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.

			'ART I	: OVE	ERVIEW			
Department Office/Division/Program:				DHHS/Office of MaineCare Services				
Department Contract Administrator or Grant Coordinator:				Althea Harris / Patricia Wall				
(If applicable) Department Reference #:			OMS-25-207					
Amount: \$ 975,60 (Contract/Amendment/Grant)		6.00 Advantage CT / RQS #:		CT 10A 20240521000000003335				
CONTRACT	Proposed St	art Date:	7/1/2	024	Proposed End I		6/30/2025	
AMENDMENT	Original Start Date:				Effective I	Date:		
	Previous End Date:			New End D		Date:		
GRANT	Project Start Date:				Grant Start Date:			
	Project End Date:		Grant End D		Date:			
Vendor/Provider/Grantee Name, City, State:			Mercer Health and Benefits LLC Newark NJ					
Brief Description of Goods/Services/Grant:			Accountable Communities Actuarial Services					

PART II: JUSTIFICATION FOR VENDOR SELECTION						
Check the box below for the justification(s) that applies to this request. (Check all that apply.)						
	A. Competitive Process		G. Grant			
	B. Amendment		H. State Statute/Agency Directed			
\boxtimes	C. Single Source/Unique Vendor		I. Federal Agency Directed			
	D. Proprietary/Copyright/Patents		J. Willing and Qualified			
	E. Emergency		K. Client Choice			
	F. University Cooperative Project		L. Other Authorization			

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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 Accountable Communities Program is a Department initiative, under which groups of MaineCare providers can share in savings for an assigned population, with the amount of any shared savings payments tied to the ACO's score on a range of quality measures defined by the Department to assess the quality and care furnished to MaineCare members. Given that the Centers for Medicare and Medicaid Services require that certain actuarial services related to the AC be provided by an independent actuary, the purpose of this Agreement is to engage the Provider to perform such actuarial analyses and related consulting advisory services.

The Provider shall 1) implement a complex methodology to assign MaineCare members to various ACs; 2) create reports for each AC that calculate the AC's benchmark costs, Reporting Period costs, and Reporting Period savings; 3) develop Completion Factors; and 4) design and implement methodologies to control for the impact of regulatory changes that could skew the comparison of Base Year to Reporting Period spending; (5) make savings projections; and (6) perform other ad hoc work as requested by the Department.

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

The vendor was selected through RFP# 201801006. The final procurement period ended on 6/30/2023. The Department extended this contract for one (1) additional year beyond the final renewal period to accommodate major program changes.

MaineCare is on target to require downside risk in July 2024. It would be highly unfavorable to switch vendors during this transition period and would risk potential disruption of program operations. Stability in execution of the established methodology and contractual obligations will be critical in fall 2024 under the heightened scrutiny of a shared-risk contract.

Additionally, OMS/DHHS is intending to include additional related services within this actuarial RFP to support broader OMS financial management needs. This includes actuarial services for developing and maintaining MaineCare budget forecasts and broader analytic support. The skill sets needed and operational steps for this are similar to those used in the AC program and the two scopes of work should be fully aligned for maximum utility. Due to the uncertainty with the AC program's future, it is important to note that this scope of work will be required of the vendor regardless.

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

The costs and rates of this vendor were considered fair and reasonable and the best value for the Department.

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

These services are currently in the initiation phase of the competitive procurement process through CADB RFP OMS20235 with a new contract start date of 7/1/2025.

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).

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7/24/2024

Date:

PART III: SUPPLEMENTAL INFORMATION					
☐ Yes, ARPA funds (025) - If agencies.	Yes, please be aware of the requirements from awarding federal				
⊠ No – If No, proceed to Part	V.				
PART V: CONFLIC	CTS OF INTEREST (COI); CONTRACT WITH THE STATE				
Does the requesting Departme	ent signatory understand and acknowledge Maine's COI Statute?				
⊠ Yes, the requesting Department understands and acknowledges MRS Title 5, §18-A, 2.					
PART VI: APPROVALS					
The signatures below indicate	approval of this procurement request.				
Signature of requesting Department's Commissioner (or designee):	11				
Typed Name:	Date: 8-Jun-24				
Signature of DAFS Procurement Official:	DocuSigned by: Kathy Paquette				

Kathy Paquette

Typed Name:

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