

## State of Maine Waiver of Competitive Bidding Request Form (Formerly Sole Source Authorization Form)

<b>Requesting Department's Contract Administrator:</b>	Raymond Bernier	<b>Office/Division/Program of Contract Administrator:</b>	Division of Juvenile Services
<b>Est. Contract Amount:</b>	\$15,000	<b>Contract or RQS Number:</b>	03A20180423000000003257
<b>Proposed Start Date:</b>	<b>July 1, 2018</b>	<b>Proposed End Date:</b>	<b>June 30, 2019</b>
<b>Vendor/Provider Name, City, State</b>	Kennebec Behavioral Health 67 Eustis Drive Waterville, Maine		
<b>Short Description of Good or Service:</b>	Home and Community Treatment--MST		
<b>Please note, for transparency purposes, Waivers of Competitive Bidding will be publicly posted. Public postings are placed on the Division of Purchases' website for a period of seven consecutive calendar days.</b>		<b>To be completed by the Division of Purchases</b> Posting dates on Division of Purchases' website: From: <u>04/30/2019</u> To: <u>05/06/2019</u>	
<b>Notice of Intent to Waive Competitive Bidding Number:</b>		NOI# 0420190535	
<b>1. Statutory Justification</b>			
State of Maine statute (5 M.R.S. §1825-B(2)) allows waivers of competitive bidding only for the specific reasons listed below. Please mark the appropriate box (X) next to the justification which applies to this specific request.			
<input type="checkbox"/>	A. The procurement of goods or services by the State for county commissioners pursuant to Title 30-A, section 124, involves the expenditure of \$2,500 or less, and the interests of the State would best be served;		
<input type="checkbox"/>	B. The Director of the Bureau of General Services is authorized by the Governor, or the Governor's designee, to make purchases without competitive bidding because, in the opinion of the Governor or the Governor's designee, an emergency exists that requires the immediate procurement of goods or services;		
	<i>If citing the above justification for this Waiver of Competitive Bidding request, please have the requesting Department's Commissioner or Chief Executive (as the Governor's "designee") sign and date on the right.</i>	<i>By signing below, I signify as the Governor's designee there is an emergency that necessitates this non-competitive procurement.</i> <b>Signature:</b>  <b>Printed Name:</b> _____ <b>Date:</b> _____	
<input checked="" type="checkbox"/>	C. After reasonable investigation by the Director of the Bureau of General Services, it appears that any required unit or item of supply, or brand of that unit or item, is procurable by the State from only one source;		
<input type="checkbox"/>	D. It appears to be in the best interest of the State to negotiate for the procurement of petroleum products;		
<input type="checkbox"/>	E. The purchase is part of a cooperative project between the State and the University of Maine System, the Maine Community College System, the Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State involving: (1) An activity assisting a state agency and enhancing the ability of the university system, community college system, Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State to fulfill its mission of teaching, research, and public service; (2) A sharing of project responsibilities and, when appropriate, costs;		
	<i>If citing the above justification for this sole source request, please note that the specific approval of the Governor's Office is required, in accordance with Executive Order 26 FY 11/12, "An Order to Enhance Competitive Bidding". The approval must be documented on DAFS/BGS/Division of Purchases "GOVCOOP" form, found here: <a href="http://www.maine.gov/purchases/info/forms/govcoop.doc">http://www.maine.gov/purchases/info/forms/govcoop.doc</a>.</i>		
<input type="checkbox"/>	F. The procurement of goods or services involves expenditures of \$10,000 or less, in which case the Director of the Bureau of General Services may accept oral proposals or bids;		
<input type="checkbox"/>	G. The procurement of goods or services involves expenditures of \$10,000 or less, and procurement from a single source is the most economical, effective and appropriate means of fulfilling a demonstrated need.		
<input type="checkbox"/>	If a different authorization specifically allows for this non-competitive procurement, please provide that reference here:		

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**Please note that the following four points below (#2 through 5) all require a response.**

## **2. Description of Specific Need**

Please identify, and fully describe, the specific problem, requirement, or need the resulting non- competitive contract would address and which makes the goods or services necessary. Explain how the requesting Department determined that the goods or services are critical and/or essential to agency responsibilities or operations.

- a. The Division of Juvenile Services (DJS) under the Maine Department of Corrections (DOC) has a need for an evidence based practice that will reduce the recidivism rate and reduce out of home placement for youth at moderate to high risk of reoffending.
- b. The mission of the Division of Juvenile Services (DJS) is to promote public safety by ensuring that juveniles under DOC jurisdiction are provided with risk-focused interventions, quality treatment, and other services that teach skills and competencies; strengthen pro social behaviors to reduce the likelihood of re-offending and require accountability to victims and communities. DOC determined Multi-systemic Therapy is appropriate for meeting the above stated need. All referred youth will have an opportunity to benefit from this evidenced based treatment program focused on reducing recidivism while also reducing rates of out-of-home placement, such as incarceration and residential treatment for high risk youth presenting oppositional and disruptive behaviors in their homes, schools and communities. The use of a home-based model of service delivery (i.e., low caseloads, time limited duration of treatment) removes barriers of access to care and provides the high level of intensity needed to successfully treat youths presenting serious clinical problems and their multi-need families. Please reference Revised Maine Statute Title 15: Part 6: Chapter 501: § 3002-Purpose and Construction.

## **3. Availability of other Public Resources**

Please explain how the requesting Department concluded that sufficient staffing, resources, or expertise is not available within the State of Maine's government, or other governmental entities (local, other state, or federal agencies) external to the requesting Department, which would be able to address the identified need more efficiently and effectively than the identified vendor.

- a. The DOC does not have sufficient staff or the expertise to deliver MST. MST is delivered by licensed clinical staff and must be licensed by MST Services to be rated as an evidence based program.
- b. MST treatment costs are based on a rate that was developed through a state-agency rate setting process that leverages MaineCare to support a portion of the costs for MaineCare eligible youth and is a deliverable service under MaineCare HCT Section 65. This contract provides support to pay the treatment costs for youth under our jurisdiction who are not MaineCare eligible.

## **4. Cost**

Since a waiver of competitive bidding is being requested for this procurement, please explain how the requesting Department concluded the negotiated costs, fees, or rates are **fair and reasonable**.

The current funds allocated to this contract are \$190,000. We are requesting an additional \$15,000 to the fee for service line to continue serving youth as described in the CT for the remainder of the FY.

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**5. Future Competition**

Please describe potential opportunities which may be available to foster competition for these goods or services in the future.

Future competition to this program will necessitate an RFP; however the costs associated with the start-up of a new program will strongly inhibit another site from implementing this Blue Print Model.

**Please note that only one of the two points below (“Uniqueness” or “Timeframe”) requires a response. Requesting Departments are not required to respond to both points.**

**6. Uniqueness**


Please explain if the goods or services required are unique to a specific vendor. Describe the unique qualifications, abilities, and/or expertise of the vendor and how those particular unique factors address the specific need identified above. If the vendor has unique equipment, facilities, or proprietary data, also explain the necessity of these particular unique assets.

Kennebec Behavioral Health (KBH) is the only licensed MST provider in Region 2. MST is a proprietary service and can only be delivered by clinical staff that have undergone extensive training, regularly engage in on-going clinical & MST consultation, deliver the treatment adherent to the model and are licensed by MST Services. KBH is one of only three providers currently licensed in Maine to deliver this service. MST is an intensive family-based treatment that addresses the known determinants of serious antisocial behavior in adolescents and their families. As such, MST treats those factors in the youth's environment that are contributing to his or her behavior problems. KBH is only one of two providers in Maine that is licensed to deliver MST-PSB (Problem Sexual Behavior) for youth with problem sexual behavior.

**7. Timeframe**

Please explain if time is of the essence and an emergency exists which requires the immediate procurement of goods or services. Describe the nature of this emergency, provide the date by which the goods or services must be delivered, and explain how that date was determined and its significance (i.e. impact if delayed beyond this date). Also, provide information as to how it was determined this vendor is the best option to address this time-sensitive procurement.

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<b>Signature of requesting Department’s Commissioner or Chief Executive (or designee within the Commissioner’s Office):</b>	<i>By signing below, I signify that my Department requests, and I approve of, this Waiver of Competitive Bidding.</i>
<b>Printed Name:</b>	
<b>Date:</b>	Colin O'Neill 4/29/19