



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

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 intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		Corrections		
Department Contract Administrator or Grant Coordinator:		Conner McFarland		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 900,000	Advantage CT / RQS #:	03A 20220714*0145
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	1/1/2017	Effective Date:	7/1/2023
	Previous End Date:	6/30/2023	New End Date:	6/30/2024
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		GTL DBA ViaPath Technologies Falls Church, VA		
Brief Description of Goods/Services/Grant:		Resident Phone and Communications Platform/Services		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

PART III: SUPPLEMENTAL INFORMATION

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

The Provider has installed and is responsible for the operation of a debit-only resident phone system and a remote video visitation system for statewide MDOC facilities. In a previous amendment, the Provider has also made available a tablet program to aid in resident education, reentry preparation, messaging and other services as deemed appropriate by the Department. The system includes all equipment, hardware, software, system engineering, material maintenance, labor, training and all things necessary to provide, install, implement, interface, and maintain the aforementioned communication system/platform.

A contract amendment is needed at this juncture to extend Provider services for an additional twelve (12) months for the following reason:

The resident phone system is intricately linked to the Department's offender manager system (known as CORIS) and the Department currently has an RFP underway to procure a new offender management system. Once a contract is in place for the new OMS, the Department will have a clearer picture of the integration requirements of the new phone system. It is impossible to provide a detailed scope of work until the new OMS has been secured.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

As noted above, this amendment is needed to extend services to this Provider for an additional twelve (12) months. The Provider was originally awarded a contract under RFP 201511215 which initially expired on 6/30/2022. Prior to this amendment request, an additional twelve months were added in anticipation of GTL/ViaPath (and other ITS Providers) being awarded contracts under the NASPO RFP. There was a delay in pursuing this but we will likely explore joining the NASPO contract with the incumbent provider next year.

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

We have been and remain under contract with said Provider since January 2017. Rate limits are imposed by the FCC and are periodically negotiated between MDOC and Provider which the Department considers to be fair and reasonable.

Additionally, there is no cost to the Department or state for the provision of these services. Said services are paid for by Inmate Trust Funds and thus contract funds remain unencumbered for this service.

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

Once the Department has procured a new OMS system/provider, the Department will be better able to craft the requirement specifications needed for service. Additionally, we anticipate joining the NASPO contract with the incumbent provider next year.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

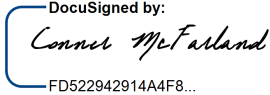
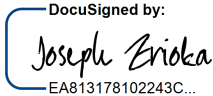
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 <small>DocuSigned by: Conner McFarland FD522942914A4F8...</small>		
Typed Name:	Conner McFarland, Manager of Correctional Operations	Date:	6/5/2023
Signature of DAFS Procurement Official:	 <small>DocuSigned by: Joseph Zrioka EA813178102243C...</small>		
Typed Name:	Joseph Zrioka, Director IT Procurement	Date:	6/5/2023