



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:		Department of Administrative and Financial Services/Division of Procurement Services	
Department Contract Administrator or Grant Coordinator:		Justin Franzose	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 0.00	Advantage CT / RQS #:	MA 18P 2012140000000000058
CONTRACT	Proposed Start Date:	Proposed End Date:	
AMENDMENT	Original Start Date:	Effective Date:	12/14/2020 9/29/2022
	Previous End Date:	New End Date:	8/31/2022 8/31/2023
GRANT	Project Start Date:	Grant Start Date:	
	Project End Date:	Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		QIAGEN, LLC 19300 Germantown Rd Germantown, MD 20874	
Brief Description of Goods/Services/Grant:		Supplies and Reagents	

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 checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input checked="" 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.

The purpose of this request is to extend the existing master agreement with Qiagen by one year until 8/31/2023. This agreement is necessary for multiple state agencies to procure supplies and reagents from Qiagen at agreed upon unit prices. Not having this agreement, state agencies must order these supplies on the open market at higher than normal prices. Department of Health and Human Services (DHHS) and Department of Public Safety are examples of the agencies that would be negatively impacted by price increases and potential stockouts from not having this agreement to order supplies.

A stockout of these supplies could cause a work stoppage and considerable burden for DHHS or Department of Public Safety, thus making this an emergency request.

To further illustrate the emergency nature of this request, the Maine Health and Environmental Testing Laboratory (HETL) orders these commodities to support testing human specimens for a variety of infectious diseases, including multi-drug resistant TB, novel influenza, and Zika virus. The instruments supplied by Qiagen require these particular reagents and consumables to function properly.

Additionally, for Department of Public Safety, the QIAGEN QIAamp DNA Micro Kits are used to extract DNA from all manners of biological samples, both for casework and convicted felons. These kits are just as sensitive as previous manual Phenol-Chloroform extraction protocols used but produce a much smaller quantity of chemical hazardous waste, is a much quicker procedure allowing more cases to be done in the same amount of time, and does not cost any more per sample than the phenol reagents. Currently, Department of Public Safety's inventory has nearly depleted, in which case there would be a work stoppage and increase in backlog.

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

QIAGEN is the manufacturer of these extraction items. To our knowledge, no other vendor is able to supply these commodities. Since at least December 2020, Qiagen has been the main supplier of these commodities through this specific State of Maine master agreement.

While there are similar kits available to extract DNA, the QIAGEN QIAamp DNA Micro Kit is the specific kit Department of Public Safety validated over time in its laboratory, therefore they can only use these in their forensic DNA casework per QAS standards/protocols essential to their lab accreditation. In order to switch to a different kit from a different vendor, those kits would have to undergo a lengthy and costly validation first. Department of Public Safety's inventory has nearly depleted, in which case there would be a work stoppage and increase in backlog.

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

The master agreement prices are lower than what state agencies would pay by ordering these commodities on the open market. By not having this agreement, state agencies must order these supplies on the open market and will incur higher costs.

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

Our future competitive procurement processes will be a notice of intent to award. If we determine there are multiple suppliers of these commodities, we may also conduct a request for quote. Currently, Qiagen is the only known supplier of these commodities.

From the perspective of Department of Public Safety, there no other vendors able to provide the same forensic product without this lab undergoing lengthy validation processes. To change to another vendor would require the lab to adapt to new processes and procedures that would add to the current backlog of forensic science testing in the lab and be in contravention with their federal grant mandates.

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 VI

PART V: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
	<i>David Morris</i>		
	<small>2A644AE5681E482</small>		
Printed Name:	David Morris	Date:	9/30/2022
	<small>DocuSigned by:</small>		
Signature of DAFS Procurement Official:	<i>Michelle Fournier</i>		
	<small>066BBD06EE5347E...</small>		
Printed Name:	Michelle Fournier	Date:	10/3/2022