# Maryland Department of Health

**PROCUREMENT REVIEW GROUP**

***Guidance & Worksheets***

The Office of Statewide Procurement (OSP) Procurement Review Group (PRG) shall review proposed procurement solicitations, proposals to exercise options or otherwise modify the contract, and proposals to award sole-source contracts when the resulting contract is:

1. Eligible for designation to the Small Business Reserve (SBR) Program when the total value is expected to exceed $50,000, and
2. For evaluation of Minority Business Enterprise (MBE) and Veteran-Owned Small Business Enterprise (VSBE) participation goals when the total value is expected to exceed $100,000.

The PRG shall determine the appropriate socioeconomic utilization methods to encourage maximum small and/or minority and/or veteran-owned business participation in each proposed contract; and shall make recommendations to the agency head and the solicitation’s procurement officer concerning specific designations and/or participation goals.

# Internal Procurement Guidelines

In order for the procurement process to work smoothly, the MDH’s Liaison is the point of contact for the OSP PRG. **Do not submit PRG documents directly to the OSP**. The Contract Fulfillment Team for each solicitation should work together to prepare the PRG documents for submission.

### Steps for All New Solicitations

Complete SBR Designation Worksheet PRG Evaluation (mandatory designation for procurements greater than $50,000 and up to/including $500,000)

*Note: All solicitations, including those over $500,000, shall continue to be evaluated for SBR Designation.*

Complete SBR Designation Form **or** SBR Exemption Form

Complete MBE Goal Setting Worksheet PRG Evaluation **and** MBE Participation Worksheet

Complete VSBE Goal Setting Worksheet PRG Evaluation **and** VSBE Participation Worksheet

### Steps for Sole Source

New – same as for new solicitation

Renewed sole source – same as for new solicitations.

### Steps for Options (for contracts with MBE and VSBE participation goals)

Complete the MBE Participation Worksheet and VSBE Participation Worksheet (if applicable). In Section 4, write a brief summary pertaining to whether the participation goal is being met, and if not, what corrective action is being taken.

Attach original MBE participation goal justification.

Attach original VSBE participation goal justification.

### Steps for Contracts under $100,000

Submit same attachments as listed above.

Add list from MDOT for direct solicitations of certified MBEs if an MBE participation goal is not feasible.

Add list from eMMA for direct solicitations of certified VSBEs if an VSBE participation goal is not feasible.

**SMALL BUSINESS RESERVE**

SBR Designation Worksheet

PRG Evaluation to Establish SBR Designation for Solicitation #

Title:

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| --- | --- |
| The extent to which direct solicitation, subcontracting, race- neutral measures, or a combination will most likely result in maximum small business participation. |  |
| Are SBRs and small businesses available to perform contracts  at the prime contract level? |  |
| Geographical proximity of SBRs to the work location |  |
| Does the number of small businesses (as defined in COMAR 21.01.02.01B (80)) warrant designating the procurement as a small business preference procurement under COMAR  21.11.01? |  |
| Are the evaluation factors (when the solicitation is by competitive sealed proposals) designed to ensure that they do not unreasonably limit or inhibit participation by small businesses, including SBRs? Should the solicitation include the economic-benefits evaluation factor under COMAR  21.05.03.03A (3)? |  |
| Are the structure, specifications, and requirements of the solicitation designed to ensure that they do not unreasonably limit or inhibit participation by small businesses, including SBRs? Inhibiting factors may include unnecessary or prohibitive bonding requirements, restrictive specifications, unnecessary or unreasonable performance parameters, and  unnecessary or unreasonable experience requirements. |  |
| Is it feasible to divide a complex procurement into separate procurements consistent with SBR and small business  capacity? |  |
| Sole-source contracts: Are there work components that can reasonably be subcontracted to SBRs and other small businesses? |  |
| Renewal options: What are the benefits of exercising the option versus re-competing the contract? Consider such factors as past performance, potential for cost reduction, and  current opportunities for small business or SBR participation. |  |
| Deliverables take into consideration what is important to the agency and the success of the project (i.e. time, cost  requirements). |  |
| Requirements and specifications are prioritized. |  |
| Deliverables are defined in terms of what is expected and when schedules, deadlines and mandatory items are defined. |  |

*Maryland Department of Health*

*Office of Contract Management & Procurement*

# SBR DESGINATION FORM

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| **Section 1: Solicitation Information** | | | | | | | | | | | | | | | | | |
| **ADPICS #** | | | **OCMP #**  **Previous OCMP #** | | | | | **Solicitation Title:** | | | | | | | | | |
| **Select:** | New Procurement | | | | Retro/Emergency | | | | | Sole Source | | | | Option | | Mod | |
| **Administration:** | | | | | | | | | | | | | | | | | |
| **Solicitation Description:** | | | | | | | | | | | | | | | | | |
| **Anticipated Dollar Amount** (including options): $ | | | | | | | | | | | **Anticipated Start Date:** | | | | | | |
| **Incumbent Vendor*\** Yes No** | | | **Vendor Name:**  ***\*****If incumbent vendor, please attach most recent budget* | | | | | | | | | | | | | | |
| **Section 2: Contract Duration** | | | | | | | | | | | | | | | | | |
| **For New Procurements Only** | | | | | **Base:** years | | | | | months | | | | |  | | |
| **Option 1:** | months | | | **Option 2:** months | | | | | | | | | **Option 3:** | | months | | |
| **For Options Only** | | | **Option Term:** months | | | | | | | | | | | | | | |
| **For Modifications Only** | | | **Modification Term:** days | | | | | | | | | | | | | | |
| **Section 3: Contact Information** | | | | | | | | | | | | | | | | | |
| **OCMP Procurement Officer:**  **Phone Number:** | | | | | | **SBR Liaison:**  **Phone Number:** | | | | | | | | | | | |
| **Contract Officer:**  **Phone Number:** | | | | | | **Contract Monitor:**  **Phone Number:** | | | | | | | | | | | |
| **Section 4: Approval** | | | | | | | | | | | | | | | | |
| **Reviewed by PRG:** | |  | | | | |  | |  | | |  | | | | |
| **SBR Liaison:** | |  | | | | |  | | **Date:** | | |  | | | | |

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| **ADPICS #:** | **OCMP #**  **Previous OCMP #** | **Solicitation Title:** |
| **Section 5: SBR Vendor Count** | | |

## SBR SEARCH RESULTS

*For New IFB/RFP*

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| --- | --- | --- |
| **NAICS Code/Keyword** | **Description** | **Count of SBRs**  *(eMMA database or other resources)* |
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*Maryland Department of Health*

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# SBR EXEMPTION FORM

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| **Section 1: Solicitation Information** | | | | | | | | |
| **ADPICS #** | | **OCMP #**  **Previous OCMP #** | | **Solicitation Title:** | | | | |
| **Select:** | New Procurement | | Retro/Emergency | | Sole Source | | Option | Mod |
| **Administration:** | | | | | | | | |
| **Solicitation Description:** | | | | | | | | |
| **Anticipated Dollar Amount** (including options): $ | | | | | | **Anticipated Start Date:** | | |
| **Section 2: Waiver Justification** | | | | | | | | |

**This solicitation is exempt or warrants a waiver of the SBR Program Designation mandate on the following basis:**

Preference procurement made from a preferred provider

Procurement involves Federal dollars; inclusion of the SBR Program conflicts with Federal law or grant provisions

Sole Source

Proprietary Commodity Purchase

Non-competitive negotiated procurements of human, social or educational services

An eMMA search of small businesses registered to participate in the SBR Program as well as a search of other available small business resources and databases has yielded the identification of less than three (3) eligible small businesses as defined in COMAR 21.01.02.01B(80)  
*Note: Use and submit the completed SBR Designation Worksheet below to show the product codes utilized and search results obtained for this waiver to apply.*

Other: (***GOSBA Waiver Request Approval Required***)

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| **ADPICS #** | **OCMP #**  **Previous OCMP #** | | **Solicitation Title:** | | | | |
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| **Section 3: Contact Information** | | | | | | | |
| **OCMP Procurement Officer:**  **Phone Number:** | | | | **SBR Liaison:**  **Phone Number:** | | | |
| **Contract Officer:**  **Phone Number:** | | | | **Contract Monitor:**  **Phone Number:** | | | |
|  | | | | | | | |
| **Section 4: Approval** | | | | | | | |
| **Reviewed by PRG:** | |  | | |  |  |  |
| **SBR Liaison:** | |  | | |  | **Date:** |  |
|  | |  | | |  |  |  |
| **Section 5: Search Results** | | | | | | | |
| **NAICS Codes/Keyword Search** | | | | **Number of Vendors** | | | |
| *Searches should be contacted via eMMA (emma.maryland.gov) and direct solicitation efforts. If no Small Business*  *Reserve vendors exist for this contract, attach a list of those companies which will be directly solicited.* | | | | | | | |
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**MINORITY BUSINESS ENTERPRISE**

MBE Goal Setting Worksheet

PRG Evaluation to Establish MBE Goal for Solicitation #

Title:

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| **Opportunity Review or Analysis Question Area** | **Determination** |
| The extent to which direct solicitation, subcontracting, race-neutral measures, or a combination will most likely result in maximum MBE participation. |  |
| Are MBEs and small businesses available to perform contract at the  prime contract level? |  |
| Do enough MBEs exist at the prime contractor level to reasonably assure maximum opportunities for MBEs to compete for and potentially obtain the contract at that level? |  |
| Are MBE subcontracting opportunities feasible? |  |
| Does the base of potentially-available MBEs for the work components of the contract make the MBE subcontract goals attainable? |  |
| MBE base of providers for each work component |  |
| Geographical proximity of MBEs to the work location |  |
| Are the evaluation factors (when the solicitation is by competitive sealed proposals) designed to ensure that they do not unreasonably limit or inhibit participation by small businesses, including MBEs?  Should the solicitation include the economic-benefits evaluation  factor under COMAR 21.05.03.03A(3)? |  |
| Are the structure, specifications, and requirements of the solicitation designed to ensure that they do not unreasonably limit or inhibit participation by small businesses, including MBEs? ***Inhibiting factors may include unnecessary or prohibitive bonding requirements, restrictive specifications, unnecessary or unreasonable performance parameters, and unnecessary or unreasonable experience requirements. General policies for***  ***developing specifications are set forth in COMAR 21.04.01.*** |  |
| Is it feasible to divide a complex procurement into separate procurements consistent with MBE and small business capacity? |  |
| *Sole-source contracts*: Are there work components that can reasonably be subcontracted to MBEs and other small businesses? |  |
| *Renewal options:* What are the benefits of exercising the option versus re-competing the contract? Consider such factors as past  performance, potential for cost reduction, and current opportunities for small business or MBE participation. |  |
| Deliverables take into consideration what is important to the agency  and the success of the project (i.e. time, cost requirements). |  |
| Requirements and specifications are prioritized. |  |
| Deliverables are defined in terms of what is expected and when is it due. Constraints, schedules, deadlines and mandatory items are  defined. |  |

*Maryland Department of Health*

*Office of Contract Management & Procurement*

**MBE GOAL SETTING FORM**

**SBR Procurement**

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| **Section 1: Solicitation Information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ADPICS #** | | | | | **OCMP #**  **Previous OCMP #** | | | | | | | | **Solicitation Title:** | | | | | | | | | | | | |
| **Select:** | New Procurement | | | | | | Retro/Emergency | | | | | | | | Sole Source | | | | | | Option | | | Mod | |
| **Administration:** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Solicitation Description:** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Anticipated Dollar Amount** (including options): $ | | | | | | | | | | | | | | | | **Anticipated Start Date:** | | | | | | | | | |
| **Incumbent Vendor*\** Yes No** | | | | | **Vendor Name:**  ***\*****If incumbent vendor, please attach most recent budget* | | | | | | | | | | | | | | | | | | | | |
| **Section 2: Contract Duration** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **For New Procurements Only** | | | | | | | **Base:** years | | | | | | | | months | | | | | | |  | | | |
| **Option 1:** | months | | | |  | **Option 2:** months | | | | | | | | | | | | | **Option 3:** | | | months | | | |
| **For Options Only** | | | | | **Option Term:** months | | | | | | | | | | | | | | | | | | | | |
| **For Modifications Only** | | | | | **Modification Term:** days | | | | | | | | | | | | | | | | | | | | |
| **Section 3: MBE Goal & Justification** | | | | | | | | | | | | | | | | | | | | | | | | | |
| MBE Goal  % | | Previous Goal:  % | | | Goal Met/  Exceeded? | | | Subgoal  % | | African American  % | | | | | | | Asian American  % | | | Hispanic  % | | | Woman  % | | |
| **Goal Explanation/Justification:** *Your goal setting factors should consider which portions of the prime contract can be subcontracted to available MBEs certified by MDOT to perform required tasks that are a part of the solicitation.* | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ADPICS #** | | | **OCMP #**  **Previous OCMP #** | | | | | | **Solicitation Title:** | | | | | | | | | | | | | | | | |
| **Section 4: Contact Information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OCMP Procurement Officer:**  **Phone Number:** | | | | | | | | | | | **MBE Liaison:**  **Phone Number:** | | | | | | | | | | | | | | |
| **Contract Officer:**  **Phone Number:** | | | | | | | | | | | **Contract Monitor:**  **Phone Number:** | | | | | | | | | | | | | | |
| **Section 5: Approval** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reviewed by PRG:** | | | |  | | | | | | | |  | |  | | | |  | | | | | | |
| **MBE Liaison:** | | | |  | | | | | | | |  | | **Date:** | | | |  | | | | | | |

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| **ADPICS #:** | **OCMP #**  **Previous OCMP #** | **Solicitation Title:** |
| **Section 5: Subcontractor List** | | |

## CURRENT MBE SUBCONTRACTORS

*Please do* ***NOT*** *include Non-Profits on this list*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MBE Name** | **MBE Category** | **Description of Work** | **MBE Goal** | **No. Years** | **Dollar Amount** |
|  |  |  | % |  | $ |
|  |  |  | % |  | $ |
|  |  |  | % |  | $ |
|  |  |  | % |  | $ |
|  |  |  |  | **Total Subcontract Amount:**  $ | |

## MBE SEARCH RESULTS

*For New IFB/RFP*

|  |  |
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| **Section 5: Search Results** | |
| **NAICS Codes/Keyword Searches** | **Number of Vendors** |
| *Searches should be contacted via MDOT, eMMA (emma.maryland.gov) and direct solicitation efforts. If no MBE vendors exist for this contract, attach a list of those companies which will be directly solicited.* | |
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**VETERAN-OWNED BUSINESS ENTERPRISE**

VSBE Goal Setting Worksheet

PRG Evaluation to Establish VSBE Goal for Solicitation #

Title:

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| --- | --- |
| **Opportunity Review or Analysis Question Area** | **Determination** |
| The extent to which direct solicitation, subcontracting, or a combination will be determined most likely to result in  maximum VSBE participation in contract. |  |
| Are VSBEs available to directly perform contract at the prime  contract level? |  |
| Does the number of verified VSBEs listed in the directory or otherwise identified for a particular service, supply or maintenance activity reasonably assure maximum opportunities for VSBEs to obtain contracts at that level? |  |
| Does the number of verified VSBEs potentially available for the work components of the contract make the VSBE  subcontract goals attainable? |  |
| Is geographical proximity of verified VSBEs to the work  location a factor? |  |
| Identify the specific work categories within the scope of the procurement appropriate for subcontracting and number of verified VSBE providers for each work component? |  |
| Are verified VSBE subcontracting opportunities feasible? |  |
| Are the structure, specifications, and requirements of the solicitation designed to ensure that they do not unreasonably limit or inhibit participation by verified VSBEs? ***Inhibiting factors may include unnecessary or prohibitive bonding requirements, restrictive specifications, unnecessary or unreasonable performance parameters, and unnecessary or unreasonable experience requirements.***  ***General policies for developing specifications are set forth***  ***in COMAR 21.04.01.*** |  |
| Is it feasible to divide a complex procurement into separate procurements consistent with VSBE and small business capacity? |  |
| *Sole-source contracts*: Are there work components that can reasonably be subcontracted to VSBEs and other small  businesses? |  |
| *Renewal options:* What are the benefits of exercising the option versus re-competing the contract? Consider such factors as past performance, potential for cost reduction, and current opportunities for small business or VSBE  participation. |  |
| Deliverables take into consideration what is important to the agency and the success of the project (i.e. time, cost  requirements). |  |
| Requirements and specifications are prioritized. |  |
| Deliverables are defined in terms of what is expected and when is it due. Constraints, schedules, deadlines and  mandatory items are defined. |  |

*Maryland Department of Health*

*Office of Contract Management & Procurement*

# VSBE GOAL SETTING FORM

# SBR Procurement

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| **Section 1: Solicitation Information** | | | | | | | | | | | | | | | | | | | |
| **ADPICS #** | | | **OCMP #**  **Previous OCMP #** | | | | | | **Solicitation Title:** | | | | | | | | | | |
| **Select:** | New Procurement | | | | | Retro/Emergency | | | | | Sole Source | | | | | Option | | Mod | |
| **Administration:** | | | | | | | | | | | | | | | | | | | |
| **Solicitation Description:** | | | | | | | | | | | | | | | | | | | |
| **Anticipated Dollar Amount** (including options): $ | | | | | | | | | | | | **Anticipated Start Date:** | | | | | | | |
| **Incumbent Vendor*\** Yes No** | | | **Vendor Name:**  ***\*****If incumbent vendor, please attach most recent budget* | | | | | | | | | | | | | | | | |
| **Section 2: Contract Duration** | | | | | | | | | | | | | | | | | | | |
| **For New Procurements Only** | | | | | | **Base:** years | | | | | months | | | | | |  | | |
| **Option 1:** | months | |  | **Option 2:** months | | | | | | | | | | | **Option 3:** | | months | | |
| **For Options Only** | | | **Option Term:** months | | | | | | | | | | | | | | | | |
| **For Modifications Only** | | | **Modification Term:** days | | | | | | | | | | | | | | | | |
| **Section 3: VSBE Goal & Justification** | | | | | | | | | | | | | | | | | | | |
| VSBE Goal  % | | | | | Previous Goal  % | | | | | | | | | Goat Met/Exceeded?  Yes No | | | | | |
| **Goal Explanation/Justification:** *Your goal setting factors should consider which portions of the prime contract can be subcontracted to available VSBEs certified by eMMA to perform required tasks that are a part of the solicitation.* | | | | | | | | | | | | | | | | | | | |
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| **ADPICS #** | | | | | **OCMP #**  **Previous OCMP #** | | | | | | | | | **Solicitation Title:** | | | | | |
| **Section 4: Contact Information** | | | | | | | | | | | | | | | | | | | |
| **OCMP Procurement Officer:**  **Phone Number:** | | | | | | | **VSBE Liaison:**  **Phone Number:** | | | | | | | | | | | | |
| **Contract Officer:**  **Phone Number:** | | | | | | | **Contract Monitor:**  **Phone Number:** | | | | | | | | | | | | |
| **Section 5: Approvals** | | | | | | | | | | | | | | | | | | |
| **Reviewed by PRG:** | |  | | | | | |  | |  | | |  | | | | | |
| **VSBE Liaison:** | |  | | | | | |  | | **Date:** | | |  | | | | | |

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| **ADPICS #** | **OCMP #**  **Previous OCMP #** | **Solicitation Title:** |

## CURRENT VSBE SUBCONTRACTORS

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| --- | --- | --- | --- | --- |
| **VSBE Name** | **Description of Work** | **VSBE Goal** | **No. Years** | **Dollar Amount** |
|  |  | % |  | $ |
|  |  | % |  | $ |
|  |  | % |  | $ |
|  |  | % |  | $ |
|  |  |  | **Total Subcontract Amount:**  $ | |

**VSBE SEARCH RESULTS**

*For New IFB/RFP*

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| **Section 5: Search Results** | |
| **NAICS Codes/Keyword Searches** | **Number of Vendors** |
| *Searches should be contacted via eMMA (emma.maryland.gov) and direct solicitation efforts. If no VSBE vendors exist for this contract, attach a list of those companies which will be directly solicited.* | |
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