



Support to the Warfighter Symposium

September 29-30, 2021

VIRTUAL

Hosted by:

Office of United States Senator Richard Burr

Office of United States Senator Thom Tillis

North Carolina Military Business Center

North Carolina Biotechnology Center

UNC System

Save the Date:

Medical, Biomedical & Biodefense: Support to the Warfighter Symposium

SEPTEMBER 29, 2021

Requirements and Acquisition Processes: Department of Veterans Affairs and North Carolina Veterans Affairs Facilities

Speakers:

- **Fran Perez-Wilhite, Program Manager, Veteran-Owned Business Development, North Carolina Military Business Center (moderator)**
- P. Antoine Broughton, Director, Direct Access Program/Strategic Outreach and Communications, Department of Veterans Affairs, Office of Small and Disadvantaged Business Utilization
- Brenda Richardson, Logistics, VISN 6, VA Mid-Atlantic Health Care Network
- Alicia Smith-Freshwater, Bio Med, VISN 6, VA Mid-Atlantic Health Care Network
- Michael Eskarous, Contracting Small Business, VISN 6, VA Mid-Atlantic Health Care Network
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Support to the Warfighter Symposium

SMALL BUSINESS PRESENTATION FOR MEDICAL, BIOMEDICAL, AND BIODEFENSE SUPPORT TO THE WARFIGHTER SYMPOSIUM

Briefer: P. Antoine Broughton
DIRECTOR, DIRECT ACCESS PROGRAM/STRATEGIC
OUTREACH AND COMMUNICATIONS



Small Businesses Contributions

- VA acquires over \$8B in goods and services from small businesses annually, with last year's spend totaling nearly \$10B.
- Since 2007, VA has maintained a consistent record in meeting its Service-Disabled Veteran-Owned Small Business (SDVOSB) and Veteran-Owned Small Business (VOSB) goals.



Executive Order 13985 and Small Business

SDVOSBs and VOSBs have even more opportunities available to them with President Biden's Executive Order (EO) 13985 Advancing Racial Equity and Support for Underserved Communities Through the Federal Government.



Choose **VA**

VA



U.S. Department
of Veterans Affairs

Inclusivity in Federal contracting means firms owned by members of underserved communities have enormous prospects with VA.



Who Can Do Business With VA?

- Veterans First, but not Veterans Only
 - SDVOSBs and VOSBs verified by the Center for Verification and Evaluation
 - Women-Owned Small Businesses
 - HubZone
 - 8(a)



OSDBU Services for Small Businesses

- Start doing business with VA by becoming verified as an SDVOSB or VOSB.
- Information about the Verification Program is available at <https://www.va.gov/osdbu/verification/index.asp>
- If you are not a Veteran, consider partnering with one. A listing of VA-verified firms is accessible through the Vendor Information Pages (VIP) at <https://vetbiz.va.gov/vip/>
- Visit <https://www.va.gov/osdbu/outreach/soc/training.asp> to find training webinars
- Visit <https://www.vetbiz.va.gov/events/> to view upcoming business networking events.



Useful Online Information

- VA Forecast of Contracting Opportunities:
<https://www.vendorportal.ecms.va.gov/eVP/fco/FCO.aspx>
- Contact information for Small Business Liaisons:
<https://www.va.gov/osdbu/about/contacts.asp#sbl>
- Federal OSDBU Council:
<https://hallways.cap.gsa.gov/app/#/gateway/federal-osdbu-directors-interagency-council/10172/members>



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VA

VISN 6

Steph Young, acting Network Director

Asheville ♦ Durham ♦ Hampton ♦ Fayetteville ♦ Richmond ♦ Salem ♦ Salisbury



Choose  A

VISN 6 Requirements and Acquisitions Processes

29 September 2021

Michael Eskarous, NCO 6 Small Business Specialist

Brenda Richardson, VISN 6 Deputy Chief Logistics Officer

Alicia Smith-Freshwater, VISN 6 Chief Biomedical Engineer

- Introductions
- VISN 6 Overview
- VISN 6 Healthcare Technology Program
- VISN 6 Supply Chain Management
- VISN 6 Acquisition & Contractual Process
- Equipment Processes
- Equipment Procurement Opportunities

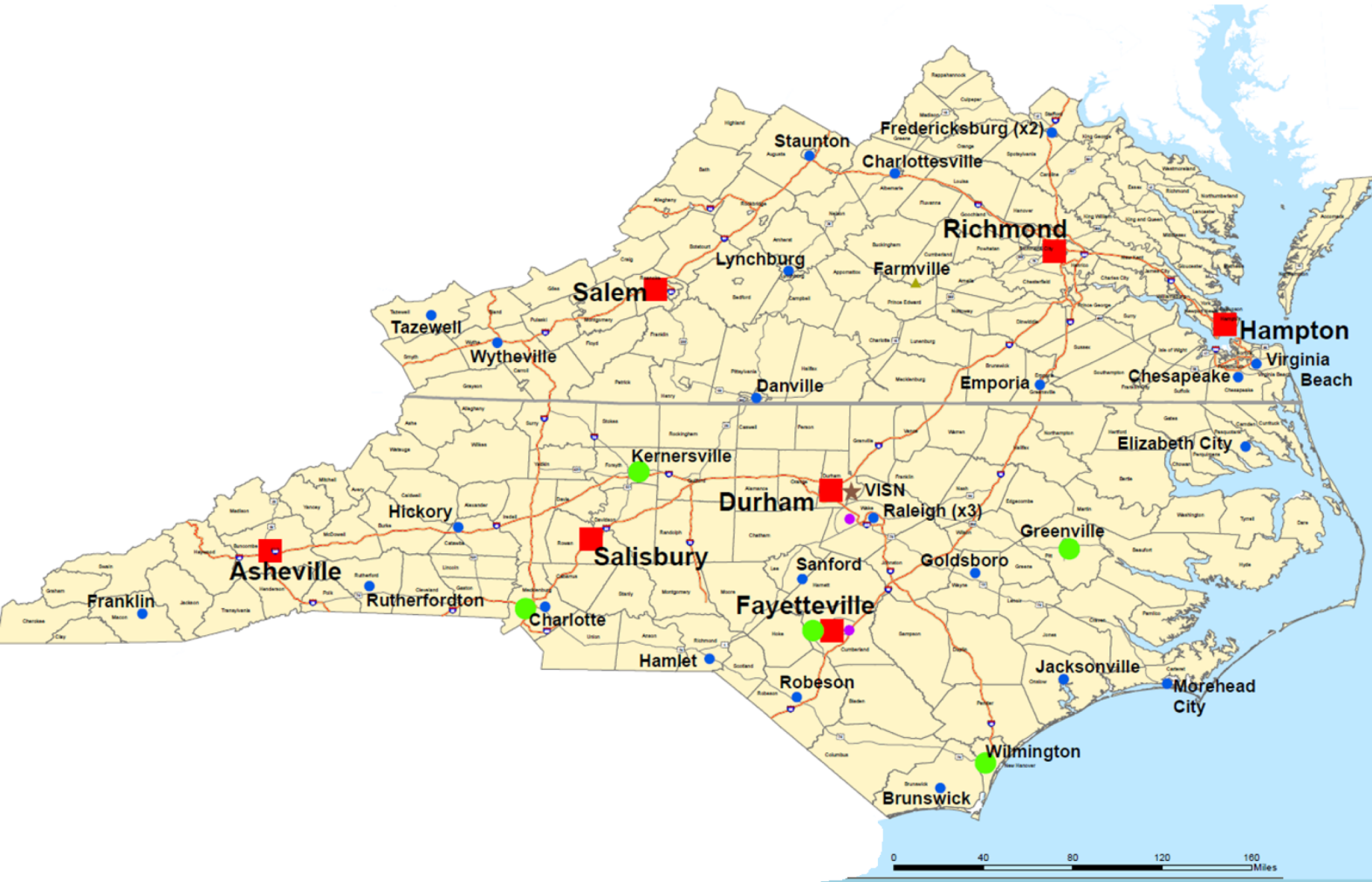


VISN 6 High-Level Overview

- 7 Medical Centers
- 29 Outpatient Clinics
- 5 Health Care Centers – added \$1M Square feet of Outpatient Care for Veterans in Wilmington, Greenville, Fayetteville, Kernersville and Charlotte
- 2 Dialysis Clinics
- 10 Vet Centers

VISN 6 Snapshot

- VISN 6 is the fastest growing network
- Employs greater than 18,000 full-time staff
- Operates 42 sites of care
- Over 400,00 Unique patients
 - 4,741,750 Annual visits
 - 6,264,440 Encounters
 - 2,534,929 Completed appointments
 - 458,522 Bed Days of Care

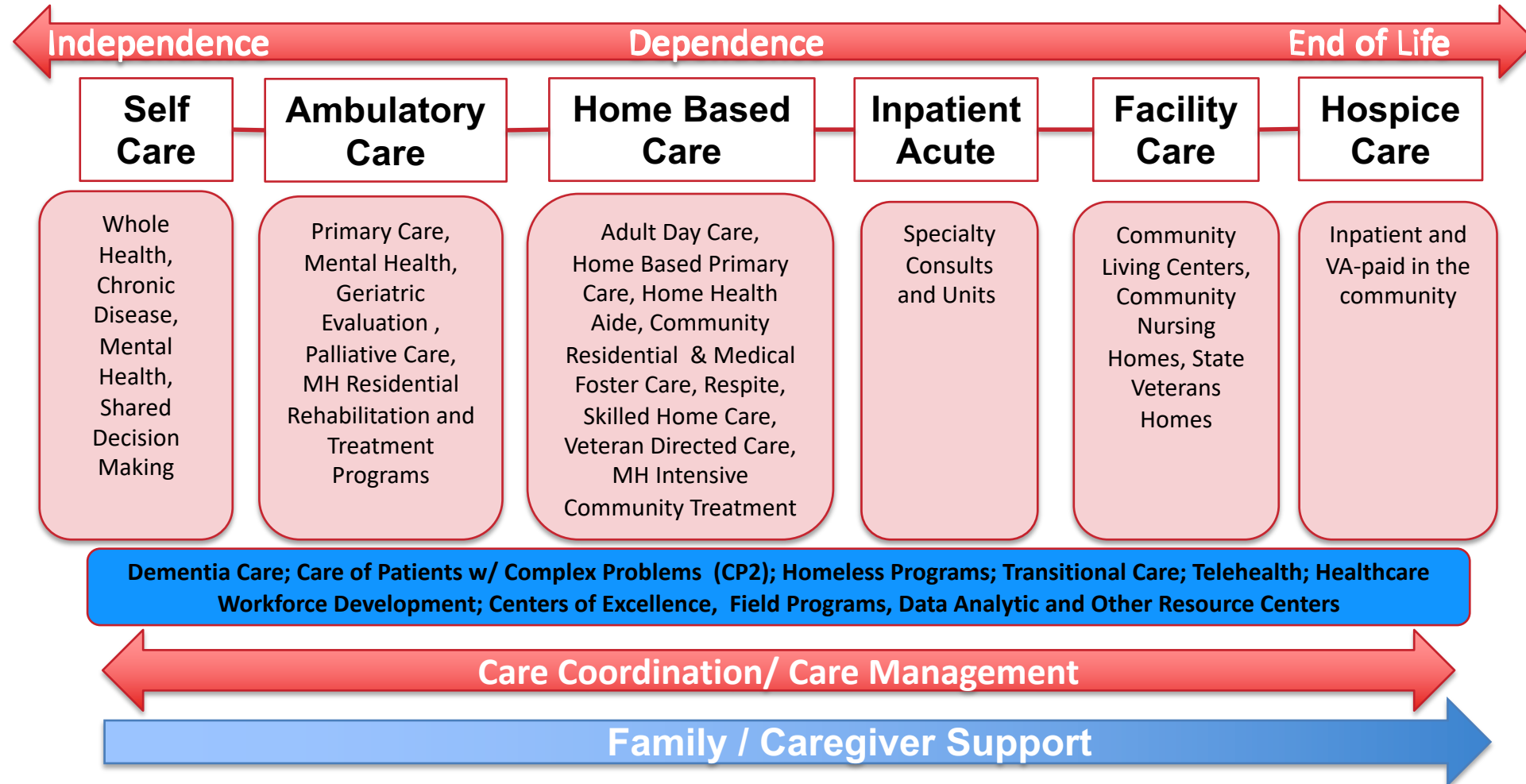


	Totals	Veteran s	% Veteran s	Non Veterans	% Non- Veterans
ASHEVILLE	2,006	572	28.51%	1,434	71.49%
DURHAM	3,682	997	27.08%	2,685	72.92%
FAYETTEVILLE	2,199	934	42.47%	1,265	57.53%
HAMPTON	1,982	869	43.84%	1,113	56.16%
RICHMOND	3,623	883	24.37%	2,740	75.63%
SALEM	1,905	465	24.41%	1,440	75.59%
SALISBURY	3,140	1,052	33.50%	2,088	66.50%
V06	47	19	40.43%	28	0.00%
VISN Overall	18,584	5,791	31.16%	12,793	68.84%



Choose **VA**

Focusing Efforts on Things We Do Best for Our Veterans

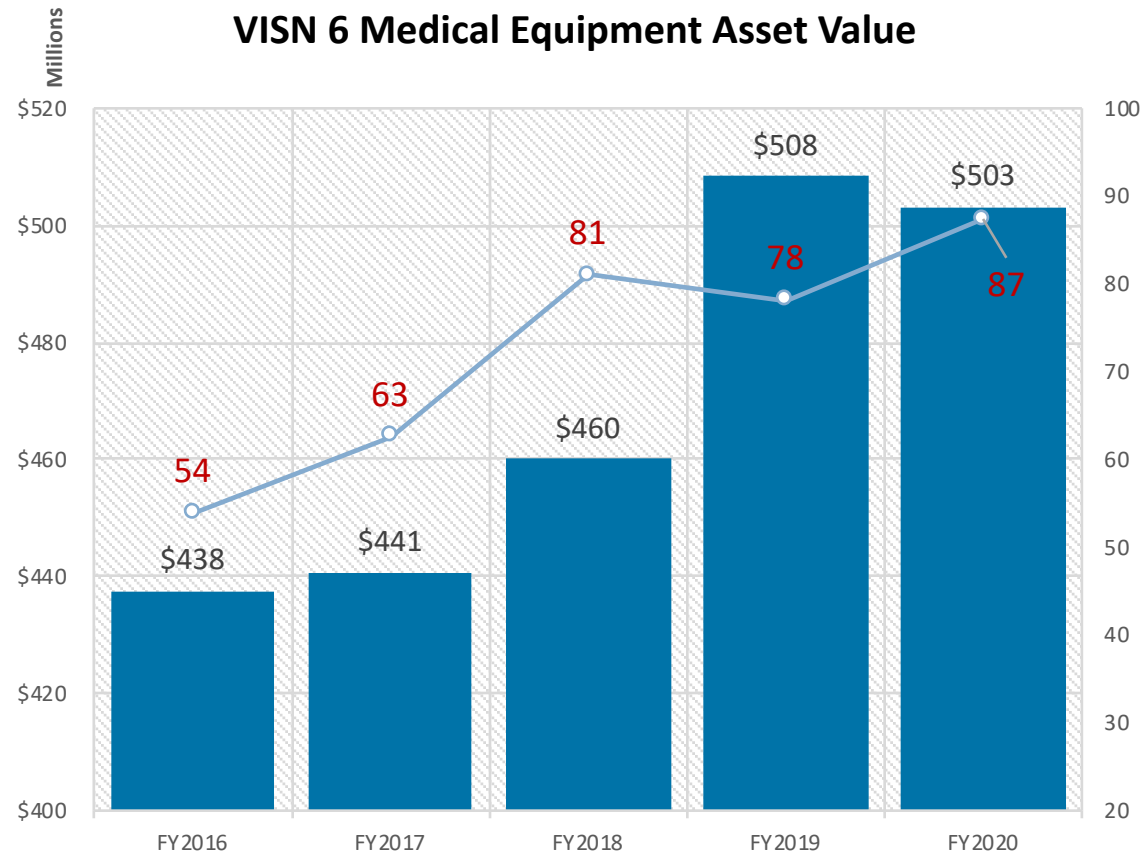


Healthcare Technology Program

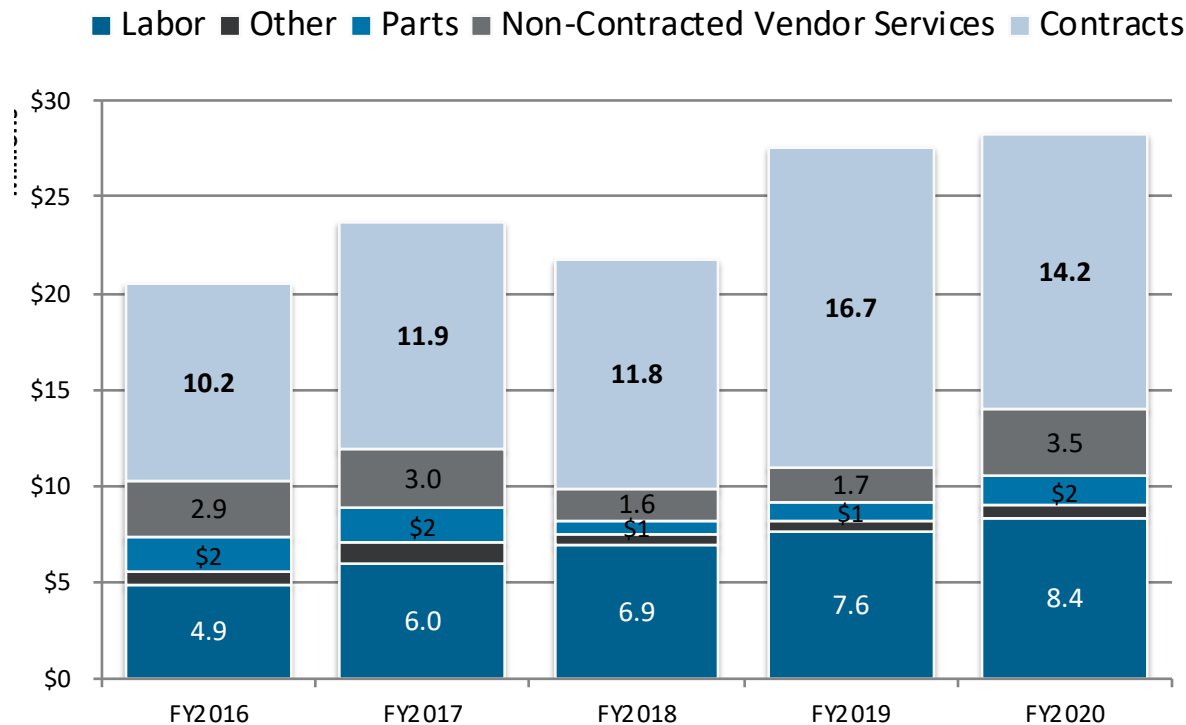
- **Goal: Enhance Veteran Patient Experience and Access to Health Care**
 - VISN 6 strives to provide high quality care in a fiscally responsible manner, while maintaining mutually beneficial relationships with academic and sharing partners.
 - VISN 6 Healthcare Technology Management Program provides Equipment planning, Life Cycle Management, Medical Device Interoperability and Systems Integration, Maintenance Management, Cybersecurity, Technology Assessment, Advancement, and Specifications Development

Healthcare Technology Portfolio

VISN 6 Medical Equipment Asset Value



HTM Program Expenditures Summary



Acquisitions and Contractual Authority

- Acquisitions and contractual commitments can only be made by Government officials having expressed authority to enter into such agreements on behalf of the Government.
- The ONLY Government officials with such authority are Warranted Contracting Officials. Any discussions of contractual requirements do not constitute contractual direction or authorization of any kind.
- Future contractual directions, If any, shall only come from a Warranted Contracting Officer.



Procurement Hierarchy – Tier 1a

Kingdomware

- Rule of Two Mandatory at VA. VA must apply it “Rule of Two” to foster contracting with Veteran-owned small businesses across the board.
- In a June 16, 2016 opinion, a unanimous Supreme Court held that small business contracting set-asides imposed by the Veterans Benefits, Health Care, and Information Technology Act of 2006 (the “2006 Act,” codified at 38 U.S.C. § 8127) are mandatory, apply even when the VA has already met its annual small business contracting goals, and extend to Federal Supply Schedule (FSS)



Procurement Hierarchy – Tier 1b

Second Preferred Source and Includes:

- National committed-use contracts
- VA Federal Supply Schedule (FSS), Group 65 Medical/Dental/Vet and Group 66 – Instruments & Lab; in the following order of precedence:
 - (1) Nationally awarded Blanket Purchase Agreements (BPAs) against FSS Contracts
 - (2) Multi-VISN, VISN, or locally awarded BPAs against FSS Contracts
 - (3) FSS purchases
- Competition in Contracting Act (CICA)



Procurement Hierarchy – Tier 2

Next Preference level and includes:

- Multi-VISN or VISN contracts for items without national or FSS contracts
- VAMC contracts not based on FSS contracts

Procurement Hierarchy – Tier 3

Least Method: Open Market purchases, educational or nonprofit institutions

Procurement Process - Supplies

Majority of Medical/Surgical Supplies are acquired through a Prime Vendor

Other supply requirements are met via a Prime Vendor arrangement, e.g. Pharmaceuticals and Subsistence

All other needs are acquired following a procurement hierarchy

- Mandatory Sources – Tier 1 Consideration
- Open Market – Last Consideration

Procurement Process - Supplies

Purchase Card Program

- Generally Restricted to the Micro Purchases Requirements less than \$3.5k; no competition is necessary; however, vendors will be rotated
- Used mostly for supplies and services deliverable within a billing cycle

How VISN 6 Buys Medical Devices/System

Equipment Processes

■ **Non-Capitalized Equipment**

- Costing < \$250k
- Managed by the Medical Centers

■ **Capitalized Equipment**

- Costing > \$250k
- Managed by the Capital Investment board

Selection Processes

■ **Non-Capitalized Equipment**

- Facility Equipment Committees
- Service Line Chiefs, Logistics & Biomedical Engineering facilitate prioritization of requests
- Integrated Product Teams review and evaluate vendor proposals

How VISN 6 Buys Medical Devices/Systems...

Equipment Processes

■ Non-Capitalized Equipment

- Costing < \$250k
- Managed by the Medical Centers

■ Capitalized Equipment

- Costing > \$250k
- Managed by the Capital Investment board

Selection Process

■ Capitalized Equipment

- Interdisciplinary team (Capital Investment Board) meets annually
- CIB comprised of Directors, Physicians, Nursing, IT, Engineering, Logistics, Fiscal, SME Ad-Hoc
- CIB reviews and ranks proposals based on: Mission, Strategic Objectives, Access Improvement, Compliance, Safety and ROI

How Can You Help Us?

Past Approach:

- Providing opportunities to Small Businesses (SB)
- Connecting SBs with VHA Prime Vendor

Future Approach:

- Increase SBs procurement of products and services through VHA Prime Vendor
- Educating/Training SBs on the needs of the VHA, VISN's and local healthcare facilities.

Federal Business Opportunities-www.fbo.gov

eBuy – www.ebuy.gsa.gov

VA's Forecast of Contracting Opportunities-<https://www.vendorportal.ecms.va.gov/eVP/fco/FCO.aspx>



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SALISBURY VA HEALTH CARE SYSTEM

SUPPLY CHAIN MANAGEMENT SERVICE

Presented by:

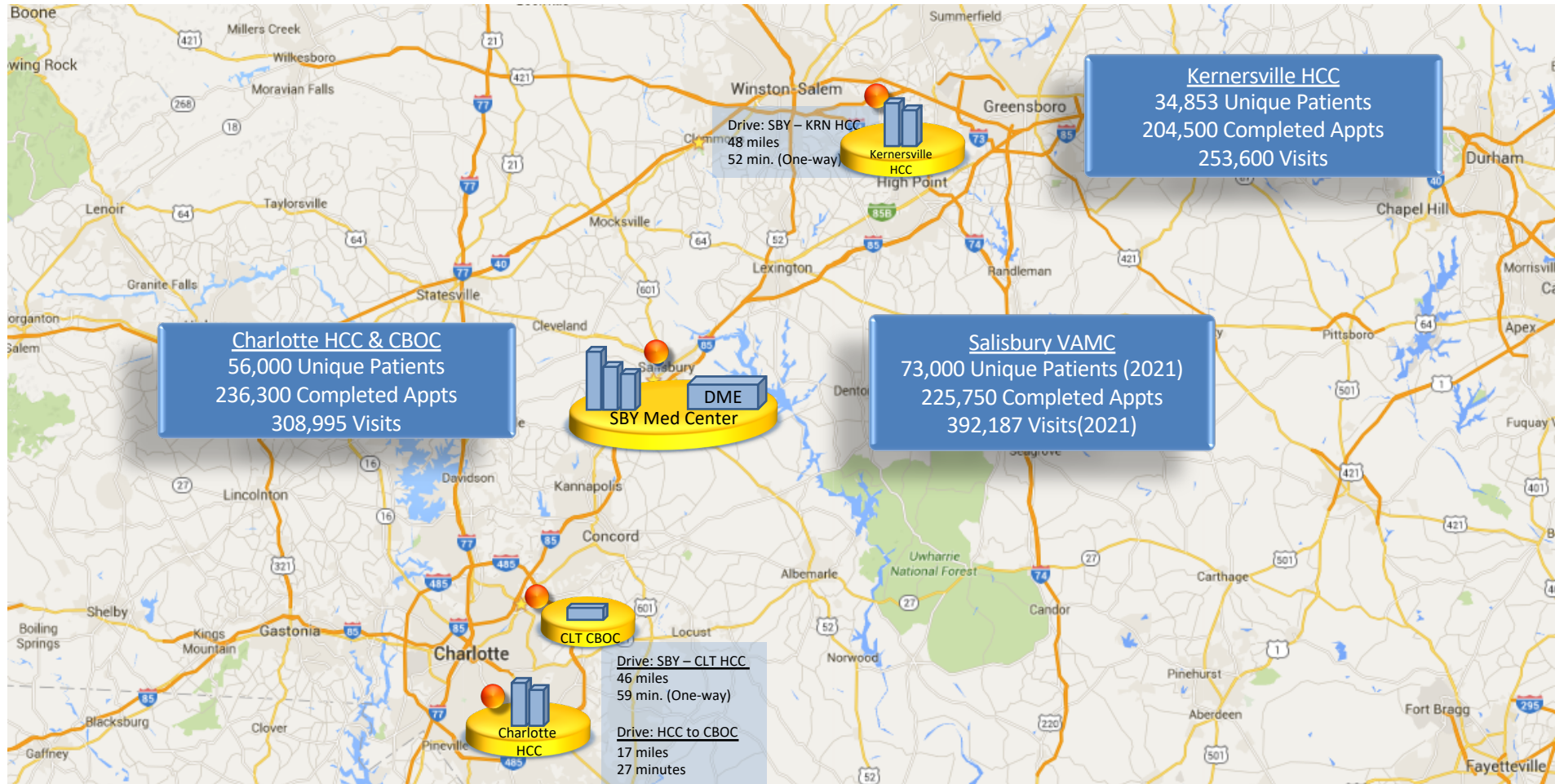
Linda Copeland

Assistant Chief, Supply Chain Management Service

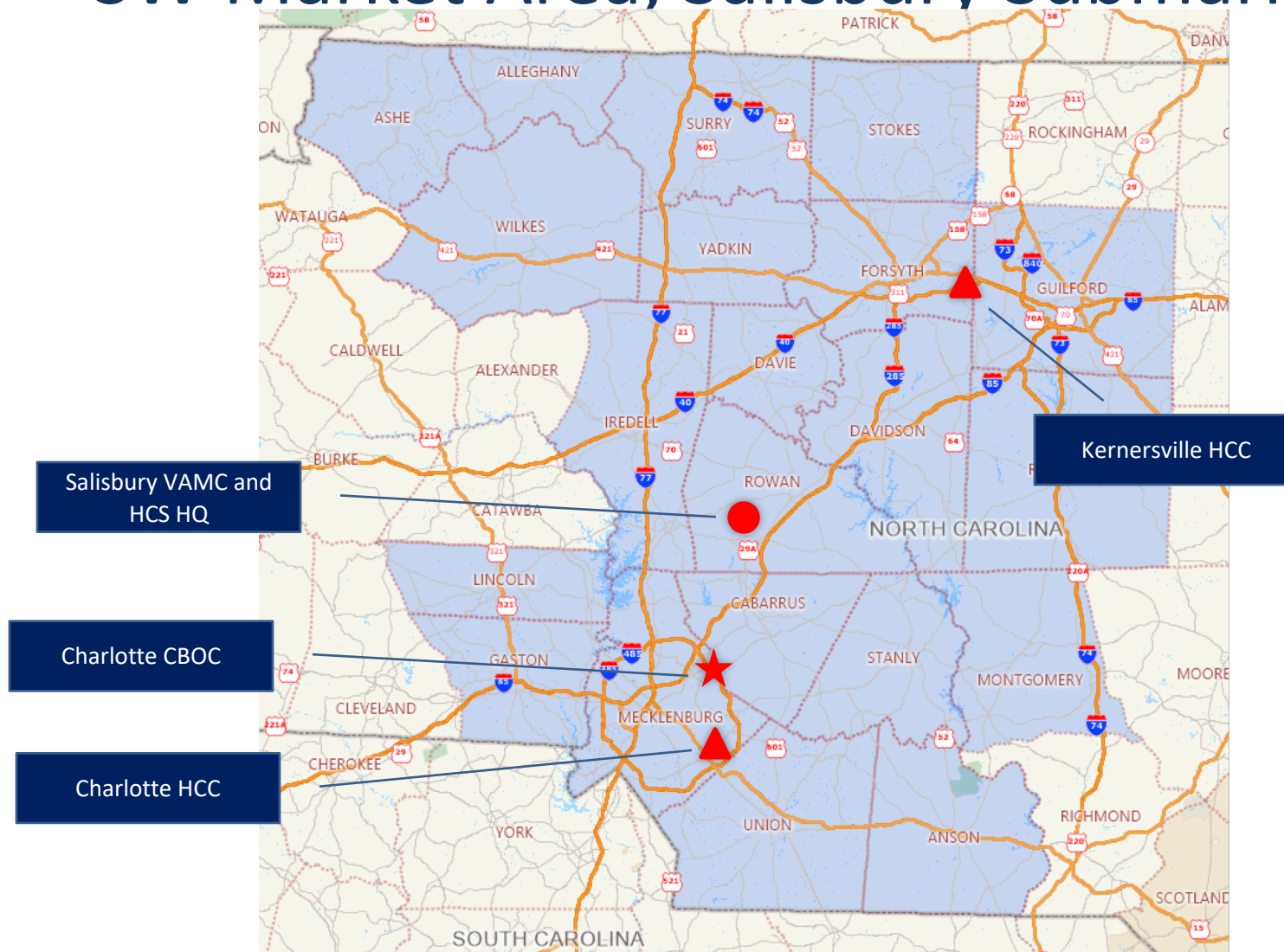
VISN 6 | Station 659 | Salisbury, NC



Current SVAHCS FY 2021 Workload Information



SW Market Area, Salisbury Submarket



Procurement Hierarchy

1. Med/Surg Prime Vendor (MSPV) Catalog
2. Existing mandatory Blanket Purchase Agreements (BPA) & Indefinite Delivery/Indefinite Quantity (IDIQ) contracts
3. Existing regional BPA & IDIQ contracts
4. Electronic Catalog (ECAT)
5. Gov't Purchase Cards – SVAHCS Exercises “Rule of Two” for Service Disabled Veteran Owned Small Business and Veteran Owned Small Business

Defense Logistics Agency (DLA) – Prime Vendor Web Ordering (PVWO)



VA

U.S. Department
of Veterans Affairs



TROOP SUPPORT MEDICAL



CardinalHealth



Owens & Minor



Med/Surg Prime Vendor Program

- Enables global distribution of medical/surgical products to all DLA Medical Surgical Prime Vendor (MSPV) customers
- The DLA-PVWO Program facilitates the Purchase of Consumable and disposable Medical and Surgical supplies and some small Medical Equipment
- Customers include Defense Health Agency, Army, Navy, Air Force, Marine Corps, Coast Guard, as well as federal civilian agencies (VA)
 - Provides a Primary and a Backup Prime Vendor
 - Cardinal Health... SPE2DV-17-D-0001 (Primary)
 - Owens & Minor... SPE2DV-17-D-0002 (Back-Up)

Previous MSPV Contract		
Years	Month	MSPV Spend
2020	Jul	\$ 375,335.07
	Sep	\$ 171,546.06
	Oct	\$ 287,000.44
	Nov	\$ 257,532.21
	Dec	\$ 284,827.47
2021	Jan	\$ 303,325.53
	Feb	\$ 330,614.43
	Mar	\$ 472,744.59
	Apr	\$ 413,784.52
	May	\$ 258,733.35
Grand Total		\$ 3,155,443.67

DLA-PVWO		
Years	Month	MSPV Spend
2021	Apr	\$ 27,535.01
	May	\$ 37,715.99
	Jun	\$ 591,726.72
	Jul	\$ 974,380.25
	Aug (As of 8/20/21)	\$ 210,619.28
Grand Total		\$ 1,841,977.25



Local Purchases – Government Purchase Card (Supply Chain Management)

Fiscal Year 21 Purchase Card Transactions			
Year	Month	Total Cost	Total Purchase Transactions
2020	Oct	\$ 2,997,407.65	5004
	Nov	\$ 2,730,391.91	4439
	Dec	\$ 2,634,459.62	4815
	Jan	\$ 2,692,413.34	4692
	Feb	\$ 2,793,695.07	5081
	Mar	\$ 3,739,618.06	6881
	Apr	\$ 3,728,092.96	6477
	May	\$ 3,014,419.82	5526
2021	Jun	\$ 3,616,919.94	6162
	Jul	\$ 3,504,894.39	6158
	Aug	\$ 2,394,775.04	4346
Total To Date \$		33,847,087.80	59581



Contracts For Equipment, Supplies, and Services

Fiscal Year 21 Contract Actions

Year	Month	Total Cost	Number of Awards
2020	Oct	\$ 18,391,380.09	42
	Nov	\$ 372,035.94	8
	Dec	\$ 20,031.36	4
2021	Jan	\$ 612,452.29	10
	Feb	\$ 119,727.19	5
	Mar	\$ 87,664.73	4
	Apr	\$ 99,792.34	6
	May	\$ 584,486.70	10
	Jun	\$ 890,504.09	15
	Jul	\$ 75,627.00	3
	Aug	\$ 253,403.22	8
	Total To Date	\$ 21,507,104.95	115

Contractual agreements with vendors provides the VA with an opportunity to stabilize the overall supply chain and provide long-term opportunities for SDVOSB and other small businesses

SBY Small Business Utilization

Contract Type	Contract Total	Contract Percentage
Commodities		
Other than Small Business	71	59%
Small Business	50	41%
Total:	121	
Healthcare Resources		
Other than Small Business	3	27%
Small Business	8	73%
Total:	11	
Services		
Other than Small Business	25	55%
Small Business	21	45%
Total:	46	
Utilities		
Other than Small Business	5	83%
Small Business	1	17%
Total:	6	
Overall		
Other than Small Business	145	54%
Small Business	90	46%
Total:	225	

Opportunities For Industry

- 2016 Kingdomware Technologies Ruling:
 - VA shall award contracts with SDVOSB or VOSB as long as market research support the award
 - Many SDVOSBs and VOSBs are authorized resellers or have contracts to sell equipment, supplies, and services from “large” businesses
 - Any contract with a value over \$25K, shall be posted to FedBizOpps
 - Vendors should routinely review opportunities with the VA on FBO
- Vendors interested in opportunities for local (GPC) VA purchases
 - VA Supply Chain Management purchases are based on the requests of the clinical staff or other subject matter experts
 - VA Supply Chain Management does not own the majority of the requirements within the facility

Clinical staff and SMEs are the key to entry into the VA supply chain system...not the Supply Chain Management staff



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Fayetteville VA Coastal Healthcare System



VA



U.S. Department of Veterans Affairs

Veterans Health Administration

Fayetteville Veterans Affairs Medical Center

Leadership Overview



Jeffrey S. Morgan, MD
Chief of Staff



Dan Fields
Associate Director,
Operations



Daniel Dücker
Executive Director

Debra Young, MSN
Associate Director,
Patient Care Services



Damian Deloach,
Acting, Assistant
Director



Care In The Community – Building Provider Network

In The Works

- Vendor Summit in early planning stages for FY22 (virtual pending COVID)
- Local Vendor Relations Team in recruitment process to provide elevated customer service

Available Services

- Interim Vendor Relations Specialist on site to coordinate vendor customer service needs (FNCVHACITCVendors@va.gov)
- Monthly Vendor Informational WebEX is provided on every 3rd Tuesday as well as by appointment for 1-on-1 (email FNCVHACITCVendors@va.gov for invite)
- Ongoing Health System Referral Management (HSRM) WebEX training. CITC would like to encourage community vendors to utilize HSRM to coordinate care with VA patients
- Using exciting technology to enhance care coordination and record management efficiency
 - Veteran Health Information Exchange (VHIE)
 - Texting (Appointment Attendance Confirmation)

Alibies

- Collaborative Discussions initiated and bearing fruit with major vendors in high-need sectors: EmergeOrtho (largest orthopedics vendor in SE North Carolina), Cape Fear Orthopedics, Pinehurst Medical Multi-medical Specialty.
- The Region 1 Regional Provider Experience Manager has informed FVACHCS Asst Chief that she has not had a vendor complaint regarding FVACHCS CITC in the last 18-months.

VHA Buy vs Build Considerations

VA partners in with community vendors to address VA's ability to manage the Veterans need with the internal capacity to provide that need.

- There are several factors that help shape the decision to make vs buy a clinical service.
- Is there a need?
- Can VA fulfill that need using its own resources? At what cost?
- What is community availability? What is the cost to provide the necessary services via the community.
- What are the quality indicators that will be measured to determine Veteran experience?

Even though it may cost more to go one particular direction over another, it is the responsibility of the VHA to fulfill their mission to care for Veterans with their best interest in mind. Cost will never trump the delivery of quality, safe, timely care.

DoD Relationships

Womack Army Medical Center, Fort Bragg, NC

- Sharing Agreement/MOU with Womack Army Medical Center in place since 2015.
 - Fayetteville Rehab Center (Joint Investment Funded)
 - In Patient Dialysis Unit (Joint Investment Funded)
- Since the first iteration of that agreement it has grown to include more shared services and clinical resources. First of its kind in VISN 6.

Future Efforts:

- Partnering with Womack ENT to implant the INSPIRE device for sleep apnea. This will be the first VA/DoD facilities in NC to provide INSPIRE. Current practice is Veterans are referred to the Durham VA for ENT evaluation and then to Duke for the device.
- Engaging with Womack to explore sharing Sexual Assault Nurse Examiners which will enable all VA sexual assaults be sent to at the Womack of the initial exam.

Womack Shared Services

- Department of Emergency Medicine and Urgent Care
- Department of Surgery, General, Vascular, Thoracic, Gastrointestinal, Bariatric, Neurosurgery, Plastics and Reconstruction, Otorhinolaryngology (ENT), Wound Care, Audiology, Speech Pathology
- Department of Urology
- Department of Orthopedics, General and all sub-specialties, Podiatry, Hand, Ankle, Spine Joint and Rehabilitation/ Occupational Therapy/Physical Therapy
- Department of Medicine to include Internal Medicine, Critical Care and all sub-specialties, i.e. Pulmonology, Rheumatology, Dermatology, Endocrinology, Gastroenterology, Oncology, Hematology, Cardiology, Dialysis, Pain Management, Allergy/Immunology
- Dental, Oral Maxillofacial Surgical Services
- Traumatic Brain Injury (TBI)
- Department of Obstetrics and Gynecology (OB/GYN) to include Women's Health and Breast Clinic
- Department of Radiology to include Magnetic Resonance Imaging (MRI) and Nuclear Medicine
- Department of Pharmacy
- Department of Pathology, Blood Support, Laboratory Testing and Autopsy Support
- Department of Optometry

DoD Relationships

Naval Medical Center Camp Lejeune

- Similar to Womack, FVACHCS has partnered with NMCCL for over 5 years. Initial services included acting as an emergency department for our rural Veterans located in the catchment area.
- Updated sharing agreement expected to be in place by November 2021

In-Progress Efforts:

- Preliminary planning with 2nd Dental Battalion at NMMCL for similar agreement to Seymour Johnson
- Adding shared orthopedic surgery, Women's Health, PT/OT services

DoD Relationships

Seymour Johnson Air Force Base, Goldsboro, NC

- Dental Resource Sharing Agreement with Seymour Johnson 4th Medical Group. 4th Medical Group will provide eight dental chairs. The VA will provide dental care to Airmen which will decrease AF need for community care. Agreement is expected to be signed in Nov 21.

Academic Relationships

GME Affiliations Agreements

- **Womack Army Medical Center**-Family Medicine
- **University of North Carolina Hospitals**- Ophthalmology
- **East Carolina University/Vidant**-Psychiatry
- **Campbell University**- Internal Medicine, Gen. Surgery

Academic Relationships

Associated Health/Health Professions Trainees

- Campbell University
- Central Carolina Community College
- East Carolina University
- Fayetteville State University
- Fayetteville Technical Community College
- Methodist University
- Sandhills Community College
- Southern Regional Area Health Education Center (SRAHEC)
- University of NC-Chapel Hill
- University of NC-Pembroke
- University of NC-Wilmington
- Cape Fear Community College

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