



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 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:		DAFS/OIT		
Department Contract Administrator or Grant Coordinator:		Diana Olore		
(If applicable) Department Reference #:		N/A		
Agency Department Code:	18B	Advantage CT/RQS #:	CT 18B 20220919*0845	
Amt (Contract/Amendment/Grant):		\$ 56,780.28		
CONTRACT	Proposed/Original Start Date:	10/1/2022	Proposed/Most Recent End Date:	9/30/2027
AMENDMENT	New Effective Date:	Click or tap to enter a date.	New End Date (if Applicable):	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:		Pegasystems Inc. One Main Street, Cambridge MA 02142		
Brief Description of Goods/Services/Grant:		Pega Platform/Cloud Managed Services		

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 checked="" 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. Higher Education 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 Pegasystems agreement states there will be an “annual Inflation adjustments in an amount up to the corresponding increase in the U.S. Consumer Price Index (All Urban Consumers) or to a 3% increase whichever is less, in accordance with the Agreement. Inflation adjustments must be incorporated in a written amendment to the Agreement signed by both parties.” This increases the agreement based on that contractual language.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

The State of Maine currently has three Pega Applications hosted by Pegasystems. Pegasystems is a proprietary cloud hosting environment and no code/low code platform. While the creation and maintenance of these applications can (and is) outsourced to different vendors, there are no other hosting services options available for these applications.

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

This price adjustment is related to the original contract terms for up to a maximum increase of 3% based on the Consumer Price Index (CPI). The encumbered amount for FY2026 is \$626,671.00. The chart below shows the adjustment amount to meet the base rate, plus the CPI/3% contractual rate increase.

Base Rate FY2026	\$ 664,189.78
Encumbered FY2026	\$ 626,671.00
Base Rate Adjustment	\$ 37,518.78
FY2026 CPI Increase	\$ 19,261.50
Amendment 3 Total	\$ 56,780.28

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

While the current Pega applications exist, we will continue to work with Pega on negotiating prices as Pega is a proprietary cloud hosting environment. The applications will continue to be evaluated to determine the viability of keeping in the Pega platform or moving to a new application (either an enterprise offering or a new application).

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

Does this request utilize ARPA/MJRP funds?
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).
<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](#).

The requesting department’s signatory affirms, understands, and acknowledges Maine’s Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

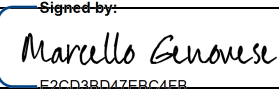
1. The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	10/22/2025

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department’s Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:			
Typed Name:	Marcello Genovese	Date:	10/22/2025