PRE-BID CONFERENCE RESPONSE FORM THURSDAY, NOVEMBER 13, 2025, 12:30 PM

Solicitation Number BPM053770

MHBE Databricks Subscription Renewal

Return via e-mail this form to the Procurement Officer (Tracey D. Gamble) by Monday, November 10, 2025:

2025:	
	Maryland Health Benefit Exchange
	750 East Pratt Street, 6th Floor
	Baltimore, MD 21202
	Email: tracey.gamble1@maryland.gov
Please indica	ite:
Yes, the follo	owing representatives will be in attendance: (PLEASE PROVIDE NAME AND EMAIL
1.	
2.	
3.	
No, we will n	ot be in attendance.
Please specify	y whether any reasonable accommodations are requested:
Signature	Title
Name of Firm	n (please print)