

State of Maine Procurement Justification Form

PART I: OVERVIEW

Department Office/Division/Program:		Department of Health and Human Services/Commissioner's Office		
Department Contract Administrator or Grant Coordinator:		Jennifer Levesque & Nancy Tan		
(If applicable) Department Reference #:		Multiple – See attached		
Amount: (Contract/Amendment/Grant)	Currently: \$12,954,875.74 Amend: \$ 134,113.00 Revised: \$13,088,988.74	Advantage CT / RQS #:	Multiple – See attached	
CONTRACT	Proposed Start Date:	6/8/2020	Proposed End Date:	12/11/2020
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:		Multiple – See attached		
Brief Description of Goods/Services/Grant:		2020 Municipal COVID-19 Awareness Campaign		

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	X	G. Grant
X	B. Amendment		H. State Statute/Agency Directed
	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

Please respond to ALL of the following:

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

As part of the Keep Maine Healthy initiative, the Department of Health and Human Services (DHHS) has created the 2020 Municipal COVID-19 Awareness Campaign to encourage municipalities and Tribes to implement their own COVID-19 prevention, education and protection plans in partnership with DHHS. Municipalities and Tribes that submit plans approved by DHHS will be reimbursed for costs associated with approved public health education and prevention activities through October 31, 2020.

The purpose of these amendments are to increase funding to support the need to continue COVID-19 prevention, education and protection plans.

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PART III: SUPPLEMENTAL INFORMATION

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

These contracts are only with Maine Municipalities and Tribes. This was the design of the program.

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

Municipalities and tribes were encouraged to submit plans and budgets to support the program. The costs associated with these services have been reviewed by the Department for fairness and allowability.

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

The Department may provide additional funding for this program. If it does, the same competitive grant process will be used.

PART IV: APPROVALS

**Signature of requesting
Department's Commissioner
(or designee):**

By signing below, I signify that I approve of this procurement request.

DocuSigned by:

Printed Name: 66738ED17E0C4B2...
Jim Lopatosky

Date: 11/13/2020

**Signature of DAFS
Procurement Official:**

Michelle Fournier

006BBD96EE5347F...

Printed Name: Michelle Fournier

Date: 11/19/2020

State of Maine
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Office: DHHS

Service Group: Municipal COVID-19 Awareness Round 2

No. of Vendors: 4

Amendment Total: \$ 134,113.00

Municipality	Agreement Number	Start Date	End Date	Amend Amount	Revised Agreement Amount
City of Auburn	COM-20-3001B	6/8/2020	12/11/20	\$ 76,400	\$ 564,347.70
Town of Ogunquit	COM-20-3051C	6/8/2020	12/11/20	\$ 21,712	\$ 348,340.70
Town of Oxford	COM-20-3054B	6/8/2020	12/11/20	\$ 17,000	\$ 85,607.00
Town of St George	COM-20-3066B	6/8/2020	12/11/20	\$ 10,260	\$ 51,299.00