



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#: 23-0605	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$22,800.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 02/20/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$22,800.00
	CURRENT TERM TOTAL COST: \$22,800.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: CareVoyant, Inc.	VENDOR #: 13829	DEPT: 7433	DEPT CONTACT NAME: Shauna Berman
VENDOR CONTACT: Kandasamy Pasupathy	VENDOR CONTACT PHONE: 847-925-9148	DEPT CONTACT PHONE #: 630-784-4261	DEPT CONTACT EMAIL: shauna.berman@dupagecounty.gov
VENDOR CONTACT EMAIL: pasu@carevoyant.com	VENDOR WEBSITE:	DEPT REQ #: 7433	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). CV hosting for large database and additional licenses for the DuPage Care Center, for the period May 1, 2024 through April 30, 2025, for a total contract not to exceed \$22,800.00, per Other Professional Services.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished CareVoyant stores data from our Legacy Medical Records, as DuPage Care Center is required by law to maintain Medical records (eight user licenses)			

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. FINANCIAL PLANNING
SOURCE SELECTION	Describe method used to select source. The DuPage Care Center owns the CareVoyant Clinical/Financial System, that is at the DuPage Care Center. CareVoyant stores the medical records, that is required by law.
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) Approve contract for CV hosting for large database for the for the DuPage Care Center, for the period May 1, 2024 through April 30, 2025. 2) Do not approve contract for CV hosting for large database for the for the DuPage Care Center, for the period May 1, 2024 through April 30, 2025, however, the DuPage Care Center will still need to maintain medical records, required by law.

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: CareVoyant, Inc.	Vendor#: 13289	Dept: DuPage Care Center	Division: Administration
Attn: Kandasamy Pasupathy	Email: pasu@carevoyant.com	Attn: Shauna Berman	Email: shauna.berman@dupagecounty.gov
Address: 3701 Algonquin Road, Suite 530	City: Rolling Meadows	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60008	State: IL	Zip: 60187
Phone: 847-925-9148	Fax:	Phone: 630-784-4261	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: CareVoyant, Inc.	Vendor#: 13289	Dept: DuPage Care Center	Division:
Attn:	Email:	Attn: Shauna Berman	Email: shauna.berman@dupagecounty.gov
Address: 3701 Algonquin Road, Suite 530	City: Rolling Meadows	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60008	State: IL	Zip: 60187
Phone: 847-925-9148	Fax:	Phone: 630-784-4261	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): May 1, 2024	Contract End Date (PO25): April 30, 2025
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		CV Hosting for Large Database	FY24	1200	2000	53807		22,800.00	22,800.00
<i>FY is required, assure the correct FY is selected.</i>										Requisition Total	\$ 22,800.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. CV hosting for large database and additional licenses for the DuPage Care Center, for the period May 1, 2024 through April 30, 2025, for a total contract not to exceed \$22,800.00, per Other Professional Services.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Human Services Committee 02/20/24
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