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

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over $10,000 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:	DHHS/Maine CDC/Infectious Disease Epidemiology			
Department Contract Administrator or Grant Coordinator:	Shawn Belanger			
(If applicable) Department Reference #:	OIT-25-137A			
Agency Department Code:	10A	Advantage CT / RQS #:	CT 10A 202410010000OIT25137	
Amount: (Contract/Amendment/Grant)	Base $862,950.00 Amend A $ 42,825.00 Total $905,775.00			
CONTRACT	Proposed/Original Start Date:	**11/1/2024**	Proposed/Most Recent End Date:	10/31/2026
AMENDMENT	New Effective Date:	**5/1/2026**	New End Date (if Applicable):	N/A
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:	InductiveHealth Informatics Atlanta, GA			
Brief Description of Goods/Services/Grant:	Software as a Service (SaaS) solutions and hosting for NEDSS Base System (NBS) for Maine Department of Health and Human Services and for hosting a copy of the NBS Reporting Database			

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
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed
☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☐	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	L. Other Authorization

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 Department is working to make our NBS instance more stable and sustainable. A NEDSS (National Electronic Disease Surveillance System) system is a requirement from federal CDC for infectious disease reporting. Maine selected in 2005 to use the federally provided surveillance system (NBS). Beginning in 2020, NBS and associated systems began to grow exponentially in size. This data is required to be maintained in an easily accessible fashion for the life of the individual. In addition, this data needs high availability for data analysis and reporting both federally and at the state level. A core requirement is a high level of data security since this data is identifiable patient data. The current infrastructure is aging and lacks the capacity to support the dramatic increase in data size. In addition, the current support system needs to be enhanced which will provide the sustainability required. Supporting NBS is now beyond Maine OIT's capacity and they are strongly recommending SaaS implementation.

The purpose of this amendment is to have the Provider host a copy of the NBS Reporting Database, as part of this initiative, to make the data accessible for internal and external dashboards and reporting.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

InductiveHealth is the only provider of cloud-hosted NBS SaaS services and support. They are a partner in good standing with Amazon Web Services for public health programs.

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

InductiveHealth provides NBS support to multiple states ensuring fair and reasonable costs. Through negotiation, the Department identified what services are essential and which components InductiveHealth can support that the Department cannot support internally. Maine receives grant funding for NBS maintenance and support.

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

There are no plans for future competition, as long as InductiveHealth remains the only provider

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) or (026) – 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's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS			
Governor/Department Commissioner or Designee			
1. The signature below indicates approval of this procurement request.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	21-May-26
2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	Signed by: Katie Boynton AE2C1DD1C5434E9...		
Typed Name:	Katie Boynton, Systems Analyst	Date:	6/1/2026