALL ITEMS TO BE CONSIDERED. AWARD WILL BE BASED ON TOTAL LOW.

DELIVERY PER AGENCY

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.

INSURANCE REQUIREMENTS

AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.

NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD: * PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - \$1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. * BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. * SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF \$5 MILLION. * ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - \$1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. * VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF \$1 MILLION.

RIVIP INFO - BID SUBMISSION REQUIREMENTS

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

MAILING ADDRESS FOR BID PROPOSALS ISSUED BY THE STATE OF RHODE ISLAND, DIVISION OF PURCHASES

All Bid Proposals must be submitted by mail or hand delivered to:

- State of Rhode Island
- Department of Administration
- Division of Purchases, Second floor
- One Capitol Hill
- Providence, RI 02908-5855

DIVESTITURE OF INVESTMENTS IN IRAN REQUIREMENT:

No vendor engaged in investment activities in Iran as described in R.I. Gen. Laws §37-2.5-2(b) may submit a bid proposal to, or renew a contract with, the Division of Purchases. Each vendor submitting a bid proposal or entering into a renewal of a contract is required to certify that the vendor does not appear on the list maintained by the General Treasurer pursuant to R.I. Gen. Laws §37-2.5-3.

LICENSE REQUIREMENTS

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.