



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:		Maine Bureau of Veterans' Services	
Department Contract Administrator or Grant Coordinator:		Tracy E. Wheelden, Contract/Grant Manager	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 57,000.00	Advantage CT / RQS #:	CT 15A 20230109*1828
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	1/9/2023	Effective Date:
	Previous End Date:	9/30/2024	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		The Maine Medical Association Manchester, Maine	
Brief Description of Goods/Services/Grant:		Education and Outreach – Veterans' Administration – SSG Parker Gordon Fox Suicide Prevention Grant Program	

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" 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 Maine Medical Association – Center for Quality Improvement (MMA-CQI) will assist the Bureau of Veterans’ Services (BVS) in providing community-based suicide prevention services to our local veteran population and their families by performing outreach activities, educating healthcare practices across the State and assisting in the development of action plans for each practice.

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

MMA-CQI was written into BVS’ program plan for the SSG Parker Gordon Fox Suicide Prevention Grant Program. This vendor works to improve healthcare in Maine by providing support and education to clinicians and non-clinicians via online, on-demand learning modules and webinars. MMA-CQI utilizes the ECHO® (Extension for Community Health Outcomes) Model to connect specialists to primary care teams. Project ECHO has shown improvements in health care for rural and underserved populations across the world. BVS makes continuous efforts to reach out to veterans in the rural communities of Maine, MMA-CQI will support these efforts.

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

The cost supports the salary of five personnel, faculty stipends, travel expenses and any miscellaneous direct costs the MMA-CQI team might accrue. We believe these costs to be fair and reasonable.

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

Putting this contract out to bid, would significantly delay service delivery and would potentially lead to a decrease in funding provided by the Veterans Administration. If the SSG Fox Suicide Prevention Grant is awarded to BVS in future years and should another organization suit the needs of BVS’ grant plan, the Bureau will follow the RFP process.

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.

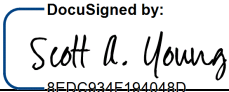

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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:	Scott A. Young Deputy Commissioner	Date:	9/11/2024
Signature of DAFS Procurement Official:			
Typed Name:	Sue H. Garcia	Date:	10/21/2024