## EAST HAWAII REGION NOTICE OF AND REQUEST FOR EXEMPTION FROM COMPETITON

### 1. TO: Regional Chief Procurement Officer

#### 2. FROM: Sam Nelson,

Department/Division/Agency

Pursuant to East Hawaii Region Policy PUR 017, the Department requests a procurement exemption to purchase the following:

3. Description of goods, services or construction:

Consulting services from Health Services Associates (HSA) to assist in the setting up of the Rural Health Clinic (RHC) designation and practices for a clinic located at 1190 Waianuenue. To provide the Family Practice, Neurology and Cardiology FFS clinics with consulting assistance in merging and functioning toward RHC compliance.

# **SCOPE OF WORK AND SPECIFICATIONS:**

The Scope of Work is to complete each of the three FFS clinic's with an analysis in regards to patient flow, front desk functions, provider productivity analysis, RHC compliance, chart reviews, as well as Provide Management and Support Staff with RHC education and knowledge.

| 4. Name of Vende | 5. Price:               |               |                         |
|------------------|-------------------------|---------------|-------------------------|
|                  |                         |               | \$31,000                |
| Address: 2 East  |                         |               |                         |
| Fremo            |                         |               |                         |
|                  |                         |               | 7. Prior Exemption Ref. |
| 6. Term of       | From: 3/15/20           | To: 4/30/21   | No.                     |
| Contract:        | 110III. <i>3/13/2</i> 0 | 10. 4/ 30/ 21 | N/A                     |

8. Explanation describing how procurement by competitive means is either not practicable or advantageous to the State:

HSA is one of only two available vendors for this type of consulting service in the country. In addition, with the specificity of the Summary of Services HSA will provide for Puna Community Medical Center (PCMC), HSA is the one and only vendor that can fulfill these requirements. HSA was utilized in preparation to accredit PCMC, and 1190 Waianuenue as RHC. Furthermore, as an existing HSA customer, we receive a discount for additional clinics that we employ their services to prepare for RHC accreditation.

9. Details of the process or procedures to be followed in selecting the vendor to ensure maximum fair and open competition as practicable:

HSA is the vendor that can fulfill these consultation requirements for properly setting up a RHC. In addition, the vendor has an excellent history with East Hawaii Region and has provided exceptional RHC consultation services for various needs within our organization. With years of experience and unique expertise specific to RHC builds, HSA is the preferred vendor capable of completing this task.

10. A description of the agency's internal controls and approval requirements for the exempted procurement:

East Hawaii Region has established policies and procedures to ensure that exemptions are not requested or approved without proper justification. East Hawaii consistently follows correct procurement policies and is fair and equitable to all interested parties.

11. A list of agency personnel, by position, who will be involved in the approval process and administration of the contract:

| Name                     | Position  | Involven   | nent in Process |  |
|--------------------------|---|------------|-----------------|--|
| Lauri Redus              | Director  | 🔀 Approval | Administration  |  |
| Dan Brinkman             | CEO   | 🛛 Approval | Administration  |  |
| Sam Nelson               |   | Approval   | Administration  |  |
|                          | Department: Administration / Other General Services |            |                 |  |
| 12. Direct inquiries to: | Contact Name: Sam Nelson                            |            |                 |  |
| 12. Direct inquiries to. | Phone Number: 1-808-932-3113                        |            |                 |  |
|                          | Fax Number:   |            |                 |  |

13. This exemption should be considered for list of exemptions in to Chapter 3-120, HAR: YES NO

Agency shall ensure adherence to applicable administrative and statutory requirements

# 14. I certify that the information provided above is, to the best of my knowledge, true and correct.

| Department Head  | Date  |  |  |  |
|--|---|--|--|--|
| Reserved for RCPO/Designee Use Only  |   |  |  |  |
|  | 15. Date Notice Posted  |  |  |  |
| Procurement Policies. Submit written objections to this n<br>Policies, within seven (7) calendar days or as otherwise al<br>Officer Eas<br>119 | eviewing this request for exemption from East Hawaii Region<br>totice to issue an exemption from East Hawaii Region Procurement<br>llowed from the above posted date to:Regional Chief Procurement<br>at Hawaii Region<br>90 Waianuenue Ave.<br>o, Hawaii 96720 |  |  |  |
| Regional Procurement Officer's comments:   |   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |

16.

APPROVED DISAPPROVED

Regional Chief Procurement Officer

Date