



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:		DAFS/OIT/Workers' Compensation Board		
Department Contract Administrator or Grant Coordinator:		Rene LeBlanc		
(If applicable) Department Reference #:		N/A		
Amount: (Contract/Amendment/Grant)		\$ 24,240.84	Advantage CT / RQS #:	RQS 18B 20240603*1735
CONTRACT	Proposed Start Date:	6/10/2024	Proposed End Date:	6/9/2025
AMENDMENT	Original Start Date:	Click or tap to enter a date.	Effective Date:	
	Previous End Date:		New End Date:	Click or tap to enter a date.
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Progress Software Corporation 3005 Carrington Mill Boulevard, Suite 400 Morrisville, NC 27560		
Brief Description of Goods/Services/Grant:		Progress database software annual support for Workers' Compensation Board application environment.		

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.

Progress Software is the core database and middleware software used by the Workers' Compensation Board (WCB). This purchase is for annual support and maintenance for Progress database software. Software support is required to maintain the system at the latest patches, security and function release.

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

Standard commercial off-the-shelf computer software product. The State of Maine does not have software source code rights.

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

The costs were quoted by Progress Software. Software support is not available through the State of Maine software reseller, SHI. The State and Progress conducted a software audit in April 2024 to confirm that software license sizing was appropriate. The WCB has reviewed the license sizing and has confirmed no changes in need have occurred since the audit.

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

The WCB is the last agency using Progress. OIT and WCB are exploring use of other technology for the application. The Progress environment will not be expanded beyond WCB, however, WCB will continue to use it for the foreseeable future.

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) – If Yes, please be aware of the requirements from awarding federal agencies.


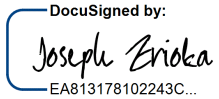
No – If No, proceed to Part V.

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

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?

 Yes, the requesting Department understands and acknowledges [MRS Title 5, §18-A, 2.](#)**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 <small>DocuSigned by: A29C99359A37464...</small>		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	6/17/2024
Signature of DAFS Procurement Official:	 <small>DocuSigned by: EA813178102243C...</small>		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	6/17/2024