



## PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.*

PART I: OVERVIEW			
Department Office/Division/Program:	Maine Health Data Organization		
Department Contract Administrator or Grant Coordinator:	Karynlee Harrington, Director		
(If applicable) Department Reference #:	n/a		
Amount: (Contract/Amendment/Grant)	\$ 50,000.00	Advantage CT / RQS #:	20240709*0042
<b>CONTRACT</b>	Proposed Start Date:		Proposed End Date:
<b>AMENDMENT</b>	Original Start Date:	7/1/2024	Effective Date:
	Previous End Date:	6/30/2025	New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	Health Data Infrastructure Development LLC Lewiston, ME		
Brief Description of Goods/Services/Grant:	Highly specialized technical and industry expertise required to support MHDO in complying with the MHDO's data submission requirements defined in 90-590 Chapters 243, 247, and 570.		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" 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 type="checkbox"/>	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 MHDO's purpose defined in Title 22, Chapter 1683, is to create and maintain a useful, objective, reliable and comprehensive health information data warehouse that is used to improve the health of Maine citizens. MHDO maintains over 1 billion health care data records and each month that number grows. Data submitted to MHDO includes claims data from commercial and public payors, non-claims-based payment and other supplemental data, and pharmaceutical data. The person responsible for managing the collection of these data retired from MHDO in May of 2024, after 20 years of service. MHDO recently hired a full-time employee to fill this vacant position after a year of recruiting and interviewing candidates. As we enter this next phase of our transition, we need to train our new employee, and at the same time continue to collect and validate these complex data submissions in real time. Failure to do so will mean annual legislative reports will be delayed and other external users that rely on MHDO's data for research and policy related work will not have access to current data. Health Data Infrastructure Development, LLC is uniquely positioned to assist the MHDO with day-to-day work while providing the organizations new employee with the opportunity to job shadow, because the former MHDO employee who recently retired is now the CEO of Health Data Infrastructure Development.

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

The CEO of Health Data Infrastructure Development, LLC worked with MHDO for over 20 years where he supported MHDO in developing and maintaining all aspects of MHDO's data submission rules specific to 90-590, Chapters 243, *Uniform Reporting System for Health Care Claims Data Sets*, 247, *Uniform Reporting System for Non-Claims Based Payments and Other Supplemental Health Care Data Sets*, 570, *Uniform Reporting System for Prescription Drug Price Data Sets*; and 730, *Interagency Reporting of Cancer-Incidence Registry and Vital Statistics Data*. These rules are complex and technical. To maintain the data submissions and validation processes and ensure an efficient transition it is imperative that the agency preserve compliance with all aspects of these rules while training the organizations new employee.

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

The hourly rate negotiated is competitive with the hourly rates of our data vendor which was a competitive bid.

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

The highly specialized expertise MHDO requires to support health care data submissions is limited. It is more efficient and effective for MHDO to invest in Health Data Infrastructure Development, LLC, during this transition period as they have over twenty years of firsthand knowledge and experience working with the MHDO's data submission requirements and individual data submitters (approximately 900 data submitters).

**PART III: SUPPLEMENTAL INFORMATION**

Health Data Infrastructure Development, LLC is positioned to continue to provide support to MHDO which will allow MHDO to meet its mandatory data submission and legislative reporting requirements.

**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).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.


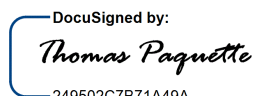
**PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE**

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

The requesting department signatory understands and acknowledges Maine's Conflict of Interest statutes.

**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Karynlee Harrington	Date:	5/29/25
Signature of DAFS Procurement Official:	 <small>DocuSigned by: Thomas Paquette 249502C7B71A49A...</small>		
Typed Name:	Thomas Paquette	Date:	6/6/2025