

State of Maine Waiver of Competitive Bidding Request Form

DHHS/DCM Contract Administrator:	Nancy Tan/Matt Galletta	Office/Division/Program of Contract Administrator:	DHHS/SAMHS/Sara Wade
Est. Contract Amount:	Service Group Total: \$886,840.00	Contract or RQS Number:	See Attached List
		Purchasing Maine ID:	
		DHHS Agreement Number:	See Attached list
Proposed Start Date:	7/1/19	Proposed End Date:	6/30/21
Vendor/Provider Name, City, State	Shalom House, Inc. CT 10A 20190429*3184 See Attached List MH1-20-206 \$191,869.90		
Short Description of Good or Service:	1907 Rental Subsidies		
Please note, for transparency purposes, Waivers of Competitive Bidding will be publicly posted. Public postings are placed on the Division of Procurement Services website for a period of seven consecutive calendar days.		To be completed by the Division of Procurement Services Posting dates on Division of <i>Procurement Services</i> website: From: <u>6/12/2019</u> To: <u>6/18/2019</u>	
Notice of Intent to Waive Competitive Bidding Number:		NOI# 0620190966	
1. Statutory Justification State of Maine statute (5 M.R.S. §1825-B(2)) allows waivers of competitive bidding only for the specific reasons listed below. Please mark the appropriate box (X) next to the justification which applies to this specific request.			
<input type="checkbox"/>	A. The procurement of goods or services by the State for county commissioners pursuant to Title 30-A, section 124, involves the expenditure of \$2,500 or less, and the interests of the State would best be served;		
<input type="checkbox"/>	B. The Director of the Bureau of General Services is authorized by the Governor, or the Governor's designee, to make purchases without competitive bidding because, in the opinion of the Governor or the Governor's designee, an emergency exists that requires the immediate procurement of goods or services;		
<input type="checkbox"/>	<i>If citing the above justification for this Waiver of Competitive Bidding request, please have the requesting Department's Commissioner or Chief Executive (as the Governor's "designee") sign and date on the right.</i>	<i>By signing below, I signify as the Governor's designee there is an emergency that necessitates this non-competitive procurement.</i> Signature: Printed Name: _____ Date: _____	
<input type="checkbox"/>	C. After reasonable investigation by the Director of the Bureau of General Services, it appears that any required unit or item of supply, or brand of that unit or item, is procurable by the State from only one source;		
<input type="checkbox"/>	D. It appears to be in the best interest of the State to negotiate for the procurement of petroleum products;		
<input type="checkbox"/>	E. The purchase is part of a cooperative project between the State and the University of Maine System, the Maine Community College System, the Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State involving: (1) An activity assisting a state agency and enhancing the ability of the university system, community college system, Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State to fulfill its mission of teaching, research, and public service; (2) A sharing of project responsibilities and, when appropriate, costs;		
<input type="checkbox"/>	<i>If citing the above justification for this sole source request, please note that the specific approval of the Governor's Office is required, in accordance with Executive Order 26 FY 11/12, "An Order to Enhance Competitive Bidding". The approval must be documented on DAFS/BGS/Division of Procurement Services "GOVCOOP" form, found here: http://www.maine.gov/purchases/info/forms/govcoop.doc.</i>		
<input type="checkbox"/>	F. The procurement of goods or services involves expenditures of \$10,000 or less, in which case the Director of the Bureau of General Services may accept oral proposals or bids;		
<input type="checkbox"/>	G. The procurement of goods or services involves expenditures of \$10,000 or less, and procurement from a single source is the most economical, effective and appropriate means of fulfilling a demonstrated need.		
<input checked="" type="checkbox"/>	If a different authorization specifically allows for this non-competitive procurement, please provide that reference here:	Willing and Qualified	

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Please note that the following four points below (#2 through 5) all require a response.

2. Description of Specific Need

Please identify, and fully describe, the specific problem, requirement, or need the resulting non-competitive contract would address and which makes the goods or services necessary. Explain how the requesting Department determined that the goods or services are critical and/or essential to agency responsibilities or operations.

According to the Nation Low Income Housing Coalition, In Maine 96.1% of a person's Social Security Income standard monthly payment is needed to pay for the average one-bedroom apartment. Rental assistance is designed to assist individuals with severe and persistent mental illness with their housing costs in permanent or transitional housing settings in the community.

Paragraph 93 of the Bates Consent Decree, shall fund, develop, recruit and support a variety of housing options, which can accommodate varying levels of supportive assistance to clients, according to their individual needs. Some class members will live independently in their own homes.

3. Availability of other Public Resources

Please explain how the requesting Department concluded that sufficient staffing, resources, or expertise is not available within the State of Maine's government, or other governmental entities (local, other state, or federal agencies) external to the requesting Department, which would be able to address the identified need more efficiently and effectively than the identified vendor.

This is not a service provided by the Department or any other public resource.

4. Cost

Since a waiver of competitive bidding is being requested for this procurement, please explain how the requesting Department concluded the negotiated costs, fees, or rates are **fair and reasonable**.

Fair and reasonable costs are determined by the US Department of Housing and Urban Development's (HUD) Fair Market Rents. These are revised annually in October and are adhered to by the Rental Assistance programs administered by SAMHS.

5. Future Competition

Please describe potential opportunities which may be available to foster competition for these goods or services in the future.

The Department does not intend to RFP these services.

Please note that only one of the two points below ("Uniqueness" or "Timeframe") requires a response. Requesting Departments are not required to respond to both points.

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6. Uniqueness

Please explain if the goods or services required are unique to a specific vendor. Describe the unique qualifications, abilities, and/or expertise of the vendor and how those particular unique factors address the specific need identified above. If the vendor has unique equipment, facilities, or proprietary data, also explain the necessity of these particular unique assets.

DHHS, The Office of Substance Abuse and Mental Health Services has determined that this provider is willing and qualified to provide this service. These Vendor have a long standing history and ability to relate and maintain relations with the target group to be served. The Department partnered with the Vendor to provide this subsidy and to utilize funds in units specifically with the MaineCare Benefits Manual Section 17 eligible tenants in buildings funded, in part, by Maine State Housing Authority (MSHA) as part of the consent decree agreement. The Vendor owns, or has contracted use of the facilities/buildings subsidized by these funds. This service is client-driven by individual choice.

7. Timeframe (Complete only if B. is the Statutory Justification marked on Page 1)

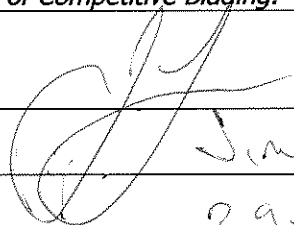
Please explain if time is of the essence and an emergency exists which requires the immediate procurement of goods or services. Describe the nature of this emergency, provide the date by which the goods or services must be delivered, and explain how that date was determined and its significance (i.e. impact if delayed beyond this date). Also, provide information as to how it was determined this vendor is the best option to address this time-sensitive procurement.

Signature of requesting Department's Commissioner or Chief Executive (or designee within the Commissioner's Office):

By signing below, I signify that my Department requests, and I approve of, this Waiver of Competitive Bidding.

Printed Name:

Date:


 Jim LaRocca
 29-May-19

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DHHS Office: SAMHS
 Service: Rental Subsidies
 Start Date: 7/1/2019 6/30/2021

Vendor	CT	Agreement Number	Total Agreement Amount
Area IV Mental Health Services Coalition	CT 10A 20190429000000003186	MH2-20-213	\$ 53,558.00
Aroostook Mental Health Services, Inc.	CT 10A 20190429000000003189	MH3-20-300	\$216,572.10
Community Housing of Maine, Inc	CT 10A 20190429000000003187	MH2-20-515	\$ 51,490.80
Kennebec Behavioral Health dba Kennebec Valley Mental Health Center	CT 10A 20190429000000003185	MH2-20-2011	\$ 148,706.64
Maine Mental Health Connections	CT 10A 20190429000000003190	MH3-20-304	\$ 125,114.56
Shalom House, Inc.	CT 10A 20190429000000003184	MH1-20-206	\$ 191,869.90
Supportive Housing Assoc L P	CT 10A 20190429000000003188	MH2-20-528	\$ 99,528.00
Total Agreements:		7	\$886,840.00