

EX07-026

withdrawn

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

1. TO: Chief Procurement Officer
2. FROM: Maui Memorial Medical Center

Department/Division/Agency

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

<p>3. Description of goods, services or construction:</p> <p>Pharmacy Supply: Remodulin Injection 1 Mg/ML 20 ML Vial for use in treatment of pulmonary hypertension.</p>		
<p>4. Name of Vendor: Accredo Therapeutics</p> <p>Address: 178 Thorn Hill Road, Warrendale, PA 15068</p>	<p>5. Price:</p> <p style="text-align: right;">\$ 30,000</p>	
<p>6. Term of Contract:</p> <p style="text-align: center;">From: Upon date of executed agreement To: One Year</p>	<p>7. Prior Exemption Ref. No.</p>	
<p>8. Explanation describing how procurement by competitive means is either not practicable or advantageous to the State:</p> <p>The term of the exemption will be for a one (1) year period. During this period, the hospital will re-evaluate the product and determine if other vendors could provide such equipment for the hospital. At that time, based on available information and research, the best procurement practice will be completed.</p>		
<p>9. Details of the process or procedures to be followed in selecting the vendor to ensure maximum fair and open competition as practicable:</p> <p>The product can only be obtained from this vendor/manufacturer.</p>		

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

This exemption shall be from HRS, Section 103-302 all other guidelines, rules and policies under Chapter 103D shall be upheld. HHSC Polices and procedures will be followed and periodic reviews of contract action will be completed.


11. 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	
Wesley Lo	Regional Chief Executive Officer	<input checked="" type="checkbox"/> Approval	<input type="checkbox"/> Administration
Pat Saka	Regional Chief Financial Officer	<input type="checkbox"/> Approval	<input checked="" type="checkbox"/> Administration
		<input type="checkbox"/> Approval	<input type="checkbox"/> Administration
		<input type="checkbox"/> Approval	<input type="checkbox"/> Administration
		<input type="checkbox"/> Approval	<input type="checkbox"/> Administration

12. Direct inquiries to:
 Department: Contract Manager
 Contact Name: Andrew Alvarez
 Phone Number: 808- 442-5212
 Fax Number: 808-442-5462

Agency shall ensure adherence to applicable administrative and statutory requirements

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


 Department Head (Print: Patricia Saka) Date 6/14/07

Reserved for CPO/Delegee Use Only

14. Date Notice Posted _____

The CPO 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 (7) calendar days or as otherwise allowed from the above posted date to: Chief Procurement Officer, HHSC, 3675 Kilauea Ave., Honolulu, Hawaii 96816

Chief Procurement Officer's comments:

15. APPROVED DISAPPROVED

 Chief Procurement Officer Date

NO ACTION REQUIRED