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STATE PROCUREMENT OFFICE
NOTICE OF AND REQUEST FOR EXEMPTION
FROM CHAPTER 103D, HRS STATE OF HAWAII

1. TO: Chief Procurement Officer
2. FROM: Department of Health / Health Information Systems Office

Department/Division/Agency
Pursuant to §103D-102(b)(4), HRS, and Chapter 3-120, HAR, the Department requests a procurement exemption to purchase the following:

3. Description of goods, services or construction:
In response to the possibility of a Pandemic Influenza outbreak, the Hawaii Department of Health (HDOH) created a Pandemic Influenza Preparedness and Response Plan. One of the critical requirements of the plan is to procure, secure, distribute, and administer pandemic influenza vaccine and influenza specific antiviral medication to the public. To address the Pandemic Influenza requirements, the following needs to be done:
1. Complete the modifications and enhancements to the State's Hawaii Immunization Registry (HIR) base system that is currently in pilot testing.
2. Integrate Influenza pandemic countermeasure requirements into HIR.

4. Name of Vendor: Electronic Data Systems, LLC (EDS)
Address: 5400 Legacy Drive Plano, Texas 75024
5. Price: \$ 910,534
6. Term of Contract: From: 3/2/09 To: 3/5/2011
7. Prior Exemption Ref. No. 0

8. Explanation describing how procurement by competitive means is either not practicable nor advantageous to the State:
In light of a possible Pandemic Influenza outbreak, it is extremely critical that there be an immediate implementation of a vaccine and antiviral tracking system. Enhancements to the HDOH HIR system will provide functionality for the timely capture of vaccine administered data, resulting in the reporting of effective trends of vaccine administration. A vendor must be very familiar with the current HDOH HIR system to be able to enhance the system as soon as possible without taking the time to understand and learn immunization system requirements and the current computer application that supports this function. EDS was selected through competitive bid to define, design, and implement the current HDOH HIR System and would be the only vendor that can enhance the system in a timely manner to address this public health and safety need.

9. Details of the process or procedures to be followed in selecting the vendor to ensure maximum fair and open competition as practicable:
Due to the complexity of the tasks and the requirement for the vendor to have familiarity and understanding of the HDOH HIR system, HDOH has determined that only EDS is capable of providing the necessary service within the short implementation timeframe. Hence, competition is not practical, and under these circumstances, it would be advantageous for the state to use EDS, as delays in this project would result in increased risks to public health and safety. Should there be a Pandemic Influenza event and without the selection of EDS, there would be no automated method to track and monitor the thousands of vaccines and antivirals that need to be distributed and administered.

REQUEST FOR EXEMPTION FROM CHAPTER 103D, HRS (Cont.)

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

The procurement of this technical service will be conducted under the supervision of the Health Information Systems Office Chief and subject to his approval.

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

| Name | Position | Involvement in Process | |
|------------------|---------------------------|--|--|
| Susan Jackson | DepDir Admistration | <input checked="" type="checkbox"/> Approval | <input type="checkbox"/> Administration |
| Sarah Park | DOCD Chief | <input checked="" type="checkbox"/> Approval | <input type="checkbox"/> Administration |
| Dwight Bartolome | HISO Chief | <input checked="" type="checkbox"/> Approval | <input checked="" type="checkbox"/> Administration |
| Lisa Mendez | Immunization Branch Chief | <input checked="" type="checkbox"/> Approval | <input checked="" type="checkbox"/> Administration |
| Nancy Bartter | DOCD PHAO | <input type="checkbox"/> Approval | <input checked="" type="checkbox"/> Administration |
| | | <input type="checkbox"/> Approval | <input type="checkbox"/> Administration |

13. Direct inquiries to: Department: Dept of Health / HISO
 Contact Name: Dwight Bartolome
 Phone Number: 586-4450
 Fax Number: 586-4477

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.*



FEB 27 2009

Department Head

Date

Reserved for SPO Use Only

15 .Date Notice Posted 3/6/09

The Chief Procurement Officer is in the process of reviewing this request for exemption from Chapter 103D, HRS. Submit written objections to this notice to issue an exemption from Chapter 103D, HRS, within seven calendar days or as otherwise allowed from the above posted date to: Chief Procurement Officer
 State Procurement Office
 P.O. Box 119
 Honolulu, Hawaii 96810-0119

REQUEST FOR EXEMPTION FROM CHAPTER 103D, HRS (Cont.)

Chief Procurement Officer's comments:

16.

APPROVED

DISAPPROVED

Allen S. Fujita 4/9/09
Chief Procurement Officer Date

Request for Exemption from Chapter 103D, HRS

The HDOH Pandemic Influenza Preparedness and Response Plan of 2006 identified a countermeasure response administration (CRA) plan, which addresses distribution and administering of vaccine and antivirals. In the event of a major disease outbreak, containers of antiviral, vaccine and supplies would be flown into Hawaii from one of the Strategic National Stockpiles (SNS). The initial plan focused on receiving, storing, staging and distributing (RSSD) the vaccine and antivirals. The various locations throughout the state called Point of distribution (POD) would be activated to administer the vaccine to the public. The Centers for Disease Control and Prevention (CDC) provided an inventory system for SNS supplies called RITS. Hawaii decided to use RITS to manage, inventory and track the location of the stocks of vaccines and antivirals.

In 2007 the Immunization Branch submitted a request for proposal for a state wide Immunization Registry system. The objective of the system was to assure the people of Hawaii were properly immunized. EDS's response to the RFP proposed using Wisconsin's immunization information system (IIS) as the base system for the Hawaii Immunization Registry (HIR) system. EDS shared information about New York State modifying Wisconsin's IIS to meet additional requirements that Hawaii may be interested in future pursuits. Because Wisconsin's base system met a majority of Hawaii requirements, EDS was awarded the contract. EDS completed HIR implementation and started piloting the system locally. The contract ended on 12/26/2008.

The potential of an Avian Flu pandemic is not a matter of if but when and therefore poses a major concern for public health. CDC along with all state public health emergency preparedness entities continue to build counter measure responses for a pandemic. Due to this reason, CDC requested that state pandemic influenza plans for CRA be enhanced to include tracking of patients that receive vaccine and antivirals resulting in closer linkage to disease surveillance systems. CDC provided grant opportunities so states could use seed funding to start implementing these requirements. Hawaii applied and was awarded the grant in the 4th quarter of 2008 with condition that the allocated funds must be spent by September 2009. Because of this sense of urgency, Hawaii must start immediately to build the infrastructure in the HDOH HIR system to address the CRA requirements.

New York State acquired the Wisconsin IIS and contracted EDS to modify New York State's system to include more features to enhance their processes. EDS also successfully developed Minnesota's antiviral tracking and Georgia's CRA reporting systems. They integrated these functions into their respective state immunization information systems.

Through this 103D exemption request, HDOH intends to contract EDS to apply the same modifications to the HDOH HIR that was implemented for the New York system and also incorporate Minnesota's antiviral tracking and Georgia's CRA reporting into HDOH HIR. By achieving this integration, Hawaii would benefit from the experience and technical knowledge of EDS and ensure a timely and successful implementation resulting in Hawaii having an enhanced HIR that meets critical CRA requirements.

PROJECTED TIMETABLE AND FUNDING

| Task | Start Date | End Date | Budget |
|--------|------------|------------|------------|
| Year 1 | 12/26/2008 | 12/25/2009 | \$ 552,467 |
| Year 2 | 12/26/2009 | 12/25/2010 | 358,067 |
| Total | | | \$ 910,534 |

Two Year Task Plan Summary

Modify the HDOH HIR system based on Pilot Implementation.
Start modifying the HDOH HIR system to meet CRA requirements.
Conduct Testing, Training and Implement.

Two Year Description of Tasks

Modify the base HDOH HIR system to address additional requirements, problems and issues discovered from the pilot rollout.

Create an antiviral tracking component to the registry. Integrate into HDOH HIR the ability to capture and store the information necessary for CRA reporting purposes. Integrate into HDOH HIR the ability to track and report countermeasure and response events to CDC. Enhance HDOH HIR to enable system to accept electronic medical records from other systems. Develop HDOH HIR linkage to HDOH Disease Surveillance System.

Conduct unit and system testing and do additional pilot rollouts.
Participate in mass emergency exercises.

Develop, coordinate and conduct training programs on HDOH HIR for technical system administrators and for the hundreds of clinicians and emergency responders.

Rollout HDOH HIR statewide to all stakeholders.

Note

Mass emergency exercises and pilot testing, resulting in more refinements to HDOH HIR will require EDS's involvement. A training program needs to be developed and conducted for the hundreds of clinicians and emergency responders. Only EDS, who understands the HDOH HIR will be able to accomplish this successfully. With these additional demands, the full implementation of HDOH HIR will require a good two years of support from EDS.