



State of Maine Department of Administrative and Financial Services

Document Type	Contractor Name	Advantage CT or RQS Number
Contract Amendment	KAINOS WORKSMART INC	20190611000000003816
Department	Contract Start Date	Internal Department Contract Number
18F-Controller's Office	7/1/19	
Short Description of Goods or Services	Contract End Date	Contract Amount
Information Technology Services	6/30/2022	\$5,203.53
		Approval Date Time
		8/7/20 1:13 PM

This contract has been approved by the Division of Purchases, Chair of the State Procurement Review Committee and encumbered by the Office of the State Controller.

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		18F- FINANCIAL SERVICES	
Department Contract Administrator or Grant Coordinator:		Phillip Platt - Director of Shared Services	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 5,203.53	Advantage CT / RQS #:	20190611000000003816
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	07/01/2019	Effective Date:
	Previous End Date:	07/01/2019	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		KAINOS WORKSMART INC WEWORK TERMINUS 100 (OFFICE 06-106) 3280 PEACHTREE ROAD ATLANTA, GA 30305	
Brief Description of Goods/Services/Grant:		Sole source need for a SaaS Test Automation Product and implementation services for the Workday Maine project.	

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

	A. Competitive Process		G. Grant
X	B. Amendment		H. State Statute/Agency Directed
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

State of Maine Procurement Justification Form

PART III: SUPPLEMENTAL INFORMATION

The original contract allowed for travel costs, but was not included in the contract amount, resulting in the need for this amendment.

2. Provide a brief justification for the selected vendor to supplement the response in Part II.

The vendor was already selected. The purpose of this amendment is to account for travel expenses that were allowed, but not included in the original agreement.

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

The automation testing implementation onboarding and advisory cost is \$157,654.
The Gold three-year total subscription cost is \$519,750 (annual subscription cost is \$173,250).
Total is \$677,404

In comparison, several other automation testing tools were priced ranging from \$6,500-\$12,000 per license. The project team would require a minimum of nine licenses totaling, \$58,500-\$108,000. Additionally, the services of managing the automation framework and test case management would require a minimum of two technical staff totaling approximately \$395,200. For us to implement a service comparable to the Kainos Gold Services subscription, we estimate we would pay a minimum of \$453,700 per year, or \$1.36 million over three years.

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

The department does not anticipate the needs for any additional agreements.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
	<small>DocuSigned by:</small>		
	<i>Heather L'Homme dieu Perrault</i>		
Printed Name:	Heather Perrault	Date:	7/10/2020
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>		
	<i>Justin Franzose</i>		
Printed Name:	<small>A EED9C7B3A8044E...</small> Justin Franzose	Date:	7/24/2020



AMENDMENT

DATE: **6/4/2020**

ADVANTAGE CONTRACT #: **CT 18F 20190611000000003816**

DEPARTMENT AGREEMENT #: **NA**

AMENDMENT AMOUNT: \$ **\$5,203.53**

This Amendment, is between the following Department of the State of Maine and Provider:

State of Maine DEPARTMENT

DEPARTMENT: **18F-Financial Services**

Address: **111 Sewall Street**

City: **Augusta**

State: **ME**

Zip Code: **04330**

PROVIDER

PROVIDER: **Kainos Worksmart Inc**

Address: **WeWork Terminus 100 (Office 06-106) 3280 Peachtree Road**

City: **Atlanta**

State: **GA**

Zip Code: **30305**

Provider's Vendor Customer #: **VC0000235259**

Each signatory below represents that the person has the requisite authority to enter into this Contract Amendment. The parties sign and cause this Contract Amendment to be executed.

Department of Admin and Financial Services

Kainos Worksmart Inc.

DocuSigned by:

Heather L'Hommedieu Perreault 7/10/2020

9C998649FAA247D...

Signature **Heather Perreault – Deputy
Commissioner of Finance** Date

DocuSigned by:

Nigel Hutchinson

20-07-2020 | 4:30 AM PDT

50704CF9457C436...

Signature **Name and Title** Date
Nigel Hutchinson

VP North America

Amendment rev. May 2020

Upon final approval by the Division of Procurement Services, a case details page will be made part of this contract.

AMENDMENT

The contract is hereby amended as follows: (Check and complete all that apply)

<input type="checkbox"/>	Amended Period:	Original Start Date: _____ Current End Date: _____ Amendment Start Date: _____ New End Date: _____ Reason:
<input checked="" type="checkbox"/>	Amended Contract Amount:	Amount of Adjustment: \$ \$5,203.53 New Contract Amount: \$ _____ Reason: The original contract allowed for travel costs, but was not included in the contract amount, resulting in the need for this amendment.
<input type="checkbox"/>	Amended Scope of Work:	The Scope of work in Rider A is amended as follows:
<input type="checkbox"/>	Other:	Describe the Changes:

All other terms and conditions of the original contract and subsequent contract amendments remain in full force and effect.

CODING

LINE TOTAL	FUND	DEPT	UNIT	SUB UNIT	OBJ	PROGRAM	PROGRAM PERIOD	BOND FUNDING	FISCAL YEAR
5,203.53	010	18F	2208	01	5560	HRMS	S2020		2020

LINE TOTAL	FUND	DEPT	UNIT	SUB UNIT	OBJ	PROGRAM	PROGRAM PERIOD	BOND FUNDING	FISCAL YEAR
\$									

Commodity Line 1, Accounting Line 1 has been increase by \$5,203.53 .