

## State of Maine Procurement Justification Form

This form must accompany ALL contract requests and sole source requisitions submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below.

PART I: OVERVIEW			
Department Office/Division/Program:	Me CDC/Chronic Disease Prevention and Control		
Department Contract Administrator or Grant Coordinator:	Chris Moiles/Deb Weston		
(If applicable) Department Reference #:	CD0-20-4595		
Estimated Contract or Grant Amount:	\$ 40,000.00	Advantage CT / RQS #:	CT 10A 20200122*2116
AMENDMENT	Original Start Date:		New Start Date:
	Original End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
ALL OTHER	Proposed Start Date:	1/1/2020	Proposed End Date: 6/29/2021
Vendor/Provider/Grantee Name, City, State:	Harrington Family Health Center Harrington, ME		
Brief Description of Goods/Services/Grant:	Improve population chronic disease health outcomes		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before the justification(s) that applies to this request.			
	A. Competitive Process		G. Grant
	B. Amendment		H. State Statute/Agency Directed
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents	<b>X</b>	J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

PART III: SUPPLEMENTAL QUESTIONS
Please respond to ALL of the following questions.
<b>1. Provide a more detailed description of the goods, services or grant to supplement the response in Part I.</b>
<p>The purpose of this agreement is to improve population chronic disease health outcomes and quality of care for Maine patient populations aged 18-85 with prediabetes, diabetes, high blood pressure and high blood cholesterol through practice transformation for chronic disease care in health care systems. By exclusively outreaching to Maine's Federally Qualified Health Centers (FQHC's) and MaineCare Health Homes, that provide services to underserved, rural populations, the Department intends to reach populations at-risk for chronic disease and those who experience racial/ethnic or socioeconomic disparities, including inadequate access to care, poor quality of care, or inadequate financial means.</p>

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## PART III: SUPPLEMENTAL QUESTIONS

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

The vendor is willing and qualified to provide this service as they are a Federally Qualified Health Centers with 3 or fewer sites, located in the Medically Underserved Areas, and service high priority populations. Included in the high priority populations served are:

- The heart attack rate is 59.6% compared to the state average of 26%
- The cardiovascular disease rate is 222.3/100,000 (significantly worse) compared to the state average of 195
- 39% have high blood pressure compared to the state average of 33.7%
- Washington county has a significantly higher proportion of residents diagnosed with diabetes (12.8% vs. 10% Maine average)

The vendor also has existing professional relationships with stakeholders that will be leveraged to meet the needs of the Department.

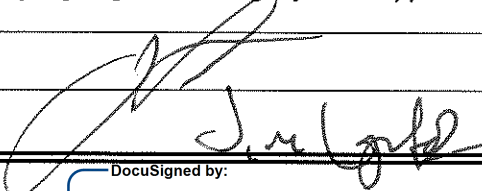
**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

The rates outlined in the proposed budget are reasonable and equitable to rates outlined in other service agreements where personnel and services are rendered.

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

As this is a Willing and Qualified agreement, the Department does not plan to RFP these services.

## 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>			<b>Date:</b> 20-Feb-20
<b>Signature of DAFS Procurement Official:</b>	DocuSigned by: <i>Kathy Paquette</i>		
<b>Printed Name:</b>	41C2BA36FAF44CD... Kathy Paquette	<b>Date:</b>	3/4/2020