

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/ME/CDC | | | |
| Department Contract Administrator or Grant Coordinator: | Chris Moiles Tammy Duguay | | | |
| (If applicable) Department Reference #: | 014-10A-9121-01-5637 | | | |
| Amount: (Contract/Amendment/Grant) | \$ 12,775,030.00 | Advantage CT / RQS #: | Multiple | |
| CONTRACT | Proposed Start Date: | April 1, 2020 | Proposed End Date: | March 31, 2021 |
| 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: | Multiple, see attached | | | |
| Brief Description of Goods/Services/Grant: | Purchasing Vaccines to comply with Public Law 595 | | | |

| 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 | X | H. State Statute/Agency Directed |
| X | C. Single Source/Unique Vendor | X | 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. |
| This fulfills the obligation as outlined in Public Law 595 to purchase and distribute vaccine to provider offices enrolled in the Maine Immunization Program to administer vaccines to all children in the State of Maine with no out of pocket cost to the parent or guardian. The purchase of this vaccine with the collected assessments funds from the health insurance organizations completed the intent to have Maine be a Universal Distribution State. |

State of Maine Procurement Justification Form

PART III: SUPPLEMENTAL INFORMATION

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

The Program has concluded that there is no other contract or purchasing mechanism that is more cost efficient than purchasing through the Federal CDC Vaccine contracts. Contract prices are those for the Federal CDC vaccine contracts that are established for the purchase of vaccines by immunization programs that receive Federal CDC immunization grants funds (i.e., State health departments, certain large city immunization projects, and certain current and former U.S. territories)

Language supporting the Maine Immunization Program to purchase off the Federal Contract: "The CDC Vaccine Price Lists posted on this website provide current vaccine contract prices and list the private sector vaccine prices for general information. Contract prices are those for CDC vaccine contracts that are established for the purchase of vaccines by immunization programs that receive CDC immunization grant funds (i.e., State health departments, certain large city immunization projects, and certain current and former U.S. territories). Private providers and private citizens cannot directly purchase vaccines through CDC contracts. Private sector prices are those reported by vaccine manufacturers annually to CDC. All questions regarding the private sector prices should be directed to the manufacturers." <http://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html>

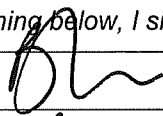
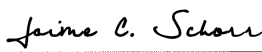
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Maine Public Law 595 Universal Childhood Immunization Program, 22M.R.S.A § 1066 (section 3 E 1) reference "Vaccines recommended by the advisory committee that are available under contract with the United States Department of Health and Human Services, Centers for Disease Control and Prevention." The Federal CDC has negotiated the vaccine cost on behalf of the Immunization Programs across the nation. Being a State run immunization program, this allows the Maine Immunization Program to purchase vaccines off this contract. Purchasing vaccines on the Federal Contract saves an average of 68% over purchasing the vaccine privately.

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

Future opportunities for competition would be negotiated at the Federal level. These negotiations are completed annually for effective start date each April 1st.

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 Munn | Date: | 4/21/20 |
| Signature of DAFS Procurement Official: | DocuSigned by:  | | |
| Printed Name: | Jaime C. Schorr <small>6D6437Z54DD0458</small> | Date: | 5/1/2020 |

State of Maine Procurement Justification Form

The following list identifies all providers/vendors associated with this State of Maine Waiver of Competitive Bidding Request Form along with their specific contract information.

DHHS Office: Maine CDC/Maine Immunization Program
Service: Purchase of vaccinations
Start Date: 1-Apr-2020

| Vendor/Provider Name, City & State | Contract (CT)Number | DHHS Agreement # | Amendment Amount (if applicable) | Total Contract Amount |
|---|----------------------------|-------------------------|---|------------------------------|
| GlaxoSmithKline | 75D30120D07575 | N/A | | \$2,171,755.10 |
| Merck | 75D30120D07516 | N/A | | \$5,237,762.30 |
| Pfizer | 75D30120D07513 | N/A | | \$3,066,007.20 |
| Sanofi | 75D30120D07514 | N/A | | \$2,299,505.40 |
| | Totals: | | 4 | \$12,755,030.00 |