EAST HAWAII REGION NOTICE & REQUEST FOR SOLE SOURCE

#24-0007

- 1. TO: Regional Chief Executive Officer
- 2. FROM: Joni Waltjen

Pursuant to East Hawaii Region Policy, PUR 005, the Department requests sole source approval to purchase the following:

3. Description of goods, services, or construction:

Billing, Coding, payment, compliance and scheduling services for Anesthesia services

4. Vendor Name: R1 RCM Inc			5. Price: \$336,960.00
Address: 875	60 Bryn Mawr Avenue Chic	+	
6. Term of Contract::	From: <u>4/1/2024</u>	To: <u>3/29/2026</u>	7. Prior Sole Source Ref No.
			<u>_N/A_</u>

R1 RCM is the contractor currently providing service to the Anesthesia Contractor providing anesthesia services to the Hospital. The Hospital is taking over providing these services from the contractor and billing, coding, reconciliation services need to be provided seamlessly and without interruption. R1 as the current provider of these services is poised to continue providing the services without interruption.

9. Essential Features: How the unique features, characteristics, or capabilities are essential for the agency to accomplish its work:

Anesthesia is a critical service and the hospital is taking over the physicians from the current contractor providing the services. R1RCM has all the physician data and can seamlessly support a start date of 4/1/24 to continue to provide these critical services.

10: Sole Source No. <u>24-0007</u>

11. Alternate source. The following other possible sources for the good, service, or construction were investigated but do not meet our needs because:

There are other sources that can provide the service- but not the short leadtime to seamlessly assist in the transition of providers

12. Direct any inquiries to: Contracts Department	13 Phone Number: <u>808-932-</u>
Department: Contract Management	<u>3113</u>
Contact Name/Title: Sam Nelson	
Expenditure may be processed with a purchase order: \Box Yes \boxtimes No	If no a contract must be executed

Expenditure may be processed with a purchase order: Yes X No If no, a contract must be executed Agency shall ensure adherence to applicable administrative and statutory requirements.

14. I certify that the information provided above is to the best of my knowledge, true, correct and that the goods, services, or construction are available through only one source.

Department Head (sign and print name)

Date

Reserved for RCEO/Designee Use Only

15 Date Notice Posted: 2/22/24

Submit written objections to this intent to issue a sole source contract within five (5) calendar days or as otherwise allowed from the above posted date to: Regional Chief Executive Officer East Hawaii Region 1190 Waianuenue Ave. Hilo, Hawaii 96720

16. Regional Chief Executive Officer's comments:



Regional Chief Executive Officer

Date