



**REQUEST FOR PROPOSAL  
DENTAL EQUIPMENT – NORTHWEST EXPANSION**

450 W. Paseo Redondo  
Tucson, AZ 85701  
Website: <https://www.elrio.org>  
RFPs: <https://www.elrio.org/about-elrio/rfps/>  
Email: [contracts@elrio.org](mailto:contracts@elrio.org)

Proposals must be received by **December 6, 2024 by 5:00 P.M. (AZ MST)**

Submit proposals to [contracts@elrio.org](mailto:contracts@elrio.org), subject line: El Rio Health Dental Equipment  
Northwest Expansion RFP

Questions may be directed to the attention of the El Rio Health Compliance  
Department at [contracts@elrio.org](mailto:contracts@elrio.org).



## **MISSION STATEMENT**

El Rio Health Santa Cruz Neighborhood Health Center Inc.'s ("El Rio Health") mission is to improve the health of our community through comprehensive, accessible, affordable, quality, and compassionate care. El Rio Health's Health Home mission is to provide our patients with integrated comprehensive quality care with the ongoing vision to optimize their overall health and quality of life.

## **ABOUT EL RIO HEALTH**

El Rio Health is dedicated to providing health care for all people. Since El Rio Health began in 1970, we have grown from 10,000 patients to over 125,000 patients, and currently serve 1 in 10 community members for primary, dental, and behavioral health care. We are proud to be one of the most innovative, highly regarded, non-profit health centers in the United States. Our focus is positive outcomes and treating the person as a whole. Annual revenues are approximately \$280 million per year and the organization has 1,889 dedicated employees. Our health care is delivered by compassionate, professionally trained, and integrated health teams who give from their hearts to provide world class care. "Your Health is Our Passion."

At El Rio Health, we are committed to health equity. Everyone should have the opportunity to attain their full health potential without being discriminated against or disadvantaged. We strive to provide care that makes all our patients feel safe, heard, and valued. Part of creating health equity is committing to diversity and inclusion within our clinics, among our patients and our staff. We believe it is critical for our staff, not only to look like but also to understand and empathize with the community we serve. We acknowledge and celebrate the national origin, language, race, ethnicity, culture, age, religion, income, physical and mental ability, gender identity, and sexual orientation of our patients and our employees.

El Rio Health receives funding from health insurers, patient co-pays, reduced patient fees from those that qualify for our sliding fee scale, government grants and private donations to the El Rio Health Center Foundation. El Rio Health is a 501(c)(3) Non-Profit organization, as well as a Federal Tort Claims Act Deemed Facility. This health center receives Health & Human Services funding and has Federal Public Health Service deemed status with respect to certain health or health-related claims, including medical malpractice claims, for itself and its covered individuals.

El Rio Health provides comprehensive health care services at 14 locations. Our patient-centered healthcare teams include Pediatricians, Internists, OB/GYN practitioners, Midwives, Nurses, Nurse Practitioners, Family Medicine Practitioners, Medical Assistants, Dentists, Health Coaches, Pharmacists, Licensed Clinical Social Workers, Radiologists, Behavioral Health Professionals, Community Health Advisors and Referral Specialists.

## **INTENT**

El Rio Health is soliciting offers from Dental supply vendors and/or manufacturers for the pricing of various dental equipment, and to furnish and deliver said equipment to the new El Rio Health Center located at 4888 North Stone Avenue, Tucson, Arizona. This RFP shall include the work required to meet the scope of work and any resulting contract.

## **BACKGROUND**

The Offeror will provide competitive pricing for dental equipment for the new El Rio Health Center located at 4888 N Stone Ave, Tucson, AZ 85704. This site is a 91,578 sq foot, two-story, standalone medical building that is being remodeled and will be used as a community health center that will provide services ranging from Dental Care, Primary Care, Pharmacy, Laboratory, Radiology, Sports Medicine, Physical Therapy, and Behavioral Health services. The Dental services suite will be located on the first floor. The Offeror will be



required to provide dental design services and site visits as well as collaborating with the El Rio Health Facilities team, Meridian, BWS Architects and Venn Construction.

**SCHEDULE**

**Proposed date of implementation:**

- 1. Design services: 12/2024
- 2. Installation of equipment: 11/2025

**SCOPE OF SERVICES**

- 1. The Offeror will provide pricing for the specific items listed on the attached equipment list. Substitutions of equal or better performance are allowed. Equal items will be considered, provided the offer clearly describes the item. Offers for equal items will state the brand and model number or level of quality. The determination by El Rio Health as to what items are equal shall be final. The Offeror should be prepared to provide a sample of products equal to products listed in other submissions.
- 2. If there are shipping charges and/or installation fees, they must be listed separately in the submission.
- 3. Delivery will be directly to El Rio Health Center, 4888 N. Stone Avenue, Tucson, Az 85704.
- 4. Equipment may arrive for installation prior to the completion of the remodel. The Offeror shall be prepared to store the equipment at the Offeror's expense until installation is scheduled. If there is a separate charge for storage and/or delayed delivery, the offeror must include that cost as a line item in the submission.
- 5. El Rio Health is a 501(c)(3) tax exempt organization. Materials are tax exempt, but tax will be paid on labor charges. Tax exemption letters are available upon request.
- 6. El Rio Health reserves the right to:
  - a. Award bids received based on individual items, or groups of items, or on the entire list of items
  - b. To reject any or all bids, or any part thereof
  - c. To accept the bid that is in the best interest of El Rio Health
- 7. All items purchased will be due for delivery on the date requested by El Rio Health and in a single delivery. Delivery will be determined by the construction project completion date.

**DETAILED OBJECTIVE AND SOLUTION REQUIREMENTS**

The following section included detailed questions regarding the minimum requirements for this RFP.

- 1. Please tell us about the structure of your company. This summary should include financial status / economic conditions of the company, general staffing/number of employees, organizational structure and experience providing dental equipment and design services, especially for a FQHC.
- 2. Dental equipment for 16 operatories (please see Exhibit A).

**DATES AND TIMEFRAMES**

The following timeline is based on El Rio Health's requirements and represents the activities planned as part of the due diligence process of making an award. El Rio Health reserves the right to change the times and activities as deemed necessary.

<b>RFP Issue Date</b>	November 15, 2024
<b>Submit Written Offeror Questions to</b> <a href="mailto:contracts@elrio.org">contracts@elrio.org</a> . Subject Line: El Rio Health Dental Equipment NW Health Center Expansion RFP	November 22, 2024 @ 5:00pm (MST)



<b>Answers to Submitted Questions</b> will be emailed to all Offerors and posted at <a href="https://elrio.org/about/rfps">https://elrio.org/about/rfps</a>	November 27, 2024 @ 5:00pm (MST)
<b>Proposal Submission Deadline</b> Submit Proposal to via email Subject line: El Rio Health Dental Equipment NW Health Center Expansion RFP	December 6, 2024 @ 5:00pm (MST) <a href="mailto:contracts@elrio.org">contracts@elrio.org</a>
<b>Proposals Opened</b>	December 9, 2024
<b>Offeror Presentations</b>	To be determined
<b>Issuance of Award</b>	Week of December 9, 2024

**RESPONSE INSTRUCTIONS**

Responses should include only the information requested and no other marketing materials. To ensure that RFP documentation and subsequent information (modifications, clarifications, addendum, written questions & answers, etc.) is directed to the appropriate persons within the financial institution, please provide the following information:

- Name of primary contact
- Mailing address of primary contact
- Telephone number of primary contact(s)
- E-mail address of primary contact
- Additional contact people with same information provided as primary contact(s)

**PROPOSAL REQUIREMENTS**

1. The Offeror agrees to provide their best and final price in the submitted proposal. El Rio Health will only accept the first and final offer; we do not allow secondary proposal/pricing to be presented.
2. The Offeror agrees if they are awarded the request for proposal, that they will deliver the goods/services at the prices set forth in the submitted proposal.
3. The Offeror must submit to background checks and provide information to the Project Director, if requested, prior to any persons being allowed on El Rio Health property.
4. The Offeror will provide a signed and dated copy of the Company IRS W-9 form with the submitted proposal.
5. If requested, the Offeror shall provide three (3) reference clients and three (3) trade references. Reference clients shall be of a similar scope of work as defined herein. Trade references may be banks, equipment suppliers, consumables vendors, staffing agencies, repairs, and maintenance vendors, etc. and shall contain names and phone numbers. References will be checked.
6. The successful Offeror will have attested to following Equal Opportunity Employment Practices: performing background checks on employees, having proof of right of work status of employees, providing employees training on moving and heavy lifting practices, and having appropriate business licenses and insurance policies. All these documents will be shared with the El Rio Health Project Director and the Compliance and Risk Department.
7. The Offeror must NOT appear on the Office of Inspector General (OIG) list of excluded individuals or entities.



8. The Offeror (including any officers, trustees, partners, or employees) must not have a business interest or a close family or domestic relationship with any El Rio Health official, officer, trustee, or employee who was, is, or will be involved in selection, negotiation, drafting, signing, administration, or evaluating Offeror performance. El Rio Health shall make sole determination as to compliance with its Conflict-of-Interest Policy.
9. Offerors must represent that its Proposal, including all work, materials, equipment, and network services comply with governmental and telecommunications regulatory law, ordinances, and regulations within their respective jurisdictions.
10. Persons with disabilities may request accommodation by contacting [contracts@elrio.org](mailto:contracts@elrio.org). Please make all requests as early as possible to allow time to arrange the accommodation.

### **CRITERIA FOR SELECTION**

1. All eligible proposals will be reviewed and rated based on the award criteria.
2. El Rio Health may request presentations from a short list of Offerors and/or request additional information.
3. The award of a contract based on this request for proposal represents the best value for and is in El Rio Health Center's best interest.
4. In no event will El Rio Health be limited to selecting a proposal based solely upon total cost submitted.
5. Although critical, price is only one of the determining factors for the award. El Rio Health reserves the right to make an award without further discussion of the proposals submitted. Proposal evaluations are based solely on the information provided.
6. All Offerors will be notified whether they have or have not been:
  - a. selected to provide a presentation
  - b. are the successful Offeror for the request for proposal

### **OPENING OF PROPOSALS**

1. Proposals will be opened promptly after the deadline to submit proposals. This is not a public opening, and vendors are not invited to attend.
2. Proposals received on time will be opened in the presence of one or more witnesses and the name and address of the Offeror will be recorded.
3. Proposals not received on time will not be opened.

### **AWARD OF CONTRACT**

1. El Rio Health reserves the right to accept the proposal and award this request for proposal to an Offeror that is in the best interest and provides the best value for El Rio Health.
2. El Rio reserves the right to reject all proposals or any part thereof.
3. El Rio Health reserves the right to enter into contractual negotiations and if necessary; modify any terms and conditions of a final contract with the respondent whose Proposal offers the best value to El Rio Health.
4. The final Agreement (Contract) will be signed by El Rio Health and the successful Offeror and returned within an agreed timeframe after the date of Notice of Award. No Agreement will be effective until it has been fully executed by all parties thereto.
5. El Rio Health would prefer to have an ongoing relationship with the chosen Offeror. The character and operating principles of the successful Offeror are important to El Rio Health. After contractual Award it will be important to continue to work with the RFP Team throughout Implementation of the services.



## **GENERAL INFORMATION**

1. Any questions must be submitted by 5:00 pm (MST) on November 22, 2024, allowing sufficient time for a reply to reach all Offerors prior to the submission of their proposals. El Rio Health will post answers to all questions to our website at <https://elrio.org/about/rfps/> under the title of this RFP.
2. Answers to any questions submitted prior to the deadline to submit any questions will be posted on the El Rio Health website RFP link to maintain fair and open competition. No response will be given to any questions submitted after 5:00 pm (MST) on November 22, 2024.
3. General marketing and promotional material are neither required nor desired. The responding firms should concisely but completely describe the service they feel is appropriate for El Rio Health.
4. All questions about the meaning or intent of this request for proposal shall be submitted in writing via email to the Compliance Department via the following email address: [contracts@elrio.org](mailto:contracts@elrio.org). A prompt e-mail response may be expected with copies of the Question(s) and Answer forwarded to all Offerors responding to this RFP. Questions received less than five (5) business days prior to the date for opening of proposals may not be answered.
5. Offerors shall submit a Proposal to: [contracts@elrio.org](mailto:contracts@elrio.org)
6. El Rio Health will not be responsible for any costs incurred by an organization in preparing, delivering, or presenting proposals to this RFP. Once submitted, vendor proposals will become property of El Rio Health and will not be returned.
7. El Rio Health cautions Offerors to assure actual delivery and receipt of any mailed proposal prior to the response deadline. El Rio Health will in no way be responsible for delays caused by any occurrence. El Rio Health will not accept or consider proposals submitted via facsimile transmission.
8. Alternate proposals are NOT authorized and will not be considered.

## **INVITATION IS THE ENTIRE AGREEMENT**

This Request for proposal constitutes the entire agreement between the parties with respect to its subject and will not be modified, altered, or amended in any way except as provided for in this Request.

## **GENERAL DISCLAIMER**

This RFP process does not commit El Rio Health to award a contract to any respondent. Any response, including written documentation and verbal communication, by any respondent to this RFP, shall become the property of El Rio Health and may be subject to public disclosure.



NW HEALTH CENTER EXPANSION RFP DENTAL EQUIPMENT LIST

ITEM	Qty	UOM	Description	MFG #	Manufacturer	Color	Each Cost	Total Cost
1	16	EA	Dental Chair: BELMONT; Chr, X-Cal Series, Std (Confirm Model Number Desired)	B50N	BELMONT	Standard Color: TBD		\$ -
2	16	EA	STOOL: 090 Dr. Stool Vinyl; SWING PLATE L/R DUO ARM	090	BELMONT	Standard Color: TBD		\$ -
3	16	EA	STOOL: 091 Asst Stool Vinyl	091	BELMONT	Standard Color: TBD		\$ -
4	16	EA	Ceiling Mount Light: Lt, Clesta, Ceiling Mt, LED	AL302C	BELMONT			\$ -
5	16	EA	Delivery Unit: DS, BDS L-R Dr	BDS2575	BELMONT			\$ -
6	16	EA	Delivery Unit: FO, Sys, Sngl HP, Factory	BDS00251	BELMONT			\$ -
7	16	EA	Monitor Mount: Mntr Arm, Addg to BDS2575	BDS2589	BELMONT			\$ -
8	16	EA	Monitor Mount: Mt, Mntr, Flat Panel, White	FPMM	BELMONT			\$ -
9	16	EA	Assistant Instrumentation: Vac Pkg, BDS L-R	BDS0050	BELMONT			\$ -
10	6	EA	X-Rays: Preva DC w/Sngle Stud Mnt	P7017	PROGEN			\$ -
11	2	EA	OPTIME: Optime Dgra Img Plt System	0.805.9325	INSTRM			\$ -
12	1	EA	PANO: Standard Column, OP2D Pan	0.805.9501	INSTRM			\$ -
13	1	EA	NITROUS: Dig. Ultra Newport Flwmtr	51000	ACCUT			\$ -
14	16	EA	Rear and Upper Cabinet: Custom rear and upper cabinet		BELMONT			\$ -

# EL RIO HEALTH

15	16	EA	Rear and Upper Cabinet: Midshelf option for 6 cubbies		BELMONT			\$ -
16	6	EA	Pass Thru Cabinet: 50" Wide x-ray pass thru cabinet					\$ -
17	1	EA	Power Vacuum Pump: Powervac G Model G6	G6	Midmark			\$ -
18	1	EA	Air Compressor: Powerair (Model P...size sufficient for 16 operatories)	(TBD)	Midmark			\$ -
19	1	EA	Sterilization: 3870EA Steam Autoclave	3870EAP	TUTT			\$ -
20	1	EA	Sterilization: Chart Recorder w/cable	01610100	TUTT			\$ -
21	1	EA	Sterilization: T-Edge Autoclave 11B 220V	T-EDGE11B 110V	TUTT			\$ -
22	2	EA	Hydrim: Hydrim G4 Lg. Instru. Washr	L110W-D01-G4	SCICAN			\$ -
23	1	EA	Sterisil: Wtr Sys, Stage5 3000L	G5-3	SOLMET			\$ -
24	2	EA	Sterisil: Booster Pump on Water Line	SS-BP	SOLMET			\$ -
25	1	EA	Sterisil: Sterisil Ac+	AC+	SOLMET			\$ -
26	4	EA	Sterisil: Bladder Tank, 14 Gal, 15.25	SS-BT14	SOLMET			\$ -
27	1	EA	Sterisil: Kit, Pre-Filtr, 48 Filtrs	SS-PREKIT	SOLMET			\$ -
28	1	EA	Sterilization: Printer Thermal Barcode Label (printer for T-Edge 11B)	TDP-225	TUTT			\$ -
29	1	EA	Sterilization: Amsco 400 20x20x38 Prevacuum Single sliding Cabinet Electric 480V (SR0201110311)		STERIS			\$ -
30	1	EA	Sterilization: Amsco 400 Series 20x20x38 Rack and Two Shelves, Single Door (FV021011)		STERIS			\$ -





**SIGNATURE OF AUTHORIZED REPRESENTATIVE**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Arizona Tax ID: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_

Applicable Arizona License Number(s): \_\_\_\_\_

Contact Person for Clarification

of Proposal Response: \_\_\_\_\_

Name & Title of Individual

Authorized to Sign for Firm: \_\_\_\_\_

Email Address: \_\_\_\_\_

(A completed copy of this page must be included with the proposal)