



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
Table with 4 columns: Department Office/Division/Program, Department Contract Administrator or Grant Coordinator, (If applicable) Department Reference #, and Amount/Original/Amend A/Revised Total/Advantage CT / RQS #/CT 10A/20230830000000000567. Includes rows for CONTRACT, AMENDMENT, GRANT, Vendor/Provider/Grantee Name, and Brief Description of Goods/Services/Grant.

PART II: JUSTIFICATION FOR VENDOR SELECTION
Check the box below for the justification(s) that applies to this request. (Check all that apply.)
Table with 4 columns: A. Competitive Process, B. Amendment, C. Single Source/Unique Vendor, D. Proprietary/Copyright/Patents, E. Emergency, F. University Cooperative Project, G. Grant, H. State Statute/Agency Directed, I. Federal Agency Directed, J. Willing and Qualified, K. Client Choice, 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.

AMEND A: One-time increase in funds to allow for additional trainings and education.

The purpose of this Agreement is to provide assistance and promote educational uptake of the ODMAP tool by police and first responders in Maine Communities. This protocol will help systematize and automate a cascade of communication activities and resource mobilization to reach elected officials and other public officials law enforcement officers, EMS providers, community members, health care providers, harm reduction partners, and others when an overdose spike occurs.

The primary focus of the Provider will be to provide Technical Assistance for the Law Enforcement Co-Responder providers. Assisting the agencies with training clinical staff on how to provide OUD/SUD overdose response, assessment, behavioral health crisis de-escalation, referral to community treatment modules, system navigation, short-term counseling interventions and aid in completion of the State's Medicaid program application for uninsured population. Co-Responder staff will also be trained by the Provider on how to further promote the ODMAP within law enforcement agencies across the state.

These services and activities are integral in addressing the opioid epidemic in Maine.

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

This service was previously provided by Qualidigm dba Connecticut Peer Organization. Qualidigm was recently dissolved and Maine Medical Association hired the project team from Qualidigm, who had unique knowledge of the ODMAP system. This service/project is essential to assisting law enforcement and the community in fighting the opioid epidemic.

The Provider has experience in providing a broad range of technical assistance to the medical community.

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

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The Provider has experience in providing a broad range of technical assistance to the medical community.

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

The Department does not plan to competitively procure 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) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

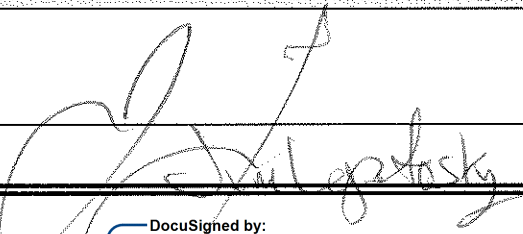

**PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE**

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 signatory understands and acknowledges Maine’s Conflict of Interest statutes.

**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	David Gosselin	Date:	5 Aug 24
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	9/16/2024