

## State of Maine Procurement Justification Form

PART I: OVERVIEW			
Department Office/Division/Program:	Department of Health and Human Services		
Department Contract Administrator or Grant Coordinator:	Nancy Tan Jennifer Levesque		
(If applicable) Department Reference #:	Multiple See Attachment		
Amount: (Contract/Amendment/Grant)	\$42,000	Advantage CT / RQS #:	20210727000000000189
CONTRACT	Proposed Start Date:	5/1/2021	Proposed End Date: 12/31/2021
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:	Maine Muslim Community Center		
Brief Description of Goods/Services/Grant:	COVID-19 Vaccination Support Services		

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
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents	X	J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project	X	L. Other Authorization: COVID-19

PART III: SUPPLEMENTAL INFORMATION
Please respond to ALL of the following:
<b>1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.</b>
<p>One of the primary goals in Maine's vaccine plan is equity. To help achieve that goal, the Department recognizes the importance of engaging community-based organizations, who already have the trust of their community members and are best positioned to understand the needs and work collaboratively with the State to ensure that our approach is adapted to those needs. The purpose of these contracts is to fund community-based partners to provide education and outreach to increase vaccine confidence and work with the State and providers to ensure equitable access to vaccination sites through a variety of means, including but not limited to needs assessment, help with registration and coordination of transportation, cultural brokering and interpretation services, and sponsoring pop-up clinics. Services must be delivered in a culturally-tailored way when appropriate.</p>

## State of Maine Procurement Justification Form

### PART III: SUPPLEMENTAL INFORMATION

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

The Department, Commissioner's Office has determined that this provider is willing and qualified based on their ability to provide the necessary services to safely isolate and quarantine. The providers have a history of providing such services and have the capacity to meet the requirements of the deliverables. The providers are trusted in their communities to assist the Department in achieving equity in the COVID-19 vaccination program.

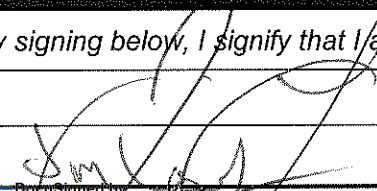

**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

The costs associated with these services have been reviewed by the Department for fairness and allowability. The funding was, in part, based on proposals from the organizations including information about the number and types of outreach/education activities they will provide, the number and type of community engagement activities they will provide, and the number and type of equitable distribution and administrative activities they will provide. The Department also considered past performance on contracts, geography, and distribution of funds to directly-impacted communities across Maine.

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

The Department does not intend to RFP these willing and qualified services.

### PART IV: APPROVALS

<b>Signature of requesting Department's Commissioner (or designee):</b>	<i>By signing below, I signify that I approve of this procurement request.</i>		
<b>Printed Name:</b>		<b>Date:</b>	25 - Aug 21
<b>Signature of DAFS Procurement Official:</b>			
<b>Printed Name:</b>	41C2BA36FAF44CD... Kathy Paquette	<b>Date:</b>	11/3/2021