



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 Division of Procurement Services intranet site (Forms page) for additional instructions.

| PART I: OVERVIEW | | | | | |
|---|----------------------|---|--------------------------|---------------------------------|--|
| Department Office/Division/Program: | | DHHS/Office of the Health Insurance Marketplace | | | |
| Department Contract Administrator or Grant Coordinator: | | Debbie Weston / Melinda Farrell | | | |
| (If applicable) Department Reference #: | | HIM-25-FCG1 | | | |
| Amount: (Contract/Amendment/Grant) | | \$72,000.00 | Advantage CT / RQS #: | CT-10A- 20241007000HIM25FCG1 | |
| CONTRACT | Proposed Start Date: | 10/28/2024 | 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: | | Faulkner Consulting Group Barrington, RI | | | |
| Brief Description of Goods/Services/Grant: | | Marketplace Consultant | | | |

| 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 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. | <p>Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.</p> <p>The purpose of this Agreement is to procure a Marketplace Consultant. The Consultant will provide specialized expertise to support the Office of the Health Insurance Marketplace (OHIM) that has oversight over CoverME.gov, the State-based Marketplace platform that allows individuals to shop for, and enroll in, health insurance coverage. This involves both technological and business efforts. OHIM has experienced significant staffing changes and growth in the past year, including an entirely new leadership team and operations team members. All team members have less than 2 years of tenure with the office. There are significant technology and operations projects being implemented to comply with federal regulations and improve operational efficiencies and user experience. There are tight deadlines that need to be met in order to implement technology projects on-time, in time for the launch of open enrollment 2025. Moreover, the current staffing model is lean and does not allow for adequate back-up when team members are out. During open enrollment, there are many, regular reporting requirements required by the federal government.</p> |
| 2. | <p>Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.</p> <p>The Marketplace Consultant will provide resources on an as-needed basis with the skill set and experience required. The Department has identified a Provider that is unique and identified as the most qualified and experienced individual for this role. The Consultant has prior experience with OHIM, having served as product manager, acting director and special advisor to the director. Their combination of direct technological and operational experience, and expertise in the business and technological operations of the marketplace platform will allow them to fill a critical need as OHIM continues to evolve beyond start-up mode to a stable, more mature operation with improvements to policy, procedure and compliance. Moreover, the consultant will be able to seamlessly fill gaps in coverage with an anticipated temporary leave of the team member who is the lead point person with the call center vendor and as the chief operating officer continues to develop the operations team as they gain experience with the office.</p> <p>In addition, OHIM is in the process of drafting a policy manual and a set of standard procedures. This individual has been a member of the OHIM team since the marketplace's inception and has significant institutional knowledge. Given the tenure of the team, this individual is uniquely qualified to review, edit and provide feedback on this documentation, which is essential to continuing to establish a solid foundation for the office to grow and mature.</p> |
| 3. | <p>Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.</p> <p>Rates are reasonable compared with other consultants of this nature engaged by the Department.</p> |
| 4. | <p>Describe the plan for future competition for the goods or services.</p> <p>The Department does not intend to RFP this service.</p> |

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.

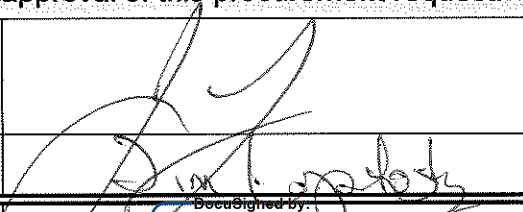
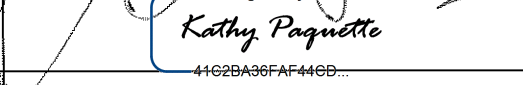
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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): |  | | Date: | 17-Oct-24 |
| Typed Name: | | | Date: | |
| Signature of DAFS Procurement Official: |  <small>41G2BA36FAF446D...</small> | | Date: | 10/24/2024 |
| Typed Name: | Kathy Paquette | Date: | 10/24/2024 | |