

State of Maine Procurement Justification Form

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		DHHS/Office of MaineCare Services		
Department Contract Administrator or Grant Coordinator:		Arlene Jones Shawn Belanger		
(If applicable) Department Reference #:		OMS-21-010		
Amount: (Contract/Amendment/Grant)	\$48,000	Advantage CT / RQS #:	CT 10A 20210317*2457	
CONTRACT	Proposed Start Date:	4/1/2021	Proposed End Date:	3/17/2022
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:		Brown & Peisch, PLLC Washington, DC		
Brief Description of Goods/Services/Grant:		Legal Counsel		

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		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 INFORMATION

Please respond to ALL of the following:

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

The Agreement provides legal services relating to Medicaid issues as authorized by a letter from Attorney General Aaron Frey. The authorization allows the Department to retain the services of the Provider to provide effective legal counsel to the Department on Medicaid issues, including participation in the Brown & Peisch Joint State Advisory Service, and also for miscellaneous legal Medicaid advice.

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PART III: SUPPLEMENTAL INFORMATION

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

The Provider is a national law firm specializing in federal Medicaid issues. Many states use this Provider's services for assistance with Medicaid issues, which by their very nature are complex. The Provider has the unique qualifications of being knowledgeable about the federal Medicaid laws and regulations, upcoming challenges to those laws and regulations, and is knowledgeable about many states' Medicaid programs. The state spends a large portion of its budget on Medicaid. Medicaid programs are vulnerable to challenges by the federal government (in the form of CMS or Office of Inspector General audits and recoupments), legal challenges by Medicaid providers and Medicaid recipients. Such challenges could be worth millions of dollars and it is expedient for Maine to utilize the best legal advice available, which includes the Provider.

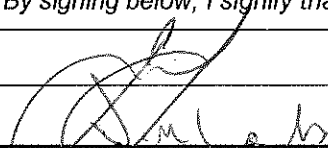

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Rates were reviewed and approved by the Attorney General's Office.

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

The Department does not intend to competitively procure these services.

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:	21-Apr-21
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <i>Kathy Paquette</i>		
Printed Name:	kathy Paquette ^{41C2BA36FAE44CD...}	Date:	4/28/2021