



Suspension of Competition Acquisition Request

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1. Fully describe the product(s) and/or service(s) being requested.
The Department of Behavioral Health is requesting a suspension of competition in order to renew an Agreement with Individual and Group Providers for specialty mental health services in Fresno County.
2. Identify the selected vendor and contact person; include the address, phone number and e-mail address for each.
n/a
3. What is the total cost of the acquisition? If an agreement, state the total cost of the initial term and the amounts for potential renewal terms.
\$22,741,629
4. Identify the unique qualities and/or capabilities of the service(s) and/or product(s) that qualify this as a Suspension of Competition acquisition.
This Agreement with Individual and Group Providers is a fee-for-service Agreement with rates already established. All contractors agree to the same unified fee schedule, and individualized budgets per contractor are not required.
5. Identify from Administrative Policy #34 what circumstances constitute a Suspension of Competition.
 - In an emergency when goods or services are immediately necessary for the preservation of the public health, welfare, or safety, or for the protection of County property.
 - When the contract is with a federal, state, or local governmental agency.
 - When the department head, with the concurrence of the Purchasing Agent, finds that the cost of preparing and administering a competitive bidding process in a particular case will equal or exceed the estimated contract amount or \$2,500 whichever is more.
 - When a contract provides only for payment of per diem and travel expenses and there is to be no payment for services rendered.
 - When obtaining the services of expert witnesses for litigation or special counsel to assist the County.
 - When in unusual or extraordinary circumstances, the Board of Supervisors or the Purchasing Agent/Purchasing Manager determines that the best interests of the County would be served by not securing competitive bids or issuing a request for proposal.
6. Explain why the unique qualities and/or capabilities described above are essential to your department.
The Fresno County Mental Health Plan is responsible for ensuring Medi-cal beneficiaries of all ages have access to medically necessary inpatient and outpatient specialty mental health services. The Master Agreement for Individual and Group Providers allows mental health services to be delivered through the broadest base of providers including psychiatrists, psychologists, licensed clinical social workers, and licensed marriage and family therapists to Medi-Cal eligible clients.
7. Provide a comprehensive explanation of the research done to verify that the recommended vendor is the only vendor with the unique qualities and/or capabilities stated above. Include a list of all other vendors contacted, what they were asked, and their responses.
All qualified providers that are interested in providing services are eligible to provide services.

jmcillwain 6/9/2020 2:45:14 PM

Requested By:

Title

[\[Sign\]](#) Double click!

I approve this request to suspend competition for the service(s) and/or product(s) identified herein.

dutecht 6/9/2020 2:50:46 PM

Department Head Signature

[\[Sign\]](#) Double click!

gcornuelle 6/11/2020 7:41:52 AM

Purchasing Manager Signature

[\[Sign\]](#) Double click!