

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/OADS/Brain Injury Services			
Department Contract Administrator or Grant Coordinator:	Nancy Tan			
(If applicable) Department Reference #:	ADS-20-9712			
Estimated Contract or Grant Amount:	\$333,000.00	Advantage CT / RQS #:	CT 10A 20200206*2229	
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:	02/01/2020	Proposed End Date:	06/30/2021
Vendor/Provider/Grantee Name, City, State:	Brain Injury Association of America Vienna, Virginia			
Brief Description of Goods/Services/Grant:	Core Brain Injury Support			

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
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.
<p>The purpose of this agreement is to provide Core Brain Injury Support for underserved populations of individuals with an acquired brain injury, in accordance with 22 MRSA § 3088-A – Support for underserved populations. The population served may include, but is not limited to, individuals who have experienced an opioid drug overdose resulting in anoxic or hypoxic brain injury, are veterans, are victims of domestic violence, are homeless, are ineligible for MaineCare, and who have a newly acquired brain injury.</p>

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PART III: SUPPLEMENTAL QUESTIONS

"Core Brain Injury Support" to be delivered under this Contract includes providing Information and Resource Services, including operation of a HELPLINE and maintenance of a resource directory; conducting Training and Education, including a statewide Brain Injury Conference; facilitating access to brain injury services in Maine; providing administrative support for the Acquired Brain Injury Advisory Council; conducting outreach to leading hospitals and agencies working with at-risk populations; and conducting state-wide acquired brain injury peer and family support groups.

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

The Brain Injury Association of America is a national organization established specifically to work with individuals who have brain injuries and their family members. The Brain Injury Association of America has developed a model of services and supports that is unique to brain injury advocacy and infrastructure development.

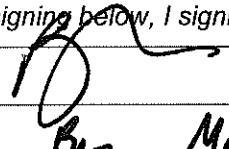
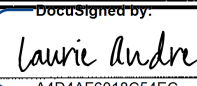
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The rates for services in this contract are consistent with other agreements for similar services.

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

The Department does not intend to issue an RFP for this service.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	By signing below, I signify that I approve of this procurement request.		
			
Printed Name:	Ben Mann	Date:	4/1/20
Signature of DAFS Procurement Official:	DocuSigned by: 		
Printed Name:	A4D4AF6018C54EC... Laurie Andre	Date:	4/24/2020