

Office of Management and Budget Division of Purchasing



Non-Competitive Contract Request Form

Department	LMPD	Department Contact	Kristie Martin
Contact Email	Kristie.Martin@louisvilleky.gov	Contact Phone	574 5060

Contract Type: check one	New	Amendment			
		Additional Funds	Time Extension	Scope	
Professional Service	/				
Sole Source (goods/services)		-			
	Start	End			
Requested Contract Dates (MM/DD/YYYY)	07/01/2022	06/30/2023			

VENDOR INFORMATION

Vendor Legal Name	Community Medical Associa	ates						
DBA	Norton Children's Medical Group							
Point of Contact	Amy Sugg		Email	amy.sugg@nortonhealthcare		hcare.org		
Street	4801 Olympia Park Plaza, Suite 3000							
Suite/Floor/Apt				Phone	502 852 8608			
City	Louisville		State	Ку	Zip Code	40241		
Federal Tax ID#	SSN# (If so		propriet	or)				
Louisville Revenue Co	ommission Account #	1						
Human Relations Con	nmission Certified Vendors	Certified Minority Owned Business		Certified Woman Owned business			Disabled Owned business	
Select if applicable			211					

FINANCIAL INFORMATION

Not to Exceed Contract Amount		\$125,000		(including reimbursement expenses, if applicable			
Fund Source: General Fund	×			WW. 4.4. 100			
Federal Grant		Federal Granting Agency		1.0000000000000000000000000000000000000	7450000	- STATE	
Other		Describe:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Account Code String #	1101	305 250	34 250	6464 [521301]			
Payment Pata	\$300.00	per hour		per day	per service		
Payment Rate		per month		Other			
Pourmont Francisco	✓	Monthly		Upon Comple	tion / Delivery		
Payment Frequency		Quarterly		Other			



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CONTRACT SCOPE and PURPOSE (Attach additional documentation if necessary)

Amendments: Describe the circumstances under which a time extension or scope change is needed.

New: Be specific about the work to be performed / product to be purchased including but not limited to: scope of work; description of service; work product created; why the service / product is necessary; and benefit to Louisville Metro Government.

The purpose of this contract is for clinical forensic services in the area of pediatric forensic medicine. These forensic services deal specifically with cases of physical abuse perpetrated against children. Norton Pediatrics also agrees to provide 8 hours education about recognition of abuse and neglect to LMPD officers.

JUSTIFICATION FOR NON-COMPETITIVE GOOD/SERVICE (Attach additional documentation if necessary)

Provide justification including but not limited to: a description of the unique features that prohibit competition; research conducted to verify the vendor as the only known source (sole source); why the service (PSC) is not feasible to be provided by LMG staff or expertise does not exist; known compatibility, proprietary and/or timing issues.

Norton Children's Medical Group has forensic physicians from the Department of Pediatrics who have the experience, expertise and qualifications necessary to provide forensic examinations of these patients and pertinent medical records.

AUTHORIZATIONS: Per KRS 45A.380, I have determined that competition is not feasible for the above described good / service and there is a single source within a reasonable geographical area of the good / service to be procured; or the resulting contract is for the services of a licensed professional, technician, artist, or other non-licensed professional service.

Department Director Deputy Cluss	Davardino Whit Date 101	23 22
Signature	ocquelym Guinn-Villagel	
Monica L. Harmon	7/	/ 6/2022
OMB Signature	Date	