

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:		Office of the Attorney General	
Department Contract Administrator or Grant Coordinator:		Mark Toulouse/Lindsey Chasteen	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$33,910.00	Advantage CT / RQS #:	CT 26A 20160708*85
CONTRACT	Proposed Start Date:	Proposed End Date:	
AMENDMENT	Original Start Date:	Effective Date:	
	Previous End Date:	New End Date:	09/30/2021
GRANT	Project Start Date:	Grant Start Date:	
	Project End Date:	Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Janice M. Choate 258 Choate Road Windsor, Maine 04363	
Brief Description of Goods/Services/Grant:		After Hours Telephone Answering and Coverage Services	

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

<input checked="" type="checkbox"/>	A. Competitive Process		G. Grant
<input type="checkbox"/>	B. Amendment		H. State Statute/Agency Directed
<input type="checkbox"/>	C. Single Source/Unique Vendor		I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents		J. Willing and Qualified
<input type="checkbox"/>	E. Emergency		K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project		L. Other Authorization

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

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

**State of Maine
Procurement Justification Form**

PART III: SUPPLEMENTAL INFORMATION

The Office of Chief Medical Examiner (OCME)'s mission requires that the office be available at all times. This contract is for after-hours phone answering and coverage services. The office is a relatively small division (12 full-time people) administratively in the Department of the Attorney General and has a varied and complex mission concerned with investigating many aspects of death and dying. All violent, criminal, suspicious, and deaths of apparent undetermined causes or manners fall under the jurisdiction of the OCME. Other types of deaths, such as infants or people in custody, or any deaths whose causes represent a potential risk to the public at large, are also investigated by the OCME. When the OCME accepts jurisdiction of a death, it is the OCME that requests or performs all the investigations and procedures necessary to determine the cause and manner of death. The personnel covering telephones after hours work as an extension of the state OCME staff. Personnel process the details surrounding the deaths of individuals by collecting histories, discussing case determinations with on-call Investigators, scheduling field Medical Examiners, and requesting medical records and hospital admission samples, often under less-than-ideal circumstances. All employees of the OCME must be able to function under conditions that are often psychologically extreme. The post-mortem states of the bodies may often be offensive to one's physical or emotional senses.

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

The Office of Chief Medical Examiner ("Department") is seeking proposals to provide Telephone Answering Coverage under a new multi-year contract. Janice M. Choate was awarded the current contract under the previous RFP process.

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

The RFP process will determine best rates for the services required.

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

This RFP will result in a five (5)-year contract. At the end of that period, another Request for Proposals (RFP) will be executed for future services.

PART IV: APPROVALS

**Signature of requesting
Department's Commissioner
(or designee):**

By signing below, I signify that I approve of this procurement request.

Mark J. Toulouse

**State of Maine
Procurement Justification Form**

Printed Name:	Mark A. Toulouse	Date:	06/21/2021
Signature of DAFS Procurement Official:	DocuSigned by: <i>Sue H. Garcia</i>		
Printed Name:	E5DB92AC0E8D490: Sue H. Garcia	Date:	6/21/2021