

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: | | Division of Vocational Rehabilitation | | |
| Department Contract Administrator or Grant Coordinator: | | Eric Dibner 623-7950 592-2087 | | |
| (If applicable) Department Reference #: | | | | |
| Amount: (Contract/Amendment/Grant) | \$ 400,222.85 | Advantage CT / RQS #: | 20210927*0804 | |
| CONTRACT | Proposed Start Date: | October 1, 2021 | Proposed End Date: | September 30, 2022 |
| 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: | | Alpha One South Portland, ME 04106 | | |
| Brief Description of Goods/Services/Grant: | | Independent Living Services (ILS) for persons with disabilities | | |

| 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. |

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PART III: SUPPLEMENTAL INFORMATION

This contract provides a program of Independent Living Services (ILS). Operation of this program helps ensure that individuals with severe disabilities can live safely in their homes and participate in community activities. The program is "funding of last resort" and provides equipment and home modifications for which individuals have no other resources. Without a State ILS Program, potential recipients of the services would be unable to accomplish their independent living goals, which would result in irreparable economic and human loss to the State.

Under subpart B of Title VII of the federal Rehabilitation Act, as amended, the State receives funds for the purpose of providing Independent Living Services. The Act requires that the State approve a State Plan for Independent Living (SPIL), which Maine has done, describing how the funds will be distributed. The SPIL, in establishing how the Title VII-B funds shall be used, specifies that the funds will go to the independent living center, Alpha One, to support services to consumers.

Maine statute (Title 26, Chapter 19, Subchapter 2, Article 3) authorizes such services.

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

The vendor is a Center for Independent Living, as defined in the Rehabilitation Act. Qualified centers are listed at <http://www.ilru.org/html/publications/directory/>. There is only one independent living center in Maine, Alpha One, which provides services statewide from offices in Bangor and South Portland and with staff in Presque Isle.

Independent living centers are consumer-directed non-profit organizations, with directors and personnel who deliver services often being individuals who have disabilities or direct personal experience with disability issues. Other than Alpha One, no other independent living center is available to provide these services in Maine. The prescribed standards for establishing and operating an independent living center are in Section 725 of the Rehabilitation Act.

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

The State established the costs for delivering IL services with Alpha One several years ago, and they have not changed. The costs of the professional services by Alpha One's Independent Living Specialists are consistent with service fees for similar organizations. The consumers, the end-recipients of IL funding for home improvements, are given training by Alpha One on finding appropriate providers/installers at the most reasonable costs and, where applicable, leveraging funding from other programs. Alpha One is providing services to all areas of the state.

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

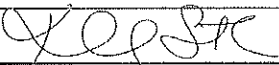

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PART III: SUPPLEMENTAL INFORMATION

In 2002, the Division advertised and solicited letters of intent for proposals for ILS, and Alpha One was the only respondent. In 2006, the Division again advertised and solicited letters of intent and several organizations responded, so the Division promulgated an RFP; five organizations requested a copy of the RFP, but none submitted proposals except Alpha One.

While development of additional IL centers in Maine might foster a more competitive IL network, the Statewide Independent Living Council, in the State Plan for Independent Living, does not envision such development as a viable option. The Title VII allocation to Maine is inadequate to support additional centers.

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: | Kimberly A Smith, Deputy Commissioner of Labor | Date: | 9/30/2021 |
| Signature of DAFS Procurement Official: |  | | |
| Printed Name: | Kathy Paquette | Date: | 10/4/2021 |