

STATE OF HAWAII

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

'08 MAY -5 AIO:16

ADMINISTRATION  
STATE PROCUREMENT OFFICE

To: Chief Procurement Officer

From: Department of Health, Adult Mental Health Division *aj*  
*Department/Division/Branch or Office*

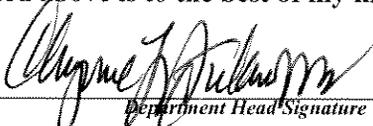
Pursuant to § 103F-101(a)(4), HRS, and Chapter 3-141, HAR, the Department requests a procurement exemption to purchase the following:

1. Title and description of health and human service(s):	Registered Nurse (RN)-case management services for adults with severe and persistent mental illness (consumer) currently residing in Expanded Adult Residential Care Home (E-ARCH) facilities. The RN case manager shall: a) conduct a comprehensive assessment of the consumer prior to placement in an E-ARCH which shall include physical, mental, psychological, social, and spiritual aspects; b) develop an interim care plan for the consumer within 48 hours of admission to the E-ARCH and a care plan within 7 days of admission; c) review the care plan monthly or sooner as appropriate; d) update the care plan as changes occur in the consumer's care needs, services, or interventions; e) promote continuity of care and appropriate integration and utilization of services necessary to implement the care plan; f) coordinate care giver training, hospital discharge, respite, home transfers, and other services as appropriate; g) arrange and participate in the consumer's case conferences; h) have face-to-face contacts with the consumer at least once every 30 days; i) provide ongoing evaluation and monitoring of the consumer's status, caregiver's skills, competency, and quality of services being provided; j) conduct comprehensive reassessments of the consumer's every 6 months or sooner as appropriate; and k) inform the Department of Health of any change in the quality of services being provided to the consumer.
2. Provider Name and Address:	Various RN-case managers recognized by the Department of Health, Office of Health Care Assurance (OHCA)
3. Total Contract Funds: Contract Funds per Year (if applicable):	\$100,000 estimated
4. Reference number of Previous Request for this Service (if applicable):	07-27
5. Term of Contract:	Start: 7/01/08 End: 6/30/09
6. Describe how procurement by competitive means is either not practicable or not advantageous to the State:	According to Section 11-100.1, Hawaii Administrative Rules, an E-ARCH facility is required to utilize the services of an RN-case manager and each consumer residing in the E-ARCH facility has the right to choose their RN-case manager. The RN-case manager must also be chosen from OHCA's Recognized Case Management Agency List.  The competitive procurement for RN-case management services is neither practicable nor advantageous to the State because AMHD would like to contract with any and all RN-case managers who are on OHCA's Recognized Case Management Agency List and are interested in providing services for adults with severe and persistent mental illness.

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7.	<p>Describe the reason for the selection of the provider including a description of how the procedure ensured the maximum fair and open competition practicable:</p> <p>OHCA maintains a list of recognized RN-case managers that have been determined to meet the requirements listed in the HAR. RNs can be referred by E-ARCH providers, AMHD, or by other interested parties to contact OHCA to see if they can be placed on OHCA's list. Any RN that meets the minimum qualifications can apply to be recognized as an RN-case manager. Consumers to be placed in an E-ARCH are able to select their own RN-case manager from the OHCA Recognized Case Management Agency List.</p>						
8.	<p>Describe the state agency's internal controls and approval requirements for the exempted procurement:</p> <p>AMHD will contract with any and all interested OHCA recognized RN-case managers during the period of the exemption. Clinical staff at AMHD, in accordance with specific criteria, will monitor the consumers' selection of RN-case managers and the provision of services.</p>						
9.	<p>List the state agency personnel, by position title, who will be involved in the approval process and administration of the contract:</p> <p>William Sheehan, M.D., AMHD Medical Director Linda Appel, AMHD Service Area Administrator Amy Yamaguchi, AMHD Public Health Administrative Officer (PHAO)</p>						
10.	<table style="width: 100%; border: none;"><tr><td style="width: 45%;">Direct questions to (name &amp; position):</td><td>Amy Yamaguchi, PHAO</td></tr><tr><td>Phone number:</td><td>(808) 586-4681</td></tr><tr><td>e-mail address:</td><td>amy.yamaguchi@doh.hawaii.gov</td></tr></table>	Direct questions to (name & position):	Amy Yamaguchi, PHAO	Phone number:	(808) 586-4681	e-mail address:	amy.yamaguchi@doh.hawaii.gov
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**I certify that the information provided above is to the best of my knowledge true and correct.**

 _____ <i>Department Head Signature</i>	<p>MAY - 1 2008</p> _____ <i>Date</i>
<p>Chiyome Leinaala Fukino, M.D.</p> _____ <i>Typed Name</i>	

**NOTICE**

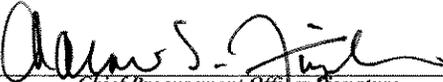
The chief procurement officer is considering this request for exemption and, if there is good cause, the state intends to exempt the purchase as described in the request. Any inquiries regarding the purchase shall be directed to the contact person noted in item 10 of the request. Any concerns regarding 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.

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**FOR CHIEF PROCUREMENT OFFICER USE ONLY**

Chief Procurement Officer's Comments:

APPROVED     DISAPPROVED     NO ACTION

  
\_\_\_\_\_  
Chief Procurement Officer Signature

5/15/08  
\_\_\_\_\_  
Date

Please ensure adherence to applicable administrative requirements.