



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.		Office of the Attorney General		
Department Contract Administrator or Grant Coordinator:		Summer Carter/Lindsey Chasteen		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ \$8,000 00	Advantage CT / RQS #:	CT 26A 20240410*2801
CONTRACT	Proposed Start Date:	7/1/2024	Proposed End Date:	6/30/2025
AMENDMENT	Original Start Date:	Click or tap to enter a date	Effective Date:	Click or tap to enter a date
	Previous End Date:	Click or tap to enter a date	New End Date:	Click or tap to enter a date
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Brown & Meyers 71 Pleasant Hill Road Scarborough, ME 04074		
Brief Description of Goods/Services/Grant.		Forensic Pathology Autopsy Transcription Services		

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 type="checkbox"/>	L. Other Authorization
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Please respond to ALL of the questions in the following sections.

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.

The Office of the Chief Medical Examiner (OCME) requires transcription services for the 325+ autopsies and 125+ examination reports dictated annually by the forensic pathologists. This service needs to be performed in accordance with a very specific format developed by the Chief Medical Examiner and Brown & Meyers for consistency with all reports and recorded information.

OCME support staff positions are needed to perform other administrative functions needed to meet the statutory mandates for this busy office including interactions with the police, public health, attorneys, insurance companies, courts, families, and other government agencies for completion of investigations and case reports. The office case volume has continued to increase while staffing remains the same. None of the employees have the time to transcribe and still complete their primary duties in a timely manner.

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

Transcription/dictation services are not available within the State of Maine government resources. Paying this vendor is less expensive than creating/funding another permanent resource to perform this process in-house.

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

Transcription/dictation services are not available within the State of Maine government resources. Paying this vendor is less expensive than creating/funding another permanent resource to perform this process in-house. Although difficult in comparing transcription service companies use various formulas, the reasonable rate of \$0.155/line is 1) the same pricing as the previous year's contract and 2) is considered reasonable when compared to court reporting services. This contract is less than \$10,000 per year. The current vendor is providing quality product. The transcribers have been specifically trained to work with the OCME case report templates; are very efficient; and are familiar with OCME's forensic pathologists' individual styles as well as OCME's terminology, which reduces spelling errors.

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

We will continue to check for any similar cost-effective service with the specific training and capability as the current vendor.

Click or tap here to enter text

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.


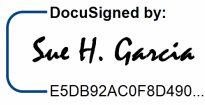
PART V: CONFLICTS OF INTEREST (COI); PURCHASES BY THE STATE

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?

Yes, the requesting Department signatory understands and acknowledges Title 17, Chapter 101, §3104.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Summer Carter	Date:	4/12/2024
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <small>E5DB92AC0F8D490...</small>		
Typed Name:	Sue H. Garcia	Date:	4/24/2024