



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:	DHHS/OCFS		
Department Contract Administrator or Grant Coordinator:	Shawn Belanger		
(If applicable) Department Reference #:	ECE-24-9006		
Amount: (Contract/Amendment/Grant)	\$31,680.00	Advantage CT / RQS #:	CT 10A 20240509000000003176
CONTRACT	Proposed Start Date:	6/1/2024	Proposed End Date: 6/30/2025
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:	KJMB Solutions, Inc. / DBA Data Silo Solutions McKinney, TX		
Brief Description of Goods/Services/Grant:	Subscription to the STAR Portal		

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 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

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.

In response to S.P.533-L.D. 1712, OCFS is directed to establish a Help Me Grow system. Requirements of this program include developing a coordinated system of early identification, referral and follow up services, ensuring a centralized access point for access to information, maintain an electronic directory and data collection to meet program reporting requirements.

The Department selected System for Tracking Access to Referrals (STAR), which is a service that is specifically designed for Help Me Grow to capture required documentation to meet program model fidelity requirements as designated by the law signed on July 12, 2021. STAR is an online service used to collect information that is often shared with evaluators. STAR enables the easy gathering of information including but not limited to: Child and family demographics, Developmental issues and concerns, Referrals, Care coordination, Development screening, Outreach and outcomes.

This online service is uniquely able to meet the State needs due to the required reporting requirements, timeliness of implementation as outlined in the Maine Children’s Cabinet strategic plan outline, and the limited resources allocated during the passage of this law. Since the time of this contract’s initiation, program management has learned that there are other vendors who offer data systems for Help Me Grow programs across the nation.

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

At launch, it was believed that the vendor identified, Data Silo Solutions, was the only vendor able to sell or distribute this service. Since then, Program learned that there are other vendors with the ability to provide data systems to HMG affiliates and will be publishing an RFP for this service.

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

This cost has been deemed fair and reasonable and within budget for the needs of this project. The funding allocated for this initiative was established based upon the fiscal note put forward in response to L.D.1712.

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

The Department has published RFP 202409164 for this service that will have a resulting contract start date of 4/1/2025.

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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<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.
<input checked="" type="checkbox"/> No – If No, proceed to Part V.

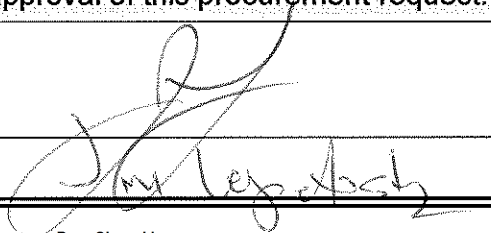
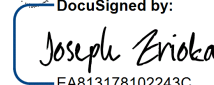
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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.

<input checked="" type="checkbox"/> 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):			Date:	16-Dec-24
Typed Name:			Date:	16-Dec-24
Signature of DAFS Procurement Official:	DocuSigned by: 		Date:	12/18/2024
Typed Name:	Joseph Zrioka	Director of IT Procurement	Date:	12/18/2024