



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

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 intranet site (Forms page) for additional instructions.

| PART I: OVERVIEW | | | |
|---|----------------------|---|------------------------------|
| Department Office/Division/Program: | | DHHS/Maine CDC | |
| Department Contract Administrator or Grant Coordinator: | | Chris Moiles Shawn Belanger | |
| (If applicable) Department Reference #: | | CD0-23-5468 | |
| Amount: (Contract/Amendment/Grant) | \$ 527,616.00 | Advantage CT / RQS #: | RQS 10A 20220922*0389 |
| CONTRACT | Proposed Start Date: | 10/1/2022 | Proposed End Date: 7/31/2024 |
| 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: | | IDEXX Laboratories, Inc. Westbrook, Maine | |
| Brief Description of Goods/Services/Grant: | | This is for SARS-CoV-2 extraction and RT-PCR kits that work in conjunction with our laboratory instrumentation. | |

| PART II: JUSTIFICATION FOR VENDOR SELECTION | | | |
|--|-----------------------------------|-------------------------------------|----------------------------------|
| Check the box below for the justification(s) that applies to this request. (Check all that apply.) | | | |
| <input type="checkbox"/> | A. Competitive Process | <input type="checkbox"/> | G. Grant |
| <input type="checkbox"/> | B. Amendment | <input type="checkbox"/> | H. State Statute/Agency Directed |
| <input checked="" type="checkbox"/> | C. Single Source/Unique Vendor | <input type="checkbox"/> | I. Federal Agency Directed |
| <input type="checkbox"/> | D. Proprietary/Copyright/Patents | <input type="checkbox"/> | J. Willing and Qualified |
| <input type="checkbox"/> | E. Emergency | <input type="checkbox"/> | K. Client Choice |
| <input type="checkbox"/> | F. University Cooperative Project | <input checked="" type="checkbox"/> | L. Other Authorization: COVID-19 |

Please respond to ALL of the questions in the following sections.

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PART III: SUPPLEMENTAL INFORMATION

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

It is necessary to maintain these Idexx reagents for COVID testing as part of surveillance and outbreak support in congregate and long-term care settings. These supplies mimic the supplies used in the HETL COVID-19 mobile trailer. Per our quality assurance manual, and technical protocols, the test method used in the HETL COVID-19 mobile trailer must also be utilize inside the main HETL laboratory.

HETL provides a service to Maine hospitals, laboratories, clinics, and the Medical Examiner's Office to test samples for COVID-19 as well as other respiratory pathogens from one sample. HETL also receives positive SARS-CoV-2 samples from other hospitals, laboratories, and doctors' offices. The nucleic acid is extracted and forwarded to Jackson Laboratories in Bar Harbor, Maine. Jackson Labs uses the nucleic acid to sequence the samples and provide information to federal CDC about which strain of COVID-19 is circulating in Maine.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

Idexx was originally selected because of their capacity to provide the significant number of test kits to the department for COVID-19 testing. Please reference CD0-20-5407 D for historical information.

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

Idexx has agreed to a reduced, set cost for reagents that have been properly vetted on our current instrumentation used for testing respiratory samples for COVID-19. These kits have been used throughout the COVID-19 pandemic. The most recently quoted cost provides an additional cost savings to the lab of 30% for each extraction kit (cat# 99-57004) and 60% for each RT-PCR kit (cat# 99-8015).

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

The department does not intend to RFP this service at this time.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting
Department's Commissioner
(or designee):



Typed Name:

Ben Moran

Date:

2/13/23

Signature of DAFS Procurement
Official:

Michelle Fournier

Typed Name:

Michelle Fournier

Date:

4/14/2023