

STATE OF HAWAII
 NOTICE OF AND REQUEST FOR EXEMPTION
 FROM CHAPTER 103F, HRS

8007'08 AM 9:50 SPO-A

To: Chief Procurement Officer

From: DOH Child and Adolescent Mental Health Division (CAMHD)
Department/Division/Branch or Office

Pursuant to § 103F-101(a)(4), HRS, and Chapter 3-141, HAR, the Department requests a procurement exemption to purchase the following:

1.	Title and description of health and human service(s):	
	Intensive In-Home Intervention is designed to stabilize and preserve the family's capacity to improve the child's functioning in the current living environment and to prevent placement outside the home. This service is a time-limited approach that incorporates evidence-based interventions. It is delivered primarily to youth and their families in the family's home or community. The Island of Lanai has no intensive in-home service provider on the island. Any service provider must be flown in from the nearest Island able to provide the required service. This exemption is to allow the procurement of service from the nearest provider agency while paying the current rural service rate and the cost of transportation until CAMHD can procure service to Lanai at a rate that would provide regular services to the youth as required.	
2.	Provider Name and Address:	Aloha House 444 Hana Highway, #201 Kahului, Hawaii 96732-2315
3.	Total Contract Funds: Contract Funds per Year (if applicable):	
4.	Reference number of Previous Request for this Service (if applicable):	NA
5.	Term of Contract:	Start: 8/1/08 End: 2/1/09
6.	Describe how procurement by competitive means is either not practicable or not advantageous to the State: CAMHD does intend to procure service to these rural area by releasing a RFP within the next six months with the intention of contracting for these service within the next nine months.	
7.	Describe the reason for the selection of the provider including a description of how the procedure ensured the maximum fair and open competition practicable: Aloha House has been providing service but due to current travel expense increases is no longer able to absorb the increased expenses. They are willing to continue the travel to the island with additional reimbursement for the travel portion until the new RFP can procure a care provider at an appropriate rate.	

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8. Describe the state agency's internal controls and approval requirements for the exempted procurement: The CAMHD Administrator provides oversight of the CAMHD services. The CAMHD Medical Director will provide clinical oversight and will review the medical necessity and appropriateness of the client's requirement for intensive in-home service. The CAMHD clinical team would monitor the client's progress and evaluate the effectiveness of this clinical intervention.	
9. List the state agency personnel, by position title, who will be involved in the approval process and administration of the contract: Chiyome Leinaala Fukino, M.D. - Director of Health M. Stanton Michels, M.D. - CAMHD Administrator Mary Brogan, M.Ed. - Assistant Administrator John Viesselman, M.D. - CAMHD Medical Director	
10. Direct questions to (name & position): Phone number: e-mail address:	Mary Brogan 808 733-9344 mbrogan@camhmis.health.state.hi.us

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



Department Head Signature
SEP 8 0 2008
Date

Typed Name

NOTICE

The chief procurement officer is considering this request for exemption and, if there is good cause, the state intends to exempt the purchase as described in the request. Any inquiries regarding the purchase shall be directed to the contact person noted in item 10 of the request. Any concerns regarding the exemption shall be in writing and received by the chief procurement officer within seven days of the date the notice was first posted. Concerns shall be mailed to: Aaron Fujioka, Chief Procurement Officer, State Procurement Office, 1151 Punchbowl St., #230A, Honolulu, HI 96813.

FOR CHIEF PROCUREMENT OFFICER USE ONLY

Chief Procurement Officer's Comments:

DOH, CAMHD requested withdrawal of this request.

APPROVED DISAPPROVED NO ACTION



Chief Procurement Officer Signature 10/9/08
Date

Please ensure adherence to applicable administrative requirements.



"John MacDonald"
<jamacdon@camhmis.health.
state.hi.us>

10/08/2008 03:58 PM

To "Corinne Higa" <corinne.y.higa@hawaii.gov>

cc "Mary Brogan" <mbrogan@camhmis.health.state.hi.us>,
"Kuulei Wilton" <hkwilton@camhmis.health.state.hi.us>

bcc

Subject Lanai Exemption

Corrine,

This will confirm that we no longer want to process the Exemption for Lanai. Please return to my attention as cancelled.

John MacDonald

CAMHD Program Specialist

3627 Kilauea Ave, Room 101

Honolulu, HI 96816

Ph 808 733-9338 Fax 808 733-9207