



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**DIVISION OF PROCUREMENT SERVICES**  
 STATE OF MAINE

### PROCUREMENT JUSTIFICATION FORM (PJF)

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

PART I: OVERVIEW				
Department Office/Division/Program:		MCDCP/Division of Disease Prevention/WIC		
Department Contract Administrator or Grant Coordinator:		Shawn Belanger Jeanne Garza		
(If applicable) Department Reference #:		OIT-22-4601		
Amount: (Contract/Amendment/Grant)	\$ 377,100.00	Advantage CT / RQS #:	CT 10A 20211102000000001119	
CONTRACT	Proposed Start Date:	10/1/2021	Proposed End Date:	9/30/2023
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:		Solutran LLC Minneapolis, MN		
Brief Description of Goods/Services/Grant:		WIC EBT Maintenance and Support Services		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before 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.

The Maine Department and Health and Human Services (DHHS), Women, Infants, and Children (WIC) Program is exercising the first renewal period of two years for the executed contract with Solutran. This service was successfully implemented and is required to remain in place to meet a United States Maine WIC Program Office of Agriculture, Food and Nutrition Service (FNS) federal mandate to implement a statewide Electronic Benefit Transfer (EBT) solution (7 CFR Part 246 RIN 0584-AE21, § 246.12 Food delivery methods.). The system was fully implemented prior to the mandated delivery date of 10/1/2020.

The Maine WIC EBT Maintenance and Support renewal contract will provide ongoing monthly support, maintenance, and an additional test environment as needed to support the fully and successfully implemented WIC EBT system for the renewal period.

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

Maine WIC is exercising the first contract renewal period that was acquired through a Waiver from Competitive bid (WCB) based on requirements detailed in Montana's RFP. This procurement approach was approved by FNS and the Department to support acquiring a vendor and services to comply with the implementation mandate.

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

Federal funding pays for the eWIC contract. The contract for monthly services was negotiated and at .85cents Cost Per Case Month (CPCM). The Department obtained the Cost per Case Month (CPCM) costs by reviewing rates from other WIC EBT states and compiled an average for implementation services and ongoing system maintenance prior to the initial contract period and are still competitive.

The initial implementation contract also included implementation and ongoing support for the add-on feature of a Cash Value Benefit (CVB) redemption at WIC authorized farmers. This program is nearly ready to launch.

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

The Department will complete an RFP for services or join the New England Consortium of States competitive procurement that Maine is participating in on or before the contract ending period in 2029. Maine has participated in this consortium group of New England states with RFP development, scoring, and selection in order to be eligible to leverage terms from that procurement for future services as needed based on the solution and pricing offered through the collaborative competitive procurement, selection, and award.

### PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)


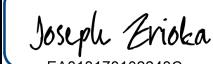
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V

**PART V: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by:  66738ED17E0C4B2...		
Typed Name:	Jim Lopatosky	Date:	Jan-05-2022
Signature of DAFS Procurement Official:	DocuSigned by:  EA913178102243C...		
Typed Name:	Joseph Zrioka	Date:	2/14/2022