

State of Maine Procurement Justification Form

PART I: OVERVIEW

Department Office/Division/Program:		DHHS – Dorothea Dix Psychiatric Center Carol W. Cody	
Department Contract Administrator or Grant Coordinator:		Shawn Belanger Matt Galletta	
(If applicable) Department Reference #:		DRPC-17-176B	
Amount: (Contract/Amendment/Grant)	Original: \$719,400.00 Amend: \$50,088.00 Revised: \$769,488.00	Advantage CT / RQS #:	BPO 14C 20160927*0420
CONTRACT	Proposed Start Date:	Proposed End Date:	
AMENDMENT	Original Start Date:	Effective Date:	05/01/2020
	Previous End Date:	New End Date:	06/30/2022
GRANT	Project Start Date:	Grant Start Date:	
	Project End Date:	Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		CareFusion Solutions LLC San Diego, CA	
Brief Description of Goods/Services/Grant:		Medication Dispensing Equipment for the New Unit	

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
X	C. Single Source/Unique Vendor		I. 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:

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

The service is for Automatic Drug Dispensing units (ADU) for the Department's Riverview and Dorothea Dix Psychiatric Centers. These units are critical pieces of equipment used for medication management in the facilities. This equipment is integrated with the legacy Pharmacy information system and has been reliably providing a critical service that helps with medication administration and patient safety. This amendment extends the contract with the Provider while adding another Pyxis unit for the new psychiatric unit at the Department's Dorothea Dix Psychiatric Center.

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

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PART III: SUPPLEMENTAL INFORMATION

The equipment and architecture currently in place are unique to the Provider and can only be supported by them. The interfaces between the ADU and the pharmacy application were complex to establish and are stable, ensuring that communications flow constantly between the pharmacy system and the dispensing units. Disruption to these interfaces will affect the ability of unit staff to administer medications to patients.

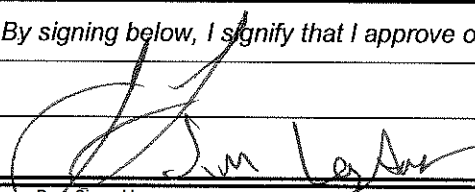
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The cost of the new system was negotiated between the Provider and the State's Office of Information Technology and is in line with the cost of the other units currently at the Department's Dorothea Dix Psychiatric Center.

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

The Department is considering putting this service out to RFP for the contract cycle that begins 7/1/2022.

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>		
Printed Name:		Date:	<i>3-20-20</i>
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> <i>Justin Franzose</i>		
Printed Name:	<small>AEED9C7B3A8044E...</small> Justin Franzose	Date:	7/1/2020