Contract:

EX 07 -011

HAWAII HEALTH SYSTEMS CORPORATION NOTICE OF AND REQUEST FOR EXEMPTION FROM CHAPTER 103D, HRS

1. TO:	Chief l	Procurement	Officer

2 FROM: Ronald J. Schurra, CEO East Hawaii Region

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:

maintenance a Recovery, Off	service agreement including all labor, travel, livin nd software support services. Contract to include Site Programming and Software/Hardware Constystem Training, Automation Software upgrade ser	Off-Site Data, Back-up/Disaster ulting Assistance, Support Services,
4. Name of Ve	ndor: American Controls & Equipment, Inc.	5. Price: \$23,793.03
Address: 2001	A Kahai Street	
Ho	onolulu, HI 06819	
6. Term of	From: Execution date To: 2-yr term	7. Prior Exemption Ref. No.

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

The Energy Management System that is used by the Maintenance Department is proprietary software developed by American Controls. As such, by license, we are not allowed to look to other vendors for assistance with the software.

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

Open competition cannot be sought on the Energy Management System software based on the fact that it is proprietary software.

N/A

procurement:	10. A description of the agency's internal controls and approval requirements for the exempted					
•						
The Director of Contract Management reviews requests for exemptions for sufficiency prior to						
submission to the President and CEO for action. HHSC policies and procedures will be followed and periodic reviews of contract action will be completed.						
periodic reviews of co	ntract action will be completed.	•				
11. A list of agency per	sonnel, by position, who will be	e involved in the ap	proval process and			
administration of the c						
Name	Position		Involvement in Process			
Ronald J. Schurra	CEO, East Hawaii Reg	gion	Approval Administration			
Julie Rukstad	CFO, East Hawaii Reg	gion	☐ Approval ☐ Administration			
Robert Marquardt	COO, East Hawaii Reg	giona	☐ Approval ☐ Administration			
Julie-Beth Ako	Director Clinical Supp	ort Services				
			Approval Administration			
			Approval Administration			
	Department: Institutional Fac-	ility Support				
12. Direct inquiries to:	Contact Name: Warren Okaba	ıyashi				
12. Direct inquires to.	Phone Number: 974-4773					
	Fax Number: 933-0708					
Agency shall	ensure adherence to applicable	administrative and	statutory requirements			
			- ^			
13 Leertify that the information provided above is, to the best of my knowledge, true and correct.						
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