

State of Maine Waiver of Competitive Bidding Request Form

DHHS/DCM Contract Administrator:	Nancy Tan/ Ryan Roberts	Office/Division/Program of Contract Administrator:	DHHS/OADS/SHIP Ingrid Diamond
Est. Contract Amount:	See Attachment	Contract or RQS Number:	See Attachment
		Purchasing Maine ID:	
		DHHS Agreement Number:	See Attachment
Proposed Start Date:	04/01/2019	Proposed End Date:	03/31/2020
Vendor/Provider Name, City, State	See Attachment		
Short Description of Good or Service:	State Health Insurance Assistance Program (SHIP)		
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.		<i>To be completed by the Division of Procurement Services</i> Posting dates on Division of <i>Procurement Services</i> website: From: <u>6/28/2019</u> To: <u>7/4/2019</u>	
Notice of Intent to Waive Competitive Bidding Number:		NOI# 0620191115	
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:	State Selected/Federally Approved	

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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.

Area Agencies on Aging (AAAs) provide State Health Insurance Assistance Program (SHIP) services to Medicare beneficiaries and Medicare eligible individuals in Maine.

Navigating Medicare benefits is challenging for many Mainers who have Medicare insurance or expect to have it soon. SHIP counselors offer free one-on-one counseling and assistance to Medicare beneficiaries and their families and caregivers. Counseling and assistance are provided via telephone, personalized face-to-face interactive sessions, public education presentations and seminars, and media activities. The Maine SHIP receives grant funding to enhance SHIP counseling and information assistance functions, especially for Medicare beneficiaries with limited income and resources, as well as those who may be eligible for additional assistance. SHIP services help to assure that beneficiaries make informed healthcare decisions and often result in significant healthcare cost savings for consumers.

This amendment adds CIP State Health Insurance Assistance Program Project 90SAPG0021-03-00 grant funding awarded by the NOA dated 03-22-19.

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 Provider is specified in the Federal Grant Application.

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**.

The funds are allocated through an established and approved Intrastate Funding Formula approved by the Assistant Secretary for Aging. This is also listed in Policy – 10-149 C.M.R ch 5 sec 10 § 10.03 (K) shown below:

(K) State Health Insurance Assistance Program (SHIP). The Office of Elder Services shall reserve a portion of SHIP funds administration, training, printing, and Legal Services for the Elderly. SHIP funds allocated to each AAA will be allocating using the Intrastate Funding Formula, described in Section 10.04 (A).

Increasing contracts (total \$19,100) to reflect the NOA for contractual.

5. Future Competition

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

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Per the Federal grant requirements, these funds can only be contracted to agencies/organization already performing SHIP funded services through prior CMS and AoA SHIP grant awards, and are required to be designated as SHIP providers, Area Agencies on Aging (AAAs) or Aging and Disability Resource Centers (ADRCs).

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.

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.

Maine's AAAs are designated by the Federal Administration on Aging to provide Older American Act programs and other services to older adults in Maine. Maine's AAAs are uniquely positioned to provide direct services through SHIP due to their expertise in providing a wide range of services to older adults. Additionally, AAAs provide SHIP services, which are narrowly defined, as a component of the outreach they provide to older adults and family members.

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.

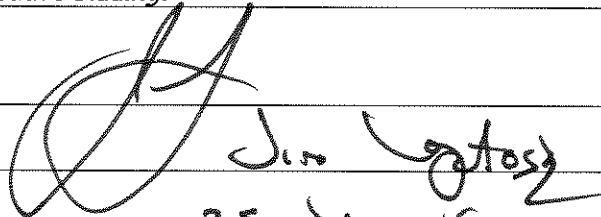
N/A

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 Gatos
 25-JUN-19

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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: OADS
Service: State Health Insurance Assistance Program (SHIP)
Start Date: 4/1/2019

Vendor/Provider Name Address	Contract (CT) Number	DHHS Agreement #	Amendment Amount (if applicable)	Total Contract Amount
Aroostook Area Agency on Aging Presque Isle, ME	10A 20190206*2288	ADS-19-8061A	\$ 1,858.00	\$ 21,778.00
Central Maine Area Agency on Aging dba Spectrum Generations Augusta, ME	10A 20190206*2286	ADS-19-5063A	\$ 5,723.00	\$ 67,075.00
Eastern Area Agency on Aging Brewer, ME	10A 20190206*2287	ADS-19-6062A	\$ 4,751.00	\$ 55,692.00
SeniorsPlus Lewiston, ME	10A 20190206*2247	ADS-19-3064A	\$ 3,789.00	\$ 44,413.00
Southern Maine Area Agency on Aging Scarborough, ME	10A 20190204*2233	ADS-19-2065A	\$ 6,049.00	\$ 70,920.00
	Totals:	5	\$ 22,170.00	\$ 259,878.00