

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.

PART I: OVERVIEW			
Department Office/Division/Program:	DHHS/ MECDC / IDS/ Lauren Gauthier		
Department Contract Administrator or Grant Coordinator:	Lora Blackwell / Chris Moiles		
(If applicable) Department Reference #:	CDM-18-5152D		
Amount: (Contract/Amendment/Grant)	\$449,927.00	Advantage CT / RQS #:	CT 10A 20171121000000001771
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	1/1/2018	Effective Date:
	Previous End Date:	6/30/2020	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	Family Planning Association of Maine P.O. Box 587 Augusta, ME 04332-0587		
Brief Description of Goods/Services/Grant:	HIV, STD, and Hepatitis Testing Service, Outreach and Disease Intervention Services. RFP # 201405753 6-month extension		

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
X	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.

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PART III: SUPPLEMENTAL INFORMATION

U.S. CDC program has made some changes in services they will be supporting over the next five years. In order for the Department to comply with these changes, the Department will do the appropriate program planning to ensure that the proper infrastructure is created to support the services that will be put out for bid through RFP. The purpose of this Amendment is to allow for time to work with U.S. CDC to align those services with the Department's epidemiological needs.

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

These services were RFPed through RFP#: 201405753. The awarded providers have the expertise to continue these services until the next RFP and resulting 1/1/2021 contracts. This extension efficiently allows the next RFP to reflect changes in federal requirements. Federal changes in program requirements required more time to work with Federal CDC to align those services with the Department's epidemiological needs.

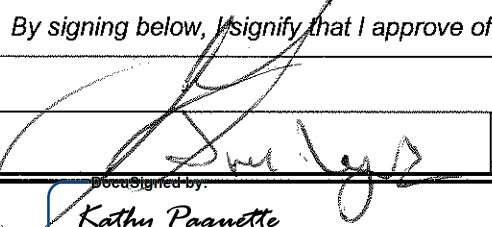
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Costs are continued as this was originally RFP'd and set by the DHHS Commissioner.

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

An RFP for these services will be completed for new contracts to start 1/1/21.

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:	29 July 20
Signature of DAFS Procurement Official:	<i>41C2BA36FAF44CD... Kathy Paquette</i>		
Printed Name:	Kathy Paquette	Date:	8/18/2020