

County of Monterey
General Services- Contracts/Purchasing Division
JUSTIFICATION OF SOLE SOURCE/SOLE BRAND REQUEST

Purchase Requisition Number _____

Date

9/4/2012

Description of Item: ACS - NSQIP (American College of Surgeons - National Surgical Quality Improvement Program)

1. Please indicate the following:

Procurement: Goods
 Services

(Check One)

Sole Source: Item is available from one source only. Item is a one-of-a-kind and is not sold through distributors. Manufacturer is exclusive distributor.

Sole Brand: Various sources can supply the specified model and brand and competitive bids will be solicited for the requested brand only. Meets form, fit and function- nothing else will do.

Note: Sole Source/Sole Brand Requests are not maintained as a standing request. Each request is for a single one-time purchase only.

2. Vendor Selection:

Preferred Vendor
 Sole Source

Vendor Name:

ACS - NSQIP

Address:

673 N. Saint Clair St. City: Chicago State: IL

Phone Number:

(312) 702-5000

Fax: (312) 221-4111

Contact Person:

Gina M. Pope

Title: Business Development Representative

Federal Employer #: _____

3. Provide a brief description of the goods/services to be purchased and why this purchase is being proposed under a sole source acquisition.

a) Why were product and/or vendor chosen?

See attached

Sole Source Justification – ASC NSQIP (American College of Surgeons – National Surgical Quality Improvement Project)

3a. Why were products and/or vendor chosen?

- American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP®). ACS NSQIP is the leading nationally validated, risk-adjusted, outcomes-based program to measure and improve the quality of surgical care in the private sector. ACS NSQIP has the tools, training, customization options and, most importantly, data, to keep Natividad Medical Center (NMC) ahead of the curve.

b. Unique performance features/qualifications?

ACS-NSQIP is the industry "gold standard" for surgical quality data. Utilizing this database program will result in:

- **Fewer complications.** For patients at Surrey Memorial Hospital in Vancouver, British Columbia, the rate of surgical site infections after breast surgery dropped significantly. An estimated 75 infections were averted over the course of two years.
- **Better outcomes.** Eighty-two percent of ACS NSQIP hospitals saw improvement in postoperative morbidity levels and 66 percent improved mortality levels².
- **Shorter hospital stays.** At Decatur General Hospital in Decatur, Ala., the hospital length of stay for patients with urinary tract infections (UTI) was twice as long as for patients without UTI at the beginning of ACS NSQIP implementation. Within one year, length of stay was the same for patients whether or not they had UTI, and the rate of post-surgical UTI fell from 3.1 percent to 0.8 percent.
- The American College of Surgeons (ACS) and CMS are working to allow ACS NSQIP hospitals to voluntarily report their outcomes on the publicly accessible Hospital Compare website. Because ACS NSQIP is based on the best available data – clinical, risk- and case-mix-adjusted, nationally benchmarked and audited 30-day patient outcomes – it provides a more accurate look at surgical quality than many other public measures, which are based on administrative data or compliance with process measures.

c. Why are the Specific features/qualifications required?

Payers, including Medicare, increasingly refuse to pay for treating complications deemed preventable, such as surgical site infections. A growing movement aims to tie reimbursements to outcomes – and publicly report the results. NMC needs accurate surgical quality data to reduce complications.

New CMS Measure: Participation in a General Surgery Registry

Recently, the Centers for Medicare and Medicaid Services (CMS) announced a new measure to encourage participation in a general surgery registry and expressed its intention to move toward reporting based on clinical data and outcome measures. According to the rule announced in August 2011, hospitals will report their participation "in a Systematic Clinical Database Registry for General Surgery, in the Hospital IQR Program beginning with the FY 2014 payment determination."

d. What other products have been examined or rejected?

None exist.

e. Why are other sources unacceptable?

No other quality product exists that encompasses across multiple specialties.

f. What features are required?

NMC needs a database that provides with clinical, risk- and case-mix-adjusted, nationally benchmarked and audited 30-day patient outcome data. ASC-NSQIP provides a more accurate look at surgical quality than many other public measures, which are based on administrative data or compliance with process measures.

g. estimated costs:

See exhibit A of proposal/agreement.

4. Unusual/compelling urgency?

- o Yes -- there is a growing movement with all payers to tie reimbursement to outcomes.
- o Will satisfy Centers for Medicare and Medicaid Services surgical quality measure (NQF #0493) to be implemented in 2014, "Participation in a Systematic Clinical Database Registry for General Surgery."

4. Is there an unusual or compelling urgency associated with this project?

- No
- Yes (Please describe)

See attached

THE FOLLOWING TO BE COMPLETED BY THE REQUESTOR

I hereby certify that:

1. I am an approved department representative, and am aware of the County's requirements for competitive bidding, as well as the criteria for justification for sole source/brand purchasing.
2. I have gathered the required technical information and have made a concentrated effort in review comparable and/or equal equipment.
3. The information contained herein is complete and accurate.
4. There is justification for sole source/brand purchasing noted above as it meets the County's criteria.
5. A sole source/brand purchase in this case would withstand a possible audit or a vendor's protest.

Jane A. Dandy
Requestors Signature

9/4/2012
Date

[Signature]
Authorized Signature by Department Head

9/4/2012
Date