

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/ SAMHS/ Cameron Bailey/ Danielle Dill	
Department Contract Administrator or Grant Coordinator:		Nancy Tan/Lisa Munster	
(If applicable) Department Reference #:		MH2-20-710	
Amount: (Contract/Amendment/Grant)	\$ 300,000	Advantage CT / RQS #:	CT 10A 20170407000000002912
CONTRACT	Proposed Start Date:	4/1/2020	Proposed End Date: 6/30/2020
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:		Kennebec Behavioral Health 67 Eustis Parkway Waterville, ME 04901	
Brief Description of Goods/Services/Grant:		Medication Management Services	

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		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:

State of Maine Procurement Justification Form

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

SAMHS is responsible for services to persons with serious and persistent mental health disorders. These individuals in most instances require medication prescribed by a competent licensed practitioner to alleviate a number of symptoms.

Paragraph 103 of the Bates Consent Decree states that the Department "shall fund, develop, recruit and support an array of treatment services" The Decree also states that "the services shall include but not limited to psychopharmacological therapy".

According to the Court Master's findings of October 29, 2008, "Pursuant to paragraph 295 of the Settlement Agreement, I recommend that the Department reinstate service eligibility in accordance with their plan of October 13, 2006 and resume state funding, seeking any necessary appropriations to provide mental health services included in the State's Medicaid Plan (i.e. community integration, ACT, daily living support, skills development, outpatient services, medication management and residential treatment) for all persons who are clinically eligible, even though they may be financially ineligible for MaineCare.

SAMHS is responsible under the decree to provide this service to non-MaineCare individuals.

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

DHHS, Office of Substance Abuse and Mental Health Services has determined that these providers are willing and qualified. These providers are qualified to provide this service because they are licensed by DLRS to provide this service, employs qualified licensed practitioners and is a provider of this service under MaineCare.



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

Rate are standardized and consistent with the MaineCare rate.

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

The Department does not intend to RFP this willing & qualified service.

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>		
	<small>DocuSigned by:</small> 		
Printed Name:	36738ED17E0C4B2 Jim Lopatosky	Date:	5/19/2020
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> 		
	<small>41C2BA36FAF44CD...</small>		
Printed Name:	Kathy Paquette	Date:	6/16/2020

DHHS Division of Contract Management - Contract Review Form

Contract Number	MH2-20-710			Responsible Office	OSAMHS
Vendor	KENNEBEC BEHAVIORAL HEALTH			Priority	Normal Rules
Service Group	Medication Management - MHS			Template	N
Start Date	4/1/2020	End Date	6/30/2020	Current End Date	6/30/2020

MH2-20-710	\$300,000.00	Months	3	Monthly Amount	\$100,000.00
Total	\$300,000.00	Months	3	Monthly Amount	\$100,000.00

Payment Method	DCM - Monthly	Category	FFS
Procurement Method	Willing & Qualified		
At Risk Reason			
Amendment Reason			

Contract/Amendment SFY and Fund Totals

			QTR1	QTR2	QTR3	QTR4
2020	010	Z20401	\$0.00	\$0.00	\$0.00	\$300,000.00

Total Contract SFY and Fund Totals

			Grant Budget Period Start	Grant Budget Period End	Total Amount
2020	010	Z20401			\$300,000.00

Renewal History

Contract	Start Date	Months	Total	010	013/015	014/024
MH2-18-710	7/1/2017	24	\$2,121,197.50	\$2,074,608.48	\$46,589.02	\$0.00

Review Information

Contract Administrator	Lisa Munster	SPOC	Lisa Munster
Contract Manager	Nancy Tan	PFO	Therese Plummer
Program Administrator	Cameron Bailey	Program Manager	Danielle Dill

Legal Review:

Legal Review Type	Contact	Approved	Status	Comments
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Comments

Created On	Note Text
4/23/2020	

4/14/2020 Sending back with revised Rider B, F-1(V3), Rider A (only change is in reporting table[appendix B]} and new appendix A(PMR).

4/14/2020 4/14/20 after discussion with Cameron, kicking this back for him to upload revised Riders B & F

4/13/2020

4/7/2020 Re-submitting to DCM with a revised Rider B and F-1.

3/26/2020 Back to program to revise rider A as original, not amendment. Also need rate table for F-1 ProForma

10/1/2019 MH2-18-710E will extend the agreement through 3/30/19, this agreement will have a new start date of 4/1/20. Dates will be removed

6/27/2019 Current Agreement, MH2-18-710, to be extended through 9/30/2019 changing start date of MH2-20-710 to 10/1/2019