

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/OBH/Baxter Services/Peter Alexander	
Department Contract Administrator or Grant Coordinator:		Arlene Jones Christie Goodman (OBH PA)	
(If applicable) Department Reference #:		MH2-20-925B	
Amount: (Contract/Amendment/Grant)	Current: \$178,400.00	Advantage CT / RQS #:	10A 20190405*2832
	Amend: \$ 14,210.72		
	Revised: \$192,610.72		
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	7/1/2019	Effective Date:
	Previous End Date:	6/30/2021	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Ralph M Sprague Lewiston, ME 04240	
Brief Description of Goods/Services/Grant:		A Safer Place (Baxter Related)	

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
X	B. Amendment		H. State Statute/Agency Directed
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents	X	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:

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

The need is to provide specialized professional mental health services in the communication modality most readily understood by former students of the Maine School for the Deaf and/or the Governor Baxter School for the Deaf such that the consumer receives services at no out-of-pocket expense pursuant to the Public and Special Law, Chapter 12, May 2, 2001. In 2001, Maine State Legislature adopted LD178, an Act to Implement the Continuation of Services for victims of abuse at the Governor Baxter School for the Deaf. Section 1, Continuation of Services. "The Department of Mental Health, Mental Retardation and Substance Abuse shall continue to offer counseling and other mental health services at no cost to former students of the Governor Baxter School for the Deaf and the Maine School for the Deaf."

The purpose of this amendment is to add funds due to an increase of utilization needs.

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

DHHS, Office of Behavioral Health had determined that this provider is willing and qualified to provide these services and are licensed to provide this service, employs qualified licensed practitioners and is a provider of this service under MaineCare. They are also independently licensed clinicians [Licensed Clinical Social Workers (LCSWs)/ Licensed Clinical Professional Counselors (LCPCs)], particularly those who are proficient in American Sign Language, to provide specialized outpatient services. Baxter consumers who have been determined clinically eligible for outpatient services choose which clinician they wish to receive treatment from.

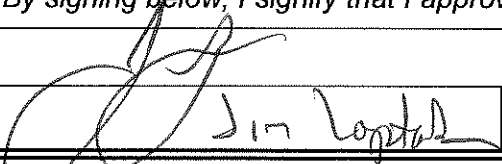
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The rate is based on the units of service approved by the Department's Administrative Services Organization times the hourly rate of the practitioner. The practitioner rates are based on a standardized rate structure that is aligned with the MaineCare rate for outpatient services with interpreter services fees included.

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

The Department does not intend to RFP these services because this service is a MaineCare service provided by "any willing and qualified provider", who must be licensed by DLRS and have a contract with OBH.

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:	14-May-20
Signature of DAFS Procurement Official:	DocuSigned by: <i>Kathy Paquette</i>		
Printed Name:	41C2BA36FAF44CD... Kathy Paquette	Date:	5/27/2020