



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:		DHHS/OBH Michael Freysinger Theresa Witham		
Department Contract Administrator or Grant Coordinator:		Matt Galletta/Jennifer Levesque		
(If applicable) Department Reference #:		OSA-24-600		
Amount: (Contract/Amendment/Grant)		\$600,000.00	Advantage CT / RQS #:	CT 10A 20230801000000000230
CONTRACT	Proposed Start Date:	7/1/2023	Proposed End Date:	6/30/2025
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:		PineTree Institute Eliot Maine 03903 VC0000244548		
Brief Description of Goods/Services/Grant:		Recovery Friendly Workplace (RFW)		

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 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 Agreement is to pilot Recovery Friendly Workplace (RFW) programming.

The Provider shall encourage healthy and safe environments where Employers, employees, and communities can collaborate to create positive change and eliminate barriers to employment for those individuals impacted by addiction. RFW shall ensure all Employers have access to training, technical assistance, and Recovery Support resources necessary to support individuals with an SUD who are in Recovery and are seeking employment or who are currently employed.

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

Competitive procurement process RFP 202303067 yielded no Bidders. However, this Provider did submit a proposal that did not meet the proposal submission deadline. Being the sole entity expressing interest, the Department negotiated service and financial responsibility through the contracting process.

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

Costs were negotiated with the vendor and deemed fair and reasonable upon Department review.

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

This is a pilot project, the Department will consider competitively procuring in the future based on performance and community impact.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

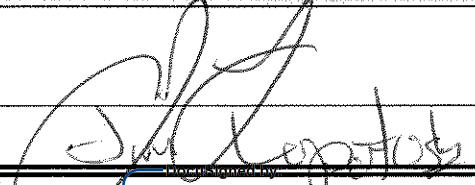
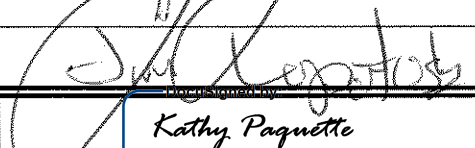
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	David Legault	Date:	5-Sep-23
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	10/25/2023