

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.

| PART I: OVERVIEW | | | |
|---|---|---|----------------------|
| Department Office/Division/Program: | | DHHS / OBH – Jennifer Marlowe/ Theresa Witham | |
| Department Contract Administrator or Grant Coordinator: | | Nancy Tan/Lora Blackwell | |
| (If applicable) Department Reference #: | | OSA-18-4034G | |
| Amount: (Contract/Amendment/Grant) | Current: \$ 1,380,266.66 Amend: \$ 43,845.20 Revised: \$ 1,424,111.86 | Advantage CT / RQS #: | CT 10A 20180228*2563 |
| CONTRACT | Proposed Start Date: | Proposed End Date: | |
| AMENDMENT | Original Start Date: | Effective Date: | 4/1/2020 |
| | Previous End Date: | New End Date: | 9/30/2020 |
| GRANT | Project Start Date: | Grant Start Date: | |
| | Project End Date: | Grant End Date: | |
| Vendor/Provider/Grantee Name, City, State: | | Results Marketing & Design, dba Ethos | |
| Brief Description of Goods/Services/Grant: | | Marketing Campaign for Public Service Announcements related to COVID-19 Civil Emergency | |

| 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 |
| X | B. Amendment | | H. State Statute/Agency Directed |
| X | 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 | X | L. Other Authorization: COVID-19 |

| PART III: SUPPLEMENTAL INFORMATION |
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| 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. |
| The purpose of this amendment is to develop and execute a multi-platform public education and outreach campaign to increase awareness about public health initiatives and guidance in the face of the COVID-19 pandemic. The goal of the campaign is to address the significant behavioral health impact and evidence of disaster related distress is already emerging. This campaign will include the Maine Frontline Warmline (MFLWL) activities to support first responders and health care workers; a public behavioral health outreach and education campaign; access to CCP trained professionals and paraprofessionals; and linkage to social and behavioral health services. Due to the nature of the disaster, activities will heavily focus on the public behavioral health campaign and virtual supports. |

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PART III: SUPPLEMENTAL INFORMATION

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

The provider has current experience working on marketing and advertising campaigns focused on a similar population who have or are at risk for Substance Use Disorder, and significant experience in public health and insurance coverage public awareness projects. The Department's existing relationship would provide the necessary rapid creation of the campaigns, and the vendor has previously demonstrated ability to work on extremely expedited timelines.

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

The rates are consistent with the current contract and the bulk of the funding will be used to purchase digital, social media, and streaming or other advertisements, and some funding will potentially be used for the development and printing of promotional/educational materials.

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

The Department intends on issuing an RFP for SUD media services for a 1/1/2021 contract start date.

PART IV: APPROVALS

| | | | |
|---|--|--|------------|
| Signature of requesting Department's Commissioner (or designee): | <i>By signing below, I signify that I approve of this procurement request.</i> | | |
| Printed Name: | <i>23-Sep-20</i> | | |
| Signature of DAFS Procurement Official: | <i>Kathy Paquette</i> | | |
| Printed Name: | 41C2BA36FAF44CD... Kathy Paquette | | 10/27/2020 |