



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

18214F

EFFECTIVE BEGIN DATE: 04-02-2025
EXPIRATION DATE: 04-01-2026
PAGE: 1 of 6

VENDOR:

Bamboo Health Inc

VS000009725

**PO Box 632037
 Cincinnati, OH 45263-2037**

VENDOR CONTACT:

Haley Lehman

PHONE: 412-316-7045

EMAIL: hlehman@bamboohealth.com

ISSUER:

Carlos Fuentes

PHONE: 515-240-2698

EMAIL: carlos.fuentes1@iowa.gov

EXT:

FOB: FOB Dest, Freight Prepaid

Contract For: IBOP Prescription Monitoring Program (PMP) AWARxE

The parties agree to comply with the terms and conditions on the following attachments which are by this reference made a part of the Agreement. Attachments are on file with the Department of Administrative Services - Central Procurement.

Attachment 1: Competitive Solicitation RFP0918005004.

Attachment 2: Contractor's Response to Competitive Solicitation RFP0918005004 (except for any contractor objection or amendment to the Competitive Solicitation Document requirements that the State has not explicitly agreed to in writing).

Attachment 3: Contractor's Cost (final pricing documentation) Response to competitive solicitation document RFP0918005004.

Attachment 4: MA18214 Appriss (FY18-20) Signed SaaS Agreement.

Due to the contract being an Information Technology(I.T.) contract, the contract max life was extended from 6 years to 10 years. Contract max life modification was conducted in accordance with State of Iowa Code 129.10.11.

Contract Contact: Haley Lehman
 hlehman@bamboohealth.com
 Phone: 412-316-7045

RENEWAL OPTIONS

FROM 04-02-2026 **TO** 04-01-2027

FROM 04-02-2027 **TO** 04-01-2028

AUTHORIZED DEPARTMENT

ALL

588 Public Health, Dept Of

400 Health and Human Services, Department of



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

18214F

EFFECTIVE BEGIN DATE: 04-02-2025
 EXPIRATION DATE: 04-01-2026
 PAGE: 2 of 6

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
----------	--------------------------	------	-------------------------	------------------------------

1	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (First Term - 2 Years)

See service contract for details. \$200,000 first term.

2	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 3)

See service contract for details.

Payments made monthly. Not to exceed \$102,000/year.

3	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 4)

See service contract for details.

Payments made monthly. Not to exceed \$104,040/year.

4	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 5)

See service contract for details.

Payments made monthly. Not to exceed \$106,120/year.

6	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 6)



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

18214F

EFFECTIVE BEGIN DATE: 04-02-2025
 EXPIRATION DATE: 04-01-2026
 PAGE: 3 of 6

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
----------	--------------------------	------	-------------------------	------------------------------

See service contract for details.

Payments made monthly. Not to exceed \$108,250/year.

7	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 7)

See service contract for details.

Payments made monthly. Not to exceed \$111,247.50/year.

8	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 8)

See service contract for details.

Payments made monthly. Not to exceed \$114,387.43/year.

9	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 9)

See service contract for details.

Payments made monthly. Not to exceed \$117,610.05/year.

10	0.00000	EA	91596	\$ 0.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Annual Subscription Fees (Year 10)

See service contract for details.

Payments made monthly. Not to exceed \$ 120,918.35/year.

11	0.00000	EA	91596	
----	---------	----	-------	--



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

18214F

EFFECTIVE BEGIN DATE: 04-02-2025
 EXPIRATION DATE: 04-01-2026
 PAGE: 4 of 6

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
----------	--------------------------	------	-------------------------	------------------------------

\$ 215,000.000000
 \$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Statewide Integration Services (Annual fee) Amendment # 2

Statewide Integration Services (annual fee) See Amendment # 2

12	0.00000	EA	91596	\$ 186,000.000000 \$ 0.000000
----	---------	----	-------	----------------------------------

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
NarxCare Enterprise License

Optional/related services. See service contract for details.

13	0.00000	EA	91596	\$ 0.000000 \$ 0.000000
----	---------	----	-------	----------------------------

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Statewide Integration (Performance Incentive) Amendment # 2

Performance Incentive - Amendment # 2

* \$ 25,000 - If 8,000 - 8,999 Providers are receiving integrated Services by July 31, 2022

* \$45,000 - If 9,000 - 9,999 Providers are receiving integrated Services by July 31, 2022

* \$55,000 - If 10,000 - 10,999 Providers are receiving integrated Services by July 31, 2022

* \$65,000 - If 11,000 or more Providers are receiving integrated Services by July 31, 2022

14	0.00000	EA	91596	\$ 75,000.000000 \$ 0.000000
----	---------	----	-------	---------------------------------

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Web Page Design and/or Management Services
Development of PDMP Prescriber Report Already Paid in 2018.

One time payment per Change Order signed by Pharmacy Board. This line was paid in 2018

15	0.00000	EA	91596	\$ 0.000000
----	---------	----	-------	-------------



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

18214F

EFFECTIVE BEGIN DATE: 04-02-2025
 EXPIRATION DATE: 04-01-2026
 PAGE: 6 of 6

TERMS AND CONDITIONS

Referenced Terms

The parties agree to comply with the terms and conditions pursuant to the bid process which are by this reference made a part of the Agreement.

THIS MASTER AGREEMENT IS EFFECTIVE AS OF THE LATEST DATE SHOWN IN "EFFECTIVE BEGIN DATE" IN THE UPPER RIGHT HAND CORNER OR THE DATE BELOW SIGNED BY THE STATE OF IOWA.

CONTRACTOR		STATE OF IOWA	
CONTRACTOR'S NAME (If other than an individual, state whether a corp, partnership, etc.) Bamboo Health		AGENCY NAME DAS Central Procurement	
BY (Authorized Signature) <u><i>Nazir Rostom</i></u> <small>Nazir Rostom (Mar 12, 2025 19:16 EDT)</small>	Date Signed 3/12/2025	BY (Authorized Signature) <u><i>Carlos Fuentes</i></u> <small>Carlos Fuentes (Mar 13, 2025 08:52 CDT)</small>	Date Signed 3/13/2025
Printed Name and Title of Person Signing Chief Financial Officer		Printed Name and Title of Person Signing Carlos Fuentes, Statewide Procurement Officer	
Address 9901 Linn Station Suite 500, Louisville, KY 40223		Address Hoover State Office Building, 1305 East Walnut Street Des Moines, IA 50319	