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

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over $10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW					
Department Office/Division/Program:	DHHS / OBH / Chrissy Young				
Department Contract Administrator or Grant Coordinator:	Jennifer Levesque / Stephanie Wood				
(If applicable) Department Reference #:	Multiple, see attached list				
Agency Department Code:	10A	Advantage CT / RQS #:	20260602SFSPARENTING		
Amount: (Contract/Amendment/Grant)	$837,688.00				
CONTRACT	Proposed/Original Start Date:	**8/1/2026**	Proposed/Most Recent End Date:	**7/31/2028**	
AMENDMENT	New Effective Date:		New End Date (if Applicable):		
GRANT	Project Start Date:		Grant Start Date:		
	Project End Date:		Grant End Date:		
Vendor/Provider/Grantee Name, City, State:	Multiple, see attached list				
Brief Description of Goods/Services/Grant:	Court Ordered Parental Assessments				

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for 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	☒	J. Willing and Qualified
☐	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	L. Other Authorization

Please respond to ALL of the questions in the following sections.

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 State Forensic Service is authorized by statute to conduct court ordered evaluations. The legislature approved funds for assessments of parenting capacity in child maltreatment cases to be moved to the oversight of State Forensic Service. These evaluations must be conducted by licensed psychologists and/or psychiatrists. The State Forensic Service is responsible for ensuring that examiners conducting such evaluations are qualified to do so.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

The State Forensic Service determined that these Contractors who are willing and qualified to conduct forensic mental health evaluations have a doctoral degree (typically Ph.D. or Psy.D), followed by years of specialty training and experience in forensic mental health assessment. These providers possess these qualifications and expertise in conducting forensic evaluations pertaining to parenting capacity.

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

Costs are based on a rate that is far below the established market rates for forensic mental health experts. Forensic psychologists in Maine currently charge a minimum of $250 per hour. Many have no interest contracting with the State because of the lower rate.

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

The Department does not intend to competitively procure this service because any willing and qualified provider that is approved by the State Forensic Service and accepted as experts by the courts can provide these services.

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

Does this request utilize ARPA/MJRP funds?

☐ Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

☐ Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.

☒ No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

☒ The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS			
Governor/Department Commissioner or Designee			
1. The signature below indicates approval of this procurement request.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Jim Copeland	Date:	22-Jun-26
2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	Signed by: Michelle Knox 066BBD96EE5347F...		
Typed Name:	Michelle Knox	Date:	6/30/2026

DHHS Office: OBH

Service: SFS Parenting Assessment SFY27

Vendor Name	Agreement Number	CT 10A	Start Date	End Date	Projected Spend
William M Barter	SFS-27-404	2026060900000SFS27404	8/1/2026	7/31/2028	$108,000.00
Taylor York	SFS-27-406	2026060900000SFS27406	8/1/2026	7/31/2028	$108,000.00
Danielle Rynczak	SFS-27-407	2026060900000SFS27407	8/1/2026	7/31/2028	$108,000.00
North Forensic & Psychological Services	SFS-27-408	2026060900000SFS27408	8/1/2026	7/31/2028	$108,000.00
Total Items	5			**Totals**	$432,000.00