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.

		PAI	₹T I: 0	VERVIEW								
Department	Office	/Division/Program:	DHHS/Office of MaineCare Services									
Department (And Delivers	ict Administrator or Grant Coordinator:	Shawn Belanger									
(If applicable) I	Depart	tment Reference #:	Multiple, See Attached									
Am (Contract/Amendment/C	ount: irant)	\$79,484,341.00		Advantage	Attached							
CONTRACT	Pr	oposed Start Date:		7/1/2021	Proposed	End Date:	6/30/2022					
AMENDMENT	AMENDMENT Original Start Date: Previous End Date:					ctive Date: End Date:						
GRANT		Project Start Date: Project End Date:			Start Date: End Date:							
Vendor/Provider/G	antee	Name, City, State:	Multiple, See Attached									
Brief Description	ods/Services/Grant:	Non-Emergency Transportation										

	PART II: JUSTIFICATION FOR VENDOR SELECTION								
Mark	k 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							
Х	C. Single Source/Unique Vendor	Federal Agency Directed							
	D. Proprietary/Copyright/Patents	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:

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

This contract provides for Non-Emergency Medical Transportation (NET) services to be delivered to Medicaid recipients by the Broker, to recipients who live in the designated service area. This is a Maine Medicaid ("MaineCare") service provided pursuant to a 1915(b) waiver approved by the Center for Medicare and Medicaid Services (CMS) and in accordance with the MaineCare Benefits Manual, Section 113 (Non-Emergency Medical Transportation services).

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PART III: SUPPLEMENTAL INFORMATION

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The current NET brokers were awarded through an RFP process. The Department is currently conducting a comprehensive evaluation of each of the transportation programs administered within the Department, and we will use the results to inform future NET procurements. This extension provides time for the Department to complete the RFP process.

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

Rates paid to the transportation brokers are established by an independent actuary (Deloitte) per CMS requirements.

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

It is anticipated that a new RFP will be issued in SFY2022 with an award in place for new contracts to start 7/1/2022.

	PART IV: APPROVALS	S
Signature of requesting Department's Commissioner (or designee):	By signing below, I signify that I app	prove of this procurement request.
Printed Name:	1 X m ans	Date: 4 Jun 7
Signature of DAFS Procurement Official:	Jaime Schorr	
Printed Name:	Jathie ⁷⁷ 5tehtitr	Date: 6/24/2021

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Agreement Number	CT Number	Vendor Name	Agreement Amount				
OMS-22-2001	CT 10A 20210528*3480	ModivCare, formerly LogistiCare	\$	4,490,881.00			
OMS-22-2002	CT 10A 20210528*3481	ModivCare, formerly LogistiCare	\$	6,272,120.00			
OMS-22-2003	CT 10A 20210528*3482	Penquis CAP Inc	\$	12,622,486.00			
OMS-22-2004	CT 10A 20210528*3483	Penquis CAP Inc	\$	12,422,935.00			
OMS-22-2005	CT 10A 20210528*3484	Waldo Community Action Partner	\$	10,449,702.00			
OMS-22-2006	CT 10A 20210528*3485	ModivCare, formerly LogistiCare	\$	9,031,298.00			
OMS-22-2007	CT 10A 20210528*3486	ModivCare, formerly LogistiCare	\$	12,925,216.00			
OMS-22-2008	CT 10A 20210528*3487	ModivCare, formerly LogistiCare	\$	11,269,703.00			

