



Procurement Review Comprehensive Checklist
Procurement Services Division
This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION

General Tracking		Contract Terms	
FILE ID#: 26-2226	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$48,000.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 08/18/2026	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$192,000.00
	CURRENT TERM TOTAL COST: \$48,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
Vendor Information		Department Information	
VENDOR: Senior Medical Care, PLLC	VENDOR #: 44696	DEPT: DuPage Care Center	DEPT CONTACT NAME: Anita Rajagopal
VENDOR CONTACT: Dr. Angelo Miele	VENDOR CONTACT PHONE: 630-254-2271	DEPT CONTACT PHONE #: 630-784-4200	DEPT CONTACT EMAIL: anita.rajagopal@dupagecounty.gov
VENDOR CONTACT EMAIL: admiele@comcast.net	VENDOR WEBSITE:	DEPT REQ #: 7599	

Overview

DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Professional Services for a Medical Director for the DuPage Care Center, for the Period September 1, 2026 through August 31, 2027, for a contract amount not to exceed \$48,000.00, per Other Professional Services not suitable for competitive bid per 55 ILCS 5/5-1022(c). Vendor selected pursuant to DuPage County Procurement Ordinance 2-353(1)(b).

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished
Facility needs to engage the services of a Physician to act as Medical Director per State and Federal regulations. The Medical Director gives medical direction to the staff and other Physicians. He/She sees and cares for residents and oversees their medical conditions. Sits in on several different standing committee meetings. Regular in servicing of staff as to proper best care practices. Continuous resources to staff and is on call 24 hours a day/7days per week.
Licensure requirement and assurance of quality care of the residents of the DuPage Care Center.

SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.

DECISION MEMO REQUIRED Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

OTHER PROFESSIONAL SERVICES (DETAIL SELECTION PROCESS ON DECISION MEMO)

SECTION 3: DECISION MEMO

SOURCE SELECTION	Describe method used to select source. Quality of Life
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action). 1) DPCC recommends the approval of Medical Director Services for the DuPage Care Center, for the period September 01, 2026 through August 31, 2027. 2) Do not approve Medical Director Services for the DuPage Care Center, for the period September 01, 2026 through August 31, 2027, however, this function is a requirement of the Illinois Department of Public Health for licensure. Not only is it a licensure requirement, but it also is necessary to meet the DPCC resident's medical needs and to help ensure quality of life.

SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
NECESSITY AND UNIQUE FEATURES	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
MARKET TESTING	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
AVAILABILITY	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Senior Medical Care, PLLC	Vendor#: 44696	Dept: DuPage Care Center	Division: Administration/Nursing
Attn: Dr. Angelo Miele	Email: admiele@comcast.net	Attn: Anita Rajagopal	Email: Anita.rajagopal@dupagecounty.gov
Address: 923 Delles Road	City: Wheaton	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60189	State: IL	Zip: 60187
Phone: 630-254-2271	Fax:	Phone: 630-784-4200	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Senior Medical Care, PLLC	Vendor#: 44696	Dept: DuPage Care Center	Division: Administration/Nursing
Attn: Dr. Angelo Miele	Email: admiele@comcast.net	Attn: Anita.Rajagopal	Email: Anita.Rajagopal@dupagecounty.gov
Address: 923 Delles Road	City: Wheaton	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60189	State: IL	Zip: 60187
Phone: 630-254-2271	Fax:	Phone: 630-784-4200	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): September 1, 2026	Contract End Date (PO25): August 31, 2027

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Medical Director	FY26	1200	2050	53070		12,000.00	12,000.00
2	1	EA		Medical Director	FY27	1200	2050	53070		36,000.00	36,000.00
<i>FY is required, ensure the correct FY is selected.</i>										Requisition Total	\$ 48,000.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. Professional Services for a Medical Director for the DuPage Care Center, for the Period September 1, 2026 through August 31, 2027, for a contract amount not to exceed \$48,000.00, per Other Professional Services not suitable for competitive bid per 55 ILCS 5/5-1022(c). Vendor selected pursuant to DuPage County Procurement Ordinance 2-353(1)(b).
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. August 18, 2026 Human Services Committee August 25, 2026 County Board Meeting
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.