



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

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.

| PART I: OVERVIEW | | | | |
|---|----------------------|--|------------------------|------------|
| Department Office/Division/Program: | | DHHS/Maine CDC/HETL | | |
| Department Contract Administrator or Grant Coordinator: | | Shawn Belanger Lora Blackwell | | |
| (If applicable) Department Reference #: | | | | |
| Amount: (Contract/Amendment/Grant) | \$45,000.00 | Advantage CT / RQS #: | Draft RQS 20210830*217 | |
| CONTRACT | Proposed Start Date: | 7/1/2021 | Proposed End Date: | 06/30/2022 |
| 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: | | Association of Public Health Laboratories Silver Spring, MD | | |
| Brief Description of Goods/Services/Grant: | | Online web portal for COVID-19 test ordering and results reporting First year's license | | |

| PART II: JUSTIFICATION FOR VENDOR SELECTION | | | |
|---|-----------------------------------|-------------------------------------|----------------------------------|
| Mark an "X" before 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 checked="" type="checkbox"/> | L. Other Authorization: COVID-19 |

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 COVID-19 APHL Lab Webportal (LWP) is a secure cloud-based platform offering laboratory customers an intuitive, efficient and paperless interface to order tests, track progress, and review results. Regardless of how an order is submitted to the laboratory, it will be able to track it, send notifications, and communicate results in a preferred delivery mode. The LWP can be accessed from any web-enabled device, and offers labs the following key features and benefits: Centrally hosted on AIMS' cloud platform, enabling cost savings for labs, enhanced communication between labs, and easy access to lab, clinical, and epidemiological data for public health agencies and key public health stakeholders, reliable and secure cloud environment that meets, or exceeds, most federal and state cloud security requirements, LIMS agnostic platform that can connect to any LIMS system that a lab may have. The established bi-directional allows orders added in LWP to seamlessly appear in your LIMS, and results released in your LIMS to be automatically published in LWP.

The Department's Health and Environmental Testing Laboratory (HETL) has used the LWP since the summer of 2020 for online COVID-19 test ordering and results reporting. The use of this application has enabled HETL to perform over 350,000 COVID-19 tests, which equates to 10 times our normal workload.

This is a one (1) year subscription for this licensed service and without this application, HETL would not be able to respond to the COVID-19 pandemic.

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

Association of Public Health Laboratories (APHL) is the sole provider of the APHL COVID-19 Lab web portal.

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

The APHL web portal is offered to public health labs only. Any discounts to public health labs are already built into the cost.

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

The Department does not intend to RFP these services.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

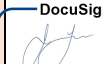
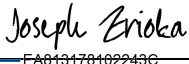
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

| | | | |
|--|---|-------|-------------|
| Signature of requesting Department's Commissioner (or designee): | DocuSigned by:  | | |
| Typed Name: | 66738ED17E0C4B2... Jim Lopatosky | Date: | Dec-21-2021 |
| Signature of DAFS Procurement Official: | DocuSigned by:  | | |
| Typed Name: | EA813178102243C... Joseph Zrioka | Date: | 3/22/2022 |