



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:		DHHS/MECDCP		
Department Contract Administrator or Grant Coordinator:		Chris Moiles/ Stacy Martin		
(If applicable) Department Reference #:		CD0-23-5212		
Amount: (Contract/Amendment/Grant)		\$ 14,100,000.00	Advantage CT / RQS #:	Multiple
CONTRACT	Proposed Start Date:	4/1/2023	Proposed End Date:	3/31/2024
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Multiple – see attached		
Brief Description of Goods/Services/Grant:		Purchasing of Vaccines to comply with distributing vaccines to Provider offices to administer vaccines to all children in the State of Maine with no out of pocket costs to parent or guardian.		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input type="checkbox"/>	C. Single Source/Unique Vendor	<input checked="" 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

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.

This fulfills the obligation as outlined in Public Law 595 to purchase and distribute vaccines to provider offices enrolled in the Maine Immunization Program to administer vaccines to all children in the State of Maine with no out-of-pocket cost to the parent or guardian. The purchase of this vaccine with the collected assessment funds from the health insurance organizations completed the intent to have Maine be a Universal Distribution State.

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

The Program has concluded that no other contract or purchasing mechanism is more cost-efficient than purchasing through the Federal CDC Vaccine contracts. Contract prices are those for the Federal CDC vaccine contracts that are established for the purchase of vaccines by immunization programs that receive Federal CDC immunization grants funds (i.e., State health departments, certain large city immunization projects, and certain current and former U.S. territories)

Language supporting the Maine Immunization Program to purchase off the Federal Contract: "The CDC Vaccine Price Lists posted on this website provide current vaccine contract prices and list the private sector vaccine prices for general information. Contract prices are those for CDC vaccine contracts that are established for the purchase of vaccines by immunization programs that receive CDC immunization grant funds (i.e., State health departments, certain large city immunization projects, and certain current and former U.S. territories). Private providers and private citizens cannot directly purchase vaccines through CDC contracts. Private sector prices are those reported by vaccine manufacturers annually to CDC. All questions regarding the private sector prices should be directed to the manufacturers." <http://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html>

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

Maine Public Law 595 Universal Childhood Immunization Program, 22M.R.S.A § 1066 (section 3 E 1) reference "Vaccines recommended by the advisory committee that are available under contract with the United States Department of Health and Human Services, Centers for Disease Control and Prevention."

The Federal CDC has negotiated the vaccine cost on behalf of the Immunization Programs across the nation. Being a State-run immunization program, this allows the Maine Immunization Program to purchase vaccines off this contract. Purchasing vaccines on the Federal Contract saves an average of 68% over purchasing the vaccine privately.

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

Future opportunities for competition would be negotiated at the Federal level. These negotiations are completed annually for effective start date each April 1st.

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

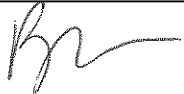
Does this request utilize ARPA/MJRP funds?

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):			
Typed Name:	Brian Moran	Date:	5/28/23
Signature of DAFS Procurement Official:	DocuSigned by: David Morris		
Typed Name:	David Morris	Date:	7/12/2023

The following list identifies all providers/vendors associated with this State of Maine Waiver of Competitive Bidding Request Form along with their specific contract information.

**DHHS Office:** Maine CDC/Maine Immunization Program  
**Service:** Purchase of vaccinations  
**Start Date:** 1-Apr-2023

Vendor/Provider Name, City & State	Contract (CT)Number	DHHS Agreement #	Amendment Amount (if applicable)	Total Contract Amount
GlaxoSmithKline	75D30123D16110	N/A		\$2,115,000.00
Merck	75D30123D16108	N/A		\$5,922,000.00
Pfizer	75D30123D16109	N/A		\$3,807,000.00
Sanofi	75D30123D16111	N/A		\$2,256,000.00
	Totals:		4	\$14,100,000.00