



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

### SECTION 1: DESCRIPTION

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 23-3488	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$34,500.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 11/07/2023	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$142,500.00
	CURRENT TERM TOTAL COST: \$36,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Northwestern Medicine Regional Medical Group/Dr. Miele	VENDOR #: 19217	DEPT: DuPage Care Center	DEPT CONTACT NAME: Anita Rajagopal
VENDOR CONTACT: Dr. Angelo Miele	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #: 630-784-4200	DEPT CONTACT EMAIL: anita.rajagopal@dupagecounty.gov
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #: 7420	

#### 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 December 1, 2023 through November 30, 2024, for a contract amount not to exceed \$36,000.00, per Other Professional Services.

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 7 days a 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

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact. QUALITY OF LIFE
SOURCE SELECTION	Describe method used to select source. Other Professional Services
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 renewal of Medical Director Services for the DuPage Care Center, for the period December 1, 2023 through November 30, 2024 2) Do not approve renewal of Medical Director Services for the DuPage Care Center, for the period December 1, 2023 through November 30, 2024, 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

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	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.
<b>MARKET TESTING</b>	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.
<b>AVAILABILITY</b>	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: Northwestern Medicine Regional Group/Dr. Miele	Vendor#: 19217	Dept: DuPage Care Center	Division: Administration
Attn: Devin Marcovici	Email: devin.marcovici@nm.org	Attn: Anita Rajagopal	Email: anita.rajagopal@dupagecounty.gov
Address: 25 N. Winfield Road	City: 25 N. Winfield Road	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60190	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-784-4200	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Northwestern Medicine Regional Group/Dr. Miele	Vendor#:	Dept: DuPage Care Center	Division:
Attn: Dr. Angelo Miele	Email:	Attn:	Email:
Address: 233 South Gary Avenue	City: Bloomingtondale	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60108	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-784-4200	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): December 1, 2023	Contract End Date (PO25): November 30, 2024
Contract Administrator (PO25): Christine Kliebhan			

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	FY24	1200	2050	53090		36,000.00	36,000.00
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 36,000.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. Professional Services for a Medical Director for the DuPage Care Center, for the period December 1, 2023 through November 30, 2024, for a contract amount not to exceed \$36,000.00, per Other Professional Services.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. November 7, 2023 Human Services Committee                      November 14, 2023 County Board
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.

The following documents have been attached:    ☐ W-9            ☒ Vendor Ethics Disclosure Statement