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 $5,000 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 Riverview Psychiatric Center			
Department Contract Administrator or Grant Coordinator:	Shawn Belanger / Nicole Mitchell			
(If applicable) Department Reference #:	RPC-25-002A			
Amount: (Contract/Amendment/Grant)	Original:$1,424,160.00 Amend: $254,243.80 Revised:$1,678,403.80	Advantage CT / RQS #:	CT 10A 20240503000000003110	
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	**7/1/2024**	Effective Date:	
	Previous End Date:		New End Date:	N/A
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:	Correct Care of South Carolina Columbia, SC			
Brief Description of Goods/Services/Grant:	Transportation, room and board, and necessary physical and mental health treatment for court ordered out-of-state placements.			

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. University 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 Department has a need to relocate six (6) patients from Riverview Psychiatric Center (RPC) to another location. RPC does not currently have the resources available to provide the level of medical, psychiatric and other specialized care required by these patients and assure that the services required for other patients housed within the institution are not compromised. Maintaining these patients at RPC may precipitate the loss of the facility's Joint Commission accreditation and the State's Specialty Hospital License to RPC as a hospital. A previous determination from CMS has indicated that the additional security and behavioral controls needed for these patients would diminish the acceptable standards of care in a psychiatric hospital. Superior Court Judge Murphy has ordered that the DHHS Commissioner, through RPC, identify and locate these patients to an appropriate safe setting for the specialized treatment needed by these patients.

Amendment A is adding funds to cover the remaining term for the FY25 contract.

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

This is a continuation of the current contractual agreement with the Provider. The original agreement was approved due to the urgency of the situation. The Department has been satisfied with the services provided by the Provider and wish to continue the current agreement. To ensure continuity of care for the patients currently residing at the Provider's facility, it is vital that this agreement continue.

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

This facility's per diem rates are fair and reasonable. These patients are under Department custody and require specialized psychiatric and medical services. Due to the unique combination of these patients' needs, it is extremely difficult to locate suitable arrangements for these patients.

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

The Department does not intend to RFP this service.

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):	Joanne Garza		
Typed Name:	Joanne GARZA	Date:	7/23/25
Signature of DAFS Procurement Official:	DocuSigned by: Kathy Paquette 41C2BA36FAF44CD...		
Typed Name:	Kathy Paquette	Date:	9/2/2025