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

1. TO: Regional Chief Procurement Officer

2. FROM: Lisa Shiroma, Assistant Administrator

Department/Division/Agency Pursuant to East Hawaii Region Policy PUR 017, the Department requests a procurement exemption to purchase th	e following:		
3. Description of goods, services or construction:	o tonowing.		
Vendor is to provide 340B pharmacy auditing and consulting services.			
4. Name of Vendor: Pharmacy Healthcare Solutions Ltd.	5. Price:		
	\$33,000.00		
Address: 1300 Morris Drive			
Chesterbrook, Pennsylvania 190087-5594	7. Prior Exemption Ref.		
6. Term of	No.		
Contract: From: Date of Execution To: 36 Months Term			
8. Explanation describing how procurement by competitive means is either no	ot practicable or		
advantageous to the State:			
HMC has used vendor in the past for the same services. Vendor has worked	with HMC data in the past		
and using this vendor will save staff time verses starting over with a new vendor. Vendor also has			
relationship with HMC drug distributor which will greatly assist HMC in completing the requested 340B			
Pharmacy audit services.			
9. Details of the process or procedures to be followed in selecting the vendor	to ensure maximum fair		
and open competition as practicable:			
True de la	,•,•		
Vendor was selected based on past working experience with HMC, therefore process was not conducted.	a competitive procurement		
process was not conducted.			

10. A description of the procurement:	e agency's internal controls and approval r	equirements for the exempted	
Agreement will be and Procedures.	e processed in accordance with HHSC – Ea	ast Hawaii Region Procurement Policies	
	rsonnel, by position, who will be involved	in the approval process and	
administration of the	contract: Position	Involvement in Process	
Name Lisa Shiroma	Assistant Administrator		
Joni Waltjen	CFO	Approval Administration	
Dan Brinkman	CEO	Approval Administration	
Dan Dimkilan	CEO	Approval Administration	
		Approval Administration	
	· · · · · · · · · · · · · · · · · · ·	Approval Administration	
	Department: Contract Management		
	Contact Name: Jeff Dansdill		
12. Direct inquiries to:	Phone Number: 808-932-3112		
	Fax Number: jedansdill@hhsc.org		
•	l ensure adherence to applicable administration provided above is, to the best of	· -	
Department Head	Date		
	Reserved for RCP@/Designee Use	Only	
Procurement Policies. Su		5. Date Notice Postedst for exemption from East Hawaii Region emption from East Hawaii Region Procurement ove posted date to:Regional Chief Procurement	
Regional Procurement Of	ficer's comments:		
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16. APPROVED	DISAPPROVED		
	Regional Chi	ef Procurement Officer Date	