

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:	DHHS/OBH/Katherine Coutu/Stephanie Kadnar		
Department Contract Administrator or Grant Coordinator:	Nancy Tan & Debbie Weston		
(If applicable) Department Reference #:	Multiple: See Attachment		
Estimated Contract or Grant Amount:	Original: \$1,200,000.00 Amend: \$ 748,800.00 Revised: \$1,948,800.00	Advantage CT / RQS #:	Multiple: See Attachment
AMENDMENT	Original Start Date:	7/1/2018	New Start Date:
	Original End Date:	6/30/2020	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
ALL OTHER	Proposed Start Date:		Proposed End Date:
Vendor/Provider/Grantee Name, City, State:	Multiple: See Attachment		
Brief Description of Goods/Services/Grant:	Overdose Prevention/Naloxone Distribution		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before the justification(s) that applies to this request.			
	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		L. Other Authorization

PART III: SUPPLEMENTAL QUESTIONS
Please respond to ALL of the following questions.
1. Provide a more detailed description of the goods, services or grant to supplement the response in Part I.

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PART III: SUPPLEMENTAL QUESTIONS

Overdose prevention education and outreach to high risk populations and groups as the need to combat opiate and heroin use continues to grow. Overdose prevention education and outreach will target as many high risks persons as possible to address the epidemic that Maine citizens are experiencing.

The providers are responsible for coordination of outreach services and related overdose prevention information to communities, providers and at risk clients in their respective regions. As the Single State Authority (SSA), it is the responsibility of this office to allocate SAPT Block Grant and state dedicated and matching funds/resources to agencies who have the organizational structure and ability to implement evidenced based overdose prevention education to the clients in Maine.

The purpose of this amendment is in response to Governor Mills' executive order dated February 6, 2019; Section III. OVERDOSE AND DEATH PREVENTION; Section C. directing OBH to fund the purchase of intranasal Narcan and intramuscular naloxone for distribution.

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

These providers are currently providing the services and have specialty trained staffs that have the ability to provide overdose prevention services for at risk individuals. These provider have the available resources to provide overdose prevention outreach and services to the identified population and are equipped distribute naloxone kits to individuals at risk of overdose to those within the community as needed.

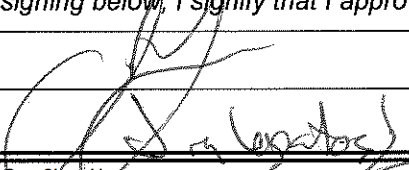
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Cost of kits were based on market value of the medication per pharmacy/pharmaceuticals company. Salary was based on current rates for qualified staff providing the service.

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

The Department will be competitively procuring these services with a 7/1/2021 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:		Date:	6-Apr-20
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> <i>Kathy Paquette</i>		
Printed Name:	<small>41C2BA36FAE44CD</small> Kathy Paquette	Date:	4/17/2020

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DHHS Office: SAMHS
Service: Overdose Prevention
Start Date: 7/1/2018

Vendor/Provider Name, City & State	Contract (CT) Number	DHHS Agreement #	Amendment Amount (if applicable)	Total Contract Amount
MaineGeneral Medical Center	CT 10A 20180405*3014	OSA-19-367C	\$187,200.00	\$557,200.00
City of Portland	CT 10A 20180405*3012	OSA-19-372C	\$187,200.00	\$557,200.00
City of Bangor	CT 10A 20180405*3010	OSA-19-373B	\$187,200.00	\$557,200.00
Maine Access Points	CT 10A 201906260*3968	OSA-19-376B	\$187,200.00	\$277,200.00
	Totals:	4	\$748,800.00	\$1,948,800.00