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#### **Department of General Services**

# Emergency Procurement ("EP") Approval Request

### **Bureau of Procurement**

If either of the following two conditions exist, an EP is not required and should not be requested:

- 1. Material / Service available from DGS statewide contract.
- 2. Estimated Cost of the Material / Service is within the Small, No-bid Procurement threshold identified in the Procurement Handbook, Part I, Chapter 7.

Agency requests approved to proceed with an emergency procurement under Section 516 of the Commonwealth Procurement Code (62 Pa. C.S. §516).

## Requesting Agency Information

Agency/Bureau:	Departmer	Department of Human Services "prior DPW"				
Contact Person:	Michele Me	Michele Messinger				
Contact Address:		625 Forster Street, Room 333 Harrisburg PA 17120				
Contact Tel#:	717-787-52	717-787-5253				
Contact Email:	mimessing	mimessinge@pa.gov				
Description Of Material (or) Service (or) IT	Service	Healthcare Reform				
SAP Material Groups:	85000000	8500000				
Estimated \$ Amount:	100,000.00	100,000.00				
Length of EP:	8 Months	8 Months				
Delivery Location:	City	Harrisburg	State	Pennsylvania	ZipCode	17120
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## Basis for the Emergency Purchase

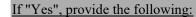
Threat to public health, welfare, or safety

Identify the Threat:

Provide a brief explanation of the need for the material and/or service:

State the consequence if the procurement is not done on emergency basis:

Indicate whether approval was obtained from DGS.



Yes a. Name of person granting approval:

b.Date of approval:

Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods

☑ No

NOTE: Verbal approval will not be provided for this basis. Agency cannot proceed with emergency procurement until this form is completed and approved by DGS.

Identify the Circumstances:	Executive Order 2020-5-HealthCare Reform Council
Why are those circumstances outside of the control of Agency?	Deadlines set by Governor in Executive Order
Provide a brief explanation for the urgent need:	Deadlines set by Governor in Executive Order

## Information Required

### For ALL EP's provide the following information:

Brief description of selection		Vendor previously performed related services for the Department.		
process:				
	Name:	OREGON HEALTH & SCIENCE UNIVERSITY		
Full supplier information (if known at time of submission of form)	Address:	3181 SW SAM JACKSON PARK RD		
	Telephone #:	503-494-9734		
	SAP Vendor#:	521118	Total Amount	

For EP's that are NOT a threat to public health, welfare, or safety, provide the following information

Include a list of the solicited suppliers, their contact information, and their quotations:	
Funds have already been encumbered for this request (Yes/No):	✓ Yes   □ No
If applicable, what has been done previously to procure this material/service? (Also provide the previous SAP/SRM PO number and/or Contract Number)	4300659855 revised. PO extension date not requested.

 $\checkmark$ 

NOTE: If any Agency only intends to solicit a quote from one supplier, the following section, "Supplemental Single Source Information" must be completed

## Supplemental Single Source Information Required

This section of the EP APPROVAL REQUEST Form is only required to be completed if the following is applicable:

 Category of Emergency is due to "Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods."
It is not practical for the agency to obtain two or more quotes.

-		
Is only a single supplier of providing the material or please explain. If not app blank and respond in the	services? If Yes, licable, leave	Vendor already provided related services.
Explain why it is not prac two or more quotes for th procurement.		
If timing is a factor, what and why? If yes, please e		Work is already in process.
Are there compatibility re compliance requirements explain.	•	
	ing must be checked. In	procurement is to prevent a lapse in contracted services, iclude status of the new contract/purchase and note any s of the emergency procurement.
To extend a current of current contractor to contracted services.	o prevent a lapse in	
To bridge a gap betw contract and a new of allowing the new con work before the new	contract by ntractor to begin	
To authorize a suppl properly selected the methods of award, to before the new contr executed because the the services immedia wait until full executed	rough one of the o begin work ract is fully ne agency needs ately and cannot	
If none of the above explain how the eme was selected.	••	

## Agency Approvals

IMPORTANT\*:The printed names on this form shall constitute the signatures of these individuals. Agencies must insure that these individuals review the completed form and give their consent to apply their printed name on this form. No handwritten signatures shall be required in order for the form to be considered "signed" by those individuals whose names appear in the signature section

Requesting Authority (Agency Head or Designee reviewing and approving this request) Requesting Authority signature connotes concurrence with the Agency EP request to procure the material and/or service

Title:	Secretary		
Signature:	Teresa D. Miller	Date:	01-14-21