

**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/Rental Subsidies/Chet Barnes & Sara Wade	
Department Contract Administrator or Grant Coordinator:		Lora Blackwell & Nancy Tan	
(If applicable) Department Reference #:		MH2-20-515B	
Amount: (Contract/Amendment/Grant)	Current: \$ 51,490.80	Advantage CT / RQS #:	CT 10A 20190429000000003187
	Amend: \$ 50,000.20		
	Revised: \$ 101,491.00		
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	7/1/19	Effective Date:
	Previous End Date:	6/30/21	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Community Housing of Maine	
Brief Description of Goods/Services/Grant:		Rental Subsidies	

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.

This program provides Rental Subsidies 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.

The purpose of this amendment is to increase fund due utilization needed.

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

DHHS, Office of Behavioral Health Services has determined that this provider is willing and qualified to provide this service. This 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.

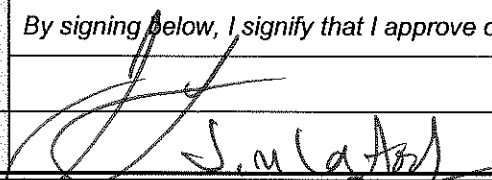
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

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

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

The department does not intend to RFP these services.

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:	12-19-20

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Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> <i>Kathy Paquette</i> <small>41C2BA36FAF44CD...</small>	
	Printed Name: Kathy Paquette	Date: 6/10/2020