

State of Maine Waiver of Competitive Bidding Request Form

Form Instructions: Please provide the requested information in the white boxes below. This form is to precede all contract requests that are not the direct result of a competitive bid process.

DHHS/DCM Contract Administrator:	Shawn Belanger Beth Heath	Office/Division/Program of Contract Administrator:	DHHS/SAMHS/Jessica Gerrish
Est. Contract Amount:	Amendment Amount: \$269,062	Contract or RQS Number:	See Attached List
		DHHS Agreement Number:	See Attached List
Proposed Start Date:	7/1/18	Proposed End Date:	6/30/20
Vendor/Provider Name, City, State:	See Attached List		
Short Description of Good or Service:	Wrap Services		
Please note, for transparency purposes, Waivers of Competitive Bidding will be publicly posted. Public postings are placed on the Division of Procurement Services website for a period of seven consecutive calendar days.	<p>To be completed by the Division of Procurement Services</p> <p>Posting dates on Division of <i>Procurement Services</i> website: From: <u>12/27/2019</u> To: <u>1/2/2020</u></p>		
Notice of Intent to Waive Competitive Bidding Number:	NOI# 1220192137		
1. Statutory Justification			
State of Maine statute (5 M.R.S. §1825-B(2)) allows waivers of competitive bidding only for the specific reasons listed below. Please mark the appropriate box (X) next to the justification which applies to this specific request.			
	A. The procurement of goods or services by the State for county commissioners pursuant to Title 30-A, section 124, involves the expenditure of \$2,500 or less, and the interests of the State would best be served;		
	B. The Director of the Bureau of General Services is authorized by the Governor, or the Governor's designee, to make purchases without competitive bidding because, in the opinion of the Governor or the Governor's designee, an emergency exists that requires the immediate procurement of goods or services;		
		<i>By signing below, I signify as the Governor's designee there is an emergency that necessitates this non-competitive procurement.</i>	
<i>If citing the above justification for this Waiver of Competitive Bidding request, please have the requesting Department's Commissioner or Chief Executive (as the Governor's "designee") sign and date on the right.</i>	Signature:	Printed Name:	Date:
	C. After reasonable investigation by the Director of the Bureau of General Services, it appears that any required unit or item of supply, or brand of that unit or item, is procurable by the State from only one source;		

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	D. It appears to be in the best interest of the State to negotiate for the procurement of petroleum products;	
	E. The purchase is part of a cooperative project between the State and the University of Maine System, the Maine Community College System, the Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State involving: (1) An activity assisting a state agency and enhancing the ability of the university system, community college system, Maine Maritime Academy, or a private, nonprofit, regionally accredited institution of higher education with a main campus in this State to fulfill its mission of teaching, research, and public service; (2) A sharing of project responsibilities and, when appropriate, costs;	
	<i>If citing the above justification for this sole source request, please note that the specific approval of the Governor's Office is required, in accordance with Executive Order 26 FY 11/12, "An Order to Enhance Competitive Bidding". The approval must be documented on DAFS/BGS/Division of Procurement Services "GOVCOOP" form, found here: http://www.maine.gov/purchases/info/forms/govcoop.doc.</i>	
	F. The procurement of goods or services involves expenditures of \$10,000 or less, in which case the Director of the Bureau of General Services may accept oral proposals or bids;	
	G. The procurement of goods or services involves expenditures of \$10,000 or less, and procurement from a single source is the most economical, effective and appropriate means of fulfilling a demonstrated need.	
X	If a different authorization specifically allows for this non-competitive procurement, please provide that reference here:	Willing and Qualified

Please note that the following four points below (#2 through 5) all require a response.

2. Description of Specific Need
 Please identify, and fully describe, the specific problem, requirement, or need the resulting non-competitive contract would address and which makes the goods or services necessary. Explain how the requesting Department determined that the goods or services are critical and/or essential to agency responsibilities or operations.

The Department is responsible for services and unmet needs for persons with serious and persistent mental health disorders. These individuals are often poor and at times because of their poverty or in part because of their disorder have individual emergent/ unmet needs that cannot be met by other resources. WRAP funds assist in meeting basic emergent/unmet needs and the organization that manages those funds.

The Providers are required to assemble Wrap committee that includes a peer with lived experience to meet on a weekly basis to review applications, to ensure that Wrap applicants must be Section 17 eligible in order to qualify for Wrap funding, to insure the Wrap applications are complete and accurate, and provide quick turnaround from application submission to approval /denial of Wrap funding with written notice to the applicant.

The purpose of this amendment is to increase the funds due to an increase of client needs.

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3. Availability of other Public Resources

Please explain how the requesting Department concluded that sufficient staffing, resources, or expertise is not available within the State of Maine's government, or other governmental entities (local, other state, or federal agencies) external to the requesting Department, which would be able to address the identified need more efficiently and effectively than the identified vendor.

The Department does not have the resources to provide this service.

4. Cost

Since a waiver of competitive bidding is being requested for this procurement, please explain how the requesting Department concluded the negotiated costs, fees, or rates are **fair and reasonable**.

The amount of allocation for each Region was based upon the historical allotment and resulting utilization for the area plus an administrative fee (15% of monthly activity that is reported) which is standardized and consistent with the previous year.

5. Future Competition

Please describe potential opportunities which may be available to foster competition for these goods or services in the future.

These services are provided by any willing and qualified providers and therefore the Department does not intend to RFP these services.

Please note that only one of the two points below ("Uniqueness" or "Timeframe") requires a response. Requesting Departments are not required to respond to both points.

6. Uniqueness

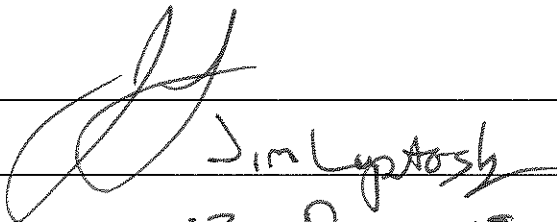
Please explain if the goods or services required are unique to a specific vendor. Describe the unique qualifications, abilities, and/or expertise of the vendor and how those particular unique factors address the specific need identified above. If the vendor has unique equipment, facilities, or proprietary data, also explain the necessity of these particular unique assets.

The Department's Office of Substance Abuse and Mental Health Services has determined that this provider is willing and qualified to provide these WRAP services. They are also licensed with the Division of Licensing and Regulatory Services and have a contract with the Department's Office of Substance Abuse and Mental Health Services. These Providers have the expertise and knowledge to ensure that the Wrap services are met.

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7. Timeframe (Complete only if B. is the Statutory Justification marked on Page 1)
 Please explain if time is of the essence and an emergency exists which requires the immediate procurement of goods or services. Describe the nature of this emergency, provide the date by which the goods or services must be delivered, and explain how that date was determined and its significance (i.e. impact if delayed beyond this date). Also, provide information as to how it was determined this vendor is the best option to address this time-sensitive procurement.

N/A

Signature of requesting Department's Commissioner or Chief Executive (or designee within the Commissioner's Office):	<i>By signing below, I signify that my Department requests, and I approve of, this Waiver of Competitive Bidding.</i>
Printed Name:	
Date:	12-Dec-19

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The following list identifies all providers/vendors associated with this State of Maine Waiver of Competitive Bidding Request Form along with their specific contract information.

DHHS Office:	OSAMHS			
Service:	Wrap Services			
Start Date:	7/1/2018			
Vendor/Provider Name, City & State	Contract (CT) Number	DHHS Agreement #	Amendment Amount (if applicable)	Total Contract Amount
MaineHealth dba Maine Behavioral Healthcare, South Portland, ME	CT 10A 20190206*2258	MH2-19-4003A	\$40,000.00	\$112,716.00
Sweetser, Saco, ME	CT 10A 2018033*2897	MH2-19-4004B	\$40,062.00	\$100,997.00
JMPB, Inc., Fairfield, ME	CT 10A 2018033*2899	MH2-19-4011B	\$70,000.00	\$400,288.00
Aroostook Mental Health Services, Inc., Caribou, ME	CT 10A 20180402*2900	MH3-19-4001B	\$74,000.00	\$307,552.00
Community Health & Counseling Services, Bangor, ME	CT 10A 20180402*2903	MH3-19-4002B	\$45,000.00	\$443,488.00