

## State of Maine Procurement Justification Form

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services website (Forms page) for additional instructions.

### PART I: OVERVIEW

Department Office/Division/Program:		Labor		
Department Contract Administrator or Grant Coordinator:		Patricia O'Brien		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)	\$ 10,562,000	Advantage CT / RQS #:	CT 12A 20200403*2777	
CONTRACT	Proposed Start Date:	4/1/2020	Proposed End Date:	3/31/2021
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		SaviLinx Brunswick, Maine		
Brief Description of Goods/Services/Grant:		The Provider shall provide customer service representatives to answer callers and provide basic unemployment services.		

### PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

	A. Competitive Process		G. Grant
	B. Amendment		H. State Statute/Agency Directed
<b>X</b>	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

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### PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

**1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.**

COVID-19 has impacted every aspect of people's lives – personally and professionally. As a result, many Mainers have lost their ability to work and to receive pay. Unemployment was developed to support people who have lost their job for reasons beyond their control. An unprecedented number of Mainers have tried to apply for benefits within a very short period of time. First-time filers increased from about 650 to 21,400 in one week. The Maine Department of Labor is staffed for the normal level of unemployment and is inundated with people needing assistance. There were 14 unemployment claims-takers during the first week of the increase. Other staff have been pulled from their normal duties to process claims. However, this is not sufficient to address the volume of calls. Additional staffing is needed quickly and on a consistent basis.

**2. Provide a brief justification for the selected vendor to supplement the response in Part II.**

SaviLinx is a Brunswick-based contact center that handles customer service for large companies. They are also the customer service provider for Massachusetts' paid family leave program and have just added support for the state's unemployment program. The department has been in contact with Massachusetts and received a positive reference. The company has proposed to provide Maine with:

- 100 customer service representatives within a few days of contract award
- half of the staff will be Maine workers
- supervision and quality assurance staff
- train-the-trainer services
- all equipment and workstations

**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

SaviLinx proposal would cost the state approximately \$200,000/week or \$50/hour of customer service time. Included in that is the individual's salary and benefits, management oversight and other overhead. Additional costs for call center equipment will be passed through at cost. The department feels this is reasonable.

**4. Describe the plan for future competition for the goods or services.**

This is not intended to be an ongoing need after the end of the contract.

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## PART IV: APPROVALS

<b>Signature of requesting Department's Commissioner (or designee):</b>	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
<b>Printed Name:</b>	Kimberly Smith	<b>Date:</b>	4/1/2020
<b>Signature of DAFS Procurement Official:</b>	<small>DocuSigned by:</small> 		
<b>Printed Name:</b>	Jaime Schorr <small>6D6437754DD0459...</small>	<b>Date:</b>	4/13/2020