

CONTRACT

This contract, executed this 1st day of October 2018, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and **CORRECTHEALTH MUSCOGEE, LLC (ATLANTA, GA)**, hereinafter called the "Contractor".

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

1. That the Contractor met all proposal requirements to provide ***INMATE MEDICAL AND PHARMACY SERVICES FOR MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)***, per ***RFP No. 18-0022***, and was awarded the Contract by Columbus Council on Tuesday, August 28, 2018, per the attached ***RESOLUTION No. 315-18***. The contract term shall be for two (2) years with the option to renew for three (3) additional twelve-month periods, in accordance with the specifications prepared by the City and the proposal of the Contractor.

2. The Contractor will, at its own cost and expense, furnish all labor, materials, and equipment required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the Health Services Agreement; the Contractor's business requirements; the City's Request for Proposals, dated April 13, 2018; the Contractor's proposal, dated May 3, 2018; the clarification documents; and the negotiation documents, which are attached hereto as exhibits "A", "B", "C", "D", "E", and "F" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.

3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.



FORM 5

CONTRACT SIGNATURE PAGE

Inmate Medical and Pharmacy Services for Muscogee County Jail (Annual Contract)
RFP No. 18-0019

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Steph M. Scott
Witness as to the signing of the contract

[Signature]
Witness as to the signing of the contract

(Corporate seal, if applicable)

By: [Signature] 5/16/18
Signature of Authorized Representative Date

Carlo A. Musso, MD
Print Name and Title of Signatory

Company: CorrectHealth Muscogee, LLC

Company Ordering Address

3384 Peachtree Rd., NE, Suite 700
Atlanta, GA 30326
Contact: Carlo A. Musso, MD
Contact Email carlo.musso@correcthealth.org
Telephone 770-692-4750, 209 Fax 770-692-4754

Company Payment Address

3384 Peachtree Rd., NE, Suite 700
Atlanta, GA 30326
Contact: Carlo A. Musso, MD
Contact Email carlo.musso@correcthealth.org
Telephone: 770-692-4750, 209 Fax 770-692-4754

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this 1st day of October 2018

[Signature]
Isaiah Hugley, City Manager

APPROVED AS TO LEGAL FORM:

[Signature]
Clifton C. Fay, City Attorney

ATTEST:

[Signature]
Lindsey Glisson, Deputy Clerk of Council

EXECUTION AUTHORIZED
By Resolution No. 315-18

COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL

A RESOLUTION
NO. 315-18

"ITEM B"
C.M. 08-28-18(4)(B)
315-18

A RESOLUTION AUTHORIZING THE EXECUTION OF AN ANNUAL CONTRACT WITH CORRECTHEALTH MUSCOGEE, LLC (ATLANTA, GA) FOR COMPREHENSIVE MEDICAL AND PHARMACY SERVICES FOR INMATES INCARCERATED IN THE MUSCOGEE COUNTY PRISON.

WHEREAS, an RFP was administered (RFP No. 18-0022) and five proposals were received; and,

WHEREAS, the proposals submitted by CorrectHealth Muscogee, LLC met all proposal requirements and was evaluated most responsive to the RFP; and,

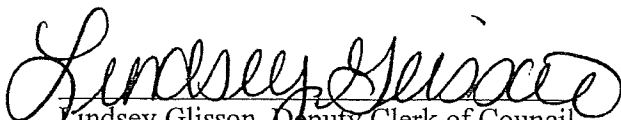
WHEREAS, the initial term of the contract shall be for two (2) years with the option to renew for three (3) additional twelve-month periods. The contract renewals will be contingent upon the mutual agreement of the City and the Contractor.

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA, HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to execute an annual contract with CorrectHealth Muscogee, LLC (Atlanta, GA) for comprehensive medical and pharmacy services for inmates incarcerated in the Muscogee County Prison. Funds are budgeted each fiscal year for this ongoing expense: General Fund – MCP – Warden – Consulting; 0101-420-1000-MCCI-6315.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the 28th day of August, 2018 and adopted at said meeting by the affirmative vote of nine members of said Council.

Councilor Allen voting	<u>YES</u>
Councilor Baker voting	<u>YES</u>
Councilor Barnes voting	<u>YES</u>
Councilor Davis voting	<u>ABSENT</u>
Councilor Garrett voting	<u>YES</u>
Councilor House voting	<u>YES</u>
Councilor Huff voting	<u>YES</u>
Councilor Thomas voting	<u>YES</u>
Councilor Turner Pugh voting	<u>YES</u>
Councilor Woodson voting	<u>YES</u>


Lindsey Glisson, Deputy Clerk of Council

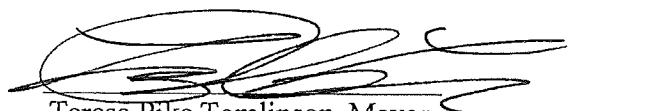

Teresa Pike Tomlinson, Mayor

EXHIBIT A

Health Services Agreement

HEALTH SERVICES AGREEMENT

THIS HEALTH SERVICES AGREEMENT (hereinafter referred to as "AGREEMENT") by and between the COLUMBUS CONSOLIDATED GOVERNMENT (hereinafter referred to as "CITY"), acting by and through the Muscogee County Prison, and CORRECTHEALTH MUSCOGEE, LLC (hereinafter referred to as "COMPANY"), is entered into as of the 1st day of October, 2018 to be effective as set forth in Paragraph 6.1, below.

WITNESSETH:

WHEREAS, CITY is charged by law and pursuant to an annual agreement with the Georgia Department of Corrections (hereinafter referred to as DOC) with the responsibility for obtaining and providing certain reasonably necessary medical care for prisoners of the MUSCOGEE COUNTY PRISON (hereinafter called "PRISON") and,

WHEREAS, the CITY desires to provide for health care to prisoners in accordance with applicable law and its agreement with DOC; and,

WHEREAS, CITY desires to enter into this Agreement with COMPANY to promote this objective; and,

WHEREAS, COMPANY is in the business of providing correctional healthcare services under contract and desires to provide such services for the CITY under the express terms and conditions contained herein.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter made, the parties hereto agree as follows:

ARTICLE I: HEALTH CARE SERVICES

- 1.1 General Engagement. CITY hereby contracts with COMPANY to provide healthcare services to all prisoners under the custody and control of the Muscogee County Prison to include prisoners assigned to the PRISON by DOCs (hereinafter referred to as state offenders) as well as local offenders from the Muscogee County Court System held at the PRISON.
- 1.2 Scope of General Services. The responsibility of COMPANY for the healthcare of a prisoner commences with the commitment of a prisoner to the custody of the PRISON. COMPANY shall provide on a regular basis: nursing care, provider (physician and / or midlevel provider) care, dental care, tele-health, onsite emergency medical services, onsite laboratory studies, on-site radiology, medication administration, non-capital medical equipment, medical supplies, office supplies, and medical waste disposal, as set forth in COMPANY's Proposal dated May 18, 2018, in response to RFP No. 18-0022. COMPANY shall not be financially responsible for the cost of pharmaceuticals, on-site specialty care, off-site specialty care, hospitalizations, all other off-site healthcare, or ambulance services.
- 1.3 Pharmacy Management Services. COMPANY shall provide a pharmaceutical management program for the JAIL health services at no additional cost that shall include formulary and non-formulary oversight; prescribing, and dispensing of medications; recordkeeping and

the secure and proper storage of all medications in accordance with NCHC standards, JAIL policy and applicable law. Costs of the actual pharmaceutical products will be invoiced monthly and reimbursed to COMPANY by MCSO at its best-negotiated rate with no commission or management fee.

- 1.4 Specialty Care Services. When non-emergency specialty care is required and cannot be rendered at the PRISON, COMPANY will arrange with DOC staff for the transportation of the prisoners in accordance with Section 1.8 of this Agreement.
- 1.5 On-Site Emergency Services. COMPANY shall provide, at its own cost, on-site emergency medical care, as medically necessary.
- 1.6 Injuries Incurred Prior to Incarceration; Pregnancy. COMPANY will not be financially responsible for the cost of any medical treatment for health care services provided to any prisoner prior to the prisoner's commitment into the custody of the PRISON. Furthermore, COMPANY is not financially responsible for the cost of services outside the PRISON for any healthcare treatment or health care services provided to medically stabilize any prisoner presented at booking with a life threatening injury or illness or in immediate need of emergency medical care, if said prisoner is not in the custody of the PRISON.

Once it has been determined by COMPANY's intake medical personnel that the prisoner has been medically stabilized, and accepted by PRISON personnel into the custody of the PRISON, COMPANY will, commencing at that point, then become responsible for the medical treatment for health care services rendered at the PRISON, regardless of the nature of the illness or injury and whether or not the illness or injury occurred prior or subsequent to the individual's incarceration at the PRISON. A prisoner shall be considered medically stabilized when the patient's medical condition no longer requires immediate emergency medical care or outside hospitalization, and when any and/or all applicable medical clearances have been provided to the DOC personnel, so that the prisoner can reasonably be housed inside the PRISON.

It is expressly understood that COMPANY shall not be responsible for costs associated with the health care of any infants born to prisoners. COMPANY shall provide health care services to prisoners up to, though, and after the birth process, but health care services provided to an infant following birth, other than those services that may be delivered in the PRISON prior to transport to a hospital, will not be the financial responsibility of COMPANY. In any event, COMPANY shall not be responsible for the costs associated with the performing or furnishing of elective abortions.

- 1.7 Prisoners outside the Facility. The health care services contracted in the Agreement are intended only for those prisoners in the actual physical overnight custody of the PRISON. This does not include prisoners who are under guard in outside facilities. Such prisoners are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of COMPANY with respect to the payment or the furnishing of their health care services. Persons in the physical custody of other public safety or other law enforcement/penal jurisdictions at the request of CITY or PRISON are likewise excluded from the population

count and are not the responsibility of COMPANY for the furnishing or payment of health care services.

The cost of medical services provided to prisoners who become ill or are injured while on such temporary release, work release, or escape status will not be the responsibility of COMPANY. However, prisoners on work detail who are supervised by PRISON or other City law enforcement personnel and become injured will be the responsibility of COMPANY as long as they are returned to the PRISON to be treated by COMPANY personnel. These prisoners will be part of the daily census count.

- 1.8 Elective Medical Care. COMPANY is not responsible for providing elective medical care to prisoners. For purposes of the Agreement, "elective medical care" means medical care, which, if not provided, would not cause definite harm to the prisoner's well-being. PRISON, DOC where applicable and / or CITY must review any referral of prisoners for elective medical care prior to provision of such services.
- 1.7 Transportation Services. To the extent any prisoner requires off-site non-emergency health care treatment including, but not limited to, hospitalization care and specialty services, the PRISON or DOC will, upon request by COMPANY, provide transportation as reasonably available provided that such transportation is scheduled in advance. When medically necessary, COMPANY shall arrange for all emergency ambulance transportation of prisoners. COMPANY will not be financially responsible for the cost of ambulance services.
- 1.8 Utilization Management/Billing Adjudication: COMPANY shall provide utilization management services consisting of a prospective review, concurrent review, readmission review and retrospective review for offsite medical services. Such retrospective reviews shall be completed within 30 days of receipt of the invoice for the service. Upon completion of utilization management reviews, a copy of which shall be supplied to the Warden, COMPANY shall pay offsite medical providers on behalf of CITY and invoice CITY for reimbursement of the medical expenses paid by COMPANY. All approved offsite service invoices approved and paid by COMPANY will be billed for reimbursement on the next available monthly billing cycle, but in no event shall more than 90 days elapse between the receipt of an off-site invoice and its presentation to the CITY's Finance Department for payment unless it is placed on a list of disputed claims. The Warden and CCG shall be notified of all outstanding disputed claims on a monthly basis. With respect to any invoices pertaining to off-site services provided by Columbus Medical Center or its affiliates pursuant to a contract by and between the City and the Medical Center Hospital Authority of Columbus, Georgia for the provision of hospital care and certain referrals for care for prisoners dated as of July 1, 1992, as thereafter amended, COMPANY shall provide utilization review services described above, but it will make no payments and instead will, within 60 days from receipt of the invoice, forward approved charges to the Columbus, Georgia Finance Department for approval and payment pursuant to the terms of the contract referenced herein. COMPANY will follow applicable state laws and will keep the CITY and the Warden apprised of its utilization management practices. In addition, COMPANY will manage utilization of all medical services for state offenders in accordance with paragraph 3 of the CITY's annual agreement with DOC for the care of DOC prisoners.

- 1.9 Penalties for Non-compliance. The following are areas of concern that will be addressed with penalties for non-compliance. A period of ninety (90) days will be allotted from the first day of the medical contract to allow the vendor to make necessary adjustments and to correct these issues.

14 Day Health Assessments: Any health assessment not completed within the 14-day period will be assessed a penalty of \$50 for each health assessment not completed.

Sick Call Requests: Any urgent/emergent sick call request not addressed within 4 hours during normal business hours or 24 hours if outside of normal business hours, or any non-emergent sick call not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$10.00 per inmate request, per day until appropriately addressed.

Medical Grievances: Any Medical Grievance not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$25.00 per inmate request/grievance, per day until appropriately addressed.

Medication Distribution: ALL medication passes must be accomplished within the established timeframe dedicated to medication pass. Medication issue shall be conducted within a time as will not disrupt the patient's dosing schedule. Failure to accomplish a med pass for any reason is unacceptable and shall be considered a breach of contract and the Sheriff may elect to void the contract for medical services.

ARTICLE II: PERSONNEL

- 2.1 Staffing. COMPANY shall provide medical and support personnel reasonably necessary for the rendering of health care services to prisoners at the PRISON, as identified on Exhibit A, which is attached hereto. At the sole discretion of the COMPANY, some services may be provided via tele-health.
- 2.2 Licensure, Certification and Registration of Personnel. All personnel provided or made available by COMPANY to render services hereunder shall be licensed, certified or registered, in their respective areas of expertise as required by applicable Georgia law.
- 2.3 CITY's Satisfaction with Health Care Personnel. If the Warden or Deputy Warden of the PRISON becomes dissatisfied with any health care personnel provided by COMPANY hereunder, or by any independent contractor, subcontractor or assignee, COMPANY, in recognition of the sensitive nature of correctional services, shall, following receipt of written notice from the Warden or Deputy Warden of the PRISON of the grounds for such dissatisfaction and in consideration of the reasons therefore, exercise its best efforts to resolve the problem. If the problem is not resolved satisfactorily to the Warden or Deputy Warden of the PRISON, COMPANY shall remove or shall cause any independent contractor, subcontractor, or assignee to remove the individual about whom the DOC has expressed dissatisfaction. Should removal of an individual become necessary, COMPANY will be

allowed reasonable time, prior to removal, to find an acceptable replacement, without penalty or any prejudice to the interests of COMPANY.

- 2.4 Use of DOC Personnel and Prisoners in the Provision of Health Care Services. DOC personnel nor prisoners shall be employed or otherwise engaged by either COMPANY or DOC in the direct rendering of any health care services.
- 2.5 Subcontracting and Delegation. In order to discharge its obligations hereunder, COMPANY will engage certain health care professionals as independent contractors rather than as employees. CITY and DOC consent to such subcontracting or delegation. As the relationship between COMPANY and these health care professionals will be that of independent contractor, COMPANY will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. COMPANY will not exercise control over the manner or means by which these independent contractors perform their professional medical duties. However, COMPANY shall exercise administrative supervision over such professionals necessary to insure the strict fulfillment of the obligations contained in this Agreement. For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide MCSO proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor that satisfies the requirements set forth in Section 8.1 below.
- 2.6 Discrimination. During the performance of this Agreement, COMPANY, its employees, agents, subcontractors, and assignees agree as follows:
- a. None will discriminate against any employee or applicant for employment because of race, religion, color, gender or national origin, except where religion, gender or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor.
 - b. In all solicitations or advertisements for employees, each will state that it is an equal opportunity employer.
 - c. Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of the section.

ARTICLE III: REPORTS AND RECORDS

- 3.1 Medical Records. COMPANY shall cause and maintain complete and accurate medical records for each Prisoner who has received health care services. Each medical record will be maintained in accordance with applicable laws. The medical records shall be kept separate from the prisoner's confinement record. A complete legible copy of the applicable medical records shall be available at all times, to the Warden, as custodian of the person of the patient. Medical records shall be kept confidential. No information contained in the medical records shall be released by COMPANY except as provided by policy, by a court order, or otherwise in accordance with applicable law. COMPANY shall, at its own cost, provide all medical personnel necessary to maintain the medical records. At the termination of this Agreement, all medical records shall be delivered to and remain

with the PRISON. However, PRISON shall provide COMPANY with reasonable ongoing access to all pertinent medical records even after the termination of this Agreement for the purposes of defending or investigating litigation.

- 3.2 Regular Reports by COMPANY to CITY. COMPANY shall provide to PRISON and/or CITY, on a date and in a form mutually acceptable to COMPANY and CITY, monthly reports relating to services rendered under this Agreement.
- 3.3 Prisoner Information. Subject to the applicable Georgia law, in order to assist COMPANY in providing the best possible health care services to prisoners, DOC will provide COMPANY with information pertaining to prisoners that COMPANY and PRISON or DOC mutually identify as reasonable and necessary for COMPANY to adequately perform its obligations hereunder.
- 3.4 COMPANY Records Available to CITY with Limitations on Disclosure. COMPANY shall make available to CITY, at CITY's request, records, documents and other papers relating to the direct delivery of health care services to Prisoners hereunder. CITY understands that written operating policies and procedures employed by COMPANY in the performance of its obligations hereunder are propriety in nature and will remain the property of COMPANY and shall not be disclosed without written consent. Information concerning such may not, at any time, be used, distributed, copied or otherwise utilized by CITY or DOC, except in connection with the delivery of health care services hereunder, or as permitted or required by law, unless such disclosure is approved in advance writing by COMPANY. Proprietary information developed by COMPANY shall remain the property of COMPANY. Provided; however, MCSO will not be prevented from sharing such COMPANY as may be required by applicable provisions of the Georgia Open Records Act.
- 3.5 CITY Records Available to COMPANY with Limitations on Disclosure. During the term of this Agreement and for a reasonable time thereafter, CITY will provide COMPANY at COMPANY's request, CITY's records relating to the provision of health care services to prisoners as may be reasonably requested by COMPANY or as are pertinent to the investigation or defense of any claim related to COMPANY's conduct. Any such information provided by CITY to COMPANY that CITY considers confidential shall be kept confidential by COMPANY and shall not, except as may be required by law, be distributed to any third party without the prior written approval of the CITY .

ARTICLE IV: SECURITY

- 4.1 General. COMPANY and CITY understand that adequate security services are essential and necessary for the safety of the agents, employees, and subcontractors of COMPANY as well as for the security of prisoners and PRISON personnel, consistent with the correctional setting. PRISON personnel will take all reasonable steps to provide sufficient security to enable COMPANY to safely and adequately provide the health care services described in this Agreement. It is expressly understood by CITY and COMPANY that the provision of security and safety for the COMPANY personnel is a continuing precondition of COMPANY's obligation to provide its services in a routine, timely, and proper fashion. This provision, however shall not be considered to and shall not be construed to be a waiver of

any defense, including sovereign or official immunity, to any claim against CITY, PRISON, or DOC by a prisoner, employee of company or any other person in anyway whatsoever.

- 4.2 Security During Transportation Off-Site. PRISON or DOC will provide prompt and timely security as medically necessary and appropriate in connection with the transportation of any prisoner between the PRISON and any other location for off-site services as contemplated herein.

ARTICLE V: OFFICE SPACE, EQUIPMENT, INVENTORY AND SUPPLIES

- 5.1 General. CITY, through the PRISON budget, agrees to provide COMPANY with reasonable and adequate office and medical space, facilities, and telephone equipment with dedicated line in the medical area. COMPANY will obtain, with the assistance of CITY, secured internet access (minimum speeds 3MB down/3MB up) with a static public IP address as required for high definition telehealth. This internet connection will be for sole and exclusive use by COMPANY. CITY will pay for utilities (e.g. gas, electric, water). Further, CITY will provide necessary maintenance and housekeeping of the office space and facilities. COMPANY will be responsible for the cost of phone lines, as well as phone usage, including long distance.

With regard to telemedicine, COMPANY will provide for all necessary equipment and any necessary internet / connection line, as set forth above.

COMPANY will provide medical and office supplies used in the healthcare delivery system administered at the PRISON. This includes medical supplies, medical records, office supplies, and forms. COMPANY will also provide for all non-capital medical equipment (i.e. less than \$500). CITY will be responsible for any capital medical equipment (i.e. more than \$500).

- 5.2 Delivery of Possession. CITY will provide to COMPANY beginning on the date of commencement of this Agreement, possession and control of all medical and office equipment and supplies in place at the PRISON's health care unit.

At the commencement of service by COMPANY an inventory of all supplies, medical and office equipment as described herein will be completed in writing by CITY personnel. This inventory will be reviewed and approved in writing by the authorized agent of the CITY as well as the COMPANY.

At the termination of this or any subsequent Agreement, COMPANY will return to the CITY possession and control all supplies, medical and office equipment, in working order, reasonable wear and tear accepted, which were in place at the PRISON's health care unit prior to the commencement of services under this Agreement. Any such return will require written confirmation, executed by the Warden of the PRISON, for proper acceptance.

ARTICLE VI: TERM AND TERMINATION OF AGREEMENT

- 6.1 Initial Term. The initial term of this Agreement will be two (2) years, from October 1, 2018 through September 30, 2020. This Agreement is renewable under the terms set forth in

Exhibit B for three additional one year terms, upon delivery of written notice of intent to renew provided to COMPANY at least ninety (90) days prior to the expiration of the then-existing term.

- 6.2 Termination. This Agreement may be terminated as otherwise provided in this Agreement or as follows:
- a. Termination by Agreement. In the event that each of the parties mutually agrees in writing, this Agreement may be terminated on the terms and date stipulated therein.
 - b. Termination by Cancellation. This Agreement may be canceled, without cause, by either party upon ninety (90) days prior written notice in accordance with Section 9.3 this Agreement.
- 6.3 Responsibility for Prisoner Health Care. Upon termination of this Agreement, all responsibility for providing health care services to all prisoners, including prisoners receiving health care services at sites outside the PRISON will be transferred from COMPANY to CITY.

ARTICLE VII: COMPENSATION

- 7.1 Base Compensation & Per Diem Compensation. CITY will pay COMPANY as indicated on Exhibit B. This compensation level assumes a maximum prisoner population of 600 prisoners.

COMPANY will invoice CITY during the month prior to the month of service. CITY agree to pay COMPANY within thirty (30) days of receipt of the invoice provided that the invoice is properly documented and not disputed. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to COMPANY will be prorated accordingly for the shortened month.

- 7.2 Per Diem. When the daily prisoner census exceeds 600, CITY agrees to compensate COMPANY a per diem rate (cost per prisoner per day) for each prisoner in excess of 600, as referenced on Exhibit B.

This per diem is intended to cover additional costs in those instances where minor, short-term increases in the prisoner population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the prisoner population increases to more than 600 prisoners. As such, if the census increases by 20% and is sustained, the parties agree to negotiate in good faith for additional staffing and associated compensation in order to continue to provide services to the increased number of prisoners and maintain the quality of care consistent with COMPANY's Proposal and this Agreement.

- 7.3 Prisoners from Other Jurisdictions. Medical care rendered within the PRISON to prisoners from outside jurisdictions, and housed in the PRISON pursuant to written contracts between CITY / DOC and such other jurisdictions or the State of Georgia, or by statute, will be the responsibility of COMPANY but as limited by this Agreement. Medical care that

cannot be rendered within the PRISON will be arranged by COMPANY and the costs of such care subject to reimbursement by the other jurisdiction, the State of Georgia, or CITY / DOC. This Section does not apply to sentenced felons awaiting transfer to State facilities or prisoners housed in the PRISON on ex parte orders. COMPANY shall directly bill other counties for onsite professional medical fees, supplies, tests and medications. COMPANY will forward other bills for offsite healthcare and program support services provided to other jurisdictions housing prisoners in the PRISON. A nominal standard fee schedule will be utilized and is available upon request. CITY agree to assist COMPANY with these billing activities.

- 7.4 Compensation Escalator. On each subsequent annual renewal, the compensation paid to COMPANY, including base compensation and per diem rate, shall be adjusted by the current Consumer Price Index-Wage Earners and Clerical Workers (CPI-W), Medical Care Component (MCC) for the Southern Region of the United States.
- 7.5 Change in Standard of Care or Scope in Services. The price in Section 7.1, above, quoted reflects the scope of services as outlined herein and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g. treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in the contract price and would need to be negotiated with the CITY. Further, if the mission and/or purpose of the PRISON changes substantially, the CITY agrees to negotiate with COMPANY in good faith for any change in services.

ARTICLE VIII: LIABILITY AND RISK MANAGEMENT

- 8.1 Insurance. At all times during this Agreement, COMPANY shall maintain professional liability insurance covering COMPANY, and naming CITY as additional insureds, for its work at the PRISON with limits of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the aggregate. Upon request, COMPANY shall provide a Certificate of Insurance to CITY.
- 8.2 Indemnification. COMPANY shall indemnify, defend and hold MCSO and CCG harmless from and against any and all claims, actions, lawsuits, damages, judgments, or liabilities of any sort, including attorney's fees, against MCSO and/or CCG based on COMPANY's performance of its obligations hereunder including performance of such obligations by any contractor selected by COMPANY; provided, however, that COMPANY will not be responsible for any claim arising out of MCSO or their employee or agent preventing an inmate from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured inmate to COMPANY for treatment.

ARTICLE IX: MISCELLANEOUS

- 9.1 Independent Contractor Status. The parties acknowledge that COMPANY is an independent contractor engaged to provide health care to Prisoners at the PRISON under

the direction of COMPANY management. Nothing in this Agreement is intended nor shall be construed to create an agency relationship, an employer - employee relationship, or a joint venture relationship between the parties.

- 9.2 Notice. Unless otherwise provided herein, all notices or other communications required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been duly given if delivered personally in hand or sent by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following address or to the other person at any other address as may be designated in writing by the parties:

(a) CITY:	<u>Columbus Consolidated Government</u> <u>Attn. City Manager, Isaiah Hugley</u> <u>P.O.Box 1340</u> <u>Columbus, GA 31902</u>
	<u>Muscogee County Prison</u> <u>Attn. Warden Dwight Hamrick</u> <u>P.O. Box 84041</u> <u>Columbus, GA 31908-4041</u>
(b) COMPANY:	<u>CorrectHealth Muscogee, LLC</u> <u>ATTN: Carlo A. Musso, M.D.</u> <u>3384 Peachtree Road, NE, Suite 700</u> <u>Atlanta, GA 30326</u>

Notices shall be effective upon receipt regardless of the form used.

- 9.3 Entire Agreement. This Agreement is part of a procurement contract file for Procurement No. 18-0022 "the Contract" which constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. To the extent they are in conflict, provisions contained in the initial Request for Proposals, as amended, will govern. No modifications or amendment to the Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto.
- 9.3 Amendment. This Agreement may be amended or revised only in writing and signed by all parties.
- 9.4 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be constructed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 9.5 Other contracts and Third-Party Beneficiaries. The parties acknowledge that COMPANY is neither bound by nor aware of any other existing contracts to which CITY is a party and which relate to the providing of medical care to prisoners at the PRISON. The parties agree

that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that the Agreement is intended to be for their respective benefit only and not for the benefit of others who might otherwise be deemed to constitute third-party beneficiaries hereof.

- 9.6 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement which shall remain in full force and effect and enforceable in accordance with its terms.
- 9.7 Cooperation. On and after the date of this Agreement, each party shall, at the request of the other, make, execute and deliver or obtain and deliver all instruments and documents and shall do or cause to be done all such other things which either party may reasonable require to effectuate the provisions and intentions of this Agreement.
- 9.8 Time of Essence. Time is and shall be of the essence of this Agreement.
- 9.9 Authority. The parties signing this Agreement hereby state that they have the authority to bind the entity on whose behalf they are signing.
- 9.10 Binding Effect. This Agreement shall be binding upon the parties hereto, their heirs, administrators, executors, successors and assigns.
- 9.11 Cumulative Powers. Except as expressly limited by the terms of this Agreement, all rights, power and privileges conferred hereunder shall be cumulative and not restrictive of those provided at law or in equity.
- 9.12 Governing Law. This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Georgia, except as specifically noted.
- 9.13 Jurisdiction and Venue. Should any disputes regarding this Agreement arise and require legal action, the proper jurisdiction and venue for said legal action will be Muscogee County, Georgia.

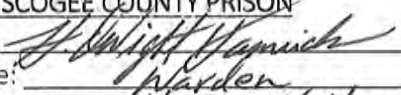
IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by and through their duly authorized officers, the day, month and year given below.

COLUMBUS CONSOLIDATED GOVERNMENT ("CITY")

By: 
Title: City Manager
Print Name: Isaiah Hugley
Date: 10-01-2018

EXECUTION AUTHORIZED
By Resolution No. 315-18

MUSCOGEE COUNTY PRISON

By: 
Title: Warden
Print Name: H. Dwight Hamrick

Date: 10-01-2018

CORRECTHEALTH MUSCOGEE, LLC ("COMPANY")

By: Stacy M. Scott
Title: CHIEF LEGAL OFFICER
Print Name: STACY M. SCOTT
Date: 10-11-18

EXHIBIT A – STAFFING

PROVIDER	FTE	Hours / Week
Medical Director *	0.20	8
Midlevel Provider *	0.20	8
Health Services Administrator	1.00	40
Administrative Assistant	1.00	40
LPN	5.20	208
Dentist	0.10	4
Optometrist	0.10	4
X-Ray Technician	0.025	1
TOTALS	7.825	313

** May be provided on-site and/or via tele-medicine, at the discretion of COMPANY.*

Exhibit B – Compensation

Effective Dates	Annual Compensation	Monthly Compensation	Per Diem Rate
10/01/18 – 09/30/19	\$646,817.48	\$53,901.46	\$1.05
10/01/19 – 09/30/20	\$662,987.91	\$55,248.99	\$1.08
10/01/20 – 09/30/21	\$679,562.61	\$56,630.22	\$1.10
10/01/21 – 09/30/22	\$696,551.68	\$58,045.97	\$1.13
10/01/22 – 09/30/23	\$713,965.47	\$59,497.12	\$1.16

EXHIBIT B

Business Documents

Check for imported payees with non-matching TIN data and verify new payees

Search by TIN, Acct., or Name

[Search Records](#)

TIN Matching allows you to verify your Payee data against the IRS TIN Matching database to verify if you have the correct Name/TIN combinations.

Sovos can take care of your mismatched TINs & B-Notices

Sovos offers the ability to automatically mail the appropriate forms to your mismatched payees and request corrected information. The responses come directly to you, and the W-9/B-Notice solicitations are saved for your reference in File Manager. Depending on your subscription, additional fees may apply.

[Print & Mail B-Notices](#)

The W9 Solicitation button has been disabled as you have already sent your solicitations.

Individual TIN Lookup

Verify individual Payee Social Security and Employer ID numbers.

Name: correcthealth muscogee TIN:

TIN Status: **PASS**

OFAC Check: **PASS**

DMF Check: **PASS**

[Verify Payee](#)

Mismatched Records

TIN	Name	Actions
123456789	JOHN DOE	View
987654321	JANE SMITH	View
111111111	BOB BROWN	View
222222222	ALICE GREEN	View
333333333	CHARLIE BLACK	View
444444444	DAVID WHITE	View
555555555	EVE PINK	View
666666666	FRANK BLUE	View
777777777	GRACE YELLOW	View
888888888	HENRY PURPLE	View
999999999	IVY BROWN	View
000000000	JACK GREEN	View
101010101	JILL PINK	View
202020202	JOHN BLUE	View
303030303	JANE YELLOW	View
404040404	BOB PURPLE	View
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CITY OF ATLANTA, GEORGIA - DEPARTMENT OF FINANCE
OCCUPATION TAX REGISTRATION CERTIFICATE

VALID ONLY WHEN REGISTRATION TAX REQUIREMENTS ARE PAID

CERTIFICATE NO. : 155734 LPR

BUSINESS NAME : CORRECTHEALTH LLC

LOCATION : 3384 PEACHTREE RD NE STE 700 ATLANTA, GA 30305

DATE ISSUED : 01-01-2018

EXPIRES ON : 12-31-2018

BUSINESS NAME AND ADDRESS:



CORRECTHEALTH LLC
3384 PEACHTREE RD NE STE 700
ATLANTA, GA 30305

155734

DISPLAY THIS CERTIFICATE IN A CONSPICUOUS PLACE AT BUSINESS LOCATION
NOT VALID IF BUSINESS LOCATION DOES NOT COMPLY TO CITY ZONING REQUIREMENTS
NOT VALID UNLESS ACCOMPANIED BY STATE OF GEORGIA LICENSE(S) IF REQUIRED

CERTIFICATE NOT TRANSFERABLE

IF BUSINESS TERMINATES OR CHANGES OWNERSHIP DURING CERTIFICATE PERIOD,
CALL THE BUSINESS LICENSE OFFICE AT 404-330-6270

THIS CERTIFICATE IS SUBJECT TO ALL APPLICABLE ORDINANCES AND LAWS

J. Anthony "Jim" Beard, CTP
Chief Financial Officer



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/01/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Sterling Seacrest Partners, Inc P O Box 724137 Atlanta GA 31139		CONTACT NAME: Juliana Major PHONE (A/C, No, Ext): (678) 424-6500 E-MAIL ADDRESS: jmajor@sspins.com FAX (A/C, No): (678) 424-6501																						
INSURED CorrectHealth Columbus Jail, LLC 3384 Peachtree Road, NE Suite 700 Atlanta GA 30326		<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>Ironshore Specialty Insurance</td><td>AXIV 25445</td></tr><tr><td>INSURER B:</td><td>Selective Insurance Company of the SE</td><td>AXIV 39926</td></tr><tr><td>INSURER C:</td><td>American Compensation Insurance Company</td><td>A-XII 45934</td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></tbody></table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Ironshore Specialty Insurance	AXIV 25445	INSURER B:	Selective Insurance Company of the SE	AXIV 39926	INSURER C:	American Compensation Insurance Company	A-XII 45934	INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																						
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INSURER C:	American Compensation Insurance Company	A-XII 45934																						
INSURER D:																								
INSURER E:																								
INSURER F:																								

COVERAGES **CERTIFICATE NUMBER:** 17-18 CH Columbus Jail **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY	Y		002203303	11/01/2017	11/01/2018	EACH OCCURRENCE \$ 1,000,000	
	☒ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
	Retro Date: 11/01/2002						MED EXP (Any one person) \$ 5,000	
	Deductible: \$50,000						PERSONAL & ADV INJURY \$ Included	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 6,000,000	
	☒ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG \$ Included	
	OTHER:						\$	
B	AUTOMOBILE LIABILITY	Y		S1872727	11/01/2017	11/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000	
	☐ ANY AUTO OWNED AUTOS ONLY ☒ HIRE AUTOS ONLY						BODILY INJURY (Per person) \$	
	☐ SCHEDULED AUTOS NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident) \$	
							PROPERTY DAMAGE (Per accident) \$	
							\$	
	UMBRELLA LIAB	Y					EACH OCCURRENCE \$	
	EXCESS LIAB						CLAIMS-MADE	AGGREGATE \$
	DED						RETENTION \$	\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A		AC-GA-000146-5	11/03/2017	11/03/2018	☒ PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$ 1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000	
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000	
A	Professional Liability	Y		002203303	11/01/2017	11/01/2018	Each Claim Limit \$1,000,000 Aggregate Limit \$6,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

INMATE MEDICAL & PHARMACY SERVICES FOR MUSCOGEE COUNTY JAIL (ANNUAL CONTRACT) - RFP No. 18-0019
Columbus Consolidated Government is included as an additional insured on the General Liability, Professional Liability, Automobile Liability and Umbrella Liability policies as required by written contract subject to policy terms, conditions and exclusions. All Liability policies have been endorsed to provide the certificate holder (30) days notice of cancellation, except for non-payment, when required by written contract.

CERTIFICATE HOLDER

CANCELLATION

Columbus Consolidated Government P.O. Box 1340 Columbus GA 31902	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 

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CONTRACTOR AFFIDAVIT

E-VERIFY / GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

65870

November 5, 2007

Company ID Number (numerical, 4-7 digits)

Date of Authorization

**See <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES> to access your E-Verify Company Identification Number.

CorrectHealth, LLC

Name of Contractor

Inmate Medical & Pharmacy Services for MCJ (Annual Contract); RFP No. 18-0019

Name of Project

Columbus Consolidated Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

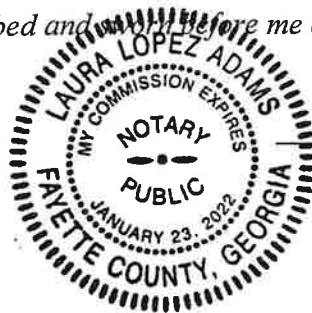
Executed on April, 30, 2018 in Atlanta (city), GA (state).

Amy D'Amore
Signature of Authorized Officer or Agent

Amy D'Amore, Director of Human Resources

Printed Name and Title of Authorized Officer or Agent

Subscribed and sworn to before me on this the 30th day of April, 2018.



Laura H. Lopez Adams
NOTARY PUBLIC

My Commission Expires:

1/23/22

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

EXHIBIT C
Specifications and Addenda

Columbus Consolidated Government
Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

1100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

May 17, 2018

ADDENDUM NO. 4

Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

A. DUE DATE:

The due date is extended to **5:00 PM on Tuesday, May 22, 2018.**

B. QUESTIONS/RESPONSES:

1. Please provide us with the annual expenditures for the past 2 years for:
 - a. Total Health Care Services
 - b. Total Pharmacy Services
 - c. Total Hospital Services
 - d. Total Specialty Services (Outside Physician, Surgery costs)

Response: The monthly fee charged by the incumbent inmate medical services provider is \$58,927.85 (refer to the RFP specifications, page 13, Introduction).

For the past two (2) years, Muscogee County Prison (MCP) expended \$132,600.00 for pharmaceuticals. MCP purchased the pharmaceuticals directly from Diamond Pharmacy Services.

Additional healthcare data is provided on page 3 of this Addendum.

2. Please provide a listing of any current open medical positions and the length of time they have been open/unfilled.

Response: One (1) LPN position has been open for approximately six (6) months.

3. Does the County/Facility intend to seek any accreditation of its program (NCCHC, ACA)?

Response: Currently, Muscogee County Prison is not seeking accreditation of its program.

4. If the County/Facility is currently accredited, please indicate the last on-site audit performed by the accrediting body.

Response: N/A

5. Does the County currently have an Electronic Medical Record? And if so, who is the vendor? Also, how are the records stored (cloud based or server)? And who pays for the maintenance and storage costs?

Response: No, Muscogee County Prison does not have an Electronic Medical Record.

6. Is MCP currently utilizing a paper medication pass or is the med pass electronic?

Response: Muscogee County Prison utilizes paper medication passes only.

7. Please clarify Appendix a, Item A.25 – Vendor is responsible for filing Medicare. What is the current Medicare filing practice at the Prison?

Response: No, the contracted vendor will not be responsible for filing Medicare.

8. RFP Appendix C indicates there were 32 emergency room visits and 4 hospital admissions during calendar year 2017. When MCP inmates require an ER trip or hospitalization, are they returned to MCP following release from the ER/hospital? Or is it the case that they may be returned to another institution (Rutledge Prison or Muscogee County Jail) first, for a period of observation and evaluation?

Response: It depends on the seriousness of the illness or injury. If an offender suffers injuries or illnesses that are minor, they will return to MCP. However, if the illness or injury is something that will require extended hospitalization or long term treatment, then the offender is returned to a state medical facility that is better equipped to handle that type injury/illness.

Following release from the ER/hospital, state offenders can be sent to any state hospital or medical prison, not just Rutledge State Prison. State offenders are permanently transferred by the state. For county offenders, there has never been an instance whereby an offender was returned to Muscogee County Jail for any medical reason.

Andrea J. McCorvey,
Purchasing Division Manager

ADDITIONAL HEALTHCARE DATA FOR MUSCOGEE COUNTY PRISON

Event Type & Numver of Events	01-2016	02-2016	03-2016	04-2016	05-2016	06-2016	07-2016	08-2016	09-2016	10-2016	11-2016	12-2016	01-2017	02-2017	03-2017	04-2017	05-2017	06-2017	07-2017	08-2017	09-2017	10-2017	11-2017	12-2017	Grand Total
AMBULANCE 18 EVENT(S)		-	-		-	-	-	-		-				-			-	-		-	-	-	-	-	-
EMERGENCY ROOM 67 EVENT(S)	544.47	485.05	1,167.38	-	621.85	529.81	183.77	1,958.37		2,023.24	861.27		2,555.20	1,236.21	-	1,195.67	4,038.94	4,538.02	1,304.90	4,424.52	10,419.56	1,737.00	766.90	-	40,592.13
INPATIENT HOSPITALIZATION 3 EVENT(S)														150.01							184.23	37.64			371.88
OFFICE VISITS 111 EVENT(S)	217.12	131.39	220.00	468.54	784.09	108.56	280.65	149.26	129.23	621.67	756.30	226.37	402.21	535.92	474.20	162.84	966.27	193.84		-	122.67	90.69	145.48	-	7,187.30
OFFICE VISITS WITH PROCEDURES 24 EVENT(S)		96.85	-	96.92				1,638.68	141.35	143.22		369.09	-	136.24	129.23	690.91	-	288.84	110.62		121.20				3,963.15
ONE DAY SURGERY 3 EVENT(S)								4,182.81				2,489.39					1,443.29								8,115.49
PAID WITHOUT AUTHORIZATION 2 EVENT(S)		67.90					144.42																		212.32
RADIOLOGY 15 EVENT(S)			1,351.08	160.95		1,465.13	161.95	381.71				51.43			51.43					751.51		-	-	-	4,375.19
STAT LAB 7 EVENT(S)																			10.15	56.58		-	-		66.73
Grand Total	761.59	781.19	2738.46	726.41	1405.94	2103.5	770.79	8310.83	270.58	2788.13	1617.57	3136.28	2957.41	2058.38	654.86	2049.42	6448.5	5020.7	1425.67	5232.61	10847.66	1865.33	912.38	0	64884.19

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

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May 11, 2018

ADDENDUM NO. 3

Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

A. QUESTIONS/RESPONSES:

1. Please provide the monthly trend in prescriptions and medication costs in total and by medication category, including but not limited to HIV, Hepatitis C, Hemophiliac, cancer, and psychotropic classifications for the current and prior fiscal years.
Response: Offenders with illnesses in these areas are immediately transferred back to a state facility. The Muscogee County Prison (MCP) has only had one county offender with HIV in the past two years.
2. Please provide the monthly trend in medication costs credits (separate from above costs) and administrative fees for the current and prior fiscal years.
Response: N/A
3. Please provide a list of the top 25 medications by cost for the current and prior fiscal years.
Response: This is a list of the most common medication that this facility dispenses:

Clobetasol 0.5 cream, Divalproex 500 mg, Erythro 500mg, Levothyroxin 75mg Aceta-Gesis 325 mg, Amox.Clav 500mg, Calcium Ex Antacid Tab, Domeboro Pwd packet, Geri-Lanta Antacid Susp., Ibuprofen 800mg, Med-Lyte tabs, Mucinex 600MG, Qvar 80 mcg inhalers, Tenvac syringe, Tolnaftate Cream, Trimacin Cr Lb, Ventolin HFA inhaler, Clobetasol cream. These are the most commonly used items.
4. Please provide the trend and current number of inmates under treatment for Hepatitis C.
Response: We do not treat Hepatitis C at this facility. We monitor Hepatitis C status via chronic care clinic every 3 months.
5. Please provide the current protocol including medications currently in use for treatment of inmates

infected with Hepatitis C.

Response: N/A

6. Will the MCP consider a cap on Hepatitis C, hemophiliac, cancer, and other high cost medications, which will allow vendors to avoid including risk premium for these treatments in their proposals?

Response: N/A

7. Are HIV medications currently administered from stock or as patient specific order?

Response: HIV medications are patient-specific.

8. How many prescriptions are dispensed on average per month?

Response: 150 to 200

9. Does MCP require a pharmacy license and what type of license? Who is the license held by, the facility or medical vendor?

Response: The Muscogee County Prison currently does not hold a pharmacy license, and is relying on the expertise of proposing firms to provide the services in accordance with all local, state and federal laws.

10. Please describe where patients are treated when they require infirmary level care.

Response: Patients are transferred to another facility.

11. RFP page 15, at Section 4, paragraph B, requires bidders to provide names and titles of professional staff to be dedicated to the contract. Typically, most existing staff transition to a new healthcare contractor and it is not appropriate for non-incumbent bidders to contact these staff ahead of award. For non-incumbent bidders, is it permissible to provide job descriptions in lieu of resumes where needed?

Response: Non-incumbent offerors may provide job descriptions in lieu of resumes, where needed. However, in the event the contract is awarded to a non-incumbent offeror, the Muscogee County Prison expects the awarded vendor to fill the position strictly in accordance with the provided job descriptions.

12. Please indicate where patients are managed if they require suicide watch monitoring.

Response: The patients are placed in an isolation cell and placed on 15-minute checks.

13. Please indicate how many new inmates are received at the facility each year.

Response: 200

14. Please indicate the average length of stay at the facility.

Response: 1 to 2 years.

15. RFP Addendum 1, Attachment A, suggests that the current healthcare contractor may be providing a proprietary electronic medical record.

- Does the MCP have an agreement with the current healthcare provider for transitioning the EHR in the event the contract is not re-awarded to the incumbent? If so, please describe the transition plan.
- Is the MCP satisfied with the current EHR and does it meet all requirements for reporting and interfacing with other information systems?
- Please identify the electronic interfaces currently in operations for the EHR. Does it interface with pharmacy? Laboratory? Radiology? The Jail Management System?

- Is an EHR *required* under the RFP? If so, is the MCP prepared to increase its healthcare budget to acquire an EHR that is not tied to a particular healthcare contractor?

Response: The current provider is only utilizing an EHR for managed care.

16. Please provide the dates for the most recent and pending NCCHC accreditation surveys. Please also provide the most recent NCCHC survey report.

Response: N/A

17. Does the Muscogee County Prison (MCP) have infirmary beds available at the Prison? If so, how many beds are in the Infirmary?

Response: MCP does not have infirmary beds.

18. Is the Prison responsible for dental equipment maintenance or repair?

Response: Yes

19. Please provide the name of the mobile x-ray vendor.

Response: MobileX

20. Is the current Medical Contractor capturing the Medicare ID at the time of Intake at Muscogee County Prison?

Response: No

21. Is the current Medical Contractor capturing the Medicaid ID at the time of Intake to the Muscogee County Prison?

Response: No

22. Who is the current Lab provider at the Muscogee County Prison?

Response: LabCorp

23. What is the name of the local hospital used for the Muscogee County Prison inmates?

Response: Piedmont Columbus Regional Midtown Campus

24. Who is the current provider of Optometry services?

Response: Dr. Dwight Boyd

25. How many days during the week is Sick Call conducted?

Response: 5

26. What is the monthly cost for the Internet services?

Response: MCP does not provide these services; refer to page 21 of the RFP specifications.

27. What is the monthly cost for the telephone services?

Response: MCP does not provide these services; refer to page 21 of the RFP specifications.

28. Have medical employees been required to report or subpoenaed to local court systems in the past year, and if so, how many times?

Response: No

29. Does the County or the current medical provider have any type of catastrophic medical cost insurance plan in place for this facility?

Response: No

30. Please provide an approximate number of calls received by medical staff to report to intake/booking for medical clearance of an inmate into the facility.

Response: N/A

31. Is a medical copay in place for patients who are seen by medical staff? And if so, what is that policy/practice?

Response: Yes, a \$5.00 copay is charged for all medical visits with the exception of injuries sustained during work detail and chronic care patients.

32. Is there a discharge planning process in place? And if so, can you explain the process?

Response: No

33. Please state any current schedule in place for medical staff to hold sick-call clinics each day.

Response: There are two sick-calls: A.M. before 0600 work call and P.M. after 1700 work call.

34. Does the facility have available Wi-Fi for the medical areas?

Response: No; refer to the RFP specifications, page 21, Section V.

B. FORTHCOMING ADDENDUM:

Muscogee County Prison staff are diligently working to provide responses to all questions. Within the next several business days, the Purchasing Division will release another addendum to answer those questions that have not been addressed.

Andrea J. McCorvey,
Purchasing Division Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



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May 4, 2018

ADDENDUM NO. 2

Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. PROPOSAL DUE DATE:

The due date is extended to **Friday, May 18, 2018 no later than 5:00 PM.**

II. NON-MANDATORY SITE VISIT

The Non-Mandatory Site Visit information included an incorrect telephone number. To schedule a site visit, contract Deputy Warden Daniel King at 706-641-5803 or dking@columbusga.org. Vendors may visit the Clinic through May 11, 2018.

III. QUESTIONS/RESPONSES:

Question 1: Can you provide us with a copy of the current healthcare agreement?

Response: Refer to Addendum No. 1.

Question 2: Please provide an inventory list of all medical and office equipment which is owned by the County and will be made available for use by the incoming vendor.

Response: Refer to page 21 of the RFP specifications.

Question 3: How many females are housed/incarcerated on a monthly average?

Response: Refer to page 13, Item I, Introduction of the specifications.

Question 4: Please provide the monthly number of patients currently on medications for the past year:

- a. Psychotropic
- b. Chronic Care
- c. Withdrawal

Response: Refer to Appendix C, beginning on page 23 of the specifications.

Question 5: Please provide the trend and current number of inmates under treatment for Hepatitis C.
Response: Refer to Appendix C, beginning on page 23 of the specifications.

Question 6: In Addendum 1, the contract document was provided as well as the 2013 RFP and Questions to vendor answers. In the Q and A's beginning on PDF page 58, the 13 pages of Q&A do not include page 2. Please provide page 2 of the 2013 Q&A's.
Response: The referenced page 2 is attached.

Question: Does the medical vendor need to provide computers for the medical staff to use? If yes, how many computers are currently being used?
Response: Refer to page 21 of the RFP specifications.

Question: Does the MCP provide internet access for the clinical computers or does the medical vendor need to procure a separate internet circuit for medical computers?
Response: Refer to page 21 of the RFP specifications.

IV. FORTHCOMING ADDENDUM:

The Purchasing Division has received a plethora of questions regarding this annual contract. Within the next several business days, Columbus Consolidated Government will release another addendum to answer questions that are not included in this Addendum.

Andrea J. McCorvey,
Purchasing Division Manager

use. See response to #153 for the condition of all equipment.

12. On average how many daily intakes?

Response: 8 to 15 per week (Intake is Tuesday & Thursday only for state inmates)

13. Sick call is completed on the floors is there wireless internet and computers available in each area sick call is performed?

Response: Per State SOP: Sick call is done in the clinical area at MCP. No sick call is done in the dormitory area (floors)

14. Health Service Administrator (HSA) gave tour of the facility. Will he remain in the position? Is that position part of the contract provided by the vendor?

Response: MCP will not require a Health Service Administrator.

15. During the pre-bid meeting there was mention of purchasing an electronic MAR. Who is the vendor and does it interact with any electronic Medical records?

Response: See response to #65 in Attachment A.

16. Are the nurses currently county employees, will those positions be moved to the vendor?

Response: The nurses are all City employees. We expect the vendor to interview and offer employment to all the current staff that meets the vendor's standards. The vendor alone is responsible for the recruitment, and hiring of the staff.

17. Please clarify if the staffing matrix is based on weekly hours?

Response: See statistical reports (Appendix 1)

18. Is pill pass required for all county inmates at the Prison or are some of the inmates allowed to keep medications on them?

Response: The prison inmates are all Keep on Person (KOP)/ Self Administration meds (SAM) with the exception of approximately 5 County inmates.

19. In the site visit at the Prison, they said an eye doctor comes every other month, is this required in the RFP? Is there equipment available onsite?

Response: Not a requirement in the RFP. The eye doctor brings all equipment on-site during his visit every 2 months. See response to #163 for outside eye care.

20. What is the daily average number of inmates on suicide watch?

Response: Not available.

21. Please provide an equipment list for each facility and approximate age.

Response: Not available.

22. How many inmate deaths in the past 12 months?

Response: None.

23. Is your facility NCCHC or ACA accredited?

Response: No

24. Please expand on #26 under the Scope of Services, "vendor is required for filing medicare" (page 18)

Response: See response to #71 in Attachment A.

25. Is a cost pool acceptable for Over the counter medications, pharmacy, labs supplies, etc. If delivered in a transparent manner (with backup invoices from vendors providing supplies and services)?

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April 19, 2018

ADDENDUM NO. 1

Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

REQUEST/RESPONSE

Request: I am requesting the current contracts with any subsequent amendments related to Inmate Medical and Pharmacy Services for the Muscogee County Jail and Prison. This allows us to completely evaluate the services provided and provide the best, most cost-effective proposal in response to your current RFPs.

Response: Because this request is pertinent to outstanding Request for Proposals (RFPs), the information is being made available to all potential firms. The respective contract documents for the Muscogee County Jail and the Muscogee County Prison are posted as **Attachment A** on the web page of the Finance Department/Purchasing Division at [https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid Opportunities.htm](https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm).

Andrea J. McCorvey,
Purchasing Division Manager

A RESOLUTION

NO. 279-13

"ITEM F"

C.M. 08-27-13(4)(F)
279-13

A RESOLUTION AUTHORIZING NEGOTIATION AND EXECUTION OF AN ANNUAL CONTRACT WITH CORRECTIONAL HEALTHCARE COMPANIES (GREENWOOD VILLAGE, CO) FOR COMPREHENSIVE MEDICAL SERVICES AT MUSCOGEE COUNTY PRISON.

WHEREAS, an RFP was administered (RFP 13-0024) and proposals were received from seven offerors; and,

WHEREAS, the proposals submitted by Correctional Healthcare Companies met all proposal requirements and were evaluated most responsive to the RFP; and,

WHEREAS, the term of contract shall be for two years, with an option to renew for three additional twelve-month periods. Contract renewal is contingent upon the mutual agreement of the City and the Contractor.

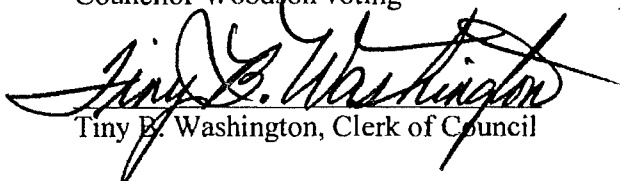
NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA, HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to negotiate and execute an annual contract with Correctional Healthcare Companies (Greenwood Village, CO) for comprehensive medical services at Muscogee County Prison. Funds are budgeted each fiscal year for this ongoing expense: General Fund – Sheriff – Medical Director-Consulting; 0101 - 550 – 2650 – MEDD - 6315. Upon contract approval, a subsequent partial transfer will be made to General Fund - Muscogee County Prison – Warden – Consulting; 0101-420-1000-MCCI-6315.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the 27th day of August, 2013 and adopted at said meeting by the affirmative vote of nine members of said Council.

Councilor Allen voting
Councilor Baker voting
Councilor Barnes voting
Councilor Davis voting
Councilor Henderson voting
Councilor Huff voting
Councilor McDaniel voting
Councilor Turner Pugh voting
Councilor Thomas voting
Councilor Woodson voting

YES
YES
YES
YES
YES
YES
ABSENT
YES
YES
YES


Tiny E. Washington, Clerk of Council


Teresa Pike Tomlinson, Mayor

CONTRACT

THIS CONTRACT, executed this 1st day of September 2013, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and Correctional Healthcare Companies, Inc., hereinafter called the "Contractor".

WITNESSETH:

That in consideration of the mutual covenants, obligations and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

1. That the Contractor is a responsive and responsible bidder for providing Comprehensive Medical Services for Muscogee County Prison was awarded the Contract by Columbus City Council on Tuesday, August 27, 2013, Resolution No. 279-13, for the initial term of two years, beginning September 1, 2013 through August 31, 2015, with the option to renew for three (3) additional twelve-month periods, for the services in accordance with specifications prepared by the City and the proposal of the Contractor.
2. The Contractor will, at its own cost and expense furnish all labor, materials and equipment required to be furnished and meet all other requirements or conditions imposed, all strictly in accordance with the Business Requirements, City's RFP, dated February 22, 2013 (and any correspondence thereto), Contractor's proposal dated April 12, 2013, which are attached hereto as exhibits "A", "B" and "C", respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.
3. On the faithful performance of this Contract by the Contractor, the City will make payment to the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

AGREEMENT FOR INMATE HEALTH CARE SERVICES
AT MUSCOGEE COUNTY PRISON, COLUMBUS, GEORGIA
Effective September 1, 2013 through August 31, 2015

This Agreement for Inmate Health Care Services (hereinafter, the "AGREEMENT") entered into by and between the Columbus Consolidated Government, a political subdivision of the State of Georgia, (hereinafter, the "CCG") , and Correctional Healthcare Companies, Inc., (hereinafter, "CHC") a Delaware corporation.

RECITALS

WHEREAS, the CCG and the duly appointed WARDEN (hereinafter the "WARDEN") are charged by law with the responsibility for administering, managing, and supervising the health care delivery system of the Muscogee County Prison located at 7175 Sacerdote Lane, Columbus, Georgia (hereinafter, "PRISON"); and

WHEREAS, the objective of the CCG is to provide for the delivery of quality health care to the INMATES of the PRISON (hereinafter, "PRISON POPULATION"), in accordance with applicable law; and

WHEREAS, CHC is in the business of administering correctional health care services and desires to administer such services on behalf of the CCG to the PRISON POPULATION under the terms and conditions hereof.

NOW THEREFORE, in consideration of the covenants and promises hereinafter made, the parties hereto agree as follows:

DEFINITIONS

CONTRACT YEAR – The initial, and any successive, twelve (12) month period beginning with the effective date of the AGREEMENT.

PRISON INMATES – An INMATE held at the PRISON under the jurisdiction of the State of Georgia, Department of Corrections, or the CCG. PRISON INMATES may be housed in the PRISON or in another jurisdiction's correctional facility. However, PRISON INMATES housed in another jurisdiction are not covered by the provisions of this AGREEMENT unless CHC administers health care services at the other jurisdiction's facility and as specifically set forth below.

COVERED PERSONS – An INMATE of the PRISON who is: (1) part of the PRISON's average daily population; and (2) incarcerated in the PRISON.

HEALTH CARE STAFF – Medical, mental health and support staff provided or administered by CHC.

INMATE – An adult or juvenile individual who is being incarcerated in the PRISON for the term of their adjudicated sentence.

MONTHLY AVERAGE DAILY POPULATION (MADP) – The average number of INMATES housed in the PRISON on a daily basis for the period of one month. The MADP shall include, but separately list, other county or agency inmates. The MADP shall be figured by summing the daily population for the PRISON (as determined by a count performed at the same time each day) for each day of the month and dividing this sum by the total number of days in the month. PRISON records shall be made available to CHC upon request to verify the MADP. Persons on

work release and not indigent, home confinement, housed outside of the PRISON, and parolees and escapees shall not be considered part of the PRISON's MADP.

NCCHC – The National Commission on Correctional Health Care.

PHYSICIAN EXTENDER – An advanced level healthcare professional such as a Nurse Practitioner, Physician Assistant, or Clinical Nurse Specialist.

SPECIALTY SERVICES – Medical services that require physicians to be licensed in a specialty such as obstetrics, gynecology, or dermatology or other specialized field of medicine, but excluding services that are otherwise provided for in this AGREEMENT.

ARTICLE I

HEALTH CARE SERVICES

- 1.0 SCOPE OF SERVICES. CHC shall administer health care services and related administrative services at the PRISON according to the terms and provisions of this AGREEMENT.
- 1.1 GENERAL HEALTH CARE SERVICES. CHC will arrange and bear the cost of the following health care services:
 - 1.1.1 RECEIVING SCREENING. A receiving screening of an INMATE shall be performed as soon as possible after the INMATE booking into the PRISON.
 - 1.1.2 HEALTH ASSESSMENT. A health assessment of a COVERED PERSON shall be performed as soon as possible, but no later than fourteen (14) calendar days after the INMATE arrival at the PRISON. The health assessment shall follow current NCCHC guidelines.
 - 1.1.3 SCHEDULED SICK CALL. A qualified healthcare professional shall conduct sick calls for COVERED PERSONS on a timely basis and in a clinical setting.
- 1.2 AMBULANCE SERVICE – NOT COVERED. In the event that ambulance services are required for the PRISON POPULATION, CHC shall not be responsible for the provision or cost of such ambulance services.
- 1.3 BODY CAVITY SEARCHES/COLLECTION OF PHYSICAL EVIDENCE. CHC HEALTH CARE STAFF will not perform body cavity searches, nor collect physical evidence (blood, hair, semen, saliva, etc.), except within guidelines established by the NCCHC. If CHC HEALTH CARE STAFF collect physical evidence, the CCG shall be responsible for arranging any testing and bear the cost of collection and testing the collected evidence and any associated staffing costs for HEALTH CARE STAFF to provide court related testimony. After collecting evidence, CHC HEALTH CARE STAFF shall turn the specimen over to the WARDEN or a court-designated representative for completion of chain-of-custody evidence
- 1.4 DENTAL. CHC shall arrange and bear the cost of on-site dental services. If the dental services cannot be rendered on-site, CHC shall arrange but not bear the cost of off-site dental services.

- 1.5 DIALYSIS SERVICES – NOT COVERED. In the event that dialysis services are required for the PRISON POPULATION, CHC shall not be responsible for the provision or cost of such dialysis services
- 1.6 ELECTIVE MEDICAL CARE - NOT COVERED. CHC shall not be responsible for the provision or cost of any elective care. Elective medical care shall be defined as care which, if not provided, would not, in the sole opinion of CHC's CHIEF MEDICAL OFFICER or designee, cause the INMATE health to deteriorate or cause harm to the INMATE well being. Decisions concerning elective medical care shall be consistent with the applicable American Medical Association (AMA) Standards.
- 1.7 EXPENDABLE MEDICAL SUPPLIES. CHC will procure and supply all expendable medical supplies (including all expendables in sufficient quantity to execute daily delivery of medical care such as antifungal creams, dressings, over the counter analgesics, cold medicines), excluding prescription medications.
- 1.8 HOSPITALIZATION. In the event that hospitalization services are required for the PRISON POPULATION, CHC shall not be responsible for the provision or cost of such services. Costs for hospital services shall be administered pursuant to paragraph 3.1.
- 1.9 LONG TERM CARE – NOT COVERED. In the event that a member of the PRISON POPULATION requires skilled care, custodial care or other services of a long term care facility, CHC shall not be responsible for the provision or cost of any such care.
- 1.10 MEDICAL EQUIPMENT. CHC shall provide medical equipment necessary to conduct routine medical assessments and procedures, including but not limited to, devices to assess vital signs, stethoscopes, dopplers, glucometers and test strips, dressings and suture kits, etc.
- 1.11 MEDICAL WASTE. CHC shall arrange and bear the cost of removing and properly disposing of medical waste material generated while fulfilling its duties under this AGREEMENT in accordance with all applicable state laws and OSHA-regulated standards.
- 1.12 MENTAL HEALTH SERVICES – NOT COVERED. CHC shall not be responsible for the provision or cost of mental health services for the PRISON POPULATION. CHC shall be responsible to make appropriate mental health referrals to the CCG's mental health provider.
- 1.13 MORAL RECONATION THERAPY. CHC shall provide Moral Reconciliation Therapy® ("MRT") services including, initial startup, basic MRT staff training for up to 14 staff trainers and MRT workbooks for up to 128 INMATE participants. The first CONTRACT YEAR of services shall be included in the annual amount. During all subsequent CONTRACT YEARS the CCG shall reimburse CHC for the cost of MRT workbooks necessary for MRT participants.
- 1.14 OFFICE SUPPLIES. CHC shall provide office supplies such as books, medical record folders, and forms as required for the administrative operations of the medical unit.
- 1.15 PATHOLOGY/RADIOLOGY SERVICES. CHC shall arrange and bear the cost of on-site pathology and radiology services (also referred to as laboratory and x-ray services)

ordered by a CHC physician for COVERED PERSONS. CHC shall arrange for on-site pathology and radiology services to the extent reasonably possible. To the extent pathology and radiology services are required and cannot be rendered on-site, CHC shall make appropriate arrangements for rendering offsite pathology and radiology care but shall not be responsible for the cost of such off-site services. CHC will arrange and coordinate with the WARDEN's office for the transportation for offsite pathology and radiology services. Costs for offsite pathology and radiology services shall be administered pursuant to paragraph 3.1.

- 1.16 PHARMACEUTICAL ADMINISTRATION AND MANAGEMENT. CHC shall provide a Preferred Medication List ("PML") and utilization management, monitoring and reporting of pharmacy usage. CHC shall not be responsible for the cost of any medications except that CHC shall be responsible for the cost of any non-PML prescription medications that were prescribed outside the established utilization management process. The prescribing and administering of medication shall comply with all State and Federal laws and regulations and all medications shall be dispensed under the supervision of a duly authorized, appropriately licensed or certified health care provider.
- 1.17 PREGNANT COVERED PERSONS. CHC shall arrange and bear the cost of on-site health care services for any pregnant COVERED PERSON in accordance with NCCHC standards and this AGREEMENT, but CHC shall not arrange or bear the cost of any health care services for infants. To the extent off-site health care services are required for any pregnant COVERED PERSON, CHC shall make appropriate arrangements for rendering off-site care, but shall not be responsible for the cost of such off-site services.
- 1.18 SPECIALTY SERVICES. In the event that any SPECIALTY SERVICES are medically necessary for the PRISON POPULATION, CHC shall not be responsible for the provision or cost of such SPECIALTY SERVICES. Costs for SPECIALTY SERVICES shall be administered pursuant to paragraph 3.1.

ARTICLE II

HEALTH CARE STAFF

- 2.0 STAFFING HOURS. CHC shall provide or arrange for the provision of HEALTH CARE STAFF necessary to render the health care services contemplated in Article I as set forth in the staffing plan in Exhibit A effective September 1, 2013 and Exhibit A-1 effective October 1, 2013, attached hereto and made a part hereof. CHC reserves the right to assign the staff in Exhibit A to shift coverage as necessary based on operational needs to provide the health care services under this AGREEMENT.
 - 2.0.1 Additional hours may be provided if mutually agreed upon by both parties in writing, with at least 24 hours advanced notice;
 - 2.0.2 CHC shall provide or arrange for the provision of an on-call physician and nurse available by telephone or pager, 24 hours per day and 7 days per week.
 - 2.0.3 CHC shall make reasonable efforts to supply the staffing levels contained in this section, however, failure to continuously supply all of the required staffing due to labor market demands or other factors outside the control of CHC, after

reasonable efforts have been made, shall not constitute a breach of this AGREEMENT.

- 2.1 STAFFING LEVELS. Based on actual staffing needs as affected by medical emergencies, riots, increased or decreased INMATE population, and other unforeseen circumstances, certain increases or decreases in staffing requirements may be agreed to by the WARDEN and CHC. Such agreements shall be in writing between the parties unless an emergency situation warrants a verbal agreement which shall be subsequently documented in writing.
- 2.2 STAFF SCREENING. The CCG and WARDEN shall screen CHC's proposed HEALTH CARE STAFF, employees, agents and/or subcontractors providing services at the PRISON to ensure they do not constitute a security risk. The WARDEN shall have final approval of CHC's HEALTH CARE STAFF, employees, agents and/or subcontractors in regards to security/background clearance.
- 2.3 SATISFACTION WITH HEALTH CARE STAFF. In recognition of the sensitive nature of correctional facility operations, if the WARDEN becomes dissatisfied with any member of the HEALTH CARE STAFF, the WARDEN shall provide CHC written notice of such dissatisfaction and the reasons therefore. Following receipt of such notice, CHC shall use reasonable efforts to resolve the dissatisfaction. If the problem is not resolved to the satisfaction of the WARDEN within ten (10) business days following CHC's receipt of the notice, CHC shall remove the individual from providing services at the PRISON within a reasonable time frame considering the effects of such removal on CHC's ability to deliver health care services and recruitment/hiring of an acceptable replacement. The WARDEN reserves the right to revoke the security clearance of any HEALTH CARE STAFF at any time.

ARTICLE III

ADMINISTRATIVE SERVICES

- 3.0 HEALTH AND MENTAL HEALTH EDUCATION AND TRAINING. CHC shall conduct an ongoing health and mental health education and training program for the CCG Detention Officers in accordance with the needs mutually established by the CCG and CHC. Training shall be provided by methods and intervals determined by CHC.
- 3.1 UTILIZATION MANAGEMENT/BILLING ADJUDICATION. CHC shall provide utilization management services consisting of a prospective review, concurrent review, readmission review and retrospective review for offsite medical services. Upon completion of utilization management reviews, CHC shall pay offsite medical providers on behalf of CCG and invoice CCG for reimbursement of the medical expenses paid by CHC. With respect to any invoices pertaining to off-site services provided by Columbus Medical Center or its affiliates pursuant to a contract by and between the City and the Medical Center Hospital Authority of Columbus, Georgia for the provision of hospital care and certain referrals for care for prisoners dated as of July 1, 1992, as thereafter amended, CHC shall provide utilization review services described above, but it will make no payments and instead will forward approved charges to the Columbus, Georgia Finance Department for approval and payment pursuant to the terms of the contract referenced herein. Where appropriate, CHC will also review charges and forward approved bills to the Georgia Department of Corrections for services that are reimbursable by the Georgia Department of Corrections pursuant to the annual contract

between the PRISON and the Department of Corrections for the care and supervision of state inmates. A copy of the annual contract then in effect will be provided to CHC. CHC will follow applicable state laws and will keep the CCG and/or WARDEN apprised of its utilization management practices.

- 3.2 QUARTERLY REPORTS. As requested by the WARDEN, CHC shall submit quarterly health care reports concerning the overall operation of the health care services program rendered pursuant to this AGREEMENT and the general health of the PRISON POPULATION.
- 3.3 QUARTERLY MEETINGS. As requested by the WARDEN, CHC shall meet quarterly, or as soon thereafter as possible, with the WARDEN, or designee, concerning health care services within the PRISON and any proposed changes in health-related procedures or other matters, which both parties deem necessary.
- 3.4 MEDICAL RECORDS MANAGEMENT. CHC shall provide the following medical records management services:
 - 3.4.1 MEDICAL RECORDS. CHC HEALTH CARE STAFF shall maintain, cause or require the maintenance of complete and accurate medical records for COVERED PERSONS who have received health care services. Medical records shall be kept separate from COVERED PERSON'S confinement records. A complete copy of the individual medical record shall be available to accompany each COVERED PERSON who is transferred from the PRISON to another location for off-site services or transferred to another institution. CHC will keep medical records confidential and shall not release any information contained in any medical record except as required by published PRISON policies, by a court order or by applicable law. Upon termination of this AGREEMENT, all medical records shall be delivered to and remain with the WARDEN, as property of the WARDEN's office.
 - 3.4.2 ELECTRONIC MEDICAL RECORDS. By April 1, 2014, CHC shall implement and maintain an electronic medical records software program for use at the PRISON according to the terms attached hereto as Exhibit B within.
 - 3.4.3 COMPLIANCE WITH LAWS. Each medical record shall be maintained in accordance with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and any other applicable state or federal privacy statute or regulation.
 - 3.4.4 RECORDS AVAILABILITY. As needed to administer the terms of this AGREEMENT, CHC shall make available to the WARDEN or CCG, unless otherwise specifically prohibited, at the WARDEN's or CCG's request, all records, documents and other papers relating to the direct delivery of health care services to the PRISON POPULATION hereunder.

ARTICLE IV
PERSONS COVERED UNDER THIS AGREEMENT

- 4.0 GENERAL. Except as otherwise provided in this AGREEMENT, CHC shall only be required to arrange for health care services under this AGREEMENT to be provided to COVERED PERSONS.
- 4.1 EMERGENCY MEDICAL CARE FOR PRISON EMPLOYEES AND VISITORS. CHC shall arrange for on-site first response emergency medical care as required for PRISON employees, contractors and visitors to the PRISON. The medical treatment shall be limited to the extent reasonably necessary to stabilize and facilitate the individual's referral to a medical facility or personal physician.

ARTICLE V
PERSONS NOT COVERED OR PARTIALLY COVERED UNDER THIS AGREEMENT
(Intentionally Omitted)

ARTICLE VI
COST OF SERVICES NOT COVERED UNDER THIS AGREEMENT

- 6.0 SERVICES NOT LISTED. Both parties understand and agree that there will be costs incurred for health care related services as outlined in Articles I, II and III above. CHC shall not be responsible for any expenses not specifically covered under this AGREEMENT. In the event that any of the health care services not covered by CHC under this AGREEMENT, or any services that are not listed within this AGREEMENT, are required for a member of the PRISON POPULATION as a result of the medical judgment of a physician or CHC authorized personnel, CHC shall not be responsible for arranging such services and the cost of such services shall be billed directly to the CCG.
- 6.1 SERVICES BEYOND THE SCOPE OF THIS AGREEMENT. Both parties understand and agree that there are certain occurrences, both beyond and within the control of the parties, that may result in health care expenses which are outside the scope of the normal operation of a correctional facility and, therefore, outside the contemplated scope of services under this AGREEMENT. While both parties will act in good faith and endeavor to reduce the possibility of such occurrences, in the unlikely event of an occurrence such as an Act of God, riot, explosion, fire, food poisoning, epidemic illness outbreak or any other catastrophic event, or an event caused by the action or inaction of the CCG or WARDEN or their employees, agents or contractors, which results in medical care for the PRISON POPULATION, PRISON staff, visitors, or contractors, CHC shall not be responsible for costs attributable to such catastrophic event. Notwithstanding the above, CHC shall be responsible for medical costs under this AGREEMENT associated with such an event only if such an event was caused solely by CHC.

ARTICLE VII
CCG'S DUTIES AND OBLIGATIONS

- 7.0 COMPLIANCE WITH HIPAA/STATE HEALTH INFORMATION PRIVACY LAWS. The CCG, PRISON, and WARDEN and their employees, agents and subcontractors shall comply with the Health Insurance Portability and Accountability Act of 1996 (hereinafter

“HIPAA”) and any State health information privacy laws, to the extent they are applicable. The CCG and the WARDEN shall implement policies and/or procedures in compliance with such laws.

- 7.1 COMPREHENSIVE MEDICAL/MENTAL HEALTH CARE. CHC shall identify to the WARDEN those members of the PRISON POPULATION with medical or mental health conditions which may be worsened as a result of being incarcerated at the PRISON or which may require extensive care while incarcerated. After review of the circumstances, and when security risks permit, the WARDEN shall make every effort to have such an INMATE released, transferred or otherwise removed from the correctional setting.
- 7.2 RECORD ACCESS. During the term of this AGREEMENT, and for a reasonable time following the termination of this AGREEMENT, the WARDEN shall provide CHC, at CHC's request, the CCG, PRISON and/or WARDEN'S records (including medical records) relating to the provision of health care services to the PRISON POPULATION, including records maintained by hospitals, and other outside health care providers involved in the care or treatment of the PRISON POPULATION (to the extent the CCG, PRISON or WARDEN has control of, or access to, such records). CHC may request such records in connection with the investigation of, or defense of, any claim by a third party related to CHC's conduct or to prosecute a claim against a third party. Any such information provided by the WARDEN to CHC that the WARDEN considers confidential shall be kept confidential by CHC and shall not, except as may be required by law, be distributed to any third party without prior written approval by the WARDEN.
- 7.3 USE OF INMATES IN THE PROVISION OF HEALTH CARE SERVICES. INMATES of the PRISON shall not be employed or otherwise engaged or utilized by either CHC or the WARDEN in rendering any health care services to the PRISON POPULATION, provided however, that INMATES may be used in positions not involving the rendering of health care services directly to the PRISON POPULATION and not involving access to PRISON POPULATION records in accordance with NCCHC standards.
- 7.4 SECURITY OF THE PRISON FACILITY AND CHC. CHC and the CCG understand that adequate security services are necessary for the safety of the agents, employees, and subcontractors of CHC, as well as for the security of the PRISON POPULATION and WARDEN'S staff, consistent with a correctional setting. The WARDEN shall provide security sufficient to enable CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors to safely provide the health care services described in this AGREEMENT. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall follow all security procedures of the WARDEN while at the PRISON or other premises under the WARDEN's direction or control. However, any CHC HEALTH CARE STAFF, employee, agent and/or subcontractor may, at any time, refuse to provide any service required under this AGREEMENT if such person reasonably feels that the current safety services are insufficient. CHC shall not be liable for any loss or damages resulting from CHC's HEALTH CARE STAFF, employees, agents and/or subcontractors failure to provide medical services due to insufficient security services.
- 7.5 WARDEN'S POLICIES AND PROCEDURES. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall operate within the requirements of the CCG'S and/or WARDEN'S posted security Policies and Procedures, which impact the provision of medical services.

- 7.5.1 A complete set of said Policies and Procedures shall be maintained by the CCG and made available for inspection by CHC at the PRISON, and CHC may make a reasonable number of copies of any specific section(s) it wishes using the WARDEN'S photocopy equipment and paper.
- 7.5.2 Any Policy or Procedure that may impact the provision of health care services to the PRISON POPULATION which has not been made available to CHC shall not be enforceable against CHC unless otherwise agreed upon by both parties.
- 7.5.3 Any modification of the posted Policies and Procedures shall be timely provided to CHC. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall operate within the requirement of a modified Policy or Procedure after such modification has been made available to CHC.
- 7.5.4 If any of the CCG and/or WARDEN's Policies and Procedures specifically relate to the delivery of medical services, the CCG and/or WARDEN's representative and CHC shall review the CCG and/or WARDEN's Policies and Procedures and modify or remove those provisions that conflict with CHC's Prison Health Care Policies and Procedures.
- 7.6 DAMAGE TO EQUIPMENT. CHC shall not be liable for loss of or damage to equipment and supplies of CHC, its agents, employees or subcontractors if such loss or damage was caused by the sole negligence of the CCG and/or WARDEN's employees.
- 7.7 SECURE TRANSPORTATION. The WARDEN shall provide security as necessary and appropriate in connection with the transportation of a member of the PRISON POPULATION to and from off-site services including, but not limited to, SPECIALTY SERVICES, hospitalization, pathology and radiology services as requested by CHC. CHC shall coordinate with the WARDEN's office for transportation to and from the off-site services provider or hospital.
- 7.8 OFFICE/MEDICAL EQUIPMENT AND SUPPLIES. The WARDEN shall provide use of CCG-owned office equipment, durable medical equipment and all necessary utilities (including telephone and fax line service) in place at the PRISON health care facilities. At the termination of this AGREEMENT, CHC shall return to the CCG's possession and control of all CCG-owned medical and office equipment. At such time, the office equipment shall be in good working order, reasonable wear and tear excepted.
- 7.9 NON-MEDICAL CARE OF PRISON POPULATION. It is understood that the WARDEN shall provide for all the non-medical personal needs and services of the PRISON POPULATION as required by law. CHC shall not be responsible for providing, or liable for failing to provide, non-medical services to the PRISON POPULATION including, but not limited to, daily housekeeping services, dietary services, building maintenance services, personal hygiene supplies and services and linen supplies.
- 7.10 PRISON POPULATION INFORMATION. In order to assist CHC in providing the best possible health care services to COVERED PERSONS, the WARDEN shall provide, as needed, information pertaining to the COVERED PERSON that CHC and the WARDEN mutually identify as reasonable and necessary for CHC to adequately perform its obligations under this AGREEMENT.

ARTICLE VIII
COMPENSATION/ADJUSTMENTS

- 8.0 ANNUAL AMOUNT/MONTHLY PAYMENTS.
- 8.0.1 Effective September 1, 2013, there will be a start up period of one month during which CHC will provide a physician and a dentist. The monthly payment for the period September 1, 2013 to September 30, 2013 shall be Six Thousand, Eight Hundred Nine Dollars and Thirty-Four cents (\$6,809.34), pro-rated for any partial months and subject to any reconciliations as set forth below.
- 8.0.2 Effective October 1, 2013, the base annual amount to be paid by the CCG to CHC under this AGREEMENT is Six Hundred Forty Seven Thousand One Hundred Twenty-Seven Dollars and Ninety-Six cents (\$647,127.96) for a period of twelve (12) months. The pro-rated amount for October 1, 2013 to August 31, 2014 shall be in the amount of Five Hundred Ninety-Three Thousand Two Hundred Dollars and sixty-three cents (\$593,200.63). Each monthly payment shall be Fifty Three Thousand Nine Hundred Twenty-Seven Dollars and Thirty-Three cents (\$53,927.33), pro-rated for any partial months and subject to any reconciliations as set forth below.
- 8.0.3 The first monthly amount is to be paid to CHC on the 1st day of September, 2013 for services administered in the month of September, 2013. Each monthly payment thereafter is to be paid by the CCG to CHC before or on the 1st day of the month of service.
- 8.0.4 Year 2. Effective September 1, 2014, the base annual amount to be paid by the CCG to CHC in Year 2 shall be Six Hundred Forty Seven Thousand One Hundred Twenty-Seven Dollars and Ninety-Six cents (\$647,127.96).
- 8.0.5 Option Year 3. Effective September 1, 2015, the base annual amount to be paid by the CCG to CHC in Year 3 shall be Six Hundred Sixty-Six Thousand Five Hundred Forty-One Dollars and eighty cents (\$666,541.80).
- 8.0.6 Option Year 4. Effective September 1, 2016, the base annual amount to be paid by the CCG to CHC in Year 4 shall be Six Hundred Eighty-Six Thousand Five Hundred Thirty-Eight Dollars and Five Cents (\$686,538.05).
- 8.0.7 Option Year 5. Effective September 1, 2017, the base annual amount to be paid by the CCG to CHC in Year 5 shall be Seven Hundred Seven Thousand One Hundred Thirty-Four Dollars and Nineteen cents (\$707,134.19).
- 8.1 QUARTERLY RECONCILIATION PROCESS. CHC will provide a quarterly reconciliation with the CCG for any amounts owed by either party pursuant to the terms of this AGREEMENT, including, but not limited to:
- 8.1.1 ADJUSTMENT FOR MADP. For each month reconciled, if the PRISON's MADP is greater than Eight Hundred Fifty (850) INMATES, the compensation payable to CHC by the CCG shall be increased by the number of INMATES over Eight Hundred Fifty (850) at the per diem rate of thirty nine cents (\$0.39). If the PRISON's MADP is less than Eight Hundred Fifty (850) INMATES, then CHC

will issue a credit to the CCG for the number of INMATES under Eight Hundred Fifty (850) at the per diem rate of thirty nine cents (\$0.39).

- 8.1.2 OFFSITE MEDICAL SERVICE COSTS. The quarterly reconciliation shall include any amounts paid by CHC on behalf of CCG for offsite medical costs. The quarterly reconciliation shall contain offsite medical cost detail.

ARTICLE IX

TERM AND TERMINATION

- 9.0 TERM. The term of this AGREEMENT shall be two (2) years from September, 1, 2013 at 12:01 a.m., through August 31, 2015 at 11:59 p.m. This AGREEMENT may be renewed by CCG, by submitting written notice to CHC of its intent to renew prior to the expiration of the current contract term, for three (3) additional one (1) year periods on September 1st of each subsequent year with mutually agreed upon increases, unless this AGREEMENT is terminated or notice of termination is given, as set forth in this Article.
- 9.0.1 RENEWAL. Upon each subsequent renewal of this AGREEMENT pursuant to paragraph 9.0, the parties have agreed to increases of 3.0% of the base annual contract amount as calculated in paragraphs 8.0.5, 8.0.6, and 8.0.7 above.
- 9.1 TERMINATION FOR LACK OF APPROPRIATIONS. It is understood and agreed that this AGREEMENT shall be subject to annual appropriations by the COUNCIL of the CCG.
- 9.1.1 Recognizing that termination for lack of appropriations may entail substantial costs for CHC, the CCG and the WARDEN shall act in good faith and make every effort to give CHC reasonable advance notice of any potential problem with funding or appropriations.
- 9.1.2 If future funds are not appropriated for this AGREEMENT, and upon exhaustion of existing funding, the CCG and WARDEN may terminate this AGREEMENT without penalty or liability, by providing a minimum of thirty (30) days advance written notice to CHC.
- 9.2 TERMINATION DUE TO CHC'S OPERATIONS. The CCG reserves the right to terminate this AGREEMENT immediately upon written notification to CHC in the event that CHC discontinues or abandons operations, is adjudged bankrupt or is reorganized under any bankruptcy law, or fails to keep in force any required insurance policies. Both parties agree that termination under this provision will be considered without cause.
- 9.3 TERMINATION FOR CAUSE. The AGREEMENT may be terminated for cause under the following provisions:
- 9.3.1 TERMINATION BY CHC. Failure of the CCG and/or WARDEN to comply with any provision of this AGREEMENT shall be considered grounds for termination of this AGREEMENT by CHC upon sixty (60) days advance written notice to the CCG specifying the termination effective date and identifying the "basis for termination." The CCG shall pay for services rendered up to the date of termination of the AGREEMENT. Upon receipt of the written notice, the CCG shall have ten (10) days to provide a written response to CHC. If the CCG

provides a written response to CHC which provides an adequate explanation for the "basis for termination" and the CCG cures the "basis for termination" to the satisfaction of the CHC, the sixty (60) day notice shall become null and void and this AGREEMENT will remain in full force and effect. Termination under this provision shall be without penalty to CHC.

9.3.2 TERMINATION BY CCG. Failure of CHC to comply with any provision of this AGREEMENT shall be considered grounds for termination of this AGREEMENT by the WARDEN or the CCG who shall provide sixty (60) days advanced written notice specifying the termination effective date and identifying the "basis for termination." The CCG shall pay for services rendered up to the date of termination of the AGREEMENT. Upon receipt of the written notice CHC shall have ten (10) days to provide a written response to the CCG. If CHC provides a written response to the CCG which provides an adequate explanation for the "basis of termination," or cures the "basis for termination" to the satisfaction of the WARDEN, the sixty (60) day notice shall become null and void and this contract will remain in full force and effect. Termination under this provision shall be without penalty to the WARDEN or the CCG.

9.4 TERMINATION WITHOUT CAUSE. Notwithstanding anything to the contrary contained in this AGREEMENT, the WARDEN, the CCG or CHC may, without prejudice to any other rights it may have, terminate this AGREEMENT for their convenience and without cause by giving ninety (90) days advance written notice to the other party.

9.5 COMPENSATION UPON TERMINATION. If any of the above termination clauses are exercised by any of the parties to this AGREEMENT, the CCG shall pay CHC for all services rendered by CHC up to the date of termination of the AGREEMENT regardless of the CCG'S failure to appropriate funds.

9.6 PROPERTY DISPOSITION UPON TERMINATION. Upon termination of this AGREEMENT, CHC shall be allowed to remove its property from the PRISON including its proprietary Policies and Procedures, Manuals, Training Material, and Forms and CCG agrees to maintain as confidential all CHC materials, documents or reports marked as confidential or proprietary

ARTICLE X

LIABILITY AND RISK MANAGEMENT

10.0 INSURANCE COVERAGE. CHC shall, at its sole cost and expense, procure and maintain during the term of this AGREEMENT, the following coverage and limits of insurance:

10.0.1 MEDICAL MALPRACTICE/PROFESSIONAL LIABILITY. Medical Malpractice/ Professional Liability insurance in an amount not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate.

10.0.2 COMPREHENSIVE GENERAL LIABILITY. Comprehensive General Liability insurance in an amount not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate.

10.0.3 WORKER'S COMPENSATION. Worker's Compensation coverage as required by applicable state law.

10.1 ENDORSEMENTS. The Comprehensive General Liability policy shall contain additional endorsements naming the WARDEN and CCG as additional insureds with respect to liabilities arising out of the performance of services under this AGREEMENT.

10.2 PROOF OF INSURANCE. CHC shall provide the CCG proof of professional liability or medical malpractice coverage for CHC's HEALTH CARE STAFF, employees, agents and subcontractors, for the term services are provided under this AGREEMENT. CHC shall promptly notify the WARDEN, in writing, of each change in coverage, reduction in policy amounts or cancellation of insurance coverage. If CHC fails to provide proof of adequate insurance within a reasonable time under the circumstances, then the CCG shall be entitled to terminate this AGREEMENT without penalty to the CCG or the WARDEN pursuant to the terms of Article IX.

10.3 INDEMNIFICATION. CHC agrees to indemnify and hold harmless the CCG, its officials, agents, and employees from and against any and all claims, actions, lawsuits, damages, judgments or liabilities of any kind whatsoever caused by, based upon or arising out of any act, conduct, misconduct or omission of CHC, its agents, employees, or independent contractors in connection with the performance or non-performance of its duties under this AGREEMENT.

EXCLUSION. CHC, its agents, employees or independent contractors, shall not in any event be required to indemnify, defend, or hold harmless, the CCG with respect to any portion of any claims, actions, lawsuits, damages, judgments or liabilities of any kind whatsoever caused by, based upon or arising out of any act, conduct, misconduct or omission of the CCG, its officials, agents and employees.

The CCG and WARDEN agree to promptly notify CHC in writing of any incident, claim or lawsuit of which they become aware and shall fully cooperate in the defense of such claim. The CCG and WARDEN agree that CHC's indemnification and defense obligations do not apply for any costs or expenses, including attorney's fees or settlements, incurred or effected prior to written notice to CHC as set forth above. Upon written notice of claim, CHC shall take all steps necessary to promptly defend and protect the CCG and WARDEN from an indemnified claim, including retention of defense counsel, and CHC shall retain sole control of the defense while the action is pending, to the extent allowed by law.

10.4 HIPAA. CHC, the CCG, PRISON, and WARDEN and their employees, agents and subcontractors shall fully comply with, and shall implement all necessary policies and/or procedures in order to comply with, the requirements of HIPAA as it applies to the services provided under this AGREEMENT. The CCG, PRISON and WARDEN and their employees and agents shall indemnify and hold harmless CHC from and against any claims of any kind made as a result of alleged or actual violations of HIPAA by the CCG, the WARDEN and their employees, agents and subcontractors, unless such claims are proven to be caused by the sole negligence or willful misconduct of CHC.

CHC, its agents, employees or independent contractors, shall not in any event be required to indemnify, defend, or hold harmless the CCG, PRISON and WARDEN and their employees and agents from and against any claims of any kind made as a result of alleged

or actual violations of HIPAA by the CCG, the WARDEN and their employees, agents and subcontractors.

ARTICLE XI
MISCELLANEOUS

- 11.0 INDEPENDENT CONTRACTOR STATUS. It is mutually understood and agreed, and it is the intent of the parties hereto that an independent contractor relationship be and is hereby established under the terms and conditions of this AGREEMENT. Nothing in this AGREEMENT shall be construed to create an agency relationship, an employer/employee relationship, a joint venture relationship, or any other relationship allowing the CCG or WARDEN to exercise control or direction over the manner or methods by which CHC, its employees, agents or subcontractors perform hereunder, or CHC to exercise control or direction over the manner or methods by which the CCG or the WARDEN, and their employees, agents or subcontractors perform hereunder, other than as provided in this AGREEMENT.
- 11.1 SUBCONTRACTING. In performing its obligations under the AGREEMENT, it is understood that CHC is not licensed or otherwise authorized to engage in any activity that may be construed or deemed to constitute the practice of medicine, dentistry, optometry, or other professional healthcare service requiring licensure or other authorization under state law. To comply with these requirements CHC may engage physicians or other clinicians as independent contractors ("Contract Professionals"), rather than employees, in order to supply the clinical services required under this AGREEMENT. CHC shall engage Contract Professionals that meet the applicable professional licensing requirements and CHC shall exercise administrative supervision over such Contract Professionals as necessary to insure the fulfillment of the obligations contained in this AGREEMENT. Contract Professionals shall provide clinical services under this AGREEMENT in a manner reasonably consistent with the independent clinical judgment that the Contract Professional is required to exercise.
- 11.2 AGENCY. For purposes of asserting any statutory rights afforded to the CCG or the PRISON to pay providers for medical services at certain reduced rates, CCG and/or WARDEN designate CHC as their agent to assert such rights and privileges.
- 11.3 EQUAL EMPLOYMENT OPPORTUNITY. CHC will not discriminate against any employee or applicant for employment because of race, color, religion, sex, ancestry, national origin, place of birth, marital status, sexual orientation, age or handicap unrelated to a bona fide occupational qualification of the position or because of status as a disabled veteran or Vietnam-Era veteran. CHC will distribute copies of its commitment not to discriminate to all persons who participate in recruitment, screening, referral and selection of job applicants, and to prospective job applicants.
- 11.4 WAIVER OF BREACH. The waiver of either party of a breach or violation of any provision of this AGREEMENT shall not operate as, or be construed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 11.5 OTHER CONTRACTS AND THIRD-PARTY BENEFICIARIES. The parties acknowledge that CHC is neither bound by or aware of any other existing contracts to which either the WARDEN or the CCG are a party and which relate to the providing of health care to INMATES at the PRISON. The parties agree that they have not entered

into this AGREEMENT for the benefit of any third person or persons, and it is their express intention that this AGREEMENT is for their respective benefits only and not for the benefits of others who might otherwise be deemed to constitute third-party beneficiaries thereof.

- 11.6 FORCE MAJEURE. In case performance of any terms or provisions hereof shall be delayed or prevented because of compliance with any law, decree or order of any governmental agency or authority of local, State or Federal governments or because of riots, war, terrorism, explosions, acts of civil or military authority, acts of public enemy, public disturbances, lack of adequate security escorts, strikes, lockouts, differences with workers, earthquakes, fires, floods, Acts of God or any other reason whatsoever which is not reasonably within the control of the party whose performance is interfered with and which, by the exercise of reasonable diligence, said party is unable to prevent; the party so suffering may, at its option, suspend, without liability, the performance of its obligations hereunder during the period such cause continues.
- 11.7 ASSIGNMENT. Except as otherwise provided herein, no party to this AGREEMENT may assign any of its rights or delegate any of its duties under this Agreement without the prior written consent of the other parties; provided however, that CHC may assign its rights or delegate its duties to an affiliate of CHC, or in connection with the sale of all or substantially all of the stock, assets or business of CHC, without the prior written consent of the other parties. Any unauthorized attempted assignment shall be null and void and of no force or effect.
- 11.8 NOTICES. Any notice of termination, requests, demands or other communications under this AGREEMENT shall be in writing and shall be deemed delivered: (a) when delivered in person to a representative the parties listed below; (b) upon receipt when mailed by overnight courier service, mailed by first-class certified or registered mail, return receipt requested, addressed to the party at the address below; or (c) upon confirmation of receipt if sent by facsimile to the fax number of the party listed below:

If for CHC:
Correctional Healthcare Companies, Inc.
General Counsel
6200 South Syracuse Way, Suite 440
Greenwood Village, CO 80111
Fax number (720) 458-3478

If for CCG:
Finance Director
Columbus Consolidated Government
P.O. Box 1340
Columbus, GA 31902-1340
Fax Number (706) 225-4086

And

Muscogee County Prison
Deputy Warden for Care and Treatment
Administration
7175 Sacerdote Lane
Columbus, Georgia 31907
Fax number (706) 653-497

Such address or facsimile number may be changed from time to time by either party by providing written notice as provided above.

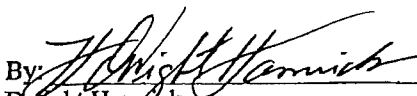
- 11.9 GOVERNING LAW. This AGREEMENT shall be governed by and construed in accordance with the laws of the State of Georgia without regard to the conflicts of laws or rules of any jurisdiction.
- 11.10 EXECUTION AUTHORITY. By their signature below, each signatory individual certifies that they are the properly authorized agent or officer of the applicable party hereto and have the requisite authority necessary to execute this Agreement on behalf of such party, and each party hereby certifies to the other that any resolutions necessary to create such authority have been duly passed and are now in full force and effect.
- 11.11 SURVIVAL. The following provisions will survive any termination or expiration of the AGREEMENT: Article VIII, Article IX and Article X.
- 11.12 COUNTERPARTS. This AGREEMENT may be executed in several counterparts, each of which shall be considered an original and all of which shall constitute but one and the same instrument.
- 11.13 TITLES OF PARAGRAPHS. Titles of paragraphs are inserted solely for convenience of reference and shall not be deemed to limit, expand or otherwise affect the provisions to which they relate.
- 11.14 SEVERABILITY. In the event that any one or more provisions of this AGREEMENT shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provision of this AGREEMENT and this AGREEMENT shall be construed and enforced as if such invalid, illegal or unenforceable provision had never been contained herein.
- 11.15 ENTIRE AGREEMENT. This AGREEMENT constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. This AGREEMENT may be amended at any time, but only with the written consent of all parties.

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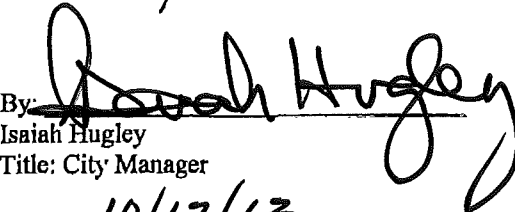
IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be executed as their official act by their respective representative, each of whom is duly authorized to execute the same.

AGREED TO AND ACCEPTED AS STATED ABOVE:

Consolidated Government of Columbus,
Georgia

By: 
Dwight Hamrick
Title: Warden

Date: 9/6/13

By: 
Isaiah Hugley
Title: City Manager

Date: 10/17/13

Correctional Healthcare Companies, Inc.

By: 
Douglas D. Goetz
Title: Chief Executive Officer

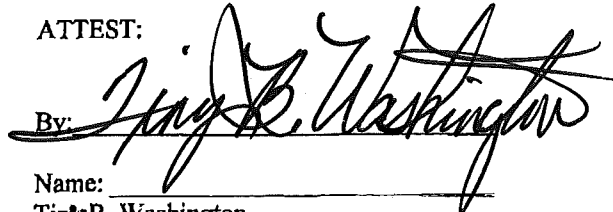
Date: 8/30/13

APPROVED AS TO LEGAL FORM:

By: 
Clifton C. Fay
Title: City Attorney

Date: 10/16/13

ATTEST:

By: 
Name: Tanya B. Washington
Title: Clerk of Council

Date: 10/17/13

EXECUTION AUTHORIZED

By Resolution No. 279-13

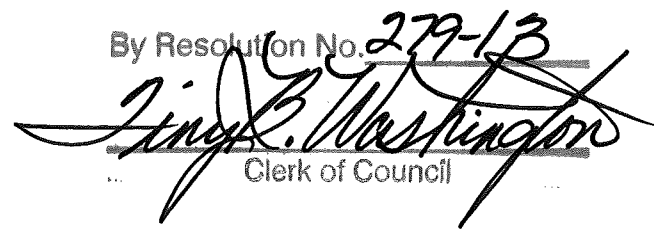

Clerk of Council

EXHIBIT A

**MINIMUM STAFFING PATTERN FOR
MUSCOGEE COUNTY PRISON
(Effective September 1, 2013)**

Position	Hours / Week	Total FTE's
Medical Director - Physician	8	0.20
Dental	4	0.10

EXHIBIT A - 1

**MINIMUM STAFFING PATTERN FOR
MUSCOGEE COUNTY PRISON
(Effective October 1, 2013)**

Position	Hours / Week	Total FTE's
Medical Director - Physician	8	0.20
Dentist	4	0.10
Registered Nurse	40	1.00
Licensed Practical Nurse	112	2.80
Licensed Practical Nurse	56	1.40
Licensed Practical Nurse	56	1.40
Total		5.50

Exhibit B

ELECTRONIC MEDICAL RECORDS at MUSCOGEE COUNTY, GEORGIA

Effective October 1, 2013

DEFINITIONS

EMR SOFTWARE – The VIZION software package developed and distributed by CHC, including the original computer software, computer program, source code, object code, algorithms and related documentation to enable the creation, maintenance, storage and access of electronic medical records and includes all enhancements, upgrades, modifications and additions.

SERVER – The single computer server owned, operated and maintained by CHC.

1.0 EMR SOFTWARE USE.

1.0.1. **GENERAL USE.** For the duration of the AGREEMENT, CHC will maintain one copy of the EMR SOFTWARE on its SERVER for use by CHC HEALTH CARE STAFF at the JAIL.

1.0.2. **EMR SOFTWARE USE UPON TERMINATION.** Upon termination of the AGREEMENT, CHC shall provide COUNTY a stand alone, read only program which will allow the SHERIFF to search for, view and print medical records pertaining to INMATES/DETAINEES. Such data shall be in the same format the data was stored preceding termination of this AGREEMENT.

2.0 **INTELLECTUAL PROPERTY AND OTHER PROPRIETARY INFORMATION.** CHC grants to COUNTY a non-exclusive, non-transferable, limited authority to access and use EMR SOFTWARE for purposes consistent with this AGREEMENT. CHC has created, acquired or otherwise has intellectual property rights in the EMR SOFTWARE and all copies thereof, including any and all updates, enhancements, customizations, revisions, modifications, future releases and any other changes thereto and all related information, material and documentation. This AGREEMENT does not grant COUNTY or SHERIFF any intellectual property rights in the EMR SOFTWARE and all such rights are reserved by CHC. The EMR SOFTWARE and all CHC documents or images used in its application, including but not limited to CHC Nursing Protocols, are the confidential and proprietary information of CHC and may not be copied or reproduced by COUNTY or SHERIFF. CHC has no ownership or claim of ownership in any medical data that is accessed via the EMR SOFTWARE.

3.0 **RESTRICTIONS.** COUNTY and SHERIFF shall not: (1) disassemble, decompile, unbundle, reverse engineer, or translate any part of the EMR SOFTWARE, or otherwise reduce to a human perceivable form, or otherwise attempt to reconstruct or discover the source code of the EMR SOFTWARE; (2)

modify, copy, duplicate, reproduce, license, or transfer or convey the EMR SOFTWARE; (3) customize, modify, translate or extend the functionality of the EMR SOFTWARE.

- 4.0 LIMITATION ON CHC's OBLIGATIONS. CHC is not responsible for any issues, support, or loss of functionality that may result from COUNTY or SHERIFF installing and using third-party software on or with the EMR SOFTWARE. CHC is not responsible for any COUNTY cost associated with interfacing the COUNTY'S software/hardware systems with CHC's EMR system. Furthermore, CHC shall not be liable for any loss of use, lost or damaged data, any inability to access or retrieve data, including any loss, damages, claims, suits or actions of any nature, including claims of injury to any person or persons or of damage to property, resulting from or caused directly or indirectly be reason of any error, omission, negligence, or wrongful act by the COUNTY or SHERIFF, their officers, agents and/or employees.
- 5.0 NO WARRANTIES. The EMR SOFTWARE is provided "as is", without warranty or representation of any kind, whether express or implied, or arising from common law, custom, usage or otherwise, or statutory, including without limitation, any implied warranties or non-infringement, merchantability, and fitness for a particular purpose, or pertaining to title, integration, accuracy, security or availability.
- 6.0 EMR SOFTWARE UPDATES. During the term of this AGREEMENT, CHC will provide COUNTY any available updates, modifications or enhancements which improve the speed, efficiency, or ease of use of the EMR SOFTWARE, or add additional capabilities to the EMR SOFTWARE.

EXHIBIT A
Business Documents

The vendor's business documents are redacted.

These documents are on file with the Columbus Consolidated Government:

Finance Department/Purchasing Division
Government Center – 5th Floor
100 10th Street
Columbus, Georgia 31901

To review the documents, contact the Purchasing Division at 706-225-3072.

EXHIBIT B

CITY'S SPECIFICATIONS

**COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL**

(ANNUAL CONTRACT)

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

February 28, 2013

ADDENDUM: NUMBER ONE
RFP No. 13-0024

Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ **COMPANY NAME:** _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The correct RFP due date is **Wednesday, March 20, 2013**, no later than 5:00 p.m. (EST).
- B. Site Visit/Walk-Thru is scheduled for **10:00 a.m. Thursday, March 7, 2013**. Vendors shall first convene in the Jail Lobby on the Ground Floor at the Muscogee County Jail, 700 Tenth Street, Columbus, GA 31901. Afterward vendors will immediately go to the Muscogee County Prison, 7175 Sacerdote Lane, Columbus, GA. The contact person at the Jail will be Paul Morris, and Ray Covington will be the contact at the Prison. Please complete the attendance sheet and fax to the Purchasing Division.
- C. Vendors attending the Site Visit/Walk-Thru must sign an attendance form complete with the company name, attendee name, address, e-mail address, telephone and fax numbers, which will be provided at the Site Visit/Walk Thru.
- D. All questions resulting from the Site Visit must be submitted in writing to Purchasing. The City will not be held by any verbal responses to questions.
- E. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,

Andrea J. McCorvey
Andrea J. McCorvey, CPPB
Purchasing Division Manager

**SITE VISIT/WALK-THRU
ATTENDANCE CONFIRMATION
FAX FORM**

DATE: _____

TO: Betty Hughey, Buyer Specialist
FAX NO. (706) 653-4109

RE: RFP NO. 13-0024
Comprehensive Medical Services
(ANNUAL CONTRACT)

A SITE VISIT/WALK-THRU IS SCHEDULED FOR 10:00 A.M., THURSDAY, MARCH 7, 2013.

The Site Visit/Walk-Thru will be held at at the Muscogee County Jail, 700 10th Street, Columbus, GA, and later to Muscogee County Prison, 7175 Sacerdote Lane, Columbus, GA . Vendors must complete this notification form to confirm attendance. Fax the form to Betty Hughey, Buyer, at fax number (706) 653-4109.

All questions resulting from the Site Visit must be submitted in writing to Purchasing. The City will not be held by any verbal responses to questions.

All vendors attending the Site Visit must sign an attendance sheet, complete with name of the firm, name of the attendee, complete address, phone and fax numbers, e-mail address.

Completing this form and faxing to the Purchasing Division confirms your intent to attend the Site Visit.
(PLEASE PRINT)

FROM: _____
Vendor

PLEASE INDICATE THE NUMBER OF REPRESENTATIVES ATTENDING:___
(Information is necessary to ensure adequate seating)

Authorized Agent

Mailing Address

City

State

Zip Code

Telephone Number

Fax Number

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 15, 2013

ADDENDUM: NUMBER TWO

Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison (Annual Contract)

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ COMPANY NAME: _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The RFP due date has been extended until **Wednesday, March 27, 2013**, no later than 5:00 p.m. (EST).
- B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,

Andrea J. McCorvey

Andrea J. McCorvey, CPPB
Purchasing Division Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 22, 2013

ADDENDUM: NUMBER THREE

**Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP NO. 13-0024**

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ **COMPANY NAME:** _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

A. The RFP due date has been extended until Wednesday, April 3, 2013, no later than 5:00 p.m. (EST).

B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,

Andrea J. McCorvey, CPPB
Purchasing Division Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 29, 2013

ADDENDUM: NUMBER FOUR

**Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP NO. 13-0024**

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ **COMPANY NAME:** _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

A. The RFP due date has been extended until **Friday, April 12, 2013**, no later than 5:00 p.m. (EST).

B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,

Andrea J. McCorvey, CPPB
Purchasing Division Manager

ATTACHMENT B

Muscogee County Prison 7175 Sacerdote Lane Columbus, Ga. 31908

1. Page 15, Section 9 – Sample Agreement: Is it the County's expectation that the Bidder must submit a complete sample contract with its proposal to the County? Or will the County provide its preferred contract for negotiation between the Parties upon contract award?

Response: Both options will be considered.

2. Page 17, Appendix – Scope of Services, #18: Which point of delivery sites has Muscogee designated as needing computers of medical care?

Response: The Prison currently has a total of 3 Computers.

3. Page 18, Appendix – Scope of Services #26: This requirement states the vendor is responsible for filing Medicare. Because Medicare cannot be used for incarcerated individuals, should this be Medicaid? Please clarify.

Response: See response to #54 in Attachment A.

4. Page 19, Appendix A, III, E: Please clarify that if non-formulary medication is used by the provide, the vendor will not be reimbursed by MCJ/P. Or is nonpayment only in the case of non-formulary procedure not being followed that MCJ/P does not reimburse?

Response: See response to #55 in Attachment A.

5. Please identify the current LAN/WAN infrastructure through the jail and the prison that will be made available to the vendor. Please include backbone, bandwidth and interconnectivity specification.

Response: Ethernet infrastructure connecting at 100 Mbps. Only the Jail has wireless access at 56 Mbps.

6. Please identify the Muscogee County's current Offender/Jail Management System by vendor and version.

Response: Offender Management System for Windows Version 7.4.1

7. Is it the intention of Muscogee County to provide any necessary computers, printers or scanners that will be required for the implementation of an HER solution.

Response: The Prison has a total of 3 Computers for Medical usage

8. Regarding the PC's/hardware for medical treatment and documentation, whether provided by the vendor or the County: Will the County provide internet connectivity back to the selected vendor's secure datacenter applications for a hosted HER, personnel management and any necessary reporting?

Response: No; thick client software will need to be installed on the computers.

9. New Horizons Mental Health Services is a current provider, can their providers write prescriptions?

Response: Yes.

10. If so, will they follow our formulary? Do they have their own formulary? And if so, is their pharmacy part of the Mental Health budget or does it fall under the medical budget?

Response: Currently the Medical staff carry out or transcribe all Pharmaceutical orders including New Horizons order. All orders are submitted to Diamond Pharmacy – formulary is used.

11. The dental suite has old equipment, Is that equipment all in working order? Is everything available for dentist to come in and do x-rays and extractions?

Response: No. X-ray equipment is inoperable. All office and medical equipment is available for the vendor

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

April 2, 2013

ADDENDUM: NUMBER FIVE
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP No. 13-0024

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ **COMPANY NAME:** _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

The RFP due date has been extended until **Wednesday, April 12, 2013**, no later than 5:00 p.m. (EST).

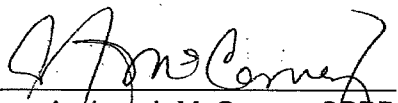
INCLUDED IN THIS ADDENDUM ARE THE FOLLOWING:

- A. Attachment A includes the responses to "Questions/Clarifications" requests for **Muscogee County Jail**.
- B. Attachment B includes the responses to "Questions/Clarifications" requests for **Muscogee County Prison**.
- C. Attachment C includes the Current Employee Salaries.
- D. The City desires to consider the option of awarding the contract to more than one vendor. Therefore, it is requested that vendors submit proposals for the following: **Option I - Comprehensive Medical Services for Muscogee County Jail and/or Option II - Comprehensive Medical Services for Muscogee County Prison. See attached specifications.**

ALL CLAUSES OF THE RFP REMAIN THE SAME FOR OPTION I AND OPTION II, with the exception of the changes noted on the attached Amendments.

- E. Separate Cost Proposal Forms and Contract Signature Pages are attached for each Option.
- F. Separate Evaluations will be performed for each option.

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

Amendment 1

Request for Proposal (Option I) Comprehensive Medical Services/ Muscogee County Jail (Annual Contract)

This page has been revised to include only the Staffing Matrix for the Muscogee County Jail.

II. PERSONNEL/STAFFING

Vendor will be required to recruit, train, and manage all clinical staff. The MCSO has provided a sample-staffing matrix below, but vendors are encouraged to offer innovative ways to enhance the delivery of care with more efficient staffing models. Any changes in population or standard of care set forth in the NCCHC Jail and Prison Standards which may require an adjustment in the staffing level agreed upon in the original contract, may be discussed between the MCSO, MCJ and the vendor. If an agreement in staffing or service levels cannot be met then either party may terminate upon 90 days written notice.

A. Staffing Matrix Proposed by the MCSO for the Muscogee County Jail

1.	Medical Director	32 hours
2.	NP/PA	40 hours
3.	Dentist	30 hours
4.	H.S.A	40 hours
5.	DON	40 hours
6.	Admin Asst.	40 hours
7.	RN for H&P	40 hours
8.	RN for Charge	168 hours
9.	LPN for Sick Call	112 hours
10.	LPN for Med Cart	336 hours
11.	LPN for Intake	168 hours
12.	Med Tech	168 hours
13.	Medical Records	<u>136 hours</u>
Total		1350 hours

APPENDIX A (OPTION I)

**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL
(ANNUAL CONTRACT)
RFP NO. 13-0024**

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$
Medical Services	Third Year	\$
Medical Services	Fourth Year	\$
Medical Services	Fifth Year	\$

Company Name:_____

Authorized Signature:_____

APPENDIX E (Option I)

**CONTRACT SIGNATURE PAGE
Comprehensive Medical Services/
Muscogee County Jail**

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Consolidated Government of Columbus, Georgia for the following:

By: _____
Signature of Authorized Representative

Witness as to the Contractor

Print Name and Title of Signatory

Witness as to the Contractor

Business Name

(Corporate Seal)

Business Address

Tax ID Number

Telephone Number

Fax Number

Email Address

**CONSOLIDATED GOVERNMENT OF
COLUMBUS, GEORGIA**

Accepted this ____ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

Amendment 2

Request for Proposal (Option II) Comprehensive Medical Services/ Muscogee County Prison (Annual Contract)

I. INTRODUCTION

It is the intent of the Columbus Consolidated Government (the city), Muscogee County Prison to enter into an annual contract with a qualified medical correctional provider for comprehensive medical services to those patients incarcerated in the Muscogee County Prison (MCP). These medical services will reflect the GDC medical standards for prisons and will be commensurate with the accepted community standard of care. These services are further delineated and revised in Appendix A to include the requirements for the MCPPrison.

II. PERSONNEL/STAFFING

Vendor will be required to recruit, train, and manage all clinical staff. The MCP has provided a sample-staffing matrix below, but vendors are encouraged to offer innovative ways to enhance the delivery of care with more efficient staffing models. GDC has separate guidelines that MCP must meet since the prison house 524 State inmates. Any changes in population or standard of care set forth in the GDC guidelines may require an adjustment in the staffing level agreed upon in the original contract, may be discussed between MCP and the vendor. If an agreement in staffing or service levels cannot be met then either party may terminate upon 90 days written notice.

A. Staffing Matrix Proposed for the Muscogee County Prison

1. Medical Director	20 hours
2. RN for Charge	40 hours
2. LPN	240 hours
3. Dentist	<u>4 hours</u>
	304 hours

Note: The MCPPrison run (2) sick calls a day (1) doctor call; Med cart call; and intake as well.

APPENDIX A (OPTION II)

**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY PRISON
(ANNUAL CONTRACT)
RFP NO. 13-0024**

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$
Medical Services	Third Year	\$
Medical Services	Fourth Year	\$
Medical Services	Fifth Year	\$

Company Name: _____

Authorized Signature: _____

APPENDIX E (Option II)

**CONTRACT SIGNATURE PAGE
Comprehensive Medical Services/
Muscogee County Prison`**

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Consolidated Government of Columbus, Georgia for the following:

By: _____
Signature of Authorized Representative

Witness as to the Contractor

Print Name and Title of Signatory

Witness as to the Contractor

Business Name

(Corporate Seal)

Business Address

Tax ID Number

Telephone Number

Fax Number

Email Address

**CONSOLIDATED GOVERNMENT OF
COLUMBUS, GEORGIA**

Accepted this ____ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

ATTACHMENT A

Muscogee County Jail 700 10th Street Columbus, GA 31901

Responses to Questions/Clarification requests;

1. How many inmate beds are at each facility?

Response: Muscogee County Jail has 1195.

2. How many intakes are done daily and annually at each facility?

Response: MCJ – 45 per day and about 16,500 annually.

3. On average, how many females, juveniles, state and federal Inmates are held at each facility?

Response: MCJ has 150 females, 0 juveniles, 125 state inmates, and 5 federal inmates.

4. How many medical beds are at each facility?

Response: MCJ has 26.

5. What is the average length of stay for inmates in each facility?

Response: This data is not available.

6. Could you please provide a current staffing plan for each facility?

Response: See Page 18 of 29 for Personnel/Staffing plan.

7. Does the nursing staff currently work 12 or 8 hour shifts?

Response: It is a combination of 8 hour shifts on week days and 12 hour shifts on weekends.

8. Are there any current or pending lawsuits or is the County under any Consent Orders/Decrees because of medical care?

Response: There is a consent decree from 1999, which covers medical.

9. Are medical services provided to the Inmates 24/7? If not, would the County like to have medical services provided at each facility 24/7?

Response: We currently provide medical services 24/7 and expect 24/7 from the contractor.

10. What Jail Management System does each facility use?

Response: In house designed mainframe system.

11. Does the County currently utilize an Electronic Medical Records system? Does the County have any interest in doing so?

Response: No current EMR, but we are considering using one.

12. Does the County currently utilize telemedicine? Does the County have any interest in doing so?

Response: No

13. How many x-rays are done onsite?

Response: 40 per week.

14. Who is the current mobile x-ray provider?

Response: HCX.

15. Are dental services provided on-site? If so, is the x-ray machine digital or analog?

Response: Yes dental services on site, we have an Analog X-Ray Machine.

16. How many dental x-rays are taken and read annually?

Response: This is not available.

17. Who is responsible for the costs of dental services?

Response: The contractor is responsible for all dental services.

18. How many patients are seen by dentist per week?

Response: Approximately 55 per week at the MCJ.

19. Could you please forward a copy of the contract for the current medical provider?

Response: See attached Letter of Agreement, Appendix 2.

20. How many patients tested positive for TB in 2011? In 2012?

Response: Approximately 48 positive PPDs but no positive TB patients.

21. Do the facilities have at least one functioning negative pressure room?

Response: No

22. What is the annual average # of pregnant females?

Response: On average there are 3 pregnant females in the MCJ at any time.

23. Are OB/GYN services currently being provided on-site?

Response: No

24. Who is the current hazardous waste provider?

Response: Steri -cycle.

25. How many inmates were hemophiliacs in 2011? In 2012?

Response: None

26. How many inmates have Hepatitis C in 2011? In 2012?

Response: This info is not available.

27. How many inmates are HIV+ in 2011? In 2012?

Response: At any time we have 6 to 7 HIV positive inmates being treated in the MCJ.

28. How many inmates require a methadone clinic in 2011? In 2012?

Response: The MCJ provides methadone to pregnant females who are already on methadone or require withdrawal support.

29. How many inmates are on psychotropic medications in 2011? In 2012?

Response: Approximately 200 of the 1100 plus inmates are getting long term medical/psychotropic intervention.

30. How many Medicare claims were submitted in 2011? In 2012?

Response: None.

31. What is the average daily population at the jail?

Response: 1140 MCJ

32. What was the total amount spent in the last full budget year for medical inmate healthcare? (Including contract price and additional medical cost such as hospital visits, mental health, prescriptions, etc.)

Response: Medical care and contract for offsite inmate medical care is \$5,219,341. Of which \$1,932,227 is personnel costs (wages & salaries), \$819,347 is for contract for offsite medical inmate care and \$83,586 is for inmate dental services.

33. The total number of nurses on site each day and how many hours per day?

Response: See Page 18 of 29, proposed staffing plan in RFP specifications.

34. Does the jail have an infirmary? How many beds? Negative air flow rooms?

Response: Yes; 26; No

35. Is there a dental operatory suite on-site?

Response: Yes

36. Please provide a list of equipment available for vendor use.

Response: We have a comprehensive clinic with adequate equipment to include an EKG.

37. Is the vendor expected to pay for all offsite care upfront and then seek reimbursement for same?

Response: Yes.

38. Does ownership of equipment purchased by the vendor chosen transfer to the County Jail or County Prison?

Response: This is open to negotiation.

39. Do the County Jail and/or County Prison have an inmate grievance policy? Is it in electronic or paper format?

Response: The MCJ has an electronic.

40. Do the County Jail and/or County Prison have agreements with local hospitals or other offsite health care providers?

Response: Yes

41. Can the County provide the estimated inmate health care expense for the last 12 months or fiscal year, for the County Jail and County Prison?

Response: See response to #32 above.

42. If possible can the County provide a breakdown of the total expense for each facility in regards to wages/salaries, offsite medical expenses, pharmaceuticals, dental, etc.?

Response: See response to #32 above, and Appendix 1.

43. What is the approved bed size for the County Jail?

Response: 1069

44. Where does the County Jail procure their pharmaceuticals?

Response: Diamond Pharmacy.

45. Can the County Jail provide a more detailed current staffing plan, such as a sample schedule of health care staff working during a typical week, including days, shifts and hours worked?

Response: See Page 18 of 29 of the RFP specifications.

46. Will the Health Services Administrator be an employee of the vendor that secures the contract with the County?

Response: Yes.

47. Average number of inmates on dialysis at the County Jail?

Response: We have 6 on average per year.

48. Average number of HIV inmates at the County Jail?

Response: 6

49. Annual number of bookings/intakes at the County Jail?

Response: 16,500 per year

50. When does the County anticipate the chosen vendor to begin providing services (i.e. contract start date)?

Response: Mid –May or Early June.

51. Can the County provide a list of current medical equipment at the County Jail?

Response: No, we have most routine equipment to include an EKG machine.

52. Page 15, Section 9 – Sample Agreement: Is it the County's expectation that the Bidder must submit a complete sample contract with its proposal to the County? Or will the County provide its preferred contract for negotiation between the Parties upon contract award?

Response: Both options will be considered.

53. Page 17, Appendix – Scope of Services, #18: Which point of delivery sites has Muscogee designated as needing computers of medical care?

Response: The current clinical staff has already designated the POD for computers and those computers will be in place when the contractor arrives.

54. Page 18, Appendix – Scope of Services #26: This requirement states the vendor is responsible for filing Medicare. Because Medicare cannot be used for incarcerated individuals, should this be Medicaid? Please clarify.

Response: The intent was for Medicaid.

55. Page 19, Appendix A, III, E: Please clarify that if non-formulary medication is used by the provider, the vendor will not be reimbursed by MCJ/P. Or is nonpayment only in the case of non-formulary procedure not being followed that MCJ/P does not reimburse?

Response: The City will pay for all medications prescribed by the provider. The City requires the provider to adhere to a formulary and to provide a system for approving non-formulary medications.

56. Please identify the current LAN/WAN infrastructure through the jail and the prison that will be made available to the vendor. Please include backbone, bandwidth and interconnectivity specification.

Response: Ethernet infrastructure connecting at 100 Mbps. Only the Jail has wireless access at 56 Mbps.

57. Please identify the Muscogee County's current Offender/Jail Management System by vendor and version.

Response: The JMS is a program built by the City's Information Technology Department.

58. Is it the intention of Muscogee County to provide any necessary computers, printers or scanners that will be required for the implementation of an EHR solution.

Response: Yes, it the intents to provide all the hardware required for an E.H.R.

59. Regarding the PC's/hardware for medical treatment and documentation, whether provided by the vendor or the County: Will the County provide internet connectivity back to the selected vendor's secure datacenter applications for a hosted HER, personnel management and any necessary reporting?

Response: Yes.

60. The dental suite has old equipment, Is that equipment all in working order? Is everything available for dentist to come in and do x-rays and extractions?

Response: Yes.

61. On average how many daily intakes?

Response: 35 to 40

62. On average how many daily releases?

Response: 35 to 40

63. Sick call is completed on the floors is there wireless internet and computers available in each area sick call is performed?

Response: Yes.

64. Health Service Administrator (HAS) gave tour of the facility. Will he remain in the position? Is that position part of the contract provided by the vendor?

Response: Yes, the position is part of the contract provided by the vendor. We expect the vendor to interview and offer employment to all the current staff that meets the vendor's standards. The vendor alone is responsible for the recruitment, and hiring of the staff.

65. During the pre-bid meeting there was mention of purchasing an electronic MAR. Who is the vendor and does it interact with any electronic Medical records?

Response: We are implementing Sapphire from Diamond.

66. Are the nurses currently county employees, will those positions be moved to the vendor?

Response: All the positions will become the vendor's employees.

67. Is pill pass required for all county inmates at the Prison or are some of the inmates allowed to keep medications on them?

Response: A limited amount of inmates can have a K.O.P

68. What is the daily average number of inmates on suicide watch?

Response: Eight.

69. How many inmate deaths in the past 12 months?

Response: No deaths

70. Are your facility NCCHC or ACA accredited?

Response: No.

71. Please expand on #26 under the Scope of Services, "vendor is required for filing medicare" (page 18)

Response: The intent is to seek reimbursement for inmate health services from Medicaid when possible.

72. Is a cost pool acceptable for Over the counter medications, pharmacy, labs supplies, etc. If delivered in a transparent manner (with backup invoices from vendors providing supplies and services)?

Response: Yes, a cost pool will be acceptable.

73. What did you spend on the following items last year:

Response:

X-ray (\$ 55,000)

Medical Supplies (\$38,000)

Office Supplies (not available, clinic office supplies provided by jail)

Outside Claims (inpatient & outpatient) (not included in RFP)
Pharmacy (not included in the RFP)
Labs (\$106,000)

74. How many referrals were sent out to the hospital last year?

Response: 310

75. How much was spent on expendable supplies (page 17) last year?

Response: \$38,000

76. How many computers and printers are available for medical staff?

Response: 14 computers and 4 printers

77. What is the average number of diabetics at the facility?

Response: Twenty (20).

78. What is the average number of HIV patients at the facility?

Response: Six (6).

79. What is your current population Jail?

Response: 1145

80. How much has been expended on pharmacy each of the past two years,?

Response: Not in the scope of the RFP.

81. How much has been expended for overall medical care for inmates for each of the past two years?

Response: See response to #32 above.

82. How much has been expended for dialysis care for the inmates over the past two years?

Response: Not in the scope of the RFP.

83. How much has been expended for eyeglasses for inmates for each of the past two years?

Response: Not in the scope of the RFP.

84. How many inmates are on KOP medications at this site?

Response: At different times between 0 and 35.

85. Is telemedicine acceptable to the agency?

Response: The City has not been seeking telemedicine but will consider it.

86. Who is responsible for the T-1 Line for the telemedicine and EMR?

Response: The City will be responsible for the lines for EMRs.

87. How much has been expended on off- site services in each of the past two years?

Response: Off site services are not included in the scope of this RFP.

88. What hospital provider do you currently use at Muscogee County Jail/County prison?

Response: Columbus Regional.

89. What is the number of psychotropic medications per site per month?

Response: Unknown.

90. Who is the x-ray provider? Do they provide mammogram and ultrasound?

Response: HCX provides x-rays; they do not currently provide mammograms or ultrasound.

91. Who is the current Lab provider?

Response: Clinical Pathologies.

92. Do they provide phlebotomists?

Response: No.

93. Who is the medical waste provider?

Response: Streri-cycle.

94. Is the successful vendor required to adhere to your pharmacy formulary or may we recommend our own formulary that is cost effective?

Response: We are open to the best, most cost effective formulary without regard to who provides it.

95. Is the price estimate for all years to remain the same or is there an allowance for "COLA" increase?

Response: We expect a COLA increase.

96. What accreditation body is required for this contract?

Response: We are not currently accredited but would be interested in seeking ACA and NCCHC accreditation in the second year of the contract.

97. How many medication carts are available at each site....how many delivery sites are required at each site?

Response: At MCJ, 4 carts, with a deliver point on each floor.

98. Do you test at intake for HIV? For Hep C? Do you require treatment for these diseases throughout incarceration?

Response: There is no mandate to test for these diseases. However we test on request and treat if the Disease meets the current expected criteria for treatment, if in a doctor's opinion treatment is warranted, or if the patient is currently in treatment.

99. Is the successful vendor responsible for pediatric care of newborns?

Response: No.

100. Is the successful vendor responsible for abortions?

Response: No.

101. Is successful vendor required to hire incumbent staff? Under what guidelines?

Response: No. We expect the vendor to interview and offer employment to all the current staff that meets the vendor's standards. The vendor alone is responsible for the recruitment, and hiring of the staff.

102. Would the agency be agreeable to a Cap Agreement wherein there is a cap to risk?

Response: Yes we are open to a shared risk agreement.

103. How much has been expended on offsite services each of the past two years?

Response: See response to #32 above.

104. How much has been expended on pharmacy each of the past two years?

Response: Pharmacy is not in the scope of this RFP.

105. How much has been expended for overall medical care for inmates for each of the past two years?

Response: The RFP requests proposals which are limited to on site care, on site supplies, staffing and bill management (third party administration). The total cost of health care is beyond the scope of this RFP.

106. Is any of the healthcare staff under a collective bargaining agreement?

Response: No.

107. Please provide a list of all office and medical equipment available to the vendor at both the Jail and Prison.

Response: All office equipment and medical equipment including EKG machines are availed for the vendor.

108. What Jail Management System is used at the Muscogee County Jail and Muscogee County Prison?

Response: In house developed system.

109. Are the Muscogee County Jail and Muscogee County Prison equipped with WIFI or Hard Data wires?

Response: Yes

110. What form of inmate ID is used at the Muscogee County Jail and Muscogee County Prison (wrist band, ID card, etc.)? Are inmate IDs bar coded? If not, are the Jail and Prison capable of implementing a bar code system?

Response: MCJ has a bar code system.

111. Do the Muscogee County Jail have a Medical Co-Pay? If so, can you please provide the schedule?

Response: Yes, \$5.00 for each inmate request.

112. How is Off-Site Security Watch handled? Do they use on-duty officers, comp. time, overtime, etc.?

Response: The jail management provides off site security.

113. What OTC medications are inmates allowed to purchase through the commissary? Please provide order sheet.

Response: Inmates can get cold packs, aspirin and Tylenol etc.

114. Are screenings conducted at intake and can the MCSO refuse admittance to inmates?

Response: Yes.

115. Please provide a copy of the current contract with Corizon.

Response: See attached Letter of Agreement, Appendix 2.

116. Please provide hourly rates by position for those employees covered under Corizon.

Response: Information is unavailable.

117. Please provide a list of any current vacancies that exist.

Response: The clinic is currently without 3 RNs.

118. Please confirm that a nurse is responsible for constant watch of suicidal patients during the day shift at the jail.

Response: Currently a medical staff member is responsible for suicide watch.

119. Please confirm the vendor will only be reimbursed for off-site claim expenses quarterly.

Response: The vendor can request either monthly or quarterly reimbursement.

120. Who is the current mobile X-ray vendor?

Response: HCX

121. Other than the chairs that require reupholstering are there any other known maintenance needs that will be the responsibility of the vendor.

Response: No, and we intend to seek either new tables or we will reupholster.

122. Will the County consider an extension on the proposal deadline to allow vendors two weeks after either the answers to questions have been published? This will allow all vendors sufficient time to analyze the necessary information and will likely result in stronger and more cost-effective responses.

Response: The due date has been extended until April 12, 2013; 5:00 p.m.

123. Please provide any currently applicable settlement agreement, memorandum of understanding, or other binding agreement between a Court or the US Department of Justice and the Columbus Consolidated Government, Muscogee County Sheriff's Office, Muscogee County Jail, or other entity under which the operations of the jail, including the services to be proposed as defined in this RFP, are subject to review, inspection, and compliance.

Response: See Appendix 3.

124. If, in the past, there was such an agreement, please confirm that the agreement is no longer applicable.

Response: The consent decree is still in place. See Appendix 3.

125. For any agreement that is currently applicable please provide the report of the last agency, court, or reviewer's survey.

Response: Information unavailable.

126. Please provide your contracts with vendors/contractors who provide inmate mental health and pharmacy services.

Response: Outside the scope of this RFP.

127. Please provide all off-site utilization statistics for the past 24 months by type of services and provider.

Response: These statistics are not available; maybe outside the scope of the RFP.

128. Please clarify what is meant by "Billing adjudication" in section I - A -13 if the vendor is not responsible for off-site cost?

Response: We want the vendor to review the bill, make sure the patient was ours and the procedure is authorized, and then pay the bill according to the Medicaid rate or the Contracted rate.

129. Will the vendor be responsible for adjudicating and processing all claims and reconciling them with the county for payment? Please clarify the process or if providers will direct bill the County.

Response: The intent is for bills to be sent to the vendor to be evaluated and paid and then for the vendor to receive reimbursement from the City.

130. Please specify what types of services that are currently rendered on-site by outside providers.

Response: Pharmacy.

131. Please provide the ADPs by facility (MCJ and MCP) by year for the last three (3) years.

Response: See response below.

132. What ADPs does the City require vendors to bid upon for the MCJ and MCP?

Response: There is no mention of bids linked to ADPs in the RFP.

133. Please provide the 2012/2013 intake statistics by year for both the MCJ and MCP.

Response: See response for #2 above for MCJ. MCP response is in Attachment B.

134. Are vendors required to submit completed GSICA for sub-subcontractors with proposals or would it be acceptable to submit these after award of contract and prior to beginning of service?

Response: After notification, the recommended vendor (s) will have five (5) business days to provide the completed GSICA Form. The GSICA Form must be included with the contract documents prior to signing.

135. What is the current annual budget for medical services for the MCJ and the MCP excluding offsite services, pharmacy services, and mental health services?

Response: See response to #32 above.

136. Please provide the current employees' hourly rates and/or salaries by discipline (MD, RN, LPN, etc.). Also, please provide years of service or hire dates.

Response: MCJ expects the vendor to provide a pay scale to whatever nurses it hires, which is competitive with those pay scales in the community. The MCJ recognizes that the vendor will need to focus on providing competitive compensation in order to recruit and retain the quality of nurses we seek. See Appendix 1 with the salaries by discipline for both MCJ and MCP.

137. Is the county currently using EMR system? If not, is the vendor expected to implement one?

Response: We are currently seeking an EMR, and are willing to discuss this with the selected vendor.

138. We understand that the vendor will be financially responsible for onsite lab and x-ray services. Please clarify if the vendor is responsible for both the management and the financial obligations that pertain to these in-clinic contracts.

Response: The vendor may negotiate and manage these contracts as they determine is in the best interest of the City and the management of the clinic. The vendor can retain the current contractors or establish relationships with new contractors.

139. What specialty services are currently being provided onsite (e.g. dialysis, physical therapy, OB/GYN, optometry)? What are all the specialty services provided onsite? Will the vendor be financially responsible for these specialty services?

Response: The vendor is not responsible for specialty services, currently we have an optometrist on site once per month and that service may be either included or excluded from the contract.

140. We understand that the City is requesting vendors' provide staffing matrices to enhance the care currently being provided onsite. Are vendors required to include a price based upon the staffing matrices proposed by the MCSO in the RFP as well? If the staffing matrices in the RFP do not reflect the current staffing plans, please provide current staffing matrices for the MCJ and the MCP.

Response: The staffing matrix in the Option I is the matrix we have determined is required to run the MCJ clinic and is the matrix we wish the vendor to bid on. The current staffing matrices is listed in Attachment C.

141. We understand that vendors will not be financially responsible for offsite services. However, since the vendors will be responsible for utilization management and claims adjudication, please provide the following by facility, by year for the last 3 years:

- Hospital days
- ER visits
- Specialty visits
- Outpatient surgeries
- Diagnostics
- Total offsite dollars (\$819,347)

Response: Other Information Unavailable.

142. Please identify who will be responsible for watching patients on suicide watch.

Response: Suicide is managed by a MT.

143. Who is required to manage copays for inmates?

Response: The jail accountant.

144. What are the onsite service stats (number of nursing sick calls, dental visits, HCP visits, etc) for each facility?

Response: The City is not interested in replicating the current or historical pattern of health care delivery rather we seek a vendor that we can be confident will bring systems which will improve the delivery of health

care at these two facilities. The current production follows: 1. Nursing sick call combined 360, Dental sick call combined 85 per week, MD/NP sick call combined 310.

145. How often are inmates transferred to the prison?

Response: Transfers are conducted when the Ga.DOC calls for the inmates, after they have been sentence by the court.

146. What days/times are inmates received from the DOC?

Response: The transfer days are set by the DOC and subject to change; transfers are always conducted during routine weekday operations.

147. Is this contract currently through a private company or is the Sheriff running it?

Response: Muscogee County Sheriff is running all health care for both facilities; Corizon is only one of a number of separate contracts all managed by the MCJ.

148. What is the name of the current provider for inmate healthcare and the current contract price?

Response: The MCSO manages all the contracts involved in the jail clinic and Corizon is one of many contracts. Corizon does not run the clinic. See Appendix 2, of this Addendum, the Letter of Agreement with Corizon.

149. New Horizons Mental Health Services is a current provider, can their providers write prescriptions?

Response: Yes.

150. If so, will they follow our formulary? Do they have their own formulary? And if so, is their pharmacy part of the Mental Health budget or does it fall under the medical budget? If we read the RFP we find that all prescription costs are the responsibility of the county.

Response: The Mental Health providers will continue to have their own formulary.

151. Please clarify if the staffing matrix is based on weekly hours?

Response: The staffing is based on the number of hours required by each level of provider to cover the required posts. MCJ has calculated the number of hours and the relief factor required to staff all the posts we understand to be required to provide the routine medical interventions such as sick call, medication delivery, physicals, chronic care, records keeping, intake screening, infection control, quality improvement, emergency response and supervision. Our staffing matrix is based on a careful analysis of what we do now, what we would hope to accomplish in the immediate future, and our understanding of the concept of the community standard of care. We expect that all vendors use this matrix to guide the development of their bids so we can judge each vendor's bid according to an objective standard. Once the bids have been evaluated, and the selected vendor and the MCSO enter into negotiations we will be open to discussions of alternative staffing matrixes, which will achieve the same goals.

152. Please provide an equipment list for each facility and approximate age.

Response: The clinic has all the equipment necessary to provide health care in this environment. See response #161 for complete equipment listing.

153. What is your ADP Jail?

Response: 1145

154. How many medication passes are held at this site?

Response: 3

155. Please identify all Infirmary locations with number of beds and level of intensity of treatment. Is either the Jail or the Prison currently subject to any court orders or legal directives?

Response: MCJ is currently under a consent decree from 1999. The prison has 2 infirmary beds and the

jail has 26 infirmary beds. All treatment in the jail and prison would be considered sub-acute and not requiring emergency room intervention of inpatient care.

156. Please provide a copy of current salaries for all Muscogee County healthcare employees.

Response: See response #32 in Attachment A, and Attachment C.

157. Please provide a copy of all existing equipment, furniture, and computers that will be provided to the selected vendor.

Response: MCJ has all the furniture, equipment, and supplies needed to run a jail clinic of this size. Much of the furniture and equipment will need to be refurnished or replaced in the near future. Once a vendor is selected we will be open to negotiations related to adding to or replacing equipment.

158. Please describe an example of when the Vendor will be responsible for filing Medicare claims.

Response: We expect that the vendor seek evidence of a patient insurance at intake, then any services provided to include specialty care if Medicare will pay for it we want the vendor to submit the invoice to Medicare. Yes, within the next 2 year everyone that comes to jail should be enrolled in Medicare. We want the vendor to assist with the enrollment process and in turn seek reimbursement from Medicaid once the Medicaid program includes incarcerated patients.

159. Please provide the most recent DOJ site visit report and recommendations. Has the DOJ recommended a specific staffing plan?

Response: A complete copy of DOJ report is attached in Appendix 3.

160. Since the vendor is not financially responsible for any off-site services, please clarify if the County has already contracts in place with hospitals, specialists, and ancillary providers which the vendor will be required to use. Will the County be providing a list of authorized vendors or should the vendor be ready to negotiate these agreements?

Response: Currently most specialty services are provided by Columbus Regional and the City has a contract with this company. The City has contracts with vendors for all the required services. The selected vendor will not be required to negotiate any contracts with vendors in the first year. The MCSO will be open to discuss with the selected vendor related to renegotiations with other vendors but currently this service is not being sought with this RFP.

161. Please provide a list of equipment (with estimated age) currently onsite. How many dental chairs are onsite at each facility?

Response: Exam room equipment will require maintenance or replacement in the next year. The clinic has the following equipment:

2 Dental Chairs (both in good repair)

Dental x-rays

Centrifuges

Doppler's,

Nebulizers,

EKG machines

Suction devices

Automated vital sign machines

The clinic also has copiers, 14 computers, and a number of printers. We have 3 exam tables and adequate desks and cabinets in every exam room.

162. We understand that vendors will not be financially responsible for pharmaceuticals. However, since the vendors will be responsible for managing the formulary, please provide the following by facility, by year for the last 3 years:

Response: (psychotropic meds are the responsibility of another vendor.)

-Average monthly number of patients on HIV medications (6)

- Average monthly number of patients on psychotropic medications (230)
- Average monthly number of patients on hepatitis medications (0)
- Average monthly number of patients on hemophiliac medications (0)
- Total spent on HIV dollars (\$650,000)
- Total spent on psychotropic dollars (\$571,000)
- Total pharmacy dollars (\$2,183,985)

This is the combined total for the jail and prison

163. How many patients at the jail are on medications?

Response: This total will change every day. This total is driven in the most part by the prescribing practice of the doctors any vendor will hire to manage the inmate patient care. Currently have 643 patients on med and a total of 2033 prescriptions.

164. What is the average number of intakes per month at the jail?

Response: Average 40 intakes per day.

165. What is the average length of stay at the jail?

Response: Average stay is 3 days.

ATTACHMENT B

Muscogee County Prison 7175 Sacerdote Lane Columbus, Ga. 31908

1. Page 15, Section 9 – Sample Agreement: Is it the County's expectation that the Bidder must submit a complete sample contract with its proposal to the County? Or will the County provide its preferred contract for negotiation between the Parties upon contract award?

Response: Both options will be considered.

2. Page 17, Appendix – Scope of Services, #18: Which point of delivery sites has Muscogee designated as needing computers of medical care?

Response: The Prison currently has a total of 3 Computers.

3. Page 18, Appendix – Scope of Services #26: This requirement states the vendor is responsible for filing Medicare. Because Medicare cannot be used for incarcerated individuals, should this be Medicaid? Please clarify.

Response: See response to #54 in Attachment A.

4. Page 19, Appendix A, III, E: Please clarify that if non-formulary medication is used by the provide, the vendor will not be reimbursed by MCJ/P. Or is nonpayment only in the case of non-formulary procedure not being followed that MCJ/P does not reimburse?

Response: See response to #55 in Attachment A.

5. Please identify the current LAN/WAN infrastructure through the jail and the prison that will be made available to the vendor. Please include backbone, bandwidth and interconnectivity specification.

Response: Ethernet infrastructure connecting at 100 Mbps. Only the Jail has wireless access at 56 Mbps.

6. Please identify the Muscogee County's current Offender/Jail Management System by vendor and version.

Response: Offender Management System for Windows Version 7.4.1

7. Is it the intention of Muscogee County to provide any necessary computers, printers or scanners that will be required for the implementation of an HER solution.

Response: The Prison has a total of 3 Computers for Medical usage

8. Regarding the PC's/hardware for medical treatment and documentation, whether provided by the vendor or the County: Will the County provide internet connectivity back to the selected vendor's secure datacenter applications for a hosted HER, personnel management and any necessary reporting?

Response: No; thick client software will need to be installed on the computers.

9. New Horizons Mental Health Services is a current provider, can their providers write prescriptions?

Response: Yes.

10. If so, will they follow our formulary? Do they have their own formulary? And if so, is their pharmacy part of the Mental Health budget or does it fall under the medical budget?

Response: Currently the Medical staff carry out or transcribe all Pharmaceutical orders including New Horizons order. All orders are submitted to Diamond Pharmacy – formulary is used.

11. The dental suite has old equipment, Is that equipment all in working order? Is everything available for dentist to come in and do x-rays and extractions?

Response: No. X-ray equipment is inoperable. All office and medical equipment is available for the vendor

Response: See response to #72 in Attachment A.

26. What did you spend on the following items last year:

X-ray

Medical Supplies

Office Supplies

Outside Claims (inpatient & outpatient)

Pharmacy

Labs

Response: See response to #73 in Attachment A.

27. How many referrals were sent out to the hospital last year?

Response: See response to #74 in Attachment A for combined total.

28. How much was spent on expendable supplies (page 17) last year?

Response: See response to #75 in Attachment A for combined total.

29. How many computers and printers are available for medical staff?

Response: There are total of 3 computers

30. What is the average number of diabetics at the facility?

Response: See statistical reports (Appendix 1)

31. What is the average number of HIV patients at the facility?

Response: See statistical reports (Appendix 1)

32. What is your current population Prison?

Response: 576 Dormitory (528 state beds & 48 County beds) 20 Segregation & 2 Med Seg dorms

33. What is your ADP Prison?

Response: See statistical reports (Appendix 1)

34. How much has been expended on pharmacy each of the past two years?

Response: Not in the scope of the RFP

5. How much has been expended for overall medical care for inmates for each of the past two years?

Response: See response to #32 in Attachment A.

36. How much has been expended for dialysis care for the inmates over the past two years?

Response: There are no Dialysis patients at MCP

37. How much has been expended for eyeglasses for inmates for each of the past two years?

Response: Not in the scope of RFP. See response to #32 in Attachment A.

38. How many inmates are on KOP medications at this site?

Response: Approximately, 188 (prescribed meds)

39. How many medication passes are held at this site?

Response: Up to 4 med passes per day.

40. Who is responsible for the T-1 Line for the telemedicine and EMR?

Response: N/A

41. How much has been expended on off- site services in each of the past two years?

Response: See MCJ reports for #32.

42. What hospital provider do you currently use at Muscogee County Jail/County prison?

Response: The Medical Center – Columbus Regional

43. What is the number of psychotropic medications per site per month?

Response: Approximately 5 County inmates

44. Who is the x-ray provider? Do they provide mammogram and ultrasound?

Response: Teleradiology. Do not perform mammogram and ultrasounds.

45. Who is the current Lab provider?

Response: Clinical Pathology

46. Do they provide phlebotomists?

Response: No, MCP nursing staff draw labs.

47. Who is the medical waste provider?

Response: Steri-cycle

48. Is the successful vendor required to adhere to your pharmacy formulary or may we recommend our own formulary that is cost effective?

Response: See response to #94 in Attachment A.

49. Is the price estimate for all years to remain the same or is there an allowance for “COLA” increase?

Response: See response to #95 in Attachment A.

50. What accreditation body is required for this contract?

Response: Georgia Dept. of Corrections (GDC) – State Standard Operating Procedures (SOP) is adhered to at MCP

51. Please identify all Infirmary locations with number s of beds and level of intensity of treatment.

Response: None

52. Is either the Jail or the Prison currently subject to any court orders or legal directives?

Response: No for MCP. See Appendix 3 for the MCJ.

53. How many medication carts are available at each site....how many delivery sites are required at each site?

Response: MCP has a total of 1 medicine cart with 14 delivery dorm sites.

54. Do you test at intake for HIV?

Response: All state inmates are tested for HIV upon arrival (state) and upon discharge (MCP)

55. For Hep C? Do you require treatment for these diseases throughout incarceration?

Response: No HIV patients are sent to MCP from State. County inmates receive care from District Clinical Services (DCS)

56. Is the successful vendor responsible for pediatric care of newborns?

Response: N/A

57. Is the successful vendor responsible for abortions?

Response: N/A

58. Is successful vendor required to hire incumbent staff? Under what guidelines?

Response: Yes. We expect the vendor to interview and offer employment to all the current staff that meets the vendor's standards.

59. Would the agency be agreeable to a Cap Agreement wherein there is a cap to risk?

Response: See response #102 in Attachment A.

60. How much has been expended on offsite services each of the past two years?

Response: See response #32 in Attachment A.

61. How much has been expended on pharmacy each of the past two years?

Response: See response #104 in Attachment A.

62. How much has been expended for overall medical care for inmates for each of the past two years?

Response: See response #105 in Attachment A.

63. Are any of the healthcare staff under a collective bargaining agreement?

Response: No.

64. What Jail Management System is used at the Muscogee County Prison?

Response: Offender Management System for Windows Version 7.4.1

65. What form of inmate ID is used at the Muscogee County Prison (wrist band, ID card, etc.)? Are inmate IDs bar coded? If not, are the Jail and Prison capable of implementing a bar code system?

Response: ID Card.

66. How is Off-Site Security Watch handled? Do they use on-duty officers, comp. time, overtime, etc.?

Response: MCP officers transport all inmates off-site during regular shift hours. Outside appointments at MCP are generally handled Monday – Friday between 0900 – 1500.

67. Are screenings conducted at intake and can the MCP refuse admittance to inmates?

Response: All State inmate intakes are done on Tuesdays and Thursdays only.

68. Please provide a copy of current salaries for all Muscogee County healthcare employees.

Response: See response #32 in Attachment A, and Attachment C.

69. Please provide a copy of the current contract with Corizon.

Response: See attached Letter of Agreement (Appendix 2).

70. Please provide hourly rates by position for those employees covered under Corizon.

Response: Do not have the information.

71. The staffing plan provided for the Muscogee County Prison is significantly less than what was noted during the tours. Please confirm you are only looking for bids to the provided staffing plan (e.g. Medical Director = 8 hours in the RFP, but nurses stated he was on site five days per week for four hours per day).

Response: See additional information in attached Option II, Muscogee County Prison.

72. Please provide a list of any current vacancies that exist.

Response: None.

73. Please confirm that a nurse is responsible for constant watch of suicidal patients during the day shift at the prison.

Response: Security provides suicidal watches at MCP

74. Will the selected vendor be responsible for coordinating reimbursement between the state and the county related to catastrophic off-site costs incurred from the prison population?

Response: Yes.

75. Please confirm the vendor will only be reimbursed for off-site claim expenses quarterly.

Response: Yes.

76. Please confirm weekend nursing coverage at the Muscogee County Prison.

Response: See attached MCP statistical Reports. Weekend on-call and holidays are rotated among the 4 to 5 LPN's (Appendix 1).

77. Who is the current mobile X-ray vendor?

Response: Teleradiology

78. Please describe an example of when the Vendor will be responsible for filing Medicare claims.

Response: See response to #158, in Attachment A.

79. Will the County consider an extension on the proposal deadline to allow vendors two weeks after either the answers to questions have been published? This will allow all vendors sufficient time to analyze the necessary information and will likely result in stronger and more cost-effective responses.

Response: The due date has been extended until April 12, 2013; 5:00 p.m.

80. Please provide your contracts with vendors/contractors who provide inmate mental health and pharmacy services.

Response: See response to #126 in Attachment A.

81. Please provide all off-site utilization statistics for the past 24 months by type of services and provider.

Response: Information not available.

82. Please clarify what is meant by "Billing adjudication" in section I - A -13 if the vendor is not responsible for off-site cost?

Response: See response to #128 in Attachment A.

83. Will the vendor be responsible for adjudicating and processing all claims and reconciling them with the county for payment? Please clarify the process or if providers will direct bill the County.

Response: See response to #129 in Attachment A.

84. Please specify what types of services that are currently rendered on-site by outside providers.

Response: See response to #163 below.

85. Please provide the 2012/2013 intake statistics by year for both the MCJ and MCP.

Response: See attached MCP Statistical reports (Appendix 1).

86. Are vendors required to submit completed GSICA for sub-subcontractors with proposals or would it be acceptable to submit these after award of contract and prior to beginning of service?

Response: After notification, the recommended vendor (s) will have five (5) business days to provide the completed GSICA Form. The GSICA Form must be included with the contract documents prior to signing.

87. What is the current annual budget for medical services for the MCJ and the MCP excluding offsite services, pharmacy services, and mental health services?

Response: See response to #32 in Attachment A.

88. Please provide the current employees' hourly rates and/or salaries by discipline (MD, RN, LPN, etc.). Also, please provide years of service or hire dates.

Response: See response in Appendix 1.

89. Is the county currently using EMR system? If not, is the vendor expected to implement one?

Response: No

90. We understand that the vendor will be financially responsible for onsite lab and x-ray services. Please clarify if the vendor is responsible for both the management and the financial obligations that pertain to in-clinic contracts. What specialty services are currently being provided onsite (e.g. dialysis, physical therapy, OB/gyn, optometry)? What are all the specialty services provided onsite? Will the vendor be financially responsible for these specialty services?

Response: See responses to #138 & 139 in Attachment A.

91. We understand that the City is requesting vendors' provide staffing matrices to enhance the care currently being provided onsite. Are vendors required to include a price based upon the staffing matrices proposed by the MCSO in the RFP as well? If the staffing matrices in the RFP do not reflect the current staffing plans, please provide current staffing matrices for the MCJ and the MCP.

Response: See staffing matrix in the specifications attached for Option II for MCP.

92. We understand that vendors will not be financially responsible for offsite services. However, since the vendors will be responsible for utilization management and claims adjudication, please provide the following by facility, by year for the last 3 years:

- Hospital days (**Determined by incident**)
- ER visits (**80 – 100 per year**)
- Specialty visits (**60 – 75**)
- Outpatient surgeries (**Determined by incident**)
- Diagnostics (**Determined by incident**)
- Total offsite dollars (**Total included with MCJ**)

Response: See response above and in #32 Attachment A.

93. Please identify who will be responsible for watching patients on suicide watch.

Response: The Officers at MCP are responsible for suicide watch

94. Who is required to manage copays for inmates?

Response: The Nursing staff (1 LPN) manages co-pays at MCP

95. What are the onsite service stats (number of nursing sick calls, dental visits, HCP visits, etc) for each facility?

Response: See attached MCP Statistical reports (Appendix 1).

96. How often are inmates transferred to the prison?

Response: State Inmates are transferred on Tuesday and Thursday only. County inmates are transferred at various times throughout the week.

97. What days/times are inmates received from the DOC?

Response: Information not available.

98. Are the initial histories and physicals completed prior to the transfer to the prison?

Response: GDC State requirements for Physicals:

50 and older every 3 years

40 to 49 every 2 years

39 and younger every 3 years

***MCP uses the same requirements for County inmates that are housed at MCP**

99. How many patients at the prison are receiving medication?

Response: Approximately 188, patients receive prescribed medicines at MCP. This does not include OTC medicines.

100. How many patients at the prison are enrolled in the chronic care program?

Response: Approximately (varies and changes from week to week based on arrivals)

110+ HTN

40+ Pulmonary

12 INH

4 Diabetics

10 Gerd

5 Psych (County)

1 Gout

101. What is the average length of stay at the prison?

Response: 2 to 3 years State Inmates – County varies

102. How many inmate beds at Muscogee County Prison (MCP)

Response: 576 Dormitory (528 = State beds & 48 = County beds)

20 Segregation

2 Medical (Med Seg)

103. How many intakes are done daily and annually at MCP?

Response: 8 to 15 per week (State inmates are transferred to facility on Tuesdays and Thursdays only)

416 Annually (approximate)

104. On average, how many females, juveniles, state, and federal inmates are held at facility?

Response: All male facility with an average of 545 state inmates and 25 to 30 County inmates

105. How many medical beds are at each facility?

Response: 2

106. What is the average length of stay for inmates?

Response: 2 to 3 years for state inmates

Varies for county inmates

107. Could you please provide a staffing plan?

Response: See Amendment 2 in this Addendum, Option II MCP.

108. Does the nursing staff currently work 12 or 8 hour shifts?

Response: 8 hour shifts

109. Are medical services provided to the Inmates 24/7?

Response: Yes

110. What Jail Management System does the Prison use?

Response: Jail House Management & Crystal reports

111 Does the County currently utilize an Electronic Medical Records System? Does the County have any interest in doing so?

Response: No; Yes.

112. Does the County currently utilize telemedicine? Does the County have any interest in doing so?

Response: No.

113. Is either facility accredited by the ACA, NCCHC or any other accrediting body?

Response: No.

114. Who is responsible for non-emergency off-site transportation?

Response: Currently MCP security transports all inmates to non-emergency and outside appointments

115. Who is currently the established laboratory service provider?

Response: Clinical Pathology Laboratories Southeast – 1520 North Leg Road Augusta, Ga. 30909

116. Are Ophthalmology services provided on-site? If so, how many patients are seen per week?

Response: Yes, See attached statistical reports (Appendix 1).

117. How many x-rays are done onsite?

Response: See attached statistical reports (Appendix 1).

118. Who is the current mobile x-ray provider?

Response: North American Teleradiology 10567 Sawmill Parkway, Ste. 100 Powell, OH 43065

119. Are dental services provided on-site? If so, is the x-ray machine digital or analog?

Response: Yes, Analog. See response to #11.

120. How many dental x-rays are taken and read annually?

Response: No dental x-rays are being done on-site.

121. Who is responsible for the costs of dental services?

Response: RFP page 18 of 29 includes a dentist in staffing needs

122. How many patients are seen by dental per week?

Response: See attached statistical reports (Appendix 1).

123. Could you please forward a copy of the contract for the current medical provider?

Response: See attached Letter of Agreement (Appendix 2).

124. How many patients tested positive for TB in 2011?

Response; See attached statistical reports (Appendix 1).

125. Do the facility have at least one functioning negative pressure room?

Response: No

126. What is the annual average # of pregnant females?

Response: N/A – all male facility

127. Are OB/GYN services currently being provided on-site?

Response; N/A

128. Who is the current hazardous waste provider?

Response: Steri-cycle

129. How many inmates were hemophiliacs in 2011/2012?

Response: None

130. How many inmates had Hepatitis C in 2011/2012?

Response: See attached statistical reports (Appendix 1).

131. How many inmates are HIV+ in 2011/2012?

Response; See attached statistical reports (Appendix 1).

132. How many inmates require a methadone clinic in 2011/2012?

Response: None

133. On average approximately 5 County inmates per day are on psychotropic medicines and require psychotropic follow-ups.

Response: County inmates are transported to the Muscogee County Jail, by an MCP Officer, every 3 months for follow-ups with a Mental Health Provider. Per State SOP: State Inmates are classified as Level I upon arrival at MCP (work camp). Should a state inmate require psychiatric care the inmate is transported to Jack T. Rutledge Prison. State inmates do not take psychotropic medicines at MCP

134. How many Medicare claims were submitted in 2011/2012?

Response: See County Jail reports

135. What is the average daily population at the prison?

Response: 576 Dormitory (528 = State beds & 48 = County beds)
20 Segregation
2 Medical (Med Seg)

136. The total number of nurses on site each day and how many hours per day?

Response: 1 RN = 8 hours/day & 40 hours/week
MCP clinic closed on weekends and holidays
4 LPNs = 8 hours/day & 40 hours/week plus Rotate weekend on-call (Responsible for 48 to 96 hours depends on holidays) (Time on-site varies)

137. Does the prison have an infirmary?

Response: No

138. Is there a dental operatory suite on-site?

Response: Yes

139. Is the vendor expected to pay for all offsite care upfront and then seek reimbursement for same?

Response: Yes.

140. Does ownership of equipment purchased by the vendor chosen transfer to the County Prison?

Response: To be negotiated with the successful vendor.

141. Does the County Prison have an inmate grievance policy?

Response: Yes – the Counselors at MCP address all inmate grievances. Medical only respond in paper format and submit to Counselors. Is it in electronic or paper format? Both

142. Does the County Prison have agreements with local hospitals or other Health Care providers?

Response: Yes

143. Can the County provide the estimated inmate health care expense for the last 12 months or fiscal year?

Response: See response to #32 in Attachment A.

144. If possible, can the County provide a breakdown of the total expense for each facility in regards to wages/salaries, offsite medical expenses, pharmaceuticals, dental, etc?

Response: See responses to #32, Attachment A, and Appendix 1.

145. What is the approved bed size for the County Prison?

Response: 576 Dormitory (528 = State beds & 48 = County beds)
20 Segregation
2 Medical (Med Seg)

146. Where does the County Prison procure their pharmaceuticals?

Response: Diamond Pharmacy – 645 Kolter Drive Indiana, PA 15701-3570

147. Can the County Prison provide a more detailed current staffing plan, such as a sample schedule of healthcare staff during a typical week, including days, shifts, and hours worked?

Response: See Appendix 1

148. Will the Health Services Administrator be an employee of the vendor that secures the contract with the county?

Response: RFP page 18 of 29 list the HSA in the Personnel/Staffing needs

149. Average number of inmates on dialysis at the County Prison?

Response: None

150. Average number of HIV inmates at the County prison?

Response: See Statistical Reports

151. Annual number of booking/intakes at the County Prison?

Response: 545

152. Is telemedicine acceptable to the agency?

Response: Currently, MCP does not use telemedicine. There was a discussion about allowing telemedicine. However, this may be based on the vendor.

153. Please provide a list of all office and medical equipment available to the vendor at both the Jail and Prison.

Response: All office and medical equipment is available for the vendor use.

2 Exam Rooms:

1 of the following in each room:

Exam Tables, Physician stool

Exam Light

IV Pole

Blood Pressure

Pulse Oximetry

1 of the exam rooms has the following:

Laboratory Centrifuge(Belongs to Clinical Pathology – Lab Company)

Compressor Nebulizer

Otoscope

1 Dental Room:

Dental Exam Chair & stool

Lighting/Lamp

X-ray

Steam Sterilizer

Additional Equipment:

- 2 Medicine carts – one for meds & one for sharps
- 2 Wheelchairs – one chair purchased this year 2013 & 1 damaged
- 1 Automated External Defibrillator w/2batteries-Physio-control life pak
- 2 Emergency bags
- 1 Portable Bed
- 2 Oxygen tanks
- Health-O-Meter digital scale up to 500 lbs (New 2013)

Computers & Office equipment:

- 3 Computers
- 2 Printers
- 1 Copier (under contract w/Ricoh)
- 4 Office desks

The following equipment is in need of repair:

- 1 Exam table; both exam tables were reupholstered in 2011
- Wall Blood Pressure Monitor
- Wall Otoscope
- 1 Wheelchair
- Dental X-ray (No x-rays are done on-site)

All equipment is approximately 20+ years old with the exception of Digital scale, copier, printers, 2 computers, 1 wheelchair and Omron portable blood pressure machines.

154. Is the Muscogee County Prison equipped with WIFI or Hard Data wires?

Response: MCP is not equipped with WIFI, but does have CAP 5.

155. Do the Muscogee County Prison have a Medical Co-Pay? If so, can you please provide the schedule?

Response: Yes, \$5.00 for each inmate.

156. What OTC medications are inmates allowed to purchase through the commissary? Please provide order sheet.

Response: All OTC medicines are issued through the clinic. No medications by mouth or creams are on the commissary list at the prison.

157. Please provide a copy of all existing equipment, furniture, and computers that will be provided to the selected vendor.

Response: All equipment listed above in response to #153 is available for vendor use.

158. Other than the chairs that require reupholstering are there any other known maintenance needs that will be the responsibility of the vendor.

Response: No. The MCP chairs were upholstered in 2011.

159. Please provide a list of equipment (with estimated age) currently onsite. How many dental chairs are onsite at each facility?

Response: See list of equipment in response to #153.

160. What is the average number of non-emergency transports per year?

Response: Approximately 60 to 75. Estimate from March 2012 to March 2013 based on Crystal Report.

161. How many inmates are on psychotropic medications in 2011/2012?

Response: MCP has approximately 5 to 10 County inmates (only) per week on Psychotropic medications. State inmates at the prison do not take psychotropic medications (Level 1).

162. Please provide a list of equipment available for vendor use.

Response: See response to #153 above.

163. Since the vendor is not financially responsible for any off-site services, please clarify if the County has already contracts in place with hospitals, specialists, and ancillary providers which the vendor will be required to use. Will the County be providing a list of authorized vendors or should the vendor be ready to negotiate these agreements?

Response: Currently the following Providers are being utilized at the MCP.

Hospital	-	The Medical Center
Outside Eye care	-	West Georgia Eye Care
Dermatologist	-	Dr. Morgan Office
Orthopedic	-	Orthopedics w/Columbus Regional
Outside Dental	-	Rivertown Dental Care
Outside x-rays	-	The Medical Center
County Psychiatrist	-	County inmates are transported to the MCJ to New Horizons

164. Please provide the ADPs by facility (MCJ and MCP) by year for the last three (3) years. What ADPs does the City require vendors to bid upon for the MCJ and MCP?

Response: See MCJ response #131 & 132 in Attachment A.

165. We understand that vendors will not be financially responsible for pharmaceuticals. However, since the vendors will be responsible for managing the formulary, please provide the following by facility, by year for the last 3 years:

- Average monthly number of patients on HIV medications (1 HIV patient (County); GDC – State does not send HIV patients to the MCP (work camp))
- Average monthly number of patients on psychotropic medications (5 to 10 County Inmates only)
- Average monthly number of patients on hepatitis medications (2 to 5 on average)
- Average monthly number of patients on hemophiliac medications (None)
- Total spent on HIV dollars (See MCJ response (Attachment A))
- Total spent on psychotropic dollars (See MCJ response (Attachment A))
- Total pharmacy dollars (See MCJ response (Attachment A))

Response: See responses above and #162 in Attachment A.

ATTACHMENT C

Current employees' hourly rates and/or salaries by discipline

<u>#Position</u>	<u>Employee</u>	<u>Salary</u>
1	Health Service Administrator	\$71,515
1	Clinic Manager	\$45,853
1	Medical Record Clerk	\$25,351
1	Medical Record Clerk	\$25,985
1	Medical Tech	\$29,400
1	Medical Tech	\$30,134
1	RN	\$35,584
1	RN	\$45,844
2	Vacant RN's	\$38,575
1	LPN	\$34,944
1	LPN	\$34,092
4	LPN's	\$31,658
7	LPN's	\$32,448
1	Vacant LPN	<u>\$31,660</u>
		\$841,280
	Benefits (health, life, retire, statutory)	\$353,800
	Grand Total for Salary & Benefits	\$1,195,080

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

April 3, 2013

ADDENDUM: NUMBER SIX
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP No. 13-0024

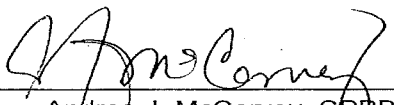
Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: _____ **COMPANY NAME:** _____

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

THE CORRECT EXTENDED DUE DATE FOR THE ABOVE RFP IS **FRIDAY, APRIL 12, 2013**, NO LATER THAN 5:00 PM (EST).

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



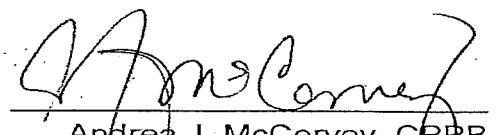
FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-653-4109
WWW.COLUMBUSGA.ORG

Date: February 22, 2013

REQUEST FOR PROPOSALS: RFP NO. 13-0024	Qualified vendors are invited to submit sealed proposals, subject to conditions and instructions as specified, for the furnishing of: COMPREHENSIVE MEDICAL SERVICES/MUSCOGEE COUNTY JAIL & MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)
GENERAL SCOPE	Provide comprehensive medical services for inmates at the Muscogee County Jail and Muscogee County Prison, in accordance with the specifications set forth herein.
DUE DATE	MARCH 20, 2013 - 5:00 PM (EST) Proposals must be received and date/time stamped on or before the due date by the Purchasing Division of Columbus Consolidated Government, located in the Finance Department, 5 th Floor, Government Center, 100 Tenth Street, Columbus, GA.
HOW TO OBTAIN ADDENDA	IMPORTANT INFORMATION Any addenda for this project will be posted on the web page of the Finance Department/Purchasing Division (www.columbusga.org/finance/proposals.htm). It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a proposal.
NO PROPOSAL RESPONSE	<i>If you are not interested in this invitation please email bhughey@columbusga.org or complete the form on the next page and fax to 706-653-4109.</i>


Andrea J. McCorvey, CPPB
Purchasing Division Manager

STATEMENT OF "NO PROPOSAL"

IF YOU DO NOT INTEND TO BID ON THIS COMMODITY OR SERVICE, PLEASE COMPLETE AND RETURN THIS FORM IMMEDIATELY. ATTENTION: Betty Hughey, Buyer

E-mail: bhughey@columbusga.org

FAX: 706 653-4102

Mail: Columbus Consolidated Government
Purchasing
P. O. Box 1340
Columbus, GA 31902-1340

We, the undersigned decline to bid on your **RFP No. 13-0024 – Comprehensive Medical Services for Muscogee County Jail & Muscogee County Prison (Annual Contract)** for the following reason(s):

- ☐ Specifications too "tight", i.e. geared toward one brand or manufacturer only (explain below)
- ☐ Insufficient time to respond to the Invitation for Bids.
- ☐ We do not offer this product or service.
- ☐ We are unable to meet specifications.
- ☐ We are unable to meet bond requirements.
- ☐ Specifications are unclear (explain below).
- ☐ We are unable to meet insurance requirements.
- ☐ Remove us from your bidder's list for this commodity or service.
- ☐ Other (specify below)

Remarks: _____

We understand that if this statement is not completed and returned, our company may be deleted from the Columbus Consolidated Government's bidders' list for this commodity or service.

COMPANY NAME: _____

ADDRESS: _____

AGENT: _____

TELEPHONE NUMBER: _____

PROPOSALS WILL BE EVALUATED IN ACCORDANCE WITH THE PROCEDURES AS OUTLINED BELOW IN SECTION 3-110 OF THE PROCUREMENT ORDINANCE. ALL PROPOSALS WILL BE KEPT CONFIDENTIAL.

3-110 Competitive Sealed Proposals (Competitive Sealed Negotiations) For Equipment, Supplies or Professional Services - \$25,000 and Above

(1) Conditions for Use

When the Purchasing Division Manager determines that the use of competitive sealed bidding for any procurement is either not practicable or not advantageous to the City, a contract may be entered into using the competitive sealed proposals (negotiation) method. In addition, the competitive sealed proposal process shall be used for the procurement of professional services.

The competitive sealed proposal process may be used for procurements with an estimated total cost less than \$25,000, if deemed to be in the best interest of the City. If the total cost can be determined, the authority to approve such solicitations will be as prescribed by Article 3-104, Purchasing Limits. If, due to the required services, a total cost cannot be determined then the award recommendation will be approved by Council.

A. Request for Proposals

Proposals shall be solicited through Request for Proposals. The Purchasing Division shall establish the specifications with the using agency and set the date and time to receive proposals. The request for proposal shall include a clear and accurate description of the technical requirements for the service or item to be procured.

B. Public Notice

Adequate public notice of the Request for Proposals shall be given in the same manner as provided under the section titled "Competitive Sealed Bids."

C. Receipt of Proposals

Proposals must be received by the deadline date established. No public opening will be held. No proposals shall be handled so as to permit disclosure of the identity of any offeror or the contents of any proposal to competing offerors during the process of discussion. A register of proposals shall be prepared as part of the contract file, and shall contain the name of each offeror, the number of modifications received (if any), and a description sufficient to identify the item offered. The register of proposals shall be open for public inspection only after contract award.

D. Evaluation Factors

The Request for Proposals shall identify all significant evaluation factors (including price or cost) and their relative importance. Mechanisms shall be established for technical evaluation of the proposals received, determinations of responsible offerors for the purpose of written or oral discussions, and selection for contract award.

E. Discussion with Responsible Offerors and Revisions to Proposals

As provided in the Request for Proposals, discussions (negotiations) may be conducted with responsible offerors who submit proposals determined to be reasonably susceptible of being

selected for award, to assure full understanding of and conformance to the solicitation requirements. All qualified, responsible offerors shall be given fair and equal treatment with respect to any opportunity for discussion and revision of proposals, and such revisions may be permitted after submissions and prior to award for the purpose of obtaining best and final offers.

In conducting discussions, there shall be no disclosure of the identity of competing offerors or any information derived from proposals submitted by competing offerors. If only one proposal response is received, then the award recommendation shall be to the single offeror, if the offeror meets all requirements.

F. Award.

After negotiations, the award recommendation must be presented to Columbus City Council for final approval. Award will be made to the responsible offeror whose proposal is determined to be the most advantageous to the City, taking into consideration total cost (if determined) and all other evaluation factors set forth in the Request for Proposals.

After Council approval, a contract based on the negotiations (if negotiations were necessary) will be drawn and signed by all necessary parties. If Council does not approve the award, further negotiations may take place with the recommended offeror or negotiations will begin with the next most qualified offeror. The contract file shall contain the basis on which the award is made.

After contract award, the contract file, will be made public. Offerors will be afforded the opportunity to make an appointment to review the contract file.

DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITING AND MUST BE ADDRESSED TO THE PURCHASING DIVISION.

All questions or clarifications concerning this solicitation shall be submitted in writing. The City will not orally or telephonically address any question or clarification regarding specifications or procedures. If a vendor visits or calls the Purchasing Division with such questions, he or she will be instructed to submit the questions in writing.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. Vendors shall not contact department heads or using agencies with questions about solicitations. You must submit the written question to the Purchasing Division. If it is necessary that a technical question needs addressing, the Purchasing Division will forward such to the using agency, which will submit a written response.

The Purchasing Division will forward written responses to the respective vendor or if it becomes necessary to revise any part of this solicitation, a written addendum will be issued to all vendors.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY'S EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE VENDORS IN WRITTEN ADDENDUM FORM FROM THE PURCHASING MANAGER.

Any request by vendors after a solicitation has been opened and pending award must also be submitted in writing to the Purchasing Division.

USE THE "QUESTION/CLARIFICATION" FAX FORM (ON THE REVERSE OF THIS SHEET) TO FAX YOUR QUESTION.

QUESTION/CLARIFICATION FAX FORM

DATE: _____

TO: Betty Hughey, CPPB, Buyer Specialist
Email: bhughey@columbusga.org or Fax (706) 653-4109

RE: RFP No.13-0024
Comprehensive Medical Services for Muscogee County Jail & Muscogee County Prison (Annual Contract)

.....
I HAVE THE FOLLOWING CONCERNS/QUESTIONS ABOUT THE SPECIFICATIONS:

From:

_____ Company Name		_____ Website	
_____ Representative		_____ Email Address	
_____ Complete Address	_____ City	_____ State	_____ Zip Code
_____ Telephone Number		_____ Fax Number	

COLUMBUS CONSOLIDATED GOVERNMENT GENERAL PROVISIONS FOR REQUEST FOR PROPOSALS

Comprehensive Medical Services For Muscogee County Jail & Muscogee County Prison (Annual Contract)

The Consolidated Government of Columbus, Georgia (the City) invites proposal submissions from qualified vendors to provide comprehensive medical services for inmates at the Muscogee County Jail and Muscogee County Prison.

A. PROPOSAL SUBMITTAL DATE:

Sealed proposals are due: MARCH 15, 2013, NO LATER THAN 5:00 P.M (EST). *Submit one original and nine (9) identical proposals.* For proper identification the proponent's complete name and address should appear on the exterior of the proposal package.

The proposal package should be hand delivered or mailed to the following:

Columbus Consolidated Government
Purchasing Division

RE: RFP NO. 13-0024

**Comprehensive Medical Services/Muscogee County Jail
& Muscogee County Prison (Annual Contract)**

Mail: P.O. Box 1340
Columbus, Georgia 31902-1340

Deliver: 100 10th Street
Columbus, Georgia 31901

If the proposal does not reach the Purchasing Division on or before the due date, the proposal will be returned to the Proposer unopened. It is the Proponent's responsibility to insure the proposal is mailed or delivered by the due date. The City will not be held responsible for proposals delayed by the US Mail or any other courier.

The City shall not be held liable for any expenses incurred by the respondent in preparing and submitting the proposal and/or attendance at any interviews, final contract negotiations or applicable site visits.

The City reserves the right to award this project or to reject any and all proposals; whichever is in the best interest of the City.

B. RECEIPT OF PROPOSALS:

Unless otherwise stated in the technical specifications of the RFP, the City will accept one, and only one, proposal per Offeror.

In the event a team of firms is entering into a joint venture to respond to the RFP, one firm shall be named the prime contractor and the proposal shall be submitted in the name of the prime contractor. All correspondence concerning the RFP will be between the City and prime contractor.

C. SUBCONTRACTING:

Should the proposer intend to subcontract all or any part of the work specified, name(s) and address (es) of subcontractor(s) must be provided in proposal response. The City reserves the right to review and approve any subcontractors. The proposer shall be responsible for subcontractor(s) full compliance with the requirements of the RFP specifications. **IF AWARDED THE CONTRACT, PAYMENTS WILL ONLY BE MADE TO THE PROPOSERS SUBMITTING THE PROPOSAL. THE COLUMBUS CONSOLIDATED GOVERNMENT WILL NOT BE RESPONSIBLE FOR PAYMENTS TO SUBCONTRACTORS.**

D. QUESTIONS ABOUT THE RFP:

COMMUNICATION CONCERNING ANY BID/PROPOSAL CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITING AND ADDRESSED TO THE PURCHASING DIVISION. SEE PAGE TITLED “DO YOU HAVE QUESTIONS ...” WITHIN THIS PROPOSAL PACKAGE. QUESTIONS AND REQUESTS FOR CLARIFICATION WILL BE RECEIVED UNTIL FIVE BUSINESS DAYS PRIOR TO THE PROPOSAL DUE DATE.

E. PUBLIC INFORMATION:

All information and materials submitted will become the property of the Columbus Consolidated Government, Columbus, Georgia; and shall be subject to the provisions of the Georgia public records law. If awarded the contract, the proposal submission, in its entirety, will be included as part of the contract documents and filed, as public record, with the Clerk of Council.

F. ADDENDA:

The proposer shall include acknowledgment of receipt of addenda (if any) in their sealed proposal. The proposer should include an initialed copy of each addendum in the proposal package. It is the proposer's responsibility to contact the City for copies of addenda if they receive the proposal document from any other source other than the City. **It is also the proposer's responsibility to check the City's website (www.columbusga.org/finance/proposals.htm) for copies of addenda if bid document is downloaded from the City's Website.**

G. CONTRACT:

Each proposal is received with the understanding that an acceptance in writing by the City of the offer to furnish any or all of the services and materials described shall constitute a contract between the proposer and the City. This contract shall bind the proposers to furnish and deliver the services and materials quoted, at the prices stated and in accordance with the condition of said accepted proposal. It is agreed that the successful respondent will not assign, transfer, convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.

H. NON-COLLUSION:

Proposer declares that the proposal is not made in connection with any other proposer submitting a proposal for the same commodity or commodities, and that the proposal is bona fide and is in all respects fair and without collusion or fraud.

I. INDEMNITY:

The successful respondent agrees, by entering into this contract, to defend, indemnify and hold City harmless from any and all causes of action or claims of damages arising out or under this contract.

J. DISADVANTAGED BUSINESS ENTERPRISE CLAUSE:

Disadvantaged Business Enterprises (minority or woman owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority business enterprises have an opportunity to participate at all levels of contracting in the performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

K. SPECIFICATION DESCRIPTIONS:

The specifications detailed herein represent the quality of equipment, goods or services required by the City. Whenever in this invitation any particular process, service or equipment is indicated or specified by patent, proprietary or brand name of manufacturer/developer/inventor, such wording will be deemed to be used for the purpose of facilitating descriptions of the process, service or equipment desired by the City. It is not meant to eliminate proposers or restrict competition in any RFP process. Proposals that are equivalent or surpass stated specifications will be considered. Determination of equivalency shall rest solely with the City.

L. TAXES:

The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.

M. DRUG-FREE WORKPLACE:

Per Ordinance No. 93-55, in compliance with Federal and State Drug Free Workplace Acts, the Council of Columbus, Georgia adopted a drug free Workplace Policy. Consequently, any vendor providing goods or services to Columbus Consolidated Government must comply with all applicable Federal and State Drug Free Workplace Acts.

N. FEDERAL, STATE, LOCAL LAWS:

All respondents will comply with all Federal, State and Local laws, ordinances, rules and regulations relative to conducting business in Columbus, Georgia and performing the prescribed service. Ignorance on the part of the respondent shall not, in any way, relieve the respondent from responsibility for compliance with said laws and regulations or any of the provisions of these documents.

O. PROVISIONS OF THE PROCUREMENT ORDINANCE:

The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations to respond to Requests for Proposals and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

P. INSURANCE:

All respondents shall maintain and if requested show proof of insurance applicable for services described in these specifications.

Q. HOLD HARMLESS AGREEMENT:

The successful respondent hereby agrees to indemnify, hold free and harmless Columbus Consolidated Government (The City), its agents, servants, employees, officers, Managers and elected officials or any other person(s) against any loss or expense including attorney fees, by reason of any liability imposed by law upon the City, except in cases of the City's sole negligence, sustained by any person(s) on account of bodily injury or property damage arising out of or in the consequence of this agreement.

R. TERMINATION OF CONTRACT:

1. Default: If the contractor refuses or fails to perform any of the provisions of this contract with such diligence as will ensure its completion within the time specified in this contract, or any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Manager may notify the contractor in writing of the delay or nonperformance and if not cured within **ten (10) days** or any longer time specified in writing by the Purchasing Division Manager, such Manager may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Manager may procure similar supplies or services, from other sources, in a manner and upon terms deemed appropriate by the Purchasing Division Manager. The contractor will continue performance of the contract to the extent it is not terminated and will be liable for excess costs incurred in procuring similar goods or services.

2. **Compensation:** Payment for completed supplies or services delivered and accepted by the City will be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Manager deems to be necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.
3. **Excuse for Nonperformance or Delayed Performance.** Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms (including any failure by the contractor to make progress in the prosecution of the work hereunder which endangers such performance) if the contractor has notified the Purchasing Division Manager within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather, If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deemed to be in default, unless the supplies or services to be furnished by the subcontractor was reasonably obtainable from other sources in sufficient time to permit the contractor to meet the contract requirements.

Upon request of the contractor, the Purchasing Division Manager shall ascertain the facts and extent of such failure, and, if such Manager determines that any failure to perform was occasioned by anyone or more of the excusable causes, and that, but for the excusable cause,

the contractor's progress and performance would have met the terms of the contract, the delivery schedule shall be revised accordingly.

S. TIME FOR CONSIDERATION:

Due to the evaluation process, proposals must remain in effect for at least **120 days** after date of receipt.

T. CONTRACT AWARD:

Award of this contract will be made in the best interest of the City.

U. REQUEST FOR EVALUATION RESULTS:

Per the City's Procurement Ordinance, evaluation results cannot be divulged until after the award of the contract.

After contract award, proponents desiring to review documents relevant to the RFP evaluation results will be afforded an opportunity by appointment only.

V. GOVERNING LAW:

The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.

NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business, which is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

Request for Proposal Comprehensive Medical Services/ Muscogee County Jail & Muscogee County Prison (Annual Contract)

I. INTRODUCTION

It is the intent of the Columbus Consolidated Government (the city), Muscogee County Sheriff Office and Muscogee County Prison to enter into an annual contract with a qualified medical correctional provider for comprehensive medical services to those patients incarcerated in both the Muscogee County Jail (MCJ) and the Muscogee County Prison (MCP). These medical services will reflect the NCCHC and ACA medical standards for jails and prisons and will be commensurate with the accepted community standard of care. These services are further delineated in Appendix A.

II. VENDOR QUALIFICATION

- A. Five (5) years successful experience providing comprehensive health care to large jails with a population over 1000 inmates.
- B. 5 Years of successful experience providing comprehensive health care to state, county, or private prisons.
- C. Successful NCCHC or ACA accreditation of at least one large jail.

III. TERM AND CONDITIONS

A. The term of this contract will be for two years, with an option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

Notice of intent to renew will be given to the contractor in writing by the City Purchasing Manager, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only after funding appropriations and program approval have been granted by the Council of the Consolidated Government of Columbus, Georgia. In the event that the necessary funding is not approved, then the affected multi-year contract becomes null and void, effective July 1st of the fiscal year for which such approvals have been denied.

B. Termination for Convenience

For the protection of both parties, either party giving 90 days prior notice in writing to the other party may cancel this contract.

IV. VENDOR INFORMATION

COMMUNICATION CONCERNING ANY BID/PROPOSAL CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION (SEE "QUESTIONS ABOUT THIS BID/PROPOSAL")

All questions must be submitted in writing by fax (706 653-4109) using the fax sheet enclosed in the RFP package, or e-mail questions to bhughey@columbusga.org

V. ADDENDA AND EXPLANATIONS

The vendor shall include acknowledgment of receipt of addenda (if applicable) in their sealed proposal. The vendor may also fax an initialed copy of each addendum. **It is the vendor's responsibility to contact the City for copies of addenda if RFP document is received from any source other than the City. It is also the vendor's responsibility to check the City's website (www.columbusga.org/finance/proposals.htm) for copies of addenda if RFP document is downloaded from the City's Website.**

Explanations desired by a prospective Bidder shall be requested of the City in writing, and if explanations are necessary a reply shall be made in the form of an Addendum, a copy of which will be forwarded to each vendor.

Every request for such explanation shall be in writing and addressed to the **Purchasing Manager**. Any verbal statements regarding same by any person, shall be unofficial and not binding on any party.

VI. INDEMNITY CLAUSE

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

VII. INSURANCE

The vendors shall be required, at their own expense, to furnish to the City of Columbus Purchasing Division, evidence showing the insurance coverage to be in force throughout the term of the contract. Insurance requirements are listed on the attached **Insurance Checklist (Appendix C)**. **The limits shown are minimum limits. Vendor shall indicate the actual limit they will provide for each insurance requirement. The bidder shall complete the Insurance Checklist and include with bid response. Certificate of Insurance is acceptable.** The Insurance Checklist will indicate to the City, the bidder's ability and agreement to provide the required insurance, in the event of contract award.

The successful candidate shall provide the required Certificates of Insurance within **10 business days** after award notification. The Certificates of Insurance will be included with the contract documents prior to signing.

VIII. GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT E-Verify

In accordance with the Georgia Security and Immigration Compliance Act of 2006, every public employer, every contractor of a public employer, and every subcontractor of a public employer's contractor must register and participate in a federal work authorization program. Appendix D must be completed and returned with proposal.

IX. PROPOSAL SUBMISSION REQUIREMENTS

The complete proposal shall contain the following information and shall be submitted in the order shown below.

An offeror who submits a proposal that does not address each of the sections specified below will be deemed non-responsive, and the proposal submission deemed incomplete.

Please address each section in your proposal submission and divide each section of your proposal with identifying tabs.

Section 1: Transmittal Letter

The transmittal letter shall introduce the firm, describe the ownership, include complete address, phone and fax numbers, and include the name of contact person(s) during this RFP process. **An authorized agent of the firm must sign the transmittal letter.**

Section 2: Acknowledge of Addenda (if applicable)

Provide acknowledgement of receipt of all addenda for this RFP (if any). **It is the vendor's responsibility to check for copies of addenda on the City's website.**
(www.columbusga.org/finance/proposals.htm)

Section 3: Experience/Qualifications

This section shall address the offeror's ability to fulfill the requirements of the RFP. Provide responses to the following:

- A. Describe in detail the firm's ability and experience in providing the services specified in Appendix A.
- B. Provide the names and titles of professional staff, including administrative and medical personnel, who will be dedicated to this contract to perform the services required. Provide copies of resumes, medical licenses, credentials etc.
- C. Attach additional facts about your firm, which you feel, will be an asset in evaluating your proposal.

Section 4: Service Plan

- A. Provide a written narrative, which demonstrates the method, or manner in which the offeror proposes to satisfy the requirements of this Request for Proposal.
- B. Provide a list of all known equipment that will be provided by the vendor, or must be provided by the Muscogee County Jail or Muscogee County Prison under this contract.
- C. Describe any similar contracts vendor is currently involved in and their duration. Include the entity name and contact person, project, location, service provided, date of completion, telephone and fax numbers.

Section 5: Client Work History

- A. Provide at least three (3) references for whom similar services have been performed. Include entity name, contact name, address, e-mail address, telephone and fax numbers.
- B. Provide a history of providing the comprehensive medical services described in Appendix A to incarcerated clients, as well as, other clients with similar needs.

Section 6: Business Requirements

- A. Provide copy of insurance (Appendix C)

- B. Complete GSICA Form (Appendix D)
- C. Tax ID Form (Appendix F)
- D. Provide copy of Business License

Vendors shall submit, with their bid or proposal, a copy of the Business License (Occupation License) that is required to conduct business at your location.

If awarded the contract, the successful vendor must obtain a business license from the City of Columbus. However, if the business is located in Georgia and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the contractor will not be required to pay occupation taxes in Columbus, Georgia.

If you have questions regarding this requirement, please contact Yvonne Ivey, Occupation Tax Supervisor, 706-225-3091.

Section 7: Cost Proposal (Appendix B)

- A. Complete cost proposal form, with annual fees, which will be paid in 12 equal monthly installments.
- B. Delineate any other associated costs relative to providing this service not included in the annual fee.

Section 8: Contract Signature Page

Complete **Appendix E**. City officials will sign the awarded vendor's copy after City Council has approved the contract award.

Section 9: Sample Agreement

Provide a copy of any agreements that must be signed, if your firm is awarded the contract.

X. RFP EVALUATION

Each submittal will be evaluated to determine the ability of each offeror to provide the required services. The following weighted criteria will be used to evaluate proposals.

Criteria	Weight
A. Experience/Qualifications	40%
B. Service Plan	40%
C. Client Work History	15%
D. Cost Proposal	5%

Each of the above criteria (A -D) will be given a rating, of 1 through 100, by each member of the Evaluation Committee. The ratings are as follows:

RATING	
1-10	Very Poor
11-20	Poor
21-30	Fair
31-40	Below Average
41-50	Average
51-60	Above Average
61-70	Good
71-80	Very Good
81-90	Excellent
91-100	Superior

After the review and rating of proposal(s) by the evaluation committee, individual scores will be averaged and ranked. Proponents will be ranked in descending order of numerical predominance.

APPENDIX A

CONTRACT REQUIREMENTS

The Medical Services Contractor will provide:

I. SCOPE OF SERVICES

Contractor will be required to provide the staffing, supplies, in-clinic contracts, systems, and administration to provide the following services to the patients at both the Muscogee County Jail and Muscogee County Prison within the time frame and to a level of quality, which will meet the standards published in the NCCHC Guidelines for both Jails and Prisons. The following list will serve as a minimum expectation of services the vendor will be required to provide within the scope of this contract:

A. Health Care Services:

1. Intake screening
2. 14-day physicals
3. Sick call
4. Chronic Care
5. Medication Delivery
6. Nursing Services
7. Emergency Services
8. Women's Health Services
9. Referrals to Hospital and Specialty Care (vendor not financially responsible for bills)
10. Case Management
11. Utilization Management
12. Prior Authorization
13. Billing Adjudication
14. Quality Assurance/Quality Improvement
15. Inmate Health Education
16. Medical Records Management
17. Expendable Medical Supplies (includes all expendables in sufficient quantity to execute daily delivery of medical care such as antifungal creams, dressings, over the counter analgesics, cold medicines), (excludes pharmacy orders for prescription meds)
18. All office supplies, printing, postage, manuals, telephones, and computers not directly involved in the actual point of delivery inmate medical care will be the responsibility of the vendor.
19. Formulary Development and Management
20. In clinic labs (includes contract with lab services provider)
21. In clinic x-ray services (includes contract with mobile x-ray)
22. Dental services (will not include costs associated with partials, dentures, and oral surgery conducted off site)
23. Hazardous Waste Management and Disposal (includes contract with waste management disposal company)
24. Vendor is responsible for providing its employees with all equipment required for conducting routine medical assessments and procedures to include but not limited to any devices use to

assess vital signs, dopplers, stethoscopes, glucometers and test strips, dressings, suture kits etc.

25. Drugs and Alcohol Withdrawal and Detox.

26. Vendor is responsible for filing Medicare.

II. PERSONNEL/STAFFING

Vendor will be required to recruit, train, and manage all clinical staff. The MCSO has provided a sample-staffing matrix below, but vendors are encouraged to offer innovative ways to enhance the delivery of care with more efficient staffing models. Any changes in population or standard of care set forth in the NCCHC Jail and Prison Standards which may require an adjustment in the staffing level agreed upon in the original contract, may be discussed between the MCSO, MCJ and the vendor. If an agreement in staffing or service levels cannot be met then either party may terminate upon 90 days written notice.

A. Staffing Matrix Proposed by the MCSO for the Muscogee County Jail

1. Medical Director	32 hours
2. NP/PA	40 hours
3. Dentist	30 hours
4. H.S.A	40 hours
5. DON	40 hours
6. Admin Asst.	40 hours
7. RN for H&P	40 hours
8. RN for Charge	168 hours
9. LPN for Sick Call	112 hours
10. LPN for Med Cart	336 hours
11. LPN for Intake	168 hours
12. Med Tech	168 hours
13. Medical Records	<u>136 hours</u>
Total	1350 hours

B. Staffing Matrix Proposed by the MCSO for the Muscogee County Prison

1. Medical Director	8 hours
2. RN for Charge	40 hours
3. LPN	168 hours
4. Dentist	<u>4 hours</u>
Total	220 hours

III. VENDOR REQUIREMENTS

- A. Vendor will be responsible for arranging emergency service and emergency transport. Vendor will not be financially responsible for emergency room costs or the cost of transport.
- B. Vendor will be responsible for arranging hospital and specialty care. Vendor will not be responsible for the costs of either hospital or specialty care.
- C. Vendor will not be responsible for elective care. Elective care is any treatment or medical intervention not required to prevent deterioration in the patient's health or required to avoid obvious harm to the inmate/patient. The vendors Medical Director will determine what treatments, interventions, therapies and pharmaceuticals are elective as opposed to those required to maintain the patients health.

- D. Vendor will be required to provide emergency services to anyone on the property of the MCJ/MCP to include visitors, other contractors and staff. The vendor is not responsible for any costs associated with transport of follow on care provided to these patients.
- E. Vendor is responsible for providing the MCJ/MCP with a pharmaceutical formulary, which includes an objective process and peer oversight/ prior authorization for any prescriptions, which deviate from the base line first tier drug formulary. The vendor is NOT responsible for the cost associated with any prescription, which is derived from the formulary and/or follows the process agreed upon for ordering non-formulary drugs. In those cases in which the vendors provider does not follow the formulary or the process for of prior authorization for ordering non-formulary drugs the vendor WILL be responsible for the cost associated with that prescription.
- F. Vendor will be responsible for all Utilization Management and Claims Adjudication for any off site hospitalization or specialty care. The vendor will be identified as the administrative agent for all off-site medical care for the MCJ/MCP. The vendor will not be financially responsible for any off-site specialty or hospital care.
- G. Vendor will bill the MCSO 30 days after the end of the contract quarter for reimbursement equal to all the money the vendor has paid off-site medical services on behalf of the MCSO. The MCSO will submit payment to the vendor equal to the amount the vendor has billed within 30 days of receipt.
- H. The MCSO will provide all the office space, clinic space, durable medical equipment and security which will be required by the vendor to allow the vendor to provide medical services to inmate/patients within the time frame and of the quality required by the published NCCHC and ACA standards.
- I. Vendor will not be responsible for mental health treatment.
- J. Vendor will provide monthly summary reports on clinical services to the MCSO. These reports will include as a minimum the following:
 - 1. Number of patients on Psychotropic Drugs
 - 2. Pregnancy Management
 - 3. Treatment of patients with alcohol and drug abuse issues
 - 4. Any use of restraints
 - 5. Any use of forced medications
 - 6. Sick call
 - 7. Chronic care
 - 8. Physicals
 - 9. Intake Screening
 - 10. TB prevention
 - 11. Infection Control Tracking
 - 12. HIV Treatment
 - 13. Staffing report with actual FTEs, hours worked and level of professional certifications.
 - 14. Any sentinel events
 - 15. Legal Cases
 - 16. Dental Sick Call
 - 17. Vision Screening
 - 18. Referrals to outside specialists
 - 19. Any refusals of care by patients
 - 20. Any refusals of medication
 - 21. Narcotics counts
 - 22. Emergency Room visits (requires additional documentation and justification)

23. Specialist visits (requires additional documentation and justification)

IV. SUMMARY

The MCSO has purposely elected to not describe the methods of and procedures by which the selected vendor will execute the medical, services they will be contracted to provide. Rather we expect that the vendor will be cognizant of the NCCHC, ACA, and evolving legal/ medical environment from which the concept of “Community Standard of Care” is derived. We expect that the selected vendor can articulate innovative, efficient practices which will ensure the inmate/patient receives the quality of care required to protect their health, meets this communities expectation of humaneness and applies the investment the taxpayers have made as effectively as possible.

APPENDIX B

**COST PROPOSAL
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL & MUSCOGEE COUNTY PRISON
(ANNUAL CONTRACT)
RFP NO. 13-0024**

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$
Medical Services	Third Year	\$
Medical Services	Fourth Year	\$
Medical Services	Fifth Year	\$

Company Name: _____

Authorized Signature: _____

APPENDIX C

INSURANCE CHECKLIST RFP NO. 13-0024 COMPREHENSIVE MEDICAL SERVICES/ MUSCOGEE COUNTY JAIL & MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)

**CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE
AND ENDORSEMENTS INDICATED BY "X"**

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
	Comprehensive General Liability		
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability		
X	7. *Owned/Hired/Non-Owned Vehicles/ Employer non ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Others		
X	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	
	10. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
X	14. Medical Malpractice	\$1 Million per occurrence/claim	
X	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full amount of contract	
	18. XCU (Explosive, Collapse, Underground) Coverage		
	19. USL&H (Long Shore Harbor Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment Liability	\$2 Million per occurrence/claim	
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		
X	23. Notice of Cancellation, non-renewal or material change in coverage shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional Insured on all policies		
X	25. Certificate of Insurance shall show Bid Number and Bid Title		
	26. Pollution:	\$2 Million per occurrence/claim	

*If offeror's employees will be using their privately owned vehicles while working on this contract and are privately insured, please state that fact in the **Bidders Limits/Response** column of the insurance checklist.

INSURANCE AGENT'S STATEMENT:

I have reviewed the above requirements with the bidder named below and have advised the bidder of required coverages provided or not provided through this agency. The bidder can comply with the insurance requirements stated above.

AGENCY NAME: _____

AGENTS NAME: _____

SIGNATURE of AGENT: _____

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements.

BIDDER NAME: _____

AUTHORIZED SIGNATURE: _____

APPENDIX D

GEORGIA SECURITY AND IMMIGRATION COMPLIANCE *and* House Bill 87, also known as, The Illegal Immigration Reform and Enforcement Act of 2011

Section 3 of House Bill 87 amends O.C.G.A. §13-10-91.

O.C.G.A. §13-10-91(b)(1) states, in part, “A public employer shall not enter into a contract ... for the physical performance of services unless the contractor registers and participates in the federal work authorization program.”

Accordingly, the affidavits on the pages that follow relate to documentation you must provide the City.

All contractors must complete the attached “CONTRACTOR AFFIDAVIT”. Additionally, if you utilize subcontractors, they must complete the “SUBCONTRACTOR AFFIDAVIT” and or the “SUB-SUBCONTRACTOR AFFIDAVIT.”

***In lieu of the affidavit required by this subsection, a contractor, subcontractor, or sub-subcontractor who has no employees and does not hire or intend to hire employees for purposes of satisfying or completing the terms and conditions of any part or all of the original contract with the public employer shall instead provide a copy of the state issued driver's license or state issued identification card of such contracting party and a copy of the state issued driver's license or identification card of each independent contractor utilized in the satisfaction of part or all of the original contract with a public employer. A driver's license or identification card shall only be accepted in lieu of an affidavit if it is issued by a state within the United States and such state verifies lawful immigration status prior to issuing a driver's license or identification card.

**The complete verbiage for the law is on the Purchasing Web Page:
http://www.columbusga.org/finance/Purchasing_docs/Georgia_Security_and_Immigration_Compliance_Act.pdf**

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE"
Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of **Columbus Consolidated Government** has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ___, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE"
Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with

(Name Of Contractor)

on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Subcontractor

Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires: _____

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE"
Sub-subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(4)

By executing this affidavit, the undersigned sub-subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation, which is engaged in the physical performance of services under a contract for

(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract)
and

(Name of Contractor)

on behalf of **Columbus Consolidated Government** has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to

(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract)

Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to

(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract)

Sub-subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Sub-subcontractor

Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ___, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires: _____

APPENDIX E

**CONTRACT SIGNATURE PAGE
Comprehensive Medical Services/
Muscogee County Jail & Muscogee County Prison**

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Consolidated Government of Columbus, Georgia for the following:

By: _____
Signature of Authorized Representative

Witness as to the Contractor

Print Name and Title of Signatory

Witness as to the Contractor

Business Name

(Corporate Seal)

Business Address

Tax ID Number

Telephone Number

Fax Number

Email Address

**CONSOLIDATED GOVERNMENT OF
COLUMBUS, GEORGIA**

Accepted this ____ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

APPENDIX F

Form W-9 (Rev. December 2011) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification	Give Form to the requester. Do not send to the IRS.
Print or type See Specific instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: ☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ ☐ Exempt payee ☐ Other (see instructions) ▶ _____	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
	List account number(s) here (optional)	
Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.		
		Social security number Employer identification number
Part II Certification Under penalties of perjury, I certify that:		
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person (defined below).		
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.		
Sign Here	Signature of U.S. person ▶	Date ▶
General Instructions Section references are to the Internal Revenue Code unless otherwise noted.		
Purpose of Form A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:		
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), 2. Certify that you are not subject to backup withholding, or 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.		
Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9. Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are: • An individual who is a U.S. citizen or U.S. resident alien, • A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, • An estate (other than a foreign estate), or • A domestic trust (as defined in Regulations section 301.7701-7). Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.		

Cat. No. 10231X

Form W-9 (Rev. 12-2011)

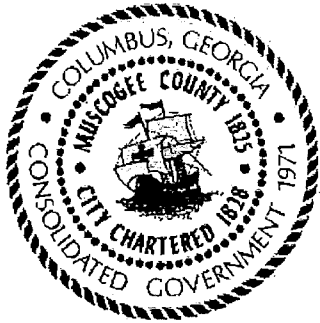
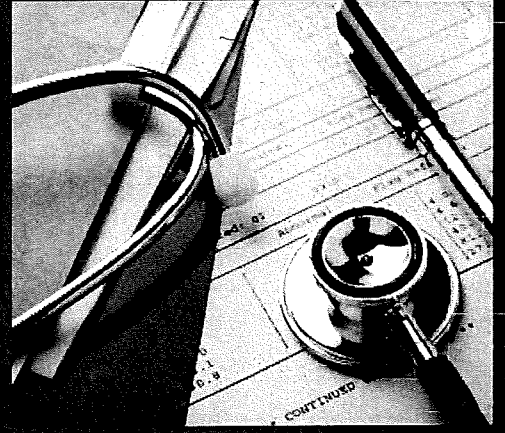
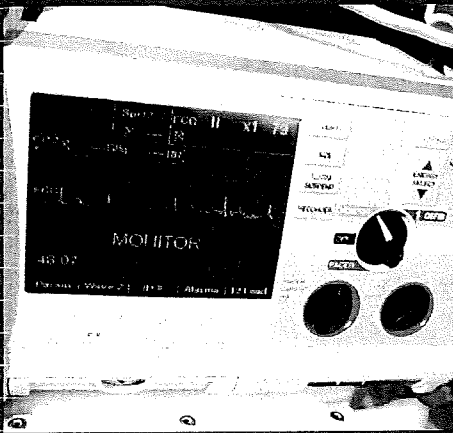
EXHIBIT C

CONTRACTOR'S PROPOSAL

CORRECTIONAL HEALTHCARE COMPANIES, INC.



Comprehensive Medical Services



ORIGINAL

Muscogee County Prison

Muscogee County Jail

Columbus Consolidated Government, Georgia

Muscogee County Sheriff's Office

RFP NO. 13-0024

April 12, 2013

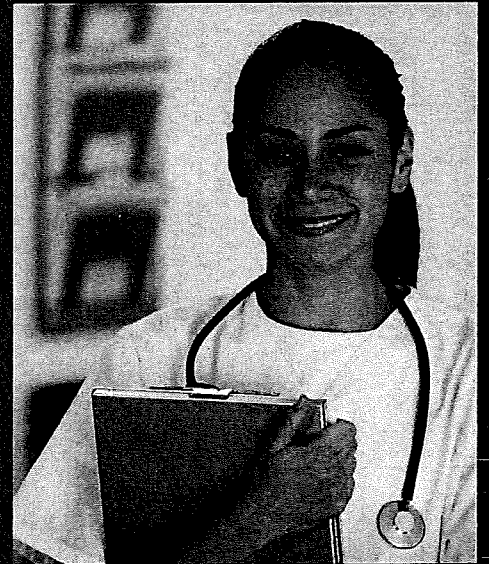


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Section 1: Transmittal Letter

April 12, 2013

Betty Hughey, Buyer
Columbus Consolidated Government
Purchasing
100 10th Street

Columbus, Georgia 31901

RE: RFP# 13-0024

Ms. Hughey:

Correctional Healthcare Companies, Inc. (CHC) is pleased to provide the following proposal for comprehensive medical services at the Muscogee County Jail (MCJ) and Muscogee County Prison (MCP). After careful consideration of the RFP, we propose the following customized, high-quality and cost-effective comprehensive medical services program.

CHC is proud to support the provision of medical services to more than 70,000 detainees daily. We have been providing top-quality service and uncompromised value to our clients for more than 21 years. We currently serve more than 240 prisons and jails nationwide, from facilities with an average daily population (ADP) of 10 to correctional institutions with an ADP of 3,500. All of our healthcare policies and procedures are based on National Commission on Correctional Health Care (NCCHC), American Correctional Association (ACA), state and federal regulations, as well as industry best practices. We are also knowledgeable of the Georgia Department of Corrections (GDC) – State Standard Operating Procedures.

We offer a proven partnership, a proficient and timely transition, and a commitment to build upon the foundation we have established in the correctional healthcare market. CHC's expertise in healthcare management and experience in Georgia will enable us to provide the Columbus Consolidated Government, the Muscogee County Sheriff's Office, MCJ and MCP with the highest quality services.

Benefits of Partnering with CHC	
Experience	Leading provider of correctional healthcare, serving over 240 facilities across the country.
Partnership	CHC will be a strong partner to both the Muscogee County Sheriff's Office and Columbus Consolidated Government.
Seamless Transition	CHC has a streamlined transition process and can guarantee a smooth transition, even within tight timelines.
Innovation	CHC will implement the latest techniques and best practices to help OCCD remain a model Corrections Department.
Military Experience	CHC currently provides medical services at county jails located outside 8 CONUS mission-critical military installations
Accreditation	CHC's experienced team can assist the Muscogee County Jail in obtaining both NCCHC and ACA accreditations

ORIGINAL

In addition, CHC has extensive experience working with U.S. military installations located near county jails. As you are the proud hosts of Fort Benning – home of the Maneuver Center of Excellence and the U.S. Army's Armor and Infantry Schools – you understand the broad impact large military bases have on a community.

CHC currently provides comprehensive medical services at county jails located outside eight mission-critical military bases in the continental United States (CONUS), including Fort Carson (CO) and Fort Hood (TX), which are similar in personnel size to Fort Benning's 28,000 active-duty soldiers. We understand veteran health issues, Army Provost Marshall and Army post policies and procedures, and the UCMJ (Uniform Code of Military Justice). For more information on our jail experience with military veterans and installations, please see Section 3 C.

Should you have any questions regarding our proposal or services, please contact Gregg Lynk, your Georgia Director of Business Development, at (908) 230-1850 or gregg.lynk@correctioncare.com. We are confident that our program will best serve your inmates, the jail and prison staffs, and The Muscogee County Sheriff's Office and Columbus Consolidated Government as a whole, and we welcome this opportunity to begin a partnership.

Sincerely,



Doug Goetz
Chief Executive Officer
Correctional Healthcare Companies, Inc.

CHC has addressed the following items required in the Transmittal Letter below.

Describe the Ownership

Correctional Healthcare Companies, Inc. is a privately held corporation. Over the years, CHC has consolidated several leading providers of offender healthcare services and integrated these in order to create a single, full-service company; this has allowed us to better support our clients with more services and greater cost efficiencies. Correctional Healthcare Companies, Inc. was incorporated in Delaware on January 28, 2010. We are currently licensed to provide inmate healthcare in every state in the country. CHC and our subsidiaries have been providing turn-key solutions to correctional facilities since 1992, and community services to court systems since 1979.

Complete Address

Correctional Healthcare Companies, Inc.
6200 South Syracuse Way, Suite 440
Greenwood Village, CO 80111

Phone and FAX Numbers

(866) 246-5245 (Toll Free)

(720) 622-8099 (FAX)

Contact Person Phone and Fax Numbers

Gregg Lynk, Georgia Director of Business Development
(908) 230-1850 (direct line);
(303) 706-9068 (FAX)

Section 2: Acknowledge of Addenda

Provide acknowledgement of receipt of all addenda for this RFP (if any). It is the vendor's responsibility to check for copies of addenda on the City's website.

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

February 28, 2013

ADDENDUM: NUMBER ONE
RFP No. 13-0024

Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)

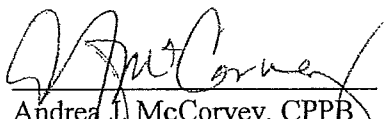
Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: *AM* **COMPANY NAME:** Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The correct RFP due date is **Wednesday, March 20, 2013**, no later than 5:00 p.m. (EST).
- B. Site Visit/Walk-Thru is scheduled for **10:00 a.m. Thursday, March 7, 2013**. Vendors shall first convene in the Jail Lobby on the Ground Floor at the Muscogee County Jail, 700 Tenth Street, Columbus, GA 31901. Afterward vendors will immediately go to the Muscogee County Prison, 7175 Sacerdote Lane, Columbus, GA. The contact person at the Jail will be Paul Morris, and Ray Covington will be the contact at the Prison. Please complete the attendance sheet and fax to the Purchasing Division.
- C. Vendors attending the Site Visit/Walk-Thru must sign an attendance form complete with the company name, attendee name, address, e-mail address, telephone and fax numbers, which will be provided at the Site Visit/Walk Thru.
- D. All questions resulting from the Site Visit must be submitted in writing to Purchasing. The City will not be held by any verbal responses to questions.
- E. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 15, 2013

ADDENDUM: NUMBER TWO
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)

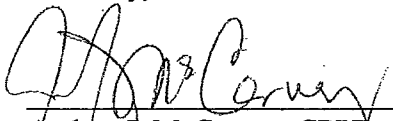
Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: *MC* COMPANY NAME: Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The RFP due date has been extended until Wednesday, March 27, 2013, no later than 5:00 p.m. (EST).
- B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 22, 2013

ADDENDUM: NUMBER THREE
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP NO. 13-0024

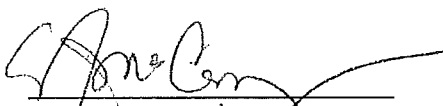
Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: TH **COMPANY NAME:** Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The RFP due date has been extended until **Wednesday, April 3, 2013**, no later than 5:00 p.m. (EST).
- B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,



Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

March 29, 2013

ADDENDUM: NUMBER FOUR
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP NO. 13-0024

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: *AMC* **COMPANY NAME:** Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

- A. The RFP due date has been extended until **Friday, April 12, 2013**, no later than 5:00 p.m. (EST).
- B. Responses to all "Questions/Clarifications requests will be provided in the next Addendum.

Sincerely,

Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

April 2, 2013

ADDENDUM: NUMBER FIVE
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP No. 13-0024

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL: *HC* COMPANY NAME: Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

The RFP due date has been extended until **Wednesday, April 12, 2013**, no later than 5:00 p.m. (EST).

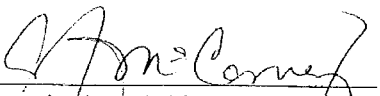
INCLUDED IN THIS ADDENDUM ARE THE FOLLOWING:

- A. Attachment A includes the responses to "Questions/Clarifications" requests for **Muscogee County Jail**.
- B. Attachment B includes the responses to "Questions/Clarifications" requests for **Muscogee County Prison**.
- C. Attachment C includes the Current Employee Salaries.
- D. The City desires to consider the option of awarding the contract to more than one vendor. Therefore, it is requested that vendors submit proposals for the following: **Option I - Comprehensive Medical Services for Muscogee County Jail and/or Option II – Comprehensive Medical Services for Muscogee County Prison.** See attached specifications.

ALL CLAUSES OF THE RFP REMAIN THE SAME FOR OPTION I AND OPTION II, with the exception of the changes noted on the attached Amendments.

- E. Separate Cost Proposal Forms and Contract Signature Pages are attached for each Option.
- F. Separate Evaluations will be performed for each option.

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



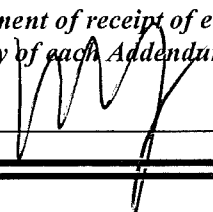
FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340
COLUMBUS, GEORGIA 31902-1340
706-653-4105, FAX 706-653-4109
WWW.COLUMBUSGA.ORG

April 3, 2013

ADDENDUM: NUMBER SIX
Comprehensive Medical Services/Muscogee County Jail & Muscogee County Prison
(Annual Contract)
RFP No. 13-0024

Acknowledgment of receipt of each Addendum must be included with sealed proposal. Initial and include a copy of each Addendum with proposal.

INITIAL:  **COMPANY NAME:** Correctional Healthcare Companies, Inc.

VENDORS ARE INFORMED THAT THE REFERENCED RFP SOLICITATION IS HEREBY MODIFIED, CORRECTED OR SUPPLEMENTED AS SPECIFIED, DESCRIBED AND SET FORTH IN THIS ADDENDUM.

THE CORRECT EXTENDED DUE DATE FOR THE ABOVE RFP IS **FRIDAY, APRIL 12, 2013**, NO LATER THAN 5:00 PM (EST).

Sincerely,


Andrea J. McCorvey, CPPB
Purchasing Division Manager

ORIGINAL

Section 3: Experience/Qualifications

This section shall address the offeror's ability to fulfill the requirements of the RFP. Provide responses to the following:

Vendor Qualification

Large Jail Experience

A. Five (5) years successful experience providing comprehensive health care to large jails with populations over 1,000 inmates

CHC has extensive experience in providing comprehensive inmate healthcare services to adults and remanded juveniles in jails with over 1,000 ADP. Below we have provided information on current clients with similar ADP and scope of services to that proposed in this response.

Customer/Address	Services Provided	Client Start	ADP
Arapahoe County Sheriff's Office Detention Facility 7373 South Potomac Street Centennial, CO 80012	Medical, Dental, Mental and Behavioral Health, Pharmacy	3/24/2004	1,256
Bernalillo County Metropolitan Detention Center 100 Deputy Dean Miera Dr. Albuquerque, NM 87121	Medical, Dental, Mental and Behavioral Health, Pharmacy Diversion	7/1/2010	2,675
El Paso County Criminal Justice Facility 2739 East Las Vegas Colorado Springs, CO 80906	Medical, Dental, Mental and Behavioral Health, Pharmacy	3/1/2001	1,550
David L Moss Criminal Justice Center (Tulsa County) 300 North Denver Avenue Tulsa, OK 74103	Medical, Dental, Mental and Behavioral Health, Pharmacy	7/1/2005	1,800
Lubbock County Detention Center and Juvenile Justice Center 3502 N. Holly St Lubbock, TX 79403	Medical, Dental, Mental and Behavioral Health, Pharmacy	10/1/1999	1,512
Jefferson County Detention Facility 200 Jefferson County Parkway Golden, CO 80401	Medical, Dental, Mental and Behavioral Health, Pharmacy	1/1/2004	1,300

Customer/Address	Services Provided	Client Start	ADP
San Juan County Detention Facility 871 Andrea Drive Farmington, NM 87401	Medical, Dental, Mental and Behavioral Health, Pharmacy	8/1/2001	1,200
Collin County Detention Center 4300 Community Avenue McKinney, TX 75070	Medical, Dental, Mental and Behavioral Health, Pharmacy	10/1/2008	1,100
Fort Bend County Sheriff's Office 4909 FM 2826 Robstown, TX 78380	Medical, Dental, Mental and Behavioral Health, Pharmacy	3/1/2010	1,000

State, County or Private Prison Experience

B. Five (5) years of successful experience providing comprehensive health care to state, county or private prisons

CHC has extensive experience in providing comprehensive healthcare services to adults in state, county and private prisons.

Below we have provided information on current clients with similar ADP and scope of services to that proposed in this response.

Customer/Address	Services Provided	Client	Client Start	ADP
Arizona State Prison, Kingman 4646 West English Dr. Golden Valley, AZ 86403	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	8/1/2004	3,230
Arizona State Prison, Florence West 715 E. Diversion Dam Road, Florence AZ 85232	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	7/1/2009	750
Arizona State Prison, Phoenix West 3402 W. Cocopah Street, Phoenix, AZ 85009	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	7/1/2009	484
Central Arizona Correctional Facility 1401 E. Diversion Dam Road, Florence AZ 85132	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	7/1/2009	1,280

Customer/Address	Services Provided	Client	Client Start	ADP
Coastal Bend Correctional Facility 4909 FM 2826, Robstown, TX 78380	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	1/11/2010	1,056
Gadsden Correctional Facility 6044 Greensboro Highway, Quincy, FL 32351	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	8/1/2010	1,368
Giles W. Dalby Correctional Facility P.O. Box 9000, 805 North Avenue, F, Post, TX 79356-9000	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	4/1/2007	1,503
Illinois Department of Juvenile Justice Six locations throughout the State	Medical, Dental, Mental Health and Behavioral Health, Pharmacy	State	1/16/2000	1,357
Reeves County Detention Center 1560 W. County Rd 204, Pecos, TX 79772	Medical, Dental, Mental and Behavioral Health, Pharmacy	County	8/1/2002	3,763
Willacy County Adult Correctional Facility 1601 Buffalo Drive, Raymondville, TX 75850	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	10/9/2003	540
Willacy County Correctional Center 1800 Industrial Drive, Raymondville, TX 78580	Medical, Dental, Mental and Behavioral Health, Pharmacy	Private	8/1/2011	2,484

Large Jail Accreditations

C. Successful NCCHC or ACA accreditation of at least one large jail

Based on Addendum /Attachment A, it is our understanding the Muscogee County Sheriff's Office will be interested in seeking NCCHC and ACA accreditations for the Muscogee County Jail in the second year of the contract.

CHC has a proven track record in assisting clients in obtaining and maintaining industry accreditations including those of the NCCHC, ACA, Joint Commission, and Commission on Accreditation for Law Enforcement Agencies (CALEA). In fact, we have been 100 percent successful in obtaining and maintaining accreditations for each and every client who has sought one. Whether it

is a first-time accreditation or a renewal of an accreditation, CHC guides its clients through the process in a methodical and thorough approach. Our Risk Management personnel help sites prepare by performing audits of a percentage of the sites we manage each year.

Currently, 47 of our client facilities are accredited; 30 are accredited by the American Correctional Association (ACA), 17 are accredited by the National Commission on Correctional Health Care (NCCHC), and three are accredited by the Joint Commission on the Accreditation of Healthcare Organizations (TJC). Of these facilities, 12 are jointly accredited by ACA and NCCHC and three are jointly accredited by ACA and TJC.

Below is a list of large county jails that have earned ACA and NCCHC accreditation.

Customer	ADP	Accreditation
Bernalillo County Metropolitan Detention Center, NM	3,100	ACA, NCCHC
El Paso County Criminal Justice Facility, CO	1,550	ACA, NCCHC
David L Moss Criminal Justice Center (Tulsa County), OK	1,800	ACA, NCCHC
Jefferson County Detention Facility, CO	1,300	ACA, NCCHC
Collin County Detention Facility 4300 Community Ave McKinney, TX 75071	1,100	NCCHC

Vendor Experience

- A. Describe in detail the firm's ability and experience in providing the services specified in Appendix A.

CHC's Ability and Experience in Providing Inmate Medical Services

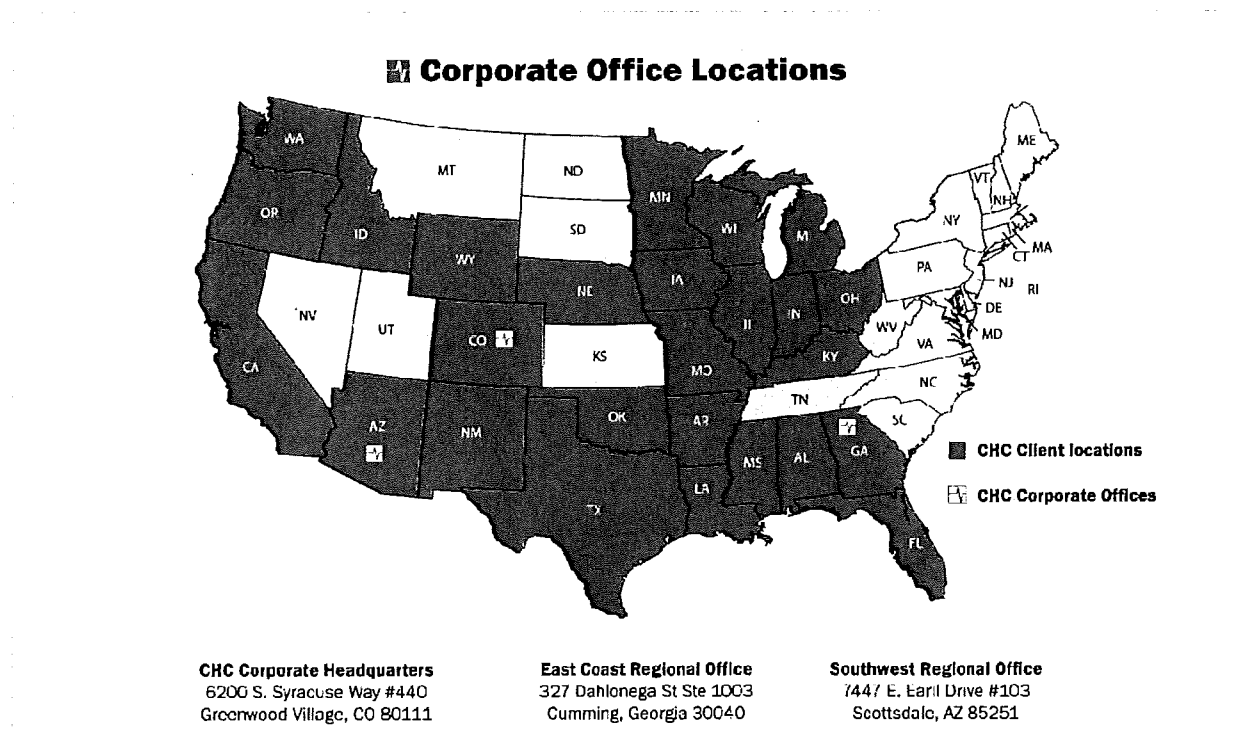
CHC's mission is to fully support our corrections agency customers in creating safer communities, safer facilities, successful offender outcomes, and more efficient use of correctional resources; we do this by providing total care through medical, mental, and behavioral health services to offenders – in the community, in custody, and upon re-entry into the community.

CHC is unique in the correctional healthcare industry. We take our client relationships and accounts seriously, with dedicated teams focused solely on providing the highest quality care at the most affordable prices. We do not cut corners and we work hard to ensure that our clients are satisfied with our services every step of the way.

Depth and Breadth of Experience

CHC is a national leader in inmate comprehensive medical services management, providing comprehensive medical, dental and pharmaceutical solutions, state-of-the-art service, and uncompromised value to our clients for 21 years. CHC currently serves more than 240 correctional facilities throughout the United States, including a number of Federal Bureau of Prison sites as well as multiple State Departments of Corrections, including Illinois, Texas, Arizona, Florida, and Oklahoma in both state and privately run facilities. We support the provision of medical services to more than 70,000 inmates daily.

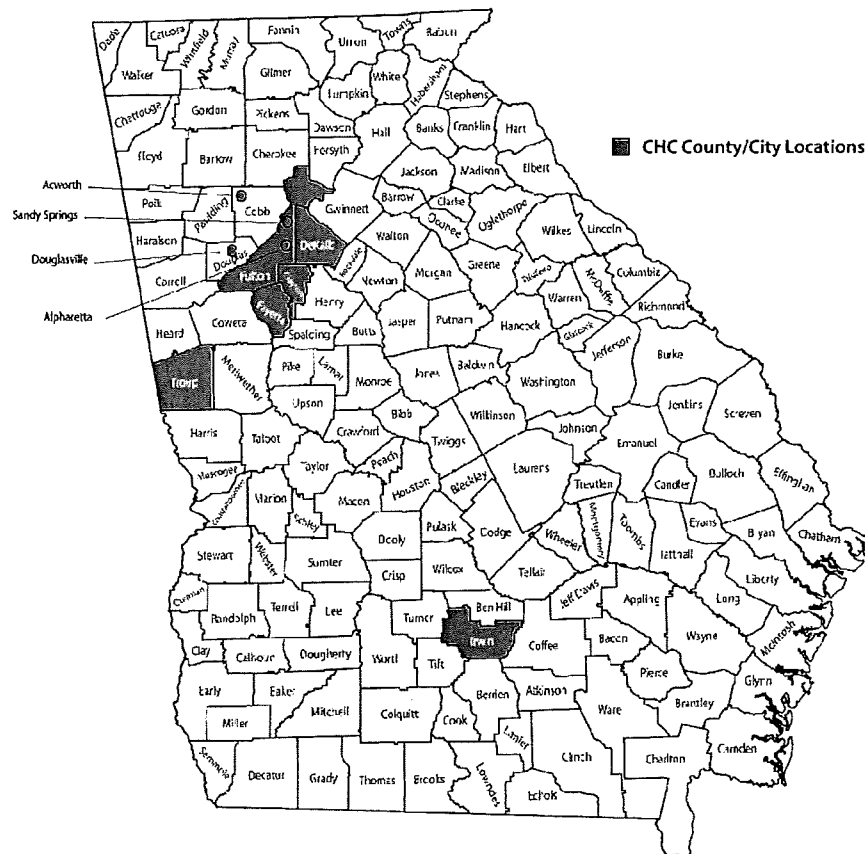
Below is a map illustrating where we are located and states that we serve.



Georgia Experience

CHC has served as the medical services provider for Irwin County Detention Center in Ocilla since February of 2010. CHC has been successful in meeting the needs of a diverse population, including ICE, BOP, and County detainees and inmates. CHC has repeatedly shown our proficiency by successfully passing multiple local, State, and Federal audits. In addition to our work with Irwin County, CHC has partnered with nine city and county governments in Georgia to provide supervisory probation and parole services. On the following page, we provide a map illustrating the locations of our Georgia services.

CHC'S PRESENCE IN GEORGIA



Corporate History

Over the years, Correctional Healthcare Companies has consolidated several leading providers of offender healthcare services and integrated these in order to create a single, full-service company; this has allowed us to better support our clients with more services and greater cost efficiencies.

Correctional Healthcare Companies, Inc. was incorporated in Delaware on January 28, 2010. We are currently licensed to provide inmate healthcare in every state in the country. CHC and our subsidiaries have been providing turn-key solutions to correctional facilities since 1992.

Corporate Address and Contact Information

Correctional Healthcare Companies, Inc. (CHC)
 6200 S. Syracuse Way #440
 Greenwood Village, CO 80111
 Toll Free: (866) 246-5245, Fax: (720) 622-8099, E-mail: info@correctioncare.com

Recognition of the State of Georgia's fiscal challenges

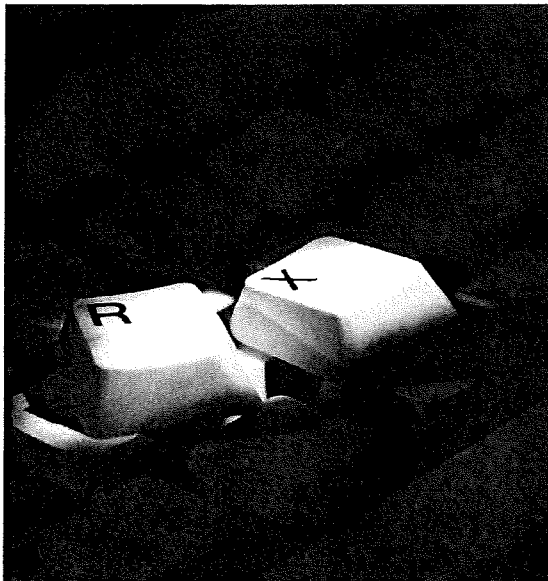
CHC understands the complex economic challenges facing the State of Georgia and how that directly impacts the availability of tax dollars allocated to the inmate healthcare budget for the Columbus Consolidated Government; it is within this context that we are submitting what we believe to be a very competitive offer. However, CHC would like to explore additional cost cutting opportunities which can only be determined once we have experienced first-hand the dynamics of the Columbus Consolidated Government's healthcare system.

Proven cost-containment strategies

CHC is always looking for innovative cost containment solutions that result in great efficiencies without compromising the quality of care we provide to each inmate. We provide some of our greatest value to our clients in this area. Three areas in which we have had the greatest successes in cost containment include: 1) pharmaceutical management; 2) utilization management; and 3) staff deployment and scheduling.

Pharmaceutical management

CHC's providers ensure quality patient care through medications that are safe, clinically efficacious, have minimal side effects, and are cost effective. CHC's general practice is to provide medications according to a formulary, and we will offer our own formulary for consideration by the Muscogee County Sheriff's Office as requested in Addendum 5. Generic medication equivalents may be substituted for a brand name medication, and CHC encourages appropriate substitution of less costly medication equivalents when these options are available. We have developed policies and procedures for the use of non-formulary medications and require our providers to formally request such medications from our corporate Medical Director to authorize receipt.



Our medication utilization and costs are monitored when the medication orders are submitted, on a scheduled monthly basis, and as part of our regular trend analysis monitoring. These monitoring activities are able to identify when a particular prescriber's pattern differs from the norm, and a Corporate Associate Medical Director or CHC's Chief Medical Officer will initiate contact with the prescribing provider to discuss the matter directly, providing clinical insight and education as needed. As well as the cost savings achieved by minimizing overutilization of medications, the additional time saved dispensing and administering unnecessary pharmaceuticals allows the nursing staff to work more efficiently and effectively.

CHC's pharmacy management initiatives focus on ensuring that effective medications are appropriately prescribed. We analyze medication usage and prescribing data to monitor our usage company-wide. When our pharmacy utilization is compared to national benchmarks for correctional medication usage, such as NCCHC's recommended benchmarks, CHC's medication usage in our jail systems is well under the recommended limits. This demonstrates the effectiveness and cost containment success of our medication management program.

Offsite management

CHC's Utilization Management (UM) program for offsite services plays a significant role in our cost containment efforts. Through aggressive UM review, both onsite and at the corporate level, we are able to restrict the use of expensive offsite resources to only those treatments and procedures which are medically indicated. Additionally, we make every effort to provide appropriate care onsite as often as possible through the use of specialty clinics and telemedicine. Our healthcare program is structured to use as few outside services as medically appropriate without compromising inmate health. This serves to significantly lower the risk and costs associated with offsite transportation and security for medical appointments.

Staff Deployment and Scheduling

CHC recognizes that the majority of costs for most clients are designated for payroll and staffing and as a result we aggressively manage our staffing to ensure appropriate deployment for all staff levels and shift coverage. We do this through a variety of methods, including:

- *Biweekly labor reports* which are generated following each pay period and actively monitored by our operations staff. These reports allows us to continually monitor our actual staffing levels and compare them to the contractual staffing levels, ensuring that we are conforming to the contractual levels at all times. Through this process we have been able to significantly reduce superfluous staff hours and overtime, eliminating as many as five to six full-time equivalent employees at some client locations where we operate.
- *Controlling and scheduling employee time off early.* By carefully monitoring and scheduling employee time off, especially for peak demand times such as summer and winter holidays, CHC is able to ensure that all shifts are effectively covered and the need for last-minute overtime or agency nursing coverage is kept to an absolute minimum.
- *Routine coaching with site managers and onsite visits,* as well as conference calls with multiple sites, occur on a regular basis to provide open communication and training to all sites on scheduling best practices.
- In addition to controlling CHC's staffing levels, CHC will assist the County in reducing its administrative and staffing costs through a decreased need for offsite security and transportation costs at each contracted facility. Since CHC closely monitors its offsite utilization and actively seeks to provide as much care as possible onsite, this will allow Columbus Consolidated Government realize savings through reduced security and staffing costs.

Staffing expertise

The core of any successful correctional healthcare program is a motivated and professional medical staff that delivers high-quality services. When CHC begins a new contract, our Human Resources (HR) professionals review the qualifications of existing medical staff and retain as many existing staff members as possible (when and if desired). For vacant or new positions, CHC's HR Department employs full-time recruiters who identify high-quality and appropriately credentialed individuals. We do this through a variety of recruitment tactics, including, but not limited to, advertising, professional job boards, job fairs, and hiring bonuses. Because CHC's recruitment team pays special attention to motivation, satisfaction, and work ethic in addition to licensing, certification, and training, we are known to have one of the lowest job vacancy rates in the industry.

Senior-level dedication to the Muscogee County Sheriff's Office and Columbus Consolidated Government

CHC is committed to this partnership and intends to create an open dialogue with the Muscogee County Sheriff's Office and the Columbus Consolidated Government post-award. As part of our program, we are proposing quarterly meetings with key Division Operational staff who recognize the importance of The Muscogee County Sheriff's Office and Columbus Consolidated Government and will be readily available throughout the contract to address any concerns related to the provision of inmate healthcare.

Innovative and unique in-house approach to Total Correctional Healthcare

CHC is proud to be the only inmate health provider to offer comprehensive inmate health services that reach beyond the facility walls, from pre-incarceration to post-incarceration. We offer outpatient treatment and supervision services in addition to inmate healthcare, addressing the offender's needs both in custody and in the community, thus maximizing opportunities for the offender to complete programming and ultimately reduce recidivism. Our evidence-based programming has been proven successful over the last two decades at reducing recidivism; the co-creator of this program is an active member of the CHC team as well.

Commitment to working with Small, Minority, and Women-owned Businesses

At CHC, we realize that bigger is not always better. We are committed to identifying and partnering with high-quality small, minority, and women-owned local businesses. Supplier diversity through purchasing and contracting creates strong local relationships that benefit our clients and the surrounding communities. Our Small, Minority, and Women-Owned Business Team is dedicated to recognizing opportunities that might be filled by these businesses and fostering the connection between CHC, local businesses, and our clients.

A long-term partnership

The Muscogee County Sheriff's Office and Columbus Consolidated Government are looking for a partner that will assist its leaders in addressing the unique needs of today while planning for the ever-changing needs of the "medical mission" tomorrow. CHC is unique among inmate healthcare providers in that we will provide strategic and consultative guidance to where the Sheriff's office and Columbus Consolidated Government is and needs to be five, 10, and 20 years into the future.

Professional Staff

- B. Provide the names and titles of professional staff, including administrative and medical personnel, who will be dedicated to this contract to perform the services required. Provide copies of resumes, medical licenses, credentials etc.

Our professional staffing infrastructure is composed of experts in all aspects of correctional healthcare, giving us a unique blend of medical and correctional environment experience. The team is credentialed in such disciplines as jail and prison administration, clinical psychology, insurance/HMO management, substance abuse counseling, labor relations, and forensic psychiatry. We understand the demands and needs of daily operations and work with the client to create a correctional healthcare program tailored for an individual site(s). In addition, our staff members are very familiar with industry standards, including NCCHC, ACA and Georgia Department of Corrections (GDC) – State

Administrative Personnel

As your partner, we will work hand-in-hand with the Muscogee County Jail and Muscogee County Prison staffs to provide the support that is needed. We understand that effective communication skills, flexibility, and an in-depth understanding of your needs are critical to building and maintaining a successful operation. To this end, a member of the corporate management team is always available to our partners 24 hours a day, seven days a week.

Divisional Vice President of Operations /Division Director

We provide each client with a Divisional Vice President of Operations whose responsibilities include, but are not limited to, the successful transition and implementation of the healthcare program at the facility and continued and regular oversight.

Ed Buss will serve as the Divisional Vice President of Operations for The Muscogee County Sheriff's Office and Columbus Consolidated Government.

Mr. Buss has extensive experience in management, budgeting, and strategic planning in correctional facilities and state systems, including 24 years in corrections in two different states. He served as the Secretary of the Florida DOC and Commissioner of the Indiana DOC, where he was responsible for 152,000 and 30,000 offenders respectively. While in Indiana, Mr. Buss created the first statewide comprehensive model of correctional healthcare management.

Mr. Buss is currently an auditor for the American Correctional Association (ACA), a Commissioner with the ACA's Accreditation Committee, and is a member of the Association of State Correctional Administrators (ASCA).

Daniel Ronay will serve as Division Director for The Muscogee County Sheriff's Office and Columbus Consolidated Government.

Mr. Ronay joined Correctional Healthcare Companies as Division Director, Division 1 on December 11, 2012. Immediately prior to joining CHC, Dan served as the Director of Reentry and Community Transition for the Pennsylvania Department of Corrections. Mr. Ronay previously served as the Chief Deputy Secretary for the Florida Department of Corrections and as Chief of Staff for the Indiana Department of Correction. In both capacities he assisted in the development of many innovations and processes which created significant efficiencies while retaining the highest level of public safety. Mr. Ronay began his career in corrections in 1995 as a correctional officer with the Indiana Department of Correction, and has also served as the Commander of Indiana's only juvenile Boot Camp, an Administrative Assistant to the Superintendent, an Assistant Superintendent, and as the Agency's Director of Staff Development & Training.

Mr. Ronay served in the United States Marine Corps from 1974 through 2006 when he retired from active duty. He is a three-tour decorated combat veteran inclusive of duty in Beirut, Lebanon, the Gulf War, and OIF III in Iraq. First Sergeant Ronay received the Meritorious Service Medal upon his retirement for leading his Marines in Iraq.

Mr. Ronay is also a member of the American Correctional Association and individually earned distinction as a Certified Correctional Executive in 2007 (Re-Certified in 2010). He remains an avid supporter of ACA, has presented at a myriad of national conference workshops, and has served as an Accreditation Manager for several institutions.

Contract Manager

We provide each client with a dedicated Contract Manager who provides oversight and direction of the healthcare program at the facility. The Contract Manager will attend administrative meetings, as needed, and be available to the facility's administration 24 hours a day, 7 days a week. The Contract Manager is key to ensuring success in delivering inmate healthcare services. The Contract Manager's oversight includes:

- Developing and maintaining relationships with onsite medical and correctional staff
- Ensuring contract compliance
- Participating in continuous quality improvement (CQI) efforts by telephone, e-mail, fax, or in-person
- Providing professional healthcare staff development

Jim Clenney will serve as Contract Manager for The Muscogee County Sheriff's Office and Columbus Consolidated Government.

Mr. Clenney worked for the Arizona Department of Corrections for over 11 years, beginning as the Health Services Administrator for a 2,400-bed prison and advancing to the position of Regional Medical Operations Administrator for the State of Arizona. He has extensive experience in corrections, including operating female prisons, inpatient facilities, outpatient facilities, and managing specialty populations.

Director of Business Development

We provide each client with a dedicated Director of Business Development (DBD). The DBD leads the design of the right program for the facility and continues to support the facility and facility administration throughout the contract. Our DBD will serve as a voice and advocate for both the jail and prison, and their administrators.

Gregg Lynk will serve as the Director of Business Development for The Muscogee County Sheriff's Office and Columbus Consolidated Government.

Mr. Lynk has more than 20 years experience with providing services in the corrections division. Prior to joining CHC, Gregg worked with two major national corrections companies, most recently as the East Coast Director of Operations and Development where he was responsible for all aspects of the treatment sites as well as business development. Gregg has extensive experience in addressing customer needs within a jail or prison; community based residential center as well as non-residential treatment facilities.

Mr. Lynk has a Bachelor's of Science degree in Psychology from Trinity International University in Florida, and a Master's of Education degree in Educational Counseling from Florida Atlantic University, also in Florida.

Executive Management Team

Our senior management team has more than 150 years of cumulative expertise in correctional and managed healthcare experience. Our management team will work with the County to effectively execute, manage, and monitor all inmate healthcare delivery. This team pays close attention to site concerns as they arise. Issues are monitored by the contract management department and immediately forwarded to the appropriate individual(s) for review and corrective action, if needed.



Douglas Goetz, Chief Executive Officer

Doug Goetz was named CEO of Correctional Healthcare Companies in January 2007. He has more than 20 years of healthcare management and leadership experience and is now a national leader in correctional healthcare management. Prior to joining CHC, Doug served as Senior Vice President and CFO of HMS Healthcare (a \$90 million private-equity-backed, multi-state access network PPO). As a vice-president for the TriZetto Group, a healthcare services firm, Doug led numerous integrations of healthcare networks. Doug also served as Corporate CFO for PorterCare Adventist Health System, a Denver-based multi-hospital network, as well as serving as COO and CFO of Sloans Lake Managed Care. Doug holds a Bachelor's Degree in finance and management from Union College in Lincoln, Nebraska.



Don Houston, Chief Operating Officer

Don Houston joined Physicians Network Association (PNA) as President in January 2010 and became the COO of Correctional Healthcare Companies upon PNA's acquisition. Don has more than 27 years of correctional experience, including 18 years as a senior executive with The GEO Group, a major private corrections corporation. As Senior Regional Vice President of GEO, Don was responsible for overseeing 24 correctional facilities with an inmate population of 25,000, as well as overseeing more than 4,000 employees and a budget exceeding \$250 million. Don has extensive experience in proposal development, project management, financial planning, and client relations - including working closely with various state agencies, local governments, and legislative and executive branches of government. Don earned two degrees at Sam Houston University in Houston, Texas; and did post-graduate work in psychology and educational diagnostics.

**Bruce McDaniel, CPA, Executive Vice President and Chief Financial Officer**

Bruce McDaniel joined CHC as Chief Financial Officer in June 2010. With 25 years experience as CFO/COO in the healthcare industry, Bruce has proven his financial management expertise at companies such as Bariatric Partners and Renal Ventures Management, LLC. During his tenures, Bruce managed company growth of up to 20 percent, while improving margins fivefold. Bruce is a member of the American Institute of Certified Public Accountants and the Missouri Society of Certified Public Accountants, and has served as Treasurer for one of the largest Catholic healthcare systems in Colorado. He currently manages CHC's financial operations and contributes to strategic planning for our corporate vision. Bruce holds a Bachelor's Degree from the University of Missouri-St Louis and began his professional career with Ernst & Young.

**Dr. Raymond Herr, MD, Chief Medical Officer**

Dr. Herr joined CHC in 2007 as the Associate Medical Director of CHM. In 2011, he was promoted to Chief Medical Officer of CHC. As the chief medical officer at CHC, he has direct clinical oversight for all provider services, as well as clinical oversight of Utilization Management. Dr. Herr has been involved in correctional healthcare for two decades having served as a medical director in many county jails in Colorado, most recently at Jefferson County Detention Facility and Broomfield County Jail. In addition to his correctional experience, Dr. Herr worked with Kaiser Permanente for many years in their Family Practice Department providing primary care services and serving as a key member of their utilization management team. Dr. Herr's correctional experience, strong primary care skills and utilization experience have made him a perfect fit at CHC. Dr. Herr earned his Bachelor's Degree in Chemistry at Colorado College and his medical degree at the University of Colorado School of Medicine. He also has a Master's Degree in Exercise Physiology and a fellowship degree in Sports Medicine from the University of Arizona. Dr. Herr is board certified in General Preventive Medicine.

**Dr. Ken Robinson, Ed.D, Executive Vice President, Community Health Services**

Dr. Ken Robinson joined Correctional Healthcare Companies in January 2012. With over 30 years of correctional mental healthcare experience, he has served as the President of Correctional Counseling, Inc. and Counseling Centers Incorporated since 1987. Dr. Robinson is a co-developer of Moral Reconciliation Therapy® (MRT®), the main form of group services used in CHC's Community Health Programs. MRT has been selected for inclusion on the National Registry of Evidence-based Programs and Practices (NREPP) sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA); a distinction which no other cognitive skills program has attained. Over one million offenders have been treated using MRT and over 6,000 individuals have been trained as MRT facilitators. He is a certified Professional Counselor and gained his Doctorate in Educational Counseling from Memphis State University in Memphis, Tennessee.

**Shelton Frey, JD, CCHP, General Counsel**

Shelton Frey has served as CHC's Chief Legal Counsel since 2007. He brings a wealth of expertise and firsthand experience in the full spectrum of the corrections field, from facility level operations to the inner workings of the judicial system. Prior to arriving at CHC, he served as Assistant of Warden Operations with the Illinois Department of Corrections at the Shawnee Correctional Center in Vienna, Illinois. As both Assistant Warden and Warden of the Tamms Closed-Maximum Security Correctional Center in Tamms, Illinois, he oversaw the operation of the state's only super-maximum security prison. In the judicial realm, Shelton has served as Legal Counsel for the Illinois Department of Corrections, an Illinois Assistant Attorney General in the Consumer Fraud Bureau and on the Sex Crimes Task Force, and as an Associate at Gilbert, Kimmel, Huffman & Prosser, Ltd. He is a member of the American Correctional Association, the National Commission on Correctional Healthcare and the American Society for Healthcare Risk Management. Shelton is a Certified Correctional Health Professional by NCCHC and is licensed to practice law in Illinois and Colorado. Shelton earned a Bachelor's of Science degree from Southern Illinois University and a law degree from the Southern Illinois University School of Law.

**Wendy Dunegan, Senior Vice President of Operations**

Ms. Dunegan will oversee the operation of this region from the corporate level. She joined CHC in January of 2011 with more than 12 years of correctional experience in business management and operations as a regional executive for The GEO Group, an international private corrections corporation, where she had the fiduciary responsibility for more than 20 correctional facilities with an annual revenue exceeding \$300 million. Ms. Dunegan has considerable experience and knowledge in federal contracting, including negotiating Intergovernmental Agreements. Ms. Dunegan is located at CHC's corporate office in Colorado. Ms. Dunegan earned a Bachelor's Degree in Accounting from Cameron University in Oklahoma.

Please see Attachment 1 for Georgia and Executive Management Personnel Resumes and Licenses.

Medical Personnel

CHC's first priority upon contract award will be to attempt to retain as many of the current qualified healthcare staff members (physicians, health service administrators, nurse administrators, staff nurses, medical technicians, medical records personnel, dentists and mid-level providers) at both the Muscogee County Jail and Muscogee County Prison as possible. Our team of recruitment specialists will meet with the current healthcare staff to address transition concerns; we will meet one-on-one with each current staff member to answer any questions and address individual concerns. These meetings will occur as soon as possible after contract negotiations and obligations have been finalized to reduce employee concerns regarding their future employment opportunities with CHC.

As a result of CHC's competitive compensation plan and benefit structure, we anticipate retaining most, if not all, of the current healthcare staff. All retained employees will be properly licensed and providers will have all necessary qualifications.

Recruitment at CHC involves the following:

- Job description maintenance to assure accuracy
- Hiring Policies
- Staffing requisitions
- Recruiting sources
- Selection and Hiring procedures
- Standardized application forms and procedures
- Interview Process
- Background checks
- Employment Reference checks and education verification
- Employment Offer Letters and New Hire packets

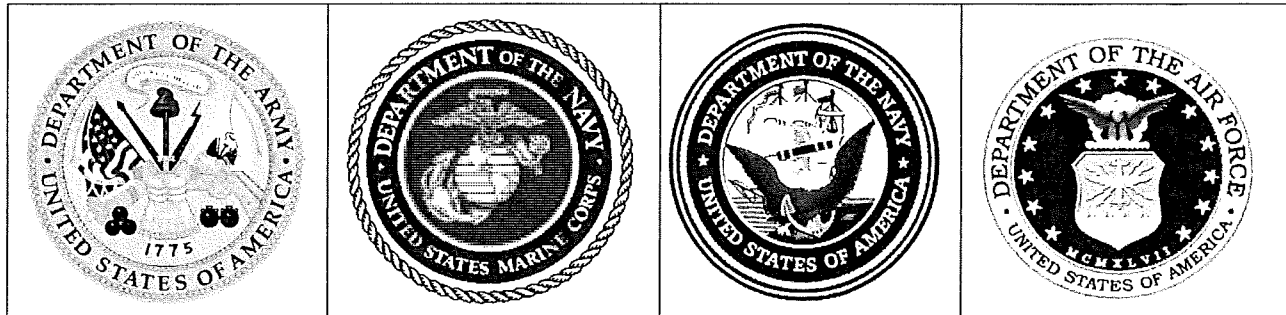
Recruiting Strategy

CHC will focus our recruiting efforts on those current healthcare positions we are unable to retain after contract award and prior to the start of the contract. We will have a team of full-time recruiters dedicated to fully staffing of both the jail and prison. We utilize a wide range of tactics to recruit only the most qualified and competent employees. Our thorough approach to recruitment includes methods such as:

- Radio
- TV
- Newspapers
- Publications
- Websites
- Local Workforce offices
- Job fairs
- Conferences
- Direct mail campaigns
- Recruitment agencies
- Personal contacts
- Applicable Medical and Psychiatric Boards
- Private Industry groups (such as specialist malpractice insurance agencies)

CHC Experience with Military Personnel and Jails near U.S. Military Installations

C. Attach additional facts about your firm, which you feel, will be an asset in evaluating your proposal.



CHC has extensive experience providing comprehensive medical services at jails located near U.S. Military mission-critical installations.

The chart below includes current contracts we have with jails that handle military personnel arrested by civilian authorities outside their assigned duty stations.

Customer/Address	Start Date	ADP	Military Installation/Personnel	Distance from town to installation
Bell County Jail 2405 South Loop 121 Belton, TX 76513	01/12/2009	906	Fort Hood 53,000 Active Duty Soldiers	19 miles
Bernalillo County Metropolitan Detention Center 100 Deputy Dean Miera Drive SW, Albuquerque, NM 87151	07/01/2010	2,675	Kirtland Air Force Base 4,200 Active Duty Airmen	7 miles
Curry County Detention Center 801 Mitchell Street, Clovis, NM 88101	08/01/2009	250	Cannon Air Force Base 3,700 Active Duty Airmen	9 miles
El Paso County Criminal Justice Facility 2739 E. Las Vegas, Colorado Springs, CO 80906	03/01/2002	1,550	Fort Carson 24,600 Active Duty Soldiers	10 miles
Laramie County Detention Center 1910 Pioneer Avenue, Cheyenne, WY 82001	06/01/1999	250	F.E. Warren Air Force Base 4,000 Active Duty Airmen	5 miles
Otero County Detention Center 1958 Dr. Martin Luther King Jr. Drive, Alamogordo, NM 88310-8121	07/01/2009	190	Holloman Air Force Base 3,400 Active Duty Airmen	11 miles

Customer/Address	Start Date	ADP	Military Installation/Personnel	Distance from town to installation
Wichita County Detention Center 900 Seventh Street, Wichita Falls, TX 76308	01/01/2010	600	Sheppard Air Force Base 8,500 Active Duty Airmen	4 miles
Yuma County Detention Center 200 W. Court Street, Yuma, AZ 85364	06/18/2007	625	Marine Corps Air Station (MCAS) Yuma 4,000 Active Duty Marines	7 miles

Jails located in close proximity to military installations often deal with Active-duty, Reserve and National Guard military personnel who allegedly commit crimes outside their assigned installations. Understanding the military culture, military procedures and military law is critical for vendors who provide comprehensive medical services to these jails. This knowledge of how the military works impacts booking/intake screening protocols, obtaining medical and mental health records, dealing with the service member's military commanders and installation legal authorities (Army Provost Marshall, Army Criminal Investigation Command and the Navy Judge Advocate General (JAG) offices), and a host of other issues.

More importantly, our experience has generated an understanding of individual soldiers, sailors, Marines and airmen – how they live, work, train and often deploy to combat zones.

According to the U.S. Department of Veterans Affairs (VA), while the incarceration rate for veterans is lower than non-veterans (630 per 100,000 veterans versus 1,390 per 100,000 non-veterans), military personnel – particularly combat veterans – when arrested bring some unique problems to county jail staffs.

The Department of Defense reports one in three combat veterans from the Iraq and Afghanistan wars suffer from Post Traumatic Stress Disorder (PTSD) or Traumatic Brain Injury (TBI), and at times suffer from alcoholism, legal and illegal drug abuse, depression, anxiety and homelessness.

CHC healthcare personnel have the experience and training to deal with incarcerated military personal, from enlisted personnel or officers arrested for DUI or simple assaults, to high-profile felons who make national headlines.

For example, currently incarcerated at the Bell County Jail outside Fort Hood, Texas - where CHC provides comprehensive medical services – is Army Major Nidal M. Hassan, who is awaiting trial on 13 counts of premeditated murder and 32 counts of attempted premeditated murder in connection to the Nov. 5, 2009 shooting rampage at Fort Hood. Major Hassan, stationed at Fort Hood as a psychiatrist, was severely wounded during the shooting rampage. Fort Hood is the most populous U.S. military installation in the world.

CHC is encouraged to learn the Muscogee County Jail in April 2012 opened a special dormitory for military veterans that can hold 16 inmates.

We believe our knowledge and experience with the military will prove a valuable asset to the Muscogee County Sheriff's Office, the Muscogee County Jail and the Muscogee County Prison.

Reference Letters from current CHC Clients

Please see four reference letters from current clients on the following pages.



LUBBOCK COUNTY SHERIFFS OFFICE

P. O. Box 10536
LUBBOCK, TX 79408
PHONE: (806) 775-1400
FAX: (806) 775-1491

KELLY S. ROWE
Sheriff
Mike Reed
Chief Deputy LE
Cody Scott
Chief Deputy Detention

March 29, 2012

To Whom It May Concern:

Correctional Healthcare Companies (CHC) is the current provider of medical, behavioral, and dental health services for the Lubbock County Detention Center (LCDC). CHC received no deficiencies during the annual inspection from the Texas Commission on Jail Standards.

The leadership for CHC is very responsive to our needs and works collaboratively with LCDC for the mutual benefit of our inmate population. The ability of the CHC staff to work well with our administration, line staff and other contractor staff ensures the care of the inmate population is outstanding and all issues and concerns are effectively and promptly resolved.

The professionalism and willingness of the CHC regional management to assist in meeting the needs of LCDC demonstrates CHC's commitment and diligence in solving care concerns and administrative challenges as they arise.

CHC is proactive and conscientious in its relationship with LCDC and provides exceptional care to the inmates. If you have questions or need more information about the performance of CHC, contact me at (806)775-7001.

Sincerely,

A handwritten signature in cursive script that reads "Cody Scott".

Cody Scott, CJM
Chief Deputy

Bernalillo County Metropolitan Detention Center

Tom Zdunek, County Manager
Thomas E. Swissstack, Deputy County Manager



Ramon C. Rustin, Chief of Corrections

100 Deputy Dean Miera Drive SW
Albuquerque, NM 87151

January 9, 2012

To Whom It May Concern:

Correctional Healthcare Companies (CHC) is the current provider of medical, behavioral, and dental health services for the Bernalillo County Metropolitan Detention Center (BCMDC). They have provided comprehensive medical, behavioral, and dental care to inmates of this jail since July 2010, and have received outstanding audits from both the American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC).

The leadership for CHC has been very responsive to our needs. We are able to work collaboratively together for the mutual good of our inmate population. CHC staff have worked exceptionally well with our administration, correctional staff, and other contractors within our system. The care that CHC gives our inmate population is outstanding and all issues and concerns are resolved promptly.

The BCMDC has also experienced a collegial relationship with CHC regional management and corporate staff. They have been very professional to deal with and willing to assist in meeting the needs of our site. CHC has worked diligently to manage and solve care concerns and administrative challenges as they arise.

CHC has been a proactive and conscientious partner for the MDC in providing high quality care to our inmates. Should you have any questions about the performance of CHC with the BCMDC, please feel free to contact my office at (505) 839-8701.

Sincerely,

A handwritten signature in dark ink, appearing to read "R. Rustin", is written over a light blue horizontal line.

Ramon C. Rustin
Chief of Corrections



Nassau County Sheriff's Office

Tommy Seagraves, Sheriff

October 24, 2011

To Whom It May Concern:

It gives me great pleasure to recommend Correctional Healthcare Companies to your organization. We have worked with Correctional Healthcare Companies since April 2010. During this time, we have increased our medical coverage in the detention facility and reduced our overall medical costs. Due to the in-house coverage given, we have reduced the number of inmate transports out of the facility for medical treatment, thus maintaining our detention staff on shift(s).

Correctional Healthcare Companies made the transition easy and brought true professionals to our facility. They continue to make themselves available for any and all concerns and act promptly to resolve any issue.

I recommend Correctional Healthcare Companies without hesitation. If further information is needed, I would be glad to provide assistance.

Sincerely,

Undersheriff Bobby Rowe
Nassau County Sheriff's Office
Jail and Detention Facility

SHERIFF'S OFFICE**Brown County**

300 EAST WALNUT ST.
P.O. BOX 22003
GREEN BAY, WISCONSIN 54305-2003
PHONE (920) 448-4200 FAX (920) 448-4206



**JOHN GOSSAGE
SHERIFF**

February 7, 2011

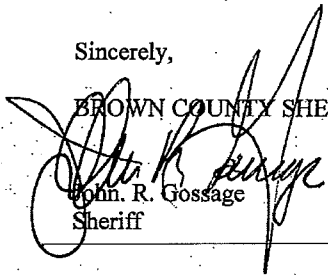
The Brown County Sheriff's Office has been fortunate to partner with Correction Healthcare Companies as the sole provider of healthcare services for over 730 inmates daily. This partnership began in 2007 and continues today.

Correction Healthcare Companies has a proven track record of professional, proactive and family oriented services that serve the needs of the inmates and taxpayers of Brown County. CHC's staff are dedicated professionals that provide quality and efficient healthcare. The staff have become an integral part of the facility; from the healthcare provider to the sales staff.

I would recommend CHC to any Sheriff's Office looking to make changes in their healthcare facilities.

Sincerely,

BROWN COUNTY SHERIFF'S OFFICE


John R. Gossage
Sheriff

Section 4: Service Plan

A. Provide a written narrative, which demonstrates the method, or manner in which the offeror proposes to satisfy the requirements of this Request for Proposal.

A. Scope of Services

Contractor will be required to provide the staffing, supplies, in-clinic contracts, systems, and administration to provide the following services to the patients at both the Muscogee County Jail and Muscogee County Prison within the time frame and to a level of quality, which will meet the standards published in the NCCHC Guidelines for both Jails and Prisons. The following list will serve as a minimum expectation of services the vendor will be required to provide within the scope of this contract:

A. Health Care Services:

1. Intake Screening

CHC healthcare personnel will provide 24/7 intake screening for all inmates brought into the Muscogee County Jail within two hours of booking, and as soon as possible after arrival at the Muscogee County Prison. Our healthcare staff will triage every inmate during the receiving screening process. This process ensures that anyone brought into the booking area is questioned about their health and triaged by a healthcare professional before being medically accepted for entry into the facility. The receiving screening includes, but is not limited to, the following:

- Inquiry into:
 - Any current illnesses, health conditions, medications, or special health requirements (e.g., dietary needs)
 - Diagnosis of serious infectious disease (Hepatitis, HIV/AIDS, TB, STDs)
 - Current communicable illness symptoms (e.g., chronic cough, coughing up blood, lethargy, weakness, weight loss, loss of appetite, fever, night sweats)
 - Past or current mental health treatment, hospitalizations, or medications
 - History of or current suicidal ideation
 - Dental problems, allergies
 - For females (Muscogee County Jail only), whether pregnant and history of pre-natal care
 - Alcohol and legal or illegal drug use (including the time of last use)
 - History of seizure activity, drug withdrawal symptoms



- History of tobacco use
- Other health problems as designated by the responsible provider
- Any health insurance or other payment sources (Medicaid, Medicare, Worker's Compensation, TRICARE)
- Observation of the following:
 - Appearance (e.g., tremors, anxious, disheveled)
 - Behavior (e.g., hostile, appropriate, cooperative)
 - State of consciousness (e.g., alert, disoriented, lethargic)
 - Mobility (e.g., limp, crutches, wheelchair)
 - Breathing (e.g., cough, hyperventilation)
 - Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, tattoos, and needle marks or other indications of drug abuse)
- Disposition into one of the following categories:
 - Immediate referral to an appropriate medical or mental health provider
 - Referral to special housing
 - Placement in the general inmate population
 - Placement in the general inmate population and later referral to an appropriate healthcare service

CHC's screening policy and forms comply with all appropriate on National Commission on Correctional Health Care (NCCHC) and American Correctional Association (ACA) standards. When the receiving screening indicates that an inmate has a contagious disease, is on medication, has immediate medical needs, is intoxicated, or is experiencing substance withdrawal, our staff will refer the inmate to a provider for further review and treatment and follow isolation protocols as necessary. In addition, we will use prescribed medication to delouse any inmate entering the jail with scabies or lice, with the exception of inmates who are pregnant, have allergies, open sores, or who are on seizure medication. We will also administer tuberculosis (PPD) skin tests, as clinically indicated or required.

Initial Triage Diversions

Triage diversion guidelines are based on the severity of an illness or injury a detainee may have upon arrival at the jail or prison. Contagious/infectious disease diversions are based on the risk to other inmates and detention center custody staff and administrators from a detainee arriving with symptoms of active communicable diseases. While life-threatening injuries such as gunshot wounds, stabbings or severe burns are easily identified by first-on-the-scene responders who authorize immediate transport to an emergency room, other injuries such as internal bone fractures or organ damage, concussions and severe head trauma, hypothermia, and exposure to toxic fumes or chemicals often may remain undetected while a detainee is transported to the detention center. The CHC health staff during the initial intake screening at the jail and prison will thoroughly assess and triage detainees – and with consultation with a staff physician – divert an injured detainee who cannot be adequately treated in the 26-bed Jail Infirmary or the Prison Clinic to an area emergency room or hospital.

Infectious and Contagious Disease Diversions

CHC intake staff will also initiate diversion based on a diagnosis of an infectious or contagious disease. Contagious skin rashes such as poison ivy and contagious illnesses such as measles, mumps, and shingles will be isolated and clinically treated in the jail and prison Medical Units. More serious communicable diseases such as bacterial meningitis, tuberculosis, malaria, and whooping cough, will be immediately reported to the staff physician, and upon further examination or testing, the detainee will be placed isolated while awaiting transport to a local hospital.

Mental Health Diversions

CHC will ensure that all persons with a serious mental illness will be identified, as possible, at intake screening and referred to an appropriate mental health provider for further assessment as clinically indicated. If it is determined that intoxicated detainees identified during intake screening can safely detoxify in the Medical Unit, they will be treated in the clinic and behavioral counseling provided as clinically required.

Inmate Access to Medical Care

During the receiving screening, each inmate receives orientation and information from the CHC healthcare staff on how to access healthcare services while housed at the jail or prison. Non-English speaking inmates will receive verbal and/or written instructions, in their native language, regarding access to the healthcare services in the facilities. This orientation may include:

- The purpose of receiving history and physical evaluations, provision of emergency services, pharmaceutical services and policies, infirmary and inpatient care
- The procedures for sick call and the times they are held during the week
- The procedures for obtaining healthcare services
- How to file a healthcare grievance
- Information on oral hygiene
- Sign permission to treat

2. 14-day (Jail)/7-day (Prison) Physicals

In accordance with NCCHC standards, a qualified CHC healthcare professional will perform an inmate health assessment within 14 days of the inmate's arrival at the Muscogee County Jail and within 7 days of arrival at the Muscogee County Prison. If the assessment is performed by a nurse, the facility physician will review the results of the assessment to address any problems. The health assessment will include the following components:

- Review of the receiving screening results
- A complete and thorough physical examination, including comments about mental status
- Review of the significant findings of the health assessment, tests, and identification of problems by physician
- Record of the inmate's height, weight, pulse, blood pressure, temperature, respiratory rate, and pulse oximetry
- Initiation of therapy and immunizations when appropriate

- Additional testing as clinically indicated
- For pregnant inmates at the Muscogee County Jail, the health appraisal will also include:
 - Pregnancy test to confirm positive pregnancy
 - Routine prenatal education and care
 - Management of chemically addicted pregnant inmates
 - Postpartum follow-up care

If the inmate requires further evaluation or treatment, a referral to the appropriate health provider will be made. We will provide annual health assessments, including physical examinations, to inmates who have been incarcerated at the facility for over one year.

Inmate Physical Exams for MCP Work Details

CHC will provide physical exams to inmates who may be assigned to outside or inside work details at the Muscogee County Prison, which houses county and state prisoners. Established more than 135 years ago, the prison each day dispatches 425 inmates for outside work details, and 150 remaining inside, all providing services and maintenance to city property.

The medical clearance process will be completed within a reasonable timeframe after receiving the list of names to be cleared, unless laboratory or other applicable testing increases the time required for clearance.

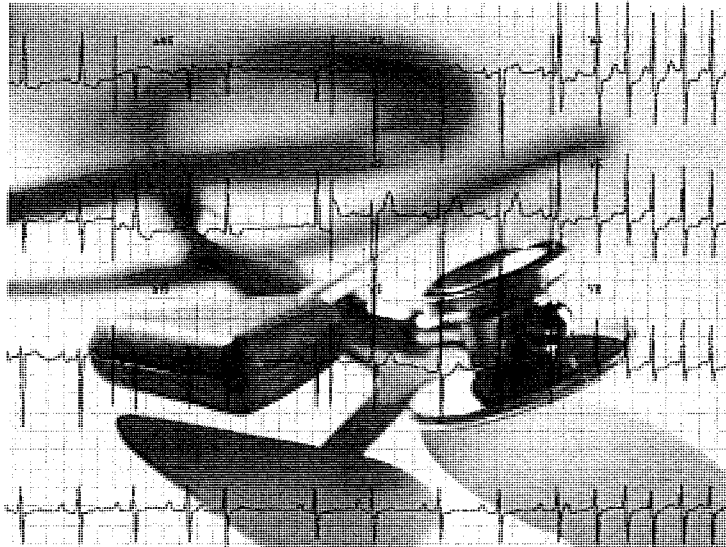
CHC will allow inmate workers to provide janitorial services within the healthcare unit at the discretion of the jail or prison's administration. Such inmate workers will at all times be under the direct visual supervision of a security staff member while working in the healthcare unit. Inmate workers will be prohibited from:

- Performing direct patient care services or scheduling healthcare appointments
- Determining an inmate's access to healthcare services
- Handling or having access to medications or health records
- Handling or having access to surgical instruments, syringes, or hypodermic needles, unless they are for performing self-care procedures
- Performing clerical duties involving health records
- Operating any healthcare equipment
- Under no circumstances are inmates allowed in the pharmacy or healthcare supply areas

3. Sick Call

Inmate requests are received and triaged daily by healthcare staff up to seven days per week. The inmate will request a healthcare consultation by using a healthcare request form provided by the jail or prison. Qualified healthcare team members will accept inmates' written requests for healthcare up to seven days per week. The nursing team will evaluate, triage, and suggest treatment within the constraints of their licensures and clinical protocols. Any problems that exceed the scope of the clinical protocols will be referred to the facility provider for review and treatment. Patient referrals shall be scheduled to a provider according to clinical priority. When indicated, inmates will be seen by a qualified healthcare professional within 24 hours of receipt of their request. If an inmate reports to sick call more than two times with the same complaint and has not been seen by a physician, they will be referred to a provider.

The facility provider will conduct a sick call clinic on a regular schedule each week. During the provider sick call clinic, the provider will evaluate inmates referred by the healthcare team nurse (post triage) and will conduct follow-up evaluation and/or treatment. The provider will provide routine non-invasive diagnostic procedures and will identify and refer any conditions requiring secondary or tertiary services. All requests for provider sick call will be seen by the provider. The provider will review prescriptions, medication administration, and monitoring of inmates with chronic or special health requirements on a regularly scheduled basis to ensure continuity of care and appropriateness of treatments.



A log will be utilized to record each request for sick call services, the date the inmate was seen, and disposition of the sick call visit. Appropriate documentation will be recorded and maintained for all inmates seen at sick call and will be incorporated into the inmate's health record. Thus each inmate's health record will contain appropriate entries documenting all sick call encounters:

- The inmate's specific healthcare complaint
- The examining healthcare professional's assessment
- The prescribed treatment plan
- Follow-up encounters to the point of healthcare problem's resolution

This will ensure that all inmate healthcare complaints are properly and promptly handled, documented, and followed through to a satisfactory resolution.

4. Chronic Care

Security is the first priority and of paramount importance, and we recognize that there are always additional risks and costs associated with offsite transports for medical appointments. Therefore, we make every effort to provide appropriate care onsite as often as possible, and to that end, hold chronic care and/or specialty clinics whenever appropriate and practical for both the Columbus Consolidated Government and CHC. Onsite chronic care clinics monitor and treat diseases such as diabetes, hypertension, seizure disorder, asthma, cardiac disease, HIV, and other chronic illnesses that may warrant onsite specialty care services.

Inmates with chronic diseases or special needs are enrolled in chronic care or specialty clinics at the time of their health assessment. Individual treatment plans will be developed for special needs inmates. Each treatment plan will ensure that the inmate receives follow-up evaluation and treatment, along with the appropriate education. Inmates with chronic care conditions will generally be evaluated at least every three months or more often if clinically indicated. Each treatment plan will be approved by the provider and detailed in the inmate's health record. Treatment plans will

follow accepted patterns of care (i.e., NCCHC Standards and Guidelines, American Psychiatry Guidelines, and National Institute for Health Guidelines).

We give special attention to inmates with disabilities. Communication between medical and security staff will be vital for those inmates requiring medical appliances, such as wheelchairs or crutches, and for those inmates who are immobile.

5. Medication Delivery

Administration

Each delivery of a single dose of prescribed medication will be documented in the inmate's healthcare record. Documentation will also be required if an inmate's ordered medication was not administered. Medication distribution will generally occur twice a day at both the Jail and Prison. When necessary, a third or fourth medication pass will take place for inmates who must take medication three/four times per day. Medications will generally be prepared in blister packs. A liquid drug dosage will be used for psychotropic medications whenever deemed necessary.

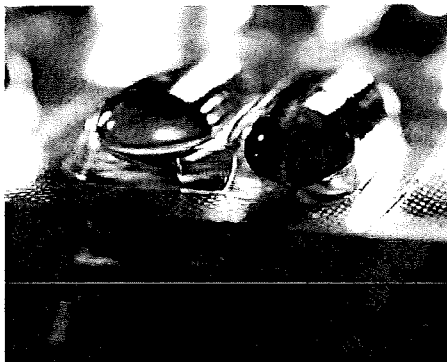
Only properly trained medical personnel will administer prescription medications. The healthcare team will be trained (under the supervision of the provider) in medication administration including, but not limited to:

- Security matters related to medications
- Accountability for timely executions of the practitioner's orders
- Accurate and timely recording of medication administration
- Common side effects of medications

CHC acknowledges that the Muscogee County Sheriff's Office allows "keep on person (KOP)" medication at the Muscogee County Jail, and almost all Muscogee County Prison inmates are on KOP/Self Administration Medications (SAM).

Dispensing

All medications will be dispensed and labeled inmate specific, when indicated, in complete compliance with all current and future local, state, and federal laws, regulations, provisions, and court orders.



Our minimum labeling requirements for dispensed prescriptions include inmate name and number, drug name, prescription number, pharmacy name and address, date prescription is filled, quantity of tablets, manufacturer, expiration date, remaining refills, next refill date, directions for use, and prescribing physician.

Prescription and non-prescription medications will be dispensed in tamper-proof USP Class B unit-dose blister cards. A liquid drug dosage will be used for psychotropic medications whenever deemed necessary.

At the Jail, medications will be dispensed on carts at a designated delivery point on each floor. At the Prison, medications will be dispensed on a cart at 14 delivery dorm sites.

Pharmacy Reports

We will provide detailed monthly medication utilization reports that include inmate name, inmate number, housing pod, clinical provider, date of service, prescription number, medication name, medication strength, quantity dispensed, days' supply and drug acquisition cost.

The reports may also include facility-wide medication summaries, including:

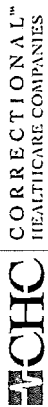
- Monthly drug usage per inmate
- Continual narcotic/controlled substances inventory
- Monthly psycho-tropic usage report
- List of inmates taking medications
- Total doses per inmate dispensed
- Percentage of inmates on medications
- Percentage of inmates on psycho-tropics
- Formulary versus non-formulary drugs
- Number of prescriptions per inmate
- Medication breakdown listed by physician
- Medication classification report
- Cost containment recommendation report

Storage of Medications

All medications will be securely stored in the Jail infirmary and the Prison clinical area in a locked medication storage room.

All DEA-controlled substances are locked in an approved lockable container within the jail and prison Medical Unit's locked medication storage room, according to ACA and NCCHC standards for storing and handling controlled substance/psychotropic medications.

On the following page we have included a sample controlled substance log used in our storage and inventory procedures.



DEA Controlled Substances Movement Log

Month / Year _____ / _____ Date: _____ / _____ / _____ through _____ / _____ / _____

Use this form to document the movement of DEA Controlled Substances to or from the main storage area, to med carts, or expired/discontinued storage area. When DEA Controlled Substances are received, indicate that the movement was "in" to the pharmacy, and a witness signature is required. When a card is moved to med carts or expired/discontinued storage area, indicate that the movement was "out" of the pharmacy.

[illegible]

Form # 00069
Authority: J-D-01
Effective Date: 4/1/2009

Property of CHC
Confidential and Proprietary Document – Not to be Disseminated Without Written Permission. Copyright 2009 by CHC.

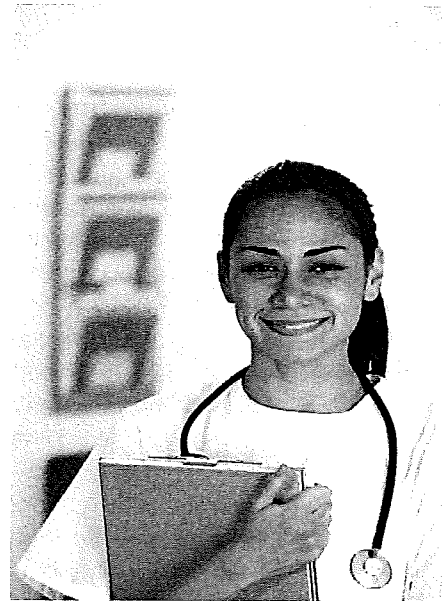
6. Nursing Services

Nurses are the keystone to every comprehensive medical services system CHC deploys at correctional facilities nationwide.

From Health Service Administrators (HSAs) and Directors of Nursing (DONs) to staff Registered Nurses (RNs) and Licensed Practice Nurses (LPNs), our cadre of nurses has the training, experience and knowledge to provide quality screening, triage, health assessments and medical treatment to inmates.

CHC nurses understand the correctional facility workplace is challenging and unique. According to the U.S. Department of Justice, the majority of the 2.3 million inmates in the America's jails and prisons are male, from lower socioeconomic groups, have lower literacy rates, higher instances of drug and alcohol abuse, and have not embraced good health habits or had regular medical or dental care prior to incarceration.

In addition, the rates of sexually transmitted and infectious disease are higher among inmates than the general population, as are concerns of suicide and mental illness.



Consequently, the standard nurse-patient relationship is remarkably different inside a jail or prison, where an understanding of an inmate's life circumstances and adjustments to incarceration are just as important as medical assessments and treatments.

Health care services provided by our staff RNs and LPNs include, but are not limited to:

- Screening
 - Intake facility admission
 - Diseases
 - Drug or Alcohol Abuse
 - Work Clearances
 - Pregnancy
- Triage
- 14-Day Health Assessments
- Administration
- Sick Call
- Medication Delivery
- Women's health services
- Infection Control
- Inmate health education
- Medical Records

- Emergencies
- Medical Treatment and Monitoring

7. Emergency Services

CHC will be responsible for arranging emergency service and emergency transport for inmates at both the Muscogee County Jail and Muscogee County Prison.

In the event of an emergency, the onsite healthcare team will immediately respond to the scene to assess and stabilize the ill or injured party or parties. The appropriate healthcare team members will be notified and will respond as necessary. The inmate(s), once stabilized, will be transported to an offsite urgent care center or emergency room. CHC healthcare staff will contact the local emergency room and verbally describe the event, as well as send a transfer summary regarding the symptoms and details of every inmate's condition.

We will have 24-hour on-call physician coverage and specific written policies and procedures to address emergency response for both medical and dental issues and the emergency transfer of inmates. We will provide telephones and/or pagers to certain specified healthcare staff (i.e. Site Managers and provider/Medical Director) to ensure their availability

To the extent any inmate requires offsite healthcare treatment (general hospitalization, specialty services, etc.), the Muscogee County Sheriff's Office will provide appropriate routine non-emergency transportation services including reasonable security, as requested by offsite provider. CHC healthcare staff will coordinate all necessary ambulance service for emergency medical care patients. The emergency transportation of any inmate to a hospital or specialty care unit will be coordinated with the jail or prison administrations. Policies and procedures regarding the transportation of inmates for medical reasons will be mutually developed by the Muscogee County Sheriff's Office and CHC within 30 days of contract start date. The policies shall be approved by the jail and prison administrators.

In the case of detention staff, contract employees, or visitors who become ill or injured in the facility, CHC will provide emergency services at no additional charge. These emergency services include first aid, assessment, attempted stabilization, and the coordination of service until the local EMS personnel arrive on the scene and take over responsibility of care. In times of emergency or threat thereof, whether accidental, natural, or man-made, CHC will provide onsite medical services at the facility to the extent staffing is available.

8. Women's Health Services

We recognize the special needs of the female inmate population and have developed a program specific to their needs for the Muscogee County Jail. This program includes Pap smear testing, mammograms, and testing for sexually transmitted diseases. Additionally, we provide healthcare for pregnant inmates. It is our policy to confirm all pregnancies or suspected pregnancies with a urine or serum HCG test. Upon pregnancy confirmation, we will provide a prenatal management program throughout their pregnancy that focuses on protection of the inmate and unborn child as well as the management of their care. This program may include:

- Access to healthcare professionals specializing in obstetrical and gynecological services
- Health education specific to female issues
- Pregnancy counseling

- Prenatal care including dietary supplements as determined by the provider
- Ultrasound and/or other diagnostic instruments, if available, maintained onsite to perform evaluations of pregnant inmates
- Management of high-risk pregnancies, including referral to appropriate community providers
- Treatment of chemical dependency for pregnant inmates will be individualized and supervised by a medical provider (with consideration of the impact of the drug withdrawal on the pregnancy and the fetus)

We will provide prenatal care and will develop an aftercare plan for the mother but will not be responsible for the cost of healthcare services associated with newborn care or for pregnancy terminations that are not medically indicated.

9. Referrals to Hospital and Specialty Care (vendor not financially responsible for bills)

Hospital Care

Should we determine that an inmate requires more intensive care than what can be rendered onsite, we will make provisions for hospitalization at the local hospital(s) as deemed acceptable by both the Muscogee County Sheriff's Office and CHC; this includes diagnostic and radiology services as needed. We will coordinate with jail or prison staffers for required security transport to and from the offsite facility. CHC will not be financially responsible for the hospital bills.

Based on Addendum 5/Attachment A and B, CHC acknowledges Columbus Regional is the current hospital provider for both the Jail and Prison.

Our Utilization Management team (further detailed in the Utilization Management Section – Item 11 below) will obtain necessary pre-approvals, monitor the hospitalization and provide a daily status report to both the CHC UM team and the Jail and Prison Administrators. A copy of the discharge summary from the hospital will be maintained in the inmate's permanent health record. CHC will be an active partner in the Muscogee County Sheriff's Office and Columbus Consolidated Government's cost containment efforts and will make recommendations when any promising instance to realize a cost savings is identified.

Specialty Care

If an inmate has a condition that requires treatment by a specialist, we will make arrangements for an offsite specialty consultation in the community; this includes diagnostic, radiology, and dialysis services as needed. Our healthcare delivery program is structured to use as few outside services as is medically appropriate without compromising inmate health and safety. All outside consultations will be ordered by the provider and scheduled by the Health Services Administrator or his/her designee. We will coordinate all offsite specialty consultations with the facility's administrative staff. We make every effort to perform specialty services onsite depending upon volume of service required, availability of specialist, and equipment required for the examination. CHC will not be responsible for the specialty care bills.

Our Utilization Management program monitors the number of offsite medical transports, which in turn reduces the costs and security risks associated with those transports. Our healthcare staff will work closely with facility administration with regard to any inmate requiring offsite medical care. The

facility will be responsible for providing transportation and security for non-emergency offsite specialty services.

Elective Care

CHC's Medical Director will determine what treatments, interventions, therapies and pharmaceuticals are elective as opposed to those required to maintain an inmate's health. CHC will not be responsible for elective care.

10. Case Management

Our Utilization Management (UM) team begins a concurrent review immediately after inpatient admission and continues throughout the hospital stay to ensure the inmate patient receives the most appropriate treatment, in the correct setting, with timely and effective discharge planning. Our UM team conducts discussions with facility and hospital personnel to ensure we can accommodate the inmate's discharge needs with regard to treatment plans, medication, durable medical equipment (DME), etc.

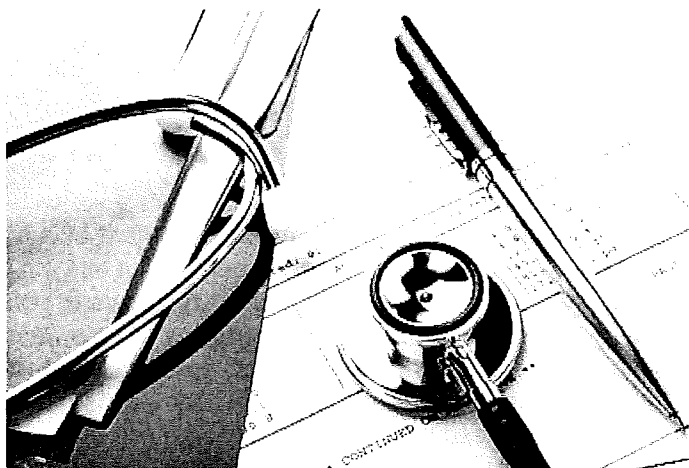
Our comprehensive concurrent review process includes participation by our UM nurse and corporate Medical Director, Health Service Administrator, and facility provider. We contact and coordinate with the hospital's utilization management department and the inmate patient's attending physician to develop an appropriate and timely discharge plan.

11. Utilization Management

CHC will be responsible for all Utilization Management (UM) for any off site hospitalization and specialty care.

CHC has an effective Utilization Management program designed for the correctional environment. We follow MCG (formerly Milliman Care Guidelines) as screening criteria to determine the medical necessity of offsite medical services and appropriate lengths of stay. Screening criteria is reviewed and updated annually by MCG. Our UM Program emphasizes the following areas of priority:

- Inmates have accessibility to medically necessary healthcare, based on established standards of care.
- Medical care is provided consistent with community standards and in a cost-effective manner.



Our UM program enhances inmate care by ensuring that care is provided in a timely manner when medical attention is needed. Providing care in a timely manner has the benefit of slowing down the progression of the disease or worsening of symptoms, which can yield an overall reduction in medical costs. Additionally, providing treatment in a consistent manner reduces variables among providers with the benefit of improving the quality of care.

Through our UM Program, we provide oversight of correctional medical management. We have a strong understanding of the many “public aid” states and State-specific statutes and regulations. In the event that any medical services provided to any inmate patient are payable by any third party source, we will relay this information to the offsite providers. Such insurance/third party payer shall include, but not be limited to, workers’ compensation, commercial medical insurance, Medicare, Medicaid, and Federal, State, or Local healthcare benefits or programs. We shall also provide such third party payer information to the designated person at the County upon request.

We are committed to the delivery of high quality inmate healthcare services in conformance with national standards, State regulations, and community standards within the proven framework of managed care to control taxpayer expenditures. Our performance and experience in diverse healthcare markets has provided the corporate expertise to critically evaluate and analyze healthcare services and trends on a national basis and demonstrate the value and positive outcome of our cost containment strategies.

Our UM Program is composed of four key interactive components:

- **Prospective Review** occurs prior to the delivery of non-emergency care and serves to ensure the most appropriate care, at the right time, in the most cost-effective setting for the following services:
 - Scheduled hospitalizations (inpatient or observation).
 - Scheduled outpatient surgical and/or non-surgical procedures.
 - Scheduled courses of outpatient treatment.
 - Scheduled specialty office visits.
 - Referral request for offsite services, as well as for some specialized onsite services.
 - Routine and complex patient management issues accomplished by reviewing the inmate’s medical history, physical findings, work-ups to date, and chief complaint(s).
 - Progress of patients with complex medical problems, as well as the relative effectiveness of site-specific operational issues that affect and impact the delivery of medical care.
 - Services that have a reasonable probability of altering management.

The UM nurse and UM staff have access to resources (i.e. Milliman Care Guidelines, Web-based resources, and specialty physician advisors) that enable our medical staff to resolve many medical issues without the need for specialty consultation.

- Our **Concurrent Review** begins immediately after inpatient admission and continues throughout the hospital stay to ensure the inmate patient receives the most appropriate treatment, in the correct setting, with timely and effective discharge planning. Our UM team conducts discussions with facility and hospital personnel to ensure we can accommodate the inmate’s discharge needs with regard to treatment plans, medication, durable medical equipment (DME), etc.
Our comprehensive concurrent review process includes participation by our UM nurse and corporate Medical Director, Health Service Administrator, and facility provider. We contact and coordinate with the hospital’s utilization management department and the inmate patient’s attending physician to develop an appropriate and timely discharge plan.
- As part of our **Readmission Review** process, all hospital readmissions occurring within 30 days of initial patient discharge are flagged for review. We research whether the readmission was preventable, unavoidable, expected, or unrelated to the quality of the inmate patient’s discharge

plan or continued care. Our Medical Director then refers such cases back to the facility provider for peer review and further recommendations for quality improvement.

- **Retrospective Review** occurs if a question or concern arises about the quality or appropriateness of an inmate patient's care. We use the data collected in our UM reports and daily operating indicators to drive the retrospective review process. The facility physicians are clinically responsible for the decision to refer an inmate to an emergency room for treatment. These referrals are reviewed retrospectively with our physicians during peer review.

Health Services Utilization Management

Management of the utilization of external medical service is conducted through utilization management. Our experienced health professionals provide the key clinical component in the management of offsite referrals, outpatient procedures, and hospital admissions. The UM nurse, in consultation with our Medical Director, monitors and evaluates the healthcare services and works with facility healthcare staff to reduce services or hospital stays that are not clinically indicated based upon medical best practices. Direct contact is made with the medical staff responsible for the patient, including the hospital providers or admitting physician, facility Medical Director, health administrator, and hospital case managers or UM staff, to determine the best course of treatment for the patient.

Evaluation of Necessity of Offsite Services

In addition to reviewing offsite services for medical necessity, the appropriateness and need for delivery in an offsite setting is also reviewed. The UM nurse is specially trained in the management of health service utilization in the unique environment of corrections. Whenever possible, specialty services are provided onsite.

Emergency Care

Emergency offsite treatment or hospitalization, by nature, cannot be pre-authorized by the UM department. Notification to the UM nurse by the facility healthcare staff is required by the next business day. This notification allows follow-up for ongoing hospitalizations. Procedures that are performed on an emergency basis are reviewed to assure the following:

- The treatment was of an emergent nature
- The service was authorized for payment
- Authorized or contracted providers were utilized when possible

UM Quality Assurance

We have procedures in place that clearly define all components of our UM process. To ensure that our nurses are adhering to these procedures, we monitor the accuracy and effectiveness, as well as the turnaround times, for authorizations and denials. Our standard is a 24-48 hour turnaround time for urgent or emergency authorizations, and a 72 hour turnaround time for elective authorizations. Urgent or emergency authorizations are done immediately when phoned in, and emergency room authorizations are done after the fact within 24 hours on weekdays and 48 hours on weekends.

12. Prior Authorization

Our Utilization Management (UM) team begins a prospective review prior to the delivery of non-emergency care and serves to ensure the most appropriate care, at the right time, in the most cost-effective setting for the following services:

- Scheduled hospitalizations (inpatient or observation).
- Scheduled outpatient surgical and/or non-surgical procedures.
- Scheduled courses of outpatient treatment.
- Scheduled specialty office visits.
- Referral request for offsite services, as well as for some specialized onsite services.
- Routine and complex patient management issues accomplished by reviewing the inmate's medical history, physical findings, work-ups to date, and chief complaint(s).
- Progress of patients with complex medical problems, as well as the relative effectiveness of site-specific operational issues that affect and impact the delivery of medical care.
- Services that have a reasonable probability of altering management.

The UM nurse and UM staff have access to resources (i.e. Milliman Care Guidelines, Web-based resources, and specialty physician advisors) that enable our medical staff to resolve many medical issues without the need for specialty consultation.

13. Billing Adjudication

CHC will serve as the administrative agent for all off-site medical care for both the Jail and Prison.

CHC will not be financially responsible for any off-site specialty or hospital care.

Based on Addendum 5/Attachments A and B, CHC agrees it will be responsible for the review all off-site treatment bills, confirm the patients were incarcerated in either the Jail or Prison at the time of treatment, that the treatment(s) was authorized by our healthcare staff, and then pay the bill according to the current Medicaid rate or the contracted rate. The bill payment will then be turned over to the Columbus Consolidated Government for reimbursement.

CHC has a fully integrated, state-of-the-art management information system capable of tracking off-site medical/hospital care, generating required reports, and ensuring the ongoing, systematic evaluation of offender healthcare utilization. Our program provides:

- Health services utilization management
- Tracking and reporting cost data
- Tracking payment of provider claims

Each component of the data entered into the claims management program interfaces with our utilization management, contracting, and claims payment processes. This system eliminates overpayments and expedites and ensures the accuracy of claims processing. We store the authorization detail and match the appropriate record to the claim and provider contract during the claims payment process. This allows for continual cross-checking and ensuring proper contracting fees.

We also have the ability to produce reports that can deliver analyses of costs associated with utilization management. We also track and monitor service utilization levels through trend reports that compare utilization statistics in all categories on a historical basis. These reports allow us to monitor seasonal fluctuations and to identify any negative trends.

14. Quality Assurance/Quality Improvement

We offer a Continuous Quality Improvement (CQI) Program for the purpose of ongoing review of the quantity and quality of healthcare services being provided at the Muscogee County Jail and Muscogee County Prison. Our program includes regularly scheduled audits of inmate healthcare services with documentation of deficiencies and plans for correction of deficiencies. The CQI Program will be governed by a committee composed of the following members as applicable:

- The facility Medical Director (provider)
- The Health Services Administrator
- A healthcare team member assigned to CQI responsibilities
- A pharmacist
- A dentist
- A psychiatrist and/or psychologist
- A medical clerk
- Muscogee County Jail/Prison representative(s)

The CQI committee will act on information, perform and review process and outcome studies, as well as internal audit data obtained through these processes. The committee will meet, in most cases, on a quarterly basis to evaluate the completed studies and audits. Minutes of all meetings will be maintained onsite with copies made available to all committee members and the facility contract monitor. Depending on facility needs, the CQI committee may review the following areas:

- Access to care, continuity of care
- Health assessments, receiving screenings, sick call
- Chronic care clinics, infirmary care, emergency care
- Inmate grievances
- Mental health services, pharmacy services, dental care
- Offsite services including hospitalizations and specialty care
- Results of mortality reviews
- Infection control findings
- Lab redraws/X-ray retakes
- Results of disaster drills
- Medical in-service training topics
- Other key sentinel events

The CQI committee will also be responsible for conducting routine health record reviews. Health records are the key means of communication between healthcare providers, and their completeness and accuracy are critical to providing quality care. As part of the CQI Program, peer reviews will be

conducted by a corporate physician to ensure providers are making sound clinical decisions and are provided with critical feedback to continually improve their practices.

15. Inmate Health Education

Inmate education services that promote healthy lifestyle choices are integral to the success of our inmate medical services program. Our goal is to help each inmate maintain a healthy lifestyle through self-care and proper lifestyle choices during his or her period of incarceration.

CHC emphasizes the importance of inmate education and it is imperative that inmates receive basic, and often critical, knowledge about common healthcare needs, issues, and diseases. Inmates will continue to receive complete education information upon orientation and admittance to the Muscogee County Jail and Muscogee County Prison, and additional information during any healthcare encounter as determined by the provider in the course of his or her examination. Most direct health education will continue to be provided by a provider, nurse, or other healthcare staff member during a service encounter, such as a sick call visit, chronic condition appointment, health assessment, or dental examination.

CHC provides inmate health education and high-risk behavior information through multiple means, including oral instructions at times of service delivery and written information through the use of brochures, pamphlets, orientation packets, and instructional posters. Materials are available in areas easily accessible to patients and are translated into other languages as needed. Detailed information will be provided on a variety of health issues that will assist inmates in self-care strategies including personal hygiene, healthy lifestyle choices, and ways to maintain optimal health.

All education encounters are documented in the inmate's health records.

Inmate Disease Prevention Education

CHC will provide an Infection Control Program that focuses on the prevention, identification, and control of communicable and infectious diseases, whether they are acquired within the Muscogee County Jail or Muscogee County Prison, or introduced from the outside community.

To facilitate the prevention, identification, and control of communicable diseases, CHC's Infection Control Program utilizes an infection control manual that focuses on education, prevention, and monitoring infection control issues.

These activities help us in identifying and meeting the health education needs of inmates and employees of the facility. CHC also provides training to healthcare and security staff on the latest standard precautions to be utilized when handling inmates with communicable diseases. Our healthcare team at the facility will monitor and collect data regarding the incidence of communicable diseases, including:

- Inmates testing positive for HIV, hepatitis or sexually transmitted diseases
- Inmates diagnosed with AIDS
- Inmates testing positive for TB

Inmates diagnosed with HIV or AIDS will have access to infectious disease specialists and receive medications as clinically indicated.

All cases of infectious/communicable diseases will be immediately reported to the Muscogee County Sheriff's Office, the Columbus Department of Public Health, appropriate state of Georgia agencies, and the jail and prison administrators. Monthly reports will also be developed and distributed.

Infection Control Meetings

A CHC Continuous Quality Improvement Committee oversees the Infection Control Program and is responsible for:

- Review and revision of infection control policies and procedures
- Monitoring of infectious disease data
- Monitoring of cleaning and sterilization techniques
- Review of environmental inspection reports
- Other matters related to infection control, as they emerge

Inmate Isolation Precautions

We will continue to ensure that guidelines are in place or are established to facilitate isolation precautions of an inmate with a specific infection or communicable disease. Guidelines on ventilation, respiratory infection programs, and other infection control measures will be reviewed and revised as needed.

Recommendations

Any written recommendations generated under CHC's Infection Control Program will be submitted to the Muscogee County Sheriff's Office, the Columbus Department of Public Health, and the jail and prison administrators.

16. Medical Records Management

Individual Medical Records

CHC will maintain a medical record for each inmate who has received healthcare services (medical, dental, and pharmaceutical) in the Muscogee County Jail or Muscogee County Prison. The medical record is kept separate from the jail/prison's confinement records of the inmate. They are maintained in accordance with NCCHC standards and any applicable state of Georgia regulations.

The medical record contains the following information, if applicable:

- Completed receiving screening form, health assessment forms
- Problem list, physician order sheets, progress notes
- All diagnostic findings, treatments, and dispositions
- Inmate requests for health services, immunization records, communicable disease records



- Diagnostic laboratory and radiology reports, including dental x-rays
- Record of prescribed medications and administrations
- Consent and refusal forms, release of information forms
- Place, date, and time of any health encounters
- Specialized treatment plans and notes concerning patient's education
- Records concerning injuries and health issues occurring prior to incarceration
- Any other miscellaneous forms or documentation of any and all healthcare, dental, and mental health services issues

All medical record notations including medical and dental care and pharmaceutical medications are recorded at the time of delivery. When an inmate is admitted to an offsite facility and/or seen in a specialist consultation, a signed release of information form is obtained. All records of outside health services are filed as part of the inmate's permanent health record. The medical record is kept current and will comply with the problem-oriented medical records format and standards. An entry will be made after each inmate health encounter. If an inmate health record cannot be located within 24 hours of discovered loss, the Muscogee County Jail or Muscogee County Prison Administrators are notified.

Medical Record Access to/by Columbus Consolidated Government and Muscogee Jail and Prison Administrators

All inmate health records are the property of Columbus Consolidated Government. CHC will act as custodian of the medical records, and such records shall be kept confidential subject to the rights of access thereto by Columbus Consolidated Government. We will ensure that access to inmate medical records is consistent with the applicable local, state of Georgia, and federal confidentiality laws. The confidential relationship of doctor and patient extends to inmate patients and their clinicians. We maintain a current record of the rules and regulations covering the confidentiality of medical records and the types of information that may and may not be shared.

The release of an inmate's medical record will occur only through policy approved by the Columbus Consolidated Government. This policy will ensure that appropriate legal measures are taken when anyone is requesting an inmate's health record. In the case of discharged inmates, the record will be maintained in accordance with the state laws of Georgia. Inactive medical records will be maintained according to state of Georgia statutes and American Medical Association protocols.

Upon an inmate's return to incarceration, any prior medical records will be incorporated into the new record to ensure continuity of care. It is understood that all medical records will remain the property of the Columbus Consolidated Government. In the event of any inmate litigation involving medical care provided, we request permission to access the relevant inmate records. Notice of all legal actions involving inmates and the medical care will be provided to the Jail and Prison Administrators and appropriate Columbus Consolidated Government staff within 24 hours.

All medical records - both paper and electronic - will remain the property of Columbus Consolidated Government at the termination of the contract, without further obligation to CHC. All inmate records maintained by CHC will be made available to Columbus Consolidated Government upon request and following confidentiality requirements.

General Confidentiality

CHC will keep all inmate medical records confidential and shall not release any information contained in any medical record except as required by published Columbus Consolidated Government jail and prison policies, by a court order or by applicable law.

Medical Records Retention

We will ensure that storage of inmate healthcare records is consistent with applicable local, state and federal confidentiality laws, including compliance with all applicable requirements of HIPAA and the HITECH Act.

CHC will retain inmate medical records in the Muscogee County Jail and Muscogee County Prison for 5 years, and then transfer the records offsite for professional archival storage.

17. Expendable Medical Supplies

Expendable Medical Supplies (includes all expendables in sufficient quantity to execute daily delivery of medical care such as antifungal creams, dressings, over the counter analgesics, cold medicines), (excludes pharmacy orders for prescription meds)

CHC will procure and supply all expendable medical supplies (includes all expendables in sufficient quantity to execute daily delivery of medical care such as antifungal creams, dressings, over the counter analgesics, cold medicines), (excludes pharmacy orders for prescription meds)

18. All office supplies, printing, postage, manuals, telephones, and computers not directly involved in the actual point of delivery inmate medical care will be the responsibility of the vendor.

CHC agrees to procure and supply all office supplies, printing, postage, manuals, telephones, and computers not directly involved in the actual point of delivery inmate medical care.

19. Formulary Development and Management

Based on information in Addendum 5/Attachment A & B, the Muscogee County Sheriff's Office and the Jail and Prison administrators are open to alternative pharmacy formularies that are more cost effective. CHC acknowledges Addendum 5 lists the current provider of pharmacy services as Diamond Pharmacy, but the vendor manages the formulary.

CHC can offer both the Muscogee County Jail and Muscogee County Prison a cost effective pharmaceutical formulary, or preferred medication list (PML), which will include an objective process and peer oversight/prior authorization for any prescriptions which deviate from the base line first tier drug formulary.

Formulary development will include consultation with the Muscogee County Sheriff's Office and appropriate Columbus Consolidated Government agencies.

Criteria utilized for inclusion of medications to the PML are based on effectiveness, safety, and cost of the medication. We have policies and procedures for use of non-PML medications and require our providers to submit requests to our corporate Medical Director to obtain authorization for non-PML medications. Prescriptions written by offsite healthcare specialists will be considered

recommendations only, with the final prescription authority residing with the CHC prescribing provider responsible for the care of the inmate.

On the following pages we have included our **CONFIDENTIAL AND PROPRIATARY** preferred medication list.

CORRECTIONAL™ HEALTHCARE COMPANIES



- A -	
Abacavir Sulfate (Ziagen) tab, soln**Pt Specific**	
Abacavir Sulfate/Lamivudine (Epizicom) tab **Pt Specific**	
Acetaminophen (Tylenol) - all forms	
Acetaminophen w/Codaine (Tylenol #3) tab	
Acetic Acid (Vocol) 2% otc soln	
Acticin/Pemseltrin (Efmite) 5% cream - 2nd line	
Acyclovir (Zovirax) tab, cap - not ointment or suspension	
Alarms/Alarms Plus (Maox, Maox Plus)	
Albuterol (Proventil) solution, unit dose	
Albuterol (Ventolin) HFA Inhaler	
Allopurinol (Zyloprim) tab	
Anantidine (Symmetrel) cap	
Amidopine (Novase) tab	
Armstrong inhalants	
Amoxicillin (Amoxil) cap	
Amoxicillin/Clavulanic (Augmentin) tab - 875mg only	
Ampicillin IV - all strengths	
Ampicillin/Subactam (Unasyn) IV - all strengths	
Analgescic rub (Bengay)	
Anusoft-HC (Anusoft-HC) rectal suppository	
Aproline (Actifed) tab	
Aspirin Chewable/Aspirin E.C. tab	
Aspirin E.C. (Ecotrin) tab	
Atazanavir Sulfate (Reyataz) tab **Pt Specific**	
Atenolol (Tenormin) tab	
Atipila tab **Pt Specific**	
Azithromycin (Zithromax) tab	
Azithromycin (Zithromax) 800mg tab - prophylactic **Pt Specific**	
- B -	
Bacitracin (Baciguent) ointment	
Bacteriostatic Sodium for Chloride Injection	
Bacteriostatic Water for Injection	
Bactrim IV	
Bayet 250 units syringe	
Beclofenethasone (QVAR 80) **Pt Specific**	
Balladonna Alkaloids/Phenobarbital (Dormatal) tab, alcid	
Benzydyl Peroxide (Benzac) gel, lotion, wash	
Benztropine Mesylate (Cogentin) tab, inj	
Bicillin LA - IM Only	
Bisacodyl (Dulcolax) 5mg tab, 10mg supp	
Bismuth (Pepto-Bismol) liquid, tab	
Brimonidine Tartrate (Alphagan) eye drop **Pt Specific**	
Bupropion (Wellbutrin) tab - not 30mg use 2 x 15mg	
- C -	
Calcium Antacid/Calcium EX (Turns, Turns EX) chewable	
Captopril (Capoten) tab	
Carbamazepine (Tegretol) tab	
Carbamide Peroxide (Dabrox) 6.5% otc soln	
Canvedol (Corgel) tab	
Cefazolin (Ancef) inj	
Ceftriaxone (Rocephin) inj	
Cephalexin (Keflex) cap	
Chlordiazepoxide (Librium) cap	
Chlorpheniramine (Chlor-Trimefen) tab	
Chlorpromazine (Thorazine) 50mg/2ml inj	
Chlorpromazine (Thorazine) tab, inj	
Chlorthalidone (Thalitone) tab	
Chlorzoxazone (Parafon Forte) tab	
Ciprofloxacin HCl (Cipro) tab	
Ciprofloxacin HCl Oph sol 0.03% - 5ml, 10ml	
Citalopram (Celexa) tab	
Citrate of Magnesia (Citra) liquid	
Clindamycin (Cleocin) cap	
Clonidine (Catapres) tab	
Clorazepate (Tranxene) tab ETOH Withdrawal Protocol	
Cylobenzaprine (Flexeril) **Pt Specific** max TID x 3 days	
- D -	
Dapsone-DDS tab **Pt Specific**	
Darunavir (Prezista) 400mg, 800mg tab **Pt Specific**	
Dalavirdine (Rescriptor) tab **Pt Specific**	
Diazepam (Valium) single dose (1ml)	
Dicloxacillin (Dynapen) cap	
Dicyclanide (Bentyl) tab, cap	
Didanosine (Videx-df) EC cap **Pt Specific**	
Digoxin (Lanoxin) tab, inj	
Dimethyldimale (Diamarine) 50mg tab	
Diphenhydramine (Benadryl) cap, elixir, inj	
Divalproex sodium (Depakote) tab	
Docusate Sodium (Colace) cap - not 50 mg	
Domeboro packets	
Dorzolamide (Trusopt) 2% eye drop **Pt Specific**	
Doxycycline (Vibramycin) tab, cap	
- E -	
Efavirenz (Sustiva-EFV) tab, cap **Pt Specific**	
Emiticabine (Emtriva) cap **Pt Specific**	
Enalapril (Vasotec) tab	
Erythromycin (E-Mycin) tab - not capsule	
- F -	
Ferrous Sulfate 325mg tab	
Fluconazole (Diflucan) tab	
Fluoxetine (Prozac) cap *not 40mg use 2 x 20mg	
Fluphenazine (Prolixin) tab, 2.5mg/ml inj	
Fluphenazine (Prolixin) Decanoate 25mg/ml inj MDV	
Folic Acid (Folate) 1mg tab	
Fosamprenavir Calcium (Loseva) tab **Pt Specific**	
Furosemide (Lasix) - tab, inj	
- G -	
Gabapentin (Neurontin) cap, tab	
Gemfibrozil (Lopid) tab	
Glipizide (Glucotrol) tab	
Glucagon Emergency Kit	
Glucose tab, gel	
Glyburide (Micronase) tab - not Micronized	
Glyburide/Metformin (Glucovance) tab	
Guafenesin (Robitussin) tablet, syrup	
- H -	
Haloperidol (Haldol) - 1mg, 2mg, 5mg tab	
Haloperidol (Haldol) 5mg/ml inj	
Haloperidol (Haldol) Decanoate 50mg/ml, 100mg/ml inj	
Hemorrhoidal cm, oint	
Hepatin Injection	
Hepatitis B vaccine (Engerix, Recombivax)	
Homatropine (Isopto Homatropine) ophth drop **Pt Specific**	
Hydralazine (Apresoline) tab	
Hydrochlorothiazide (Hydrodiuril) tab	
Hydrocortisone (Plyone) cm, oint - not lotion	
Hydroxyzine Pamoate (Vistar) cap - not susp or 100mg	
Hydroxyzine Pamoate (Vistar) 25mg/ml, 50mg/ml inj	
HyperT et inj	
- I -	
Ibuprofen (Motrin) tab	
Indinavir (Crivian) cap **Pt Specific**	
Indomethacin (Indocin) cap - not SR	
Insulin/Human (Humulin N, R, U, 70/30, Humalog, Humalog mix 75/25, 50/50)	
Intalene tab **Pt Specific**	
Ipratropium (Atrovent) inhalation soln	
Isoniazid (INH) 300mg tab - not 100mg	
Isoosorbide Dinitrate (Isordil) tab	
Isoosorbide Mononitrate (Imdur) tab	

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CHC Preferred Medication List

CHC CORRECTIONAL™ HEALTHCARE COMPANIES PREFERRED MEDICATION LIST



Lactulose (Enulose) syrup	Nelfinavir Mesylate (Viracept) tab, cap, powd **Pt Specific**	Sentraline (Zolid) tab
Lamivudine (EpiVir-3TC) tab, oral soln **Pt Specific**	NeoGramPoly (Necsporing) opth soln	Silver Sulfadiazine (SSD) 1% crm
Lamivudine/Zidovudine (Combivir) tab **Pt Specific**	Nevirapine (Viramune-NVP) tab **Pt Specific**	Simvastatin (Zocor) tab - not 80mg
Lamivudine/Zidovudine/Abacavir (Trizivir) tab **Pt Specific**	Nicotinic Acid/Vitamin B3 (Niacin) RSR tab, cap	Sodium Chloride 0.9% inj
Latanoprost (Xalatan) 0.005% eye drop **Pt Specific**	Nicotinic Acid (Niacin) tab, SR tab, cap	Solacaine gel
Levamisole (Eppor) tab **Pt Specific**	Nifedipine (Procardia) 10mg cap, 20mg cap **Pt Specific** Pregnancy	Sorbidol 70% soln
Levalthyroxine (Levo-T, Levotroid) tab	Nitroglycerin (Nitrostat) sublingual	Spironolactone (Aldactone) tab
Lico Shampoo (Rid) - 1st line	NSS Irrigation Solution	Stavudine (Zerit-4T) cap, soln **Pt Specific**
Lidocaine (Xylocaine) inj 1%, 2%, w/ Epi, w/o Epi	Nystatin (Mycostatin) sup	Sterile Water for Irrigation
Lidocaine (Xylocaine) 2% Viscous Soln *1 bottle per facility as stock	Omeprazole (Prilosec) 20mg cap only	Suboxone tab, filmab
Lisinopril (Prinivil) (Zestril) tab	Oxybutynin (Ditropan) tab	Sulfacetamide (Bleph-10) 10% opth soln
Loperamide (Imodium) cap - not tab or A-D	Paroxetine (Paxil) tab	Sulfamethoxazole/Trimethoprim (Bactrim) tab
Lopinavir/Ritonavir (Kaletra) tab **Pt Specific**	Penicillin (Pen VK) tab	Sulfasalazine (Azulfidine) tab - not EC
Lorazepam (Ativan) tab, cap - not SR	Permethrin (Nix) 1% lotion - 2nd line	
Lorazepam (Ativan) inj - SDV only (1 ml)	Perphenazine (Trilafon) tab	
Losartan (Cozaar) tab	Phenobarbital tab, 65mg/ml inj, elixir	
Loxapine Succinate (Lodane) cap	Phenytoin (Dilantin) tab, cap, 250mg/ml inj	
L-Tyrosine 500mg cap	Phisohex 3% cleanser	
	Phosphate (Fleet) Enema	
	Pilocarpine (Pilocar) eye gts **Pt Specific**	
	Polymyxin B/Trimethoprim (Polytrim) opth gts	
	Polymyxin B/Trimethoprim (Polytrim) opth gts	
	Polysiloxane (Silicone) eye gts **Pt Specific**	
	Povidone Iodine (Betadine) soln	
	Pravastatin (Pravachol) cap	
	Prednisone (Deltasone) tab, dose pack	
	Probenecid/Colchicine (Colbenemid) tab	
	Promethazine (Phenergan) tab, inj	
	Proparacaine (Muro 123) tab, inj - not LA	
	Psyllium (Metamucil) packet, powd	
	Raltegravir (Isentress) tab **Pt Specific**	
	Ranitidine (Zantac) tab	
	Regaloid (Metamucil) packet, powd	
	Rilampin (Riladin) cap	
	Risperidone (Risperdal) tab - for psychosis	
	Ritonavir (Norvir) tab, cap, oral soln **Pt Specific**	
	Saline Nasal Spray	
	Salsalate Mesylate (Salsalate) tab, cap **Pt Specific**	

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CHC Preferred Medication List

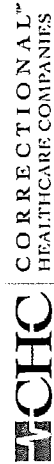
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PREFERRED MEDICATION LIST

<u>Allergy/Cold</u> Aproline (Acified) tab Chlorpheniramine (Chlor-Trineton) tab Diphenhydramine (Benadryl) cap, elixir, inj Guafenesin (Robitussin) tablet, syrup Loratadine (Claritin) tab Saline Nasal Spray	<u>Anti Convulsants</u> Divalproex sodium (Depakote) tab Gabapentin (Neurontin) cap, tab <u>Levetiracetam (Keppra) tab **Pt Specific**</u> Phenytoin (Dilantin) tab, cap, inj Phenobarbital tab, inj, elixir	<u>Anti Convulsants Injections</u> Diazepam (Valium) single dose (1ml) Lorazepam (Ativan) inj - SDV only (1ml) Phenobarbital Injection 65mg/ml Phenytoin (Dilantin) 250mg/ml injection	<u>Anti Diabetic</u> Glipizide (Glucotrol) tab Glyburide (Micronase) tab -not Micronized Glyburide/Metformin (Glucovance) tab Insulin/Human (Humulin N, R, U, 70/30, Humalog, Humalog mix 75/25, Humalog mix 50/50) inj Metformin HCL (Glucophage) tab	<u>Anti Gout</u> Allopurinol (Zyloprim) tab Probenecid/Colchicine (Colbenemid) tab	<u>Anti Hypertension</u> Aterolol (Tenormin) tab Amlodipine (Norvasc) tab Captopril (Capoten) tab Chlorthalidone (Thalitone) tab Clonidine (Catapres) tab Furosemide (Lasix) - tab, inj Enalapril (Vasotec) tab Hydralazine (Apre-soline) tab Lisinopril (Prinivil) (Zestril) tab Losartan (Cozaar) tab Methyldopa (Aldomet) tab Metoprolol (Lopressor) tab Prazosin (Minipress) cap Propranolol (Inderal) tab, inj - not LA	<u>Anti Lipemics</u> Gemfibrozil (Lopid) tab Nicotinic Acid-Vitamin B3 (Niacin) IR/SR tab, cap Simvastatin (Zocor) tab - not 80mg	<u>Anti Viral</u> Acyclovir (Zovirax) tab, cap - not ointment or suspension	<u>Anti Hypertension - continued -</u> Terazosin (Hytrin) cap Spironolactone (Aldactone) tab <u>Anti Infection/Antibiotics IV</u> Ampicillin IV - all strengths Ampicillin/Subsacram (Unasyn) IV - all strengths Bactrim IV Cefazolin (Ancef) inj Ceftriaxone (Rocephin) inj <u>Anti Infection/Antibiotics</u> Amoxicillin (Amoxil) cap Amoxicillin/Clavulanic (Augmentin) tab - 875mg only Azithromycin (Zithromax) tab Bicillin LA - IM Only Cephalexin (Keflex) cap Ciprofloxacin HCL (Cipro) tab Clindamycin (Cleocin) cap Dicloxacillin (Dynapen) cap Doxycycline (Vibramycin) tab, cap Erythromycin (E-Mycin) tab - not capsule Fluconazole (Diflucan) tab Isoniazid (INH) 300mg tab - not 100mg Metronidazole (Flagyl) tab -not 375mg capsule Miconazole (Monistat 7) vag supp - not 1 or 3 Nystatin (Mycostatin) sup Penicillin (Pen VK) tab Rifampin (Rifadin) cap Sulfamethoxazole/Trimethoprim (Bactrim) tab Tetracycline (Achromycin) cap Trimethoprim (Trimex) tab <u>Anti Lipemics</u> Gemfibrozil (Lopid) tab Nicotinic Acid-Vitamin B3 (Niacin) IR/SR tab, cap Simvastatin (Zocor) tab - not 80mg	<u>Cardiovascular</u> Carvedilol (Coreg) tab Digoxin (Lanoxin) tab, inj Isosorbide Dinitrate (Isordil) tab Isosorbide Mononitrate (Imdur) tab Nitroglycerin (Nitrostat) sublingual Potassium Chloride - not 25mEq effervescent packet Propranolol HCl (Inderal) tab, inj - not LA <u>Dermatology/Topicals</u> Aciclovir/Permethrin (Eliminix) 5% cream - 2nd line Analgesic rub (Bengay) Bacitracin (Baciguent) ointment Benzoyl Peroxide (Benzac) gel, lotion, wash Domeboro packets Hemorrhoidat cm, oint Hydrocortisone (Hytona) cm, oint - not lotion Lice Shampoo (Rid) -1st line Miconazole (Monistat 7) cm Miconazole Nitrate (Monistat Derm) 2% cm Permethrin (Nix) 1% lotion - 2nd line Phisohex 3% cleanser Silver Sulfadiazine (SSD) 1% cm Scleraine gel Tar Shampoo Tolnaftate (Tinactin) cm, powd, soln Triamcinolone (Aristocort) cm, oint, lotion <u>Endocrine/Thyroid</u> Levothyroxine (Levo-T, Levothroid) tab <u>Gastrointestinal/GI</u> Alamag/Alamag Plus (Maalox, Maalox Plus) Anusol-HC (Anusol-HC) rectal suppository Belladonna Alkaloids/Phenobarbital (Donnatal) tab, elixir Bisacodyl (Dulcolax) 5mg tab, 10mg supp Bismuth (Pepto-Bismol) liquid, tab Calcium Antacid/Calcium EX (Tums, Tums EX) chewable Citrate of Magnesia (Citra) liquid Dicyclomine (Bentyl) tab, cap

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PREFERRED MEDICATION LIST (continued)

Gastrointestinal - continued- Dimenhydrinate (Dramamine) 50mg tab Docosate Sodium (Colace) cap - not 50 mg Lactulose (Enulose) syrup Loperamide (Imodium) cap - not tab or A-D Meclizine (Antivert) tab Metoclopramide (Reglan) tab - not inj or liquid Milk of Magnesia Liquid Omeprazole (Prilosec) 20mg cap only Phosphatase (Fleet) Enema Promethazine (Phenergan) tab, inj Psyllium (Metamucil) packet, powd Reguloaid (Metamucil) packet, powd Rifaximin (Xifaxan) tab Sorbitol 70% soln Sulfasalazine (Azulfidine) tab - not EC	HIV/Related Agents - continued - * All Medications must be Pt Specific Raltegravir (Isentress) tab Ritonavir (Norvir) tab, cap, oral soln Saquinavir Mesylate hgc (Invirase) tab, cap Stavudine (Zerit-d4T) cap, soln Tenofovir Disoproxil Fumarate (Viread) tab Tipranavir (Aptivus) cap Truvada tab Zidovudine (Retrovir-AZT) cap, syrup Immunization/Prevention Hepatitis B vaccine (Engenx, Recombivax) HyperTat inj Tetanus Diphtheria inj Tetanus Toxoid Absorbed inj Tuberculin PPD, Mantoux (Aplisol, Tubersol) inj	Ophthalmic/Antibiotics Ciprofloxacin HCL Oph sol 0.03% - 5ml, 10ml Neo/Gram/Poly (Neosporin) ophth soln Polymyxin B/Timothoprim (Polytrim) ophth drop Sulfacetamide (Bleph-10) 10% ophth soln Ophthalmic/Anti Glaucoma Brimonidine Tartrate (Alphagan) eye drop **Pt Specific** Dorzolamide (Trusopt) 2% eye drop **Pt Specific** Latanoprost (Xalatan) 0.005% eye drop **Pt Specific** Pilocarpine (Pilocar) eye drop **Pt Specific** Timolol Maleate (Timoptic) ophth drop **Pt Specific** Ophthalmic Misc. Agents Homatropine (Isopto Homatropine) ophth drop **Pt Specific** Naphazoline (Clear Eyes, Naphcon) 0.12% ophth drop	Psychotropics - continued Fluphenazine Decanoate (Prolixin) inj Haloperidol (Haldol) - 1mg, 2mg, 5mg tab Haloperidol Decanoate (Haldol Decanoate) inj Hydroxyzine Pamoate (Vistaril) cap - not susp or 100mg Lithium Carbonate (Eskalith) tab, cap - not SR Loxapine Succinate (Loflamine) cap Mirtazapine (Remeron) tab Paroxetine (Paxil) tab Perphenazine (Trilafon) tab Risperidone (Risperdal) tab - for psychosis Sertraline (Zoloft) tab Venlafaxine (Effexor) tab - not 37.5 use 75mg half tab Venlafaxine ER (Effexor XR) tab, cap - 150mg only Topiramate (Topamax) tab Trazodone (Desyre) tab Trifluoperazine (Stelazine) tab
HIV/Related Agents - continued- Abacavir Sulfate/Lamivudine (Epzicom) tab Abacavir Sulfate (Ziagen) tab, soln Atazanavir Sulfate (Reyataz) cap Atriple tab Azithromycin (Zithromax) 600mg tab Dapsone-DDS tab Darunavir (Prezista) 400mg, 600mg tab Delavirdine (Rescriptor) tab Didanosine (Videx-ddI) EC cap Efavirenz (Sustiva-EFV) tab, cap Emtricitabine (Emtriva) cap Fosamprenavir Calcium (Lexiva) tab Indinavir (Crixivan) cap Inlelence tab Lamivudine (Epivir-3TC) tab, oral soln Lamivudine/Zidovudine/Abacavir (Trizivir) tab Lamivudine/Zidovudine (Combivir) tab Lopinavir/Ritonavir (Kaletra) tab Nelfinavir Mesylate (Viracept) tab, cap, powd Nevirapine (Viramune-NVP) tab	Misc Ammonia Inhalants Bacteriostatic Sodium for Chloride Injection Baylet 250 units syringe Clorazepate (Tranxene) tab ETOH Withdrawal Protocol Glucagon Emergency Kit Glucose tab, gel Heparin injection Lidocaine (Xylocaine) inj - 1%, 2%, w/ Epi, w/o Epi Lidocaine (Xylocaine) 2% Viscous Soln *1 bottle per facility as stock NSS Irrigation Solution Povidone Iodine (Betadine) soln Sodium Chloride 0.9% inj Suboxone tab, film tab Sterile Water for Injection Sterile Water for Irrigation	Otic (Ear) Acetic Acid (Voseal) 2% otic soln Carbamide Peroxide (Debrox) 6.5% otic soln Polymyxin/Neomycin/HCl (Cortisporin) otic susp, soln Pregnancy-related Protocol Medications* * All Medications must be Pt Specific Methylglutamine Maleate (Methergine) tab, inj Nifedipine (Procardia) 10mg cap, 20mg cap Terbutaline (Brethine) tab, inj Psychotropics Buspione (Buspar) tab *not 30mg use 2 x 15mg Carbamazepine (Tegretol) tab Chlordiazepoxide (Librium) cap Chlorpromazine (Thorazine) tab, inj Citalopram (Celexa) tab Divalproex sodium (Depakote) tab Fluoxetine (Prozac) cap *not 40mg use 2 x 20mg Fluphenazine (Prolixin) tab, inj	Psychotropic Injections Chlorpromazine (Thorazine) 50mg/2ml inj Fluphenazine (Prolixin) 2.5mg/ml inj Fluphenazine (Prolixin) Decanoate 25mg/ml MDV Haloperidol (Haldol) 5mg/ml inj Haloperidol (Haldol) Decanoate 50mg/ml, 100mg/ml inj Hydroxyzine Pamoate (Vistaril) 25mg/ml, 50mg/ml inj Vitamins Ferrous Sulfate 325mg tab Folic Acid (Folate) 1mg tab L-Tyrosine 500mg cap Multivitamin (Theragen, One A Day) tab Multivitamin/Calcium/Iron (Prenatal) tab Multivitamin/Iron (One A Day w/Iron) tab Nicotinic Acid (Niacin) tab, SR tab, cap Vitamin B-1 (Thiamine) tab, inj Vitamin B-3 (Niacin, Nicotinic Acid) Vitamin B-6 (Pyridoxine) tab

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CHC CORRECTIONAL[™]
 HEALTHCARE COMPANIES

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20. In-clinic labs (includes contract with lab services provider)

Laboratory services will be provided by a national laboratory company. Laboratory services will include routine, special chemistry, and toxicology analysis. All laboratory testing performed onsite will be in compliance with the Clinical Laboratory Improvements Amendments. Services will include timely pickup and delivery, accurate reporting, and all necessary supplies.

Laboratory specimens will be drawn by the healthcare staff and sent to the reference laboratory. Arrangements will be made with the local hospital or laboratory service for stat testing. The laboratory will call the facility to provide notification of all critical results. All laboratory results will be reviewed and initialed by the Medical Director with a follow-up plan of care if indicated.

Based on Addendum 5/Attachments A and B, CHC acknowledges it can retain the current vendor or establish relationships with a new laboratory contractor.

21. In-clinic x-ray services (includes contract with mobile x-ray)

Standard X-rays will be completed on site whenever possible and results will be promptly reviewed. In some cases, EKG services can be conducted on site within the scope of licensure. It may be necessary to send some radiology patients to an urgent care center or hospital as determined by the healthcare staff. All radiology results will be reviewed and initialed by the site Medical Director with a follow-up plan of care as indicated.

We will make appropriate offsite arrangements for any specialty care or diagnostic service, which will be coordinated with detention staff for required security transport to and from the offsite facility.

Upon contract award, CHC will contract with a mobile x-ray provider.

Based on Addendum 5/Attachments A and B, CHC acknowledges it can retain the current vendor or establish relationships with a new x-ray contractor.

22. Dental Care

Inmates will have their dental needs assessed on intake. Each inmate requiring dental care will be seen under the direction of an onsite dentist. CHC healthcare staff will be trained to provide inmates with instruction in oral hygiene, examination, and how to address dental problems. We will address emergent needs, and all care will be recorded in the inmate's medical record.

Current infection control procedures will be followed. Routine dental problems will be managed in a timely fashion in keeping with current community standards of practice. Extractions will be prioritized based upon emergent need and when medically necessary will be performed in a manner consistent with community standards of care and in adherence with the American Dental Association's clinical guidelines. Appropriate inventory and control of all dental supplies, instruments, and chemicals used in provision of dental services will be maintained.

Emergent Treatment

When onsite, the dental staff will be available for emergencies, including fractured jaws, excessive bleeding, and acute abscess or other acute conditions. After hours or in the absence of a dentist and/or dental staff, CDC medical staff will evaluate the emergency in accordance with dental emergency protocols and policies.

Routine Treatment

In the event routine dental treatment is needed, an inmate may submit a written request for dental care. Upon receipt of the request, the inmate's name will be added to the waiting list. Those inmates without sufficient teeth for proper mastication of food or those deemed to be urgent need of care will have a higher priority in the scheduling of appointments.

Dental Examinations

A periodic dental exam will be performed by a Georgia-licensed dentist. Results will be recorded and filed in the inmate's medical record. Examinations will include evaluation of any urgent needs, charting of teeth, examination of the hard and soft tissue of the oral cavity, x-ray studies for diagnostic purposes if necessary, extra oral, head and neck examination, arrangements for consultation with referral to specialists in dentistry or oral surgery, as needed, review of documentation of dental history for the inmate, and scheduling dental examination and follow-up appointments for the dentist using the Dental Sick Call Log and prioritization for need.

Preventive Dentistry

CHC's dental program emphasizes preventive dentistry. Our staff will provide oral hygiene instructions and prevention training as part of the orientation to healthcare services performed upon an inmate's arrival at the jail or prison. As part of the inmate's Dental Treatment Plan, personal preventive training and instructions will be provided and reinforced. The dental clinic will display preventive dentistry and oral hygiene posters for the inmates to view.

Oral Surgery

If a CHC dentist determines that an offender needs oral surgery or other specialty services that cannot be provided onsite, CHC will make arrangements with an offsite oral surgeon or dental specialist in the community to provide such services.

23. Hazardous Waste Management and Disposal

Waste Management and Disposal

We will assume responsibility for training our team members to implement the proper methods of handling and storage of hazardous and/or contaminated medical waste. All solid or semi-solid waste will be double bagged in red biohazard bags, and laundry will be placed in the properly designated bags. Used needles, syringes, and other sharps will be placed in biohazard sharps containers and properly disposed. Cleanup kits for bodily fluid spills will be available at all inmate housing units. We will be responsible for the cost of removal and disposal of medical waste.

Contract with Waste Management and Disposal Company

CHC will contract with a waste management and disposal company upon award of the contract.

24. Vendor is responsible for providing its employees with all equipment required for conducting routine medical assessments and procedures to include but not limited to any devices use to assess vital signs, dopplers, stethoscopes, glucometers and test strips, dressings, suture kits, etc.

CHC will provide its employees at the Muscogee County Jail and Muscogee County Prison with all equipment required for conducting routine medical assessments and procedures, including but not limited to devices to assess vital signs, stethoscopes, dopplers, glucometers and test strips, dressings and suture kits, etc.

25. Drugs and Alcohol Withdrawal and Detoxification

Inmates arrested under the influence of alcohol or drugs will be separated from the general population and kept under close observation. The healthcare team, including the provider when onsite, will use established protocols to monitor intoxicated inmates during the detoxification period. If the inmate indicates a history or exhibits signs of an intense detoxification period, a provider may need to evaluate the inmate. Under extreme conditions, the inmate will be transported to a hospital for evaluation and treatment.

Generally inmates displaying acute detoxification symptoms will be admitted to the medical observation area managed by the nursing team, if applicable, and the facility provider will immediately be notified. The inmate will be watched for the following conditions, any of which may indicate that additional medical attention may be warranted:

- Tremors and/or agitation
- Nausea and/or vomiting
- Sweating, rapid pulse, fever
- Seizures, confusion
- Auditory and/or visual hallucinations

The Muscogee County Jail and Muscogee County Prison providers will be contacted regarding inmates whose condition begins to deteriorate during detoxification, and the provider may refer the inmate to a hospital if necessary. At the next sick call clinic, the provider will see any inmate who is admitted to the infirmary or exhibiting concerning withdrawal signs/symptoms.

Withdrawal Management Policies and Procedures

CHC has developed Policies and Procedures as well as Clinical Protocols on how to identify and treat inmates potentially in need of withdrawal management. In most cases, symptoms of intoxication or signs of withdrawal will be identified during the receiving screening and/or intake assessment. Inmates identified in need of a detoxification protocol will be identified through the use of a colored wristband.

Below is an overview of our policy, which can be customized to meet the needs of the jail and prison.

Adults arriving at the jail and prison for intake/booking who exhibit symptoms of drug or alcohol intoxication will be separated from the general population and kept under close observation. If the initial screening shows severe symptoms of intoxication and addiction, the detainee will be transferred to an area hospital or clinic for treatment. If medically cleared for booking, the detainee

will be transferred to the Medical Unit and monitored by the CHC clinical staff until sobriety is reached. The detainee will then undergo a comprehensive medical assessment, including:

- Complete physical exam to evaluate the detainee's overall health, presence of infectious or sexually transmitted diseases, eating disorders, medical and psychotic prescription history, and deterioration of physical appearance and personal grooming habits
- Family history of addiction and the degree of family support in the treatment process

The detainee will be monitored for the following withdrawal conditions, and if severe or persistent, transferred to an offsite treatment center:

- Tremors, slurred speech and impaired coordination
- Nausea, diarrhea or vomiting
- Sweating, rapid pulse, fever
- Seizures and delirium tremens (DTs)
- Auditory and/or visual hallucinations
- Racing heart or palpitations
- Difficulty breathing
- Depression or anxiety
- Paranoid or fearful for no reason

In addition, CHC will work with the current mental health vendor New Horizons to dual-diagnose any behavioral health disorders associated with the inmate's addiction.

26. Vendor is Responsible for filing Medicaid

Third party payment eligibility and verification is a function handled by CHC's Utilization Management (UM) department. When an offsite referral request is received, CHC's UM nurses will attempt to verify Medicaid or other third-party payer eligibility for the inmate. In the event that any medical services provided to an inmate are payable by a third party, we will relay this information to the offsite providers for appropriate billing. This includes, but is not limited to, workers' compensation, commercial medical insurance, Medicaid, Medicare, and federal, state, or local healthcare benefits or programs.

This process begins when an inmate is booked into the facility. The inmate is asked if they have health insurance as part of the booking process, and if so we attempt to get the policy information and/or a copy of the inmate's insurance card. If an inmate is brought to the Jail or Prison from the hospital ER, we will request the ER record and search for information that would indicate the inmate has current insurance coverage. We will also attempt to verify coverage by other methods, including contacting the spouse if the inmate is married and reviewing the past medical history for issues which may indicate a high likelihood that the inmate has Medicaid or Medicare coverage.

Healthcare Reform Legislation

CHC actively follows healthcare reform legislation and continues to monitor court developments as they occur. CHC understands that, under the terms of the Patient Protection and Affordable Care Act

(PPACA), individuals in the criminal justice system are likely to have increased eligibility for coverage while incarcerated. However, pre-trial detainees are not considered incarcerated, and any existing Medicaid, Medicare, or commercial medical insurance coverage will remain in effect until the detainee is convicted. Additionally, inmates may be eligible for Medicaid and/or subsidized coverage upon parole or release. CHC's onsite discharge planner will assist the inmate with enrollment in Medicaid in advance of his or her scheduled release date.

Beginning in 2014 many inmates will qualify for Medicaid through a significant expansion of the program. Where Medicaid will pay for services for individuals in the criminal justice system, CHC will arrange their contract to allow for billing of Medicaid where allowed. Where inmates receive Medicaid coverage, a significant percentage of hospital admissions may be eligible to receive Federal Financial Participation (FFP) funds, which are matching federal funds that will be given to the County for eligible Medicaid expenditures. When this legislation takes effect, CHC will fully cooperate with the County to assist in realizing any potential savings or matching funds for which the County may be eligible.

A-1. Additional Scope of Services CHC will Provide

In addition to the "the minimum expectation of services" the vendor will be required to provide that are listed in Appendix A, CHC will also provide the following additional services.

Proven 30-Day Jail and Prison Start-Up Plans

CHC has developed an effective transition plan which is customized to each site and accounts for all aspects of beginning a comprehensive medical services program. We have been 100 percent successful in program implementation once a contract has been awarded – regardless of the facility's location. CHC has developed a well-versed transition team who is experienced in getting a project implemented quickly and methodically.

Our personnel have a proven track record of excelling in quick-turnaround start-ups or transitions to our healthcare program with even less than 30 days notice of award to start of the contract.

PROGRAM IMPLEMENTATION SCHEDULE Muscogee County Jail and Muscogee County Prison

Note: This schedule is based on a 30-day start up. The timelines provided are estimates based on our experience with program implementation at other facilities. Upon award of contract, we will work closely with the Muscogee County Sheriff's Department to adjust timelines as mutually agreed upon.

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
1. Contract Award			
Negotiate final contract terms	Legal/ Operations	30 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Review manpower needs	Operations	30 days before start up	
Identify lead time before startup; develop timetable for CHC to be on site, be visible, interviewing, making contacts, etc.	Operations/HR	30 days before start up	
2. Corporate Transition Team			
Designate transition team; depending on size of facility; transition team may include HSA, HR, Accounting, Mental Health, IT	Operations	30 days before start up	
Assign transition team leader	Operations	30 days before start up	
Review contract to be sure CHC has included all contract requirements in the planning process	Legal/ Operations	30 days before start up	
Identify specific list of administrative and medical forms that need to be developed and in place at new facility on day one	Operations	14 days before start up	
Complete and send P&P Request for Changes form to Risk Management	Operations/ Legal	14 days before start up	
Review background of current medical team to determine continuation with CHC	Operations	21-14 days before start up	
Review offers for staff with corporate personnel	HR	21-14 days before start up	
Obtain state/regional license requirements	HR/Pharmacy/ Legal	14-7 days before start up	
Review insurance requirements, procure insurance certificate	Legal	14-7 days before start up	
Procure certificate of insurance to meet OCCD's insurance requirements	Legal	14-7 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Order medical reference books	Operations/UM	14-7 days before start up	
3. Meet with Facility Authorities			
Identify permanent office for HSA	Operations	14-7 days before start up	
Obtain facility policies and procedures	Operations	14-7 days before start up	
Conduct onsite visit and tour facility	Operations/Business Development	14-7 days before start up	
Establish facility priorities	Operations	14-7 days before start up	
Establish training requirements	Operations/UM	14-7 days before start up	
Determine facility requirements for security clearances	Operations/Business Development	14-7 days before start up	
Obtain facility telephone numbers	Operations/Business Development	14-7 days before start up	
Distribute CHC telephone numbers	Operations	14-7 days before start up	
Exchange organization charts	Operations	14-7 days before start up	
Meet with all shifts of security to answer any questions	Operations	14-7 days before start up	
Determine meal times, lockdown hours, shift changes to facilitate designing shift schedules	Operations	14-7 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Provide information to inmates regarding access to healthcare	Operations/ Onsite Staff/ Jail Staff	14-7 days before start up	
Identify facility's public relations policy	Operations/ Legal	14-7 days before start up	
Transition team reviews medical supplies and equipment on hand, reviews ongoing medical issues concerning inmate patients	Operations	14-7 days before start up	
4. Contact Local Health Providers			
Identify available services (ER, labs, oxygen, etc.)	Provider Contracting	30-14 days before start up	
5. Assign Interview Team and Recruitment Function			
Obtain list of current employees with address and telephone numbers	Contract Manager or Regional Director	30 days before start up	
Send welcome letters	HR/Recruiting	14-7 days before start up	
Check for local applications for positions	HR/Recruiting	30 days before start up	
Place ads for employment in local newspapers to identify outside candidates (if necessary) after notifying local staff	HR/Recruiting	30 days before start up	
Provide presentation to current employees regarding CHC, current HR policies, and benefits overview	Operations/HR	30-21 days before start up	
Interview current employees; confirm location for interviews	Regional Director or Contract Manager	30-21 days before start up	
Have all current employees complete CHC employment application	Regional Director or Contract Manager	14 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Interview outside applicants	Regional Director or Contract Manager	14 days before start up	
Send offer/no offer letters to current employees	HR	14 days before start up	
Identify HSA candidates if necessary	Regional Director or Contract Manager	14 days before start up	
Identify physician/Medical Director candidates if necessary	HR/Regional Director	14 days before start up	
Identify key department head candidates if necessary (DON, dentist, psychiatrist)	Operations/HR	14 days before start up	
Establish hire dates with startup date and security training/clearance requirements	Operations/HR	14-7 days before start up	
Develop staffing schedules	Regional Director/HSA	14-7 days before start up	
Arrange orientation for HSA	Regional Director	14-7 days before start up	
Arrange orientation for Medical Director	Regional Director/ Medical Director	14-7 days before start up	
6. Supplies and Equipment			
Conduct inventory of existing supplies, medications, and equipment	Operations	21-14 days before start up	
Determine facility supply/equipment receiving procedures	Operations	21-14 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Establish purchasing process for prescription drugs, medical supplies, etc.	Pharmacy/UM	21-14 days before start up	
Order necessary equipment, review maintenance agreements on existing equipment	Regional Director/HSA	21-14 days before start up	
Order business cards, envelopes, office supplies, stamps, FedEx supplies	Business Development Transition Team/ Regional Director	14-7 days before start up	
Obtain property tags and tag all CHC equipment (if applicable)	Regional Director/HSA	First day of start up	
Review all emergency supplies and equipment in medical center and in the Pods to ensure adequate supplies and nothing is out of date	Regional Director	14 days before start up	
7. Computers and Telephones			
IT consultant reviews computer and telephone systems to determine what, if any, new computer, fax, copier, telephone equipment needs to be ordered	IT/Regional Director	30-21 days before start up	
Arrange for delivery of computer and telephone/fax equipment	IT	7 days before start up	
Arrange for communications access for telephones, beepers, fax, etc.; arrange for cell phone for HSA	IT	21-14 days before start up	
Ensure that e-mail addresses are set up, CHC name appears on faxes, and new team members trained on all software applications and ready to go on day one	IT	First day of start up	
Change voicemail messages to new CHC contacts on first day	IT	First day of start up	
ID existing equipment needs and ownership for electronic medical records (EMR) system (if applicable)	IT	14-7 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Document existing technical services for EMR (if applicable)	IT	14-7 days before start up	
ID current jail management system/interface for EMR (if applicable)	IT	14-7 days before start up	
Document existing technical services for EMR (if applicable)	IT	14-7 days before start up	
8. Offsite Providers			
Identify all potential hospitals with whom CHC may contract (for specialty care)	Provider Contracting	14-7 days before start up	
Identify ambulance service; negotiate for best price	Provider Contracting	14-7 days before start up	
Identify preferred provider specialists in the community and arrange contact, including labs, X-ray, offsite medical specialists	Provider Contracting	14-7 days before start up	
Identify emergency sources for prescription drugs with local pharmacy	Pharmacy/ Provider Contracting	14-7 days before start up	
9. Human Resources Services			
Prepare new hire package for all current employees to become CHC employees, including offer letter, salary, reporting status, etc.	HR	14-7 days before start up	
Obtain application, licenses, certifications for all HR files	HR	14-7 days before start up	
Inform insurance carrier of new facility so carrier can set the facility up in their system	HR/Regional Director	14-7 days before start up	
Coordinate W4 information and give to Payroll to set up in P/R system	HR/Regional Director	14-7 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Confirm all required compliance posters are on display in new facility (EEO, FLSA, etc.)	HR/Regional Director	14-7 days before start up	
Provide instruction on new time keeping procedures	Payroll/Regional Director	First day of contract	
Arrange for new security IDs for healthcare team members	Regional Director/ Jail Administration	7 days before start up	
Develop and post new organization chart (if applicable)	Regional Director/ HR	7-1 day before start up	
Post list of emergency numbers	HSA/Regional Director	First day of contract	
Develop and secure HR files for all team members	Benefits Coordinator	7-1 day before contract	
10. Finance and Accounting			
Prepare operating budget and reviews with HSA	Finance Operations	First week of contract	
Review process for expense reporting and payments	Finance Operations	First week of contract	
Prepare payroll schedule	Finance Operations	First week of contract	
11. Pharmacy (If Applicable)			
Set up pharmacy account for new facility	Pharmacy	14- 7 days before start up	
Apply for state pharmacy license and DEA number if necessary	Pharmacy/Legal	30 days before start up	
Post license	HSA/Regional Director	First day of contract	
Establish policies and procedures for pharmacy practices	Pharmacy	14-7 days before start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Establish prescription storage system	Pharmacy/HSA	7 days before start up	
Establish emergency after-hours pharmacy utilization protocol	Pharmacy	7-1 day before start up	
Develop procedures and logs for narcotic utilization and inventory	Pharmacy/HSA	7-1 day before start up	
Obtain PDR and drug reference book	Operations	14-7 days before start up	
12. Utilization Management/Operations			
Follow all inpatient admissions for medical necessity and timely return to facility; Milliman Care. Guidelines® utilized in determining medical appropriateness and discharge planning	UM/HSA	First day of start up	
Review all referrals for offsite clinic appointments (i.e. specialty clinics, diagnostic, radiology, and surgical procedures) with corporate Medical Director	UM/HSA	First day of start up	
Track all offsite activity daily so immediate follow-up on inpatient admissions can be initiated	UM/HSA	First day of start up	
Review all non-preferred medication requests with corporate Medical Director for approval or recommendations and submit to pharmacy and site	UM/HSA	First day of start up	
Assist sites with submission of appropriate forms and authorization of treatment for other entities such as USM, DOC, and ICE, ensuring appropriate entity assumes responsibility for claim payment	UM/HSA	First day of start up	

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Work with Contract/Claims Manager on offsite claims to negotiate discounted rate if no public aid, indigent schedule available; work with Manager of Government Programs to assist in identifying inmate patients qualifying for Medicaid or other services	UM/HSA	First day of start up	
Work with corporate pharmacy tech to establish par levels and obtain start up medications; pharmacy tech assists sites with all pharmacy issues, tracks medication usage	Pharmacy/HSA	First day of start up	
Provide UM Handbook and training to medical and administrative staff	UM	First day of start up	
13. Data Collection			
Put logs in place for collection of statistics	Regional Director/ HSA	First day of start up	
Develop procedure for monthly statistics	Regional Director/ HSA	First day of start up	
Identify reports needed	Regional Director/ HSA	First day of start up	
Identify facility's legal and risk management contacts	Regional Director/ HSA	First day of start up	
14. Meetings and Committees			
Establish schedule for team meetings	Regional Director/ HSA	1-14 days after start up	
Establish CQI committee and meetings	Regional Director/ HSA	1-14 days after start up	
Determine frequency of meetings with Sheriff and facility administration	Regional Director/ HSA	1-14 days after start up	
15. Chronic Care Clinics			

Event or Activity	Department	Completion Due Date	Date and Signature When Completed
Establish referral system	HSA	1-7 days after start up	
Establish chronic care clinics	HSA	1-7 days after start up	
16. Surveys and Audits			
Set date for start-up survey	Regional Director	60-90 days after start up	
Set date for operations audit	Regional Director	60-90 days after start up	
17. Schedule follow-up support for facility after transition team leaves			
18. Compare conditions at new facility from when CHC arrived to 30 days after start of new contract			

Consultation on Proposed New Muscogee County Jail Mental Health Wing

From the March 7 site visit, we understand a new Mental Health Wing is proposed for the Muscogee County Jail, and the Sheriff's Office would like input on its design and function.

CHC has extensive experience operating onsite mental and behavioral health programs within correctional facilities nationwide, and currently provides services to several offsite community mental health centers throughout the country. CHC can provide consultation services on effective design and mental health programming at the new mental health wing.

Community Health Services

CHC's responsibility for an inmate does not end when he or she is released from prison. We believe that it is also our duty to provide each inmate with the tools necessary to lead a law-abiding, self-supporting life in the community. This is our responsibility to the offenders, to their families, to our partner/clients, and to the community as a whole. We will work with the both the jail and prison's discharge staffs, the mental health provider New Horizons, and local businesses to help ex-offenders adjust to life back in their communities.

Partnerships with Local Non-Profit and Community-Based Organizations

CHC takes pride in being an active member in the communities in which we operate. To this end, we are dedicated to partnering with local non-profit and community-based organizations to provide program services or consulting when possible. In many instances, CHC participates in community

advisory boards to ensure that the correctional, judicial, and greater communities are able to contribute their input of how our programs can best have a positive impact.

Orientation and Training

We believe that comprehensive orientation and training of all team members is integral to the success of our healthcare program. Team members will be oriented to the facilities as well as to our company and be required to complete our New Team Member Orientation Program indicating that they have received both oral and written information concerning their job responsibilities, security issues, and healthcare policies and procedures. New team members will also be required to shadow and receive training by existing medical staff prior to working independently on any shift. In addition, all team members may be required to attend security training as deemed necessary and made available by the facility several times a year.

We will ensure that every nurse will meet the annual continuing education requirements as set forth in both the NCCHC and ACA standards and we will support each team member in obtaining the necessary training to maintain licensure.

We can establish a medical library onsite at the facility for use by the healthcare staff. CHC will work with the County to assess and agree upon the necessary hard copy reference materials. The library will include, at a minimum, basic reference texts related to diagnosis and treatment in a primary setting. We also provide concentrated training programs which enable the Muscogee County Sheriff's Office and staff at both the Muscogee County Jail and Muscogee County Prison to further expand their knowledge of correctional medical care. We will offer the following medical training services:

- **Basic Health Screenings:** This training offers information to develop effective interview, observation, and rapid screening skills; review the importance and goals of health screenings at intake; health observations, and inquiries common to screening practices based on National standards.
- **Mental Health:** We provide information on how mental illness is defined; an overview of mood disorders, anxiety disorders, psychotic disorders, dissociative disorders, personality disorders, and behavioral issues; the use of anti-depressants; autism and ADHD as a mental illness; substance abusers and mental illness; signs of substance abuse; addiction and withdrawal; drugs and crisis situations during intake.
- **Blood borne Pathogen:** This training provides a discussion of the elements of the Blood borne Pathogen Standard; risks associated with exposure to blood borne pathogens; how to recognize various workplace hazards; and methods to avoid exposure; as well as actions to take in the event of an accidental exposure.
- **Alcohol Withdrawal:** This training defines withdrawal and the signs and symptoms of withdrawal, including the predictors of severe withdrawal. It provides an overview of the general management and treatment of individuals going through withdrawal and establishes goals of the detoxification process. Participants will be able to identify key information to communicate to the healthcare staff.
- **Illicit Drugs and Their Effects:** This training provides a thorough review of the Controlled Substance Act, information on common drugs and their street name(s), how they are used, the effects, and important information that should be reported to the healthcare staff.
- **Medication Administration:** We provide instructions regarding the administration of prescription medications according to written Physicians' orders; offers processes to safely administer necessary medication; maintaining proper documentation of medications administered.

- **Emergency Situations:** We provide a review of various types of emergency situations correctional officers may encounter, how each situation should be assessed, pertinent questions to ask the inmate, if able, and when to contact 911 rather than referring the issue to the healthcare staff.
- **Suicide Prevention:** This important training provides a profile overview of common suicide attempts in a correctional setting; review of suicide methods; suicide risk factors; high risk times and places; the role of communication in preventing suicides; interventions; establishing housing; suicide watch criteria; evaluation of cells, isolation, and individuals.

Legal Services

We take a proactive approach to litigation and risk management to reduce our client's exposure to liability. Our facility-level quality assurance programs are complimented by our corporate legal department led by General Counsel Shelton Frey. In addition to ensuring corporate compliance and responsibility and overseeing the client contracting process, the department's dedicated risk manager ensures clients receive facility-specific healthcare policies and procedures that are based on national accrediting standards.

With the goal of providing best-in-class services, our risk management team also performs random healthcare unit audits to ensure compliance with our policies and monitoring of follow-up action plans. Our risk management team meets regularly to review system-wide data, policies, services, and patient outcomes to identify trends that may benefit from corrective action. We believe this proactive approach reduces the incidence of patient complaints and lawsuits while improving the clinical care provided to the inmate population.

Since it is impossible to eliminate all risk from any healthcare setting, our in-house legal team of attorneys and paralegals aggressively address each claim or lawsuit, working with our insurers, outside legal counsel, involved staff, and our clients to provide a cohesive defense.

Risk Management

CHC has a full-time Risk Manager who oversees employee safety and ensures compliance with CHC policies for inmate health care services. We have developed a correctional Safety Manual for use in all of our facilities. Due to the confidential and proprietary nature of this manual, we would be happy to share its contents at an oral presentation or some other confidential face-to-face meeting.

Licensure, Certification, and Credentialing

In a correctional setting, the process by which employees and physicians are credentialed is key to creating a safe and consistent healthcare delivery system. We have a credentialing procedure to verify licensure and practice history for all licensed candidates prior to their hire. Routine licensure, verification, and update of CPR certifications are performed annually. Our team approach to credentialing ensures a thorough review of each applicant.

Credentialing includes all documentation required by state law and will meet all The Muscogee County Sheriff's Office and Columbus Consolidated Government requirements. Minimum credentialing includes the following:

- A verified copy of a license to practice in the State of Georgia
- A verified copy of the Federal controlled substance registration, if applicable

- A fully completed malpractice insurance application, including a history of all previous malpractice claims or lawsuits active, pending, or closed during the past ten years
- Current CPR certification or ACLS certification
- A report from the National Practitioner Data Base ensuring there are no adverse actions against the applicant's license, or no unreported malpractice reports
- A signed Professional Services Agreement detailing the applicant's responsibilities regarding client site security, compliance with HIPAA, and access to patient records.
- A completed background check initiated by CHC, in addition to any criminal background checks the County may require
- Evidence of successfully completing a drug screening test as required by CHC
- Two peer references
- Current admitting privileges for at least one local hospital, if applicable

Staff will not be hired or subcontracted if any of the following conditions exist:

- Loss of license or voluntary surrender of license
- Limitation on license
- Inability to obtain professional liability insurance

Proof of current licensure, certifications, and registrations will be maintained onsite. Each physician, dentist, and mid-level provider will be re-credentialed every two years.

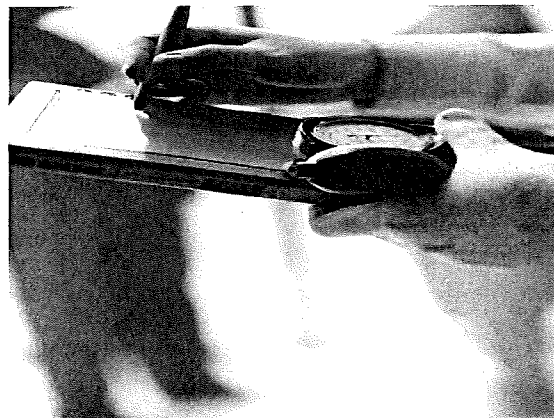
A-2. Additional Negotiated Scope of Services CHC Can Offer

Electronic Medical Records (EMR)

Based on Addendum 5/Attachments A and B, the Muscogee County Sheriff's Office is currently seeking an EMR, and are willing to discuss this with the selected vendor.

CHC is a technological leader in the industry and has developed a proprietary, customizable electronic medical records (EMR) system called Vizion® that we can offer to the Sheriff's Office and the Columbus Consolidated Government.

Vizion is a browser-based application developed specifically to enhance CHC's ability to deliver health services. It is a real-time health record creation and updating system with scanning capabilities to complement the digital storage of electronic records. Vizion contains modules designed to collect health information for intake, treatment, the Medication Administration Record (MAR), diet, utilization management, and standard and custom reporting. All modules are Internet Explorer-based applications with access to real-time information wherever internet access is available.



As CHC's proprietary system, Vizion differentiates itself by allowing complete customization for reporting, digital input forms for intake and treatment, custom problem-oriented records, seamless outbound email communication, and the exportation of data to office applications such as Microsoft Excel.

For full details of Vizion and specific examples of how it works, please see Attachment 2

B. Equipment Provided by Vendor and Muscogee County Jail and Muscogee County Prison

B. Provide a list of all known equipment that will be provided by the vendor, or must be provided by the Muscogee County Jail or Muscogee County Prison under this contract.

Equipment Provided by CHC

Jail and Prison Medical Supplies

CHC will procure and supply all medical supplies required to implement and run the inmate health services programs. Examples of medical supplies may include: hand instruments, syringes, bandages, gloves, and needles.

Jail and Prison Office Supplies

CHC will procure and supply all office supplies required to implement and run the inmate health services programs. Examples of office supplies may include: office paper, forms, and medical record folders.

Medical and Office Equipment

Based on Addendum 5/Attachment A and B, ownership of medical and office equipment purchased by CHC at both the Jail and Prison is open to negotiation following contract award.

Equipment provided by the Muscogee County Jail or Muscogee County Prison

Equipment Provided by the Jail

Based on Addendum 5/Attachment A, CHC understands the Jail "has all the furniture, equipment, and supplies needed to run a Jail clinic of this size". CHC further understands "much of the furniture and equipment will need to be refurnished or replaced in the near future." We acknowledge that once a vendor is selected, the Sheriff's Office will be open to negotiations related to adding to or replacing equipment.

We further acknowledge that Addendum 5/Attachment A says new computers for medical care at the Jail will be in place when the contractor arrives.

We assume that the Sheriff's Office will supply housekeeping service, dietary service, personal hygiene service and supplies, and linen supplies at the Jail. It is further assumed the Sheriff's Office will supply the office space including office furniture and telephone services, as well as Internet access.

Equipment Provided by the Prison

Based on Addendum 5/Attachment B, CHC understands all office and medical equipment listed on Pages 11-12 are "approximately 20+ years old, with the exception of the digital scale, copier, printers, two computers, one wheelchair and Omron portable blood pressure machines." We further acknowledge that the x-ray equipment in the Prison is inoperable.

We acknowledge that once a vendor is selected, the Sheriff's Office will be open to negotiations related to adding to or replacing equipment.

We assume that the Sheriff's Office will supply housekeeping service, dietary service, personal hygiene service and supplies, and linen supplies at the Prison. It is further assumed the Sheriff's Office will supply the office space including office furniture and telephone services, as well as Internet access.

C. CHC Current Contracts

C. Describe any similar contracts vendor is currently involved in and their duration. Include the entity name and contact person, project, location, service provided, date of completion, telephone and fax numbers.

Please see Attachment 3 for our current client list.

II. Personnel/Staffing

Please refer to Section 7: Cost Proposal for our staffing matrix for both the Muscogee County Jail and the Muscogee County Prison.

III. Vendor Requirements

A: Vendor will be responsible for arranging emergency service and emergency transport. Vendor will not be financially responsible for emergency room costs or the cost of transport.

CHC acknowledges it will arrange for emergency services and transport, but will not be financially responsible for emergency costs or the cost of transport.

B. Vendor will be responsible for arranging hospital and specialty care. Vendor will not be responsible for the costs of either hospital or specialty care.

CHC will be responsible for arranging hospital and specialty care, but will not be responsible for the costs of either hospital or specialty care.

C. Vendor will not be responsible for elective care. Elective care is any treatment or medical intervention not required to prevent deterioration in the patient's health or required to avoid obvious harm to the inmate/patient. The vendors Medical Director will determine what treatments, interventions, therapies and pharmaceuticals are elective as opposed to those required to maintain the patient's health.

CHC agrees it will not be responsible for elective care. Our Medical Director will determine what treatments, interventions, therapies or pharmaceuticals are elective as opposed to required to maintain a patient's health.

D. Vendor will be required to provide emergency services to anyone on the property of the MCJ/MCP to include visitors, other contractors and staff. The vendor is not responsible for any costs associated with transport of follow or follow on care provided to these patients.

CHC agrees it will provide emergency services to anyone on the property of either MCJ or MCP to include visitors, other contractors and staff. CHC acknowledges it will not be responsible for transport or follow on care provided these patients.

E. Vendor is responsible for providing the MCJ/MCP with a pharmaceutical formulary, which includes an objective process and peer oversight/prior authorization for any prescriptions, which deviate from the base line first tier drug formulary. The vendor is NOT responsible for the cost associated with any prescription, which is derived from the formulary and/or follows the process agreed upon for ordering non-formulary drugs. In those cases in which the vendor's provider does not follow the formulary or the process of prior authorization for ordering non-formulary drugs the vendor WILL be responsible for the cost associated with that prescription.

CHC agrees it will be responsible for providing a pharmaceutical formulary to both MCJ and MCP. CHC acknowledges it will not be responsible for the cost associated with any prescription which is derived from the formulary and/or follows the process agreed upon for ordering non-formulary drugs. CHC further acknowledges it will be responsible for the cost of ordering non-formulary drugs if it does not follow the formulary or the process of prior authorization.

Please see our description and proposed formulary provided in Scope of Services, No. 19.

F. Vendor will be responsible for all Utilization Management and Claims Adjudication for any off site hospitalization or specialty care. The vendor will be identified as the administrative agent for all off-site medical care for the MCJ/MCP. The vendor will not be financially responsible for any off-site specialty or hospital care.

CHC agrees it will be responsible for all Utilization Management and Claims Adjudication for any off site hospitalization or specialty care. CHC acknowledges it will be identified as the administrative agent for all off-site medical care for the MCJ/MCP. CHC further acknowledges it will not be financially responsible for any off-site specialty or hospital care.

G. Vendor will bill the MCSO 30 days after the end of the contract quarter for reimbursement equal to all money the vendor has paid off-site medical services on behalf of the MCSO. The MCSO will submit payment to the vendor equal to the amount the vendor has billed within 30 days of receipt.

CHC agrees to bill MCSO 30 days after the end of the contract quarter for reimbursement equal to all money CHC has paid off-site medical services on behalf of the MCSO. CHC acknowledges MCSO will submit payment to the vendor equal to the amount the vendor has billed within 30 days of receipt.

H. MCSO will provide all the office space, clinic space, durable medical equipment and security which will be required by the vendor to allow the vendor to provide medical services to inmate/patients within the time frame and of the quality required by the published NCCHC and ACA standards.

CHC acknowledges MCSO will provide all office space, clinic space, durable medical equipment and security which will be required to provide MCJ/MCP inmates/patients within the time frame and quality of care mandated by NCCHC and ACA standards.

I. Vendor will not be responsible for mental health treatment.

CHC acknowledges it will not be responsible for mental health treatment. We will collaborate with New Horizons for the successful provision of these services when needed.

J. Vendor will provide monthly summary reports on clinical services to the MCSO. These reports will include as a minimum the following:

1. Number of patients on Psychotropic Drugs
2. Pregnancy Management
3. Treatment of patients with alcohol and drug abuse issues
4. Any use of restraints
5. Any use of forced medications
6. Sick Call
7. Chronic Care
8. Physicals
9. Intake Screening
10. TB prevention
11. Infection Control Tracking
12. HIV Treatment

-
13. Staffing report with actual FTEs, hours worked and level of professional certifications
 14. Any sentinel events
 15. Legal Cases
 16. Dental Sick Call
 17. Vision Screening
 18. Referrals to outside specialists.
 19. Any refusals of care by patients
 20. Any refusals of medication
 21. Narcotics counts
 22. Emergency Room visits (requires additional documentation and justification)
 23. Specialist visits (requires additional documentation and justification)

CHC will provide monthly summary reports on clinical services to the Muscogee County Sheriff's Office (MCSO), including but not limited to – inmates on psychotropic drugs, pregnancy management, treatment of inmates with alcohol and drug abuse issues, any use of restraints, any use of forced medications, sick call, chronic care, physicals, intake screening, TB prevention, infection control tracking, HIV treatment, staffing report with actual FTEs, hours worked and level of professional certifications, any sentinel events, legal cases, dental sick call, vision screening, referrals to outside specialists, any refusals of care by patients, any refusals of medications, narcotics counts, emergency room visits and specialist visits.

Section 5: Client Work History

A. Provide at least three (3) references for whom similar services have been performed. Include entity name, contact name, address, e-mail address, telephone and fax numbers.

Entity Name	Bernalillo County Metropolitan Detention Center
Contact Name	Ramon Rustin, Chief of Corrections
Address	100 Deputy Dean Miera Drive SW Albuquerque, NM 87151
E-Mail Address	rcrustin@bernco.gov
Telephone	(505) 839-8701
Fax Number	(505) 462-9806

Entity Name	Lubbock County Detention Center and Juvenile Justice Center
Contact Name	Kelly Rowe, Sheriff
Address	3501 N. Holly Ave. Lubbock, TX 79403
E-Mail Address	krowe@co.lubbock.tx.us
Telephone	(806) 775-1400
Fax Number	(806) 775-1491

Entity Name	The GEO Group		
Contact Name	James Black, Western Regional Director		
Address	<u>Facility 1</u> Central Arizona Correctional Facility 1401 E. Diversion Dam Road Florence, AZ 85132	<u>Facility 2</u> Arizona State Prison – Florence West 715 E. Diversion Dam Road Florence, AZ 85232	<u>Facility 3</u> Arizona State Prison – Phoenix West 3402 W. Cocopah Street Phoenix, AZ 85009
E-Mail Address	jblack@geogroup.com		
Telephone	(310) 348-3000		
Fax Number	(561) 443-1906		

B. Provide a history of providing the comprehensive medical services described in Appendix A to incarcerated clients, as well as, other clients with similar needs.

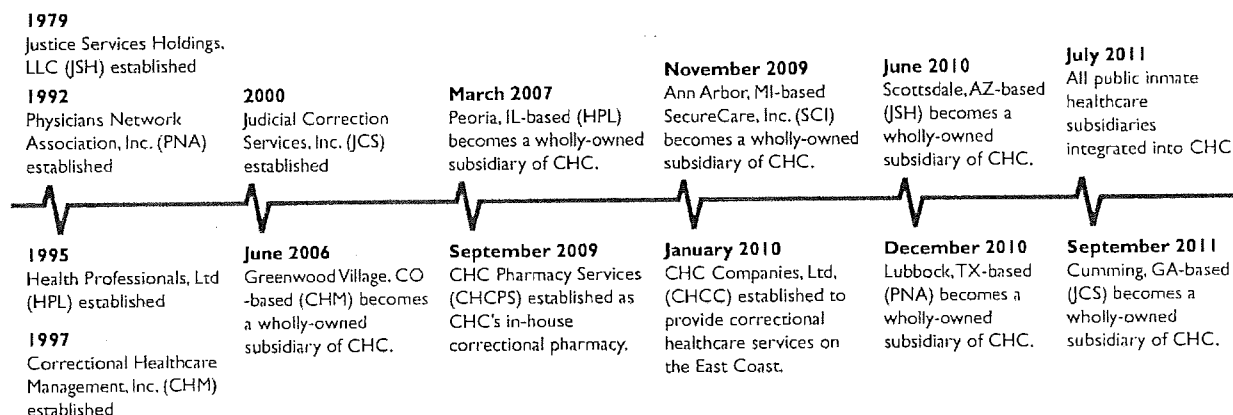
Correctional Healthcare Companies is a national leader in inmate healthcare management, providing comprehensive medical and behavioral healthcare solutions, state-of-the-art service, and uncompromised value to our clients for more than 21 years.

CHC was originally formed to create a leading inmate healthcare company for U.S. based jails and prisons, offering high quality, risk mitigating, and cost-effective services to all of our clients. Today, CHC serves more than 240 correctional facilities throughout the United States, from small facilities with an average daily population (ADP) of 10 to large correctional institutions with an ADP of 3,500. CHC also serves a number of Federal Bureau of Prison sites, as well as multiple State Departments of Corrections, including Illinois, Texas, Arizona, and Florida in both state and privately run facilities. We support the provision of medical services to more than 70,000 inmates daily in 26 states, and employ a professional staff of 2,750 employees and contractors.

CHC was incorporated in Delaware on January 28, 2010. We are currently licensed to provide inmate healthcare in every state in the country. CHC and our subsidiaries have been providing turn-key solutions to correctional facilities since 1992, and community services to court systems since 1979.

Below is a timeline of CHC's growth

CHC Timeline



Since 2006, the Correctional Healthcare Companies, Inc., (CHC) brand has consolidated the institutional knowledge of four correctional healthcare companies, three community health service companies and a private probation company to offer best in class correctional and community health services. In June 2006, CHC acquired Correctional Healthcare Management, Inc., (CHM) based in Greenwood Village, Colorado. In March 2007, Peoria, Illinois based Health Professionals, Ltd., (HPL) was acquired. In November 2009, CHC acquired SecureCare, Inc., (SCI) based in Ann Arbor, Michigan. In June 2010, CHC acquired Justice Services Holdings, Ltd., (JSH) based in Phoenix, Arizona. In November 2010, San Bernardino, California based Hase & Associates Services, Inc. (HAS) was added to the CHC family. In December 2010, Texas based Physicians Network Association, Inc. (PNA) became a member of the CHC family of companies. In February 2011, CHC acquired Advanced Counseling Services, Inc., (ACC) based in Scottsdale, Arizona. Most recently, in September of 2011, Atlanta, Georgia based Judicial Correction Services, Inc. (JCS) was added to the

CHC family. In December 2011, many of the above companies were merged into CHC to streamline our corporate footprint and provide a single CHC brand recognition.

CHC's integration of HPL, CHM, SCI and PNA has positively affected its ability to provide inmate healthcare services. CHC's corporate structure has created synergies for each of its companies that enhance the programs and services offered. With the combined purchasing power of the CHC family of companies, CHC is able to purchase medical supplies, pharmaceuticals and other healthcare goods and services at reduced and extremely competitive rates. In turn, we are able to pass on significant savings to our clients. This represents a significant company differentiator for us and a huge benefit for our clients. In addition, CHC has streamlined supportive functions among its companies such as its finance, utilization management, and legal departments. This enables CHC to limit the cost impact of corporate support while increasing the supportive resources. As the CHC family of companies continues to grow, these savings and benefits will continue to be passed to our clients.

With the acquisition of JSH, ACC, HAS, and JCS, CHC has expanded its service capabilities to include community corrections and court services components such as court alternative sentencing sanctions, electronic monitoring services, reentry programs, and counseling treatment services including domestic violence, shoplifting, substance abuse, and cognitive skills programs. These community health services, located in 8 states serving over 120,000 participants annually, provide CHC with the unique opportunity to provide integrated community linkage to their traditional correctional healthcare services and effectively reduce the costs of incarceration while reducing recidivism.

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Section 6. Business Requirements (Appendix C, D and F)

A. Provide copy of insurance (Appendix C)

B. Complete GSICA Form (Appendix D)

C. Tax ID Form (Appendix F)

D. Provide copy of Business License

Vendors shall submit, with their bid or proposal, a copy of the Business License (Occupation License) that is required to conduct business at your location.

If awarded the contract, the successful vendor must obtain a business license from the City of Columbus. However, if the business is located in Georgia and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the contractor will not be required to pay occupation taxes in Columbus, Georgia.

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APPENDIX C**INSURANCE CHECKLIST****RFP NO. 13-0024**

**COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL & MUSCOGEE COUNTY PRISON
(ANNUAL CONTRACT)**

**CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE
AND ENDORSEMENTS INDICATED BY "X"**

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	Statutory Limits
	Comprehensive General Liability		
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$1M / \$5M Annual Aggregate
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$1M / \$5M Annual Aggregate
	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$1M / \$5M Annual Aggregate
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$1M / \$5M Annual Aggregate
	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	for "Insured Contracts" only as defined in the policy \$1M / \$5M Annual Aggregate
	Automobile Liability		
X	7. *Owned/Hired/Non-Owned Vehicles/ Employer non ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	\$1M combined single limit
	Others		
X	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	N/A
	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	\$5M Excess for GL/PL \$10M Excess Auto
	10. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate	Included under GL - \$1M any one person / \$5M Annual Aggregate
	11. Professional Liability	\$1 Million per occurrence/claim	see Line 15 (MPL)

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
	12. Architects and Engineers	\$1 Million per occurrence/claim	N/A
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	N/A
X	14. Medical Malpractice	\$1 Million per occurrence/claim	See line 15 (MPL)
X	15. Medical Professional Liability	\$1 Million per occurrence/claim	\$1M each Medical Incident / \$5M Annual Aggregate
	16. Dishonesty Bond		Crime - handled by different broker
	17. Builder's Risk	Provide Coverage in the full amount of contract	N/A
	18. XCU (Explosive, Collapse, Underground) Coverage		not excluded
	19. USL&H (Long Shore Harbor Worker's Compensation Act)		N/A
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	N/A
	21. Environmental Impairment Liability	\$2 Million per occurrence/claim	N/A
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		Yes
X	23. Notice of Cancellation, non-renewal or material change in coverage shall be provided to City at least 30 days prior to action.		Yes
X	24. The City shall be named Additional Insured on all policies		Yes - blanket Addtl Insured
X	25. Certificate of Insurance shall show Bid Number and Bid Title		Yes
	26. Pollution: N/A	\$2 Million per occurrence/claim	N/A

*If offeror's employees will be using their privately owned vehicles while working on this contract and are privately insured, please state that fact in the **Bidders Limits/Response** column of the insurance checklist.

INSURANCE AGENT'S STATEMENT:

I have reviewed the above requirements with the bidder named below and have advised the bidder of required coverages provided or not provided through this agency. The bidder can comply with the insurance requirements stated above.

AGENCY NAME: Alliant Insurance Services, Inc.

AGENTS NAME: James M. Fasone

SIGNATURE of AGENT: _____

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements.

BIDDER NAME: Correctional Healthcare Companies, Inc.

AUTHORIZED SIGNATURE: _____

Section 7: Cost Proposal (Appendix B)

- A. Complete cost proposal form, with annual fees, which will be paid in 12 equal monthly installments.
- B. Delineate any other associated costs relative to providing this service not included in the annual fee.

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APPENDIX A (OPTION I)

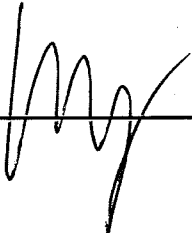
**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL
(ANNUAL CONTRACT)
RFP NO. 13-0024**

Option One: RFP Staffing

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT *
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$ 2,634,580.56
Medical Services	Third Year	\$ 2,713,617.98
Medical Services	Fourth Year	\$ 2,795,026.52
Medical Services	Fifth Year	\$ 2,878,877.32

*Amount shown for the first and second year of \$2,634,580.56 is an annual amount. This amount would be needed for each year for a total of \$5,269,161.12 for the first two years in total.

Company Name: Correctional Healthcare Companies, Inc.

Authorized Signature:  _____

APPENDIX A (OPTION I)

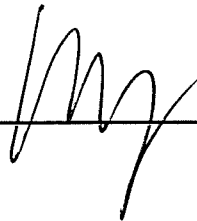
**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY JAIL
(ANNUAL CONTRACT)
RFP NO. 13-0024**

Option Two: CHC's Recommended Staffing

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT *
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$ 2,247,739.44
Medical Services	Third Year	\$ 2,315,171.62
Medical Services	Fourth Year	\$ 2,384,626.77
Medical Services	Fifth Year	\$ 2,456,165.57

*Amount shown for the first and second year of \$2,247,739.44 is an annual amount. This amount would be needed for each year for a total of \$4,495,478.88 for the first two years in total.

Company Name: Correctional Healthcare Companies, Inc.

Authorized Signature:  _____

Staffing and Services Overview

Correctional Healthcare Companies, Inc. (CHC) is pleased to provide the following cost proposal for the consideration of Muscogee County (the "County"). We are proposing the following solution to best meet the County's specific needs. CHC is open to discussing our proposal in order to provide the optimal healthcare program for the County.

Staffing and Services Overview Muscogee County, GA		
ADP Overview	Option 1	Option 2
Average Daily Population (ADP)	1,895	1,895
Per Diem Reconciliation	\$0.40	\$0.40
Professional Staffing (Hours per Week)	Option 1	Option 2
Medical Director - Physician (Jail)	32.00	24.00
Healthcare Services Administrator - RN (Jail)	40.00	40.00
Mid-Level Practitioner (Jail)	40.00	40.00
Dentist (Jail)	30.00	30.00
Dental Assistant (Jail)	NOT PROPOSED	30.00
Director of Nursing (Jail)	40.00	40.00
Registered Nurse (Jail)	168.00	168.00
Registered Nurse - History & Physicals (Jail)	40.00	40.00
Licensed Practical Nurse - Intake (Jail)	168.00	168.00
Licensed Practical Nurse - Medication (Jail)	336.00	224.00
Licensed Practical Nurse - Sick Call (Jail)	112.00	112.00
Medical Technician/Phlebotomist (Jail)	168.00	NOT PROPOSED
Medical Records Clerk (Jail)	136.00	96.00
Administrative Assistant (Jail)	40.00	40.00
Medical Director - Physician (Prison)	8.00	16.00
Dentist (Prison)	4.00	4.00
Registered Nurse (Prison)	40.00	40.00
Licensed Practical Nurse (Prison)	224.00	112.00
Total Equivalent Full-Time Employees	40.65	30.60
Professional Onsite Services	Option 1	Option 2
Medical Services	✓	✓
Dental Services	✓	✓
Mental Health Coordination Services	✓	✓
Pharmaceutical Administration and Management	✓	✓
On-Call 24/7	✓	✓
Policies and Procedures	✓	✓
Laboratory Services	✓	✓
X-Ray Services	✓	✓
Medical Supplies	✓	✓
Medical Waste Removal	✓	✓
Office Supplies	✓	✓
Basic Medical Training - Jail Staff	✓	✓
Mental Health Training - Jail Staff	✓	✓
Comprehensive Medical Malpractice Insurance	✓	✓
Corporate Management and Oversight	✓	✓
Professional Offsite Services	Option 1	Option 2
Utilization Management	✓	✓
Monthly Cost	\$273,475.71	\$232,524.74
Annual Cost	\$3,281,708.52	\$2,790,296.88

Flexible Staffing Matrix

CHC will provide the County with a comprehensive healthcare staffing program consisting of qualified medical and mental health professionals. The following staffing matrices provide detailed staffing plans for the options previously outlined. Please note that the exact days shown in the charts below are for illustrative purposes only and are flexible to meet the County's needs. We will work with the County to create an exact schedule which best maximizes the County's utilization of CHC's resources.

Staffing Matrix Option 1 - RFP Required Staffing Muscogee County Jail											
Position	On Call	Shift	Scheduled Hours							Total Hours	FTE
			MON	TUE	WED	THU	FRI	SAT	SUN		
Medical Director - Physician	✓	Day	8.00	8.00	8.00	8.00				32.00	0.80
Healthcare Services Administrator	✓	Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Mid-Level Practitioner		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Dentist		Day	10.00	10.00			10.00			30.00	0.75
Director of Nursing		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Registered Nurse		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse - History & Physicals		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Licensed Practical Nurse - Intake		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Intake		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Intake		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Medication		Day	24.00	24.00	24.00	24.00	24.00	24.00	24.00	168.00	4.20
Licensed Practical Nurse - Medication		Evening	24.00	24.00	24.00	24.00	24.00	24.00	24.00	168.00	4.20
Licensed Practical Nurse - Sick Call		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Sick Call		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Technician / Phlebotomist		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Technician / Phlebotomist		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Technician / Phlebotomist		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Records Clerk		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Records Clerk		Evening	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Medical Records Clerk		Night	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Administrative Assistant		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Totals			218.00	218.00	208.00	208.00	210.00	144.00	144.00	1350.00	33.75

Staffing Matrix Option 1 - RFP Required Staffing Muscogee County Prison											
Position	On Call	Shift	Scheduled Hours							Total Hours	FTE
			MON	TUE	WED	THU	FRI	SAT	SUN		
Medical Director - Physician	✓	Day					8.00			8.00	0.20
Dentist		Day				4.00				4.00	0.10
Registered Nurse		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Licensed Practical Nurse		Day	16.00	16.00	16.00	16.00	16.00	16.00	16.00	112.00	2.80
Licensed Practical Nurse		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Totals			40.00	40.00	40.00	44.00	48.00	32.00	32.00	276.00	6.90

Staffing Matrix Option 2 - CHC's Recommended Staffing Muscogee County Jail											
Position	On Call	Shift	Scheduled Hours							Total Hours	FTE
			MON	TUE	WED	THU	FRI	SAT	SUN		
Medical Director - Physician	✓	Day	8.00	8.00	8.00					24.00	0.60
Healthcare Services Administrator	✓	Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Mid-Level Practitioner		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Dentist		Day	10.00	10.00	10.00					30.00	0.75
Dental Assistant		Day	10.00	10.00	10.00					30.00	0.75
Director of Nursing		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Registered Nurse		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Registered Nurse - History & Physicals		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Licensed Practical Nurse - Intake		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Intake		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Intake		Night	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Medication		Day	16.00	16.00	16.00	16.00	16.00	16.00	16.00	112.00	2.80
Licensed Practical Nurse - Medication		Evening	16.00	16.00	16.00	16.00	16.00	16.00	16.00	112.00	2.80
Licensed Practical Nurse - Sick Call		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse - Sick Call		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Records Clerk		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Medical Records Clerk		Evening	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Administrative Assistant		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Totals			180.00	180.00	180.00	152.00	152.00	104.00	104.00	1052.00	26.30

Staffing Matrix Option 2 - CHC's Recommended Staffing Muscogee County Prison											
Position	On Call	Shift	Scheduled Hours							Total Hours	FTE
			MON	TUE	WED	THU	FRI	SAT	SUN		
Medical Director - Physician	✓	Day				8.00	8.00			16.00	0.40
Dentist		Day				4.00				4.00	0.10
Registered Nurse		Day	8.00	8.00	8.00	8.00	8.00			40.00	1.00
Licensed Practical Nurse		Day	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Licensed Practical Nurse		Evening	8.00	8.00	8.00	8.00	8.00	8.00	8.00	56.00	1.40
Totals			24.00	24.00	24.00	36.00	32.00	16.00	16.00	172.00	4.30

Comprehensive Medical and Dental Services

CHC will provide the County with a wide-ranging inmate healthcare program consisting of either 40.65 or 30.60 equivalent full-time employees (depending on the option chosen by the County), as well as comprehensive onsite medical and dental services. CHC will also provide the County with healthcare policies and procedures, 24 hours a day on-call services, medical and office supplies, medical waste disposal, comprehensive medical malpractice insurance, pharmaceutical administration and management, and corporate management and oversight.

Population Adjustments

This proposal is based on a base average daily jail population (ADP) of 1145 total adult inmates and a base average daily jail population (ADP) of 750 total adult inmates. If, in any calendar month, the County jail ADP exceeds 1250 inmates, the County will pay CHC a per diem of \$0.40 per inmate to be reconciled quarterly. If, in any calendar month, the jail ADP falls below 1050 inmates, CHC will credit the County a per diem of \$0.40 per inmate to be reconciled quarterly. If, in any calendar month, the County prison ADP exceeds 850 inmates, the County will pay CHC a per diem of \$0.40 per inmate to be reconciled quarterly. If, in any calendar month, the prison ADP falls below 650 inmates, CHC will credit the County a per diem of \$0.40 per inmate to be reconciled quarterly.

This per diem is intended to cover additional costs in those instances where short-term changes in the inmate population result in higher utilizations of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the inmate population grows significantly and if the population increase is sustained. In such cases, CHC reserves the right to negotiate for a contract price increase in order to maintain the same high quality of care for the increased inmate population. If the County experiences a sustained decrease in inmate population, CHC is open to discussing changes in staffing levels to better reflect the normalized inmate population.

Optional Enhancement: Electronic Medical Records

CHC can provide Vizion, our in-house electronic medical records system to the County, with or without electronic medical administration records (eMAR). The optional prices below indicate the additional monthly cost per inmate, depending on the provision of eMAR, hardware, and internet. This option is further discussed in Section 4 of this proposal.

Optional Enhancement	Cost Per Inmate Per Month
Electronic Medical Records (without eMAR) - County provides hardware and internet	\$2.00
Electronic Medical Records (with eMAR) - County provides hardware and internet	\$2.50
Electronic Medical Records (without eMAR) - CHC provides hardware and County provides internet	\$3.00
Electronic Medical Records (with eMAR) - CHC provides hardware and County provides internet	\$3.50

Renewal Pricing

The annual cost presented in this price quote will remain in effect through the initial 24-month contract period (contract years 1 and 2). For subsequent contract years beyond the initial 24-month contract period, please see the included RFP cost form.

Terms of Cost Proposal

The terms of this proposal shall be valid for 120 days beginning April 12, 2013. This price represents the cost for providing services as defined within the proposal. Deviations or changes to these services may alter the cost and the per diem rate. This proposal does not represent a legally binding contract. Additionally, should CHC staff members be involved in court-related testimony associated with healthcare that we provide, CHC reserves the right to bill for those hours.

Section 8: Contract Signature Page (Appendix E)

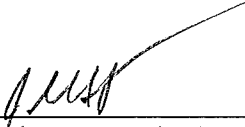
Complete Appendix E. City officials will sign the awarded vendor's copy after City Council has approved the contract award.

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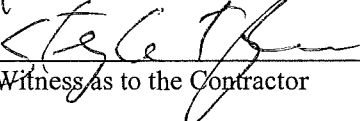
APPENDIX E (Option I)

CONTRACT SIGNATURE PAGE
Comprehensive Medical Services/
Muscogee County Jail

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Consolidated Government of Columbus, Georgia for the following:



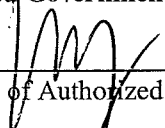
Witness as to the Contractor



Witness as to the Contractor

(Corporate Seal)



By: 

Signature of Authorized Representative

Doug Goetz, Chief Executive Officer

Print Name and Title of Signatory

Correctional Healthcare Companies, Inc.

Business Name

6200 South Syracuse Way #440
Greenwood Village, CO 80111

Business Address

Tax ID Number

866-246-5245

Telephone Number

720-622-8099

Fax Number

doug.goetz@correctioncare.com

Email Address

CONSOLIDATED GOVERNMENT OF
COLUMBUS, GEORGIA

Accepted this ____ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

APPENDIX A (OPTION II)

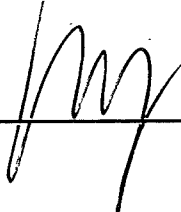
**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY PRISON
(ANNUAL CONTRACT)
RFP NO. 13-0024**

Option One: RFP Staffing

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT *
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$ 647,127.96
Medical Services	Third Year	\$ 666,541.80
Medical Services	Fourth Year	\$ 686,538.05
Medical Services	Fifth Year	\$ 707,134.19

*Amount shown for the first and second year of \$647,127.96 is an annual amount. This amount would be needed for each year for a total of \$1,294,555.92 for the first two years in total.

Company Name: Correctional Healthcare Companies, Inc.

Authorized Signature: 

APPENDIX A (OPTION II)

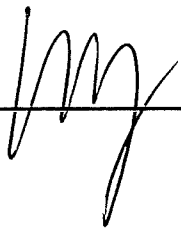
**COST PROPOSAL (Revised)
COMPREHENSIVE MEDICAL SERVICES/
MUSCOGEE COUNTY PRISON
(ANNUAL CONTRACT)
RFP NO. 13-0024**

Option Two: CHC's Recommended Staffing

DESCRIPTION	CONTRACT YEAR	ANNUAL CONTRACT AMOUNT *
Medical Services	Initial Contract Years (1 st & 2 nd Year)	\$ 542,557.44
Medical Services	Third Year	\$ 558,834.17
Medical Services	Fourth Year	\$ 575,599.19
Medical Services	Fifth Year	\$ 592,867.17

*Amount shown for the first and second year of \$542,557.44 is an annual amount. This amount would be needed for each year for a total of \$1,085,114.88 for the first two years in total.

Company Name: Correctional Healthcare Companies, Inc.

Authorized Signature:  _____

APPENDIX E (Option II)

CONTRACT SIGNATURE PAGE
Comprehensive Medical Services/
Muscogee County Prison`

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Consolidated Government of Columbus, Georgia for the following:

[Signature]
Witness as to the Contractor

[Signature]
Witness as to the Contractor

(Corporate Seal)



By: [Signature]
Signature of Authorized Representative

Doug Goetz, Chief Executive Officer
Print Name and Title of Signatory

Correctional Healthcare Companies, Inc.
Business Name
6200 S. Syracuse Way #440
Greenwood Village, CO 80111
Business Address

[Redacted]
Tax ID Number

866-246-5245
Telephone Number

720-622-8099
Fax Number

doug.goetz@correctioncare.com
Email Address

CONSOLIDATED GOVERNMENT OF
COLUMBUS, GEORGIA

Accepted this ___ day of _____ 20__

Isaiah Hugley, City Manager

APPROVED AS TO LEGAL FORM:

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

Section 9: Sample Agreements

Section 9: Sample Agreement

Provide a copy of any agreements that must be signed, if your firm is awarded the contract.

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**BUSINESS ASSOCIATE AGREEMENT BETWEEN
CHC Contracting Entity
AND _____ COUNTY, STATE.**

PURSUANT TO THE Health Insurance Portability and Accountability Act ("HIPAA") of 1996, P.L. 104-191, and its implementing regulations, the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. Parts 160 and 164 (hereinafter the "HIPAA Privacy Rule"), as amended by the Health Information Technology for Economic and Clinical Health Act ("HITECH") of 2009, P.L. 111-5, (cumulatively the "Health Privacy Laws"), CHC Contracting Entity (hereinafter "Covered Entity") and _____ County, State (hereinafter, "Business Associate"), (jointly "the Parties") wish to enter into an Agreement that addresses the requirements of the HIPAA Privacy Rule with respect to "Business Associates," as that term is defined in the HIPAA Privacy Rule.

I. BACKGROUND AND PURPOSE

The Parties have entered into one or more contracts for the Covered Entity to administer inmate health care services for the Business Associate (the "Underlying Contract(s)") which require Covered Entity to create, have access to, and maintain Protected Health Information (hereinafter "PHI") that is subject to the Health Privacy Laws. This Agreement shall supplement each of the Underlying Contract(s) only with respect to Business Associate's receipt and use of PHI under the Underlying Contract(s) to allow Covered Entity to comply with the Health Privacy Laws.

The Parties acknowledge and agree that in connection with the Underlying Contract(s), the Parties may create, receive use or disclose PHI as set forth in the HIPAA Privacy Rule.

PHI does not include health information that has been de-identified in accordance with the standards for de-identification provided for in the HIPAA Privacy Rule.

Therefore the Parties agree as follows:

II. DEFINITIONS

1. All capitalized terms of this Agreement shall have the meanings as set forth in the HIPAA Privacy Rule, unless otherwise defined herein.

III. GENERAL TERMS

1. In the event of inconsistency between the provisions of this Agreement and the mandatory terms of the HIPAA Privacy Rule, as may be expressly amended from time to time by the Department of Health And Human Services (HHS) or as a result of interpretations of HHS, court or regulatory agencies, such mandatory terms of the HIPAA Privacy Rule shall prevail. In the event of a conflict among the interpretation of these entities, the conflict shall be resolved in accordance with rules of precedence.
2. Where provisions of this Agreement are different from those mandated by HIPAA Privacy Rule, but are nonetheless permitted by the Rule, the provisions of the Agreement shall control.
3. Except as expressly provided in the HIPAA Privacy Rule or this Agreement, this Agreement does not create any rights in third parties.

IV. SPECIFIC REQUIREMENTS

1. To the extent applicable to this Agreement, Business Associate agrees to comply with the Health Privacy Laws, the Administrative Simplification provisions of the HIPAA, and any current and future regulations promulgated under either HITECH or HIPAA, including without limitation the Federal

Privacy Regulations, and the Federal Electronic Transactions Regulations, all as may be amended from time to time.

2. Business Associate shall not disclose PHI to any member of its workforce, unless Business Associate has advised such a person of Business Associate's obligation under this section and of the consequences of such action and for Business Associate of violating them. Business Associate shall take appropriate disciplinary action against any member of the workforce who uses or discloses PHI in violation of the Agreement.
3. Except as otherwise limited in this Agreement, Business Associate may use PHI for the proper management and administration of the Business Associate or to carry out the legal responsibilities of the Business Associate and Business Associate may disclose PHI provided that disclosures are required by law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as allowed by law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
4. Business Associate agrees to enter into any further agreements as reasonably necessary to facilitate compliance with the Health Privacy Laws.
5. Business Associate agrees to establish appropriate administrative, technical, and physical safeguards to prevent the use or disclosure and to protect the confidentiality of PHI it receives from Covered Entity, and to prevent individuals not involved in the proper management and administration of the Business Associate from using or accessing the PHI. Business Associate shall provide Covered Entity such information concerning these safeguards as Covered Entity may from time to time request, and shall upon reasonable request give Covered Entity access, for information and copying, to Business Associate's facilities used for the maintenance and processing of PHI. This includes, but is not limited to, PHI for the purpose of determining Business Associate's compliance with this Agreement.
6. Business Associate agrees that it will immediately report to Covered Entity any use or disclosure of PHI received from Covered Entity that is not authorized by or otherwise constitutes a violation of this Agreement of which Business Associate becomes aware.
7. Business Associate agrees that if Covered Entity determines or has a reasonable belief that Business Associate may have used, made a decision or permitted access to PHI in a way that is not authorized by this Agreement, then Covered Entity may in its sole discretion require Business associate to: (a) promptly investigate and provide a written report to Covered Entity of the Business Associate's determination regarding any alleged or actual unauthorized disclosure access, or use; (b) cease such practices immediately; (c) return to Covered Entity, or destroy, all PHI; and (d) take any other action Covered Entity deems appropriate. Notwithstanding the above, Business Associate shall mitigate, to the extent feasible, any harmful effect that is known to the Business Associate.
8. Business Associate understands that Covered Entity is subject to State and Federal laws governing the confidentiality of PHI. Business Associate agrees to abide by all such laws, whether or not fully articulated herein, and to keep the PHI in the same manner and subject to the same standards as is required of Covered Entity.
9. Business Associate may use and/or disclose PHI that is De-Identified, as that term is defined in the current version of the Privacy Regulations, or as changed from time to time through written amendment, which includes the removal of all the identifiers listed in the Privacy Regulations so that Covered Entity could not have actual knowledge that the information could be used, alone or in combination with other data, to identify an individual.
10. Business Associate shall maintain a record of all authorizations and disclosures of PHI not otherwise provided for in this Agreement or the Underlying Contract(s), including the date of the disclosure, the

name and, if known, the address of the recipient of the PHI, a brief description of the PHI disclosed, and the purpose of the disclosure. Business Associate shall make such record available to Covered Entity on request.

11. Business Associate shall report to Covered Entity any unauthorized use or disclosure of PHI by Business Associate or its workforce or Business Associates, and the remedial action taken or proposed to be taken with respect to such use or disclosure.
12. Business Associate agrees that within thirty (30) days of receiving a written request from Covered Entity it will provide PHI necessary for Covered Entity to respond to an individual's request for access to PHI about the individual.
13. Business Associate agrees that, within fifteen (15) days of a request being made, it will provide Covered Entity with any PHI requested by Covered Entity.
14. Business Associate agrees to make available the information required to provide an accounting of disclosure in accordance with applicable law within sixty (60) days of a written request by Covered Entity.
15. Business Associate agrees that it will use all reasonable efforts to limit its request for PHI to the minimum amount of PHI necessary to achieve the purpose of which the request is made.

V. TERM AND TERMINATION

1. Term. The Term of this Agreement shall be effective DATE, and shall terminate when all of the PHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy PHI, protections are extended to such information, in accordance with the termination provisions in this Section.
2. Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall either:
 - a) Provide an opportunity for Business Associate to cure the breach or end the violation and terminate this Agreement if Business Associate does not cure the breach or end the violation within such reasonable period of time as shall be specified by Covered Entity; or
 - b) Immediately terminate this Agreement if Business Associate has breached a material term of this Agreement and cure is not possible; or
 - c) If neither termination nor cure are feasible, Covered Entity shall report the violation to the Secretary.
3. Effect of Termination.
 - a) Except as provided in paragraph (2) of this section, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to PHI that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the PHI.
 - b) In the event that Business Associate determines that returning or destroying the PHI is infeasible, Business Associate shall extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such PHI.

VI. MISCELLANEOUS

1. Regulatory References. A reference in this Agreement to a section in the Health Privacy Laws means the section as in effect or as amended.
2. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Health Privacy Laws or any applicable court decision.
3. Survival. The respective rights and obligations of Business Associate under Section V(3) of this Agreement shall survive the termination of this Agreement.
4. Interpretation. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Health Privacy Laws.
5. Indemnification. Business Associate will indemnify and hold Covered Entity (including Covered Entity's Board of Directors, individually and collectively, and its officers, employers, agents, and other representatives, individually and collectively) harmless from and against all claims, demands, costs, expenses, liabilities and losses, including reasonable attorney's fees and punitive damages which may arise against Covered Entity as a result of any violation of this Agreement by Business Associate.
6. Assignment. No assignment of this Agreement of the rights and obligations hereunder shall be valid without the specific written consent of both Parties, provided, however, that this Agreement may be assigned by Covered Entity to any successor entity operating Covered Entity, and such assignment shall forever release Covered Entity hereunder.
7. Waiver. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be construed to be a waiver of any subsequent breach of the same or other provision hereof.
8. Severability. In the event any provision of the Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of this Agreement, which shall remain in full force and effect and enforceable in accordance with its terms

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their names or their official acts by their respective representatives, each of who is duly authorized to execute the same.

Covered Entity

CHC Contracting Entity

Business Associate

County of ____, State

By: _____

Name: Douglas D. Goetz

Title: Chief Executive Officer

By: _____

Name:

Title:

Date: _____

Date: _____

ILLUSTRATIVE HEALTH SERVICES AGREEMENT

Note: this document is provided for representative purposes only and does not constitute an offer for services or a contract. The specific terms and conditions will depend upon the client's unique situation and services purchased.

AGREEMENT FOR INMATE HEALTH CARE SERVICES

AT [COUNTY NAME] COUNTY, [STATE]

Effective [MONTH DATE, YEAR] through [MONTH DATE, YEAR]

This Agreement for Inmate Health Services (hereinafter, the "AGREEMENT") entered into by and between the County of [county name], a municipality in the State of [STATE], (hereinafter, the "COUNTY") acting by and through its duly elected Board of COUNTY Commissioners, (hereinafter the "BOARD"), and Correctional Healthcare Companies, Inc., (hereinafter, "CHC") a Delaware corporation.

RECITALS

WHEREAS, the COUNTY and the duly elected [Sheriff] (hereinafter the "SHERIFF") are is charged by law with the responsibility for administering, managing, and supervising the health care delivery system of the [NAME OF JAIL] located at [ADDRESS, CITY, STATE, ZIP] (hereinafter, "JAIL"); and

WHEREAS, the objective of the COUNTY is to provide for the delivery of quality health care to the INMATES and DETAINEES of the JAIL (hereinafter, "JAIL POPULATION"), in accordance with applicable law; and

WHEREAS, CHC is in the business of administering correctional health care services and desires to administer such services on behalf of the COUNTY to the JAIL POPULATION under the terms and conditions hereof.

NOW THEREFORE, in consideration of the covenants and promises hereinafter made, the parties hereto agree as follows:

DEFINITIONS

CONTRACT YEAR – The initial, and any successive, twelve (12) month period beginning with the effective date of the AGREEMENT.

COUNTY INMATES/DETAINEES – An INMATE/DETAINEE held under the jurisdiction of the COUNTY or SHERIFF. COUNTY INMATES/DETAINEES may be housed in the JAIL or in another jurisdiction's correctional facility. However, COUNTY INMATES/DETAINEES housed in another jurisdiction are not covered by the provisions of this AGREEMENT unless CHC administers health care services at the other jurisdiction's facility and is specifically set forth below.

COVERED PERSONS – An INMATE/DETAINEE of the JAIL who is: (1) part of the JAIL's MADP; and (2) FIT FOR CONFINEMENT; and (3)(a) incarcerated in the JAIL; or (b) on work release status and is indigent.

DETAINEE – An adult or juvenile individual whose sentence has not yet been adjudicated and is held as a pre-trial detainee or other individual held in lawful custody.

FIT FOR CONFINEMENT – A determination made by a CHC authorized physician and/or health-trained JAIL staff that an INMATE/DETAINEE is medically stable and has been medically cleared for acceptance into the JAIL. Such determination shall only be made after resolution of any injury or illness requiring immediate transportation and treatment at a hospital or similar facility.

HEALTH CARE STAFF – Medical, mental health and support staff provided or administered by CHC.

CHC CHIEF MEDICAL OFFICER – CHC's Chief physician who is vested with certain decision making duties under this AGREEMENT.

INMATE – An adult or juvenile individual who is being incarcerated for the term of their adjudicated sentence.

MONTHLY AVERAGE DAILY POPULATION (MADP) – The average number of INMATES/DETAINEES housed in the JAIL on a daily basis for the period of one month. The MADP shall include, but separately list, other county or agency inmates and detainees. The MADP shall be figured by summing the daily population for the JAIL (as determined by a count performed at the same time each day) for each day of the month and dividing this sum by the total number of days in the month. JAIL records shall be made available to CHC upon request to verify the MADP. Persons on work release and not indigent, home confinement, housed outside of the JAIL, and parolees and escapees shall not be considered part of the JAIL's MADP.

NCCHC – The National Commission on Correctional Health Care.

PHYSICIAN EXTENDER – An advanced level healthcare professional such as a Nurse Practitioner, Physician Assistant, or Clinical Nurse Specialist.

SPECIALTY SERVICES – Medical services that require physicians to be licensed in a specialty such as obstetrics, gynecology, or dermatology or other specialized field of medicine, including but not limited to Dialysis, but excluding services that are otherwise provided for in this AGREEMENT.

ARTICLE I

HEALTH CARE SERVICES

1.0 **SCOPE OF SERVICES.** CHC shall administer health care services and related administrative services at the JAIL according to the terms and provisions of this AGREEMENT. The costs of the various health care services shall be borne by CHC or the COUNTY as set forth in this Article.

1.1 **GENERAL HEALTH CARE SERVICES.** CHC will arrange and bear the cost of the following health care services:

1.1.1 **RECEIVING SCREENING.** A receiving screening of a INMATE/DETAINEE shall be performed as soon as possible after the INMATE/DETAINEE's booking into the JAIL.

The COUNTY shall pay CHC \$15.00 per receiving screening performed on INMATE/DETAINEE's who are not counted in the MADP.

- 1.1.2 HEALTH ASSESSMENT. A health assessment of an adult COVERED PERSON shall be performed as soon as possible, but no later than fourteen (14) calendar days after the INMATE/DETAINEE's arrival at the JAIL. The health assessment shall follow current NCCHC standards.
- 1.1.3 SCHEDULED SICK CALL. A qualified healthcare professional shall conduct sick calls for COVERED PERSONS on a timely basis and in a clinical setting.
- 1.2 AMBULANCE SERVICE. CHC shall arrange and bear the cost of emergency ambulance services for COVERED PERSONS. Costs for ambulance services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.3 BODY CAVITY SEARCHES/COLLECTION OF PHYSICAL EVIDENCE. CHC HEALTH CARE STAFF will not perform body cavity searches, nor collect physical evidence (blood, hair, semen, saliva, etc.), except within guidelines established by the NCCHC. If CHC HEALTH CARE STAFF collect physical evidence, the COUNTY shall be responsible for arranging any testing and bear the cost of collection and testing the collected evidence and any associated staffing costs for HEALTH CARE STAFF to provide court related testimony. After collecting evidence, CHC HEALTH CARE STAFF shall turn the specimen over to the SHERIFF or a court-designated representative for completion of chain-of-custody evidence.
- 1.4 DENTAL - EMERGENCY DENTAL ONLY. CHC shall arrange and bear the cost of emergency dental services only if CHC's CHIEF MEDICAL OFFICER or designee determines that dental care is medically necessary. In the event that the JAIL POPULATION requires any other dental services, the COUNTY shall bear the cost. Costs for dental services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.5 ELECTIVE MEDICAL CARE - NOT COVERED. CHC shall not be responsible for the provision or cost of any elective care. In the event a member of the JAIL POPULATION requires elective care, the INMATE/DETAINEE or COUNTY shall be responsible for all costs. Elective medical care shall be defined as care which, if not provided, would not, in the sole opinion of CHC's CHIEF MEDICAL OFFICER or designee, cause the INMATE/DETAINEE'S health to deteriorate or cause harm to the INMATE/DETAINEE'S well being. Decisions concerning elective medical care shall be consistent with the applicable American Medical Association (AMA) Standards.
- 1.6 HOSPITALIZATION. CHC will arrange and bear the cost of hospitalization for a COVERED PERSON who, in the opinion of the treating physician and/or CHC's CHIEF MEDICAL OFFICER or designee, requires hospitalization. Costs for hospitalization services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.7 LONG TERM CARE - NOT COVERED. CHC shall not be responsible for the provision or cost of any long term care facility services. In the event that a member of the JAIL POPULATION requires skilled care, custodial care or other services of a long term care facility, the COUNTY shall bear the cost.
- 1.8 MEDICAL EQUIPMENT OVER \$100. In the event that the Parties mutually agree that medical equipment in excess of \$100 per unit cost is required to assist in providing health care services to COVERED PERSONS under this AGREEMENT, the COUNTY shall bear the cost of the medical equipment.

- 1.9 MEDICAL SUPPLIES/EQUIPMENT OF \$100 OR LESS. CHC shall provide and bear the cost of medical supplies (i.e. alcohol prep pads, syringes, etc.) and equipment (i.e. thermometers, scales, etc.) required to administer the terms of the AGREEMENT, which have a unit cost of \$100 or less, but does not include office and paper supplies.
- 1.10 MEDICAL WASTE. CHC shall arrange and bear the cost of removing and properly disposing of medical waste material generated while fulfilling its duties under this AGREEMENT in accordance with all applicable state laws and OSHA-regulated standards. Costs for medical waste services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.11 MENTAL HEALTH CARE. CHC shall arrange and bear the cost of on-site mental health services for COVERED PERSONS which shall include evaluations, referrals, crisis management, suicide intervention, individual therapy, group therapy, basic community linkage, comprehensive community linkage and continuity of care. CHC shall not be responsible for the provision or cost of any off-site or inpatient mental health services. The COUNTY shall be responsible for the provision and cost of off-site or inpatient mental health services for the JAIL POPULATION.
- 1.12 OFFICE EQUIPMENT. CHC shall be responsible for providing office equipment such as [LIST EQUIPMENT] required for the administrative operations of the medical unit. The COUNTY shall be responsible for providing and maintaining office equipment, such as copier, fax and phone service required for the administrative operation of the medical unit. Costs for office equipment shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.13 OFFICE SUPPLIES. CHC shall be responsible for providing office supplies such as books, medical record folders, and forms as required for the administrative operations of the medical unit.
- 1.14 PATHOLOGY/RADIOLOGY SERVICES. CHC shall arrange and bear the cost of pathology and radiology services (also referred to as laboratory and x-ray services) ordered by a CHC physician for COVERED PERSONS. CHC shall arrange on-site pathology and radiology services to the extent reasonably possible. To the extent pathology and radiology services are required and cannot be rendered on-site, CHC shall make appropriate off-site arrangements for rendering pathology and radiology care. CHC will arrange and coordinate with the SHERIFF's office for the transportation for pathology and radiology off-site services. Costs for pathology and radiology services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.15 PHARMACY SERVICES. CHC shall provide monitoring of pharmacy usage as well as a Preferred Medication List. Except as provided below, CHC shall bear the cost of all prescription and non-prescription over-the-counter medications prescribed by a duly licensed CHC physician for a COVERED PERSON.
- 1.15.1 GENERAL. Prescribing, dispensing, and administering of medication shall comply with all State and Federal laws and regulations and all medications shall be dispensed under the supervision of a duly authorized, appropriately licensed or certified health care provider.

- 1.15.2 LIMITS. CHC shall bear the cost of prescription medication related to the treatment of INMATES/DETAINEES with Acquired Immune Deficiency Syndrome ("AIDS"), Human Immuno-deficiency Virus ("HIV"), Hepatitis C, organ transplants, cancer and neuromuscular disease up to One Thousand Two Hundred Dollars (\$1,200.00) per CONTRACT YEAR in the aggregate, to be pro-rated for any partial CONTRACT YEARS. Medications related to the treatment of INMATES/DETAINEES with AIDS, HIV, Hepatitis C, organ transplants, cancer and neuromuscular disease shall be defined in accordance with the Physician's Desk Reference. When the aggregate amount in this paragraph is reached, CHC will continue to provide utilization management, extend all pharmacy discounts to the COUNTY and pay these expenses on behalf of the COUNTY, as long as the COUNTY remains current with payments due under this AGREEMENT. Amounts paid by CHC which are over the aggregate amount in this paragraph will be periodically reconciled with the COUNTY pursuant to paragraph 8.1.
- 1.16 PREGNANT COVERED PERSONS. CHC shall arrange and bear the cost of on-site health care services for any pregnant COVERED PERSON in accordance with NCCHC standards and this AGREEMENT, but CHC shall not arrange or bear the cost of any health care services for infants. Off-site health care services for any pregnant COVERED PERSON shall be in accordance with SPECIALTY SERVICES as set forth herein in paragraph 1.17.
- 1.17 SPECIALTY SERVICES. In the event it is determined that a COVERED PERSON requires SPECIALTY SERVICES, CHC shall arrange and bear the cost of specialty services. CHC's authorized physician will make such determination and refer COVERED PERSONS for SPECIALTY SERVICES when, in the physician's professional opinion, it is deemed medically necessary. CHC's authorized personnel will make a recommendation and obtain approval from the SHERIFF's office for SPECIALTY SERVICES prior to making arrangements for specialty services. CHC shall arrange on-site SPECIALTY SERVICES to the extent reasonably possible. To the extent SPECIALTY SERVICES are required and cannot be rendered on-site, CHC shall make appropriate off-site arrangements for rendering off-site care. In the event that SPECIALTY SERVICES are rendered off-site but do not require hospitalization, CHC will arrange and bear the cost only if the CHC CHIEF MEDICAL OFFICER or designee approves off-site SPECIALTY SERVICES. Costs for off-site specialty services shall be included in the CAP AMOUNT listed in Section 1.19.
- 1.18 VISION CARE. In the event it is determined that a COVERED PERSON requires vision correction to achieve minimal function, CHC shall arrange and bear the cost of a vision examination and one (1) pair of ordinary glasses per COVERED PERSON. CHC's Chief Medical Officer, or designee, will make such determination and refer COVERED PERSONS for the vision examination. CHC's HEALTH CARE STAFF obtain approval from the SHERIFF's office for the vision examination prior to making arrangements for vision services. CHC shall arrange vision examinations to the extent reasonably possible. To the extent the vision examination is required and cannot be rendered on-site, CHC shall make appropriate off-site arrangements for rendering vision care. Costs for vision care services shall be included in the CAP AMOUNT listed in Section 1.19.

1.19 FINANCIAL LIMITATIONS. CHC's maximum liability for costs associated with the provision of off-site medical or other healthcare services which include, but are not limited to, the services in paragraphs [LIST ALL PARAGRAPHS OF SERVICES INCLUDED IN THE CAP] shall be [AMOUNT SPELLED OUT (\$AMOUNT)] in the aggregate per CONTRACT YEAR, to be pro-rated for any partial contract years (the "CAP AMOUNT"). Costs for any medical or other health services, as set forth above, which are provided to INMATES/DETAINEES during the CONTRACT YEAR which are in excess of the CAP AMOUNT shall be the responsibility of the COUNTY. When the CAP AMOUNT for the CONTRACT YEAR is reached, CHC will continue to provide utilization management, extend all provider discounts to the COUNTY and pay these expenses on behalf of the COUNTY, as long as the COUNTY remains current with payments due under this AGREEMENT. Amounts paid by CHC which are over the CAP AMOUNT will be periodically reconciled with the COUNTY pursuant to paragraph 8.1.

1.19.1 COUNTY REBATE. Should the costs associated with the provision of healthcare services listed above not exceed the CAP AMOUNT for the CONTRACT YEAR, CHC shall reimburse the COUNTY at a rate of [XXX] Percent (XX%) of the difference between the actual cost to CHC for these services and the CAP AMOUNT. The rebate shall be net of any other reconciliation amounts due to CHC under this AGREEMENT. The rebate will be calculated three months after the end of the CONTRACT YEAR to allow for processing of claims incurred during the CONTRACT YEAR. Any claims from the prior CONTRACT YEAR services received and paid after this three month period will be calculated in the subsequent CONTRACT YEAR CAP AMOUNT.

ARTICLE II

HEALTH CARE STAFF

2.0 STAFFING HOURS. CHC shall provide or arrange for the provision of HEALTH CARE STAFF necessary to render the health care services contemplated in Article I as set forth in the Minimum Staffing Pattern set forth in Exhibit A, attached hereto and made a part hereof. CHC reserves the right to assign the staff in Exhibit A to shift coverage as necessary based on operational needs to provide the health care services under this AGREEMENT.

2.0.1 Additional hours may be provided if mutually agreed upon by both parties in writing, with at least 24 hours advanced notice.

2.0.2 CHC shall provide or arrange for the provision of an on-call physician and/or nurse available by telephone or pager, 24 hours per day and 7 days per week.

2.0.3 CHC shall make reasonable efforts to supply the staffing levels contained in this section, however, failure to continuously supply all of the required staffing due to labor market demands or other factors outside the control of CHC, after such reasonable efforts have been made, shall not constitute a breach of this AGREEMENT.

- 2.1 STAFFING LEVELS WAIVER. Based on actual staffing needs as affected by medical emergencies, riots, increased or decreased INMATE/DETAINEE population, and other unforeseen circumstances, certain increases or decreases in staffing requirements may be waived as agreed to by the SHERIFF and CHC.
- 2.2 STAFF SCREENING. The COUNTY and SHERIFF shall screen CHC's proposed HEALTH CARE STAFF, employees, agents and/or subcontractors providing services at the JAIL to ensure they do not constitute a security risk. The SHERIFF shall have final approval, which shall not be unreasonably withheld, of CHC's HEALTH CARE STAFF, employees, agents and/or subcontractors, related to security/background clearance.
- 2.3 SATISFACTION WITH HEALTH CARE STAFF. In recognition of the sensitive nature of correctional facility operations, if the SHERIFF becomes dissatisfied with any member of the HEALTH CARE STAFF, the SHERIFF shall provide CHC written notice of such dissatisfaction and the reasons therefore. Following receipt of such notice, CHC shall use commercially reasonable efforts to resolve the dissatisfaction. If the problem is not resolved to the satisfaction of the SHERIFF within ten (10) business days following CHC's receipt of the notice, CHC shall remove the individual from providing services at the JAIL within a reasonable time frame considering the effects of such removal on CHC's ability to deliver health care services and recruitment/hiring of an acceptable replacement. The SHERIFF reserves the right to revoke the security clearance of any HEALTH CARE STAFF at any time.

ARTICLE III

ADMINISTRATIVE SERVICES

- 3.0 UTILIZATION MANAGEMENT. CHC shall provide utilization management services and administer medical claims processing for the offsite medical services/pharmacy services administered by CHC, as set forth in Article I, on behalf of the COUNTY. CHC will follow applicable state laws and make reasonable efforts to obtain provider discounts and will keep the COUNTY and/or SHERIFF apprised of its utilization management practices.
- 3.1 CARDIOPULMONARY RESUSCITATION (CPR), HEALTH AND MENTAL HEALTH EDUCATION AND TRAINING. CHC shall conduct an ongoing CPR, health and mental health education and training program for the COUNTY Deputies and Jailers in accordance with the needs mutually established by the COUNTY and CHC. Training shall be provided by methods and intervals determined by CHC.
- 3.2 QUARTERLY REPORTS. As requested by the SHERIFF, CHC shall submit quarterly health care reports concerning the overall operation of the health care services program rendered pursuant to this AGREEMENT and the general health of the JAIL POPULATION.
- 3.3 QUARTERLY MEETINGS. As requested by the SHERIFF, CHC shall meet quarterly, or as soon thereafter as possible, with the SHERIFF, or designee, concerning health care services within the JAIL and any proposed changes in health-related procedures or other matters, which both parties deem necessary.
- 3.4 MEDICAL RECORDS MANAGEMENT. CHC shall provide the following medical records management services:

- 3.4.1 **MEDICAL RECORDS.** CHC HEALTH CARE STAFF shall maintain, cause or require the maintenance of complete and accurate medical records for COVERED PERSONS who have received health care services. Medical records shall be kept separate from COVERED PERSON'S confinement records. A complete copy of the individual medical record shall be available to accompany each COVERED PERSON who is transferred from the JAIL to another location for off-site services or transferred to another institution. CHC will keep medical records confidential and shall not release any information contained in any medical record except as required by published JAIL policies, by a court order or by applicable law. Upon termination of this AGREEMENT, all medical records shall be delivered to and remain with the SHERIFF, as property of the SHERIFF's office.
- 3.4.2 **ELECTRONIC MEDICAL RECORDS.** CHC shall provide and maintain an electronic medical records software program for use at the JAIL according to the terms attached hereto as Exhibit B.
- 3.4.3 **COMPLIANCE WITH LAWS.** Each medical record shall be maintained in accordance with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and any other applicable state or federal privacy statute or regulation.
- 3.4.4 **RECORDS AVAILABILITY.** As needed to administer the terms of this AGREEMENT, CHC shall make available to the SHERIFF or COUNTY, unless otherwise specifically prohibited, at the SHERIFF's or COUNTY's request, all records, documents and other papers relating to the direct delivery of health care services to the JAIL POPULATION hereunder.

ARTICLE IV
PERSONS COVERED UNDER THIS AGREEMENT

- 4.0 **GENERAL.** Except as otherwise provided in this AGREEMENT, CHC shall only be required to arrange for health care services under this AGREEMENT to be provided to COVERED PERSONS.
- 4.1 **TESTING AND INOCULATIONS FOR JAIL EMPLOYEES.** CHC shall arrange, bear the cost and administer Tuberculosis skin testing, Hepatitis (A) Inoculations, and Hepatitis (B) Inoculations to JAIL employees. Costs incurred by CHC for said tests and inoculation will be periodically reconciled with the COUNTY pursuant to paragraph 8.1.
- 4.2 **EMERGENCY MEDICAL CARE FOR JAIL EMPLOYEES AND VISITORS.** CHC shall arrange for on-site first response emergency medical care as required for JAIL employees, contractors and visitors to the JAIL. The medical treatment shall be limited to the extent reasonably necessary to stabilize and facilitate the individual's referral to a medical facility or personal physician.
- 4.3 **RELEASE FROM CUSTODY.** The COUNTY acknowledges and agrees that CHC is responsible for the payment of costs associated with services rendered to COVERED PERSONS as set forth in this AGREEMENT only when such persons remain in the custody of, or under the jurisdiction of, the JAIL. In no event shall CHC be responsible

for payment of any costs associated with any services rendered to any individual when said individual is released from the custody of, or no longer under the jurisdiction of, the JAIL including, but not limited to, releasees, parolees and escapees. Furthermore, in no event shall CHC be responsible for payment of costs associated with any medical services rendered to a COVERED PERSON when said COVERED PERSON is injured outside the JAIL facility during transport to or from the JAIL.

ARTICLE V

PERSONS NOT COVERED OR PARTIALLY COVERED UNDER THIS AGREEMENT

- 5.0 COUNTY INMATES/DETAINEES HOUSED IN OTHER JURISDICTIONS OR OUTSIDE THE JAIL. CHC shall not be responsible for arranging the medical care or treatment for COUNTY INMATES/DETAINEES housed in other counties or jurisdictions. The COUNTY or SHERIFF or other agency with legal responsibility for the medical care of such persons shall be responsible for all medical expenses associated with the care and treatment of COUNTY INMATES/DETAINEES removed from the JAIL, including, but not limited to the services listed in Article I of this AGREEMENT and any other health care related expenses associated with said INMATES/DETAINEES, unless the INMATE/DETAINEE is housed in a facility where CHC provides INMATE/DETAINEE health care services. CHC shall not be responsible for arranging the medical care or treatment for COUNTY INMATES/DETAINEES housed outside the JAIL (i.e. non-indigent work release INMATES/DETAINEES or INMATES/DETAINEES on home confinement).
- 5.1 INJURIES PRIOR TO INCARCERATION, FIT FOR CONFINEMENT AND ESCAPED INMATES/DETAINEES. CHC shall not be responsible for the cost of providing off-site medical care for injuries incurred by an arrested person prior to incarceration at the JAIL or during an escape or escape attempt, including, but not limited to, medical services provided to any arrested person prior to the person's booking and confinement in the JAIL. In addition, CHC shall not be responsible for the cost of any medical treatment or health care services necessary to medically stabilize any arrested person presented at intake by an arresting agency with a life threatening injury or illness or in immediate need of emergency medical care. CHC shall provide such care as is medically necessary until the arrested person can be transported to a medical care facility by the arresting agency or their designee. The arresting authority or the COUNTY shall bear the cost of, and be responsible for, all reasonable and necessary medical services or health care services of the individual until such time as the arresting authority can present a medically stable individual that is FIT FOR CONFINEMENT. To the extent CHC is billed for medical services provided to an individual who is not FIT FOR CONFINEMENT the COUNTY shall reimburse CHC for all such costs. CHC shall not charge an additional fee simply to examine an individual to determine if he is suitably FIT FOR CONFINEMENT.

ARTICLE VI

COST OF SERVICES NOT COVERED UNDER THIS AGREEMENT

- 6.0 SERVICES NOT LISTED. Both parties understand and agree that there will be costs incurred for health care related services as outlined in Articles I, II and III above. CHC shall not be responsible for any expenses not specifically covered under Articles I, II and III of this AGREEMENT. In the event that any of the health care services not covered by CHC under Articles I, II and III, or any services that are not listed within this

AGREEMENT, are required for a member of the JAIL POPULATION as a result of the medical judgment of a physician or CHC authorized personnel, CHC shall not be responsible for arranging such services and the cost of such services shall be billed directly to the COUNTY.

- 6.1 SERVICES BEYOND THE SCOPE OF THIS AGREEMENT. Both parties understand and agree that there are certain occurrences, both beyond the control and within the control of the parties, that may result in health care expenses which are outside the scope of the normal operation of a correctional facility and, therefore, outside the contemplated scope of services under this AGREEMENT. While both parties will act in good faith and endeavor to reduce the possibility of such occurrences, in the unlikely event of an occurrence such as an Act of God, riot, explosion, fire, food poisoning, epidemic illness outbreak or any other catastrophic event, or an event caused by the action or inaction of the COUNTY or SHERIFF or their employees, agents or contractors, which results in medical care for the JAIL POPULATION, JAIL staff, visitors, or contractors, CHC shall not be responsible for costs attributable to such catastrophic event and all such costs shall be borne by the COUNTY. Notwithstanding the above, CHC shall be responsible for medical costs under this AGREEMENT associated with such an event only if such an event was caused solely by CHC.

ARTICLE VII **COUNTY'S DUTIES AND OBLIGATIONS**

- 7.0 COMPLIANCE WITH HIPAA/STATE HEALTH INFORMATION PRIVACY LAWS. The COUNTY, JAIL, and SHERIFF and their employees, agents and subcontractors shall comply with the Health Insurance Portability and Accountability Act of 1996 (hereinafter "HIPAA") and any State health information privacy laws, to the extent they are applicable. The COUNTY and the SHERIFF shall implement policies and/or procedures in compliance with such laws.
- 7.1 COMPREHENSIVE MEDICAL/MENTAL HEALTH CARE. CHC shall identify to the SHERIFF those members of the JAIL POPULATION with medical or mental health conditions which may be worsened as a result of being incarcerated at the JAIL or which may require extensive care while incarcerated. After review of the circumstances, and when security risks permit, the SHERIFF shall make every effort to have such an INMATE/DETAINEE released, transferred or otherwise removed from the correctional setting.
- 7.2 RECORD ACCESS. During the term of this AGREEMENT, and for a reasonable time following the termination of this AGREEMENT, the SHERIFF shall provide CHC, at CHC's request, the COUNTY, JAIL and/or SHERIFF'S records (including medical records) relating to the provision of health care services to the JAIL POPULATION, including records maintained by hospitals, and other outside health care providers involved in the care or treatment of the JAIL POPULATION (to the extent the COUNTY, JAIL or SHERIFF has control of, or access to, such records). CHC may request such records in connection with the investigation of, or defense of, any claim by a third party related to CHC's conduct or to prosecute a claim against a third party. Any such information provided by the SHERIFF to CHC that the SHERIFF considers confidential shall be kept confidential by CHC and shall not, except as may be required by law, be distributed to any third party without prior written approval by the SHERIFF.

- 7.3 USE OF INMATES/DETAINEES IN THE PROVISION OF HEALTH CARE SERVICES. INMATES/DETAINEES of the JAIL shall not be employed or otherwise engaged or utilized by either CHC or the SHERIFF in rendering any health care services to the JAIL POPULATION, provided however, that INMATES/DETAINEES may be used in positions not involving the rendering of health care services directly to the JAIL POPULATION and not involving access to JAIL POPULATION records in accordance with NCCHC standards.
- 7.4 SECURITY OF THE JAIL FACILITY AND CHC. CHC and the COUNTY understand that adequate security services are necessary for the safety of the agents, employees, and subcontractors of CHC, as well as for the security of the JAIL POPULATION and SHERIFF'S staff, consistent with a correctional setting. The SHERIFF shall provide security sufficient to enable CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors to safely provide the health care services described in this AGREEMENT. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall follow all security procedures of the SHERIFF while at the JAIL or other premises under the SHERIFF's direction or control. However, any CHC HEALTH CARE STAFF, employee, agent and/or subcontractor may, at any time, refuse to provide any service required under this AGREEMENT if such person reasonably feels that the current safety services are insufficient. CHC shall not be liable for any loss or damages resulting from CHC's HEALTH CARE STAFF, employees, agents and/or subcontractors failure to provide medical services due to insufficient security services.
- 7.5 SHERIFF'S POLICIES AND PROCEDURES. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall operate within the requirements of the COUNTY'S and/or SHERIFF'S posted security Policies and Procedures, which impact the provision of medical services.
- 7.5.1 A complete set of said Policies and Procedures shall be maintained by the COUNTY and made available for inspection by CHC at the JAIL, and CHC may make a reasonable number of copies of any specific section(s) it wishes using the SHERIFF'S photocopy equipment and paper.
- 7.5.2 Any Policy or Procedure that may impact the provision of health care services to the JAIL POPULATION which has not been made available to CHC shall not be enforceable against CHC unless otherwise agreed upon by both parties.
- 7.5.3 Any modification of the posted Policies and Procedures shall be timely provided to CHC. CHC, its HEALTH CARE STAFF, employees, agents and/or subcontractors shall operate within the requirement of a modified Policy or Procedure after such modification has been made available to CHC.
- 7.5.4 If any of the COUNTY and/or SHERIFF's Policies and Procedures specifically relate to the delivery of medical services, the COUNTY and/or SHERIFF's representative and CHC shall review the COUNTY and/or SHERIFF's Policies and Procedures and modify or remove those provisions that conflict with CHC's Jail Health Care Policies and Procedures.

- 7.6 DAMAGE TO EQUIPMENT. CHC shall not be liable for loss of or damage to equipment and supplies of CHC, its agents, employees or subcontractors if such loss or damage was caused by the sole negligence of the COUNTY and/or SHERIFF's employees.
- 7.7 SECURE TRANSPORTATION. The SHERIFF shall provide security as necessary and appropriate in connection with the transportation of a member of the JAIL POPULATION to and from off-site services including, but not limited to, SPECIALTY SERVICES, hospitalization, pathology and radiology services as requested by CHC. CHC shall coordinate with the SHERIFF's office for transportation to and from the off-site services provider or hospital.
- 7.8 OFFICE EQUIPMENT AND SUPPLIES. The SHERIFF shall provide use of COUNTY-owned office equipment, supplies and all necessary utilities (including telephone and fax line service) in place at the JAIL health care facilities except as otherwise set forth in Paragraphs 1.12 and 1.13. At the termination of this AGREEMENT, CHC shall return to the COUNTY possession and control of all COUNTY-owned medical and office equipment. At such time, the office equipment shall be in good working order, reasonable wear and tear excepted.
- 7.9 NON-MEDICAL CARE OF JAIL POPULATION. It is understood that the SHERIFF shall provide for all the non-medical personal needs and services of the JAIL POPULATION as required by law. CHC shall not be responsible for providing, or liable for failing to provide, non-medical services to the JAIL POPULATION including, but not limited to, daily housekeeping services, dietary services, building maintenance services, personal hygiene supplies and services and linen supplies.
- 7.10 JAIL POPULATION INFORMATION. In order to assist CHC in providing the best possible health care services to COVERED PERSONS, the SHERIFF shall provide, as needed, information pertaining to the COVERED PERSON that CHC and the SHERIFF mutually identify as reasonable and necessary for CHC to adequately perform its obligations under this AGREEMENT.

ARTICLE VIII COMPENSATION/ADJUSTMENTS

- 8.0 ANNUAL AMOUNT/MONTHLY PAYMENTS. The base annual amount to be paid by the COUNTY to CHC under this AGREEMENT is AMOUNT SPELLED OUT (\$AMOUNT) for a period of twelve (12) months. Each monthly payment shall be at AMOUNT SPELLED OUT (\$AMOUNT), pro-rated for any partial months and subject to any reconciliations as set forth below. The first monthly amount is to be paid to CHC on the NUMBER day of MONTH, YEAR for services administered in the month of MONTH, YEAR. Each monthly payment thereafter is to be paid by the COUNTY to CHC before or on the 1st day of the month of the month of service.

8.0.1

IF MULTI YEAR WITH INCREASE OF CPI

Year 2. Effective MONTH, YEAR, the base annual amount to be paid by the COUNTY to CHC in Year 2 shall be the annual amount of Year 1 multiplied by a fraction, the numerator of which is the Price Index (as defined below) for the month which is two

months immediately preceding the AGREEMENT renewal date, and the denominator of which is the Price Index for the same month for the year immediately preceding the AGREEMENT renewal date. However, the annual amount due for any year will not be less than the annual amount for the prior year. The "Price Index" is defined as the Consumer Price Index – All Urban Consumers, U.S. City Average, Medical Care Services (1982-84=100), published by the Bureau of Labor Statistics of the U.S. Department of Labor.

OR IF BASED UPON % INCREASE

Year 2. Effective MONTH, YEAR, the base annual amount to be paid by the COUNTY to CHC in Year 2 shall be the annual amount of Year 1, plus an increase of 3.5%.

8.1 QUARTERLY RECONCILIATION PROCESS. CHC will provide a quarterly reconciliation with the COUNTY for any amounts owed by either party pursuant to the terms of this AGREEMENT, including, but not limited to:

8.1.1 ADJUSTMENT FOR MADP. The quarterly reconciliation shall include a per diem adjustment based on the MADP of NUMBER (NUMBER) INMATES/DETAINEES. For each month reconciled, if the JAIL's MADP is greater than NUMBER (NUMBER) INMATES/DETAINEES, the compensation payable to CHC by the COUNTY shall be increased by the number of INMATES/DETAINEES over NUMBER (NUMBER) at the per diem rate of AMOUNT SPELLED OUT (\$AMOUNT).

8.1.2 ADJUSTMENT FOR COSTS IN EXCESS OF CAP AMOUNTS. The quarterly reconciliation shall include any amounts paid by CHC in excess of the financial limits listed in this AGREEMENT. The compensation payable to CHC by the COUNTY shall be increased by any costs paid by CHC in excess of the financial limits listed in 1.15.2 and 1.19.

8.1.3 ADJUSTMENT FOR ELECTRONIC MEDICAL RECORDS. The quarterly reconciliation shall include a per diem adjustment for electronic medical records based on the JAIL's MADP. For each month reconciled, the compensation payable to CHC by the COUNTY shall be increased by the per diem rates set forth in Exhibit B.

ARTICLE IX
TERM AND TERMINATION

9.0 TERM. The term of this AGREEMENT shall be NUMBER (NUMBER) year from MONTH DATE, YEAR at 12:01 a.m. through MONTH DATE, YEAR at 11:59 p.m. This AGREEMENT shall automatically renew for additional one year periods on MONTH DATE of each subsequent year with mutually agreed upon increases, unless this AGREEMENT is terminated or notice of termination is given, as set forth in this Article.

9.0.1 RENEWAL. Upon each subsequent renewal of this AGREEMENT pursuant to paragraph 9.0, an increase in the annual compensation amount shall be negotiated between the parties. Should the parties reach said agreement after the renewal date, the agreed upon increase shall be retroactive to the date of the renewal.

CHC reserves the right to evaluate and recommend staffing increases to be mutually agreed upon by both parties.

9.1 TERMINATION FOR LACK OF APPROPRIATIONS. It is understood and agreed that this AGREEMENT shall be subject to annual appropriations by the BOARD of the COUNTY.

9.1.1 Recognizing that termination for lack of appropriations may entail substantial costs for CHC, the COUNTY and the SHERIFF shall act in good faith and make every effort to give CHC reasonable advance notice of any potential problem with funding or appropriations.

9.1.2 If future funds are not appropriated for this AGREEMENT, and upon exhaustion of existing funding, the COUNTY and SHERIFF may terminate this AGREEMENT without penalty or liability, by providing a minimum of thirty (30) days advance written notice to CHC.

9.2 TERMINATION DUE TO CHC'S OPERATIONS. The COUNTY reserves the right to terminate this AGREEMENT immediately upon written notification to CHC in the event that CHC discontinues or abandons operations, is adjudged bankrupt or is reorganized under any bankruptcy law, or fails to keep in force any required insurance policies. Both parties agree that termination under this provision will be considered without cause.

9.3 TERMINATION FOR CAUSE. The AGREEMENT may be terminated for cause under the following provisions:

9.3.1 TERMINATION BY CHC. Failure of the COUNTY and/or SHERIFF to comply with any provision of this AGREEMENT shall be considered grounds for termination of this AGREEMENT by CHC upon sixty (60) days advance written notice to the COUNTY specifying the termination effective date and identifying the "basis for termination." The COUNTY shall pay for services rendered up to the date of termination of the AGREEMENT. Upon receipt of the written notice, the COUNTY shall have ten (10) days to provide a written response to CHC. If the COUNTY provides a written response to CHC which provides an adequate explanation for the "basis for termination" and the COUNTY cures the "basis for termination" to the satisfaction of the CHC, the sixty (60) day notice shall become null and void and this AGREEMENT will remain in full force and effect. Termination under this provision shall be without penalty to CHC.

9.3.2 TERMINATION BY COUNTY. Failure of CHC to comply with any provision of this AGREEMENT shall be considered grounds for termination of this AGREEMENT by the SHERIFF or the COUNTY who shall provide sixty (60) days advanced written notice specifying the termination effective date and identifying the "basis for termination." The COUNTY shall pay for services rendered up to the date of termination of the AGREEMENT. Upon receipt of the written notice CHC shall have ten (10) days to provide a written response to the COUNTY. If CHC provides a written response to the COUNTY which provides an adequate explanation for the "basis of termination," or cures the "basis for termination" to the satisfaction of the SHERIFF, the sixty (60) day notice shall

become null and void and this contract will remain in full force and effect. Termination under this provision shall be without penalty to the SHERIFF or the COUNTY.

- 9.4 TERMINATION WITHOUT CAUSE. Notwithstanding anything to the contrary contained in this AGREEMENT, the SHERIFF, the COUNTY or CHC may, without prejudice to any other rights it may have, terminate this AGREEMENT for their convenience and without cause by giving ninety (90) days advance written notice to the other party.
- 9.5 COMPENSATION UPON TERMINATION. If any of the above termination clauses are exercised by any of the parties to this AGREEMENT, the COUNTY shall pay CHC for all services rendered by CHC up to the date of termination of the AGREEMENT regardless of the COUNTY'S failure to appropriate funds.
- 9.6 PAYMENT OF CAPPED EXPENSES UPON TERMINATION OR EXPIRATION OF AGREEMENT. Upon the termination or expiration of this AGREEMENT, the administration of expenses listed in paragraph 1.19 ("CAPPED EXPENSES") shall be handled as follows:
- 9.6.1 If the CAP AMOUNT for the CONTRACT YEAR has been reached as of the date of termination or expiration of this AGREEMENT, CHC shall not be responsible for administration or payment of CAPPED EXPENSES and all invoices received by CHC for CAPPED EXPENSES shall be forwarded to the COUNTY for payment.
- 9.6.2 Upon termination or expiration of this AGREEMENT, CHC shall not be responsible for administration or payment of CAPPED EXPENSES and all invoices received by CHC for CAPPED EXPENSES shall be forwarded to the COUNTY for payment, regardless of whether the CAP AMOUNT for the CONTRACT YEAR has been reached. CHC shall forward to the COUNTY any rebate due pursuant to the terms of paragraph 1.19.1
- 9.7 PROPERTY DISPOSITION UPON TERMINATION. Upon termination of this AGREEMENT, CHC shall be allowed to remove from the JAIL any stock medications or supplies purchased by CHC that have not been used at the time of termination. CHC shall also be allowed to remove its property from the JAIL including its proprietary Policies and Procedures, Manuals, Training Material, and Forms and COUNTY agrees to maintain as confidential all CHC materials, documents or reports marked as confidential or proprietary.

ARTICLE X

LIABILITY AND RISK MANAGEMENT

- 10.0 INSURANCE COVERAGE. CHC shall, at its sole cost and expense, procure and maintain during the term of this AGREEMENT, the following coverage and limits of insurance:
- 10.0.1 MEDICAL MALPRACTICE/PROFESSIONAL LIABILITY. Medical Malpractice/ Professional Liability insurance in an amount not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate.

10.0.2 COMPREHENSIVE GENERAL LIABILITY. Comprehensive General Liability insurance in an amount not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate.

10.0.3 WORKER'S COMPENSATION. Worker's Compensation coverage as required by applicable state law.

10.1 ENDORSEMENTS. The Comprehensive General Liability policy shall contain additional endorsements naming the JAIL as an additional insured with respect to liabilities arising out of the performance of services under this AGREEMENT.

10.2 PROOF OF INSURANCE. CHC shall provide the COUNTY proof of professional liability or medical malpractice coverage for CHC's HEALTH CARE STAFF, employees, agents and subcontractors, for the term services are provided under this AGREEMENT. CHC shall promptly notify the SHERIFF, in writing, of each change in coverage, reduction in policy amounts or cancellation of insurance coverage. If CHC fails to provide proof of adequate insurance within a reasonable time under the circumstances, then the COUNTY shall be entitled to terminate this AGREEMENT without penalty to the COUNTY or the SHERIFF pursuant to the terms of Article IX.

10.3 INDEMNIFICATION. CHC agrees to indemnify and hold harmless the COUNTY, its officials, agents, and employees from and against any and all claims, actions, lawsuits, damages, judgments or liabilities of any kind whatsoever caused by, based upon or arising out of any act, conduct, misconduct or omission of CHC, its agents, employees, or independent contractors in connection with the performance or non-performance of its duties under this AGREEMENT. The COUNTY agrees to indemnify and hold harmless CHC, its officials, agents, and employees from and against any and all claims, actions, lawsuits, damages, judgments or liabilities of any kind whatsoever caused by, based upon or arising out of any act, conduct, misconduct or omission of COUNTY, its agents, employees, or independent contractors. The COUNTY and SHERIFF agree to promptly notify CHC in writing of any incident, claim or lawsuit of which they become aware and shall fully cooperate in the defense of such claim. The COUNTY and SHERIFF agree that CHC's indemnification and defense obligations do not apply for any costs or expenses, including attorney's fees or settlements, incurred or effected prior to written notice to CHC as set forth above. Upon written notice of claim, CHC shall take all steps necessary to promptly defend and protect the COUNTY and SHERIFF from an indemnified claim, including retention of defense counsel, and CHC shall retain sole control of the defense while the action is pending, to the extent allowed by law.

10.4 HIPAA. CHC, the COUNTY, JAIL, and SHERIFF and their employees, agents and subcontractors shall fully comply with, and shall implement all necessary policies and/or procedures in order to comply with, the requirements of HIPAA as it applies to the services provided under this AGREEMENT. The COUNTY, JAIL and SHERIFF and their employees and agents shall indemnify and hold harmless CHC from and against any claims of any kind made as a result of alleged or actual violations of HIPAA by the COUNTY, the SHERIFF and their employees, agents and subcontractors, unless such claims are proven to be caused by the sole negligence or willful misconduct of CHC.

ARTICLE XI
MISCELLANEOUS

- 11.0 **INDEPENDENT CONTRACTOR STATUS.** It is mutually understood and agreed, and it is the intent of the parties hereto that an independent contractor relationship be and is hereby established under the terms and conditions of this AGREEMENT. Nothing in this AGREEMENT shall be construed to create an agency relationship, an employer/employee relationship, a joint venture relationship, or any other relationship allowing the COUNTY or SHERIFF to exercise control or direction over the manner or methods by which CHC, its employees, agents or subcontractors perform hereunder, or CHC to exercise control or direction over the manner or methods by which the COUNTY or the SHERIFF, and their employees, agents or subcontractors perform hereunder, other than as provided in this AGREEMENT.
- 11.1 **SUBCONTRACTING.** In performing its obligations under the AGREEMENT, it is understood that CHC is not licensed or otherwise authorized to engage in any activity that may be construed or deemed to constitute the practice of medicine, dentistry, optometry, or other professional healthcare service requiring licensure or other authorization under state law. To comply with these requirements CHC may engage physicians or other clinicians as independent contractors ("Contract Professionals"), rather than employees, in order to supply the clinical services required under this AGREEMENT. CHC shall engage Contract Professionals that meet the applicable professional licensing requirements and CHC shall exercise administrative supervision over such Contract Professionals as necessary to insure the fulfillment of the obligations contained in this AGREEMENT. Contract Professionals shall provide clinical services under this AGREEMENT in a manner reasonably consistent with the independent clinical judgment that the Contract Professional is required to exercise. It is further understood that CHC may subcontract for specialized services such as pharmacy, medical waste, medical supplies and other services or supplies which it is required to provide under this AGREEMENT.
- 11.2 **AGENCY.** For purposes of asserting any statutory rights afforded to the COUNTY or the JAIL to pay providers for medical services at certain reduced rates, COUNTY and/or SHERIFF designate CHC as their agent to assert such rights and privileges.
- 11.3 **EQUAL EMPLOYMENT OPPORTUNITY.** CHC will not discriminate against any employee or applicant for employment because of race, color, religion, sex, ancestry, national origin, place of birth, marital status, sexual orientation, age or handicap unrelated to a bona fide occupational qualification of the position or because of status as a disabled veteran or Vietnam-Era veteran. CHC will distribute copies of its commitment not to discriminate to all persons who participate in recruitment, screening, referral and selection of job applicants, and to prospective job applicants.
- 11.4 **WAIVER OF BREACH.** The waiver of either party of a breach or violation of any provision of this AGREEMENT shall not operate as, or be construed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 11.5 **OTHER CONTRACTS AND THIRD-PARTY BENEFICIARIES.** The parties acknowledge that CHC is neither bound by or aware of any other existing contracts to which either the SHERIFF or the COUNTY are a party and which relate to the providing of health care to INMATES/DETAINEES at the JAIL. The parties agree that they have

not entered into this AGREEMENT for the benefit of any third person or persons, and it is their express intention that this AGREEMENT is for their respective benefits only and not for the benefits of others who might otherwise be deemed to constitute third-party beneficiaries thereof.

- 11.6 FORCE MAJEURE. In case performance of any terms or provisions hereof shall be delayed or prevented because of compliance with any law, decree or order of any governmental agency or authority of local, State or Federal governments or because of riots, war, terrorism, explosions, acts of civil or military authority, acts of public enemy, public disturbances, lack of adequate security escorts, strikes, lockouts, differences with workers, earthquakes, fires, floods, Acts of God or any other reason whatsoever which is not reasonably within the control of the party whose performance is interfered with and which, by the exercise of reasonable diligence, said party is unable to prevent; the party so suffering may, at its option, suspend, without liability, the performance of its obligations hereunder during the period such cause continues.
- 11.7 ASSIGNMENT. Except as otherwise provided herein, no party to this AGREEMENT may assign any of its rights or delegate any of its duties under this Agreement without the prior written consent of the other parties; provided however, that CHC may assign its rights or delegate its duties to an affiliate of CHC, or in connection with the sale of all or substantially all of the stock, assets or business of CHC, without the prior written consent of the other parties. Any unauthorized attempted assignment shall be null and void and of no force or effect.
- 11.8 NOTICES. Any notice of termination, requests, demands or other communications under this AGREEMENT shall be in writing and shall be deemed delivered: (a) when delivered in person to a representative the parties listed below; (b) upon receipt when mailed by overnight courier service, mailed by first-class certified or registered mail, return receipt requested, addressed to the party at the address below; or (c) upon confirmation of receipt if sent by facsimile to the fax number of the party listed below:

If for CHC:
Correctional Healthcare Companies, Inc.
General Counsel
6200 South Syracuse Way, Suite 440
Greenwood Village, CO 80111

If for COUNTY:

If for CHC: (720) 458-3478	If for COUNTY:

Such address or facsimile number may be changed from time to time by either party by providing written notice as provided above.

- 11.9 GOVERNING LAW. This AGREEMENT shall be governed by and construed in accordance with the laws of the State of STATE without regard to the conflicts of laws or rules of any jurisdiction.

- 11.10 EXECUTION AUTHORITY. By their signature below, each signatory individual certifies that they are the properly authorized agent or officer of the applicable party hereto and have the requisite authority necessary to execute this Agreement on behalf of such party, and each party hereby certifies to the other that any resolutions necessary to create such authority have been duly passed and are now in full force and effect.
- 11.11 SURVIVAL. The following provisions will survive any termination or expiration of the AGREEMENT: 1.15, 1.19, Article VIII, Article IX and Article X.
- 11.12 COUNTERPARTS. This AGREEMENT may be executed in several counterparts, each of which shall be considered an original and all of which shall constitute but one and the same instrument.
- 11.13 TITLES OF PARAGRAPHS. Titles of paragraphs are inserted solely for convenience of reference and shall not be deemed to limit, expand or otherwise affect the provisions to which they relate.
- 11.14 SEVERABILITY. In the event that any one or more provisions of this AGREEMENT shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provision of this AGREEMENT and this AGREEMENT shall be construed and enforced as if such invalid, illegal or unenforceable provision had never been contained herein.
- 11.15 ENTIRE AGREEMENT. This AGREEMENT constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. This AGREEMENT may be amended at any time, but only with the written consent of all parties.

IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be executed as their official act by their respective representative, each of whom is duly authorized to execute the same.

AGREED TO AND ACCEPTED AS STATED ABOVE:

County of county name, STATE

Correctional Healthcare Companies, Inc.

By: _____
AUTHORIZED PERSON
Title: TITLE

By: _____
Douglas D. Goetz
Title: Chief Executive Officer

Date: _____

Date: _____

Exhibit A

MINIMUM STAFFING PATTERN FOR CORRECTIONAL FACILITY

[illegible]

Exhibit B

ELECTRONIC MEDICAL RECORDS at COUNTY, STATE Effective DATE

DEFINITIONS

EMR SOFTWARE – The VIZION software package developed and distributed by CHC, including the original computer software, computer program, source code, object code, algorithms and related documentation to enable the creation, maintenance, storage and access of electronic medical records and includes all enhancements, upgrades, modifications and additions.

SERVER – The single computer server owned, operated and maintained by CHC.

1.0 EMR SOFTWARE USE.

1.0.1. **GENERAL USE.** For the duration of the AGREEMENT, CHC will maintain one copy of the EMR SOFTWARE on its SERVER for use by CHC HEALTH CARE STAFF at the JAIL.

1.0.2. **EMR SOFTWARE USE UPON TERMINATION.** Upon termination of the AGREEMENT, CHC shall provide COUNTY a stand alone, read only program which will allow the SHERIFF to search for, view and print medical records pertaining to INMATES/DETAINEES. Such data shall be in the same format the data was stored preceding termination of this AGREEMENT.

1.0.3. **COMPENSATION.** CHC will charge COUNTY on a monthly basis by multiplying the per diem rate listed below by the MADP of the JAIL. CHC shall reconcile amounts due under this AGREEMENT pursuant to Section 8.1.3 of the AGREEMENT. The per diem rates listed below may be adjusted upon agreement of COUNTY and CHC.

Payment Period	Per Diem Rate
	\$0.00

Upon expiration of the _____ payment period, an increase in the per diem amount shall be negotiated by the parties.

2.0 **INTELLECTUAL PROPERTY AND OTHER PROPRIETARY INFORMATION.** CHC has created, acquired or otherwise has intellectual property rights in the EMR SOFTWARE and all copies thereof. This AGREEMENT does not grant COUNTY or SHERIFF any intellectual property rights in the EMR SOFTWARE and all such rights are reserved by CHC. The EMR SOFTWARE and all CHC documents or images used in its application, including but not limited to CHC Nursing Protocols, are the confidential and proprietary information of CHC and may not be copied or reproduced by COUNTY or SHERIFF. CHC has no ownership or claim of ownership in any medical data that is accessed via the EMR SOFTWARE.

- 3.0 RESTRICTIONS. COUNTY and SHERIFF shall not: (1) disassemble, decompile, unbundle, reverse engineer, or translate any part of the EMR SOFTWARE, or otherwise reduce to a human perceivable form, or otherwise attempt to reconstruct or discover the source code of the EMR SOFTWARE; (2) modify, copy, duplicate, reproduce, license, or transfer or convey the EMR SOFTWARE; (3) customize, modify, translate or extend the functionality of the EMR SOFTWARE.
- 4.0 LIMITATION ON CHC's OBLIGATIONS. CHC is not responsible for any issues, support, or loss of functionality that may result from COUNTY or SHERIFF installing and using third-party software on or with the EMR SOFTWARE. CHC is not responsible for any COUNTY cost associated with interfacing the COUNTY'S software/hardware systems with CHC's EMR system. Furthermore, CHC shall not be liable for any loss of use, lost or damaged data, any inability to access or retrieve data, including any loss, damages, claims, suits or actions of any nature, including claims of injury to any person or persons or of damage to property, resulting from or caused directly or indirectly be reason of any error, omission, negligence, or wrongful act by the COUNTY or SHERIFF, their officers, agents and/or employees.
- 5.0 NO WARRANTIES. The EMR SOFTWARE is provided "as is", without warranty or representation of any kind, whether express or implied, or arising from common law, custom, usage or otherwise, or statutory, including without limitation, any implied warranties or non-infringement, merchantability, and fitness for a particular purpose, or pertaining to title, integration, accuracy, security or availability.
- 6.0 EMR SOFTWARE UPDATES. During the term of this AGREEMENT, CHC will provide COUNTY any available updates, modifications or enhancements which improve the speed, efficiency, or ease of use of the EMR SOFTWARE, or add additional capabilities to the EMR SOFTWARE.

Edwin E. Buss



Vice President of Operations

PROFESSIONAL HIGHLIGHTS

Correctional Healthcare Companies, Inc. – Greenwood Village, CO (October 2011 - Present)

Vice President of Operations

Florida Department of Corrections (February 2011 – October 2011)

Secretary

- Responsible for staff of 30,000
- Oversaw 152,000 offenders incarcerated and on probation/parole
- Managed budget of \$2.4 billion

Indiana Department of Corrections (August 2008 - February 2011)

Commissioner

- Responsible for staff of 10,000
- Oversaw 30,000 offenders
- Managed bi-annual budget of \$1.2 billion
- Key accomplishments include establishment of first statewide comprehensive model of correctional healthcare management.

Warden, Westville Correctional Facility and Indiana State Prison (1999 - 2008)

- Oversaw four different facilities in the state of Indiana
- Held managerial positions in adult male, female, and Juvenile facilities
- Responsible for Parole and Probation in two state jurisdictions

Correctional Unit Team Manager (1997 to 1999)

Custody Supervisor (1995 to 1997)

Correctional Captain (1994 to 1995)

Correctional Lieutenant (1991 to 1995)

Correctional Sergeant (1989 to 1991)

Correctional Officer (1987 to 1989)

Correctional Officer (1987 to 1997)

- Promoted to highest rank for uniformed officer over 10 years

MEMBERSHIPS AND AWARDS

Commissioner - American Correctional Association's (ACA) Accreditation Committee

Member - Association of the State Correctional Administrators (ASCA)

Auditor and Member - American Correctional Association

Warden of the Year in Indiana, 2005

Correctional Peace Officers International Supervisor of the Year, 1995

State Correctional Officer of the Year in Indiana, 1989

EDUCATION

Bethel University, Mishawaka, IN

Degree in Organizational Management

Vincennes University, Vincennes, IN

Degree in Criminal Justice

Daniel G. Ronay, CCE

352 Meadow Ridge Drive • Tallahassee • Florida 32312 • (317) 473-5705 •
daniel.ronay@correctioncare.com

Corrections & Operations Executive

A highly experienced Correctional Executive who has demonstrated the ability to lead diverse teams of professionals to new levels of achievements and success in a variety of highly strategic accomplishments. Sound management qualifications with an established track record during 18 years of hands-on experience in corrections and 32 years leading troops in the Armed Forces of the United States. Proven ability to successfully analyze an organization's critical requirements, identify deficiencies and potential opportunities, and develop innovative and cost-effective solutions for enhancing outcomes while orchestrating personnel and materials towards sound mission accomplishment.

Core competencies include:

- Mission Accomplishment
- Succession Management
- Leadership Development
- Operations Management
- Strategic Thinking
- Strategic Planning
- Mentoring
- Performance Measuring
- Organizational Restructuring

CAREER HIGHLIGHTS

- Streamlined Central Office staffing patterns for a leaner and efficient state government
- Established an Agency wide leaders communication system
- Designed and implemented the re-designation and relocation of 6 major correctional facilities that resulted in an increase of 2200 additional beds without new construction and better utilized state properties
- Participated in negotiating the nation's lowest Medical per diem rate with an "all in" holistic approach to delivery
- Assisted in the implementation of cost savings initiatives Agency wide that allowed a reversion to the state of \$26 Million during economically challenged times
- Assisted in the reduction of state employee footprint by nearly 2,000 employees through staffing assessments and restructuring of job assignments

PROFESSIONAL EXPERIENCE

DIVISION DIRECTOR OF OPERATIONS 11 Dec 2012- Present **Correctional Healthcare Companies**

Responsible for the operational oversight and leadership management of Division 1 comprised of over 25 medical sites within the southern United States. Comprised of, Federal & State prisons, ICE facilities, and county jails the division provides medical services to over _____ inmates daily.

Daniel G. Ronay, CCE

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DIRECTOR, REENTRY & COMMUNITY April 9 2012 - November 21 2012 Pennsylvania Department of Corrections

Responsible for the Reentry efforts of a jurisdiction that comprises 52,000 inmates and a Community Corrections Bureau consisting of 54 Community Correction Centers and Facilities with an annual operating budget of over 115 Million Dollars.

Selected accomplishments:

- Implemented a Reentry Strategic Planning Initiative
- Created Community Transitional Housing Unit Concepts
- Chairing multi-agency Task Force towards implementation of the Justice Reinvestment Initiative (JRI) in Pennsylvania

CHIEF DEPUTY SECRETARY, January 31, 2011 - November 1, 2011 Florida Department of Corrections

Chief advisor and second-in-command of a jurisdiction that comprises 27,500 staff, 102,000 inmates, 115,000 parolees, and 144 Facilities. Reports directly to the Secretary of Corrections. Supervised and coordinated an Executive Staff of 10 Corrections Executives aimed towards carrying out the Mission and Vision of the Agency and ensuring the delivery of the soundest public safety possible. Oversaw the operational tempo throughout the state. Directly supervised the Divisions of Re-entry, Budget, Human Resources, Staff Development and Training, and Legislative Affairs. Represented and oversaw the Agency during the Secretary's absence.

Selected accomplishments:

- Assisted in the management of the procurement process for a large scale prison privatization initiative
- Assisted in the management for the procurement process of state-wide medical privatization
- Assisted in the closure & consolidation of prisons resulting in a 50M savings to the state
- Streamlined duplicative staffing and managerial positions resulting in over 20M of savings
- Assisted in implementing sound and evidenced-based re-entry initiatives state-wide
- Directed the refinement and validation of Evidenced Based Programming for Re-entry

CHIEF OF STAFF, 2008 – 2011 Indiana Department of Correction, Indian

Chief advisor and second-in-command of a jurisdiction that comprises 7,500 staff, 28,000 inmates,

Daniel G. Ronay, CCE

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daniel.ronay@correctioncare.com

12,000 parolees, 21 Adult and 5 Juvenile Facilities. Reports directly to the Commissioner of Corrections. Supervised and coordinated an Executive Staff of 10 Corrections Executives aimed towards carrying out the Mission and Vision of the Agency and ensuring the delivery of the soundest public safety possible. Directly supervised the Divisions of Human Resources, Research and Planning, Construction Services, Staff Development and Emergency Operations, and Internal Affairs. Represented and oversaw the Agency during the Commissioner's absence.

Selected accomplishments:

- Implemented trendsetting communication and meeting methodologies
- Orchestration and management of four-year Agency Strategic Plan
- Instrumental in Capacity Management
- Fostered and sought Public/Private Partnerships that realized substantial cost savings
- Identified reduction of Central Office personnel without compromise to efficiency
- Directed the implementation of Veteran's Dormitory Programming
- Instrumental in the overall operational management of the Agency
- Championed numerous cost savings measures Agency wide

DIRECTOR, STAFF DEVELOPMENT & TRAINING, 2006-2008 Indiana Department of Correction, Indiana

Responsible for the overall training and career development of newly joined correctional staff as well as ongoing training and development of veteran staff.

Selected accomplishments:

- Implemented regionalized training throughout Agency resulting in substantial cost savings
- Developed and Implemented Emerging and Experienced Leadership Cohort Program
- Implemented Computer Based Training comprising over 75 modules
- Planned and hosted a National Mental Health Conference
- Collaborated with NIC in introducing Organizational Cultural Competence Agency wide
- Developed mentoring and training program for new Superintendents
- Served as Interim Deputy Commissioner of Administration for 4 month span

ASSISTANT SUPERINTENDENT - CUSTODY SUPERVISOR, 1995-2006 Indiana Department of Correction, Indiana

Managed and had oversight over the operations of Indiana's only juvenile Boot Camp and subsequently the largest juvenile maximum security facility. Additionally; served as Administrative Assistant to the Superintendent of Indiana's largest (3500+) male medium security facility. Responsible for custody and programming staff; maintaining and enforcing discipline, safety, security, and custodial measures and directed the management of the institutions in the absence of the Superintendent. Began corrections career as a Correctional Officer for 3 years.

Selected accomplishments:

- Led two facilities to their 1st ACA Accreditation
- Implemented new Juvenile Boot Camp Standards
- Created core competencies for staff and inmates

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daniel.ronay@correctioncare.com

- Responsible for operational and program management of high and medium security facilities

UNITED STATES ARMED FORCES

First Sergeant (Ret)

1974-2006

United States Marine Corps & United States Army

Retired from the United States Army in 2006. Led marines and soldiers during four decades and three combat tours inclusive of Beirut, Lebanon; Operation Desert Storm, and Operation Iraqi Freedom III. Vast experience in Infantry Tactics, Low Altitude Air Defence, and Combat Engineering. Held leadership positions in both garrison and combat for over twenty-five years. Adept at the operational management of people, equipment, funding, and time. Attended and graduated from a myriad of upper level leadership and management academies.

Selected accomplishments:

- Participated in and managed numerous
- Trained and mentored thousands of marines and soldiers
- Responsible for Detainee Operations in Tal' Afar, Iraq, USA
- Drill Instructor, USMC, Parris Island
- Advance Schools Course Supervisor, USMC, Camp Pendleton

EDUCATION

**Bachelor Degree,
Major in Leadership**

Bellevue University, Nebraska

Master's Candidate (Grad: 8/13)

Major in Organizational Performance

Bellevue University, Nebraska

PROFESSIONAL AFFILIATIONS

- American Correctional Association; *Certified Correctional Executive*
 - Indiana Correctional Association; *Past Treasurer 2003-2004*
 - Marine Corps League
-
-

Contract Manager

Professional Highlights

Correctional Healthcare Companies, Inc. – Greenwood Village, CO

Contract Manager, Division I

Sept 2011 – Present

Health Services Administrator – Kingman, Arizona

Apr 2011 – Sept 2011

- Performed all administrative duties for a complex health system servicing 1900 inmate-patients.
- Provided monitoring activities (audits, process review and approval, site survey support, etc.) for eight sites in Arizona, New Mexico, and Georgia.
- Provided business development support by performing site surveys and making operational go/no go recommendations for submission of bids in response to RFPs.

Arizona Department of Corrections – Phoenix, AZ

Health Services Regional Health Administrator– South

Jan 2007 – Oct 2010

Health Care Manager/Assistant to Bureau Administrator

July 2006 – Jan 2007

Facility Health Care Manager II - Tucson, Arizona

Aug 2001 – July 2005

Facility Health Care Manager I - Douglas, Arizona

July 1998 – Aug 2001

- Produced complex integrated medical and dental routine and emergency systems supporting varying populations of up to 15,000 customers.
- Organizing over 100 clinical, clerical, and professional staff to meet all mission requirements.
- Planned or managed budget issues at operating, capital, and strategic level. Developed State budget submissions for \$1.6M expenditure for development of an inpatient facility.
- Developed action plans and measurement criteria to meet accreditation agency requirements. Achieved four tri-annual accreditations.
- Created initial contract documents (Statement of Work and/or Request for Proposal), plan and participate in negotiations, monitor contract compliance of supporting providers and suppliers.
- Provided personnel support at all levels; preparation of hiring packages, interviewing, documenting performance, reviewing performance, counseling performance, and disciplining staff.
- Responsible for up to \$3 million budget with operating budgets of \$1.5 million.
- Planned development of, edited, and rewrote much of 500 page in-depth Standard Operating Procedure manual; coordinating the output of 15 authors.
- Provided responses to inquiries from family, friends, executives, legislators, Governor, Senators.
- For approximately one year provided Executive Assistant support to the Division Director; performing executive secretarial duties such as staff coordination, counseling, organizing meetings, coordinating VIP visits, keeping calendar, and drafting correspondence.
- Served as primary guide and receptionist for visiting VIPs; presenting prepared and off-the-cuff information regarding the organization and the site.

Copper Queen Community Hospital – Bisbee, Arizona

Director of Rural Health Clinics

Jul 2005 – Jul 2006

- Directed outpatient medical support services for rural location.
- Developed and managed professional staff peer review processes.
- Developed and managed professional staff remuneration plans for medical staff.
- Provided technical, executive, and governing board briefings and recommendations.
- Created policy and managed corporate responses regarding provider activities.
- Coordinated installation of NexGen Electronic Practice Management /Electronic Health Record
- Provided personnel activities at all levels; including hiring, monitoring and firing of physicians.
- Handled and addressed all complaints and concerns presented by customers.
- Prepared marketing documents and activities for area of responsibility

James A. Clenney



Contract Manager

Triwest Healthcare Alliance – Phoenix, Arizona

Manager, Provider Relations

1997 – 1998

- Managed (through twenty-eight consultants in sixteen states) contracting for a 20,000-provider network.
- Facilitated and lead large group trainings regarding professional responsibilities.
- Provided presentations to the general public regarding access to care and legislative processes.
- Provided technical and executive briefings and recommendations.
- Ensured accuracy of information and investigation of decisions in preparation for executive signature.
- Created policy and managed corporate responses regarding provider activities.
- Retained important contractor relationships through face-to-face negotiations.

Naval Medical Clinic / 2nd Construction Brigade – Gulfport, Mississippi

Clinic Administrator and Brigade Medical Officer

1994 – 1997

III Marine Expeditionary Force – Okinawa, Japan

Strategic Medical Plans Officer

1991 – 1994

- Multiple Joint Task Force operations on Okinawa
- Deputy Marine Expeditionary Force Surgeon
- Deputy US Forces Surgeon (Bangkok, Thailand)
- Deputy Combined/Joint Task Force Surgeon (Thailand)

Naval Dental Clinics – Bremerton, Washington

Director, Dental Clinic Administration

1987 – 1991

Navy Medical Inspector General Augmentee

3rd Force Service Support Group – Okinawa, Japan

Navy Personnel Officer – Camp Butler

1985 – 1987

- Multiple Joint Task Force and Multi-service operations

37th Combat Service Support Group, 3rd Medical Battalion – Uncheon, Korea

Company Commander/Primary Care Clinic Administrator

1984 – 1985

Eventide Lutheran Home - Moorhead, Minnesota

Nursing Aide

1979 - 1980

Noble Drilling Company - Zapata, Texas

Backup Tong Man (Floor Drilling hand)

1974-1975

Professional Education

William Carey College, Gulfport, MS

1997

MBA Degree: Business Administration – Health Care Administration

Marine Corps Command & Staff College, Quantico, VA

1991

Certificate: Strategic Studies

Concordia College, Moorhead, MN

1980

BA Degree: Hospital Administration

Naval School Of Health Sciences, San Diego, Ca

1974

Certificate: Hospital Corpsman

Contract Manager

Other Courses Completed

- Strategic Medical Readiness & Contingency
- Instructor Training Certification
- Plans, Operations, and Medical Intelligence
- Contracting Officer's Technical Representative
- FEMA Influenza Planning and Readiness
- FEMA National Incident Control System

Other Earned Credentials

- 6 Sea Service Deployment ribbons
- Top Secret - Granted 1990 (Inactive)
- 2 Navy Achievement Medals
- 2 Navy Commendation Medals
- Meritorious Service Medal

Director, Business Development

Professional Experience

Correctional Healthcare Companies, Greenwood Village, CO

2012 to Present

Director, Business Development

- Cultivate working relationships with key members located in Southeast
- Develop and administer systems and creative solutions for current and potential customers
- Enhance current opportunities with addition of community based alternatives

Atlantic City Rescue Mission, Atlantic City, NJ

2009 to 2011

Director of Operations

- Evaluate ongoing service deliverables and identify areas for improvement at Rescue Mission
- Coordinate with Director of Business Development and Executive Director of Community Partnerships to create strategy to increase donor base and completion of RFP's for new business opportunities.
- Assisted in creation of annual strategy with Executive Director of Community Partnerships and Director of Business Development to ensure that goals and budget are met.
- Implemented and trained employees on cognitive behavioral programming through National Institute of Corrections.
- Collaborate with county and community agencies to ensure seamless transition for residents of the Mission to other housing and/or other eligible services.

Community Education Center, Roseland, NJ

2006 to 2008

Director of Development

- Developed strategy for oversight and creation of new community corrections business unit
- Created strategy for new and organic business development in targeted market sectors
- Developed and designed behavioral health programs for inpatient and outpatient settings
- Established and managed highly successful business relationships and promoted services

BI Incorporated, Boulder, CO

1995 to 2005

East Coast Director of Operations and Development

- Designed business development strategies, reviewed RFP's and determined suitability of potential business in terms of "fit" and potential profitability, oversaw lobbying efforts and represented the company in contacts with clients, elected officials, public officials and the press.
- Provided oversight and management regarding new program implementation including financial, staff and facility planning, contract fulfillment and all operational service provisions/contractual obligations of regional Centers.
- Collaborate with Senior Staff and proposal division to create compliant proposals to RFP's

Director, Business Development

with support of “What Works” and evidence based practices.

- Provide support and insight with delivery of individualized models for juvenile/adult adult offender populations which incorporate best practices and integrate treatment, cognitive behavior modality, education, electronic monitoring, and GPS.

NYS Department of Corrections, Albany, NY

Corrections Officer

1984 to 1994

- Implemented and enforced facility policy and procedure
- Obtained maximum security clearance

Director, Business Development

Educational Background

Master of Education in Educational Counseling (1994)

Florida Atlantic University, Boca Raton, Florida

Major concentration: Educational Psychology

Collateral areas: Mental Health

Bachelor of Science in Psychology (1991)

Trinity International University Miami, Florida

Specialization: Psychology

Collateral areas: Theology

Additional Training

- Motivational Interviewing
- Level of Services Inventory - Revised
- Evidence Based Programming and Curriculum

Professional Certifications

- Moral Reconciliation Therapy
- Social Responsibility Therapy

Professional Memberships

- American Association for Counseling & Development
- American Correctional Association
- American Counseling Association
- American Probation and Parole Association
- International Corrections and Prisons Association

Chief Executive Officer

PROFESSIONAL HIGHLIGHTS

January 2007 to Present **Correctional Healthcare Companies, Inc.** – Greenwood Village, CO
Chief Executive Officer

- Oversees company operations including human resources, finance, operations, and sales and marketing
- Manages growing revenue stream from organic and acquisition growth
- Facilitates strategic meetings to ensure that corporate vision is met
- Assists departments in achieving company goals

2004 to 2007 **HMS Healthcare** – Denver, CO
Senior Vice President and CFO

- Responsible for all aspects of corporate finance and core operations. Responsibilities included management of a comprehensive \$190 million credit facility, lender and shareholder relationships, mergers and acquisitions, all integration initiatives, information technology and claims/customer services operations.
- Increased enterprise value 56% (\$140 million), producing a shareholder ROI of 2.44:1 and an IRR of 147% in the July 2005 sale of the company.
- Accomplished, in less than one year:
 - Negotiated and closed two strategic acquisitions totaling more than \$200 million.
 - Managed the integration process for all acquisitions, reducing operating costs by more than \$8.3 million (18%) through integration synergies.
 - Negotiated a sale/lease back of real estate generating \$18 million cash.
 - Generated a dividend distribution to shareholders representing a 39% return of original equity investment six months after initial funding.

2000 to 2004 **The Trizetto Group, Inc.** – Denver, CO
Vice President

- Managed three regional health plans (HMOs) in three states, totaling more than 300,000 members and \$350 million annual revenue in the publicly traded company.
- Responsibilities included strategic planning, product development, managing board of director's relationships of each plan, recruiting and managing health plan executive teams, negotiating provider contracts and working directly with State Regulators.
- Served as a member of both the board of directors and finance committees.
 - Developed and deployed corporate strategy for each regional health plan.
 - Managed all three plans from \$16 million cumulative annual operating losses to more than \$9 million cumulative annual operating gains.
 - Orchestrated full technology system conversions for two of the three regional plans, resulting in a 25% increase to productivity.
 - Implemented medical management and cost of care tools, reducing medical loss ratios by more than 5%.
- In addition, managed the Provider Services division of The Trizetto Group. Products included operations management, as well as technology solutions for physician-based organizations.
- Responsibilities included P&L, executive management, client relations and strategic vendor relations.
- Redesigned the divisions operating model, resulting in a 20% reduction in operating costs.
- Renegotiated vendor contracts, resulting in a savings of more than 25%.
- Renegotiated a single client contract, realizing a profit worth more than the initial stated fair market value of the entire division.

Chief Executive Officer

1995 to 2000 **Sloans Lake Managed Care** – Denver, CO

Chief Operating Officer/CFO

- Responsible for all aspects of corporate operations, including finance, underwriting, network development, provider relations/contracting, claims/customer service, information technology and human resources of the “for profit” high growth managed care corporation.
- Managed the company from \$11 million to more than \$140 million in annual revenue.
- Designed and implemented a statewide HMO product, consolidating operations, resulting in significant operating efficiencies.
- Developed and implemented new “Point of Services” and “Open Access” products.
- Directed a business process re-engineering project identifying more than \$2 million in annual operating cost savings.
- Selected and implemented a new Enterprise-wide IT system on time and under budget.
- Successfully marketed and sold the company, generating significant shareholder returns in both 1997 and again in 2000.

1991 to 1995 **Portercare Adventist Health System** – Denver, CO

Senior Vice President/CFO

- Managed corporate financial operations and strategy for the four hospital not-for-profit system. Responsibilities included recruiting and managing hospital CFO’s management of finance, business office, information technology, reimbursement, capital planning and a \$90 million investment portfolio.
- Managed the \$400 million corporation from a \$7 million operating loss to an \$8 million operating profit.
- Successfully restructured and refinanced nine outstanding bond issues into a single \$190 million Master Trust Indenture, generating \$40 million new capital while reducing total interest costs.
- Consolidated finance, billing and IT functions, reducing corporate operating expenses by 30%.
- Significantly reduced corporate accounts receivable, generating more than \$20 million cash for the corporation.

1987 to 1991 **Adventist Health System/Rocky Mountain Region** – Denver, CO

Regional Director/Internal Audit

- Coordinated and supervised financial and operational audits for member organizations, working extensively with several “Big Three” accounting firms.
- Managed cost reductions and budget planning for member organizations.
- Designed and managed feasibility studies for new facilities working closely with corporate management and Board of Directors.

1985 to 1987 **Adventist Health System/Great Lakes Region** – Chicago, IL

Senior Auditor

- Worked directly with KPMG Peat Marwick managing annual financial and operational audits for member organizations and affiliates.

QUALIFICATIONS

- ☒ More than 20 years experience in the healthcare industry.
- ☒ Proven track record of solid financial management.

Douglas D. Goetz



Chief Executive Officer

AFFILIATIONS

- AICPA
- Colorado Society of CPAs
- HFMA
- Appointed by State Governor to Board of Directors of the Colorado Small Employer Reinsurance Program

EDUCATION

Union College – Lincoln, NE
B.S. Finance and Management, 1983

DONALD E. HOUSTON



Chief Operating Officer

PROFESSIONAL HIGHLIGHTS

January 2010 to Present **Correctional Healthcare Companies, Inc.** – Greenwood Village, CO
Chief Operating Officer

EXPERIENCE

PNA (January 2010 – December 2010)

President

- Served as President of PNA until its acquisition by CHC in December 2010.

The GEO Group, Inc (1992 – 2009)

Senior Regional Vice President; (March, 2006 - 2009)

- As a senior officer, directly manage largest of three regions with oversight responsibility over other two.
- Achieved \$600 million revenue under management, which amounts to 83% of GEO's Operations.
- Manage two regional Vice Presidents, 17 Directors and managers.
- Responsibility over 7,000 employees, 38,000 offenders
- Oversee all business development, operational, financial, compliance, legal, systems, and human resource related issues.

Vice President, Central Region; (July, 2000 - March, 2006)

- Manage 22 multi-million dollar projects, employing 3,000 staff, housing 18,000 offenders.
- Grew revenue 125% from \$100 Million to \$275 Million in six years, making it the fastest growing most profitable region in the company.
- Manage executive-level staff in a district office operating semi-independently from Corporate Headquarters.
- Work closely with major clients: Texas Department of Criminal Justice, Oklahoma Department of Criminal Justice, Louisiana Department of Public Safety and Corrections, Homeland Security, Bureau of Prisons, Immigration and Customs Enforcement, U.S. Marshal and various counties governments.
- Works closely with senior members of the Executive and Legislative Branches of local, state and federal government.

Corporate Office Positions; (1992 – 2000)

Vice President Adult Services; (1998 – 2000)

- Operational responsibility of all domestic facilities managed by GEO.
- Participated in project development.
- Maintained client relations with 10 State Departments of Corrections as well as several Federal Agencies.

Vice President Operations; (1995-1998)

- One of three Vice Presidents responsible for the domestic operations of GEO.
- Responsible for the start-up of 15 new multi-million dollar projects from 1995 – 1998.
- Supervised over 1,000 employees.

Chief Operating Officer

Vice President Programs; (1994-1995)

- Responsible for all program services domestically and internationally for GEO
- Developed curriculum
- Supervised more than 200 professional level employees

Warden, Bridgeport, TX 520-bed facility; (1992-1994)

The chief executive officer for a 520 bed correctional facility. The responsibilities of a Warden are similar to those of a city manager. Responsible for food service operations, business management, medical, sanitation, security operations, risk management, Human Resources, training, etc

Supervised 140 employees

Texas Department of Criminal Justice

1984 - 1991

Supervisor of Diagnostic and Evaluation

- Responsible for staff of Psychologists, Mental Health screens and Psychological Testers
- Responsible for the intake screening and placement of more than 25,000 offenders into the state correctional system

Livingston High School

1982 - 1983

Coach and Educator

- Coached Varsity Track and Cross-County and Junior Varsity Football
- Taught Special Education and History

United States Army

1971 - 1978

Russian Linguist

- Four years as a Russian Language instructor at the Defense Language Institute preparing Department of Defense personnel in technical language skills.

United States Navy Reserve

1987- 1999

Russian Linguist

- Served as a member of the On-Site Inspection Agency (OSIA) treaty verification team. Validated destruction of missiles pursuant to the provisions of the Intermediate Nuclear Forces Treaty.
- Top Secret clearance

EDUCATION

Sam Houston University, Houston, TX

Post Graduate Work (Psychology and Educational Diagnostics) 1984

BA, Kinesiology, 1978 -1982, Minor, History

BA, Russian, 1978 -1982, Minor, Special Education

Chief Financial Officer

PROFESSIONAL HIGHLIGHTS

June 2010 to Present **Correctional Healthcare Companies, Inc.** – Greenwood Village, CO

Chief Financial Officer

- Oversees company financial operations
- Manages growing revenue stream from organic and acquisition growth
- Facilitates strategic meetings to ensure that corporate vision is met
- Assists departments in achieving company goals

2007 to 2009 **Bariatric Partners, Inc** – Charlotte, NC

Chief Financial Officer

Bariatric Partners, a venture funded company, owned and operated ambulatory surgery centers through joint venture relationships.

- Reorganized all financial operations with a team approach to provide more efficient centralized accounting activities such as timely monthly financial reporting, billing and collections, cash management, purchasing, inventory management, and accounts payable
- Developed first "real" budget and monthly financial reporting package for monitoring and managing financial performance through key metrics in a timely manner.
- Developed cash management techniques for monitoring burn rates and facilitated the collection of deposits in a timely and accurate manner at the surgery centers
- Resolved structural issues with a bank financing that had been previously negotiated.
- Completed additional bank financing to fund the build out and equipment requirements for a start up center at favorable financing terms and conditions.

2001 to 2007 **Renal Ventures Management, LLC** – Golden, CO

Chief Operating/Financial Officer

- Successfully negotiated and structured several debt financings totaling \$25 million including term loans and lines of credit, without personal guarantees, for development and acquisitions. Also completed a new deal with a major financial institution structuring additional mezzanine and senior debt financing..
- Managed company growth while improving EBITDA margins from 3.9% to in excess of 20% annually. Improved cash flow from operations from a high burn rate to positive cash flow from operations in excess of \$8 million annually Improved shareholder value by approximately four times
- Redesigned organizational structure to keep pace with company growth and to enhance accountability standards
- Developed the Chairman's Quality Index (CQI) concepts in concert with physicians for measuring "quality of care" provided at the local level
- Developed and implemented systems and controls to keep pace with company growth that included key financial / operational metrics for measuring labor productivity, product utilization, and financial performance at the user, management, and Board levels

1998 to 2001 **Clear Vision Laser Centers** – Lakewood, CO

Chief Financial Officer

- Responsibilities included all traditional aspects of finance and accounting including accounting, planning and budgeting, financial reporting, cash management, information technology and investor relations.
- Key member of the team that successfully presented, negotiated, and structured the sale of majority interest of the company to a New York based venture capital firm. The transaction was completed at

Chief Financial Officer

an attractive multiple of EBITDA and provided liquidity to early stage investors and additional growth capital to the company.

1995 to 1998 **QCI Holdings, Inc.** – Wheat Ridge, CO

Chief Financial Officer

- Responsibilities included all traditional aspects of finance and accounting that included accounting, budgeting and planning, information systems and raising capital. Member of the Board of Directors committee that successfully negotiated the sale of the company to a German based company at an attractive multiple of EBITDA.

1991 to 1995 **Provenant Health Partners** – Denver, CO

Treasurer

- Responsibilities included cash management, billing and collection operations, regulatory compliance, real estate portfolio management and special projects. In addition, member of the restructuring team that successfully turned the organization to profitability. Several years later, Provenant merged and is known today as Centura Health

QUALIFICATIONS

- ☒ More than 20 years experience in the healthcare industry.
- ☒ Proven track record of solid financial management.

AFFILIATIONS

- **Certified Public Accountant** – Colorado
- **AICPA**
- **Colorado Society of CPAs**
- **Missouri Society of CPAs**

EDUCATION

University of Missouri, St. Louis, MO
B.S. Business Administration

Raymond Herr, M.D.



Chief Medical Officer

Professional Highlights

Correctional Healthcare Management, Inc. – Greenwood Village, CO 2007 to present
Associate Medical Director

Kaiser Permanente – Denver, CO 1993 to May 2007
Physician, Department of Family Medicine

Havasupi Reservation – Supai, AZ 1992 to 1993
Indian Health Service Physician/ Temporary Staff

Davis-Monthan Air Force Base – Tucson, AZ 1990 to 1992
Part-time Emergency Department Physician

Thomas-Davis Medical Clinic – Tucson, AZ 1990 to 1992
Part-time Urgent Care Physician

Sandwich Community Hospital – Sandwich, IL 1989
Emergency Medicine Physician

Licensure

- State of Colorado #31138 Granted 1991
- State of Arizona #19377 Granted 1990 (inactive)

Certifications

- Board Certified- Preventive Medicine
- ACLS
- Team Physician Certified, ACSM

Volunteer Activities

Women in Crisis Center – Denver, CO 2001 to Present
Physician Volunteer

Samaritan House – Denver, CO 2000 to present
Physician Volunteer

D'Evelyn High School – Lakewood, CO 1994
Team Physician Volunteer

Raymond Herr, M.D.



Chief Medical Officer

Santa Rita High School – Tucson, AZ

1991

Team Physician Volunteer

Saint Basil Free Clinic – Chicago, IL

1988 to 1989

Physician Volunteer

Awards and Honors

- Adler Scholar Award, 1986
- Chief Resident, Preventive Medicine, 1991
- Service Excellence Award, Emergency Medicine Department, Davis-Monthan AFB, 1992

Education

University of Arizona – Tucson, AZ

M.S. Exercise Physiology, 1990

University of Colorado School of Medicine – Denver, CO

M.D.; 1987

Colorado College – Colorado Springs, CO

B.A.; Chemistry, 1981

Internship and residency Training

Saint Joseph Hospital – Denver, CO

General Surgery, 1993

University of Arizona Health Sciences Center – Tucson, AZ

Preventive Medicine, Clinical Sports Medicine Track, 1990 to 1991

Rush-Presbyterian-St. Luke's Medical Center – Chicago, IL

General Surgery, 1987 to 1989

Fellowship Training

University of Arizona Health Sciences Center – Tucson, AZ

Sports Medicine Fellow, 1992

Faculty Development Fellow, 1992

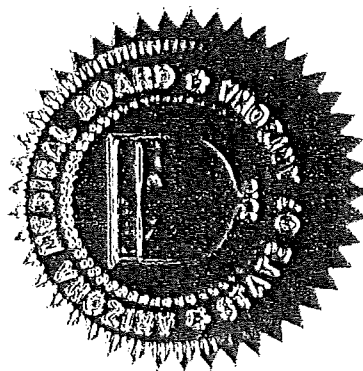
Arizona Medical Board

State of Arizona

LICENSE 19377

*This Is To Certify, that Raymond Karl Herr, MD
having a diploma dated May 23, 1987 has complied with the applicable provisions of
Chapter 13, Title 32, Arizona Revised Statutes, as amended, required to practice Medicine in the State of Arizona, and
therefore, is entitled to so practice. This license shall be evidence thereof unless or until suspended or revoked.*

*In testimony whereof, the ARIZONA MEDICAL BOARD of the STATE OF ARIZONA has issued this LICENSE and
caused the same to be signed by its EXECUTIVE DIRECTOR, and its SEAL to be hereto affixed this
1ST day of March, A.D., 2012.*



EXECUTIVE DIRECTOR

Professional Experience

Correctional Healthcare Companies, Greenwood Village, CO **2011 to Present**

Executive Vice President, Community Health Services

- Duties include the development and lead consult on correctional treatments, research, staff training and business related functions.

Correctional Counseling, Inc. and Counseling Centers Incorporate, Memphis, TN **1987 to Present**

President

- Duties include the development of correctional treatments, research, staff training and business related functions

Health Industries of America, Memphis, TN **1987 to 1989**

Vice President of Behavioral Programs

- Developed and designed behavioral health programs for inpatient and outpatient settings
- Developed unique counseling programs to reduce cost and maximize staff training and development

Mid-Town Mental Health Center, Memphis, TN **1985 to 1987**

Director of Clinical Services & Crisis Stabilization Unit

- Duties involved establishing the newly formed Crisis Stabilization Unit, a cooperative effort among Memphis mental health centers to provide temporary housing for people in crisis
- Maintained staff adherence to standards of quality care, regulations regarding mental health care, and staff training and development

Whitehaven Southwest Mental Health Center, Memphis, TN

Coordinator of Clinical Services **1984 to 1985**

- Duties involved insuring that appropriate and effective services were delivered to a wide ranging mental health consumer population

Clinical Coordinator of Programs **1981 to 1984**

- Duties involved direct supervision of case managers, counselors, and others involved in the provision of mental health services.

Program Psychologist & Director of Emergency Services **1978 to 1981**

- Duties involved running the day-to-day operations of Adult Day Treatment Program and insuring adequate emergency services coverage

Executive Vice President, Community Health Services

Educational Background

Doctor of Education in Educational Counseling (1984)

Memphis State University, Memphis, Tennessee

Major concentration: Educational Psychology

Collateral areas: Counseling and Psychology

Master of Science in Psychology (1976)

Memphis State University, Memphis, Tennessee

Specialization: Experimental Psychology

Bachelor of Science in Psychology (1973)

Memphis State University, Memphis, Tennessee

Minors: Biology and Chemistry

Additional Training

- National Institute of Mental Health Training in Adult Partial Hospitalization Programs (1978)
- NIHM Cross Cultural Training Institute; University of Miami Medical School (1980)
- NIMH Training in the Development of Emergency Services Programs (1981)

Professional Certifications

- American Psychological Association of Presidential Citation, May 2009
- Certified Professional Counselor
- Certified Marriage and Family Counselor
- State of Tennessee Certification

Professional Memberships

- American Association for Counseling & Development
- Public Inmate Counselor's Association
- American Correctional Association
- Faculty, National Judicial College
- American Counseling Association
- California Association of Drug Court Professionals
- Faculty, National Drug Court Institute
- National Criminal Justice Association

Publications and Reports Available Upon Request

General Counsel

PROFESSIONAL HIGHLIGHTS

2007 to Present Correctional Healthcare Companies – Greenwood Village, CO
General Counsel

- General Counsel for Parent Corporation and two subsidiary correctional healthcare companies.
- Responsible for corporate governance, contract drafting/review and overall risk management duties including insurance, supervision of litigation and loss prevention functions.

2006 to 2007 Illinois Department of Corrections, Shawnee Correctional Center – Vienna, IL
Assistant Warden Operations

- Served as Duty Administrative Officer and responsible for overall security operations of a high medium security correctional facility (1,800 beds) and a 200-bed Minimum Security Work Camp including the supervision of all security staff, Maintenance Department, Correctional Industries, and Dietary Unit.
- Developed and revised operating policies and procedures related to Operations areas. Served as Chief Administrative Officer in absence of Warden.

2004 to 2006 Illinois Department of Corrections, Tamms Closed-Maximum Security
Correctional Center – Tamms, IL
Warden

- Served as Chief Administrative Officer of the State's only Super-Maximum Security prison, which houses the Illinois Department of Corrections' most disruptive, violent and problematic inmates (500 beds) and the State's execution chamber.
- Also responsible for a companion 200-bed Minimum Security Unit.
- Charged with overall responsibility for the formulation of institutional policies and procedures as well as the continued efficient operation of the institution and management of its offenders and staff including the review, control and approval of the \$27M facility budget.
- Responsible for successfully employing two consecutive 10% annual budget reductions to meet fiscal constraints.

2002 to 2004 Illinois Department of Corrections, Tamms Closed-Maximum Security
Correctional Center – Tamms, IL
Assistant Warden Programs

- Served as Duty Administrative Officer and Supervisor of Program Departments including Clinical Services, Health Care Unit, Mental Health, Education, Chaplaincy Services, Dietary and Volunteer Services for the Closed-Maximum Security Facility and 200-bed Minimum Security Unit.
- Developed and revised operating policies and procedures related to Program areas.

1999 to 2002 Illinois Department of Corrections, Tamms Closed-Maximum Security
Correctional Center – Tamms, IL
Legal Counsel

- Provided legal advice, opinions and consultation to Department administrators and employees.
- Responded to inquiries from various governmental and private sources including media, State's Attorneys, Public Defenders and Judges.

General Counsel

- Acted as liaison to Office of the Attorney General in litigation matters including meetings with Assistant Attorneys General, coordination of legal strategy, discovery and responses to settlement demands.
- Represented the Department and its employees before the Human Rights Commission and as Special Assistant Attorney General in high profile class action litigation.
- Reviewed and drafted department rules, administrative and institutional directives, leases and contracts.
- Participated in training of investigators, correctional officers, parole agents and administrators and conducted informational seminars and training for groups outside the Department. Oversaw Early Case Intervention personnel and inmate and employee litigation arising at 10 correctional centers and two youth centers in Southern Illinois.

**1998 to 1999 Office of the Illinois Attorney General, Regional Office – Carbondale, IL
Assistant Attorney General - Sex Crimes Task Force SIRT**

- Assisted local State's Attorneys by providing all levels of investigative and prosecutorial assistance in felony and misdemeanor criminal sexual assault cases in the Southern twenty-eight Illinois counties.
- Supervised ongoing investigations of ten state police special agents including obtaining and executing court ordered search warrants and overhears. Civilly committed repeat offenders under the Sexually Violent Persons Commitment Act.

**1996 to 1998 Office of the Illinois Attorney General, Regional Office – Carbondale, IL
Assistant Attorney General - Consumer Fraud Bureau**

- Sole attorney responsible for enforcement of Consumer Fraud Act in 28 Southern Illinois counties.
- Conducted civil investigation, discovery and litigation against numerous individuals and businesses for violation of state and federal consumer laws.
- Conducted interviews and oversaw undercover investigations into business practices to determine compliance with the law. Assisted with criminal prosecutions of official misconduct cases.

**1995 to 1996 Gilbert, Kimmel, Huffman & Prosser, Ltd. – Carbondale, IL
Associate Attorney**

- Performed all aspects of civil and criminal litigation including court appearances, depositions, preparation of pleadings and motions, discovery and legal research. Appellate work including research and preparation of briefs and replies. Areas of concentration included labor, criminal, education, real estate and family law.

**1994 to 1995 Office of the State's Attorney, Jackson County – Murphysboro, IL
Law Clerk**

- Conducted Pre-trial and trial research for both civil and criminal cases. Assisted practicing attorneys in courtroom criminal felony and misdemeanor cases including possession of narcotics, battery and domestic violence.

General Counsel

1995 to 1996 **Office of the Public Defender – Murphysboro, IL**
Law Clerk

- Aided in the supervision of individual legal cases through the entire trial process. Duties included interviewing clients, investigating crime scenes, and researching and writing legal memoranda.

MEMBERSHIPS

- American Correctional Association
- Illinois Correctional Association

EDUCATION

Southern Illinois University School of Law – Carbondale, IL
Juris Doctor

Southern Illinois University – Carbondale, IL
B.S. in Advanced Technical Studies Concentration in Business Management

WENDY L. DUNEGAN



Senior Vice President, Operations

PROFESSIONAL EXPERIENCE

Correctional Healthcare Companies, Inc. – Greenwood Village, CO

Senior Vice President, Operations

2011 to Present

- Senior officer responsible for Field Operations in \$250 Million Diversified Company providing services at over 250 sites in 26 states.
- Manage 4 Divisional Executive-Level Vice Presidents, who in turn have in excess of 21 mid-level Directors and Managers as direct reports supervising over 2,000 field-level employees.
- Report directly to and support the Chief Operating Officer to attain company goals
- Work closely with clients at the local, State and Governmental level.
- Ensure contract compliance and accreditation standards are consistently met.
- Direct business standards and controls across field operations.
- Work with Project Development on proposals for new local, State and Federal business.

The GEO Group, Inc – San Antonio, Texas

Regional Director, Business Management

1998 to 2010

- Executive-level position responsible for the financial oversight and management of 25 multi-million dollar projects in a four-state region with annualized revenue of \$300+ Million.
- Responsible for over \$1 Billion in company and client-owned assets.
- Member of the Regional Senior Management team involved in multi-million dollar project development, project pricing, contract development and negotiation for both short-term and long-term contracts, contract compliance, preparation and oversight of budgets, planning for an managing capital expenditures.
- Worked closely with the Region's clients to ensure contracts are in full compliance.
- Worked with both clients and State Legislatures to ensure funds are available for contracts.
- Responsible for internal controls within a publicly traded company with revenues in excess of \$1 Billion.
- Supervise 50+ professional-level managers in functional areas of Business Management, Administration, Human Resources, Information Technology, Commercial Food Service and Maintenance.

EDUCATION & CERTIFICATIONS

Cameron University – Lawton, OK
1995 – B.A. Accounting

Certified Public Accountant, 1995



CHC does not rely on off-the-shelf, one-size-fits-all solutions for our clients and believes that technology designed specifically for correctional settings provides a strategic advantage to our clients. Because of this, CHC developed Vizion®, a cost-effective suite of products, easily customizable, that supports our clients and allows information to be shared on a real-time basis.

CHC is a technological leader in the industry and has developed a proprietary, customizable electronic medical records (EMR) system called Vizion®. We understand that every site comes with a specific set of needs, and we set out to develop a program that would easily fit into different scenarios. As medical record technology in the general community begins to advance, we made it our mission to provide inmates, our employees, and our partner-clients with the same conveniences. While any of our competitors can buy commercial-off-the-shelf medical records software, we didn't settle for a "one size fits all" solution.

As CHC's proprietary system, Vizion differentiates itself by allowing complete customization for reporting, digital input forms for intake and treatment, custom problem-oriented records, seamless outbound email communication, and the exportation of data to office applications such as Microsoft Excel. Additionally, Vizion can be customized to integrate seamlessly with any other system the facility requires. Through the implementation of Vizion, facility and medical staff are able to quickly and efficiently carry out tasks such as recording a sick note in a chart, organizing medpass, or scheduling a follow-up reminder. Saving time on medical records means more time for treating inmates and performing rounds. Additionally, uniform and well-organized records will allow authorized personnel to easily pick up where other staff members leave off.

Benefits of Vizion include:

- **Convenience of transfer** – with an electronic web-based system, Vizion will promote an ease of use for the transfer of information of each inmate's record as he or she is transferred
- **Ability to interface with offender management systems** – our developers are able to create an interface with any offender management system, allowing seamless transition of information and easier inmate tracking
- **Completely customizable** – special commands, reminders, and forms can be incorporated into Vizion and customized to the Detention Center's needs
- **Cost savings** – decreased medical records personnel results in decreased staffing costs to our clients
- **Time savings** – tedious tasks take much less time, allowing more time for medical services
- **Compliance checks** – automated protocol checks are triggered to maintain compliance with standards
- **Alerts for review** – Physicians are automatically reminded when they need to review medical staff notes
- **Statistical reporting** – detailed fields are created in order to provide specific statistical reports to jail administration as needed
- **Automatic policies and procedures** – policies and procedures are pre-loaded (and customized) with the software, prompting medical professionals as they move through treatment
- **More detailed notes** – hand writing notes can be difficult and tiring, but typed notes allow more time to include detail and descriptions

- **Legible and Accurate** – typed notes are easy for anyone to read and uniform in format, leaving little room for error.
- **Automatic interface with UM** – offsite visits, medication administration, and other UM functions are automatically tracked and interface with our UM reporting system to keep detailed logs on all services

Vizion is a browser-based application that requires no specialized hardware or software onsite, only a computer or laptop and an internet connection. It combines scanned documents and dynamic (keyed) data entry into one consolidated patient record. Currently, Vizion is being used in six of CHC's facilities and is able to fully interface with each location's online management systems. We anticipate no problems in being able to interface with any IDOC/IDJJ systems, and are able to interface with Cerner without any problems or issues.

Vizion was built on Microsoft SQL Server database management system, using Microsoft's .net development tools with web page design for Internet Explorer. This single-platform development approach ensures that communication occurs in real time between the EHR, pharmacy, MAR, Utilization Management, and claims processing components.

Vizion fulfills the following features:

- It can integrate and exchange encounter data in XML format, including documentation version control and electronic signature encryption.
- It will exchange data with other systems as approved and/or required by the Department.
- It can integrate single sign on access for all users to physician and patient medical reference libraries such as Up-to-Date.
- It provides a Hosted solution with no server hardware necessary onsite. CHC will provide complete disaster recovery services, including fail over data centers.
- It combines scanned documents and dynamic (keyed) data entry documents into one consolidated patient record.
- It provides electronic signature workflows on all document types.
- It contains an option to electronically verify medications on demand with outside providers via RXHUB or similar data sources.
- It contains a device-level security for individual PCs and laptops to access the EMR.
- It is browser-based and does not utilize a Virtual Private Network (VPN).

Implementation Plan

CHC has developed a plan to convert all current paper health records to electronic records, allowing them to be accessed using our proprietary Vizion® software. This process allows the paper medical records to be scanned while simultaneously implementing Vizion® Electronic Medical Records (EMR). Our plan for paper record conversion is as follows:

Action	Timeline
Procure and set up infrastructure	90 days
eMar Site Activities (repeat for each site)	Timeline
Install and configure hardware	5 days
Data enter of youth information	2 days
eMar training	3 days

Data enter medication orders	5 days
Go live with eMar, implementation complete	120 days
Treatment Site Activities (repeat for each site)	Timeline
Treatment training	5 days
Mental/Behavioral health training	5 days
Document digitizing training	2 days
Go live with EMR, implementation complete	96 days

Vizion Requirements

Hardware

Vizion requires a PC or laptop with either the Windows XP Professional or Windows 7 Professional operating system installed along with Internet Explorer version 7 or higher. A signature pad will be provided and attached to those machines that may need to collect signatures. Additionally, a scanner is needed to scan necessary documents into the electronic health record. No further hardware is required. Hardware will be provided by CHC.

Software

Vizion is a browser-based EHR solution and requires no custom software to implement.

Technical Support

Technical support for Vizion will be covered using a hybrid model. Local resources, including staff from CHC's Illinois office, will be utilized for hardware issues and other more serious technical issues. Simpler, first-level technical support will be available through CHC's larger, more responsive corporate IT Help Desk during normal business hours. After-hours support will be handled on an on-call basis and will be available 24 hours a day.

Data Backup

CHC will host storage/data warehousing and backup.

Ongoing Maintenance

Ongoing maintenance will be completed in accordance with current company policies. Planned outages related to maintenance of the system will be communicated to and coordinated with the Department in advance of the outage.

Software Updates

Software updates will occur approximately every 60 to 90 days. Updates will occur as often as every 30 days in the first year as custom reporting changes are implemented.

Training

Training will initially be performed onsite to ensure a successful implementation. Coordination with the Department's Office of Information Technology resources will be required to ensure network file store protocols are observed when using the Vizion scanning

system.

Skills Required to Operate and Support Vizion

The only skills required for the operation and support of Vizion are the ability to use a computer. Once a staff member has undergone training, he or she will be ready to use Vizion.

Ownership at Contract Termination

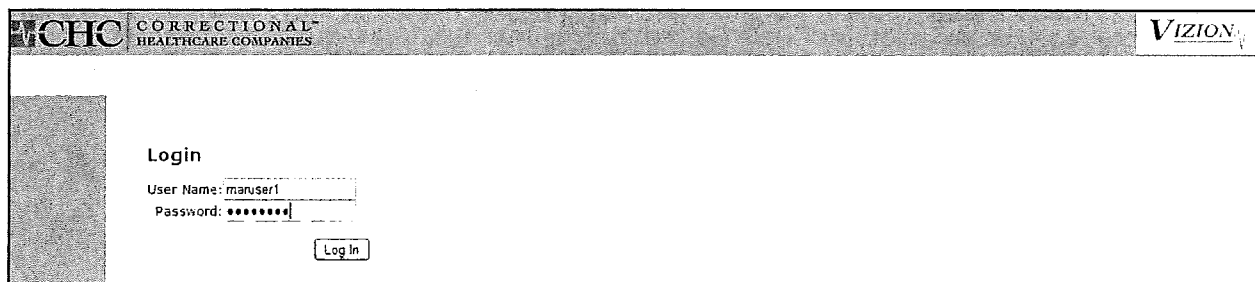
CHC understands the Department will retain complete ownership of all electronic health records created and stored in Vizion. Access to the relevant database structure will be provided should the Department wish to migrate to a different EHR system following contract termination.

Certification

Vizion is not currently certified by the Certification Commission for Healthcare Information Technology (CCHIT) or successor organization, however, upon award of contract and IDJJ decision to implement Vizion, we are able to apply for and obtain the certification within six months. Vizion is HIPAA compliant and updates are performed as necessary. We will perform, at minimum, annual upgrades to ensure continuous CCHIT certification and HIPAA compliance.

Sample Medical Record

Samples of Vizion's screen captures have been provided to show the ease of use and clarity of information that Vizion can provide as an EMR solution, along with the problem-oriented and SOAPE format of the health record and the medication administration process. These images are considered CONFIDENTIAL and PROPRIETARY.



CHC CORRECTIONAL HEALTHCARE COMPANIES VIZION

Login

User Name: maruser1

Password: ••••••••

Log In

Figure 1: Login to Vizion

Vitals		
Temperature:	98.6	* ex: 98.6
Blood Pressure:	120/80	* ex: 120/80
Pulse:	70	* ex: 70
Respiration:	15	* ex: 15
PulseOX:	90 %	* ex: 90%
Liters of O2:		ex: 24
Weight:	185	* ex: 185
Blood Glucose:		ex: 100
Vitals History ▼		
Save Cancel		

Figure 2: Vitals - Record New

Previous Clinical Protocols ▼	
Problem Oriented Record: Abdominal Pain (H01)	
Date: 2/4/2011	Time: 3:53 PM Show Protocol
SUBJECTIVE	
Allergies:	N/A
Initial Complaint:	Pain on left side of abdomen
How long have you had this pain?	2 days
Is the pain present now?	☒ yes ☐ no

Figure 3: View Protocols - View POR

SOAPE

Subjective	Objective	Assessment	Plan	Education

SUBJECTIVE: [Press TAB to proceed to the Objective]

☐

☐

Figure 4: Provider Encounters - Enter SOAPE

SOAPE:

Date: 2/4/2011 Time: 4:30 PM

When all parts are complete, click Save

(S)ubjective	(O)bjective	(A)ssessment	(P)lan	(E)ducation

ASSESSMENT:

Acute Sinusitis

☐ Allergic Rhinitis

Progress note saved.

Previous Provider Encounters

Figure 5: Provider Encounters - Saved Encounter

Provider Encounter

Vitals

Temperature: 98.6
Blood Pressure: 120/80
Pulse: 70
Respiration: 15
Pulse OX:
Liters of O2:
Weight:
Blood Glucose:

› Vitals History

SOAPE

(S)ubjective:

test test test

(O)bjective:

objective data here

(A)ssessment:

Assessment of the situation

(P)lan:

Here is where I enter my treatment plan

(E)ducation:

This is where I note what plans are made to educate the patient.

Provider Name: Karl Atkinson

Created Date: 10/06/2011 04:12 PM

Facility: Alcatraz Demo Facility

Figure 6: Provider Encounters – View Previous Encounter

Upload New Document

0 documents have been uploaded so far

Designation: Current Treatment Type: Lab Date on document: 11/22/2010

Note:

☐ Require document to be reviewed by doctor

Document: C:\Care Tree Expanded.tif Browse...

Save

Scanned Documents

Figure 9: Attach a Document to a Patient Record

+ Add new Inmate

	Last Name	First Name	Middle Name	Date Of Birth	Facility	Book In Date	Last Release Date	Release Status
JMS ID:					Facility: [Select]			
Booking Number:					Release Status: N/A			
Last Name:					Book In Date:			
First Name:					Last Release Date:			
Middle Name:					Critical Health Information			
DOB:					Allergy Note:	NKDA		
SSN:					Health Designations:	☐ Chronic Care ☐ Mental Health ☐ Hepatitis C ☐ HIV ☐ Diabetic ☐ Tuberculosis ☐ Seizures ☐ Hypertension / CAD ☐ Asthma ☐ Pregnant ☐ Blind ☐ Deaf ☐ Special Needs ☐ Respiratory ☐ No Known Issues		
Gender:	Male							
Location 1:	[None]							
Location 2:	[None]							
Location 3:	[None]							
Save Cancel								
No records to display.								
0 items in 1 pages								

Figure 10: Add New Inmate

Referral Request

[All fields marked with * are required.]

Correctional Facility:

Alcatraz Demo Facility, CA

Actual Dates of Service *

Start:

End:

Other Pertinent Information

Type of visit:

Outpatient Surgery

Pre-existing condition:

☐

Financial Responsibility:

Pending

Jurisdiction:

[Select]

Specialty Code:

Hospital OP Surg

Referred By:

Doctor, Demo

Offsite Hospital/Clinic:

Physician/Staff member to be seen:

More Questions

How long has patient had condition?

If pre-existing, has patient sought treatment before and on what date?

Reason for Send Out:

ER Final Diagnosis:

List other medical conditions:

Patient's current medications:

Lab Tests / Results:

Additional Notes:

Save

Figure 11: Referral Request

Maintenance
Alerts
Referral Ltr
Reporting
Site Level Reports

Field Reports

Pick from the following reports: **Offsite Report**

Select Facility:
Referral Status:
Created Date From
(Uncheck NULL to enter):
Service Date From
(Uncheck NULL to enter):

Alcatraz Demo Facility, CA
Approved

Scope Of Service:
Show Open Referrals?
Created Date To
(Uncheck NULL to enter):
Service Date To
(Uncheck NULL to enter):

Dental, Diagnostic, ER, Global
Yes

View Report

of 1
100%
Select a format
Export

Please Note: This report shows records that match the filter criteria selected at the time of running the report.

Alcatraz Demo Facility, CA [Open Referrals]								
Scope Of Service	Status	Patient	Referral Number	Payor	Diagnosis	Dates of Service	# of Claims	Claim DOS
Outpatient Surgery	Approved	Duck, Donald	20100924001	CHM Pays	S41-APPENDICITIS NOS		0	

Figure 12: Offsite Report

CORRECTIONAL[™]
HEALTHCARE COMPANIES

Logged in as: maruser1 (Logout | Change Password)

Total Alerts: 0

MAR
Patient Prescriptions
Stock Orders
Admin History
Attach Documents
Before MedPass
[Download]
After MedPass
[Upload]
MedPass Completion
Check
MedPass Vitals History
Paper MedPass Entry
Alerts
Close Alerts
Reporting
Site Level Reports
Client Reports

Welcome

Figure 13: eMar Home Page

Active Patient Prescriptions

 Add New Prescription

Medication	Strength	Start Date	Stop Date	Order Status	Rx Directions	Notes	Last Admin	Last Status	
Created By: Allergies: NKDA Non-Preferred: ☐  Prescribed Medication: Aspirin TAB Strength: 81MG Prescription Indicator: Biologicals ☒ Do not order from pharmacy - Medication will come from stock ☐ Do not order from pharmacy - Medication is provided by inmate 									

Allow renewal of this medication: ☒ 

Delivery Route: PO

MedPass Times:

- ☒ AM - Morning Med Pass
- ☒ PM - Evening Med Pass
- ☐ D1 - Diabetic Med Pass (AM)
- ☐ D2 - Diabetic Med Pass (PM)
- ☐ PRN - As Needed

Start Date: 8/28/2011  Fill stop date as 10 days from this date 

Stop Date: 9/7/2011 

Diagnosis: Arthritis 

Directions for Pharmacy: x 7 days 

Quantity for Pharmacy: 32 pills  Required when sending orders to Pharmacy

Keep on Person? ☐

Note for MedPass: 

Doctor: eMAR Demo Doctor, MD

Doctor Approved:

Pharmacy Order Status: N/A

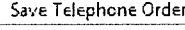
 

Figure 14: New Patient Prescription

Active Patient Prescriptions

Add New Prescription

	Medication	Strength	Start Date	Stop Date	Order Status	Rx Directions	Notes	Last Admin	Last Status		
View	Aspirin	81MG	8/28/2011	9/7/2011	N/A	x7 days				Administer AM Administer PM	Discontinue DC History
View	Seroquel	1000MG	8/29/2011	9/28/2011	N/A	q HS x 90 days				Administer AM	Discontinue DC History

Page size: 25

2 items in 1 pages

Figure 15: View Active Patient Prescriptions

Administration History - By Prescription

Seroquel 1000MG TAB [AM]	8/29/2011 - 9/28/2011	MedPass Note:	Show Administrations
Aspirin 81MG TAB [AM/PM]	8/28/2011 - 9/7/2011	MedPass Note: float	Show Administrations
Erythromycin (E-Mycin, Erytab) 400MG TAB [AM/PM]	8/1/2011 - 8/31/2011	MedPass Note: crush	Show Administrations

Figure 16: Administration History

Field Reports

Pick from the following reports: **MedPass Prep List**

Facility: **Alcatraz Demo Facility, CA** Prep for Med Pass: **PM - Evening Med Pass** **View Report**

Show different Pods on Separate Pages? **No** Include PRN Only Meds? **No**

1 of 1 100% Select a format Export

CHC CORRECTIONAL™ HEALTHCARE COMPANIES **VIZION**

MedPass Prep List for PM - Evening Med Pass

Correctional Facility: Alcatraz Demo Facility, CA

Time Report was run: 8/30/2011 11:17 AM Report Run By: System Administrator

Jms Number	Booking Number	First Name	Last Name	Date Of Birth	Location
Pod A [PM - Evening Med Pass]					
		Donald	Duck	8/1/1980	Pod A; Cell 1; Bed 1

Figure 18: Sample Report: Med Pass Prep List

Field Reports

Pick from the following reports: **Released Inmates with Active Prescriptions**

Select Facility: **Alcatraz Demo Facility, CA** **View Report**

1 of 1 100% Select a format Export

CHC CORRECTIONAL™ HEALTHCARE COMPANIES **VIZION**

Released Inmates with Active Prescriptions

Correctional Facility: Alcatraz Demo Facility, CA

Time Report was run: 8/30/2011 2:03 PM Report Run By: System Administrator

Last Name	First Name	DOB	JMS ID	Booking #
Duck	Duffy	6/15/1979		ABC123

Figure 19: Sample Report: Released Inmates with Active Prescriptions

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Appendix C: Current Client List

CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Adair County Jail (MO)	215 N. Franklin St., Kirksville, MO 63501	John Asxom	Jail Administrator	660-665-4600	jaxsom@adairco-so.com	Adult	06/01/2008	12/31/2013	42
Adams County Jail (WI)	301 Adams St., PO Box 279, Friendship, WI 53934	Les Beckman	Captain	608-339-4265	les.beckman@co-adams.wi.us	Adult	04/16/2001	12/31/2013	70
Alger County Jail (MI)	101 E. Varnum Street, Munising, MI 49862	Robert J. Hughes	Undersheriff	906-387-7028	undersheriffhughes@alger-so.com	Adult	06/01/2009	05/31/2013	18
Allegan County Sheriff's Department (MI)	112 N. Walnut Street, Allegan, MI 49010	Deb Marcullis	Lt. and Jail Administrator	269-673-0458	dmarculis@allegan-county.org	Adult	01/01/2007	12/31/2013	173
Allen County Sheriff's Office (OH)	333 N. Main Street, Lima, OH 45801	Jim Everett	Chief Deputy	419-993-1406	everett@acso-oh.us	Adult	01/01/2007	12/31/2014	226
Arapahoe County Detention Facility (CO)	7373 South Potomac Street, Centennial, CO 80012	Verlin Crecelius	Lieutenant	720-874-3317	vcrecelius@co-arapahoe.co.us	Adult	03/24/2004	12/31/2013	1,256
Arenac County Sheriff Department (MI)	126 North Grove Street, Standish, MI 48658	Mike Badour	Sergeant	989-846-4561	mbadour@arenac-countygov.com	Adult	07/01/2009	06/30/2013	50

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Arizona State Prison – Kingman (AZ)	4646 West English Drive, Golden Valley, AZ 86403	Al Murphy	Vice President Corrections	800-574-4682	Not available	Adult	08/01/2004	02/14/2014	3,230
Arizona State Prison, Florence West (AZ)	715 E. Diversion Dam Road, Florence, AZ 85232	James Black	Western Regional Vice President	310-348-3000	jblack@geogroup.com	Adult	07/01/2009	06/30/2013	750
Arizona State Prison, Phoenix West (AZ)	3402 W. Cocopah Street, Phoenix, AZ 85009	James Black	Western Regional Vice President	310-348-3000	jblack@geogroup.com	Adult	07/01/2009	06/30/2013	484
Ashland County Sheriff's Department (WI)	220 East 6th Street, Ashland, WI 54806	Tony Jones	Jail Administrator	715-682-7050	tony.jones@co.ashland.wi.us	Adult	02/01/2011	01/31/2014	50
Aurora Detention Center (CO)	14999 E. Alameda Pkwy., Aurora, CO 80012	Diane Groetzi	Commander	303-739-6366	dgroetzi@aurora.gov.org	Adult	05/01/1999	12/31/2013	100
Bannock County Jail (ID)	5800 South 5th Avenue, Pocatello, ID 83204	Ellie Peterson	Captain	208-236-7180	elli@bannockcounty.us	Adult	09/01/2007	09/30/2013	320
Barron County Jail (WI)	Barron County Jail, 1420 State Highway 25 N, Barron, WI 54812	Mark Evans	Jail Administrator	715-537-5814	mark.evans@co.barron.wi.us	Adult	01/01/2012	12/31/2013	142
Bay County Law Enforcement Center (MI)	501 Third Street, Bay City, MI 48708	John Miller	Sheriff	989-895-2025	Not available	Adult Juvenile	11/01/1998	08/13/2013	263

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Bell County Jail (TX)	2405 South Loop 121, Belton, TX 76513	Charlie Grogan	Major	254-933-6701	charles.grogan@co.bell.tx.us	Adult Juvenile	01/12/2009	01/12/2013	906
Benton County Jail (IN)	105 S. Lincoln, Fowler, IN 47944	Boston Pritchett	Sheriff	765-884-0080	bopritchett@sbccglobal.net	Adult	01/01/2008	12/31/2014	15
Benzie County Correctional Facility (MI)	505 S. Michigan Avenue, Beulah, MI 49617	Jeff Conquest	Lieutenant and Jail Administrator	231-882-4484 x235	jconquest@benzico.net	Adult	11/01/2011	10/31/2014	30
Bernalillo County Metropolitan Detention Center (NM)	100 Deputy Dean Miera Drive SW, Albuquerque, NM 87151	Ramon Rustin	Chief of Corrections	505-839-8701	rrustin@bernco.gov	Adult	07/01/2010	06/30/2014	2,675
Blaine County Detention Center (ID)	1650 Aviation Drive, Hailey, ID 83333	Jay Davis	Lieutenant	208-788-5571	jdavis@co.blaine.id.us	Adult	10/01/2008	09/30/2013	40
Bond County Jail (IL)	403 S. 2nd Street, Greenville, IL 62246	Jeffrey J. Brown	Sheriff	618-664-2151	jeffbrowncsd@sbcglobal.net	Adult	12/01/2006	11/30/2014	22
Boone County Sheriff's Department Jail (IN)	1905 Indianapolis Avenue, Lebanon, IN 46052	Ken Campbell	Sheriff	765-482-1412	kcampbell@co.boone.in.us	Adult	10/01/2010	09/30/2013	150
Broomfield Detention Center (CO)	11600 Ridge Parkway, Broomfield, CO 80021	Pat Raulerson	Administrative Analyst	720-887-2075	praulerson@broomfield.org	Adult	10/15/2001	12/31/2013	100
Brown County Jail (WI)	3030 Curry Street, Green Bay, WI 54311	Captain Larry Malcomson	Jail Administrator	920-391-6806	malcomson_ld@co.brown.wi.us	Adult Juvenile	02/26/2007	12/31/2013	585

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CHC'S CURRENT CLIENTS										
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP	
Caldwell County Detention Center (MO)	280 W. Main Street, Kingston, MO 64650	Jerry D. Galloway	Sheriff	816-586-2751	ccsgalloway@ya-hoo.com	Adult	12/09/2011	12/08/2013	78	
Calumet County Jail (WI)	206 Court Street, Chilton, WI 53014	Kelly Sipple	Lt.	920-849-2335	sipple.kelly@co.c-alumet.wi.us	Adult	01/01/2006	12/31/2013	25	
Carroll County Sheriff's Department Jail (IN)	310 West Main Street, Delphi, IN 46923	Tony L. Burns	Sheriff	765-564-2413	tburns@cacoshrf.com	Adult	08/25/2008	12/31/2014	32	
Cass County Jail (IN)	100 Court Park, Logansport, IN 46947	Randy Pryor	Sheriff	574-753-7828	sheriff.pryor@co-cass.in.us	Adult	11/01/2011	10/31/2013	150	
Center for Forensic Psychiatry (MI)	8303 Platt Road, Saline, MI 48175	Bethann Duffy	Purchasing	734-295-4531	duffybe@michigan.gov	Adult	08/01/2002	09/30/2014	228	
Central Arizona Correctional Facility (AZ)	1401 E. Diversion Dam Road, Florence, AZ 85132	Not available	Not available	Not available	Not available	Adult	07/01/2009	11/30/2013	1,280	
Champaign County Correctional Center (IL)	204 E. Main Street, Urbana, IL 61053	Dan Walsh	Sheriff	217-384-3820	dwalsh@co.champaign.il.us	Adult	05/01/2004	08/31/2012	223	
Champaign County Juvenile Detention Center (IL)	400 S. Art Bartell Road, Urbana, IL 61802	Joe Gordon	Director	217-384-3751	igordon@co.champaign.il.us	Juvenile	05/01/2004	08/31/2013	40	
Chippewa County Jail (MI)	325 Court Street, Sault Ste. Marie, MI 49783	Jack Horka	Lieutenant	906-635-7620	jhorka@chippewa-countymi.gov	Adult	10/03/2011	10/02/2013	165	
Clallam County (WA)	223 East 4th Street, Port Angeles, WA 98362	Alice Hoffman	Chief Civil Deputy	360-417-2257	ahoffman@co.clallam.wa.us	Adult	04/01/2010	03/31/2013	120	

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CHC'S CURRENT CLIENTS

Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Clallam County Juvenile & Family Services (WA)	1912 W. 18th Street, Port Angeles, WA 98363	Cheryl Wilfong	Administrative Coordinator	360-565-2646	cwilfong@co.clallam.wa.us	Juvenile	10/01/2010	09/30/2013	17
Clare County Jail (MI)	255 W. Main Street, Harrison, MI 48625	Tim Theisen	Lt.	989-539-7166	theisent@clareco.net	Adult	11/15/2008	02/28/2014	175
Clinton County Jail (IN)	301 East Walnut Street, Frankfort, IN 46041	Jeff Ward	Sheriff	765-659-6393	jward@clintonco.com	Adult	04/07/2003	12/31/2013	120
Coastal Bend Correctional Facility - LCS Corrections Solutions, Inc. (TX)	4909 FM 2826, Robstown, TX 78380	Richard Harbison	Executive Vice President	337-234-1533	Not available	Adult	01/11/2010	01/10/2013	1,056
Collin County Detention Center (TX)	4300 Community Avenue, McKinney, TX 75070	Charles Adams	Assistant Chief Deputy	972-548-4101	cadams@co.collin.tx.us	Adult Juvenile	10/01/2008	09/30/2013	1,100
Columbia County (OR)	901 Port Avenue, St. Helens, OR 97051	Sarah Hanson	Not available	503-397-3839	Sarah.Hanson@co.columbia.or.us	Adult	02/01/2010	09/30/2013	150
Corrections Commission of Northwest Ohio (OH)	03151 County Road 2425, Stryker, OH 43557	Jim Dennis	Executive Director	419-428-3800 x300	jim.dennis@noris.org	Adult Juvenile	01/01/2010	12/31/2013	613
Crawford County Jail (OH)	3613 Stetzer Road, Bucyrus, OH 44820	Ronny J. Shawber	Sheriff	419-562-7906	rjs1701@crawfordcountysheriffio.com	Adult	08/01/2006	07/31/2013	90
Curry County Detention Center (NM)	801 Mitchell Street, Clovis, NM 88101	Hoyt Skabelund	Not available	575-749-2486	hskabelu@phs.org	Adult Juvenile	08/01/2009	06/30/2013	250

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Dallas County Jail (IA)	801 Court Street, Adel, IA 50003	Doug Lande	Jail Administrator	515-993-6951	doug.lande@co.dallas.ia.us	Adult	04/15/2010	06/30/2013	35
David L Moss Criminal Justice Center (OK)	300 North Denver Avenue, Tulsa, OK 74103	Michelle Robinette	Chief Deputy	918-596-8871	mrobinette@tcs.o.org	Adult	07/01/2005	06/30/2013	1,870
DeKalb County Jail (IN)	215 E. 8th Street, Auburn, IN 46706	Don Lauer	Sheriff	260-925-3365	dlauer@co.dekalb.in.us	Adult	11/01/2008	12/31/2014	80
Delaware County Jail (OH)	844 U.S. Route 42 North, Delaware, OH 43015	Joseph Lynch	Jail Administrator	740-833-2860	jlynch@co.delaware.oh.us	Adult	07/01/2006	02/28/2015	210
Delta County Jail (MI)	111 North 3rd Street, Escanaba, MI 49829	Gary A. Ballweg	Sheriff	906-786-3633	gballweg@deltacounty.mi.org	Adult	07/17/2006	09/30/2013	70
Des Moines County Jail (IA)	3630 Bauer Dr., Burlington, IA 52601	Duane Worthy	Jail Administrator	319-753-8275 x205	worthyd@co.des-moines.ia.us	Adult	12/01/2007	06/30/2013	60
Dickinson County Correctional Center (MI)	300 East D Street, Iron Mountain, MI 49801	Kay Pascoe	County Controller	906-774-2573	kaypascoe@yahoo.com	Adult	02/01/2009	01/31/2013	80
Dodge County Jail (WI)	216 W. Center Street, Juneau, WI 53039	Not available	Not available	Not available	Not available	Adult	12/15/2000	12/14/2015	100
Door County Jail (WI)	1201 South Duluth Avenue, Sturgeon Bay, WI 54235	Tammy Sternard	Jail Administrator	920-746-5660	tsternard@co.door.wi.us	Adult	01/01/2005	12/31/2013	60

CHC'S CURRENT CLIENTS

Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Douglas County Jail (IL)	920 S. Washington Street, Tuscola, IL 61953-0438	Charles McGrew	Sheriff	217-253-3511	charlie.mcgregor@douglascountyil.com	Adult	10/15/2004	10/31/2014	35
Douglas County Justice Facility (CO)	4000 Justice Way, Castle Rock, CO 80109	Jason Kennedy	Captain	303-814-7022	jkennedy@dcsheeriff.net	Adult	05/01/1998	12/31/2013	365
Eagle County Detention Center (CO)	0885 E Chambers Ave., Eagle, CO 81631	Bill Kaufman	Jail Administrator	970-328-8518	bill@sheriff.eagle.co.us	Adult	09/01/2009	12/31/2013	75
East Hidalgo Detention Center (TX)	1300 N Highway 107, La Villa, TX 78562	Dick Harbison	VP Corrections	337-234-1533	richard.harbison@lscs.corrections.com	Adult	03/01/2012	02/28/2015	1,100
Eau Claire County Jail (WI)	728 Second Avenue, Eau Claire, WI 54703	Joel Brettinger	Captain	715-839-6248	joel.brettinger@co.eau-claire.wi.us	Adult	08/01/2006	12/31/2013	250
Eddy County Detention Center (NM)	201 N. Main/Mail: P.O. Box 1388, 88221, Carlsbad, NM 88220	Shawn Funk	Warden	575-887-7556	sfunk@co.eddy.nm.us	Adult	07/01/2008	12/31/2013	232
El Paso County Criminal Justice Facility (CO)	2739 E. Las Vegas, Colorado Springs, CO 80906	Paula Presley	Chief	719-390-2103	paulapresley@elpasoco.com	Adult	03/01/2002	12/31/2013	1,550
Elbert County Jail (CO)	751 Ute Ave., Kiowa, CO 80117	Shayne Heap	Sheriff	303-621-2027	shayne.heap@elbertcounty-co.gov	Adult	05/15/2008	12/31/2013	35
Ellis County - Wayne McCollum Detention Center (TX)	300 S. Jackson, Waxahachie, TX 75165	Terry Ogden	Captain	972-877-2298	terry.ogden@co.ellis.tx.us	Adult	02/01/2007	09/30/2013	400

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CHC CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Fayette County Jail (IL)	221 South Seventh Street, Vandalia, IL 62471	J.D. Vierge	Jail Administration	618-283-2141	jd_jail@yahoo.com	Adult	04/15/2005	11/30/2013	25
Forest County Jail (WI)	100 S. Park Ave., Crandon, WI 54520	Ken Van Cleave	Chief Deputy	715-478-3331	vancleave@co.for est.wi.us	Adult	12/18/2006	12/17/2013	60
Franklin County Adult Detention Facility (IL)	403 East Main Street, Benton, IL 62812	Chet Shaffer	Lieutenant	618-439-9553	cshaffer@co.fran klin.il.us	Adult	07/01/2003	11/30/2014	65
Franklin County Juvenile Detention Center (IL)	409 E. Washington Street, Benton, IL 62812	Shawn Freeman	Jail Superintendent	618-438-2222	sfreeman@il2nd circuit.org	Juvenile	02/15/2004	11/30/2014	20
Freeborn County Adult Detention Center (MN)	411 Broadway Avenue South, Albert Lea, MN 56007	Steve Westland	Jail Administrator	507-377-4683	steve.westland@co.freeborn.mn.us	Adult	10/15/2008	12/31/2013	116
Fremont County Detention Center (CO)	100 Justice Center Road, Canon City, CO 81212	James Beicker	Sheriff	719-276-5510	jim.beicker@fre montso.com	Adult	12/01/2007	12/31/2013	200
Ft. Bend County Sheriff's Office (TX)	1410 Ransom Road, Richmond, TX 77469	James Leach	Major	281-341-4730	leachjim@co.fort -bend.tx.us	Adult	03/01/2010	09/30/2013	1,000
Fulton County Jail (IN)	815 Madison Street, Rochester, IN 46975	Walker D. Conley	Sheriff	574-223-2819	Not available	Adult	11/01/2003	10/31/2013	65
Gadsden Correctional Facility - MTC (FL)	6044 Greensboro Highway, Quincy, FL 32351	Al Murphy	Vice President, Corrections	800-574-4682	Not available	Adult	08/01/2010	08/01/2013	1,368

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Garfield County Jail (CO)	107 8th Street, Glenwood Springs, CO 81601	Eugene Duran	Sr. Contract Administrator /Attorney	970-625-5904	eduran@garfield-county.com	Adult	06/01/1999	12/31/2013	200
Giles W. Dalby Correctional Facility (TX)	P.O. Box 9000, 805 North Avenue, F, Post, TX 79356-9000	Neil Adler	VP Regional Operations	Not available	Not available	Adult	04/01/2007	03/31/2013	1,503
Gilpin County Jail (CO)	2690 Dory Hill Road, Golden, CO 80403	Tonia Kapke	Captain	303-582-3576	kapke@co.gilpin.co.us	Adult	06/01/2008	12/31/2013	55
Gogebic County Jail (MI)	100 West Iron Street, Bessemer, MI 49911	Jay Kangas	Sergeant	906-667-0203 x193	jkangas@gogebic.org	Adult	08/06/2007	12/31/2013	25
Grand Traverse County Sheriff's Office (MI)	320 Washington Street, Traverse City, MI 49684	Not available	Not available	Not available	Not available	Adult	03/01/2010	02/28/2013	142
Grant County Security Center, IN (IN)	214 E. 4th Street, Marion, IN 46952	Not available	Not available	Not available	Not available	Adult Juvenile	04/01/2009	03/31/2013	250
Green Lake County Jail (WI)	571 County Road A, Green Lake, WI 54941	Lori L. Evans	Administrative Assistant	920-294-4000	levans@co.green-lake.wi.us	Adult	01/01/2006	12/31/2013	45
Grundy County Jail (IL)	111 E. Washington Street, Morris, IL 60450	Terry M. Marketti	Sheriff	815-942-6645	tmarketti@grundycountysheriff.com	Adult	12/01/2008	11/30/2013	50
Hancock County Jail (OH)	200 West Crawford Street, Findlay, OH 45840	Ryan Kidwell	Lieutenant	419-424-7098	rckidwell@co.hancock.oh.us	Adult	01/15/2007	01/14/2013	106

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CHC CURRENT CLIENTS										
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP	
Henry County Jail (IL)	311 W. Center St., Cambridge, IL 61238	Bryan Early		309-937-3940	bearley@henrycty.com	Adult	12/01/2003	11/30/2013	130	
Hidalgo County Detention Center (NM)	83 Old Highway 70, Lordsburg, NM 88045	J.J. Salazar	County Manager	575-542-9428	hcmgr@aznexus.net	Adult	12/14/2011	12/13/2013	120	
Hocking Valley Community Residential Center (OH)	111 West Twenty-Nine Drive, Nelsonville, OH 45764	Tammy Bauman	Executive Director	740-753-4400 x235	hv_tbauman@seovec.org	Juvenile Other:	09/07/2010	09/06/2013	23	
Houghton County Jail (MI)	403 E. Houghton Ave., Houghton, MI 49931	Brian J. McLean	Sheriff	906-482-0055	bmclean@houghtonsheriff.com	Adult	10/23/2006	12/31/2014	35	
Howard County Jail (IN)	1800 West Markland Avenue, Kokomo, IN 46901	Steve Rogers	Sheriff	765-456-2020	steven.rogers@co.howard.in.us	Adult	08/01/2002	12/31/2014	270	
Huntington County Jail (IN)	322 East State St., Huntington, IN 46750	Karen Poling	Jail Matron	260-356-2520	karen.poling@huntington.in.us	Adult	06/01/2011	05/31/2014	100	
Iron County Jail (MI)	#2 S. 6th St., Crystal Falls, MI 49920	Vernon Jones	Lt.	906-875-6669	vjones@ironmi.org	Adult	10/30/2006	12/31/2013	31	
Irwin County Detention Center (GA)	132 Cotton Drive, Ocilla, GA 31774	Terry O'Brien	Managing Member	770-353-5845	tobrien@detentionmgt.com	Adult	02/15/2010	12/31/2013	725	
Isabella County Jail (MI)	207 N. Court Street, Mount Pleasant, MI 48858	Tom Recker	Lieutenant	989-772-5911 x233	trecker@isabellacounty.org	Adult	05/15/2007	09/30/2014	210	

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Isabella County Non-Secure Detention Home (MI)	300 N. Main St., Mount Pleasant, MI 48858	Lance Dexter	Court Administrator	989-772-0911 x213	ldexter@isabella county.org	Juvenile	12/01/2007	05/15/2013	10
IYC Chicago (IL)	136 N. Western Ave., 3rd Floor, Chicago, IL 60612	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	11/01/2001	09/28/2013	130
IYC Harrisburg (IL)	1201 W Poplar, P.O. Box 300, Harrisburg, IL 62946	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	01/16/2000	09/28/2013	377
IYC Joliet (IL)	2848 W. McDonough, Joliet, IL 60436	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	09/20/2000	09/28/2013	390
IYC Kewanee (IL)	2021 Kentville Rd, Kewanee, IL 61443	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	09/01/2010	09/28/2013	198
IYC Murphysboro (IL)	636 Elza Brantley Road, Murphysboro, IL 62966	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	11/01/2004	09/28/2013	95
IYC St Charles (IL)	4450 Lincoln Hwy, St. Charles, IL 601757500	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	09/20/2000	09/28/2013	430
IYC Warrenville (IL)	30W200 Ferry Rd., PO Box 828, Warrenville, IL 60555	Bryan Gleckler	Chief Financial Officer, Illinois DOC	217-558-2200 x2029	bryan.gleckler@ doc.illinois.gov	Juvenile	09/20/2000	09/28/2013	124

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CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Jefferson County Jail (FL)	Jefferson County Sheriff's Office, 171 Industrial Park, Monticello, FL 32344	David Hobbs	Sheriff	850-997-4640	hobbsdc@flcjn.net	Adult	01/01/2012	12/31/2013	55
Jefferson County Detention Facility (CO)	200 Jefferson County Parkway, Golden, CO 80401	Mike Fish	Detention Services Manager	303-271-5391	mfish@co.jefferson.co.us	Adult	01/01/2004	12/31/2013	1,300
Jefferson County Jail (MO)	510 South First Street, Hillsboro, MO 63050	Dave Marshak	Lieutenant	636-797-5588	dmarshak@jeffco.mo.org	Adult	11/01/2001	12/31/2013	310
Kaufman County Jail (TX)	1900 Highway 175 East, Kaufman, TX 75142	Bryan Beavers	Chief Deputy	972-932-9703	beavers@kaufmanso.com	Adult	02/15/2011	02/28/2013	300
Kay County Jail (OK)	1101 West Dry Road, Newkirk, OK 74647	Jody Burd	Jail Administrator	580-362-2517	director@kaycountyd.net	Adult	09/01/2001	06/30/2013	268
Kendall County Public Safety Center (IL)	1102 Cornell Street, Yorkville, IL 60560	Sabrina Jennings	Commander	630-553-7500 x1104	sjennings@co.keandall.il.us	Adult Juvenile	01/01/2006	12/31/2013	106
Kerr County Jail (TX)	400 Clearwater Paseo, Kerrville, TX 78028	W.R. Hierholzer	Sheriff	830-896-1257	sheriff@co.kerr.tx.us	Adult	10/01/2008	09/30/2013	180
Kootenai County Public Safety Building (ID)	N. 5500 Government Way C-9000, Coeur d'Alene, ID 83815	Kim Edmonds	Lieutenant	208-446-1411	kedmondson@kcgov.us	Adult	10/01/2010	09/30/2013	348

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
LaCrosse Adult County Jail (WI)	333 Vine St., LaCrosse, WI 54601	Bryan Jostad	LaCrosse County Purchasing Manager	608-785-5879	jostad.bryan@co.la-crosse.wi.us	Adult	01/16/2004	01/31/2014	190
LaCrosse Juvenile County Jail (WI)	300 4th St. N, PO Box 4002, LaCrosse, WI 54601	Bryan Jostad	LaCrosse County Purchasing Manager	608-785-5879	jostad.bryan@co.la-crosse.wi.us	Juvenile	01/16/2004	01/31/2014	12
Lancaster County Youth Services Center (NE)	1200 Radcliff Street, Lincoln, NE 68512	Michelle Schindler	Director	402-441-7093	mschindler@lancaster.ne.gov	Juvenile	07/01/2010	06/30/2013	62
Langlade County Jail (WI)	840 Clermont Street, Antigo, WI 54409	William Greening	Sheriff	715-627-6411 x8401	bgreening@co.la nglade.wi.us	Adult	06/01/2011	12/31/2014	75
Laramie County Detention Center (WY)	1910 Pioneer Avenue, Cheyenne, WY 82001	Bill Long	Captain	307-633-4713	blong@laramiecounty.com	Adult	06/01/1999	06/30/2013	250
Laramie County Juvenile Services Center (WY)	13794 Prairie Center Circle, Cheyenne, WY 82009	Bill Long	Captain	307-633-4713	blong@laramiecounty.com	Juvenile	07/01/2012	10/31/2013	20
Larimer County Detention Facility (CO)	2405 Midpoint Drive, Ft. Collins, CO 80525	Staci Shaffer	Lieutenant	970-498-5213	shaffesl@co.larimer.co.us	Adult	04/07/1999	12/31/2013	550
LaSalle County Jail (IL)	707 East Etna Road, Ottawa, IL 61350	Jason Edgcomb	Jail Superintendent	815-434-8383	jedgcomb@lasallecounty.org	Adult	12/01/2002	11/30/2014	180
LaSalle Juvenile Detention Center (IL)	707 East Etna Road, Ottawa, IL 61350	Jason Edgcomb	Jail Superintendent	815-434-8383	jedgcomb@lasallecounty.org	Juvenile	12/01/2002	11/30/2014	11

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Latah County Jail (ID)	5th and VanBuren, Moscow, ID 83843	Ron Manell	Lieutenant	208-883-5705	rmanell@latah.id.us	Adult	09/27/2010	09/30/2013	23
Lee County Jail-IA (IA)	2530 255th Street, Montrose, IA 52639	Scott Bonar	Chief Deputy	319-524-1414	sbonar@leecounty.org	Adult	09/07/2007	09/07/2013	44
Lee County Jail-IL (IL)	122 West Third Street, Dixon, IL 61021	Doug Carlson	Jail Administrator	815-284-6631	dcarlson@countyoffice.org	Adult	03/04/2002	02/28/2014	44
Lenawee County Jail (MI)	549 N. Winter Street, Adrian, MI 49221	Dennis Steenrod	Jail Administrator	517-263-7980	dennis.steenrod@lenawee.mi.us	Adult	06/01/2007	12/31/2014	247
Lincoln County Sheriff's Department (WI)	1104 E. First Street, Merrill, WI 54452	David Manninen	Jail Administrator	715-536-9244	dmanninen@co.lincoln.wi.us	Adult	11/01/2002	12/31/2013	75
Livingston County Jail-MI (MI)	150 S. Highlander Way, Howell, MI 48843	Jana Daroczy	Purchasing Agent	517-540-8740	jdaroczy@co.livingston.mi.us	Adult	09/01/1996	03/17/2014	250
Lubbock County Community Supervision and Corrections Department (TX)	3501 N. Holly Ave, Lubbock, TX 79403	Valerie Monteilh	Warden	806-765-3328	Not available	Adult Other:	10/01/1994	08/31/2013	225
Lubbock County Detention Center and Juvenile Justice Center (TX)	3502 N. Holly Ave, Lubbock, TX 79403	Kelly Rowe	Sheriff	806-775-1400	Not available	Adult Juvenile	10/01/1999	12/15/2013	1,512

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Mackinac County Jail (MI)	100 S. Marley Street, St. Ignace, MI 49781	Scott Strait	Sheriff	906-643-1911	straits@mackina.csheriff.us	Adult	05/01/2007	06/30/2013	22
Macoupin County Correctional Center (IL)	215 S. East Street, Carlinville, IL 62626	Don Albrecht	Sheriff	217-854-3135	daalbrecht@frontiernet.net	Adult	12/15/2005	12/14/2013	50
Mahoning County Justice Center (OH)	110 Fifth Avenue, Youngstown, OH 44503	Gina Bricker	Assistant Prosecuting Attorney	330-740-2330 x7250	gbricker@mahoningcountyoh.gov	Adult	01/01/2007	12/31/2013	300
Manistee County Jail (MI)	1525 E. Parkdale Ave., Manistee, MI 49666	Bob Lancaster	Captain	231-723-8393	lancaster@manisteesheriff.org	Adult	04/01/2010	09/30/2013	55
Marquette County Jail (WI)	2161 University Drive, Marinette, WI 54143	Robert Majewski	Jail Administrator	715-732-7633	bmajewski@marinettecounty.com	Adult	02/01/2003	02/28/2015	101
Marquette County Jail (WI)	67 W. Park Street, Montello, WI 53949	Chris Kuhl	Captain	608-297-2115	ckuhl@co.marquette.wi.us	Adult	06/01/2007	12/31/2013	30
Marquette County Sheriff's Department (MI)	236 West Baraga Avenue, Marquette, MI 49855		Not available	Not available	Not available	Adult	02/01/2006	01/31/2013	60
Maxey Training School; Juvenile Facility (MI)	9036 E. M-36, Whitmore Lake, MI 48189	Patricia Spencer	Not available	734-449-3069	Not available	Other:	10/01/2009	09/30/2013	180
McLean County Detention Facility (IL)	104 W. Front Street, Bloomington, IL 61701	Joan R. Naour, RN, BSN, CCHP	Director/MCD F Health Services	309-888-5934	joan.naour@mcleancountyil.gov	Adult	06/01/2012	12/31/2013	205

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Mecosta County Jail (MI)	225 South Stewart Avenue, Big Rapids, MI 49307	Kevin Wood	Jail Administrator	231-592-0150	kwood@co.mecosta.mi.us	Adult	08/15/2006	10/31/2013	84
Mercer County Jail (IL)	906 Southwest Third Street, Aledo, IL 61231		Not available	Not available	Not available	Adult	01/15/2006	01/14/2013	50
Mesa County Detention Center (CO)	215 Rice Street, Grand Junction, CO 81505	Doni O'Rourke	Purchasing Agent	970-255-7153	doni.orourke@mesacounty.us	Adult	01/01/2002	12/31/2013	365
Miami County Jail (IN)	1104 West 200 North, Peru, IN 46970	Timothy Miller	Sheriff	765-472-1322 x325	tmiller@miamicounty.in.gov	Adult	01/19/2007	01/18/2013	108
Midland County Jail (MI)	101 Fast Ice Drive, Midland, MI 48642	Scott Stephens	Jail Manager	989-832-6688	sstephenson@co.midland.mi.us	Adult	04/10/2012	04/09/2015	250
Milan Federal Correctional Institution (MI)	4004 East Arkona Road, Milan, MI 48160	Dr. William Malatinsky	Not available	734-439-1511	Not available	Adult	03/01/1993	09/30/2013	1,600
Miller County Adult Detention Center (MO)	1999 Highway 52, P.O. Box 13, Tuscumbia, MO 65082	William M. Abbott	Sheriff	573-369-2341 x2239	kacipemberton@millercountysheriff.com	Adult	07/01/2011	06/30/2013	70
Miller County Correctional Center (AR)	2300 East Street, Texarkana, AR 78154	Ron Stoval	Sheriff	870-774-3001	rstovall@millercountyso.us	Adult	03/01/2009	02/28/2013	250
Moffat County Jail (CO)	800 West 1st Street, Craig, CO 81625	Dean Herndon	Lieutenant	970-826-2312	dherndon@sheriff.moffat.co.us	Adult	05/01/1999	12/31/2013	65
Monroe County Youth Center (MI)	3600 S. Custer Road, Monroe, MI 48161	Melissa Strong	Director	734-240-3237	melissa_strong@monroemi.org	Juvenile	01/17/2012	01/16/2015	30

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Montgomery County Jail (IL)	140 North Main Street, Hillsboro, IL 62049	Jim Vazzi	Sheriff	217-532-9511	mdeputy@montgomery.k12.il.us	Adult	07/01/2006	11/30/2013	35
Montrose County Jail (CO)	1200 North Grand, Montrose, CO 81401	Jim Gerlach	Jail Administrator	970-252-4065	jgerlach@co.montrose.co.us	Adult	06/01/1999	12/31/2013	125
Morgan County Detention Facility (CO)	801 East Beaver Avenue, Fort Morgan, CO 80701	Dave Martin	Undersheriff	970-542-3448	dmartin@co.morgan.co.us	Adult	04/01/1999	12/31/2013	140
Morgan County Jail-IL (IL)	300 West Court, Jacksonville, IL 62650	Randy Duvenda ck	Sheriff	217-245-4143	rduvendack@net-axess.com	Adult	07/01/2008	06/30/2014	55
Muskegon County Jail (MI)	25 W. Walton Ave., Muskegon, MI 49440	Dean Roesler	Sheriff	231-724-6236	roeslerde@co.muskegon.mi.us	Adult	12/30/2009	09/30/2013	415
Nassau County Sheriff's Office (FL)	76001 Bobby Moore Circle, Yulee, FL 32097	Robert Crawford	Finance Manager	904-548-4039	rcrawford@nassaucountysheriff.com	Adult	04/01/2010	09/30/2013	260
New Mexico Military Institute (NM)	101 West College Blvd., Roswell, NM 88201	Judy Scharmer	Vice President of Finance	575-624-8040	scharmer@nmimi.edu	Other:	08/01/2009	07/31/2013	900
Newaygo County Jail (MI)	1035 E. James Street, White Cloud, MI 49349	Roger Palmiter	Jail Administrator	231-689-7364	rogerp@co.newaygo.mi.us	Adult	04/01/2008	09/30/2013	245
Northwest Community Corrections Center (OH)	1740 East Gypsy Lane Road, Bowling Green, OH 43402	Valerie Spears	Executive Director	419-354-7444	vspears@co.wood.oh.us	Adult	10/01/1999	06/30/2013	64

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Northwest Regional Juvenile Detention Center in Eau Claire (WI)	728 Second Avenue, Eau Claire, WI 54703	Rob Fadness	Jail Administrator	715-839-5128	rob.fadness@co.eau-claire.wi.us	Juvenile	01/01/2008	12/31/2013	15
Oconto County Jail (WI)	301 Washington Street, Oconto, WI 54153	Carol Kopp	Jail Administrator	920-834-6900	carol.kopp@co.oconto.wi.us	Adult Juvenile	07/01/2007	12/31/2013	50
Ogemaw County Jail (MI)	806 West Wright Street, West Branch, MI 48661	Doug Casselman	Undersheriff	989-345-3789	dcasselman@ogs.h.org	Adult	03/01/2010	02/28/2014	65
Ogle County Jail (IL)	103 Jefferson Street, Oregon, IL 61061	Michael R. Harn	Sheriff	815-732-6666	mharn@oglecounty.org	Adult	06/01/2000	11/30/2014	87
Olmsted County (MN)	101 4th Street SE, Rochester, MN 55904	Deborah Palmer	Director of Purchasing	507-328-7085	palmer.deb@co.olmsted.mn.us	Adult	01/01/2012	12/31/2014	207
Olmsted County Juvenile (MN)	2118 Campus Drive SE, Rochester, MN 55904	Deborah Palmer	Director of Purchasing	507-328-7085	palmer.deb@co.olmsted.mn.us	Juvenile	07/01/2012	12/31/2014	10
Oneida County Jail (WI)	2000 E. Winnebago Street, Rhinelander, WI 54501	Kaye Juel	Jail Administrator	715-361-5185	kjuel@co.oneida.wi.us	Adult	06/15/2003	12/31/2013	100
Osage County Jail (OK)	900 St. Paul, Pawhuska, OK 74056	Ty Koch	Sheriff	918-287-3535	jsellers@ocosonet.com	Adult	12/13/2011	12/12/2013	120

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Otero County Detention Center (NM)	1958 Dr. Martin Luther King Jr. Drive, Alamogordo, NM 88310-8121	Virginia Blansett	Correctional Services Director	575-434-2519	vblansett@co.otero.nm.us	Adult Other:	07/01/2009	12/31/2013	190
Ottawa County (MI)	12130 Fillmore St., West Olive, MI 49460	Steve Baar	Lieutenant, Jail Administrator	616-738-4090	sbaar@miottawa.org	Adult Juvenile	03/01/2005	05/31/2017	357
Outagamie County Sheriff's Office Jail (WI)	320 S. Walnut Street, Appleton, WI 54911	David Kiesner	Captain	920-832-5617	kiesnedr@co.outagamie.wi.us	Adult Juvenile	01/01/2009	12/31/2013	320
Park County Detention Center (WY)	1402 Riverview Drive, Cody, WY 82414	Todd Larson	Lieutenant	307-899-7417	tlarson@parkcountysheriff.net	Adult	09/01/2010	06/30/2013	70
Peoria County Jail (IL)	301 North Maxwell Road, Peoria, IL 61604	Brian Asbell	Jail Superintendent	309-697-7828	basbell@peoriacounty.org	Adult	02/01/1998	02/28/2014	499
Portage County Jail (OH)	8240 Infirmary Road, Ravenna, OH 44266	Joann Townend	Director	330-297-3614	Not available	Adult	04/01/2007	03/31/2013	205
Price County Jail (WI)	164 Cherry Street, Phillips, WI 54555	Dan Greenwood	Lieutenant	715-339-3011	jailadm@co.pric.e.wi.us	Adult	01/01/2007	12/31/2013	32
Pueblo County Detention Facility (CO)	909 Court Street, Pueblo, CO 81003	Paul Toth	Captain	719-583-6428	tothp@co.pueblo.co.us	Adult	09/20/2004	12/31/2013	600
Pulaski County Jail (IN)	110 East Meridian, Winamac, IN 46996-1645	Michael L. Gayer	Sheriff	574-946-6655	mgayer@pulaski.sheriff.net	Adult	09/01/2007	12/31/2013	110
Racine County Jail (WI)	717 Wisconsin Avenue, Racine, WI 53403	Douglas Wearing	Captain	262-636-3693	douglas.wearing@goracine.org	Adult	02/01/2003	12/31/2013	788

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Reeves County Detention Center (TX)	1560 West County Road 204, Pecos, TX 79772	The Honorable W.J. Bang, M.D.	Reeves County Judge	432-445-5418 x1437	dtbang@aol.com	Adult	09/01/2006	03/01/2014	2,407
Roosevelt County Detention Center (NM)	1700 North Boston Ave, Portales, NM 88130	Dave Casanova	Detention Administrator /Warden	575-356-6871	dcasanova@rooseveltcounty.com	Adult	03/27/2009	07/31/2013	85
Routt County Jail (CO)	2025 Sheild Drive, Steamboat Springs, CO 80477	Michelle Richards on	Lieutenant	970-870-5507	mrichardson@co.routt.co.us	Adult	09/13/1999	12/31/2013	30
Saginaw County Juvenile Detention Center (MI)	3360 Hospital Rd, Saginaw, MI 48602	Melissa Strong	Director	989-799-2821 x4206	Not available	Juvenile	12/01/2002	11/30/2013	56
San Juan County Detention Facility (NM)	871 Andrea Drive, Farmington, NM 87401	Tom Havel	Jail Administrator	505-334-4548	thavel@sicounty.net	Adult Juvenile	08/01/2001	06/30/2013	1,200
Sandoval County Detention Center (NM)	1100 Montoya Road, Bernalillo, NM 87004	Alfred Casamen to	Director	505-867-5339	acasamento@sandovalcountynm.gov	Adult	05/01/2012	04/30/2013	250
Sauk County Jail (WI)	1300 Lange Court, Baraboo, WI 53913	Mike Hafeman	Captain/Jail Administrator	608-355-3210	mhafeman@co.sauk.wi.us	Adult	01/01/2004	12/31/2013	130
Schoolcraft County Jail (MI)	300 Main Street, Manistiquette, MI 49854	Grant Harris	Sheriff	906-341-2122	sheriffgrantharris@gmail.com	Adult	11/01/2011	10/31/2013	20
Scioto County Jail (OH)	1025 16th Street, Portsmouth, OH 45662	Marty V. Donini	Sheriff	740-355-8261	sheriff@sciotoountysheriff.com	Adult	08/01/2009	12/31/2013	170

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
SCORE (WA)	20817 17th Avenue South, Des Moines, WA 98198	Penny Bartley	Director	206-257-6262	penny@scorejail.org	Adult	09/02/2011	09/01/2014	400
Scott County Jail (MO)	211 S. New Madrid Street, Benton, MO 63736	Shawn Wood	Office Manager	573-545-3525	scsd343@charter.net	Adult	10/03/2005	12/31/2013	110
Seneca County Sheriff's Office (OH)	3040 S. State Route 100, Tiffin, OH 44883	Bill Eckelberry	Sheriff	419-447-8205	weeckelberry@senecacountyso.org	Adult	10/03/2011	10/02/2013	200
SEPTA Correctional Facility (OH)	7 West Twenty Nine Drive, Nelsonville, OH 45764	Kathy Tarantelli	Administrative Assistant	740-753-5000	kathy.tarantelli@septaohio.org	Adult	07/01/2010	06/30/2013	106
Shawano County Jail (WI)	405 N. Main St., Shawano, WI 54166	Steve Borroughs	Jail Administrator	715-526-7950	law901@co.shawano.wi.us	Adult	11/01/2003	12/31/2013	110
Sheridan County Detention Center (WY)	54 West 13th Street, Sheridan, WY 82801	Emily Garrett	Lieutenant	307-672-3455	egarrett@sheridancountysheriff.com	Adult	04/01/2009	06/30/2013	90
Shiawassee County Jail (MI)	201 E. McArthur Street, Corunna, MI 48817	Doug Powell	Jail Administrator	989-743-2297		Adult	03/16/2009	03/15/2013	120
Shoshone Bannock Correctional Facility (ID)	East Agency Road, Building 56, Fort Hall, ID 83203	Beverly Wadsworth	Senior Contracting Compliance Officer	208-478-3816	bwadsworth@sbtribes.com	Adult Juvenile		08/19/2013	100

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CJCS CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Smith County Jail and Juvenile Detention Center (TX)	200 E. Elm (Adult) 2811 Public Rd (Low Risk) 2630 Morningside Drive (Juv), Tyler, TX 75710	Deal Folmar	Major – Detention Services	903-590-4725	dfolmar@smith-county.com	Adult Juvenile	10/01/2006	09/30/2013	800
South Iowa Area Detention Service Agency (IA)	2528 255th Street, Montrose, IA 52639	Stephen McCoy	Executive Director	641-472-5017	siacc@isisco.com	Juvenile	11/01/2009	10/31/2013	21
South Texas Intermediate Sanction Facility (TX)	1511 Preston Road, Houston, TX 77002-2131	Neil Adler	VP Regional Operations	Not available	Not available	Adult	09/01/2010	08/31/2017	498
St. Charles County DOC (MO)	301 North Second Street, St. Charles, MO 63301	Scott Myers	Assistant Director of Corrections	636-949-3003 x4404	smyers@sccmo.org	Adult	01/01/2004	05/14/2013	403
St. Charles County Juvenile Detention Center (MO)	1700 South River Road, St. Charles, MO 63303	Beverly Temple	Associate County Counselor	636-949-7900 x3768	btemple@sccmo.org	Juvenile	07/02/2012	07/01/2013	12
St. Croix County Jail (WI)	1101 Carmichael Road, Hudson, WI 54016	Karen Humphre y	Jail Administrator	715-381-4320	Karenh2@co.saint-croix.wi.us	Adult	08/01/2006	12/31/2014	96
St. Francois County Jail (MO)	1550 Doubet Rd., Farmington, MO 63640	Daniel Bullock	Sheriff	573-756-3252	bulldod@sfcscd.org	Adult	11/01/2006	10/31/2013	145
St. Martin Parish Sheriff's Office (LA)	437 W. Mills Ave., Breaux Bridge, LA 70517	Jack Bienvenu	Lt. Colonel	337-394-2571	jbienvenu@stmartinsheriff.org	Adult	10/01/2010	09/30/2013	300

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Starke County Jail (IN)	108 N. Pearl Street, Knox, IN 46534	Kathy Norem	Starke County Commissioner	574-806-3910	knorem.starke@gmail.com	Adult	08/15/2007	12/31/2013	95
Ste Genevieve County Jail (MO)	5 Basler Drive, Sainte Genevieve, MO 63670	Gary Stolzer	Sheriff	573-883-5820	sheriff@sgcso.com	Adult	11/15/2001	11/14/2016	30
Stephenson County Jail (IL)	1680 Singer Drive, Freeport, IL 61032	Dean Schrader	Jail Superintendent	815-235-8252	stephcojail@yahoo.com	Adult	09/02/2002	11/30/2013	135
Story County Jail (IA)	1315 S. B Avenue, Nevada, IA 50201	John Asmusse	Jail Administrator	515-382-7463	jasmussen@storycounty.com	Adult	12/01/2007	06/30/2015	100
Taylor County Jail (WI)	224 South Second Street, Medford, WI 54451	Bruce A. Daniels	Sheriff	715-748-2200 x223	bruce.daniels@co.taylor.wi.us	Adult	01/02/2006	12/31/2013	50
Tazewell County Jail (IL)	101 South Capitol, Pekin, IL 61554	Earl Helm	Jail Administrator	309-478-5613	ehelm@tazewell.com	Adult	12/01/1999	11/30/2013	170
Teller County Jail (CO)	288 County Road 29, Divide, CO 80814	Stan Bishop	Undersheriff	719-687-9652	bishops@co.teller.co.us	Adult	05/01/1998	12/31/2013	100
Teton County Detention Center (WY)	175 S. Willow Street, Jackson, WY 83001	Troy Sutton	Sergeant	307-732-8311	tsutton@tetonsheriff.org	Adult	10/01/2008	06/30/2013	45
Tri-Cap Community Corrections Center (MI)	2300 Veterans Memorial Pkwy, Saginaw, MI 48601	Gary Davis	Interim Executive Director	989-752-0800	gdavis@tricap.net	Other:	10/01/2009	10/31/2013	100

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Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Tri-County Regional Jail (OH)	4099 State Route 559, Mechanicsburg, OH 43044	Ed Bristol	Executive Director	937-834-5052	director@tricolj.com	Adult	04/20/2011	08/19/2013	153
Tuscola County Jail (MI)	420 Court Street, Caro, MI 48723	Leland Teschendorf	Sheriff	989-673-8161 x2224	sheriff@tuscolacounty.org	Adult	07/01/2009	12/31/2013	78
Umatilla County Jail (OR)	4700 NW Pioneer Place, Pendleton, OR 97801	Stewart Harp	Lieutenant	541-966-3629	sharp@umatillacounty.net	Adult	07/10/2001	08/31/2013	124
Vermillion County Jail (IN)	1888 S. State 63, PO Box 130, Newport, IN 47966	Shelly Smith	Matron	765-492-3737	shellysmith@vcs.heriff.com	Adult	04/16/2007	12/31/2014	65
Wabash County Jail (IN)	79 West Main Street, Wabash, IN 46992	Bob Land	Sheriff	260-563-8891	sheriffband@wcs.d.us	Adult	09/01/2003	12/31/2013	95
Washington County Detention Center (MO)	116 W. High Street, Potosi, MO 63664	Ginia Malugen	Jail Administrator	573-438-5478 x0	gmalugen@hotmail.com	Adult	03/01/2011	02/28/2013	28
Washtenaw County Correctional Facility (MI)	2201 Hogback Rd., Ann Arbor, MI 48107	Rick Kaledas	Commander	734-973-4931	kaledasr@ewash.tenaw.org	Adult	01/01/1993	12/31/2013	360
Washtenaw County Juvenile Detention Facility (MI)	4125 Washtenaw Ave., Ann Arbor, MI 48108	Lisa Greco	Director	734-973-4354	grecol@ewash.tenaw.org	Juvenile	06/01/2002	12/31/2013	40
Waupaca County Jail (WI)	1402 East Royalton Street, Waupaca, WI 54981	Jacci Olson	Captain	715-256-4505	jacci.olson@co.waupaca.wi.us	Adult	08/01/2001	12/31/2014	200

CONFIDENTIAL

CHC'S CURRENT CLIENTS									
Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Williamson County Jail (IL)	200 West Jefferson Street, Marion, IL 62959	Bernie Vick	Sheriff	618-997-6541	bvick@wcscheriff.com	Adult	01/01/2001	12/31/2013	140
Winnebago County Jail-WI (WI)	4311 Jackson Street, Oshkosh, WI 54901	Mark Habeck	Captain	920-236-7339	mhabeck@co.wi.nnebago.wi.us	Adult	10/01/2001	12/31/2013	300
Wood County Jail (OH)	1960 East Gypsy Lane, Bowling Green, OH 43402	Ronda Gibson	Captain	419-373-6527	rgibson@co.wood.oh.us	Adult	01/01/2006	05/31/2013	149
Wood County Jail (WI)	400 Market Street, PO Box 8095, Wisconsin Rapids, WI 54494	Randal Dorshorst	Chief Deputy	715-421-8703	rdorshorst@co.wood.wi.us	Adult	03/12/2001	03/10/2013	80
Wood County Juvenile Detention Center (OH)	1032 South Dunbridge, Bowling Green, OH 43402	Tim Brown	Executive Director	419-352-3554	tjbrown@co.wood.oh.us	Juvenile	01/01/1993	06/30/2013	90
Yuma County Detention Center (AZ)	200 W. Court Street, Yuma, AZ 85364	Henry Hernandez	Lieutenant	928-539-7870	henry.hernandez@ycso.yumacountyaz.gov	Adult	06/18/2007	10/29/2013	625
Yuma County Juvenile Justice Center (AZ)	2440 West 28th Street, Yuma, AZ 85364	Tim D. Hardy	Director	928-314-1813	thardy@courts.az.gov	Juvenile	07/01/2009	06/30/2013	44

CONFIDENTIAL

CHC'S CURRENT CLIENTS

Customer	Address	Contact Name	Title	Phone	Email	Type of Inmates	Customer Start Date	Contract End Date	ADP
Wauashara County Jail (WI)	430 East Division Street, Wautoma, WI 54982	George Peterman	Jail Administrator	920-787-6662	george.sheriff@co.waushara.wi.us	Adult	07/01/2003	12/31/2013	120
Wells County Jail (IN)	1615 West Western Avenue, Bluffton, IN 46714	Monte Fisher	Sheriff	260-824-3426	sheriff@wellscountysheriff.com	Adult	01/01/2009	12/31/2014	90
West Texas Intermediate Sanction Facility (Diversions) (TX)	2002 Lamesa Highway, Brownfield, TX 79316	Neil Adler	Vice President, Regional Operations	512-868-2429	Neil.adler@mtctrains.com	Adult	03/01/2004	08/31/2017	275
White County Jail (IN)	White County Jail, 915 West Hanawalt, Monticello, IN 47960	Terry Corso	Jail Commander	574-583-2251	tcorso@wcsheriff-in.us	Adult	05/22/2003	12/31/2014	116
Whitley County Jail-IN (IN)	101 West Market Street, Columbia City, IN 46725	Mark E. Hodges	Sheriff	260-244-6410	mhodges@whitleycountyindiana.gov	Adult	08/01/2007	07/31/2013	115
Wichita County Detention Facility (TX)	900 Seventh Street, Wichita Falls, TX 76308	Donny Johns	Captain	940-766-8170	donny.johns@co.wichita.tx.us	Adult Juvenile	01/01/2010	12/31/2013	600
Willacy County Adult Correctional Facility (Willacy 1) (TX)	1601 Buffalo Drive, Raymondville, TX 75850	Neil Adler	VP Regional Operations	512-868-2429	Neil.adler@mtctrains.com	Adult	10/09/2003	12/31/2015	2,484
Willacy County Correctional Center (Willacy 2) (TX)	1800 Industrial Drive, Raymondville, TX 78580	Neil Adler	Vice President, Corrections	512-868-2429	Neil.adler@mtctrains.com	Adult	08/01/2011	07/31/2015	140

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

Date: **April 13, 2018**

REQUEST FOR PROPOSALS:	Qualified vendors are invited to submit sealed proposals, subject to conditions and instructions as specified, for the furnishing of:
RFP No. 18-0022	INMATE MEDICAL & PHARMACY SERVICES FOR MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)
GENERAL SCOPE	Provide comprehensive medical and pharmacy services to inmates incarcerated in the Muscogee County Prison, in accordance with the specifications set forth herein.
NON-MANDATORY SITE VISIT	No later than seven (7) business days before the proposal due date, vendors desiring to do so may schedule a site visit to view the Clinic of the Muscogee County Prison. To schedule the site visit, contact Deputy Warden Daniel King at 706-225-5803 or dking@columbusga.org . Vendors are not required, but are strongly encouraged, to attend the Non-Mandatory Site Visit. Questions/concerns resulting from the Site Visit must be submitted in writing to the Purchasing Division, as specified on pages 9 and 10.
DUE DATE	MAY 11, 2018 - 5:00 PM (EASTERN) Sealed proposals must be received and date/time stamped on or before the due date by the Finance Department/Purchasing Division of Columbus Consolidated Government, located on the 5 th Floor, Government Center Tower, 100 Tenth Street, Columbus, GA.
ADDENDA	<u>IMPORTANT INFORMATION</u> The Purchasing Division will post addenda (if any) for this project at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm . It is the vendors' responsibility to periodically visit the web page for addenda, before the due date and prior to submitting a proposal.
NO PROPOSAL SUBMISSION	If you are not interested in this solicitation, please complete and return page 3.

Andrea J. McCorvey,
Purchasing Division Manager



IMPORTANT INFORMATION

E-Notification

Effective December 31, 2014, Columbus Consolidated Government (the City) discontinued mailing postcard notifications to its registered vendors, and began using the Georgia Procurement Registry e-notification system.

You must register with the Team Georgia Marketplace to receive future procurement notifications at <http://doas.ga.gov/state-purchasing/suppliers/getting-started-as-a-supplier>.

If you have any questions or encounter any problems while registering, please contact the Team Georgia Marketplace Procurement Helpdesk:

Telephone: 404-657-6000

Fax: 404-657-8444

Email: procurementhelp@doas.ga.gov

STATEMENT OF "NO PROPOSAL SUBMISSION"

Notify the Purchasing Division if you do not intend to submit a Proposal:

Email bidopportunities@columbusga.org or return this form, via fax or mail, to:

Fax number 706-225-3033

Attn: Della Lewis, CPPB, Buyer Specialist

Columbus Consolidated Government

Purchasing Division

P. O. Box 1340

Columbus, Georgia 31902-1340

We, the undersigned decline to submit a proposal for **RFP No. 18-0022** for **Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract)** for the following reason(s):

- ☐ Specifications are too "tight", i.e. geared towards one brand or manufacturer (explain below)
- ☐ There is insufficient time to respond.
- ☐ We do not offer this product and/or service.
- ☐ We are unable to meet specifications.
- ☐ We are unable to meet bond requirements.
- ☐ Specifications are unclear (explain below).
- ☐ We are unable to meet insurance requirements.
- ☐ Remove us from your vendor list for this commodity or service.
- ☐ Other (specify below)

Comments

We understand that if this statement is not completed and returned, Columbus Consolidated Government may delete our company from its bidder list for this commodity or service.

COMPANY NAME: _____

AGENT: _____

DATE: _____

TELEPHONE NUMBER: _____

ADDRESS: _____

PROPOSALS WILL BE EVALUATED IN ACCORDANCE WITH THE PROCEDURES AS OUTLINED BELOW IN SECTIONS 3-110 AND 3-111 OF THE PROCUREMENT ORDINANCE. ALL PROPOSALS WILL BE KEPT CONFIDENTIAL.

3-110 Competitive Sealed Proposals (Competitive Sealed Negotiations) For Equipment, Supplies or Professional Services - \$10,000 and Above

(1) Conditions for Use

When the Purchasing Division Manager determines that the use of competitive sealed bidding for any procurement is either not practicable or not advantageous to the City, a contract may be entered into using the competitive sealed proposals (negotiation) method. In addition, the competitive sealed proposal process shall be used for the procurement of professional services.

The competitive sealed proposal process may be used for procurements with an estimated total cost less than \$10,000, if deemed to be in the best interest of the City. If the total cost can be determined, the authority to approve such solicitations will be as prescribed by Article 3-104, Purchasing Limits. If, due to the required services, a total cost cannot be determined then the award recommendation will be approved by Council.

A. Request for Proposals

Proposals shall be solicited through Request for Proposals. The Purchasing Division shall establish the specifications with the using agency and set the date and time to receive proposals. The request for proposal shall include a clear and accurate description of the technical requirements for the service or item to be procured.

B. Public Notice

Adequate public notice of the Request for Proposals shall be given in the same manner as provided under the section titled "Competitive Sealed Bids."

C. Receipt of Proposals

Proposals must be received by the deadline date established. No public opening will be held. No proposals shall be handled so as to permit disclosure of the identity of any offeror or the contents of any proposal to competing offerors during the process of discussion. A register of proposals shall be prepared as part of the contract file, and shall contain the name of each offeror, the number of modifications received (if any), and a description sufficient to identify the item offered. The register of proposals shall be open for public inspection only after contract award.

D. Evaluation Factors.

The Request for Proposals shall identify all significant evaluation factors (including price or cost) and their relative importance. Mechanisms shall be established for technical evaluation of the proposals received, determinations of responsible offerors for the purpose of written or oral discussions, and selection for contract award.

E. Discussion with Responsible Offerors and Revisions to Proposals

As provided in the Request for Proposals, discussions (negotiations) may be conducted with responsible offerors who submit proposals determined to be reasonably susceptible of being selected for award, to assure full understanding of

and conformance to the solicitation requirements. All qualified, responsible offerors shall be given fair and equal treatment with respect to any opportunity for discussion and revision of proposals, and such revisions may be permitted after submissions and prior to award for the purpose of obtaining best and final offers. In conducting discussions, there shall be no disclosure of the identity of competing offerors or any information derived from proposals submitted by competing offerors. If only one proposal response is received, then the award recommendation shall be to the single offeror, if the offeror meets all requirements.

F. Award.

After negotiations, the award recommendation must be presented to Columbus City Council for final approval. Award will be made to the responsible offeror whose proposal is determined to be the most advantageous to the City, taking into consideration total cost (if determined) and all other evaluation factors set forth in the Request for Proposals.

After Council approval, a contract based on the negotiations (if negotiations were necessary) will be drawn and signed by all necessary parties. If Council does not approve the award, further negotiations may take place with the recommended offeror or negotiations will begin with the next most qualified offerer. The contract file shall contain the basis on which the award is made.

After contract award, the contract file will be made public. Offerors will be afforded the opportunity to make an appointment to review the contract file.

DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION.

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER OR IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FORM" TO FAX OR EMAIL QUESTION.

ANY REQUEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

QUESTION/CLARIFICATION FORM

Date: _____

To: Della Lewis, Buyer Specialist
Email bidopportunities@columbusga.org or
Fax (706) 225-3033

Re: **RFP No. 18-0022 - Inmate Medical & Pharmacy Services for Muscogee County Prison
(Annual Contract)**

.....
Questions and requests for clarification must be submitted at least five (5) business days before the due date:

From:

Company Name

Website

Representative

Email Address

Complete Address

City

State

Zip

Telephone Number

Fax Number

COLUMBUS CONSOLIDATED GOVERNMENT GENERAL PROVISIONS FOR REQUEST FOR PROPOSALS

Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract) RFP No. 18-0022

Provide comprehensive medical and pharmacy services to inmates incarcerated in the Muscogee County Prison, in accordance with the specifications set forth herein.

A. PROPOSAL SUBMITTAL DATE:

SEALED PROPOSALS ARE DUE: MAY 11, 2018 NO LATER THAN 5:00 PM (Eastern).

Submit one (1) original and seven (7) identical copies of the proposal. For proper identification, the proponent's complete name and address should appear on the exterior of the proposal package.

The proposal should be hand delivered or mailed to the following:

Columbus Consolidated Government - Purchasing Division
RE: Inmate Medical Services for Muscogee County Prison (Annual Contract) – RFP No. 18-0022

Mail: P.O. Box 1340
Columbus, Georgia 31902-1340

Deliver: 100 10th Street
Columbus, Georgia 31901

If the proposal does not reach the Purchasing Division on or before the due date, the proposal will be returned to the Proposer unopened. It is the Proponent's responsibility to insure the proposal is mailed or delivered by the due date. The City will not be held responsible for proposals delayed by the US Mail or any other courier.

The City shall not be held liable for any expenses incurred by the respondent in preparing and submitting the proposal and/or attendance at any interviews, final contract negotiations or applicable site visits. The City reserves the right to award this project or to reject any and all proposals; whichever is in the best interest of the City.

B. RECEIPT OF PROPOSALS:

Unless otherwise stated in the technical specifications of the RFP, the City will accept one, and only one, proposal per Offeror. In the event a team of firms is entering into a joint venture to respond to the RFP, one firm shall be named the prime contractor and the proposal shall be submitted in the name of the prime contractor. All correspondence concerning the RFP will be between the City and prime contractor.

C. SUBCONTRACTING:

Should the offeror intend to subcontract all or any part of the work specified, names and address of subcontractors must be provided in proposal response. The offeror shall be responsible for

subcontractors' full compliance with the requirements of the RFP specifications. If awarded the contract, payments will only be made to the offerors submitting the proposal. The Columbus Consolidated Government will not be responsible for payments to subcontractors.

D. QUESTIONS ABOUT THE RFP:

Communication concerning any solicitation currently advertised must take place in writing and addressed to the Purchasing Division. See page titled "Do You Have Questions ..." within this proposal package. **Questions and Requests for Clarification will be received until five business days prior to the proposal due date.**

E. PUBLIC INFORMATION:

All information and materials submitted will become the property of the Columbus Consolidated Government, Columbus, Georgia; and shall be subject to the provisions of the Georgia public records law. If awarded the contract, the proposal submission, in its entirety, will be included as part of the contract documents and filed, as public record, with the Clerk of Council.

F. ADDENDA:

The proposer shall include acknowledgment of receipt of addenda (if any) in their sealed proposal. The proposer should include an initialed copy of each addendum in the proposal package. It is the proposer's responsibility to contact the City for copies of addenda if they receive the proposal document from any other source other than the City.

G. CONTRACT:

Each proposal is received with the understanding that an acceptance in writing by the City of the offer to furnish any or all of the services and materials described shall constitute a contract between the proposer and the City. This contract shall bind the proposers to furnish and deliver the services and materials quoted, at the prices stated and in accordance with the condition of said accepted proposal.

It is agreed that the successful respondent will not assign, transfer, convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.

H. NON-COLLUSION:

Proposer declares that the proposal is not made in connection with any other proposer submitting a proposal for the same commodity or commodities, and that the proposal is bona fide and is in all respects fair and without collusion or fraud.

I. INDEMNITY:

The successful respondent agrees, by entering into this contract, to defend, indemnify and hold City harmless from any and all causes of action or claims of damages arising out of or under this contract.

J. DISADVANTAGED BUSINESS ENTERPRISE CLAUSE:

Disadvantaged Business Enterprises (minority or women owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex, sexual orientation, gender identity or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority business enterprises have an opportunity to participate at all levels of contracting in the

performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

K. AFFIRMATIVE ACTION PROGRAM - NON-DISCRIMINATION CLAUSE:

The City has an Affirmative Action Program in connection with Equal Employment Opportunities. The successful vendor will comply with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, and will not discriminate between or among them by reason of race, color, age, religion, sex, sexual orientation, gender identity, national origin or physical handicap.

L. SPECIFICATION DESCRIPTIONS:

The specifications detailed herein represent the quality of equipment, goods or services required by the City. Whenever in this invitation any particular process, service or equipment is indicated or specified by patent, proprietary or brand name of manufacturer/developer/inventor, such wording will be deemed to be used for the purpose of facilitating descriptions of the process, service or equipment desired by the City. It is not meant to eliminate offerors or restrict competition in any RFP process. Proposals that are equivalent or surpass stated specifications will be considered. Determination of equivalency shall rest solely with the City.

M. TAXES:

The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.

N. DRUG-FREE WORKPLACE:

Per Ordinance No. 93-55, in compliance with Federal and State Drug Free Workplace Acts, the Council of Columbus, Georgia adopted a drug free Workplace Policy. Consequently, any vendor providing goods or services to Columbus Consolidated Government must comply with all applicable Federal and State Drug Free Workplace Acts.

O. FEDERAL, STATE, LOCAL LAWS:

All respondents will comply with all Federal, State and Local laws, ordinances, rules and regulations relative to conducting business in Columbus, Georgia and performing the prescribed service. Ignorance on the part of the respondent shall not, in any way, relieve the respondent from responsibility for compliance with said laws and regulations or any of the provisions of these documents.

P. PROVISIONS OF THE PROCUREMENT ORDINANCE:

The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations to respond to Requests for Proposals and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

Q. INSURANCE:

All respondents shall maintain, and if requested, show proof of insurance applicable for services described in these specifications.

R. HOLD HARMLESS AGREEMENT:

The successful respondent hereby agrees to indemnify, hold free and harmless Columbus Consolidated Government (The City), its agents, servants, employees, officers, directors and

elected officials or any other person(s) against any loss or expense including attorney fees, by reason of any liability imposed by law upon the City, except in cases of the City's sole negligence, sustained by any person(s) on account of bodily injury or property damage arising out of or in the consequence of this agreement.

S. TERMINATION OF CONTRACT:

- 1. Default:** If the contractor refuses or fails to perform any of the provisions of this contract with such diligence as will ensure its completion within the time specified in this contract, or any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Director may notify the contractor in writing of the delay or nonperformance and if not cured within **ten (10) days** or any longer time specified in writing by the Purchasing Division Director, such director may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Director may procure similar supplies or services, from other sources, in a manner and upon terms deemed appropriate by the Purchasing Division Director. The contractor will continue performance of the contract to the extent it is not terminated and will be liable for excess costs incurred in procuring similar goods or services.

- 2. Compensation:** Payment for completed supplies or services delivered and accepted by the City will be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Director deems to be necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.
- 3. Excuse for Nonperformance or Delayed Performance.** Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms (including any failure by the contractor to make progress in the prosecution of the work hereunder which endangers such performance) if the contractor has notified the Purchasing Division Director within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather, If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deemed to be in default, unless the supplies or services to be furnished by the subcontractor was reasonably obtainable from other sources in sufficient time to permit the contractor to meet the contract requirements.

Upon request of the contractor, the Purchasing Division Director shall ascertain the facts and extent of such failure, and, if such director determines that any failure to perform was occasioned by anyone or more of the excusable causes, and that, but for the excusable cause, the contractor's progress and performance would have met the terms of the contract, the delivery schedule shall be revised accordingly.

T. TIME FOR CONSIDERATION:

Due to the evaluation process, proposals must remain in effect for at least **120 days** after date of receipt.

U. CONTRACT AWARD:

Award of this contract will be made in the best interest of the City.

V. REQUEST FOR EVALUATION RESULTS:

Per the City's Procurement Ordinance, evaluation results cannot be divulged until after the award of the contract. After contract award, proponents desiring to review documents relevant to the RFP evaluation results will be afforded an opportunity by appointment only.

W. GOVERNING LAW:

The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.

X. FINAL CONTRACT DOCUMENTS:

It is understood that the final contract shall include the following: 1) The RFP; 2) Addenda; 3) Awarded Vendors(s) response; 4) Awarded Vendor(s) Clarifications; 5) Negotiated Components; 6) Additional Agreements required by Awarded Vendor(s); and 7) Awarded Vendor(s) Business Requirements.

Y. PAYMENT DEDUCTIONS:

The City reserves the right to deduct from payments to awarded vendor(s), any amount owed to the City for various fees, to include, but not limited to: False Alarm fees, Ambulance fees, Occupation License Fees, Landfill fees, etc.

Z. PAYMENT TERMS:

The City's standard payment term is usually net 30 days, after successful receipt of goods or services. Payment may take longer if invoice is not properly documented or not easily identifiable, goods/services are not acceptable, or invoice is in dispute.

NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business, which is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

INMATE MEDICAL & PHARMACY SERVICES FOR MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT) RFP NO. 18-0022

I. INTRODUCTION

It is the intent of Columbus Consolidated Government (the City) and the Muscogee County Prison (MCP) to enter into an annual contract with a qualified medical correctional provider for comprehensive medical and pharmacy services to those patients incarcerated in the MCP. Currently, approximately 576 offenders (528 State and 48 County offenders) are housed at MCP, which is an all-male facility. The medical services will reflect the Georgia Department of Corrections medical standards for prisons and will be commensurate with the accepted community standard of care. These services are further delineated in **Appendix A**. Refer to **Appendix B** for current staffing and **Appendix C** for the 2017 Statistical Report.

Correctional Healthcare Companies, LLC (Greenwood Village, CO) is the current provider of inmate medical services; the contract does not include mental health services. The monthly cost for the medical services is \$58,927.85. The Muscogee County Prison does not currently have a contract for pharmacy services.

II. VENDOR QUALIFICATION

- A. Five (5) years successful experience providing comprehensive health care to jails/prisons with a population of approximately 600 inmates.
- B. Five (5) Years of successful experience providing comprehensive health care to state, county, or private prisons.
- C. Successful NCCHC accreditation of at least one jail/prison of comparable size.

III. TRANSITION PERIOD

Columbus Consolidated Government and Correctional Healthcare Companies, LLC have exhausted all renewals for the contract, which will expire on **August 31, 2018**. If the incumbent contractor is not awarded this contract, the successful contractor is expected to coordinate with Correctional Healthcare Companies, LLC to effect a smooth transition.

IV. TERM AND CONDITIONS

A. The term of this contract will be for two (2) years, with an option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

Notice of intent to renew will be given to the contractor in writing by the City Purchasing Manager, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only after funding appropriations and program approval have been granted by the Council of the Consolidated Government of Columbus, Georgia. In the event that the necessary funding is not approved, then the affected multi-year contract becomes null and void, effective July 1st of the fiscal year for which such approvals have been denied.

B. Termination for Convenience

For the protection of both parties, either party giving 90 days prior notice in writing to the other party may cancel this contract.

V. INDEMNITY CLAUSE

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

VI. INSURANCE

The vendors shall be required, at their own expense, to furnish to the City of Columbus Purchasing Division, evidence showing the insurance coverage to be in force throughout the term of the contract. Insurance requirements are listed on the attached **Insurance Checklist (Form 3)**. **The limits shown are minimum limits. Vendor shall indicate the actual limit they will provide for each insurance requirement. The bidder shall complete the Insurance Checklist and include with bid response. Certificate of Insurance is acceptable.** The Insurance Checklist will indicate to the City, the bidder's ability and agreement to provide the required insurance, in the event of contract award.

The successful candidate shall provide the required Certificates of Insurance within **10 business days** after award notification. The Certificates of Insurance will be included with the contract documents prior to signing.

VII. GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT

In accordance with the Georgia Security and Immigration Compliance Act/E-Verify, every public employer, every contractor of a public employer, and every subcontractor of a public employer's contractor must register and participate in a federal work authorization program (see http://www.dol.state.ga.us/spotlight/sp_sb_529_new_rules.htm). **A completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's or individual's proposal non-responsive and ineligible for award consideration.**

VIII. PROPOSAL PREPARATION AND SUBMISSION

The complete proposal shall contain the following information and shall be submitted in the order shown below. Please address each section in your proposal submission; divide each section with identifying tabs.

Firms should submit proposals that address each of the sections specified below. *With the exception of the E-Verify Affidavit*, the City reserves the right to request any omitted information. Firms shall be notified, in writing, and shall have two (2) days after notification to submit the omitted information. If the omitted information is not received within two (2) days, the firm shall be deemed non-responsive and the proposal will not receive further consideration.

PART A. TECHNICAL PROPOSAL

Section 1: Transmittal Letter

Transmittal letter shall introduce the applicant/business, describe the ownership, include complete address, phone and fax numbers (if applicable), and include the name and email of contact person(s) during this proposal process. Include a statement to the effect that the proposal is binding for at least 120 days from the proposal date. **An authorized agent of the business must sign the transmittal letter.**

Section 2: Affidavit for E-Verify/Georgia Security and Immigration Compliance Act (Form 1)

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration. To access your E-Verify Company Identification Number, see <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES>.

Section 3: Addenda Acknowledgement

Acknowledge receipt for all addenda (if any). Addenda will be posted at: https://www.columbusga.org/finance/purchasing/docs/opportunities/Bid_Opportunities.htm. It is the vendors' responsibility to periodically visit the web page for addenda, before the due date and before submitting a proposal.

Section 4: Experience and Qualifications

This section shall address the firm's ability to fulfill the requirements of the RFP. Provide responses to the following:

- A. Describe in detail the firm's ability and experience in providing the medical and pharmacy services to incarcerated clients, as specified in Appendix A, as well as other clients with similar needs.
- B. Provide the names and titles of professional staff, including administrative and medical personnel, who will be dedicated to this contract to perform the services required. Provide copies of resumes, medical licenses, credentials, etc.
- C. Attach additional facts about your firm that you feel will be an asset in evaluating your proposal.

Section 5: Client Work History

Use **Form 2** to provide details of the last three (3) state, county or private jails/prison for which you have provided the specified services. The City reserves the right to contact additional clients not listed.

Section 6: Service Plan

- A. Describe the firm's understanding of the scope of service.
- B. Provide a written narrative, which demonstrates the method, or manner in which the offeror proposes to satisfy the requirements of this Request for Proposals. Include a proposed transition plan, and the requirements from Columbus Consolidated Government and the incumbent contractor, in the event the incumbent contractor is not awarded the new contract.
- C. Provide a list of all known equipment that will be provided by the vendor, or must be provided by the Muscogee County Prison under this contract.
- D. Describe any similar contracts vendor is currently involved in and their duration. Include the entity name and contact person, project, location, services provided, date of completion, and contact telephone and email.

Section 7: Cost Proposal *(subject to negotiations)*

Use **Form 5** to provide annual fees for medical services, which will be paid in twelve (12) equal monthly installments, and the percentage for pharmacy services. Delineate other associated costs required to provide the services but are not included in the annual fee.

Section 8: Contract Signature Page

Complete **Form 6**. City officials will sign the copies after Columbus Council approves the contract award with the successful firm. Contracts for Columbus Consolidated Government are typically comprised of the RFP specifications and addenda; the business documents of the successful firm; the proposal of the successful firms; cost proposal and negotiation documents; and any clarification documents.

Per Section 9 below, the firm's agreement/contract form may be incorporated into the contract; subject to review and approval by the City's Legal Department.

Section 9: Agreement/Contract Form *(If Applicable)*

Provide a copy of any and all Agreement(s)/Contract Form(s) the City would be required to sign prior to entering into a contract with your firm.

PART B. BUSINESS REQUIREMENTS

IN A SEPARATE ENVELOPE, SUBMIT ONE (1) COPY OF THE FOLLOWING DOCUMENTS:

1. Provide Insurance Checklist (**Form 3**) or Certificate of Insurance
3. W-9 (**Form 4**)
4. Provide a current copy of the Business License (Occupation License) that is required to conduct business at your location.

If awarded the contract, the successful vendor must obtain a business license from the City of Columbus. However, if the business is located in Georgia and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the contractor will not be required to pay occupation taxes in Columbus, Georgia.

If you have questions regarding this requirement, please contact Yvonne Ivey, Revenue Division Manager, at telephone 706-225-3091.

X. RFP EVALUATION

Each submittal will be evaluated to determine the ability of each offeror to provide the required services. The following weighted criteria will be used to evaluate proposals:

Criteria for Evaluation Weight	Weight
A. Experience and Qualifications	40%
B. Service Plan	40%
C. Client Work History	15%
D. Proposed Cost <i>(subject to negotiations)</i>	5%
Total	100%

Each of the above criteria (A-D) will be given a rating, of 1 through 100, by each member of the Evaluation Committee. The ratings are as follows:

RATING	DESCRIPTION
1-20	Poor
21-40	Fair
41-60	Good
61-80	Excellent
81-100	Superior

After the review and rating of proposal(s) by the evaluation committee, individual scores will be averaged and ranked. Offerors will be ranked in descending order of numerical predominance.

APPENDIX A

CONTRACT REQUIREMENTS

I. SCOPE OF SERVICES

Contractor will be required to provide the staffing, supplies, in-clinic contracts, systems, and administration to provide the following services to the patients at the Muscogee County Prison within the time frame and to a level of quality that will meet Georgia Department of Corrections (GDC) medical standards for prisons.

GDC has separate guidelines that Muscogee County Prison must meet, due to the 528 state inmates housed at MCP. Any changes in population or standard of care set forth in the GDC guidelines may require an adjustment in the staffing level agreed upon in the original contract. The changes shall be discussed between GDC and the awarded vendor. If an agreement in staffing or service levels cannot be met, either party may terminate upon a 90-day written notice.

The following list will serve as a minimum expectation of services the vendor will be required to provide within the scope of this contract:

A. Health Care Services:

1. Intake Screening
2. 14 day physicals
3. Sick Call
4. Chronic Care
5. Medical Delivery
6. Nursing Services
7. Emergency Services
8. Referrals to Hospital and Specialty Care
9. Case management
10. Utilization Management
11. Prior Authorization
12. Billing Adjudication
13. Quality Assurance/Quality Improvement
14. Offender Health Education
15. Medical Records management
16. Expendable Medical Supplies (Includes all expendables in sufficient quantity to execute daily delivery of medical care such as antifungal creams dressings, over the counter analgesics, cold medicines) (excludes pharmacy orders for prescription meds)
17. All office supplies, printing postage, manuals, telephones, and computer not directly involved in the actual point of delivery inmate medical care will be responsibility of the vender.
18. Formulary Development and Management
19. In clinic labs (includes contract with lab services provider)
20. In clinic x-ray services (includes contract with mobile x-ray)
21. Dental services (will not include costs associated with partials, dentures, and oral surgery conducted off site)
22. Hazardous Waste Management and Disposal (includes contract with waste management disposal company)
23. Vender is responsible for providing its employees with all equipment required for conducting routine medical assessments and procedures to include but not limited to any

- devices used to access vital signs, dopplers, stethoscopes, glucometers and test strips, dressings, suture kits etc.
- 24. Drugs and Alcohol Withdrawal and Detox.
- 25. Vender is responsible for filing Medicare.

B. Pharmacy Services

1. Formulary and non-formulary oversight
2. Prescribing and dispensing of medications
3. Recordkeeping
4. Management data and reports quantifying medications ordered, processed, delivered, and disposed.
5. Reports shall be delivered in a mutually agreed upon HIPAA-compliant format.
6. Secure and proper storage of all medications in accordance with NCCHC standards, Muscogee County Prison policy, and applicable state and federal laws.
7. Contracted vendor shall invoice (monthly) the Muscogee County Prison for amounts paid by the contracted vendor, on behalf of the Muscogee County Prison for pharmacy services, and cost details for the same, plus the management fee (percentage).

II. PERSONNEL/STAFFING

Vendor will be required to recruit, train, and manage all clinical staff. The Muscogee County Prison has provided a sample-staffing matrix below, but vendors are encouraged to offer innovative ways to enhance the delivery of care with more efficient staffing models. Any changes in population or standard of care set forth in the GDC guidelines may require an adjustment in the staffing level agreed upon in the original contract. The changes shall be discussed between GDC and the awarded vendor. If an agreement in staffing or service levels cannot be met, either party may terminate upon a 90-day written notice.

Staffing Matrix Proposed by the MCP for the Muscogee County Prison

1. Medical Director (1)	8 hours per week
2. NP/PA (1)	8 hours per week
3. RN (1)	40 hours per week
4. Administrative Assistant (1)	40 hours per week
5. LPNs (5)	200 hours per week (40 hours each)
6. Dentist (1)	4 hours per week
7. Optometrist (1)	4 hours per week
8. X-Ray Technician (1)	1 hour weekly

III. VENDOR REQUIREMENTS

- A. Vendor will be responsible for arranging emergency service and emergency transport. Vendor will not be financially responsible for emergency room costs or the cost of transport.
- B. Vendor will be responsible for arranging hospital and specialty care. Vendor will not be responsible for the costs of either hospital or specialty care.
- C. Vendor will not be responsible for elective care. Elective care is any treatment or medical intervention not required to prevent deterioration in the patient's health or required to avoid obvious harm to the inmate/patient. The vendor's Medical Director will determine what treatments, interventions, therapies and pharmaceuticals are elective as opposed to those required to maintain the patients' health.

- D. Vendor will be required to provide emergency services to anyone on the property of the MCP to include visitors, other contractors and staff. The vendor is not responsible for any costs associated with transport of or follow-up care provided to these patients.
- E. Vendor is responsible for providing the MCP with a pharmaceutical formulary, which includes an objective process and peer oversight/ prior authorization for any prescriptions, which deviate from the base line first tier drug formulary. The vendor is NOT responsible for the cost associated with any prescription, which is derived from the formulary and/or follows the process agreed upon for ordering non-formulary drugs. In those cases in which the vendor's provider does not follow the formulary or the process of prior authorization for ordering non-formulary drugs, the vendor WILL be responsible for the cost associated with that prescription.
- F. Vendor will be responsible for all Utilization Management and Claims Adjudication for any off site hospitalization or specialty care. The vendor will be identified as the administrative agent for all off-site medical care for the MCP. The vendor will not be financially responsible for any off-site specialty or hospital care.
- G. Vendor will bill the MCP thirty (30) days after the end of the contract quarter for reimbursement equal to all the money the vendor has paid off-site medical services on behalf of the MCP. The MCP will submit payment to the vendor equal to the amount the vendor has billed within 30 days of receipt.
- H. The MCP will provide all the office space, clinic space, durable medical equipment and security that will be required by the vendor to allow the vendor to provide medical services to inmate/patients within the time frame and of the quality required.
- I. Vendor will not be responsible for mental health treatment.
- J. Vendor will provide monthly summary reports on clinical services to the MCP. These reports will include as a minimum the following:
 - 1. Number of patients on Psychotropic Drugs (A contracted mental health provider will prescribe the drugs and the successful Inmate Medical & Pharmacy Services provider shall dispense/administer the drugs to the inmates.)
 - 2. Treatment of patients with alcohol and drug abuse issues
 - 3. Any use of restraints
 - 4. Any use of forced medications
 - 5. Sick call
 - 6. Chronic care
 - 7. Physicals
 - 8. Intake Screening
 - 9. TB prevention
 - 10. Infection Control Tracking
 - 11. HIV Treatment
 - 12. Staffing report with actual FTEs, hours worked and level of professional certifications.
 - 13. Any sentinel events
 - 14. Legal Cases
 - 15. Dental Sick Call
 - 16. Vision Screening
 - 17. Referrals to outside specialists
 - 18. Any refusals of care by patients
 - 19. Any refusals of medication
 - 20. Narcotics counts
 - 21. Emergency Room visits (requires additional documentation and justification)
 - 22. Specialist visits (requires additional documentation and justification)

IV. EQUIPMENT PROVIDED BY MUSCOGEE COUNTY PRISON

A. Examination Tables	2 each
B. Centrifuge	1 each
C. Dental Chair (New)	1 each
D. AED (New)	1 each
E. Medication Cart	1 each
F. Sharps Cart	1 each
G. Glucometer	1 each
H. Oxygen Tanks	4 each
I. Emergency Bags (Stocked)	2 each
J. Scales (1 digital, 1 manual)	2 each
K. Wheel Chair	1 each
L. Back Board	1 each
M. Medical Refrigerator	1 each
N. Specimen Refrigerator	1 each
O. Gurnee	1 each
P. Ophthalmoscope	1 each
Q. Portable Pulse oximeter	1 each
R. Dental X-ray Machine	1 each
S. Autoclave	1 each
T. Mobile Blood Pressure	1 each
U. Copier (Under contract)	1 each
V. Physician stools	3 each
W. Compressor Nebulizer	1 each
X. IV Pole	1 each
Y. Office Desks	4 each

V. EQUIPMENT/SERVICES TO BE PROVIDED BY VENDOR

If the incumbent service provider is not awarded this contract, the successful vendor shall provide the following:

A. EKG Machine (New)	1 each
B. Computers (New)	2 each
C. Oscopes	2 each
D. Internet services	
E. Telephone services	

VI. SUMMARY

The MCP has purposely elected to not describe the methods of and procedures by which the selected vendor will execute the medical services they will be contracted to provide. Rather we expect that the vendor will be cognizant of the Georgia Department of Corrections guidelines and evolving legal/medical environment from which the concept of "Community Standard of Care" is derived. We expect that the selected vendor can articulate innovative, efficient practices that will ensure the inmate/patient receives the quality of care required to protect their health, meets this community's expectation of humaneness and applies the investment the taxpayers have made as effectively as possible.

APPENDIX B

Staffing Matrix of Current Contractor

Position	Hours/Week	Total Full-Time Employees
Medical Director – Physician	8	.20
Dentist	4	.10
Registered Nurse	40	1.00
Licensed Practical Nurse	112	2.80
Licensed Practical Nurse	56	1.40
Licensed Practical Nurse	56	1.40

Muscogee County Prison Division													
Health Services Statistical Report	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Totals YTD
AVERAGE DAILY POPULATION													
MEDICAL													
INPROCESSING SCREENING BY CCS	11	15	16	15	24	27	15	25	10	34	14	24	230
SICK CALL - NURSE						449	378		518	405	234	324	2308
SICK CALL - PROVIDER							11	6	13	0	0	0	30
SICK CALL - PHYSICIAN VISITS	126	126	103	135	108	80	119		127	123	117	106	1270
SICK CALL - TOTAL ENCOUNTERS	509	672	617	681	666	529	497		658	528	351	430	3138
SICK CALL - TOTAL REFERRALS RECEIVED													
EMERGENCY RESPONSE - ON-SITE	0	0	0	0	0	1	0	0	0	0	0	0	1
NURSE CONTACTS - TREATMENTS & MONITORING													
14 DAY HEALTH ASSESSMENTS COMPLETED													
14 DAY HEALTH ASSESSMENTS UNCOMPLETED													
ANNUAL HEALTH ASSESSMENTS COMPLETED	6	2	1	7	5	6	5	38	11	15	10	6	112
ANNUAL HEALTH ASSESSMENTS DUE													
X-RAYS (NON-TB RELATED) ON-SITE	19	6	9	21	14	9	6	9	10	10	10	11	134
EKGs								1	0		0	1	2
MEDICAL RECORDS													
SCANNED PAPERWORK													
MENTAL HEALTH													
PSYCHIATRY													
INMATES SEEN	8	0	0	0	11	1	11	0	11	0	2	1	45
EMERERGENT/ URGENT INMATES SEEN	0	0	0	0	1		0	0	0	0	0	1	2
PSYCH EVALS (HD)						1	2	0	0	0	1	2	6
MENTAL HEALTH PROVIDERS													
# OF MENTAL HEALTH REQUEST	0	0	0	1	1	0	2	0	1	0	4	0	9
FOLLOW-UP VISITS	0	0	0	0	10	0	0	0	10	0	12	0	32
SEGREGATION ROUNDS	31	26	28	30	31	31	30	31	31	0	30	31	330
# OF MENTAL HEALTH REFERRALS	0	0	0	0	1	0	0	0	0	0	4	0	5
SELF-HARM													
# OF INMATES ATTEMPTED SUICIDE	0	0	0	0	0	0	0	0	0	0	0	0	0
DENTAL													
DENTAL EXAMS	36	34	33	35	47	23	48	34	34	38	47	36	445
DENTAL SICK CALL / SCREENS	36	34	33	35	47	23	48	34	34	38	50	37	445
EXTRACTIONS	31	32	22	26	27	17	31	28	18	25	38	27	322
REFUSALS	14	6	6	8	12	9	2	9	11	4	9	3	93
OFF-SITE DENTAL REFERRALS	1	1	2	2	0	2	1	2	1	2	0	2	16
OFF-SITE SERVICES													
EMERGENCY ROOM VISITS	1	4	0	3	1	3	3	2	4	5	2	4	32
AMBULANCE TRANSPORTS to ER	0	1	0	0	1	1	0	0	0	2	1	1	7
PRISON TRANSPORTS to ER	1	0	0	0	0	2	3	2	4	3	1	3	19
HOSPITAL ADMISSIONS	0	1	0	0	0	1	0	0	0	1	0	1	4
HOSPITAL DAYS	0	1	0	0	0	1	0	0	0	3	1	1	7
AVERAGE LENGTH OF STAY	0	1	0	0	0	1	0	0	0	3	0	1	6
ON-SITE SPECIALTY CONSULTATIONS	1	0	0	0	0	0	0	0	0	0	0	0	1
OFF-SITE SPECIALTY CONSULTS	1	2	0	1	1	0	0	0	0	0	1	0	6
ONE DAY SURGERIES	0	0	0	0	0	0	0	0	0	0	1	0	1
OFF-SITE RADIOLOGY	0	0	0	0	0	1	0	0	0	1	0	0	2
DEATHS ON-SITE	0	0	0	0	0	0	0	0	0	0	0	0	0
DEATH IN CUSTODY	0	0	0	0	0	0	0	0	0	0	0	0	0
PHARMACEUTICALS													
TOTAL I/MS ON MEDS	257	153	148	125	179	112	110	102	110	98	107	111	1512
TOTAL I/MS ON MEDICAL MEDS	257	153	148	125	179	112	110	102	110	98	107	111	1512
TOTAL I/MS ON PSYCHOTROPIC MEDS	9	9	10	10	11	12	11	9	11	10	10	11	123
TOTAL I/MS NONFORMULARY MEDS	51	42	44	28	63	31	16	34	30	0	33	22	384
# OF MEDICATION CARDS RETURNED TO PHARMACY	15	6	10	22	31	21	27	23	12	13	9	15	165
# OF MEDICATION BOXES RETURNED TO PHARMACY	0	0	23	24	1	0	0	0	0	0	0	0	48
CHRONIC CARE													
ASTHMA/COPD	3	2	6	6	3	6	7	3	6	7	1	6	56
DIABETICS	0	2	4	0	0	1	1	0	0	1	0	1	10
DIALYSIS	0	0	0	0	0	0	0	0	0	0	0	0	0

Muscogee County Prison Division													
Health Services Statistical Report	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Totals YTD
HIV	0	0	0	0	0	0	0	0	0	0	0	0	0
PREGNANCY	0	0	0	0	0	0	0	0	0	0	0	0	0
HYPERTENSION / CARDIOVASCULAR	14	9	7	14	15	7	17	10	5	15	11	10	134
SEIZURE DISORDERS	0	0	0	0	0	1	0	0	0	0	0	0	1
THYROID	0	10	0	0	0	0	0	0	0	0	0	0	0
TUBERCULOSIS	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER	4	3	4	4	4	5	5	4	3	7	2	2	43
INFECTIOUS DISEASE CONTROL													
PPDs PLANTED	13	28	16	13	41	35	36	61	47	28	15	18	351
PPDs READ	13	28	16	13	41	35	36	61	47	28	15	18	351
POSITIVE PPDs	0	0	0	0	0	0	0	0	0	0	0	0	0
TB RELATED CHEST X-RAYS	1	2	1	3	3	4	2	8	3	7	7	0	38
ACTIVE TB	0	0	0	0	0	0	0	0	0	0	0	0	0
HIV TEST	6	10	10	18	18	18	13	61	29	26	34	0	188
POSITIVE HIV	1	0	0	0	0	0	0	0	0	0	0	0	1
# OF POSITIVE HIV INMATES	1	0	0	0	0	0	0	0	0	0	0	0	1
HEPATITIS A													
HEPATITIS B													
HEPATITIS C	1	1	1	0	2	1	1	0	1	2	3	2	15
CHLAMYDIA													
GONORRHEA													
SYPHILIS	2	0	0	0	0	1	0	1	0	0	0	0	4
Other STD/ PID Not listed					1	1	1	1	2	2	2	2	12
PEDICULOSIS													
SCABIES													
MRSA CONFIRMED													
CONFIRMED MRSA TREATED													
SUSPECTED MRSA TREATED													
GRIEVANCES													
INMATES WITH GRIEVANCES													
DISSATISFIED WITH MEDICAL CARE													
DISSATISFIED WITH DENTAL CARE													
DISSATISFIED WITH MENTAL HEALTH CARE													
DISSATISFIED WITH STAFF CONDUCT													
DISSATISFIED WITH DELAY IN HEALTHCARE													
PROBLEMS WITH MEDS													
REQUEST TO BE SEEN													
OTHER													

**VENDOR INFORMATION REGARDING
GEORGIA SECURITY AND IMMIGRATION COMPLIANCE
*and***

House Bill 87, also known as, The Illegal Immigration Reform and
Enforcement Act of 2011

Section 3 of House Bill 87 amends O.C.G.A. §13-10-91.

O.C.G.A. §13-10-91(b)(1) states, in part, “A public employer shall not enter into a contract ... for the physical performance of services unless the contractor registers and participates in the federal work authorization program.”

Accordingly, the affidavits on the pages that follow relate to documentation you must provide the City.

All contractors must complete the attached “CONTRACTOR AFFIDAVIT”**. Additionally, if you utilize subcontractors, they must complete the “SUBCONTRACTOR AFFIDAVIT” and or the “SUB-SUBCONTRACTOR AFFIDAVIT.”**

***In lieu of the affidavit required by this subsection, a contractor, subcontractor, or sub-subcontractor who has no employees and does not hire or intend to hire employees for purposes of satisfying or completing the terms and conditions of any part or all of the original contract with the public employer shall instead provide a copy of the state issued driver's license or state issued identification card of such contracting party and a copy of the state issued driver's license or identification card of each independent contractor utilized in the satisfaction of part or all of the original contract with a public employer. A driver's license or identification card shall only be accepted in lieu of an affidavit if it is issued by a state within the United States and such state verifies lawful immigration status prior to issuing a driver's license or identification card.

See <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES> to access your E-Verify Company Identification Number.

Information is available at: http://www.dol.state.ga.us/spotlight/sp_sb_529_new_rules.htm

CONTRACTOR AFFIDAVIT
E-VERIFY / GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of **Columbus Consolidated Government** has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Company ID Number (*numerical, 4-7 digits*)

Date of Authorization

****See <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES> to access your E-Verify Company Identification Number.**

Name of Contractor

Inmate Medical & Pharmacy Services for MCPrison (Annual Contract); RFP No. 18-0022

Name of Project

Columbus Consolidated Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ___, 20__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

Subscribed and sworn before me on this the ___ day of _____, 201__.

NOTARY PUBLIC

My Commission Expires:

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

CLIENT WORK HISTORY

Provide details of the last three (3) state, county or private jails/prison for which you have provided the specified services. The City reserves the right to contact additional clients not listed.

Facility Name:	
Contact Name:	
Address:	Telephone:
	Fax Number:
	E-Mail Address:
Description of Services Provided:	

Facility Name:	
Contact Name:	
Address:	Telephone Number:
	Fax Number:
	E-Mail Address:
Description of Services Provided:	

Facility Name:	
Contact Name:	
Address:	Telephone Number:
	Fax Number:
	E-Mail Address:
Description of Service Provided:	

Company Name**Authorized Signature****Date**

INSURANCE CHECKLIST

**INMATE MEDICAL & PHARMACY SERVICES
FOR MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)
RFP NO. 18-0022**

**CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE
AND ENDORSEMENTS INDICATED BY "X"**

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
	Comprehensive General Liability		
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability		
X	7. *Owned/Hired/Non-Owned Vehicles/ Employer non ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Others		
X	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	
	10. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
X	14. Medical Malpractice	\$1 Million per occurrence/claim	
X	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
	17. Builder's Risk	Provide Coverage in the full amount of contract	
	18. XCU (Explosive, Collapse, Underground) Coverage		
	19. USL&H (Long Shore Harbor Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment Liability	\$2 Million per occurrence/claim	
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		
X	23. Notice of Cancellation, non-renewal or material change in coverage shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional Insured on all policies		
X	25. Certificate of Insurance shall show Bid Number and Bid Title		
	26. Pollution:	\$2 Million per occurrence/claim	

*If offeror's employees will be using their privately owned vehicles while working on this contract and are privately insured, please state that fact in the **Bidders Limits/Response** column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements.

BIDDER NAME: _____

AUTHORIZED.SIGNATURE: _____

Form W-9 (Rev. December 2014) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification	Give Form to the requester. Do not send to the IRS.																																																																													
Print or type See Specific instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.																																																																														
	2 Business name/disregarded entity name, if different from above																																																																														
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: ☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. ☐ Other (see instructions) ▶ _____																																																																														
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)																																																																														
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)																																																																													
	6 City, state, and ZIP code																																																																														
	7 List account number(s) here (optional)																																																																														
Part I Taxpayer Identification Number (TIN)																																																																															
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3. Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																																																																															
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Part II Certification																																																																															
Under penalties of perjury, I certify that: - The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and - I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and - I am a U.S. citizen or other U.S. person (defined below); and - The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.																																																																															
Sign Here	Signature of U.S. person ▶	Date ▶																																																																													
General Instructions																																																																															
Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/tw9. Purpose of Form An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following: - Form 1099-INT (interest earned or paid) - Form 1099-DIV (dividends, including those from stocks or mutual funds) - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) - Form 1099-S (proceeds from real estate transactions) - Form 1099-K (merchant card and third party network transactions) - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) - Form 1099-C (canceled debt) - Form 1099-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN. <i>If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.</i> By signing the filled-out form, you: - Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), - Certify that you are not subject to backup withholding, or - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See <i>What is FATCA reporting?</i> on page 2 for further information.																																																																															
Cat. No. 10231X		Form W-9 (Rev. 12-2014)																																																																													

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ²
5. Sole proprietorship or disregarded entity owned by an individual	The owner ²
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ²
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ¹
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN.
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

COST PROPOSAL

Inmate Medical Services for Muscogee County Prison (Annual Contract)
RFP No. 18-0022

OPTION 1: Specified Staffing

DESCRIPTION	CONTRACT YEAR	*ANNUAL CONTRACT AMOUNT
Medical Services	1 st Year	\$
	2 nd Year	\$
	Total Initial Contract Amount	\$
Medical Services	3 rd Year	\$
Medical Services	4 th Year	\$
Medical Services	5 th Year	\$
Pharmacy services at pass-through cost with a management fee		_____% Management Fee

*Subject to negotiations

OPTION 2: Vendor's Recommended Staffing

DESCRIPTION	CONTRACT YEAR	*ANNUAL CONTRACT AMOUNT
Medical Services	1 st Year	\$
	2 nd Year	\$
	Total Initial Contract Amount	\$
Medical Services	3 rd Year	\$
Medical Services	4 th Year	\$
Medical Services	5 th Year	\$
Pharmacy services at pass-through cost with a management fee		_____% Management Fee

*Subject to negotiations

Company Name

Authorized Signature

Date

CONTRACT SIGNATURE PAGE
Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract)
RFP No. 18-0022

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Witness as to the signing of the contract

By:_____
Signature of Authorized Representative Date

Witness as to the signing of the contract

(Corporate seal, if applicable)

Print Name and Title of Signatory

Company:_____

Company Ordering Address

Contact:_____

Contact Email_____

Telephone_____Fax_____

Company Payment Address

Contact:_____

Contact Email_____

Telephone:_____Fax_____

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this ____ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****

EXHIBIT D
Proposal

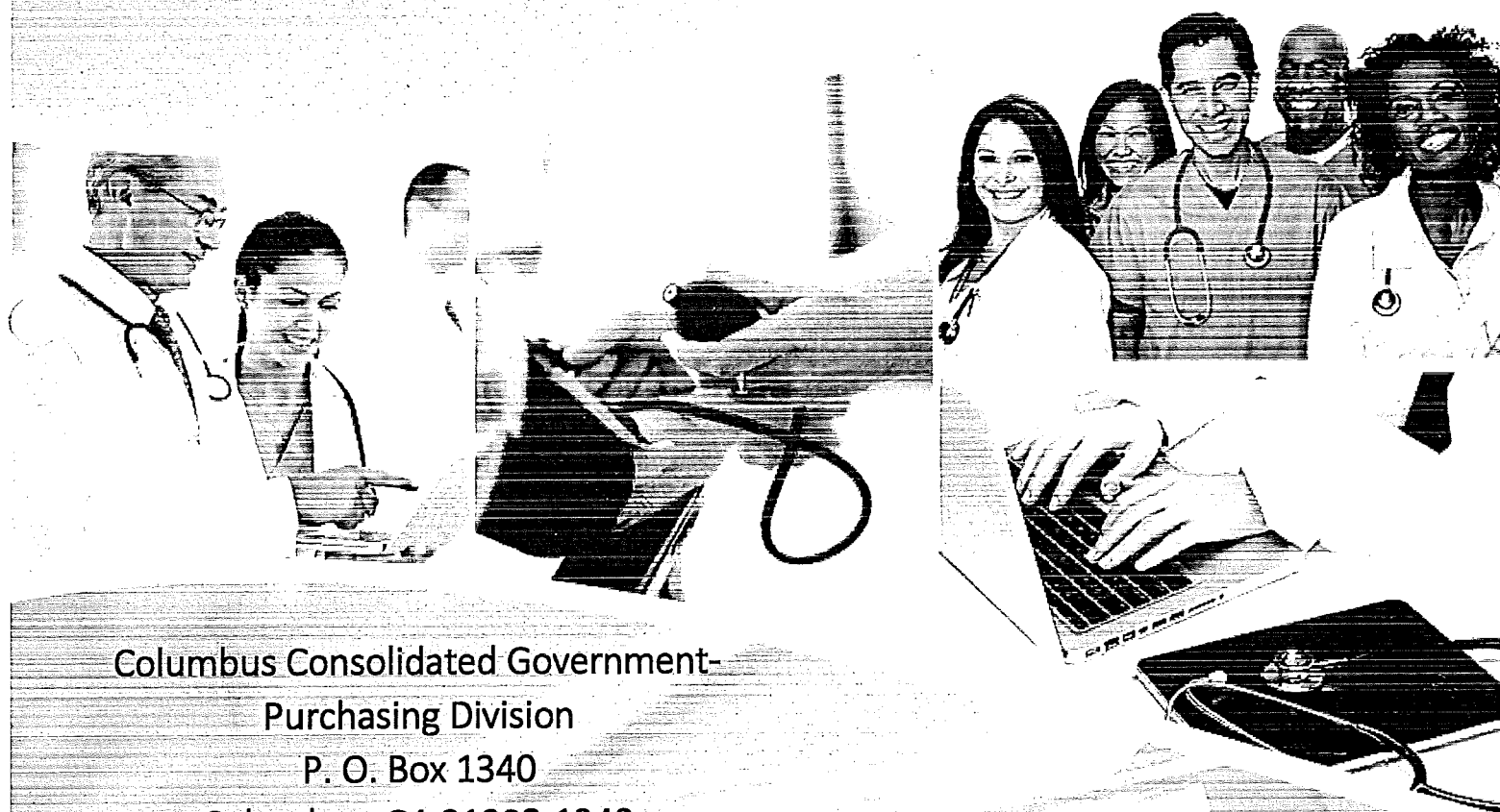
CorrectHealth Muscogee, LLC (Atlanta, GA)

**PROPOSAL
FOR ANNUAL CONTRACT
INMATE MEDICAL & PHARMACY SERVICES
FOR MUSCOGEE COUNTY PRISON**

RFP NO. 18-0022

MAY 18, 2018 – 5:00 PM

CORRECTHEALTH



**Columbus Consolidated Government-
Purchasing Division**

**P. O. Box 1340
Columbus, GA 31902-1340
100 10th Street
Columbus, GA 31901**

ORIGINAL

**CorrectHealth Muscogee, LLC
Carlo A. Musso, MD
3384 Peachtree Road, Suite 700
Atlanta, GA 30326
carlo.musso@correcthealth.org
M: 770-692-4750, F: 770-692-4754**

3384 Peachtree Rd NE, Suite 700, Atlanta, GA 30326



Table of Contents

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Sample Contract	

PART B. BUSINESS REQUIREMENTS

IN A SEPARATE ENVELOPE, (1) COPY OF THE FOLLOWING DOCUMENTS:

1. Insurance Checklist (Form 3) & Certificate of Insurance
2. W-9 (Form 4)
3. Copy of the Business License (Occupation License)



SECTION 1. Transmittal Letter

May 3, 2018

VIA Hand Delivery

TO: Ms. Andrea J. McCorvey, Purchasing Division Manager
Ms. Della Lewis, CPPB, Buyer Specialist
Columbus Consolidated Government
Purchasing Division
100 10th Street
Columbus, GA 31901

Re: **Proposal to Provide Comprehensive Inmate Medical & Pharmacy Services for the Muscogee County Prison, (Annual Contract), RFP No. 18-0022**

Dear Ms. McCorvey and Ms. Lewis:

CorrectHealth Muscogee, LLC (hereinafter referred to as "CorrectHealth") is pleased to submit this Proposal to the Columbus Consolidated Government to provide comprehensive inmate medical and pharmacy services to the inmates of the Muscogee County Prison. Our contact person for this project is:

Carlo A. Musso, M.D., President
CorrectHealth Muscogee, LLC
3384 Peachtree Rd. NE, Suite 700, Atlanta GA 30326
Office: 770.692.4755 Cell: 404.386.4989 Fax: 770.692.4754
Email: carlo.musso@correcthealth.org

As a physician owned and operated correctional healthcare company, it is our pleasure to tailor the medical services of CorrectHealth to the needs of the Prison. Organized in June 2000, CorrectHealth currently provides healthcare services at over 40 jails, prisons and youth detention centers, caring for near 15,000 patients throughout the Southeast. Our Proposal outlines our qualifications, our experience, and our approach to providing a comprehensive inmate medical and pharmacy program at the Muscogee County Prison, both on-site and off-site.

CorrectHealth is committed to operating our health care programs according to the standards of the National Commission on Correctional Health Care (NCCHC, American Correctional Association (ACA) and the Medical Association of Georgia (MAG). CorrectHealth will provide all on-site medical and pharmacy services and coordinate all necessary off-site health care.

CorrectHealth is committed to technology. We will fully implement telemedicine, allowing our on-duty nighttime providers ("nocturnists") to be available to the Prison 24/7.

CorrectHealth stands willing and able to customize our healthcare services for the Muscogee County Prison to meet your needs.

Sincerely,

A handwritten signature in black ink, appearing to read "Carlo Musso". The signature is fluid and cursive, with a large, stylized "C" and "M".

Carlo A. Musso, M.D.
President



SECTION 2. E-Verify

CONTRACTOR AFFIDAVIT

E-VERIFY / GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

65870

November 5, 2007

Company ID Number (numerical, 4-7 digits)

Date of Authorization

**See <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES> to access your E-Verify Company Identification Number.

CorrectHealth, LLC

Name of Contractor

Inmate Medical & Pharmacy Services for MCPrison (Annual Contract); RFP No. 18-0022

Name of Project

Columbus Consolidated Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

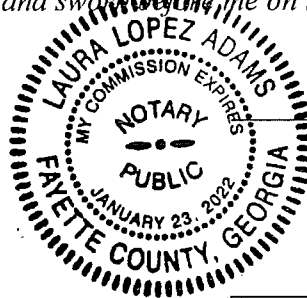
Executed on April, 30, 2018 in Atlanta (city), GA (state).

Amy D'Amore
Signature of Authorized Officer or Agent

Amy D'Amore, Director of Human Resources

Printed Name and Title of Authorized Officer or Agent

Subscribed and sworn to before me on this the 31 day of April, 2018.



Laura H. Adams
NOTARY PUBLIC

My Commission Expires:

1/23/22

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.



SECTION 3. Acknowledgement of Addenda

CorrectHealth hereby acknowledges its receipt and understanding of all addenda to RFP 18-0022. Cover pages of each addendum to follow.

ADDENDUM: NUMBER ONE

ADDENDUM: NUMBER TWO

ADDENDUM: NUMBER THREE



Addendum NO. 1

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



**FINANCE DEPARTMENT
PURCHASING DIVISION**

1100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

April 19, 2018

ADDENDUM NO. 1
Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

REQUEST/RESPONSE

Request: I am requesting the current contracts with any subsequent amendments related to Inmate Medical and Pharmacy Services for the Muscogee County Jail and Prison. This allows us to completely evaluate the services provided and provide the best, most cost-effective proposal in response to your current RFPs.

Response: Because this request is pertinent to outstanding Request for Proposals (RFPs), the information is being made available to all potential firms. The respective contract documents for the Muscogee County Jail and the Muscogee County Prison are posted as Attachment A on the web page of the Finance Department/Purchasing Division at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm.

Andrea J. McCorvey,
Purchasing Division Manager



Addendum NO. 2

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

1100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

May 4, 2018

ADDENDUM NO. 2
Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. PROPOSAL DUE DATE:

The due date is extended to **Friday, May 18, 2018 no later than 5:00 PM.**

II. NON-MANDATORY SITE VISIT

The Non-Mandatory Site Visit information included an incorrect telephone number. To schedule a site visit, contact Deputy Warden Daniel King at 706-641-5803 or dking@columbusga.org. Vendors may visit the Clinic through May 11, 2018.

III. QUESTIONS/RESPONSES:

Question 1: Can you provide us with a copy of the current healthcare agreement?

Response: Refer to Addendum No. 1.

Question 2: Please provide an inventory list of all medical and office equipment which is owned by the County and will be made available for use by the incoming vendor.

Response: Refer to page 21 of the RFP specifications.

Question 3: How many females are housed/incarcerated on a monthly average?

Response: Refer to page 13, Item I, Introduction of the specifications.

Question 4: Please provide the monthly number of patients currently on medications for the past year:

- a. Psychotropic
- b. Chronic Care
- c. Withdrawal

Response: Refer to Appendix C, beginning on page 23 of the specifications.



Addendum NO. 3

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

1100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4106, Fax 706-225-3033
www.columbusga.org

May 11, 2018

ADDENDUM NO. 3
Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
RFP No. 18-0022

Proposals should include acknowledgement of receipt for all Addenda.

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

A. QUESTIONS/RESPONSES:

1. Please provide the monthly trend in prescriptions and medication costs in total and by medication category, including but not limited to HIV, Hepatitis C, Hemophiliac, cancer, and psychotropic classifications for the current and prior fiscal years.
Response: Offenders with illnesses in these areas are immediately transferred back to a state facility. The Muscogee County Prison (MCP) has only had one county offender with HIV in the past two years.
2. Please provide the monthly trend in medication costs credits (separate from above costs) and administrative fees for the current and prior fiscal years.
Response: N/A
3. Please provide a list of the top 25 medications by cost for the current and prior fiscal years.
Response: This is a list of the most common medication that this facility dispenses:

Clobetasol 0.5 cream, Divalproex 500 mg, Erythro 500mg, Levothyroxin 75mg Aceta-Gesis 325 mg, Amox.Clav 500mg, Calcium Ex Antacid Tab, Domeboro Pwd packet, Geri-Lanta Antacid Susp., Ibuprofen 800mg, Med-Lyte tabs, Mucinex 600MG, Qvar 80 mcg inhalers, Tenivac syringe, Tolnaftate Cream, Trimacin Cr Lb, Ventolin HFA inhaler, Clobetasol cream. These are the most commonly used items.
4. Please provide the trend and current number of inmates under treatment for Hepatitis C.
Response: We do not treat Hepatitis C at this facility. We monitor Hepatitis C status via chronic care clinic every 3 months.
5. Please provide the current protocol including medications currently in use for treatment of inmates

SECTION 4. EXPERIENCE AND QUALIFICATIONS

CorrectHealth is a Georgia-based, physician owned and operated correctional healthcare company. We have been providing correctional healthcare services since 2000. With 18 years of experience, CorrectHealth has provided high-quality, cost-effective healthcare to inmate populations throughout the southeastern United States. We have provided service to nearly 20,000 maximum, medium, minimum security, pre-release, and transitional inmates in over 60 prisons and jails. Currently, we serve 5 County Prisons and have just been awarded our 6th. Additional our statewide network in Georgia manages 30 jails and prisons with over 10,000 inmates in the state of Georgia. We have approximately 350 providers and healthcare staff in Georgia alone. Retention of qualified incumbent staff will be our priority. Our programs at each facility are specifically tailored to their unique environment and needs. Our success is attributable to our experience in correctional healthcare, background in emergency medicine, ability to partner with our clients, understanding our clients' operations and needs, and integrating an appropriate healthcare program that meets national and community standards.

CorrectHealth has a unique leadership team drawing from the fields of medicine, nursing, diagnostics, corrections, and law. While our experience and expertise is premised on a vast network of correctional facilities, we have a lean management team and efficient staffing model designed to facilitate client service excellence, including quick decision-making and problem-solving. We rapidly respond to identified needs in a flexible, timely and non-bureaucratic manner. The CorrectHealth leadership team has a proven track record of successfully delivering efficient, cost-effective healthcare in correctional settings with high quality outcomes through a patient-centered, coordinated care delivery model.

CorrectHealth's Approach

CorrectHealth's delivery model for the correctional health setting is based on successful "informed treatment decisions" delivery systems. Under the CorrectHealth service delivery model, providers must know how, where, and when to best treat patients while optimizing resource consumption. Our primary care providers coordinate the patient's access to care, manage the patient's referral to specialty care when appropriate. All patients will have unimpeded access to health care services without exception. Our approach is founded on providing as many treatment options as possible on-site, which allows us to speed up care delivery, monitor care more effectively, and lower administrative and transportation costs. When off-site care is the only option, we will network with local providers to ensure that we provide the most efficient full range of care.

Technology

CorrectHealth's sophisticated 24/7 virtual healthcare delivery model incorporates telemedicine in conjunction with a robust EHR, allowing for real-time, 24/7 access to our providers. This includes a "Nocturnist" (nighttime provider) who is on duty and available to see patients at night, on



weekends, and on holidays. This provides for in-depth patient triage and clinical decision-making, particularly when our medical director is away from the facility. Our Nocturnist currently performs sick call for several of our County Prisons early in the morning (between 4-7am) allowing inmates to get to work and not interrupt daily work details.

Accreditation

CorrectHealth fully satisfies the National Commission on Correctional Healthcare (NCCHC), American Correctional Association (ACA), and Medical Association of Georgia (MAG) standards as they apply to correctional facilities and all the services required in the scope of work. In our 18-year history, we have successfully achieved and maintained MAG, ACA and NCCHC accreditations and re-accreditations in many of our facilities.

MAG accredits correctional health programs based upon compliance with the standards of the NCCHC. Our team has extensive knowledge and experience with ACA and NCCHC standards and site accreditation. In addition, CorrectHealth is proud to share that numerous staff members have achieved the distinction of becoming Certified Correctional Health Professionals through NCCHC. We are also proud to have five (5) accreditation surveyors for NCCHC and MAG on our staff, all of whom are available to consult at any CorrectHealth facility.

Monthly preparatory audits will be conducted and our accreditation team, along with our Health Services Administrator, will communicate regularly with the Facility Administration to ensure that our staff and the facility are prepared for an accreditation survey within eighteen (18) months of start-up or sooner as directed. On an ongoing basis, monitoring will include the gathering of data necessary for both ACA and NCCHC accreditation maintenance.

While all of our Prisons have programs that are managed according to national standards, we have successfully achieved accreditation by NCCHC, ACA and / or MAG for the facilities identified in section 6, D. This facilities represent 100% of our clients who desired accreditation. In 2014 and 2016 MAG's committee on Correctional Medicine awarded a CorrectHealth facility the Herman E. Spivey, M.D. Award for Excellence for its innovation and quality of inmate healthcare. And, last year, another CorrectHealth facility was nominated to receive the Award. **See our current list of accredited facilities in section "6, D".**

Management Team

Carlo A. Musso, M.D. - President

Our Senior Management team is led by Dr. Carlo Musso, our founder and a leader in the correctional healthcare field. With extensive experience in correctional healthcare, and a background in emergency medicine, he understands the impact of each medical decision to security operations and to the outcome for the patient, and he has instilled that understanding in his team. Our goal is to provide necessary care in a high quality and cost efficient manner, always striving for care to be provided in the most secure location possible, within your facility.

As an Emergency Medicine physician, his intuitive insight into patient care, coupled with a business background, provides a solid foundation as the company leader. He works directly with the physicians, mid-level providers and healthcare managers in providing high quality, cost-effective healthcare through his active participation in operations and case review. As a clinical and administrative resource, Dr. Musso has instilled a culture of excellence in correctional healthcare. As the President of CorrectHealth, he is responsible for company operations, including, but not limited to clinical services, human resources, finance, operations, client relations and business development. In addition, he is responsible for the development of internal and external business strategies designed to promote company growth while maintaining efficiencies and quality for our clients. Under his direction, CorrectHealth has quickly become a leading correctional healthcare company in Georgia.

Walter Smith, M.D. - Executive Medical Director

Dr. Walter Smith, a Georgia licensed physician, served as a community Family Medicine physician for over 10 years before joining CorrectHealth. Now, with over 15 years of correctional healthcare experience, Dr. Smith currently serves as the Executive Medical Director for CorrectHealth. His responsibilities include planning, implementing, managing, and improving the quality of healthcare services for CorrectHealth and our clients. In addition to providing services to patients and leadership to our medical personnel, he works closely with the physician and mid-level team members while diligently monitoring Utilization Management for the Company. Dr. Smith continually demonstrates his ability to minimize inmate medical expenses, saving our client's time and money, while improving the quality of patient care.

Susan L. Hatfield, RN, MS, FNP-C, CCHP - Executive Director of Clinical Services

Ms. Susan Hatfield is a Georgia licensed and board certified Family Nurse Practitioner. She has been a licensed registered nurse since 1984. Her early career was in traditional hospital and medical practice nursing and management. Ms. Hatfield has been with CorrectHealth for over 10 years as a Nurse Practitioner and is a Certified Correctional Health Professional (CCHP) through NCCHC. She manages all aspects of nursing clinical services for CorrectHealth and has vast experience designing and implementing healthcare programs for jails and prisons. Ms. Hatfield provides oversight for all aspects of Clinical Services including the supervision of all Health Services Administrators, Coordinators, and nursing staff within the company. Ms. Hatfield's responsibilities also include continuing education, infection control, continuous quality improvement/management, and health information management. Under the guidance of Ms. Hatfield, CorrectHealth continues to meet and exceed NCCHC Correctional Healthcare Standards.

Stephen Kissinger, M.D. - Executive Director of Mental Health

As a clinical psychiatrist and Executive Director of Mental Health, Dr. Stephen Kissinger brings over 15 years of correctional mental health experience to the CorrectHealth team. Since becoming a licensed psychiatrist in 1985, Dr. Kissinger has worked in a variety of clinical settings such as hospitals and community mental health centers. In addition to providing oversight and leadership

to our mental health division, Dr. Kissinger is a solution-focused psychiatrist who offers a highly personalized approach tailored to meet the needs of our client.

Lester Jackson, DDS – Dental Director

Dr. Lester Jackson is a Georgia licensed Doctor of Dental Surgery and family dentist from Savannah, who has been providing exceptional dental services to his patients for nearly three decades. In addition to his private practice, Dr. Jackson has spent the last ten years providing for the dental needs of inmates through partnerships with correctional institutes throughout the southeast. Since partnering with CorrectHealth in 2014, Dr. Jackson has deployed a team of highly qualified dentists to serve as the treating and consulting dental providers for our facilities throughout the state of Georgia.

Nena Worsham – Director of Clinical Services

Ms. Nena Worsham, a Board Certified Family Nurse Practitioner and Director of Clinical Services for CorrectHealth, is an experienced clinical professional with over 28 years of clinical experience. In her role as the Director of Clinical Services, Ms. Worsham is responsible for numerous aspects of our clinical services division, including accreditation and education. Since joining our team in July of 2017, Ms. Worsham has proven herself to be a disciplined, innovative, and proactive team leader with the ability to ensure excellence and high quality services for our clients.

Lynn Junca, BS - Chief Financial Officer

Building upon her experience in business and healthcare management, Ms. Lynn Junca joined CorrectHealth in 2003 as a consultant to the Finance Department. In January 2005, she joined us full time as the Chief Financial Officer and continues to provide leadership with accounting, finance, information technology and human resources, as well as working closely with our allied health services vendors. Ms. Junca's experience as the director of a large hospital laboratory enables her to successfully integrate complex business and healthcare processes and systems. As the Chief Financial Officer for CorrectHealth, she provides strategic oversight for all accounting, finance, billing, purchasing, budgeting, payroll, and information technology activities within the company. She is responsible for assessing organizational performance against both the annual budget and the company's long-term strategy in order to achieve our mission of providing high-quality, cost-effective, comprehensive correctional healthcare. Ms. Junca and her team are committed to providing our clients with an unparalleled level of customer service, helping them manage and navigate the financial complexities of correctional healthcare delivery.

Stacy M. Scott, Esquire - Chief Legal Officer

Ms. Stacy Scott joined CorrectHealth in July of 2006 as Chief Legal Officer. Prior to 2006, Ms. Scott was a partner at a law firm that specialized in the defense of Medical Malpractice lawsuits. She now enjoys her proactive role in healthcare management with CorrectHealth. Her full-time duties include risk assessment, avoidance and reduction; oversight of credentialing of healthcare providers; contract drafting and review; assurance of contract compliance; assurance of corporate compliance with legal policy, laws, rules, and regulations; active involvement in the company's Continuous Quality Improvement/Management Program; oversight of workers' compensation

matters; and oversight and handling of all litigation matters. Ms. Scott's demonstrated ability to successfully develop risk management programs, limit litigation and ensure contract compliance has contributed to the successes of both CorrectHealth and our clients. In addition to providing oversight of litigation and loss prevention functions, Ms. Scott is also responsible for providing strategic guidance in the development of policies and procedures, chart audits, and insurance procurement. Successfully educating staff members through the facilitation of company in-services related to risk management and reduction, Ms. Scott's contributions directly align with the mission, vision, and values of CorrectHealth and our clients.

Amy D'Amore – Director of Human Resources

Ms. Amy D'Amore joined CorrectHealth in July of 2012 and is serving as the Director of Human Resources. Before joining CorrectHealth, Ms. D'Amore worked for a large metro Atlanta healthcare system where she began her career in Human Resources. An Ohio native, she received her Bachelor of Science degree in Business Administration with a specialization in Healthcare Administration from Bowling Green State University. Ms. D'Amore's strong educational background combined with her healthcare experience has given her a vast understanding of people management within the medical environment. Ms. D'Amore is currently an active member of both the Society for Human Resources Management and the American Society for Healthcare Human Resources Administration. As the Director of Human Resources, Ms. D'Amore holds corporate-wide accountability for all human resources activities. Using a well-defined strategy tailored to meet the needs of each facility, Ms. D'Amore is responsible for ensuring the right people are in the right place at the right time. Ms. D'Amore works closely with our site managers to continuously evaluate and monitor staffing levels to ensure the delivery of high-quality healthcare while minimizing the cost of labor. In addition to talent acquisition and recruitment, Ms. D'Amore's responsibilities also include oversight of all day-to-day human resources functions such as employee relations, performance management, benefits, employee engagement, credentialing, and employee health services.

What sets CorrectHealth apart from other providers of correctional healthcare is our support of the CorrectHealth facility staff. On a daily basis, our corporate management team communicates with and conducts site visits at our Prisons, ensuring that they have the resources and tools necessary to successfully manage the healthcare needs of their patients. With our corporate office located in Atlanta, Georgia, resources for the Prison are less than 2 hours away. Our Directors are mentors for our sites, ensuring that our mission, "Providing high-quality, cost-effective care inside the walls of correctional facilities" remains at the forefront of all facility activities. **CorrectHealth CV's to follow.**

CorrectHealth CV's

	
Carlo A. Musso, M.D. President & CEO	
EDUCATION • RESIDENCY, EMERGENCY MEDICINE DENVER GENERAL AFFILIATED HOSPITALS DENVER, CO (1987 - 1990) • INTERNSHIP PRESBYTERIAN/ST. LUKE'S MEDICAL CENTER DENVER, CO (1986 - 1987) • DOCTOR OF MEDICINE LOUISIANA STATE UNIVERSITY SCHOOL OF MEDICINE NEW ORLEANS, LA (1986) • B.S., BIOCHEMISTRY LOUISIANA STATE UNIVERSITY BATON ROUGE, LA (1982) PROFESSIONAL LICENSURE • MEDICAL DOCTOR ○ STATE OF LOUISIANA ○ STATE OF GEORGIA ○ STATE OF TENNESSEE ○ STATE OF FLORIDA • DEA REGISTRATION	PROFESSIONAL BACKGROUND As the President & CEO, Dr. Carlo A. Musso brings over twenty-five years of experience to CorrectHealth. A graduate of Louisiana State University School of Medicine, Dr. Musso was Board Certified in Emergency Medicine and is a Fellow of the American College of Emergency Physicians. Prior to establishing CorrectHealth, Dr. Musso worked as an emergency physician in metro Atlanta for over a decade. During this time, Dr. Musso was an integral member of Pinnacle Emergency Consultants and served as the Medical Director of Emergency Medical Services for numerous fire and EMS agencies. As a practicing physician, Dr. Musso integrated the complexities of emergent, urgent and chronic medical care into a growing correctional healthcare organization. EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>Founder, President & CEO, November 2000–Present</i> HENRY MEDICAL CENTER – Stockbridge, GA <i>Emergency Medicine Physician, 1993 – 2002</i> SOUTHERN REGIONAL MEDICAL CENTER – Riverdale, GA <i>Emergency Medicine Physician, 1990 - 2002</i> EMORY UNIVERSITY & GRADY MEMORIAL HOSPITAL – Atlanta, GA <i>Assistant Clinical Professor of Surgery, 1995 - 1997</i> GASTON MEMORIAL HOSPITAL – Gastonia, NC <i>Emergency Medicine Physician, 1992 - 1997</i> ROCKDALE HOSPITAL – Conyers, GA <i>Emergency Medicine Physician, 1990 - 1997</i>

 Walter T. Smith, M.D. Executive Medical Director	
EDUCATION • RESIDENCY, FAMILY PRACTICE MOREHOUSE SCHOOL OF MEDICINE ATLANTA, GA (1992 - 1994) • INTERNSHIP, FAMILY PRACTICE MOREHOUSE SCHOOL OF MEDICINE ATLANTA, GA (1991 - 1992) • DOCTOR OF MEDICINE MEHARRY MEDICAL COLLEGE NASHVILLE, TN (1991) • B.S., BIOLOGY MOREHOUSE COLLEGE ATLANTA, GA (1982) PROFESSIONAL LICENSURE & CERTIFICATION • MEDICAL DOCTOR ○ STATE OF GEORGIA ○ STATE OF LOUISIANA ○ STATE OF TENNESSEE ○ STATE OF KENTUCKY ○ STATE OF ALABAMA ○ STATE OF SOUTH CAROLINA • DEA REGISTRATION • BASIC CARDIAC LIFE SUPPORT (BCLS) AMERICAN HEART ASSOCIATION • ADVANCED CARDIAC LIFE SUPPORT (ACLS) AMERICAN HEART ASSOCIATION AWARDS • MCGRAW-HILL SCHOLARSHIP • NATIONAL DEAN'S LIST	EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>Executive Medical Director, December 2004 – Present</i> SOUTH PERIMETER FAMILY PHYSICIANS – Stockbridge, GA <i>Physician, 1999 - 2004</i> MCDONOUGH AFTER HOURS URGENT CARE – McDonough, GA <i>Physician, 1999 - Present</i> SOUTH FULTON MEDICAL CENTER – Atlanta, GA <i>Staff Physician, 1997 - 1999</i> SOUTHWEST HOSPITAL AND MEDICAL CENTER – Atlanta, GA <i>Physician, 1990 – 1997</i> AFTER HOURS URGENT CARE – Atlanta, GA <i>Staff Physician, 1997 - 1999</i> SOUTH SIDE HEALTHCARE – Atlanta, GA <i>Staff Physician, 1994 – 1997</i> HOSPITAL AFFILIATIONS SOUTHERN REGIONAL MEDICAL CENTER – Riverdale, GA HENRY MEDICAL CENTER – Stockbridge, GA ATLANTA MEDICAL CENTER – Atlanta, GA PROFESSIONAL ORGANIZATIONS GEORGIA ACADEMY OF FAMILY PHYSICIANS AMERICAN ACADEMY OF FAMILY PHYSICIANS NATIONAL MEDICAL ASSOCIATION



Stephen N. Kissinger, MD

Psychiatrist

EDUCATION

- RESIDENCY
BEHAVIORAL MEDICINE & PSYCHIATRY
WEST VIRGINIA UNIVERSITY
SCHOOL OF MEDICINE - CHARLESTON
CHARLESTON, WV (1981 - 1985)
- DOCTOR OF MEDICINE
WEST VIRGINIA UNIVERSITY
SCHOOL OF MEDICINE
MORGANTOWN, WV (1981)
- B.A., PSYCHOLOGY
WEST VIRGINIA STATE UNIVERSITY
MORGANTOWN, WV (1977)

PROFESSIONAL LICENSURE

- PSYCHIATRIST
 - STATE OF GEORGIA
- DEA REGISTRATION
- BOARD ELIGIBLE
PSYCHIATRY & NEUROLOGY
AMERICAN BOARD OF PSYCHIATRY &
NEUROLOGY
- BASIC CARDIAC LIFE SUPPORT (BCLS)
AMERICAN HEART ASSOCIATION

EXPERIENCE HIGHLIGHTS

CORRECTHEALTH – Atlanta, GA
Executive Director of Mental Health Services, June 2017 – Present
Psychiatrist, 2006 - 2017

HIGHLANDS RIVERS CENTER CSB – Canton, GA
Staff Psychiatrist, 1997 - 2006

GEORGIA REGIONAL HOSPITAL AT ATLANTA – Decatur, GA
Staff Psychiatrist, 1993 - 1997

TIDELANDS COMMUNITY MENTAL HEALTH CENTER – Savannah, GA
Staff Psychiatrist, 1991 - 1993

CHATHAM COUNTY JAIL/DETENTION CENTER – Savannah, GA
Psychiatrist, 1990 – 1993

GEORGIA REGIONAL HOSPITAL AT SAVANNAH – Savannah, GA
Staff Psychiatrist, 1988 – 1991

JOHN P. MACCALLUM, MD AND ASSOCIATES – Hurricane, WV
Psychiatrist, 1985 - 1988

	Lester G. Jackson, DDS Doctor of Dental Surgery
EDUCATION • DOCTOR OF DENTAL SURGERY MEHARRY MEDICAL COLLEGE NASHVILLE, TN (1985) • B.S., PAINE COLLEGE AUGUSTA, GA (1981) PROFESSIONAL LICENSURE & CERTIFICATION • DOCTOR OF DENTAL SURGERY ◦ STATE OF GEORGIA • DEA REGISTRATION AWARDS & RECOGNITION • GLBC LEGISLATOR OF THE YEAR GEORGIA LEGISLATIVE BLACK CAUCUS , 2012 • GLBC LEGISLATOR OF THE YEAR GEORGIA LEGISLATIVE BLACK CAUCUS , 2009 • LEGISLATOR OF THE YEAR THE GEORGIA DENTAL ASSOCIATION, 2002 • DISTINGUISHED SERVICE AWARD NATIONAL DENTAL ASSOCIATION, 2001 • LEGISLATOR OF THE YEAR THE GEORGIA DENTAL ASSOCIATION, 2000	PROFESSIONAL BACKGROUND A family dentist from Savannah, Georgia, Dr. Lester G. Jackson has been providing exceptional dental services to his patients for nearly three decades. Partnered with his wife, Dr. Lorna Jackson, The Jackson Dental Center is a cornerstone of dental services for the coastal region of Georgia, expanding their services in the last ten years to providing for the needs of inmates through a partnership with correctional institutes in the southeast. Dr. Jackson also serves the Georgia General Assembly as the State Senator representing the 2nd district of Georgia and was first elected to serve in the House of Representatives in 1998. A graduate of Meharry Medical College, he also spent seven years of his life serving his country as a dental officer for the United States Navy. After distinguished service to his country, Dr. Jackson founded Jackson Dental Center in Savannah, Georgia, a participating small business with the Minority and Women Businesses Enterprise (MWBE), which is an organization that has the commitment to developing mutually beneficial business relationships with minority and women owned businesses with the capability of meeting or exceeding client requirements for products and services in Chatham County, Georgia. Expanding on the reach of their services to the community, Dr. Jackson today is the CEO of Coastal Health Solutions, Inc., a private agency servicing the staffing and management needs of the dental and allied health industry. This arm of Dr. Jackson's focus takes pride in building strong relationships with both those hiring candidates in the health field and the qualified staff that is sought after. Dr. Jackson and his team are committed to providing the highest quality of dental and allied healthcare services and look forward to expanding their reach. EXPERIENCE HIGHLIGHTS JACKSON DENTAL CENTER – Savannah, GA <i>Owner & Dentist of Private Practice, 1993 – Present</i> <i>Specializing in General & Cosmetic Dentistry</i> ARMSTRONG ATLANTIC STATE UNIVERSITY – Savannah, GA <i>Assistant Adjunct Professor, 2008 – 2011</i> MEDICAL COLLEGE OF GEORGIA – Augusta, GA <i>Assistant Adjunct Professor, 2004 – 2008</i> DR. JAMES WILLIAMS, DDS –Savannah, GA <i>Associate Dentist, 1991 – 1993</i> UNITED STATES NAVY – Beauford, SC <i>Navy Dental Corp. Lt. Commander, 1985 – 1991</i>

	Susie L. Hatfield, RN, MS, FNP-BC, CCHP Executive Director of Clinical Services
EDUCATION • M.S., FAMILY NURSE PRACTITIONER GEORGIA STATE UNIVERSITY ATLANTA, GA (1996) • B.B.A., ACCOUNTING KENNESAW STATE UNIVERSITY KENNESAW, GA (1991) • ASSOCIATE DEGREE, NURSING KENNESAW STATE UNIVERSITY KENNESAW, GA (1984) PROFESSIONAL LICENSURE & CERTIFICATION • ADVANCED NURSE PRACTITIONER ○ STATE OF LOUISIANA ○ STATE OF GEORGIA ○ STATE OF TENNESSEE ○ STATE OF KENTUCKY • DEA REGISTRATION • AMERICAN NURSES ASSOCIATION (1996) • AMERICAN ACADEMY OF NURSE PRACTITIONERS (1996) • CCHP, NATIONAL COMMISSION ON CORRECTIONAL HEALTHCARE • BASIC CARDIAC LIFE SUPPORT (BCLS) AMERICAN HEART ASSOCIATION • ADVANCED CARDIAC LIFE SUPPORT (ACLS) AMERICAN HEART ASSOCIATION	PROFESSIONAL BACKGROUND Susie L. Hatfield is a highly experienced clinical manager, Board Certified Family Nurse Practitioner, and a NCCHC Certified Correctional Health Professional with over ten years of correctional experience. As the Executive Director of Clinical Services, Ms. Hatfield is responsible for all aspects of Clinical Services, including Education, Infection Control, Continuous Quality Improvement, Health Information and Accreditation. She is a disciplined, action-oriented team leader with a proven ability to meet and exceed the expectations of our client. EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>Executive Director of Clinical Services, May 2013–Present</i> <i>Family Nurse Practitioner/Facility Manager, July 2003 – April 2013</i> INTERNAL MEDICINE ASSOCIATES – Cartersville, GA <i>Family Nurse Practitioner, 1993 - 2002</i> CARTERSVILLE MEDICAL CENTER – Cartersville, GA <i>Administrative Nursing Supervisor, 1992 - 1996</i> <i>Charge Nurse, Emergency Department, 1984 - 1996</i> PROFESSIONAL AFFILIATIONS AMERICAN CORRECTIONAL HEALTH SERVICES ASSOCIATION <i>Treasurer, National Chapter, 2014</i> AMERICAN CORRECTIONAL HEALTH SERVICES ASSOCIATION <i>Vice President, Georgia Chapter, 2011 - 2012</i>

 Nena A. Worsham, RN, BSN, MSN, FNP-BC Director of Clinical Services	
EDUCATION • M.S., FAMILY NURSE PRACTITIONER WALDEN UNIVERSITY MINNEAPOLIS, MN (2015) • BACHELOR OF SCIENCE DEGREE, NURSING UNION UNIVERSITY JACKSON, TN (1996) PROFESSIONAL LICENSURE & CERTIFICATION • ADVANCED NURSE PRACTITIONER ○ STATE OF GEORGIA • DEA REGISTRATION • AMERICAN ACADEMY OF NURSE PRACTITIONERS (2015) • BASIC CARDIAC LIFE SUPPORT (BCLS) AMERICAN HEART ASSOCIATION • ADVANCED CARDIAC LIFE SUPPORT (ACLS) AMERICAN HEART ASSOCIATION	PROFESSIONAL BACKGROUND Nena A. Worsham is an experienced clinical professional and Board Certified Family Nurse Practitioner, with over 28 years of clinical experience. As the Director of Clinical Services, Ms. Worsham is accountable for numerous aspects of Clinical Services at which includes facility accreditation and education. In addition to her being a disciplined, innovative, and proactive team leader, Ms. Worsham is a provider that ensures excellence and high quality care for our client. EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>Director of Clinical Services, July 2017–Present</i> <i>Family Nurse Practitioner/Facility Clinical Services</i> SOUTHERN CORRECTIONAL MEDICINE – Waycross, GA <i>Family Nurse Practitioner, 2016 - 2017</i> PIEDMONT CORPORATION – Atlanta, GA <i>Director of Clinical Appeals/Revenue Cycles, 2013 - 2015</i>

	Stacy M. Scott, Esq. General Counsel
EDUCATION • J.D., CUMBERLAND UNIVERSITY SCHOOL OF LAW SAMFORD UNIVERSITY Birmingham, AL (1996) • BACHELOR OF SCIENCE BALL STATE UNIVERSITY MUNCIE, IN (1993) PROFESSIONAL MEMBERSHIPS • STATE BAR OF GEORGIA • ATLANTA BAR ASSOCIATION, MEMBER • NATIONAL COMMISSION ON CORRECTIONAL HEALTHCARE (NCCHC), MEMBER • MARTINDALE HUBBELL AV PEER REVIEW RATED (2007 – PRESENT) • GA SUPER LAWYERS, RISING STAR RECIPIENT 2006, 2007, 2008, 2009, AND 2010 (ONLY 2.5% OF ALL GEORGIA ATTORNEYS RECEIVE THIS RECOGNITION)	EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>General Counsel, July 2006–Present</i> Responsible for developing programs designed to manage risk, limit litigation and ensure contract compliance. Provide strategic guidance and oversight for risk identification and risk reduction, litigation, workers' compensation, Continuous Quality Improvement, development of policies and procedures, contract compliance, chart audits, insurance procurement, and provider credentialing. Facilitate company in-services to staff members, as those in-services relate to Risk Management and Risk Reduction. Also responsible for the oversight of the company's adherence to State and Federal laws, rules, and regulations. CARLOCK, COPELAND, SEMLER & STAIR, LLP – Atlanta, GA <i>Partner, 2004 – 2005</i> <i>Senior Associate, 2001 - 2004</i> Managed an active caseload of medical malpractice and deliberate indifference lawsuits, both as lead and co-counsel. Responsible for developing a litigation plan and budget for each case, preparing and responding to written discovery, conducting depositions, researching relevant information, researching pertinent case and statutory law, drafting motions for court submissions on any and all legal issues, preparing the case for Trial, conducting the Trial of the case. Held management responsibility for associates, paralegals and nurse consultants, as it related to their involvement with the cases. This included instructing the team members, reviewing and revising their work product, and evaluating their performance. THE KEENAN LAW FIRM , P.C. – Atlanta, GA <i>Associate, 1997 - 2001</i> Participated in the representation of Plaintiffs in medical malpractice cases and other catastrophic injury cases. Specific duties included defending depositions of plaintiffs, fact witnesses, and expert witnesses (including physicians, economists, life care planners, and accident reconstructionists) as well as taking depositions of defendants, including physicians, nursing home personnel, nurses, truck drivers, and business owners. Prepared witnesses for depositions and Trials. Drafted motions on applicable legal issues in each case. Acted as associate counsel in Jury trials throughout the State of Georgia, South Carolina, and North Carolina.

	Lynn M. Junca, BS, MT (ASCP) Chief Financial Officer
EDUCATION • MEDICAL TECHNOLOGY CLINICAL PROGRAM Oschner Medical Center New Orleans, LA (1975) • B.S., BIOLOGY/CHEMISTRY UNIVERSITY OF SOUTHWESTERN LOUISIANA LAFAYETTE, LA (1975) • PRE-MEDICINE CURRICULUM LOUISIANA STATE UNIVERSITY BATON ROUGE, LA (1971) • PRE-MEDICINE CURRICULUM MANHATTANVILLE COLLEGE PURCHASE, NEW YORK (1970 - 1971) PROFESSIONAL LICENSURE & CERTIFICATION • MEDICAL TECHNOLOGIST AMERICAN SOCIETY FOR CLINICAL PATHOLOGY	PROFESSIONAL BACKGROUND With more than 30 years of progressive experience in finance and operations management, Lynn M. Junca is a highly accomplished, results-driven financial management executive. As the Chief Financial Officer for CorrectHealth, Ms. Junca is responsible for all aspects of accounting and finance, purchasing, payroll, and information technology. Her demonstrated ability to streamline business operations has driven growth and increased cost efficiencies for both CorrectHealth and our clients. EXPERIENCE HIGHLIGHTS CORRECTHEALTH – Atlanta, GA <i>Chief Financial Officer, September 2005–Present</i> PIEDMONT FAYETTE HOSPITAL – Fayetteville, GA <i>Laboratory Director, 1999 - 2005</i> SOUTHERN REGIONAL MEDICAL CENTER – Riverdale, GA <i>Medical Technologist, 1997 - 1999</i> FRANKLIN FOUNDATION HOSPITAL – Franklin, LA H&H PLANTING COMPANY – Franklin, LA <i>Business Manager, 1988 – 1994</i> FRANKLIN FOUNDATION HOSPITAL – Franklin, LA <i>Medical Technologist, Supervisory, 1975 – 1988</i>



Amy E. D'Amore
Director of Human Resources

EDUCATION

- B.S.B.A, HEALTHCARE ADMINISTRATION
BOWLING GREEN STATE UNIVERSITY
BOWLING GREEN, OH (2010)
- INTERNATIONAL BUSINESS STUDIES
AUDENCIA SCHOOL OF MANAGEMENT
NANTES, FRANCE (2008)

PROFESSIONAL MEMBERSHIPS

- SOCIETY FOR HUMAN RESOURCES
MANAGEMENT (SHRM), MEMBER
- AMERICAN SOCIETY FOR HEALTHCARE
HUMAN RESOURCES ADMINISTRATION,
MEMBER

PROFESSIONAL BACKGROUND

Amy E. D'Amore is a results oriented Human Resources professional with highly developed problem-solving and decision making abilities. As the Director of Human Resources, Ms. D'Amore is committed to providing strategic guidance on talent acquisition and retention, employee relations, credentialing, benefits, and employee health services. The competitive advantages created by her leadership and superb recruiting efforts are reflected in her outstanding commitment to client satisfaction and compassionate care.

EXPERIENCE HIGHLIGHTS

CORRECTHEALTH – Atlanta, GA

Director of Human Resources, September 2013 – Present

Responsible for the oversight and development of comprehensive HR strategies to support over 35 facilities throughout Georgia, Louisiana, Tennessee, and Kentucky. Plans, develops, implements and monitors diverse HR programs including but not limited to recruitment and staffing, employee relations, policy development and compliance, employee orientation, staff development and training, compensation and benefits administration, provider credentialing, performance management, and employee engagement.

Employment Coordinator, 2012 - 2013

Held full responsibility for a broad range of HR functions including but not limited to recruitment, credentialing, new hire processing, onboarding, compensation, employee relations, and oversight of daily HR activities. Partnered with hiring managers at all levels of the organization to effectively recruit, identify, and retain top talent

WELLSTAR HEALTH SYSTEM – Austell, GA

Human Resources Representative, 2010 - 2012

Promoted to fulfill a broad range of HR functions and provide support to team members in the areas of recruitment, employee relations, benefits, compensation, records management, and customer service. Responsible for various tasks related to employee relations, including but not limited to onboarding, employee engagement, performance management, statistical reporting, and special projects. Continually recognized for outstanding performance and dedicated support provided to both internal and external customers.



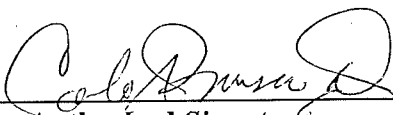
SECTION 5. CLIENT WORK HISTORY (FORM 2)

FORM 2

CLIENT WORK HISTORY

Provide details of the last three (3) state, county or private jails/prison for which you have provided the specified services. The City reserves the right to contact additional clients not listed.

Facility Name: Jackson County Correctional Institution	
Contact Name: Warden Johnny Weaver	
Address:	Telephone: 706-387-6450
265 I. W. Davis Road, Jefferson , GA 30549	Fax Number: 706-387-6450
	E-Mail Address: jweaver@jacksoncountygov.com
Description of Services Provided:	
Comprehensive Inmate medical, mental health, dental and pharmaceutical services, serving 200 detainees.	
Facility Name: Athens-Clarke County Correctional Institute	
Contact Name: Warden Roy Covington	
Address:	Telephone Number: 706-613-3400
2825 County Farm Road, Athens, GA 30605	Fax Number: 706-613-3404
	E-Mail Address: ray.covington@athensclarkcounty.com
Description of Services Provided:	
Comprehensive medical, and pharmaceutical services serving 110 detainees.	
Facility Name: Floyd County Correctional Institute	
Contact Name: Warden Michael Long	
Address:	Telephone Number: 706-236-2490
329 Black Bluff Road, Rome, GA 30161	Fax Number: 706-387-6450
	E-Mail Address: longm@floydcountyga.org
Description of Service Provided:	
Comprehensive medical, mental health, dental and pharmaceutical services serving 450 detainees.	

<u>CORRECTHEALTH MUSCOGEE LLC</u>	<u></u>	<u>5/16/18</u>
Company Name	Authorized Signature	Date

CLIENT WORK HISTORY

Provide details of the last three (3) state, county or private jails/prison for which you have provided the specified services. The City reserves the right to contact additional clients not listed.

Facility Name: Floyd County Jail				
Contact Name: Sheriff Tim Burkhalter				
Address: 2526 New Calhoun Hwy., Rome, GA 30161	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Telephone: 706-314-0710</td> </tr> <tr> <td style="padding: 2px;">Fax Number: 706-291-5249</td> </tr> <tr> <td style="padding: 2px;">E-Mail Address: floydsheriff@comcast.net</td> </tr> </table>	Telephone: 706-314-0710	Fax Number: 706-291-5249	E-Mail Address: floydsheriff@comcast.net
Telephone: 706-314-0710				
Fax Number: 706-291-5249				
E-Mail Address: floydsheriff@comcast.net				
Description of Services Provided: Comprehensive medical, mental health, dental and pharmaceutical services serving 625 detainees.				
Facility Name: Jefferson Parish Detention Center				
Contact Name: Joe Denny				
Address: 1221 Elwood Park Boulevard, Suite 607, New Orleans, LA 70123	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Telephone Number: 504-736-6844</td> </tr> <tr> <td style="padding: 2px;">Fax Number: 504-416-2871</td> </tr> <tr> <td style="padding: 2px;">E-Mail Address: jdenny@jeffparish.net</td> </tr> </table>	Telephone Number: 504-736-6844	Fax Number: 504-416-2871	E-Mail Address: jdenny@jeffparish.net
Telephone Number: 504-736-6844				
Fax Number: 504-416-2871				
E-Mail Address: jdenny@jeffparish.net				
Description of Services Provided: Comprehensive medical, mental health, dental and pharmaceutical services serving 1200 detainees.				
Facility Name:				
Contact Name:				
Address:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Telephone Number:</td> </tr> <tr> <td style="padding: 2px;">Fax Number:</td> </tr> <tr> <td style="padding: 2px;">E-Mail Address:</td> </tr> </table>	Telephone Number:	Fax Number:	E-Mail Address:
Telephone Number:				
Fax Number:				
E-Mail Address:				
Description of Service Provided:				

CorrectHealth Muscogee, LLC

Company Name



Authorized Signature

5/16/2018

Date

SECTION 6. CORRECTHEALTH SERVICE PLAN

Objectives

The objectives of the Healthcare Program proposed by CorrectHealth for the Muscogee County Prison include the following:

- To deliver high quality healthcare services that that will meet or exceed standards established by NCCHC and ACA that govern the health care of detainees.
- To operate the healthcare program in a cost-effective manner as a steward of the County's inmate healthcare budget with full reporting and accountability to the Warden and the Columbus Consolidated Government.
- To operate a health care program at full staffing 24-hours-a-day, seven-days-a-week, using only licensed, certified and professionally trained personnel that meet all licensing requirements of the State of Georgia. Staffing will include 24-hour access to physicians, medical care providers, and dental services.
- To develop and implement a written health care plan with clear objectives, policies, procedures, and an annual evaluation of compliance. The CorrectHealth program focuses the provision of needed medical, mental health and dental care on-site as much as possible and within the scope of services for the facility.
- To maintain an open and cooperative working relationship with the administration and staff of the Muscogee County Prison, the Columbus Consolidated Government and its employees.
- To provide all health care for the inmates, thereby relieving Muscogee County Prison staff of any responsibility for the performance of healthcare functions.
- To provide a comprehensive program for continuing education of healthcare staff and security staff, and to provide health education for the patients that is appropriate and comprehensive.
- To maintain complete and accurate records of care rendered in compliance with HIPAA regulations, and to collect and analyze health statistics on a regular basis.
- To operate the healthcare program in a humane manner with respect to the inmates' rights to basic healthcare services.

I Scope of Services (ATTACHMENT A)

A. Health Care Services

1. Intake Screening

CorrectHealth licensed healthcare staff will be posted in the Intake area of the Muscogee County Prison 24-hours per day, 7 days per week to complete, on every detainee that arrives in the booking area, a detailed Receiving Screening and Health History, which includes a medical and

mental health screening, and to assist Detention Facility officers in the determination of an arrestee's suitability for confinement based upon their presenting medical condition.

At a minimum, the Receiving Screening and Health History will include the following:

- Documentation of current illnesses and health problems, including medications taken, and special health requirements, including mental, dental, communicable diseases, and those problems unique to females;
- Obtaining a full set of vital signs;
- Screening for Tuberculosis prior to being dressed into the facility;
- Screening of other health problems specifically designated by our Medical Director;
- Behavioral observations, including state of consciousness, mental status, and whether the inmate is under the influence of alcohol or drugs;
- Notation of body deformities, trauma, bruises, ease of movement, etc.;
- Assessment of the condition of skin and body orifices, including infestations, lesions, jaundice, rashes, needle marks or other indicators of drug abuse;
- Mental Health History;
- Assessment of inmate mental status to determine current or potential suicidal or homicidal ideation;
- Documentation of personal physician and any medical needs to facilitate verification by staff;
- Documentation of the disposition of the inmate; and
- The initiation any necessary referral for special housing, mental health services, medical or dental routine care or additional medical specialties as appropriate.

The comprehensive health history will identify acute and chronic conditions that may require immediate intervention. In-depth information will be gathered about alcohol and substance abuse, communicable diseases, mental health conditions, and pregnancy. This provides advantages to Columbus Consolidated Government in the following ways:

- This comprehensive approach enables us to identify individuals whose pre-incarceration conditions warrant medical or mental health clearance prior to booking.
- It allows our healthcare staff to identify complex medical, mental and dental conditions upon entry. As a result, our staff can immediately begin to develop individualized treatment plans and provide care.
- It permits our staff to refer acute and chronic conditions more rapidly to our upper level providers to begin an aggressive treatment plan before more serious and costly complications occur.

Tuberculosis Screening and Testing for Detainees. At intake, every detainee will be screened for signs and symptoms of tuberculosis. If they have symptoms of active tuberculosis, they will be diverted to the Emergency Department for further evaluation. Proper precautions will be taken to ensure that security staff will not be exposed unduly while transporting the detainee. If the

detainee does not have symptoms, they will receive a tuberculin skin test (TST) on arrival. Detainees who have tested positive on the TST in the past will receive a chest x-ray.

Disposition. All information gathered during the Intake Screening process will be used to determine the appropriate disposition for the inmate, to include:

- ✓ Referral to the appropriate health care service on an emergency basis;
- ✓ Placement in a preventive suicide setting;
- ✓ Placement in the general inmate population;
- ✓ Placement in the general inmate population with referral to the appropriate Medical, Dental or Mental Health Provider; or
- ✓ Placement in the appropriate area of the Mental Health Unit.

Diversion. All inmates who present to the Prison unconscious or who appear to be seriously injured/ill will be sent to the Emergency Department for treatment. Their return to the Prison is predicated upon written medical clearance.

Detainee reports of special medical needs, current medications and past medical treatments will be verified by healthcare staff using information provided by the patient, if possible. Healthcare staff will contact the Provider to discuss patients who require immediate continuity of care/medications. All detainees reporting current medical treatment will be referred to the Provider at their next available clinic.

2. 14-Day Physicals (Health Appraisal)

Each patient will receive a hands-on Initial Health Appraisal within fourteen (14) calendar days of their arrival at the Prison. Per NCCHC Standard J-E-04 and P-E-04, this may be completed by a Physician, a Mid-Level Provider or a Registered Nurse who has received specialized training in physical assessment. At a minimum, the Health Appraisal will include the following:

1. Review of the Receiving Screening and Health History;
2. Completion of medical, dental, psychiatric and immunization history;
3. Additional data to complete a standard history and physical examination, to include breast, rectal and testicular exams as indicated by the patient's gender, age and risk factors, and other evaluations as determined by the Medical Director;
4. Observation and documentation of mental status;
5. Testing for communicable diseases, such as sexually transmitted disease, when clinically indicated;
6. A review of the TST planted in Intake and read 48-72 hours later, or the results of the chest x-ray results for an inmate previously positive;
7. Dental and vision screening;
8. Additional laboratory testing as directed by the provider for particular medical or health problems;

9. Additional testing, as required, based on the original screening tests or reported histories, such as tests for hepatitis and HIV, and chest x-rays;
10. Initiation of appropriate therapy;
11. Measurement of height, weight, pulse, blood pressure, and temperature;
12. For females, an inquiry about pertinent obstetrical and gynecological conditions, including menstrual cycle and unusual bleeding, current use of contraceptive medication, presence of an IUD, breast masses and nipple discharge, and possible pregnancy.

The Medical Director will review and sign off on all Health Appraisals to ensure that appropriate treatment plans have been initiated.

Health Appraisals will also be completed according to NCCHC and/or Georgia DOC standards for the entire term of the inmate's incarceration. The Medical Director will determine the elements of these annual health assessments based upon the age, sex and health needs of the individual with consideration for the recommendations of the American Academy of Family Physicians, and in collaboration with Dr. Walter Smith, CorrectHealth Executive Medical Director.

3. Sick Call

Nurse Sick Call will be conducted daily Monday through Friday. Nursing staff will utilize CorrectHealth's extensive Nursing Assessments to address minor injuries and illnesses using over-the-counter medications. All Nursing Assessments are reviewed and approved by the Medical Director annually. Each Assessment has a corresponding printed Nursing Note that facilitates a thorough physical assessment and documentation of the encounter. All Assessments include appropriate inmate education. Currently, the CorrectHealth program includes over 75 inmate education hand-outs in both English and Spanish that correspond to our Nursing Assessments.

If the care required to treat a patient's condition exceeds the scope of practice for the nursing staff, the patient will be referred to the next appropriate level of Provider. When appropriate, the patients will be referred to the Medical Director for evaluation. Urgent needs will be addressed same day. Routine provider sick calls will be seen within 7 days. Any detainee whose custody status precludes attendance at a clinic sick call will be seen at their confinement location under conditions that preserve confidentiality while providing for the security of the healthcare staff.

As part of our Continuous Quality Improvement Program, upper level Providers are responsible for reviewing the assessments and interventions provided by all healthcare staff via a peer review process. In addition, monthly focus audits are completed so that areas of high volume, high acuity or high risk are monitored.

4. Chronic Care

CorrectHealth has a formalized Chronic Care Program that includes, but is not limited to, clinics for Asthma, Diabetes, Seizure Disorders (Epilepsy), Infectious Diseases (including Hepatitis B & C, HIV, and TB) and Hypertension. All patients presenting with a chronic illness will be monitored

through our Chronic Care Program. Our Program utilizes evidence-based guidelines, specific for each disease process, which are based upon nationally accepted clinical guidelines. Dr. Walter Smith, Executive Medical Director, has approved all CorrectHealth clinical protocols used for inmate care. All are reviewed at least annually, or when changes occur in the national guidelines or community standard. Every inmate enrolled in our Chronic Care Program will have an individualized treatment plan.

Patient education is paramount to treatment and medication compliance, which in turn, leads to better disease control and ultimately, better patient health. Thus, a large part of each chronic care patient encounter is patient education, and the verification that the patient understands their disease process, the mechanism by which the medications prescribed (if any) affect the disease process, and the importance of a healthy lifestyle to improve their outcome.

5. Medication Delivery

Only licensed professional staff will administer medications at the Prison. CorrectHealth proposes med pass twice per day on each housing unit. CorrectHealth's experience has validated that having two main medication passes per day is therapeutically sound and has a positive impact on security activity schedules. KOP (Keep on Person) will only be allowed at the discretion of the facility. Arrangements will be made for nursing staff to administer any medication ordered by the Provider more often than twice per day. Nursing staff will also monitor the patient's compliance and response to medications, and conduct medication counseling as needed. If medications are ordered in such a way that the medication is needed during the time away from the facility, arrangements will be made by medical staff to assure that the patient receives their medication appropriately. Staff will ensure that all patients for whom a Provider orders medication will receive it.

All medications administered will be documented on a patient-specific Medication Administration Record. In addition, any medication refused or not administered will also be documented on the Medication Administration Record with a notation as to why the medication was not administered. Any patient refusing more than three consecutive doses of a medication will be referred to a Provider for counseling.

CorrectHealth will work with the Prison staff to determine the most convenient times for medication administration to occur that satisfies both therapeutic and security needs.

Detainees who request over-the-counter medications must be assessed by a nurse prior to any medication administration. If the nurse determines that an over-the-counter medication is necessary, it will be provided to the inmate. Practicing within the CorrectHealth nursing assessments, nurses may administer certain over-the-counter medications if necessary. In all cases of administration of over-the-counter medication, the nurse will document the patient assessment, the nursing protocol used and the medication administered in the health record.

6. Nursing Services

Daily Triage of Complaints. CorrectHealth utilizes a tiered, multidisciplinary approach to inmate healthcare. Site-specific policies and procedures will be established for handling and responding to non-urgent requests for medical, dental and mental health treatment. These policies and procedures will include triage of the Health Services Request form within 24 hours of receipt, response within 48 hours (up to 72 hours on the weekend) of receipt, and the criteria used for triage as approved by the provider. Detainee medical requests will be picked up daily and triaged by a nurse trained in physical assessment and triage protocols. All detainees needing a physical evaluation will have an appointment within 48 hours of submission. Staff will always have the ability to immediately evaluate any inmate whose complaint is unclear or who describes an urgent issue by calling them to the clinic.

All non-acute mental health concerns will be forwarded to the Mental Health staff. Serious mental health needs of an inmate will be conveyed to the on-site Mental Health Provider immediately by the nurse triaging the health service request form, after ensuring the safety of the patient.

A health service request log will be used to track all requests from initial receipt to final disposition, and will include pertinent dates, and the name and title of the healthcare staff who provided treatment. The number and type of requests received will be included in the monthly Health Services Statistical Report.

Detainees in segregation (disciplinary detention and/or administrative segregation) will be allowed to request health care daily during medication administration. Nursing rounds will be conducted in segregation daily at the time of medication pass and these rounds will be documented on a form that will be filed in the individual's medical record at the end of each month or when discharged from Segregation. The number of Segregation Rounds conducted will be reported in the monthly Health Services Statistical Report and will be shared at the quarterly Medical Audit Committee meeting.

Special Medical Treatment Plans. CorrectHealth's Medical and Dental Providers will develop written individualized treatment plans to monitor, care and/or treat inmates with special conditions requiring close supervision, including, but not limited to:

- ✓ Acute or chronic medical, dental or mental health conditions
- ✓ Special needs
- ✓ Mental or developmental impairment
- ✓ Drug and alcohol withdrawal
- ✓ Geriatric inmates
- ✓ Women's health issues, including pregnancy
- ✓ End-of-life care
- ✓ Impaired mobility
- ✓ Other physical limitations, such as hearing or sight impairment
- ✓ Communicable diseases

All written individualized treatment plans will include instructions to healthcare personnel regarding their roles in the care and supervision of the patient. Collaboration with security will be included in the planning process, and any special security concerns will be noted within the treatment plan.

Elective Care. CorrectHealth understands that we are not responsible for “Elective care”, which is defined as any treatment or medical intervention not required to prevent deterioration in the patient’s health or required to avoid obvious harm to the inmate/patient. CorrectHealth’s Medical Director will determine what treatments, interventions, therapies and pharmaceuticals are elective, as opposed to those required to maintain the patients’ health.

Staff Tuberculosis Screening. All Correctional staff and healthcare staff will receive an annual tuberculosis screening, the results of which will be maintained in a confidential database on-site. All CorrectHealth staff receive a two-step TST at the time of hire. Annually, all CorrectHealth staff are tested during the month of March. Any correctional staff member or CorrectHealth staff member whose result is positive will be referred to their personal healthcare provider for follow-up. All individuals previously testing positive will be screened for signs and symptoms of active disease annually based upon the above schedule. Any individuals with symptoms will be immediately referred to their personal healthcare provider for evaluation.

Staff Hepatitis B Vaccinations. All correctional and CorrectHealth staff will be offered a vaccination series for Hepatitis B. Correctional staff will initially be offered the vaccination upon hire, but it will be available at any time they decide to initiate the series. CorrectHealth staff are offered the vaccination at initial hire during orientation. They, too, may decide to accept the vaccination series at any time during their employment. CorrectHealth understands that the cost of the serum will be paid for by the Prison for their employees. CorrectHealth is happy to administer the vaccine at no cost to the Prison.

On-Call. To ensure quality of care and continuity of services, CorrectHealth will provide on-call services for medical and dental care for after hours and emergent situations twenty-four (24) hours a day, seven (7) days a week. Our on-call Providers understand the importance of responding on-site to decrease the transfers of patients to off-site healthcare services.

EKG. Electrocardiogram machines will be available on-site twenty-four (24) hours per day, seven (7) days per week for immediate testing should the need arise. All staff will be trained on, and will demonstrate correct knowledge of its use prior to working in the clinic. EKGs may be sent to the Provider on-call for review and patient disposition when there is no provider on-site.

7. Emergency Services

CorrectHealth provides access to care 24 hours a day 7 days a week with nurses, Physicians and Midlevel providers available to render care on-site and via telemedicine when needed to make determination if the Inmate needs to be transported to the nearest medical facility for further

emergent care. CorrectHealth will have a licensed nurse on-site twenty-four (24) hours a day, seven (7) days a week who will respond to all emergencies inside of the Prison that involve staff and visitors, and will provide emergency interventions and stabilization care until outside emergency medical personnel arrive. Further, CorrectHealth will assist in the development and training for disaster emergencies and fire drills.

8. Referrals to Hospital and Specialty Care

Specialty Care referrals will be processed through the CorrectHealth Utilization Management Program. Scheduled services will be referred and approved prospectively and all emergency care rendered will be evaluated retrospectively to ensure appropriateness of the care and treatment received.

CorrectHealth will be responsible for the identification of the need for all emergency and non-emergency medical and dental care for detainees at the Prison. We will also be responsible for the scheduling and coordination of all emergency and non-emergency care. CorrectHealth understands that all off-site care expenses will be the responsibility of the Columbus Consolidated Government.

Referral Services. Although CorrectHealth will attempt to provide as much on-site specialty care as possible, there will be situations when the patient's needs exceed the capabilities of the Facility. In such necessary cases, CorrectHealth will arrange for laboratory testing, diagnostics, specialty care, and off-site inpatient and outpatient care. Policies and procedures site-specific to the Prison will be written to describe the process for off-site care.

Hospitalization. When hospitalization of a patient is required, CorrectHealth will be responsible for the arrangements and daily monitoring of the patient's condition, and the continuing determination of medical necessity for hospitalization. CorrectHealth will develop a professional relationship with the hospital's Utilization Management Department in order to facilitate the patient's return to the Prison as soon as medically feasible.

Patients who go to an outside provider or hospital, whether due to an emergency or as the result of a scheduled appointment, will be seen by medical staff upon return to the Prison and the discharge plan will be reviewed. As necessary, the on-call Provider will be contacted to discuss the recommendations and to obtain any appropriate orders. A note regarding this review, with reference to follow up on-site evaluation and treatment, will be documented in the detainee's health record. CorrectHealth will ensure that all pertinent hospital and Specialty Provider records are filed in the patient's health record on-site.

CorrectHealth understands the impact that sending patients to off-site appointments has on security. CorrectHealth will evaluate the utilization and the need for Specialty Services, and will work with Facility Administration to facilitate making these services available on-site.

Optical Care. CorrectHealth will assist the County any way possible to support this existing County program to include scheduling, coordination of visits, the handling of orders, distributing eyeglasses to the inmates and any instructions if applicable.

9. Case Management

CorrectHealth utilizes a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet the Inmate's comprehensive health needs through communication with off-site services and available resources to promote quality, cost-effective outcomes.

10. Utilization Management

CorrectHealth employs a robust utilization management (UM) program for consults, off-site services and transportation, hospitalizations and pharmaceuticals. Our program includes site monitoring and accountability, utilization review by the site Medical Director and staff education. All consults generated at the Prison will be reviewed by the site Medical Director within 24 hours of referral. Simultaneously and via our electronic UM application, the CorrectHealth Executive Medical Director will review all referrals for offsite services to determine their medical necessity. Appropriate referrals will be booked by the Consult Coordinator and will be logged into our Consult System. Those that require clarification will be discussed with the originating Provider. Patients will be re-assessed every 30 days by the CorrectHealth onsite clinician if they have not been evaluated by the off-site consultant. Emergency care will be obtained immediately, and a retrospective review will occur. All hospitalizations will receive concurrent review daily by the Executive Medical Director and the site Director of Nursing or designee. They will monitor the patients who are hospitalized to insure that they return to the facility as soon as they meet the criteria for care on-site. For all hospitalizations, retrospective case review will occur to ensure that the use of the outside service was appropriate and that the length of the hospital stay was appropriate. This retrospective review will be conducted between the Executive Medical Director and the Prison Medical Director. Findings will be discussed with staff.

All non-formulary medications ordered will be reviewed by the Executive Medical Director and the Site Medical Director. Pharmacy utilization will be monitored monthly by the site Medical Director, Health Services Administrator and the Corporate Director of Operations and Development Support.

Peer Review. Peer Review, the evaluation of the clinical care provided to a patient by a provider, occurs annually as part of the CorrectHealth Continuous Quality Improvement Program. Each provider's documentation of care is reviewed by a clinician with the same credentials (i.e. MD reviews MD). Multiple health records are reviewed for each provider and the results are shared with them. If necessary, corrective action plans are developed that may include educational components. Logs are kept of this review to satisfy accreditation requirements; the actual review is considered privileged and confidential information.



11. Prior Authorization

See Section 11. Utilization Management, above

12. Billing Adjudication

Cost Saving/Cost Containment Procedures. CorrectHealth demonstrates fiscal stewardship in a variety of ways. We continuously review our procedures, search for cost-effective alternatives to current supplies, equipment and pharmaceuticals, and we perform cost-benefit analysis before making any changes to ensure it would be in the best interest of our clients and our staff. The CorrectHealth program complies with the requirements of the Patient Protection and Affordable Care Act.

A Formulary for pharmaceuticals will be utilized at the Prison, and all non-formulary medications will be available through our Utilization Management process. CorrectHealth works closely with the Pharmacy vendor to take advantage of all manufacturer and other deals that are available. In this way, we are able to lower your overall pharmacy costs.

Under our program, CorrectHealth will be responsible for the management of all inpatient and outpatient invoices and claims, including verification of patient eligibility and charges. Columbus Consolidated Government will be financially responsible for all inpatient care and all outpatient Specialty care for their detainees.

CorrectHealth staff have extensive experience with both outpatient and inpatient claims review, especially as it relates to ensuring that only Medicaid rates are being charged. CorrectHealth has been instrumental in assisting our clients implement changes in their procedures to take full advantage of this legislation. Columbus Consolidated Government will be financially responsible for all outpatient and off-site healthcare.

Our custom-Microsoft SharePoint system tracks off-site clinical traffic and requests for specialty care. This same system also reprices offsite care at the appropriate Medicaid Rate. All deductibles < \$1,000 are listed. Emergency healthcare services >\$1000 and billed to GDC. Monthly, this information is tabulated into an invoice or credit.

13. Quality Assurance/Quality Improvement

Medical Audit Committee. CorrectHealth will implement a Medical Audit Committee (MAC) to include Facility Administration. The MAC will be responsible for developing, recommending and implementing all policies and procedures necessary for the operation of the medical program. The objective of the MAC is to assure that quality health services are available to all inmates. Members of the MAC typically include representatives from Facility Administration (as designated by the Facility), the Health Services Administrator, the Medical Director, the Dentist (when needed), the Mental Health Director, and Continuous Quality Improvement/Infection Control staff. Other vendors, such as those responsible for Food Service, may also attend when there are issues that

involve their areas of supervision (i.e. Special Diets). The Committee will meet at least quarterly. CorrectHealth's Health Services Administrator will be responsible for organizing all MAC meetings, developing the agenda and recording minutes.

Facility Meetings. It has been our experience that developing an open and collegial relationship with the Facility Administration has enhanced communication and department operations, and this is our goal at the Prison. CorrectHealth's HSA will be available to meet with the Administrator or their designee at his/her request. In addition, the HSA or designee will attend all Muscogee County staff meetings as requested.

Continuous Quality Improvement. A Continuous Quality Improvement Committee will be initiated onsite at the Prison to monitor the quality of care and the quality of service provided. Per NCCHC Standard, this Committee will be organized and chaired by the Medical Director. A primary responsibility of this committee will be to develop, recommend and implement all protocols, policies and procedures necessary for the operation of a comprehensive healthcare program at the Prison. This Committee, in consultation with facility administration, will design and implement interventions to improve quality in the medical, dental and mental health programs at each facility. Our Clinical Services team will assist the Prison staff on immediately implementing a Comprehensive Continuous Quality Improvement (CQI) Program. Our CQI Program includes monthly audits determined by both corporate initiatives and site-specific areas of concern. Audits include the collection of data from appropriate sources, analysis of the data, and the development and implementation of a corrective action plan. Reevaluation of the issue occurs within a pre-determined timeframe to ensure correction.

Staff training is necessarily an important component of any action plan, and CorrectHealth will have the corporate trainers and the site staff work together to plan and coordinate education activities for the staff. Other disciplines may be invited based upon the particular issue studied. CQI audit results will be discussed at the Medical Audit Committee meetings and will be shared with staff during the monthly staff meetings. An annual CQI report for each facility will also be completed and shared with the respective site Administrators.

All sentinel events, including deaths in custody, will be reviewed by the Medical Director, the Health Services Administrator, and any other appropriate staff within 30 days of occurrence. It has been our practice to include Stacy Scott, our Chief Legal Officer, and Dr. Walter Smith, Executive Medical Director, in all Mortality Reviews.

Monthly Health Services Statistical Report. CorrectHealth will submit a monthly Health Services Statistical Report that summarizes the services provided during the previous month. The Report will be customized with input from Facility Administration so that the data tracked will address the needs of all users. Currently, CorrectHealth tracks all statistical information in a central database to allow comparisons and analysis. Our Electronic Health Record will generate statistical reports on demand. CorrectHealth is happy to work with the Facility Administration to draft any

informational report regarding healthcare services at the Prison, and will do so in an expeditious manner. Reports will include the following:

1. Number of patients on Psychotropic Drugs
2. Treatment of patients with alcohol and drug abuse issues
3. Any use of restraints
4. Any use of forced medications
5. Sick call
6. Chronic care
7. Physicals
8. Intake Screening
9. TB prevention
10. Infection Control Tracking
11. HIV Treatment
12. Staffing report with actual FTEs, hours worked and level of professional certifications.
13. Any sentinel events
14. Legal Cases
15. Dental Sick Call
16. Vision Screening
17. Referrals to outside specialists
18. Any refusals of care by patients
19. Any refusals of medication
20. Narcotics counts
21. Emergency Room visits (requires additional documentation and justification)
22. Specialist visits (requires additional documentation and justification)
23. Penalties for non-compliance

Inmate Complaint/Grievance Procedure. CorrectHealth policies and procedures address the handling of inmate complaints regarding medical care (Grievances), and site-specific policies and procedures will be customized for the system at the Prison. All grievances will be date and time stamped, and entered into a Grievance Log. This log will include the inmate name and ID number, date received, nature of the Grievance, date answered, and resolution/disposition. CorrectHealth will respond to all Grievances within a timeframe established jointly by the facility administration and the Health Services Administrator, which will not be more than five (5) business days after receipt by CorrectHealth staff. All Grievance information will be summarized and shared at the quarterly Medical Administration Committee meeting. In addition, trends in Grievance activity will be analyzed and further studied by the CQI Committee and Corporate Staff should that be indicated.

Policies and Procedures. Our policies and procedures are based upon NCCHC standards and all CorrectHealth sites provide care accordingly. Internal audits are conducted to ensure compliance. All policies and procedures are reviewed at least annually, or when treatment standards change.

At the Prison, CorrectHealth will implement policies and procedures that are based upon ACA and NCCHC standards and are site-specific to the facility. Our corporate Policy and Procedure Committee, chaired by Dr. Walter Smith, Executive Medical Director, ensures that any changes to national standards are incorporated into our policies and procedures. The Committee also reviews any proposed changes to site policies to ensure that they continue to be in congruence with national standards and corporate policy.

CorrectHealth welcomes the review and approval of the Muscogee County Facility Administrators or their designees of our policies and procedures impacting the security and the general administration of the Muscogee County Prison. Our responsibility as the provider of medical, mental health, and dental care at the Prison is not limited by this collaboration.

14. Offender Health Education

Health education, recovery and wellness information are offered to all inmates. Individual health education and instruction is provided to patients during the healthcare encounter. CorrectHealth's Inmate education policy is that Healthcare staff document the education that patients receive during the health encounter in the individual's health record. General health education for inmates is available in various forms, including group instruction, educational posters, pamphlets, audio/video tapes and brochures. Examples of appropriate topics for patient education include, but are not limited to, the following:

- Chronic diseases and disabilities
- Discharge planning in preparation for release
- Oral hygiene
- Domestic violence
- Stress management
- Family-planning
- Medications
- Nutrition and exercise
- Personal hygiene
- Self-breast examination
- Smoking cessation
- Substance-abuse
- Infectious diseases, including STIs, tuberculosis, hepatitis, HIV, and MRSA

Healthcare staff advocate for patients so that they may be afforded exercise opportunities appropriate to their clinical conditions.

15. Medical Records Management

CorrectHealth recognizes that a complete and accurate health record on all patients is an integral part of patient care. With this being the case, we have a Health Information Management Department which facilitates the daily functions of the records management process. This department actively participates in the overall philosophy of CorrectHealth in the

provision of high quality, cost effective patient care within correctional facilities.

Under the supervision and direction of the Director of Health Information Management, who holds the credentials of Registered Health Information Administrator (RHIA) issued by the American Health Information Management Association, the medical HIM department provides numerous functions and services to ensure that a comprehensive health record is maintained on all patients. The department provides various services that assist in running the medical department efficiently. These services include, but are not limited to the following:

- Creation, storage, and maintenance of the offender's medical record;
- Preservation of all medical records/health information according to NCCHC, MAG, CorrectHealth, and all ACA accreditation standards;
- Monitoring the quality of medical record content;
- Management of policies on health privacy, records management, records retention, records archiving, and medical record documentation;
- Establishment of guidelines to ensure the confidentiality, security, and integrity of data/information by:
- Assuring that medical record documentation is entered by appropriate and authorized professionals.
- Assuring that only authorized individuals have the medical record available for their use.
- Establish and maintain control over all scanning, archiving, filing procedures, and record storage.
- Ensure accuracy and completeness of the medical record in real time
- Maintaining a patient's right to confidentiality and privacy by adhering to information release guidelines and ensuring records are kept in a secure environment.
- Assisting in the preparation of Medico-legal requests by ensuring that appropriate releases and authorizations are completed.

Healthcare quality and safety require that complete, accurate and up to date information is maintained and be available at all times to support patient care and medical decision making. Reviewing the chart for content, completion, and timeliness of documentation is crucial to the operation of the medical department. Chart documentation supports the quality of care provided, and medical record audits ensure that all care and services are rendered as ordered. Therefore, in addition to typical medical record duties, the HIM department conducts chart audits and quality assurance assessments on a regular basis. Typically this department, in conjunction with other quality improvement processes, conducts two types of internal audits. The qualitative audit and the quantitative audit which are defined as follows:

- The qualitative audits takes a detail approach of looking at the quality of documentation based on clinical practice guidelines, clinical policies, practice

parameters, and compliance with regulations and standards of practice established by the medical community and accreditation bodies.

- The quantitative audits are more general and basic, focusing on whether the documentation is complete.

Everyone involved with documenting or using health information is responsible for its quality. All Medical Records will remain the property of the Georgia Department of Corrections.

NOTE: CorrectHealth is anticipating the conversion from a paper medical record system to an electronic medical record system for all inmates within the Georgia Department of Corrections. We will be ready and willing to facilitate this conversion at the Harris County Prison.

All transcription and filing of information in the health record will be done by professional nurses or trained medical records staff (Health Information Technicians). As part of our Comprehensive CQI Program, CorrectHealth will perform health record audits on a regular basis to ensure the completeness and accuracy of all health records. Further, all health records and processes applicable to health records will follow ACA and NCCHC Standards.

Senior Leadership at the Prison will be allowed access to, and copies of, detainee health records on a need to know basis and in a manner consistent with confidentiality laws. Detainees will never be allowed access to health records for any reason, although copies of their health records may be procured through our health record request policies and procedures.

We will archive the health records within the areas designated by Muscogee County for that purpose, and in accordance with Georgia and federal laws and regulations and the Muscogee County policies and procedures. CorrectHealth understands that health records are the property of the Muscogee County Prison and the Georgia Department of Corrections.

Site-specific logs, Appointment Books, Forms Notebook and Protocols Notebook will be developed during week 2 of the transition. The CorrectHealth Director of Health Information Management will oversee this process. If the logs and appointment system are computerized, templates will be developed to reflect each site's distinctive operations.

Clinical Services/Administration. The CorrectHealth Policies and Procedures will be organized for each site, as will the Infection Control Manual, the Safety Manual and the CQI Manual. Site-specific Policies and Procedures will be written during the first month on-site. Text resources for staff, including clinical textbooks and nursing procedure manuals, drug references, TB video, and NCCHC's current Prison standards will be purchased for each facility. CLIA waiver application will be submitted as needed. A list of medical equipment will be finalized and submitted to our Materials Manager for processing to ensure all equipment is available by the start-up date.

Information Systems. The CorrectHealth IS Department Manager will contact the IS department at the City of Columbus to discuss connectivity and telephone systems. Any necessary supplies and installations will be presented to the Transition team Leader and the Facility Administrative

designee. In conjunction with Columbus Consolidated Government's IS department, the CorrectHealth IS Manager will determine the deliverables necessary for an on-site contract assumption. The IS departments will work collaboratively providing progress updates to the City, the Prison, and CorrectHealth.

16. Expendable Medical Supplies

CorrectHealth understands that we are responsible for the procurement and purchase of all medical and lab supplies, forms, books and periodicals. CorrectHealth will supply all medical department office supplies, including paper, pens, medical/dental file folders, medical records and tabs, and miscellaneous office supplies.

17. Office Supplies

CorrectHealth will provide all necessary office supplies to carry out the daily medical operations.

18. Formulary Development and Management

CorrectHealth has standardize formularies and will further customize and manage the formulary to meet the needs of the facility. Formularies are ever evolving lists preferred pharmaceuticals that are reviewed at quarterly P&T Committee meetings. Further information regarding pharmacy services can be found in the pharmacy section of this proposal.

19. In-Clinic Laboratory Services

CorrectHealth will provide point-of-service testing on-site and provide phlebotomy and specimen collection for other laboratory services processed off-site. CorrectHealth currently contracts with Quest Laboratory to provide off-site laboratory services to our clients. With Quest, our Providers have the ability to access lab results through a secure website, thus allowing remote access at any time. All lab results will be reviewed by a healthcare provider prior to placement in the patient's chart. Abnormal results will be addressed as indicated. CorrectHealth staff will maintain a log of all laboratory tests performed, including inmate name, identification number and type of test. When the Electronic Health Record is implemented, lab results will be immediately filed in the health record. The Provider will review the results and sign-off electronically.

CLIA Waived Tests. Tests such as urine dip, pregnancy, and fasting blood glucose will be available twenty-four (24) hours per day, seven (7) days per week to aid in the evaluation of a patient. CorrectHealth will consider point of care testing. An example is the implementation of bedside troponin and CK enzyme blood testing to assist in the evaluation of chest pain.

If a patient needs services that exceed the capability of the on-site ancillary service equipment, arrangements will be made for them to receive the service off-site through our Specialty Services referral process.

20. In-clinic X-ray Services

Mobile x-ray and ultrasound services will be provided on-site. All reports will be reviewed by the Provider prior to filing in the Medical Record, and appropriate follow-up will occur as necessary. In addition, a Radiology log will be maintained to verify that all studies were conducted as ordered and results were received. CorrectHealth contracts with Global Diagnostic Services, a minority owned and operated business, for these services.

21. Dental Services

CorrectHealth will provide dental services for the detainees at the Prison to include dental examinations within twelve months of admission and dental treatment when the health of the inmate would otherwise be adversely affected as determined by the dentist. Emergency dental services will be made available twenty-four hours per day, seven days per week. All necessary pharmaceuticals will be ordered by a provider licensed in Georgia to do so. Basic dental services will include tooth extraction, incision and drainage of abscesses and treatment for the resolution of pain.

A dental screening is part of the CorrectHealth Health History and Physical, as is patient education regarding basic oral hygiene. The dental screening will include the charting of decayed, missing and filled teeth, and inquiry into the patient's dental history to ascertain dental problems. Written treatment plans will be developed for detainees exhibiting acute or chronic dental conditions and will include:

- ✓ Dental evaluations consistent with ACA and NCCHC standards;
- ✓ Referral for acute and chronic dental conditions;
- ✓ Patient education and oral hygiene counseling;
- ✓ Interface with Medical and Mental Health providers in the provision of comprehensive care; and
- ✓ Management of any dental special needs that affect nutritional status.

All findings will be documented in the health record.

As multiple staffing options have been offered, we will provide on-site dental care as negotiated in our final contract. As with all of our staffing schedules, CorrectHealth understands that Administration must approve them prior to implementation.

22. Hazardous Waste Management

CorrectHealth is responsible for the secure storage and disposal of biohazardous medical waste generated in the medical department. We currently utilize the services of Healthcare Medical Waste Removal.

23. Medical Equipment

CorrectHealth will provide all the necessary medical equipment carry out the daily medical functions and work with the Facility to recommend necessary equipment to purchase. If there is equipment that we feel is necessary that costs more than five hundred (\$500) we will request that Columbus Consolidated Government purchase the equipment. If the equipment cost is less than five hundred (\$500) CorrectHealth will purchase the equipment at our own expense. Columbus Consolidated Government will provide capital equipment needs, particularly EKG machines and AEDs.

24. Drug and Alcohol Withdrawal and Detox

CorrectHealth has an aggressive and effective approach to the care of patients experiencing drug and alcohol withdrawal. During the Intake process, CorrectHealth staff triage and identify patients with substance abuse dependence, who are at risk for drug and alcohol withdrawal. CorrectHealth may use the Clinical Institute Withdrawal Assessment (CIWA) Protocols for assessment of severity of alcohol withdrawal symptoms and the Clinical Opiate Withdrawal Scale (COWS) for assessment of severity of opiate withdrawal symptoms. Providers are on site and /or on call 24 hours per day, 7 days a week.

Patients with mild withdrawal signs and symptoms are placed on a regimented schedule of observation to identify signs of active withdrawal. If and when those signs are identified, appropriate medications and treatment are initiated, utilizing protocols, to treat the patient safely and appropriately. Patients displaying moderate withdrawal signs and symptoms may be observed in the Infirmary. Treatment plans can be utilized in the infirmary that involve more frequent medications and observation. Patients with severe withdrawal signs and symptoms are referred to the emergency room for stabilization.

The acute phases of withdrawal and detoxification are managed medically with mental health consultation as needed. Once the detoxification process is completed and the patient is medically stable, the mental health team evaluates the patient and assume patient care management as indicated.

When available, patients are offered enrollment in on-site addiction-assistance classes, such as Alcohol Anonymous, Narcotics Anonymous, faith-based programs, and life-style programs, and other community linkages. The Health Service Administrator maintains a list of local community resources that address addiction, so that patients may be referred to outside services prior to discharge.

CorrectHealth has specific and tiered Provider Protocols for the treatment of patients withdrawing from alcohol, benzodiazepines, opiates, and narcotics.

25. Filing Medicare

See Utilization Management billing adjudication above

B. Pharmacy Services (ATTACHMENT A)

It is understood that CorrectHealth will be responsible for the procurement, inventory control, dispensing and disposal of all pharmaceuticals. We understand that the County will be responsible for the cost of all medications. CorrectHealth currently contracts with Diamond Pharmacy Services for our other facilities. Our familiarity with Diamond, including ordering, order reconciliation, reporting, returns for credit, and record keeping positions us perfectly to offer you continuity and consistency in your pharmacy program.

A Registered Pharmacist will oversee pharmacy operations, including inventory control and safety, medication ordering, dispensing and disposal. All controlled and over the counter medications will be packaged by the pharmacy. Records that will be maintained include inventory, cost and ordering history for both prescription and over the counter medications. All medications ordered will come with information regarding potential drug interactions and adverse effects. The pharmacy system has the ability to generate many customized reports, including current patient drug profiles and patient lists by medication or categories of medication. The system may generate reports of patients whose medication order will expire within a stated timeframe (i.e. 7 days), to enable staff to have the provider review the medical record to verify the necessity for renewal, and to renew in a timely manner to ensure continuity of care. Other information that can be obtained from the system includes types of medication ordered, most frequently ordered medication, most costly medication ordered and provider history of orders written.

The consultant pharmacist will participate in our Pharmacy And Therapeutics Committee Meeting and lend their expertise in such areas as use of non-formulary medications and medication utilization in general. The Pharmacist may recommend areas for review and appropriate indicators and outcome measures for CQI activities regarding Pharmacy services and medication administration. Pharmacy inspections will be conducted quarterly and any necessary action plans will be developed in collaboration with the Health Services Administrator. Results will be shared with CorrectHealth staff at monthly staff meetings. Representatives from Prison will participate on the CorrectHealth corporate Pharmacy and Therapeutics Committee, and will share information at the site CQI meetings. Site-specific policies and procedures will address all aspects of Pharmacy operation and will ensure compliance with all State and Federal Laws and regulations for prescription, dispensing and administration of medications. Documented procedures include medication receipt, distribution, storage, dispensing, administration and disposal. The current operating license will be conspicuously displayed at all times. Medication will be ordered only by a Provider licensed within the state of Georgia to do so. Patient-specific Medication Administration Records will be used to document each medication a patient receives and will be filed in the patient's medical record on a monthly basis. A current Pharmacy Manual will be maintained to assist in overall pharmaceutical operations.



All controlled substances, syringes, needles and surgical instruments will be stored securely, and counts will be conducted at every change of shift to verify balances. If, after staff has made diligent efforts to reconcile the count, it is incorrect, the Health Services Administrator and the Facility Administration will be notified and their directives will be followed

CorrectHealth has a comprehensive list of preferred medications (Formulary), which is available upon request. Non-Formulary medications (those not listed nor preferred) may be prescribed from time to time for patient care. The Executive Medical Director must approve these drugs in advance, and this is done through our Utilization Management process that allow for an immediate approval to be communicated. Limited stock medications will be maintained at the facility for use in an urgent situation. These include medications for pain and for the treatment of infection, and medications commonly prescribed for such chronic medical conditions as asthma, diabetes, hypertension, epilepsy and HIV infection. The Medical Director or Medical Provider will review the medications of all detainees admitted to the facility. Using evidence based clinical guidelines, he/she will determine the best therapeutic course of treatment for the detainee and appropriate medication will be ordered. Non-formulary medications may be the drug of choice in some cases, and, if so, they will be ordered expeditiously so that there is no lapse in medication regimen.

II. PERSONNEL/STAFFING

At CorrectHealth, we believe the consistent delivery of high quality, cost-effective, comprehensive healthcare starts with our greatest asset – our people. We pride ourselves on effectively recruiting, retaining, and training quality healthcare professionals through a robust staffing and recruitment process that is carefully tailored to meet the needs of our client.

As outlined in the Staffing Matrix below, CorrectHealth is pleased to present the staffing below for consideration by the Muscogee County Prison.

STAFFING MATRIX	Specified Staffing	
	FTE	Hrs / Week
Medical Providers		
Medical Director	0.2	8
Nurse Practitioner / Physician Assistant	0.2	8
Oversite Operations		
Health Services Administrator (RN)	1.00	40
Administrative Assistant	1.00	40
Clinic		
LPN's	5.0	200
Optical		
Optometrist	0.1	4
Dental Providers		
Dentist	0.1	4
X-Ray Services		
X-Ray Technician	0.025	1
TOTALS	7.625	305

Health Services Administrator (HSA) – The Health Services Administrator will be a licensed healthcare professional (RN) who has responsibility for all healthcare operations at the Prison and will be the on-site CorrectHealth liaison with the Prison's Administration. The HSA will work closely with the Medical Director to ensure that high quality, cost-effective care is rendered to all patients at the Prison. This Registered Nurse will work full-time (40 hours per week). The RN will be responsible for the management of the Chronic Care Program, the completion of Initial and Annual Health Assessments, Nursing Sick Call, and in general, oversight of the medical staff while on duty.

Medical Director – The Medical Director will conduct Provider Sick Call, Chronic Care Clinic, and complete Health Assessments (if necessary) and will be responsible for all clinical administrative duties, such as the monthly medical record review, attending meetings and reviewing off-site referrals. They will be available to the medical and mental health staff. The Medical Director or



designee (nocturnists) will be on-call for the staff twenty-four (24) hours per day, seven (7) days per week.

Mid-Level Provider – CorrectHealth will provide a Mid-level Provider at the Muscogee County Prison to augment the services provided by the Medical Director and other Physician(s). The Mid-level Provider will be a Nurse Practitioner or Physician's Assistant licensed in the state of Georgia. He/she may be responsible for Physical Assessments, Clinics, Sick Call, Special Housing rounds, emergency care and other clinical duties within their scope of practice.

Dentist – Dental services will be provided on-site at the Prison on a weekly basis by a Dentist licensed in the state of Georgia. Dental clinic will be held according to the schedule agreed to between the Prison and CorrectHealth.

Licensed Practical Nurse – The Licensed Practical Nurse may be responsible for screening detainees in the Intake area, administering medications to the detainees during medication pass, managing medication procurement, assisting the Physician or Mid-Level Provider, responding to emergencies within the Prison and assisting in the clinic. They will cover both medical and mental health departments as needed. They may coordinate some clinical activities, as well as provide limited sick call.

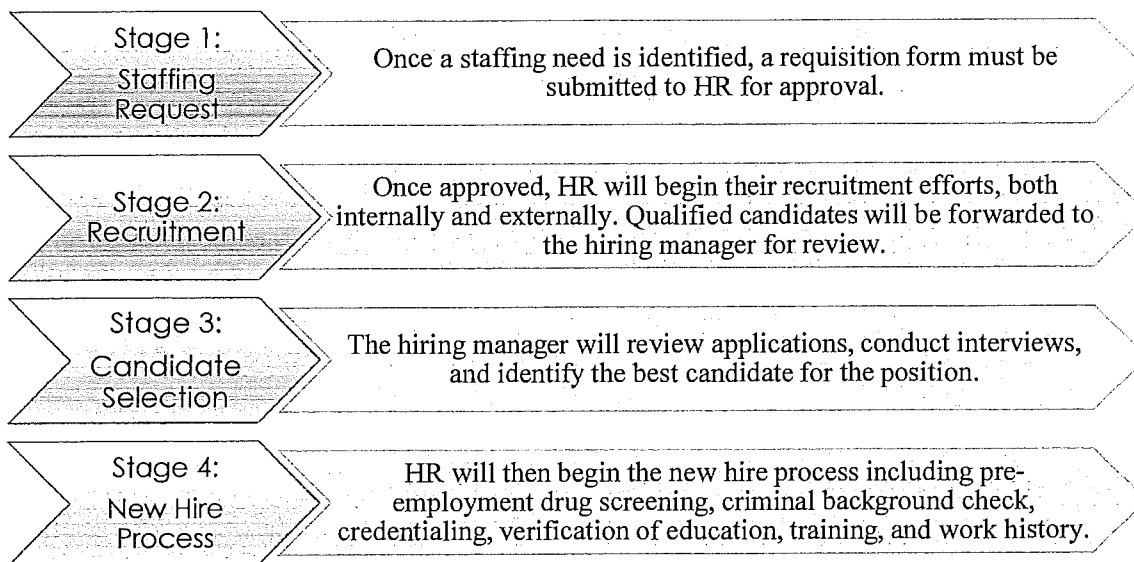
Administrative Assistant/Medical Records/Clerical staff – These individuals will work within the department to support the healthcare services being provided on-site and off-site. Scheduling appointments, maintaining databases and patient information, maintaining intact and accurate health records, and managing supplies are just a few of the duties that will be completed by these staff members.

The CorrectHealth team currently includes over 400 employees providing inmate healthcare services and, at this time there are fewer than 35 full time and part time positions open company-wide. We use agency staff sparingly in any our facilities. Additionally, we maintain a large PRN staff pool that augments our regularly scheduled staff. While our ability to recruit skilled staff is very important, CorrectHealth management believes that a vital component our client relationship is our ability to retain staff to provide continuity within the contract. To that end, CorrectHealth has instituted an Employee Recognition Program, Excellence in Action and provides numerous employee educational opportunities, including internal in-services, special education programs, BLS and ACLS. We are currently developing an on-line Correctional Health education program so staff may obtain continuing education at times most convenient for them. CorrectHealth uses licensed, professional healthcare providers, including physicians, mid-level providers, registered nurses, and licensed practical nurses. In addition, we use Medical Assistants and EMTs to augment our staff.

Healthcare is a service! Talent is crucial!

Recruitment Practices. Our Human Resources (HR) Team is committed to attracting and retaining superior employees that are not only passionate about what they do, but fervently committed to providing high quality healthcare inside the walls of correctional Prison.

The following figure outlines the CorrectHealth recruiting process:



The Muscogee County Prison will be provided with an approved staffing matrix that assures a sufficient number of healthcare personnel are available to provide assessment and treatment consistent with contemporary standards of patient care. When a vacancy occurs or a staffing need is identified, our site managers initiate the recruitment process by submitting a Personnel Action Requisition to HR for approval. This approval process ensures the facility is adequately staffed while also maintaining labor costs.

CorrectHealth also maintains labor costs through the use of PRN employees. Each facility is provided with a pool of PRN team members to utilize whenever a staffing need is identified.

- Networking (best source of talent!)
- Internal Recruitment & Advancement – Our team's initial step in their recruitment efforts focus on attracting highly-qualified CorrectHealth employees to fill the position. All available openings are posted internally for a period of seven days to allow internal candidates the opportunity to express their interests before announcements are posted in the public domain. When requesting to transfer to another facility, team members must be in good standing with at least six months of continuous employment to be eligible for consideration.

- Internet Recruitment – We utilize a variety of online recruitment avenues such as Monster.com, Indeed.com, Social Media Networking, LinkedIn.com, Department of Labor Career Websites, Resume Sourcing, and Targeted Job Boards.
- Direct Mail Campaign – Our direct mail recruitment efforts allow us to effectively target potential candidates within a specific area through the use of print advertising (i.e. postcards, flyers). This has proved to be our most effective recruitment method to attract and retain top nursing professionals in rural areas.
- Employee Referrals
- College & University Recruitment
- External Career Fairs
- Local & Regional Newspapers

CorrectHealth has developed a clear New Hire Process which we believe is vital to ensuring a smooth transition for our new hires. Once the candidate has been approved by our client and received security clearance at the facility, HR will proceed with the pre-employment drug screen, criminal background check, and primary source verification of licensure, education and work history. In order to expedite this piece, CorrectHealth's pre-employment drug screening, background checks, and education verification are quickly expedited through the use of our vendor, Quest Diagnostics. From their online solutions to their national network of drug screening locations, our partnership with Quest has created an end-to-end solution that is seamlessly integrated with our New Hire Process.

Credentialing. CorrectHealth is responsible for verifying the credentials of each healthcare staff member hired or contracted to provide services for our clients. All personnel who provide services to inmates are appropriately credentialed according to licensure, certification, and registration requirements of the state or jurisdiction of practice. In addition to the pre-employment screenings outlined above, our providers (employee or independent contractor) must also complete an in-depth credentialing application that is used to further investigate the provider's background to determine their employment eligibility with CorrectHealth. Through the use of the National Practitioner Data Bank (NPDB), an alert system created by Congress to improve health care quality, we are able to quickly obtain a comprehensive review of the provider's professional credentials to be used in conjunction with our collection of primary source data, verification of education, training, and work history, and a ten year claims history verification with all current and prior malpractice insurance carriers. Once all necessary documentation and verification has been received, the completed credentialing profile is then reviewed by CorrectHealth's Chief Legal Officer for final determination of the provider's employment eligibility.

On-Boarding. In addition to the New Hire Process, CorrectHealth also offers a smooth On-Boarding Process to ensure our new employees are prepared to succeed as part of our team. This seamless process is our most successful strategy for maintaining our excellent retention rate while creating dedicated, well-trained employees.

All CorrectHealth employees are required to participate in a two-part orientation which consists of a general and facility orientation. During general orientation, our employees receive in-depth training on important topics such as HR policies and procedures as well as clinical topics such as nurse and provider sick call, inmate fraternization and contraband, physical assessment, intake receiving and screening, and much more. This training provides our employees with the foundation they need to begin their facility orientation.

Facility orientation consists of topics and skills relevant to the new staff member's work facility. Facility orientation is split into two parts, a general Day 1 Orientation and a Comprehensive 30 Day Orientation. Day 1 Orientation consists of relevant topics that introduce the new hire to the facility and the operations of the clinical areas. Once a new hire has been oriented to the facility, they will complete a Comprehensive 30 Day Orientation. This lengthy orientation is an in-depth precepted orientation that prepares our new hires to continuously deliver high quality, cost-effective, comprehensive healthcare inside the walls of correctional Prison. We strive to continue our On-Boarding Process not only through their initial orientation period but into the next few months of their employment to ensure we are employing satisfied, well-developed employees.

All employees and professional independent contractors for CorrectHealth will be required to pass a background investigation by Muscogee County prior to, or for continued, employment. CorrectHealth and its staff will comply with current and future State, Federal and local laws, regulations, court orders administrative regulations, administrative directives, and policies and procedures of Muscogee County Prison and professional standards.

Staff Training and Personnel Development. Each CorrectHealth staff member is governed by the licensing requirement for his/her specialty to obtain the required annual training. Additionally, CorrectHealth will maintain personnel files in the health care unit available for inspection by the Warden and County Leaders, upon request. CorrectHealth conducts monthly meetings for our managers that include leadership training, guest speakers, and lecturers on pertinent topics for the provision of healthcare in the correctional environment.

A Written Job Description and Employee Handbook. CorrectHealth staff members will receive a written job description which delineates their duties. The Health Services Administrator or Director of Nursing will ensure that they understand their role and responsibilities as part of the healthcare team at the Prison.

Each new employee is assigned to a preceptor who provides clinical oversight during the first 90 days of employment. The culmination of this orientation is the completion of a skills checklist that includes verification of applicable policy and procedure understanding. Throughout the orientation process Supervisors monitor the new employee's progress to ensure comprehension.

We have developed "Prison School" for our correctional healthcare staff that has been shared regionally and nationally at conferences for correctional healthcare professionals. This class is held on the first day of Orientation and addresses issues specific to corrections, such as inmate



fraternization and communicating with inmates effectively. CorrectHealth staff at Prison will receive further instruction regarding facility operations by Facility staff.

Employee Assistance Program. CorrectHealth offers employee assistance through United Health Care. This service is offered 24/7.

Continuing Education. CorrectHealth supports its staff in continuing education through professional correctional conference participation annually. CorrectHealth staff participates locally and nationally with correctional healthcare professional organizations.

Annually staff are required to complete a Skills Checklist which documents their ongoing proficiency with correctional healthcare competencies. All full-time and part-time staff at the Prison will receive a minimum of 12 hours of continuing education, including all mandatory NCCHC topics.

In-service training. CorrectHealth staff receive monthly education on issues of importance to the provision of healthcare services specific to the correctional environment. A web-based education program has been developed to facilitate staff access to educational programs. CorrectHealth staff participates locally and nationally with correctional healthcare professional organizations.

Performance Reviews. All staff are evaluated based upon their job description on an annual basis or more frequently if necessary. Any performance issues are addressed promptly by CorrectHealth site management staff, and may include education and retraining. When it is determined that an employee is not fulfilling the performance expectations for responsibilities of the position to which they are assigned, appropriate corrective action will be taken. Any performance or behavior deemed inappropriate by management that violates the policies of CorrectHealth is grounds for corrective action ranging from a verbal warning up to immediate discharge as dictated by the severity of the infraction.

Equal Employment Opportunities. It is the policy of CorrectHealth to provide equal employment opportunities to all qualified employees and applicants for employment, without regard to race, color, religion, sex, sexual orientation, age, national origin, unfavorable military discharge or disability pursuant to the guidelines of the EEOC. It is CorrectHealth's policy to base our employment and promotional decisions on job-related standards of past performance, experience, education, evaluations, training, achievements, skills, interpersonal strengths and abilities, disciplinary history and references.

Drug Free Workplace. Since 2008, CorrectHealth has been a certified Drug-free Workplace in the State of Georgia. We have a **Zero Tolerance Policy**. In addition to monthly education, pre-employment testing, post-accident testing and random drug testing is conducted on a quarterly basis by our lab vendor, Quest Diagnostics.



CorrectHealth Job Descriptions.



Job Description

Medical Director

Employee Name: _____ Date: _____

Job Title: _____ Certification: MD/DO

Reports to: _____ Job Code: DRMD

Job Summary

Provides and supervises medical care to inmates. Evaluates and treats conditions of a medical nature that relate to general medicine and healthcare needs of patients. Interacts with a variety of healthcare professional and security staff in a correctional environment. Responsible for the medical and clinical management of all cases assigned. Works with other physicians. May be requested to supervise Physician Assistant / Nurse Practitioners and other medical support staff. Interacts and works effectively with patients / inmates, medical and nursing staff, security staff at all levels, administrative and support staff, and supervising staff.

Education Requirements and Qualifications

1. Licensed to practice as a Medical or Osteopathic Physician in the State of Practice.
 - a. Graduate from an accredited school of medicine
 - b. Demonstrates the knowledge and ability to apply all principles of comprehensive healthcare (medical, nursing and allied healthcare principles).
2. Maintains current certification, at a minimum
 - a. CPR
 - b. ACLS or
 - c. A higher level of Certification

Physical Requirements

Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach over head.

Position Accountabilities

Clinical Responsibilities

1.	Responsibility for the clinical elements of the entire health care system, including professional duties.
2.	Provides services to Inmates and consultation to professional staff.
3.	Evaluates medical program and medical services provided.
4.	Monitors patient care, condition, and adequacy of treatment facility, and need for and condition of necessary medical equipment.
5.	Evaluates conditions of non-medical nature that relate to general medical and health needs of Inmates.
6.	Establish liaison with community resources, i.e., Health Department, Fire and Rescue, and local hospital.
Departmental Responsibilities	
1.	Assumes responsibility for clinical program as stated by NCCHC.
2.	Consults with medical specialists to provide advice and expertise in their respective areas.
3.	Provides professional consultation for all employees and contracted workers within the medical system.
4.	Provides medical services to Inmates during scheduled clinics.
5.	Supervises the Quality Assurance program, including patient complaints, sanitation, infection control and development of appropriate criteria.
6.	Reviews policies, procedures, protocols and fire and disaster plan.
7.	Ensures a continuing in-service education program.
8.	Supervises and responsible for the medical activities of Mid Level Providers (PAs and FNPs)
9.	Serves as a liaison between security, the community and the health care system: • Visibility with the Sheriff's Dept. • Active and regular meeting with the Sheriff and appointees
10.	Assists in developing, reviewing and evaluating the training program for jail staff – the training will include, but not limited to: • Basic First Aid • CPR • Recognition of signs and symptoms of common illnesses
11.	Approves all medical records forms.
12.	Directs the ongoing medical program in the jail as defined in the Standards for the Accreditation of Medical Care and Health Services in Jails.
13.	Assists the jail in developing and implementing policies that assure high quality medical and nursing care. Assists in preparation of certain policies and procedures concerning the following: • Emergency treatment of Inmates • Prescription medication • Special Diets
14.	Responsible for tracking the management of patients transferred to Hospital for treatment.
15.	Provides tracking and accounting for all inmate medical expenses that occur away from the Jail.

Mission

It is the mission of CorrectHealth to provide high quality, cost-effective, comprehensive healthcare inside the walls of correctional facilities.



Acknowledgement of Receipt and Understanding

I have reviewed the job description of Medical Director and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth, reserves the right to revise or change job duties and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.



Job Description

Health Services Administrator (HSA) Health Services Coordinator (HSC)

Employee Name: _____ Date: _____

Job Title: _____ Certification: _____

Reports to: Executive Director of Clinical Services Job Code: _____

Job Summary

This is a managerial position responsible for the efficient and effective administration of all aspects of the health care services 24hrs daily, 7days a week. This position is responsible for the clinical, financial, administrative, information technology and human resources systems.

The HSA/HSC promotes the highest quality of patient care through application of fair and equitable policies and procedures in collaboration with other health services team members and correctional staff. Duties are operationally directed with an emphasis on appropriate resource utilization and performance standards as established by NCCHC, ACA and other accrediting agencies. Display's personal attributes including leadership, team building, ethics, integrity and professionalism.

Education Requirements

1. BS degree in Nursing or health management related field or years of related work experience equivalent to a BS degree.
2. Holds and maintains if applicable current professional license to practice in the state of employment.
3. Maintains current American Heart Association BLS.
4. 3-5 yrs administrative/supervisory experience preferred.
5. Strong analytical and decision-making skills.
6. Experience in short term and long term planning, budgeting and contracting.

7. Strong interpersonal skills.
8. Strong computer skills including office software and internet.

Physical Requirements

Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach overhead.

Position Accountabilities

HSA/HSC
1. Supports philosophy, objective and goals of the medical department.
2. Adheres to policy and procedures
3. Functions as a role model and provides instructions and support to the health care team.
4. Assumes individual accountability for own conduct.
5. Maintains professional appearance as directed by the CH Employee Handbook.
6. Demonstrates good customer services and telephone etiquette.
7. Ensures client satisfaction by acting as liaison between jail administration, ancillary services, CorrectHealth and staff.
8. Approaches change in a positive manner.
9. Accepts and learns from constructive criticism.
10. Utilizes time effectively.
11. Accounts for time away from work area.
12. Demonstrates appropriate communication skills by sharing, clarifying, reflecting, and interpreting.
13. Available to provide shift coverage when needed as applicable.
14. Demonstrates the organizational skills required to multi task.
15. Demonstrates calm behavior in times of stress, conflict or tense situations.
16. Maintains professionalism at all times while representing CH.
17. Functions as a team player and assist co-workers as needed.
18. Conducts and coordinates staff meeting in-services, for medical, correctional staff, and inmates as required.
19. Contributes to the corporate initiatives through active participation in monthly management meetings.
20. Attends programs to meet identified needs through in-services, and other formal and informal means.
21. Completes annual in-service hours as required by NCCHC and CH standards to include Infection Control, Safety, OSHA, etc.
22. Participates in cross-training within the department and company within their scope of practice.
23. Adheres to established corporate and facility policies and procedures.
24. Identifies existing and potential personnel and client problems and takes appropriate action.
25. Uses good judgment in meeting the responsibilities and performing the duties of the position.

HSA/HSC	
26.	Recognizes potential safety problems and intervenes to correct with preventative measures.
27.	Reports to corporate all incidents/accidents and documents sentinel events at the time of the occurrence.
28.	Reports to the VP of Clinical Services about matters that affect the organization's ability to function and fulfill its contractual and legal obligations.
29.	Prepares external and internal reports and submits in a timely manner.
30.	Serves as a resource and advisor to healthcare staff on matters pertaining to corporate management and organizational philosophy.
31.	Serves as an advisor and resource to facility administration.
32.	Develops and maintain relationship with community based organizations.
33.	Ensures company records are updated and maintained according to policy and procedures.
34.	Ensures staff has the equipment and supplies to perform day to day operations.
35.	Serves as an advisor and resource to corporate administration.
36.	Assist in the development, preparation and maintenance of the annual budget.
37.	Maintains confidentiality of medical records and patient information.
38.	Participates in Human Resource planning and recruitment.
39.	Operates within budget guidelines, justifies variances
40.	Ensures staff performance evaluations are completed timely.
41.	Utilizes the company's performance evaluation process to positively impact the employee's development.
42.	Utilizes the company's progressive disciplinary process to positively impact the employee's development.
43.	Oversee the management of the occupational health and safety programs, ensuring all exposures/injuries are appropriately reported and established CH Policies and procedures are followed.
44.	Maintains up to date personnel files in a secure and confidential manner.
45.	Ensures bi-directional flow of information in a timely manner to Human Resources.
46.	Acts as a liaison with Health Service Providers and ancillary services to ensure a collaborative approach to the delivery of healthcare services.
47.	Monitors and reports the conditions of the medical areas for safety, state of repair and other required services.
48.	Maintains cleanliness and restocks work area
49.	Identifies operational problems and develops systems and procedures to achieve efficient health care operations.
50.	Initiates or reviews the purchase of supplies including pharmaceutical and equipment, within approved budget.
51.	Establishes update, and ensures compliance of site specific policies and procedures.
52.	Oversees medical records management while maintaining confidentiality.
53.	Assures necessary staffing levels to meet the contractual agreement.
54.	Develops, administers and maintains immunization programs for healthcare staff and/or security.
55.	Oversees ongoing accreditation activities.



HSA/HSC	
56.	Meets with Facility Administration and represents the interest of the Medical department and CH.
57.	Monitors inpatient hospitalization and outpatient services. Coordinates with Medical Director and Midlevel Providers to case manage.
58.	Audits ancillary service billing for accuracy.
59.	Audits and ensures staff compliance with CH pharmacy manual, and policy and procedures.
60.	Reviews and critiques man down drills/events with staff.
61.	Conducts and/or critique mass disaster drill or actual events according with NCCHC standards.
62.	Ensures inmate grievances are responded to within the allotted facility time and maintains grievance logs.
63.	Participates in the orientation and training for all new employees.
64.	Documents, monitors and reports all sentinel events to VP of Clinical Services, CQI Director and General Counsel.
65.	Actively involved in complex case management. Proactive with interventions.
66.	Participates in Continuous Quality Improvement (CQI).
67.	Able to perform all duties of the RN.
68.	Able to perform all duties of the LPN.
69.	Completes any other tasks as assigned by corporate.

Mission

It is the mission of CorrectHealth to provide high quality, cost-effective, comprehensive healthcare inside the walls of correctional facilities.

Acknowledgement of Receipt and Understanding

I have reviewed the job description of HSA / HSC and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth, reserves the right to revise or change job duties and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.

Employee Signature

Date



Job Description

MID LEVEL PROVIDER



Employee Name: _____ Date: _____

Title: _____ Certification: _____

Reports to: _____ Job Code: _____

Education Requirement:

3. Graduate from an accredited Master's level program
 - a. As a Family Nurse Practitioner, Adult Nurse Practitioner, Physician's Assistant or current authorization to practice in same capacity as provided through previous military training.
 - b. Maintains a valid and unrestricted license to practice as a Family Nurse Practitioner, Adult Nurse Practitioner, Physician's Assistant or current authorization to practice in same capacity as provided through previous military training in the State of work.
 - c. Complies with all legal and ethical requirements set forth by Federal, State, County, or Corporate Agencies
2. Ongoing Education
 - a. Maintains current certification for BCLS, CPR and ACLS.
 - b. Maintains a minimum of 15 hours of continuing education annually.

Physical Requirements: Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach over head.

Position Accountabilities

1. Provide sick call to male and female Inmates.
2. Provide History & Physicals to male and female Inmates as needed.
3. Consult Certified Nurse Midwife on OB cases.
4. Provide Infirmary Rounds Monday through Friday and PRN on weekends.
5. Provide Chart Reviews daily.
6. Coordinate PPD/ CXR results with ID RN.
7. Coordinate RPR results with ID RN.
8. Research PMH for appropriate care for CCC and all other clinics.
9. Respond to episodic emergencies during the day.
10. Review all lab and x-ray data initially and act upon concerning lab values or X-ray findings.
11. Review all sick call requests, triaging minor ones out.
12. Respond to observations made by medications nurses.
13. Provide patient education.
14. Give phone orders based on nursing assessment.
15. Co-sign verbal orders.

16. Review CCC cases with Chronic Care Dr. for appropriateness of midlevel care.
17. Case review on daily and as needed basis with medical director or other physicians as needed.
18. Provide pertinent information for Nursing Administration and Clinical Manager.
19. Discuss all patient transfers with physician.
20. Contact families regarding medication needs.
21. Coordinate care with private physicians as appropriate.
22. Provide on-call relief for Medical Director as needed.
23. Respond to on-site conditions that can be handled without utilizing outside resources.
24. Meet patients in the ED to provide care when needed.
25. Telephone triage with nursing staff after hours and as needed.
26. Provide Hospital Rounds at local hospital or phone contact with other hospitals.
27. Coordinate specialist's follow-up appointments with the Clinical Manager.
28. Respond to episodic emergencies during the day.
29. Maintain and oversee narcotic box (drug counts, pharmacist interaction)
30. Coordinate emergency department care on patients' transported to local hospital as needed.
31. Review provider and nursing progress notes on infirmary patients.
32. Discuss care plans with nursing staff.
33. Communicate pertinent information to other health care providers as needed (psychologist, psychiatrist, medical direct, consulting providers)
34. Review H&P assessment forms completed by nursing staff.
35. Position oneself as liaison with family in specific situations.
36. Provide pertinent information for correctional officers under specific circumstances.
37. Assist law enforcement officials by providing the collection of forensic evidence when requested.
38. Participates on Policy & Procedure Committee, others as needed
39. Provide care for correctional staff as needed.
40. Participate in development of protocols and nursing care plans.
41. Compose correspondence drafts regarding Inmate's medical conditions for review by the Medical Director.
42. Review medical records received from other facilities.
43. Coordinate holistic care utilizing Chaplain's Services, AA, NA, etc.
44. Discuss diet issues with kitchen staff/ director as needed.
45. Monitor progress of wound management.
46. Monitor daily BS and BP boards
47. Research and resolve any medication conflicts or issues.
48. Coordinate/ initiate discharge planning as appropriate
49. Adheres to established formulary unless otherwise approved by physician.

Mission

It is the mission of CorrectHealth to provide high quality, cost-effective, comprehensive healthcare inside the walls of correctional facilities.



Acknowledgement of Receipt and Understanding

I have reviewed the job description of MLP and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth, reserves the right to revise or change job duties and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.

Employee Signature

Date



Job Description

Dentist

Employee Name: _____ Date: _____

Job Title: _____ Certification: Dentist

Reports to: _____ Job Code: DDS

Job Summary

Provides direction for all facets of dental care provided within the Correctional Facility(ies) set forth in Appendix B. As Dentist, he/she supervises dental care provided by all staff, evaluates patient care required or administered, condition and adequacy of treatment facilities, and need for and condition of necessary dental equipment and supplies.

Education Requirement and Qualifications

1. Licensed to practice as a Dentist in the State of employment
 - a. Graduate from an accredited school of Dentistry
 - b. Demonstrates the knowledge and ability to apply all principles of dental care in a correctional environment.
2. Maintains current certification, at a minimum
 - a. CPR

Physical Requirements

Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach overhead.



Position Accountabilities

Clinical Responsibilities	
1.	Responsibility for the clinical elements of the entire dental care system, including professional duties.
2.	Provides dental services to Inmates during scheduled clinics.
3.	Evaluates dental program and dental services provided.
4.	Monitors patient dental care, condition, and adequacy of treatment facility, and need for and condition of necessary dental equipment.
5.	Supervises and responsible for the dental services activities of Staff members.
Departmental Responsibilities	
1.	Directs and assumes responsibility for the overall Dental Program in the Facility, as defined in the Standards for the Accreditation of Medical Care and Health Services in Jails.
2.	Consults with off-site dental specialists to provide advice and expertise in their respective areas.
3.	Supervises the Quality Assurance program, as it relates to Dental Services, including patient complaints, sanitation, infection control and development of appropriate criteria.
4.	Reviews policies, procedures, and protocols, as they relate to Dental Services.
5.	Participates in a continuing in-service education program, as it relates to Dental Services, for on-site Staff.
6.	Approves all Dental Services' forms.
7.	Provides tracking and accounting for all inmate dental expenses that occur away from the Jail.
8.	Participates in Company's Peer Review, Quality Assurance and CQI Programs, as requested by Company.

Mission

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Acknowledgement of Receipt and Understanding

I have reviewed the job description of Dentist and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth, reserves the right to revise or change job duties and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.

Employee Signature

Date



Job Description

Licensed Practical Nurse



Employee Name: _____ Date: _____
Job Title: _____ Certification: Licensed Practical Nurse
Reports to: _____ Job Code: _____

Job Summary

Participates in the clinical aspect of the patient care with all members of the healthcare team and law enforcement. Performs duties under the supervision of the RN, HSA, Mid Level Provider, Physician, or the administrative supervision of the HSC. Possesses knowledge and ability to provide care to the Inmate population as well as respond to needs within the correctional environment. Maintains standard and ethics of nursing in accordance with applicable State Board of Nursing and other accrediting agencies.

Education Requirements

Licensed Practical Nurse

1. Graduate from a national or state approved school of nursing.
2. Holds and maintains a current license to practice as a LPN/LVN in the state of employment.
3. American Heart Association BLS

Physical Requirements

Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach over head.

Position Accountabilities

LPN
70. Supports philosophy, objective and goals of CH and its facilities.
71. Accepts and performs staffing assignments and other related duties as required or assigned.
72. Demonstrates adherence to policy and procedures, including but not limited to CH and the facility.
73. Functions as a role model by providing instructions and clinical support to the health care team and correctional staff.
74. Delegates assignments and tasks appropriately.
75. Demonstrates good customer service skills and telephone etiquette.
76. Assumes individual accountability for own conduct.
77. Maintains professional appearance as directed by the CH Employee Handbook.
78. Approaches change in a positive manner.
79. Motivates staff to work as a team.
80. Accepts and responds to constructive criticism in a positive manner.
81. Maintains productivity and utilizes time effectively by being prepared to start promptly and end shift timely.
82. Accounts for time away from work area.

LPN	
83.	Demonstrates appropriate communication skills by sharing, clarifying, reflecting, and interpreting.
84.	Available to provide shift coverage when needed.
85.	Demonstrates the organizational skills required to multi task.
86.	Demonstrates calm behavior in times of stress, conflict or tense situations.
87.	Demonstrates respect for the work environment including resources, people, processes and property.
88.	Maintains professionalism at all times while representing CH.
89.	Functions as a team player and assists co-workers as needed.
90.	Attends and participates in monthly staff meetings.
91.	Assists in the presentation of in-services, training and education of medical and correctional staff, as requested.
92.	Actively participates in the accreditation process.
93.	Attends programs to meet identified needs through in-services, and other formal and informal means.
94.	Completes annual in-service hours as required by NCCHC, CH standards, and other regulatory agencies to include Infection Control, Safety, OSHA, and other areas as defined by CH.
95.	Identifies existing and potential problems and takes effective action.
96.	Identifies needed improvement in patient care, procedures, equipment, supplies and makes recommendations to supervisor.
97.	Reports to supervisor and documents all incidents/accidents, sentinel events at the time of the occurrence.
98.	Demonstrates working knowledge of security procedures and practices as they pertain to healthcare delivery.
99.	Participates in cross-training within the department.
100.	Provides leadership in the coordination of multidisciplinary health care for integrated delivery of patient care services.
101.	Maintain confidentiality of medical records and patient information.
102.	Recognition of signs and symptoms and knowledge of action required in a potential emergency; responds appropriately to emergencies.
103.	Recognition of signs and symptoms of acute and chronic illness. Reports problems to supervisor and/or Provider.
104.	Implements procedures for any outside transfer of patient.
105.	Participates and documents in discharge planning.
106.	Accurately collects data pertinent to health history of patient.
107.	Performs Nurse Sick Call and implements Nursing Protocols. Refers complex medical problems to the appropriate clinician.
108.	Assists with Provider Sick Call and procedures.
109.	Performs rounds and duties of infirmary or medical observation beds.
110.	Demonstrates the ability to perform daily assigned tasks and reports to the next shift.
111.	Performs and documents basic nursing procedures, including but not limited to, phlebotomy, IV's, EKG's, PPD's, FSBS and other nursing treatments.

LPN
112. Maintains sharps accountability. Destroys and properly disposes all sharps. Attempts to resolve discrepancies and reports unresolved discrepancies to supervisor.
113. Documents in SOAPE (subjective, objective, analysis, plan, education) format completely, accurately and timely.
114. Documents all other pertinent information in narrative form.
115. Participates with co-workers to initiates, copy, and maintain MAR's, chart checks, and order transcription.
116. Maintains cleanliness and restocks work area.
117. Prepares for pill call and distribute medications using the five rights of medication distribution.
118. Inventories and reorders medications.
119. Documents on the MAR the administration or refusal of medications.
120. Counts narcotics and verifies the correct amounts, attempts to resolve discrepancies. Reports unresolved discrepancies to supervisor.
121. Performs and documents Isolation Segregation rounds.
122. Performs and documents lockdown clearance.
123. Performs and documents Inmate worker screening.
124. Pulls and files medical records and loose paper work.
125. Initiates and completes involuntary commitment paperwork (1013) for mental health placement.
126. Provides and documents patient counseling of medication non compliance and refers to appropriate Provider.
127. Appropriately prepares and maintains logs and assist the HSA/HSC with collection of monthly data.
128. Participates in Continuous Quality Improvement (CQI).
129. Completes additional tasks assigned by the RN, HSA or administrative tasks assigned by the.

Mission

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Acknowledgement of Receipt and Understanding

I have reviewed the job description of **LPN** and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth, reserves the right to revise or change job duties and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.

Employee Signature

Date



Job Description

Administrative Assistant

Employee Name: _____ Date: _____

Job Title: _____

Reports to: _____ **Job Code: 5002**

Job Summary

The Administrative Assistant (AA) is responsible for administrative functions related to the support and management of the Medical department at a correctional facility or the Corporate Office. AA is responsible for maintaining processes in accordance to corporate policy and procedures. The AA is under the immediate supervision of the HSA / HSC, Corporate Sr. Management or designee. Must maintain a professional attitude at all times.

Education Requirements

1. High School Diploma or GED preferred. A technical degree or certification in office management systems is preferred.
2. Must have good written and verbal communication skills and reading comprehension.
3. Strong typing and computer skills including office software and internet.
4. One or more years of administrative experience preferred.
5. American Heart Association BLS required if performing duties at a correctional facility.

Physical Requirements

Able to lift, bend, stand, stoop, walk, go up and down stairs, run, push, pull, and reach overhead.

Position Accountabilities

Administrative Assistant
130. Supports philosophy, objective and goals of CH and its facilities.
131. Accepts and performs staffing assignments and other related duties as required or assigned.

Administrative Assistant
132. Demonstrates adherence to policy and procedures, including but not limited to CH, and the facility.
133. Functions as a role model by providing instructions and clinical support to the health care team and correctional staff or corporate staff.
134. Completes assignments and tasks appropriately.
135. Demonstrates good customer services and telephone etiquette.
136. Assumes individual accountability for own conduct.
137. Maintains professional appearance as directed by the CH Employee Handbook.
138. Approaches change in a positive manner.
139. Motivates staff to work as a team.
140. Accepts and learns from constructive criticism in a positive manner.
141. Maintains productivity and utilizes time effectively by being prepared to start promptly and end shift timely.
142. Accounts for time away from work area.
143. Demonstrates appropriate communication skills by sharing, clarifying, reflecting, and interpreting.
144. Available to provide shift coverage when needed.
145. Demonstrates the organizational skills required to multi task.
146. Demonstrates calm behavior in times of stress, conflict or tense situations.
147. Demonstrates respect for the work environment including resources, people, processes and property.
148. Maintains professionalism at all times while representing CH.
149. Functions as a team player and assist co-workers as needed.
150. Attends and participates in monthly or weekly staff meetings.
151. Assist in the presentation of in-services, training and education of medical and correctional staff or corporate staff, as requested.
152. Actively participates in the accreditation process.
153. Attends programs to meet identified needs through in-services, and other formal and informal means.
154. Completes annual in-service hours as required by NCCHC, CH standards, and other regulatory agencies to include Infection Control, Safety, OSHA, and other areas as defined by CH.
155. Reports to CH management all incidents/accidents and documents events at the time of the occurrence.
156. Maintain confidentiality of health information and personnel files.
157. Maintains cleanliness and restocks work area.
158. Distributes daily census and other reports to appropriate offices.
159. Develop inventory checklist and monitor par levels weekly for office supplies.
160. Order and monitor receipt of supplies, keeping copies of inventory checklist orders and delivery slips of supplies.
161. Maintains and monitors use of office equipment.
162. Develop an interdepartmental mail system.

Administrative Assistant
163. Assist with all departmental meetings including posting, maintaining minutes, and notebooks.
164. Develop a communication book that will contain any memos and pertinent staff information.
165. Assists with preparation of Payroll information, including the processing of all leave requests.
166. Ensures completed new hire paperwork is submitted to corporate HR on Day 1 of employment.
167. Maintains complete staff files including all current licensure and certification for all employees.
168. Compile end-of-the-month reports for HSA/HSC or Corporate Sr. Management and distributes as directed.
169. Keeps current Provider on-call, medical staff contact list and active staffing schedules for all departments.
170. Purge all terminated employee files and forward to corporate HR.
171. Manages all employee changes as directed by Supervisor, HSA/HSC or Corporate Sr. Management.
172. Verification for approval of invoices for payment by CH finance department.
173. Identify unusual usage of supplies, company equipment and discuss with Supervisor, HSA/HSC or Corporate Sr. Management.
174. Schedules internal/external patient appointments.
175. Develop system to manage, track and monitor off-site referrals and appointments.
176. Verify the appointment with the outside provider and confirm all transportation arrangements advance.
177. Pulls and files medical records and loose paper work.
178. Initiates and completes involuntary commitment paperwork (1013) for mental health placement.
179. Participates in Continuous Quality Improvement (CQI).
180. Completes any other tasks as assigned by HSA/HSC or Supervisor.

Mission

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Acknowledgement of Receipt and Understanding

I have reviewed the job description of **Admin Asst** and have been afforded the opportunity to ask questions. I understand the expectations for this job. CorrectHealth reserves the right to revise or change job duties, schedules, and responsibilities as the need arises. All proprietary information will not be disclosed or reproduced without the written consent of CorrectHealth.

End Job Descriptions.

III VENDOR REQUIREMENTS

CorrectHealth understands and will comply with all Vendor Requirements in Section III of Appendix A of the RFP.

IV. SUMMARY

Consultation. CorrectHealth has a recognized team of correctional health experts whose talents will be available to the Muscogee County Prison and the CCG under this contract. The Special Projects Team and other CorrectHealth staff will be happy to provide consultation and strategic planning services to the Prison on any and all aspects of the health care delivery system, including evaluations and recommendations concerning new programs, architectural plans, staffing patterns for Prison, alternate pharmaceutical and other systems, and on any other matter relating to this Contract upon which the Prison seeks advice and counsel.

Transition

Start-Up Transition. Perhaps the most important aspect of any new contract is the Transition Plan. At CorrectHealth, we believe that the acquisition of a new client is our opportunity to initiate a relationship that will be the basis of our future joint endeavors, a CorrectHealth employee packet will be provided, including a description of benefits and an employment application. We will also provide current personnel with our Employee Handbook that covers our employee policies from A to Z delineating the expectations of their performance in the provision of health services and the expectation of their obligations to perform in a professional and productive manner.

In any transition, CorrectHealth gathers key individuals in all corporate departments to oversee the process. It is truly a Team operation. The Directors of Human Resources, Accreditation and Leadership, Clinical Programs and Special Programs, together with staff from the Education Department, the Information Systems Department, the Finance Department and Administration, meet and ensure that all participants understand their responsibility in the transition process.

WEEK ONE

Human Resources.

Recruitment efforts and staff interviews will begin to include generic job postings in Columbus and surrounding areas, on the internet, in local media outlets and on the CorrectHealth website. Current staff will be notified of the selected vendor and plans will be made for on-site visits to the each facility to interview each interested staff member. Incumbent staff meet with our HR and Clinical Representatives as approved by the County. Employee packets will be disseminated to interested candidates. Licensure verification begin for all staff. Security clearance/background check information for employee candidates submitted.

Facility Acquisition.

On-site visit by CorrectHealth Senior Management will occur. During this visit, the Medical, Pharmacy, Mental Health and Dental operations thoroughly reviewed. Meet with Facility Administration (both security and healthcare) to discuss intentions and requirements. . The CorrectHealth Team will meet with current Health Services Administration, Providers and Staff to discuss the transition plan and any concerns they may have.

Finance.

The preferred hospitals, local medical professionals, and other healthcare vendors will be contacted to discuss CorrectHealth's assumption of the contract.

Legal Services.

All necessary Federal and State Legal Notices will be prepared for posting on-site, as required by law.

WEEK TWO

Formal reports will be presented from each member to see if additional resources are needed in any particular area.

Transition Team Leader.

Re-organize/procure resources to ensure project completion. Team Leader will verify that all contracts with vendors are executed. The Team Leader contacts each Vendor and ascertain any unique needs for their start-up at each facility.

Human Resources.

Recruitment, licensure verification, background checks and credentialing efforts will continue. New staff will be entered into our automated Human Resources system as they are credentialed and cleared.

Clinical Services.

During this week, the Pharmacy Manual and formulary for each site will be finalized. Planning for on-site staff orientation at a central location.

WEEK FOUR**Human Resources.**

Human Resources will continue to recruit, initiate background checks, verify licensure, and update HR Information System. Human Resources will continue their aforementioned activities, with the exception that daily staffing reports will be given to the Transition Team Leader if there continue to be vacancies. Continue their recruiting efforts and the daily reporting to the Transition Team Leader. A Master Roster of staff, including their position and contact information will be developed and shared with the Clinical Team and the Transition Team Leader.



Finance.

A Specialty Care Log will be developed for each site tracking specialty on-site and off-site care, emergency department visits, and hospitalizations in our Access Database. All vendors required on-site will be contacted to ensure they will be ready and on-site, by the start-up date

Clinical Services.

Contact will be made with all Vendors to verify readiness. The Orientation Program will be finalized, and all necessary supplies will be gathered. Schedule General Orientation for the following 2 weeks when incumbent staff are available on their off time. A staff schedule will be completed for the first month and will be communicated to current/new staff.

A full Transition Team meeting will be held at the beginning of the week to review status and review the detailed plan for our "go-live" at each facility. An inventory of necessary resources will be discussed, including corporate and human resources.

Transition Team.

The final full Transition Team meeting will be held on the Monday of the 7th week. Individuals identified as our on-site Deployment Team will be included in the meeting, and each detail of the plan will be reviewed.

START-UP DATE

All Deployment Team members will be assigned a specific time to be at their designated work station.

POST-START-UP ACTIVITIES

The Deployment Team will remain on-site as long as necessary. Frequent Team status reports will be given to Facility Administrative staff. Experience has indicated that Support Team members may be on-site for up to a week, while Clinical/Operations team members may be on-site for two or more weeks.

D. CorrectHealth Current Client Listing

Agency	Contact	Dates	Services	Capacity
Athens-Clarke County CI	Warden Roy Covington 2825 County Farm Road Athens, GA 30605 706.613.3400	03/01/2005 - Present	Medical and pharmaceutical services	116
Barrow County Jail	Sheriff Jud Smith 652 Barrow Park Drive Winder, GA 30680 770.307.3080	12/15/2005 - Present	Medical, mental health, dental and pharmaceutical services	300

Agency	Contact	Dates	Services	Capacity
Bartow County Jail	Sheriff Clark Millsap 104 Zena Drive Cartersville, GA 30121 770.382.5050	04/15/2003- Present	Medical, mental health, dental and pharmaceutical services	650
Bibb County Law Enforcement Center MAG Accredited, August 2010	Sheriff David Davis 668 Oglethorpe Street Macon, GA 31201 478.621.5613	07/01/2007- Present	Medical, dental and pharmaceutical services	1000
Carroll County Jail	Sheriff Terry Langley 1000 Newnan Road Carrollton, GA 30116 770.830.5888	06/01/2003 – 07/31/2008 07/01/2009- Present	Medical, mental health, dental and pharmaceutical services	550
Carroll County Prison	Warden Robert Jones 96 Horsley Mill Road Carrollton, GA 30117 770.830.5905	06/01/2003 – 07/31/2008 07/01/2009- Present	Medical, dental and pharmaceutical services	240
Catoosa County Jail	Sheriff Gary Sisk 5842 US Highway 41 Ringgold, GA 30736 706.935.2424	2/15/2015- Present	Medical, mental health, dental and pharmaceutical services	250
Chatham County Detention Center MAG Accredited, October 2017	Sheriff John T. Wilcher 1050 Carl Griffin Dr. Savannah, GA 31405 912-652-7609	09/01/2016- Present	Medical, mental health, dental, telehealth and pharmaceutical services	1800
Chattooga County Jail MAG Accredited, October 2010	Sheriff Mark Schrader 35 W. Washington Street Summerville, GA 30747 706.857.3411	07/01/2005- Present	Medical, mental health, dental, telehealth and pharmaceutical services	90

Agency	Contact	Dates	Services	Capacity
Clayton County Prison	Warden Dennis Nelson 11420 S.L.R. Boulevard Lovejoy, GA 30250 770.473.5777	04/06/2007- Present	Medical, dental and pharmaceutical services	242
Columbia County Jail MAG Accredited, September 2015	Sheriff Clay N. Whittle 2273 County Camp Road Appling, GA 30802 706-541-1042	6/1/2015- Present	Medical, mental health, dental and pharmaceutical services	375
East Baton Rouge Parish Prison	Warden Dennis Grimes 2867 Brig. Gen Isaac Smith Ave. Baton Rouge, LA 70807 225-355-3311	12/31/2016- Present	Medical, mental health, dental, telehealth and pharmaceutical services	1500
Dawson County Jail	Sheriff Jeff Johnson 19 Tucker Avenue Dawsonville, GA 30534 706-344-3535	05/02/2014 - Present	Medical, mental health, dental, telehealth and pharmaceutical services	200
Douglas County Jail MAG Accredited, June 2012	Sheriff Tim Pounds 6840 W. Church Street Douglasville, GA 30135 770-942-2121	12/01/2010- Present	Medical, mental health, dental and pharmaceutical services	875
Fayette County Jail	Sheriff Barry Babb 145 Johnson Avenue Fayetteville, GA 30214 770.461.6353	07/01/2003- Present	Medical, mental health, dental and pharmaceutical services	300
Floyd County Jail	Sheriff Tim Burkhalter 2526 New Calhoun Road Rome, GA 30161 706.291.4111	07/01/2003- Present	Medical, mental health, dental and pharmaceutical services	1170
Floyd County Prison	Warden Michael Long 329 Black Bluff Road Rome, GA 30161 706.236.2490	07/01/2003- Present	Medical, dental and pharmaceutical services	



Agency	Contact	Dates	Services	Capacity
Forsyth County Jail	Sheriff Ron Freeman 202 Veterans Memorial Boulevard Cumming, GA 30040 770.781.3077	01/01/2011- Present	Medical, mental health, dental and pharmaceutical services	400
GDCP Jackson	Randy Sauls 300 Patrol Road Forsyth, GA 31029 478.992.2999	06/01/2007 - Present	Physician services	N/A
Hamblen County Jail	Mayor Bill Brittain 511 W. 2nd North Street Morristown, TN 37814 423.586.1931	02/01/2012- Present	Medical, mental health, dental, telehealth and pharmaceutical services	350
Heard County Jail	Sheriff Ross Henry 11820 Highway 100 N Franklin, GA 30217 706.675.3329	09/01/2006- Present	Medical, mental health, dental and pharmaceutical services	60
Henry County Jail	Sheriff Keith McBayer 120 Henry Parkway McDonough, GA 30253 770.288.7100	12/23/2002- Present	Medical, mental health, dental and pharmaceutical services	750
Iberia Parish Detention Center	Michael Broussard Purchasing Director 3618 Broken Arrow Road New Iberia, LA 30560 337-365-8246	10/01/2013- Present	Medical, dental, telehealth and pharmaceutical services	500
Jackson County Jail	Sheriff Janice Mangum 555 Stan Evans Drive Jefferson, GA 30549	01/01/2014 - Present	Medical, dental, Mental Health, telehealth and pharmaceutical services	325
Jackson County Prison	Warden Johnny Weaver 265 I W Davis Road Jefferson, GA 30549 706-387-6450	01/01/2014 - Present	Medical, dental, telehealth and pharmaceutical services	200

Agency	Contact	Dates	Services	Capacity
Jefferson Parish Correctional Center NCCHC Accredited, January 2006	Joe Denny 1221 Elwood Park Boulevard, Suite 607 New Orleans, LA 70123 504.736.6844	01/01/2006-Present	Medical, mental health, dental, telehealth and pharmaceutical services	1200
Lafourche Parish Correctional Center	Sheriff Craig Weber 952 Highway 3185 Thibodaux, LA 70301 985.449.4458	07/09/2008-Present	Medical, mental health, dental, telehealth and pharmaceutical services	275
Lafourche Parish Work Release Center ACA Accredited, April 2013	Sheriff Craig Weber 952 Highway 3185 Thibodaux, LA 70301 985.449.4458	12/15/2011-Present	Medical, mental health, dental and pharmaceutical services	200
Lumpkin County Jail	Sheriff Stacy Jarrard 385 E. Main Street Dahlonega GA 30533 706-864-0414	12/01/2011-Present	Medical, mental health, dental and pharmaceutical services	170
Monroe County Jail MAG Accredited, February 2018	Sheriff John Cary Bittick 145 L. Cary Bittick Dr. Forsyth, GA 31029	11/01/2016-Present	Medical, dental, mental health, telehealth and pharmaceutical services	150
Peach County Jail	Sheriff Terry Deese 1007 Spruce Street Fort Valley, GA 31030 478.825.3435	12/01/2006-Present	Medical, mental health, dental and pharmaceutical services	120
Pickens County Jail	Sheriff Donnie Craig 2985 Camp Road Jasper, GA 30143	11/01/2017-Present	Medical, dental, telehealth and pharmaceutical services	140

Agency	Contact	Dates	Services	Capacity
Plaquemines Parish Detention Center	Sheriff Gerald A. Turlich 16801 Highway 15 Davant, LA 70040 504-934-7622	10/01/2014- Present	Medical, dental, telehealth and pharmaceutical services	520
Robert Rivarde Youth Detention Center	Joe Denny 1221 Elwood Park Boulevard, Suite 607 New Orleans, LA 70123 504.736.6844	07/01/2008- Present	Physician and pharmaceutical services	50
Saint Bernard Parish Detention Center	John Vickers #2 Courthouse Square Chalmette, LA 70043 504.278.7612	03/01/2015- Present	Medical, dental, telehealth and pharmaceutical services	300
Saint James Parish Detention Center	Sheriff Willie Martin Jr. P.O. Box 83 Convent, LA 70723 225-562-2211	10/01/2017- Present	Medical, dental, telehealth and pharmaceutical services	100
Stephens County Jail	Sheriff Randy Shirley 70 N. Alexander Street Toccoa, GA 30577 706.886.2567	05/01/2006- Present	Medical, mental health, dental and pharmaceutical services	180
Tangipahoa Parish Detention Center	Sheriff Daniel H. Edwards 101 Campo Lane Amite City, LA 70403	06/01/2015- Present	Medical, dental and pharmaceutical services	550
Union County Jail	Commissioner Lamar Paris 114 Courthouse Street, Box 1 Blairsville, GA 30512 706.439.600	01/01/2003- Present	Medical, mental health, dental and pharmaceutical services	70
Walton County Jail MAG Accredited, January 2010	Sheriff Joe Chapman 1425 S. Madison Avenue Monroe, GA 30655 706.439.6066	07/01/2004- Present	Medical, mental health, dental and pharmaceutical services	425



INMATE MEDICAL & PHARMACY SERVICES FOR
MUSCOGEE COUNTY PRISON (ANNUAL CONTRACT)

Agency	Contact	Dates	Services	Capacity
White County Jail	Sheriff Neal Walden 1210 Hulsey Road Cleveland, GA 30528 706.865.5178	07/01/2002- Present	Medical, mental health, dental and pharmaceutical services	100

SECTION 7. COST PROPOSAL (FORM 5)

Proposal Pricing. CorrectHealth agrees to provide a quality-driven, cost effective, healthcare program for the inmates and detainees at the Prison. The prices attached on Form 5 below include the provision of healthcare services, as described in this Proposal, for the inmates at the Muscogee County Prison. CorrectHealth will be financially responsible for medical, dental, nursing and support staffing, on-site diagnostics, and supplies and administrative support costs as per this proposal.

CorrectHealth is pleased to present one (1) option for consideration:

represents the specified staffing requested by the County in Section II, Personnel Staffing, of the RFP for the Muscogee County Prison. Please see the specified Staffing Matrix in Section II of this proposal for more detailed information.

Specialty Care. Through our accounting and claims management department, CorrectHealth will manage scheduling, claims adjudication and accounting for off-site hospitalization and specialty care services. For emergency treatment, Columbus Consolidated Government will receive savings as set forth in HB 464 > O.C.G.A. 42-5-3 utilizing Medicaid rates for reimbursements to hospitals, which has historically saved up to 80% of usual and customary charges.

For Hospitalization and Specialty Care provided on-site or off-site, CorrectHealth will abide by existing contracts in place between the City of Columbus and Columbus Regional Medical Center, as well as any other provider agreements that may exist for provider reimbursement. Columbus Consolidated Government is financially responsible for the actual costs of specialty care and hospitalization services.

CorrectHealth will adjudicate and pay hospitalization and specialty care claims on a monthly basis. Paid claims will be invoiced to the Prison thirty (30) days after the end of the contract quarter for reimbursement equal to the amount paid for the preceding quarter. We will also invoice GDC for care that exceeds \$1000 per GDC policy.

Changes in Standards of Care or Scope of Services. The prices quoted reflect the scope of services as outlined in the CorrectHealth Service Plan in section 6 of our proposal and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g. treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in this proposal and would need to be negotiated with Columbus Consolidated Government. Further, if the mission and / or purpose of the Muscogee County Prison changes substantially, Muscogee County agrees to negotiate with CorrectHealth in good faith for any change in services.



Per Diem. CorrectHealth will charge a per diem rate of **\$0.48** per inmate per day when the daily census is greater than **600** at Muscogee County Prison. This per diem is intended to cover additional costs in those instances where minor, short-term changes in the inmate population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new fixed staffing positions that might prove necessary if the inmate population grows significantly and / or if the population increase is sustained. CorrectHealth will negotiate in good faith with Muscogee County for an increase in staffing complement and contract price in order to provide services to an increased number of inmates and maintain quality of care.

Payment Terms. CorrectHealth will invoice CCG for one-twelfth of the annual base compensation on a monthly basis during the month of service. CCG agrees to pay CorrectHealth within 30 days of the invoice date. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to CorrectHealth will be prorated accordingly for the shortened month.

CorrectHealth will invoice the Prison/CCG for pharmaceutical expenses on a monthly basis. The pharmaceutical invoice will be processed as a pass through expense. CorrectHealth will provide oversight and management of the pharmaceutical formulary at no additional charge.

CorrectHealth will invoice Muscogee County Prison for per diem overages in the month following the month of service. Payment will be due upon receipt.

Annual Renewal. CorrectHealth will guarantee renewal pricing as outlined in the attached cost proposal.

Statement of Financial Condition. CorrectHealth Companies is a group of private, limited liability companies owned by Triage Holding, Inc. (Triage). Triage provides administrative support including but not limited to Human Resources, Accounting and Legal support, for the group of CorrectHealth Companies, for which it receives an administrative fee. If awarded the contract, we operate as CorrectHealth Muscogee, LLC. CorrectHealth Companies are currently licensed to do business in the states of Georgia, Louisiana, Kentucky and Tennessee. At the close of business December 31, 2017, combined annual operating revenues exceeded \$43 million. Our annualized payroll is currently \$23 million. CorrectHealth Companies' operations have been self-funded for its entire 18 year history and the group of companies is debt free. CorrectHealth has significant cash balances, a healthy cash flow and an available line of credit in the amount of \$3 million. The companies are financially stable and capable of performing under the proposed contract.

Summary. CorrectHealth is making an honest, transparent and fair proposal to Columbus Consolidated Government to provide high quality, cost effective, comprehensive healthcare services to the inmates at the Muscogee County Prison. CorrectHealth looks forward to the



opportunity to discuss our proposal with Columbus Consolidated Government representatives during the evaluation process.

Pricing. Please see our proposed pricing below in Form 5.

COST PROPOSAL**Inmate Medical Services for Muscogee County Prison (Annual Contract)****RFP No. 18-0022****OPTION 1: Specified Staffing**

DESCRIPTION	CONTRACT YEAR	*ANNUAL CONTRACT AMOUNT
Medical Services	1 st Year	\$ 612,640.60
	2 nd Year	\$ 627,956.62
	Total Initial Contract Amount	\$ 1,240,597.22
Medical Services	3 rd Year	\$ 643,655.53
Medical Services	4 th Year	\$ 659,746.92
Medical Services	5 th Year	\$ 676,240.59
Pharmacy services at pass-through cost with a management fee		<u>0.00</u> % Management Fee

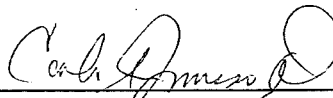
*Subject to negotiations

OPTION 2: Vendor's Recommended Staffing

DESCRIPTION	CONTRACT YEAR	*ANNUAL CONTRACT AMOUNT
Medical Services	1 st Year	\$ N/A
	2 nd Year	\$ N/A
	Total Initial Contract Amount	\$ N/A
Medical Services	3 rd Year	\$ N/A
Medical Services	4 th Year	\$ N/A
Medical Services	5 th Year	\$ N/A
Pharmacy services at pass-through cost with a management fee		<u>0.00</u> % Management Fee

*Subject to negotiations

CorrectHealth Muscogee, LLC

Company Name

Authorized Signature

5/16/2018

Date



SECTION 8. CONTRACT SIGNATURE PAGE (FORM 6)



FORM 5

CONTRACT SIGNATURE PAGE

Inmate Medical and Pharmacy Services for Muscogee County Jail (Annual Contract)
RFP No. 18-0019

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Steve M. Scott
Witness as to the signing of the contract

[Signature]
Witness as to the signing of the contract

(Corporate seal, if applicable)

By: [Signature] 5/16/18
Signature of Authorized Representative Date

Carlo A. Musso, MD
Print Name and Title of Signatory

Company: CorrectHealth Muscogee, LLC

Company Ordering Address

3384 Peachtree Rd., NE, Suite 700
Atlanta, GA 30326
Contact: Carlo A. Musso, MD
Contact Email carlo.musso@correcthealth.org
Telephone 770-692-4750, 209 Fax 770-692-4754

Company Payment Address

3384 Peachtree Rd., NE, Suite 700
Atlanta, GA 30326
Contact: Carlo A. Musso, MD
Contact Email carlo.musso@correcthealth.org
Telephone: 770-692-4750, 209 Fax 770-692-4754

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this ___ day of _____ 20__

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****



SECTION 9. AGREEMENT/CONTRACT FORM

Sample Contract

HEALTH SERVICES AGREEMENT

THIS HEALTH SERVICES AGREEMENT (hereinafter referred to as "AGREEMENT") by and between the COLUMBUS CONSOLIDATED GOVERNMENT (hereinafter referred to as "CITY") and CORRECTHEALTH MUSCOGEE, LLC (hereinafter referred to as "COMPANY"), is entered into as of the _____ day of _____, _____ to be effective as set forth in Paragraph 6.1, below.

WITNESSETH:

WHEREAS, CITY is charged by law with the responsibility for obtaining and providing reasonably necessary medical care for prisoners of the MUSCOGEE COUNTY PRISON (hereinafter called "PRISON") and,

WHEREAS, the CITY desires to provide for health care to prisoners in accordance with applicable law; and,

WHEREAS, CITY desires to enter into this Agreement with COMPANY to promote this objective; and,

WHEREAS, COMPANY is in the business of providing correctional healthcare services under contract and desires to provide such services for the CITY under the express terms and conditions contained herein.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter made, the parties hereto agree as follows:

ARTICLE I: HEALTH CARE SERVICES

- 1.1 General Engagement. CITY hereby contracts with COMPANY to provide healthcare services to prisoners under the custody and control of the Georgia Department of Corrections (hereinafter referred to as DOC) at the PRISON.
- 1.2 Scope of General Services. The responsibility of COMPANY for the healthcare of a prisoner commences with the commitment of a prisoner to the custody of the PRISON. COMPANY shall provide on a regular basis: nursing care, provider (physician and / or midlevel provider) care, dental care, tele-health, onsite emergency medical services, onsite laboratory studies, on-site radiology, medication administration, non-capital medical equipment, medical supplies, office supplies, and medical waste disposal, as set forth in COMPANY's Proposal dated May 18, 2018, in response to RFP No. 18-0022. COMPANY shall not be financially responsible for the cost of pharmaceuticals, on-site specialty care, off-site specialty care, hospitalizations, all other off-site healthcare, or ambulance services.
- 1.3 Specialty Care Services. When non-emergency specialty care is required and cannot be rendered at the PRISON, COMPANY will arrange with DOC staff for the transportation of the prisoners in accordance with Section 1.8 of this Agreement.
- 1.4 On-Site Emergency Services. COMPANY shall provide, at its own cost, on-site emergency medical care, as medically necessary.

- 1.5 Injuries Incurred Prior to Incarceration; Pregnancy. COMPANY will not be financially responsible for the cost of any medical treatment for health care services provided to any prisoner prior to the prisoner's commitment into the custody of the PRISON. Furthermore, COMPANY is not financially responsible for the cost of services outside the PRISON for any healthcare treatment or health care services provided to medically stabilize any prisoner presented at booking with a life threatening injury or illness or in immediate need of emergency medical care, if said prisoner is not in the custody of the PRISON.

Once it has been determined by COMPANY's intake medical personnel that the prisoner has been medically stabilized, and accepted by DOC personnel into the custody of the PRISON, COMPANY will, commencing at that point, then become responsible for the medical treatment for health care services rendered at the PRISON, regardless of the nature of the illness or injury and whether or not the illness or injury occurred prior or subsequent to the individual's incarceration at the PRISON. A prisoner shall be considered medically stabilized when the patient's medical condition no longer requires immediate emergency medical care or outside hospitalization, and when any and/or all applicable medical clearances have been provided to the DOC personnel, so that the prisoner can reasonably be housed inside the PRISON.

It is expressly understood that COMPANY shall not be responsible for costs associated with the health care of any infants born to prisoners. COMPANY shall provide health care services to prisoners up to, though, and after the birth process, but health care services provided to an infant following birth, other than those services that may be delivered in the PRISON prior to transport to a hospital, will not be the financial responsibility of COMPANY. In any event, COMPANY shall not be responsible for the costs associated with the performing or furnishing of elective abortions.

- 1.6 Prisoners outside the Facility. The health care services contracted in the Agreement are intended only for those prisoners in the actual physical custody of the PRISON. This does not include prisoners who are under guard in outside facilities. Such prisoners are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of COMPANY with respect to the payment or the furnishing of their health care services. Persons in the physical custody of other public safety or other law enforcement/penal jurisdictions at the request of CITY or DOC are likewise excluded from the population count and are not the responsibility of COMPANY for the furnishing or payment of health care services.

The cost of medical services provided to prisoners who become ill or are injured while on such temporary release, work release, or escape status will not be the responsibility of COMPANY. However, prisoners on work detail who are supervised by DOC personnel and become injured will be the responsibility of COMPANY as long as they are returned to the PRISON to be treated by COMPANY personnel. These prisoners will be part of the daily census count.

- 1.7 Elective Medical Care. COMPANY is not responsible for providing elective medical care to prisoners. For purposes of the Agreement, "elective medical care" means medical care, which, if not provided, would not cause definite harm to the prisoner's well-being. DOC and / or CITY must review any referral of prisoners for elective medical care prior to provision of such services.

- 1.8 Transportation Services. To the extent any prisoner requires off-site non-emergency health care treatment including, but not limited to, hospitalization care and specialty services, the DOC will, upon request by COMPANY, provide transportation as reasonably available provided that such transportation is scheduled in advance. When medically necessary, COMPANY shall arrange for all emergency ambulance transportation of prisoners. COMPANY will not be financially responsible for the cost of ambulance services.

ARTICLE II: PERSONNEL

- 2.1 Staffing. COMPANY shall provide medical and support personnel reasonably necessary for the rendering of health care services to prisoners at the PRISON, as identified on Exhibit A, which is attached hereto. At the sole discretion of the COMPANY, some services may be provided via tele-health.
- 2.2 Licensure, Certification and Registration of Personnel. All personnel provided or made available by COMPANY to render services hereunder shall be licensed, certified or registered, in their respective areas of expertise as required by applicable Georgia law.
- 2.3 CITY's Satisfaction with Health Care Personnel. If the Warden or Deputy Warden of the PRISON becomes dissatisfied with any health care personnel provided by COMPANY hereunder, or by any independent contractor, subcontractor or assignee, COMPANY, in recognition of the sensitive nature of correctional services, shall, following receipt of written notice from the Warden or Deputy Warden of the PRISON of the grounds for such dissatisfaction and in consideration of the reasons therefore, exercise its best efforts to resolve the problem. If the problem is not resolved satisfactorily to the Warden or Deputy Warden of the PRISON, COMPANY shall remove or shall cause any independent contractor, subcontractor, or assignee to remove the individual about whom the DOC has expressed dissatisfaction. Should removal of an individual become necessary, COMPANY will be allowed reasonable time, prior to removal, to find an acceptable replacement, without penalty or any prejudice to the interests of COMPANY.
- 2.4 Use of DOC Personnel and Prisoners in the Provision of Health Care Services. DOC personnel nor prisoners shall be employed or otherwise engaged by either COMPANY or DOC in the direct rendering of any health care services.
- 2.5 Subcontracting and Delegation. In order to discharge its obligations hereunder, COMPANY will engage certain health care professionals as independent contractors rather than as employees. CITY and DOC consent to such subcontracting or delegation. As the relationship between COMPANY and these health care professionals will be that of independent contractor, COMPANY will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. COMPANY will not exercise control over the manner or means by which these independent contractors perform their professional medical duties. However, COMPANY shall exercise administrative supervision over such professionals necessary to insure the strict fulfillment of the obligations contained in this Agreement. For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide CITY proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor.

- 2.6 Discrimination. During the performance of this Agreement, COMPANY, its employees, agents, subcontractors, and assignees agree as follows:
- a. None will discriminate against any employee or applicant for employment because of race, religion, color, gender or national origin, except where religion, gender or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor.
 - b. In all solicitations or advertisements for employees, each will state that it is an equal opportunity employer.
 - c. Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of the section.

ARTICLE III: REPORTS AND RECORDS

- 3.1 Medical Records. COMPANY shall cause and maintain complete and accurate medical records for each Prisoner who has received health care services. Each medical record will be maintained in accordance with applicable laws. The medical records shall be kept separate from the prisoner's confinement record. A complete legible copy of the applicable medical records shall be available at all times, to the Warden, as custodian of the person of the patient. Medical records shall be kept confidential. No information contained in the medical records shall be released by COMPANY except as provided by policy, by a court order, or otherwise in accordance with applicable law. COMPANY shall, at its own cost, provide all medical personnel necessary to maintain the medical records. At the termination of this Agreement, all medical records shall be delivered to and remain with the DOC. However, CITY and / or DOC shall provide COMPANY with reasonable ongoing access to all pertinent medical records even after the termination of this Agreement for the purposes of defending or investigating litigation.
- 3.2 Regular Reports by COMPANY to CITY. If requested, COMPANY shall provide to CITY, on a date and in a form mutually acceptable to COMPANY and CITY, reports relating to services rendered under this Agreement.
- 3.3 Prisoner Information. Subject to the applicable Georgia law, in order to assist COMPANY in providing the best possible health care services to prisoners, DOC will provide COMPANY with information pertaining to prisoners that COMPANY and DOC mutually identify as reasonable and necessary for COMPANY to adequately perform its obligations hereunder.
- 3.4 COMPANY Records Available to CITY with Limitations on Disclosure. COMPANY shall make available to CITY, at CITY's request, records, documents and other papers relating to the direct delivery of health care services to Prisoners hereunder. CITY understands that written operating policies and procedures employed by COMPANY in the performance of its obligations hereunder are propriety in nature and will remain the property of COMPANY and shall not be disclosed without written consent. Information concerning such may not, at any time, be used, distributed, copied or otherwise utilized by CITY or DOC, except in connection with the delivery of health care services hereunder, or as permitted or required by law, unless such disclosure is approved in advance writing by COMPANY. Proprietary information developed by COMPANY shall remain the property of COMPANY.

- 3.5 CITY Records Available to COMPANY with Limitations on Disclosure. During the term of this Agreement and for a reasonable time thereafter, CITY will provide COMPANY at COMPANY's request, CITY's records relating to the provision of health care services to prisoners as may be reasonably requested by COMPANY or as are pertinent to the investigation or defense of any claim related to COMPANY's conduct. Any such information provided by CITY to COMPANY that CITY considers confidential shall be kept confidential by COMPANY and shall not, except as may be required by law, be distributed to any third party without the prior written approval of the CITY.

ARTICLE IV: SECURITY

- 4.1 General. COMPANY and CITY understand that adequate security services are essential and necessary for the safety of the agents, employees, and subcontractors of COMPANY as well as for the security of prisoners and PRISON personnel, consistent with the correctional setting. DOC personnel will take all reasonable steps to provide sufficient security to enable COMPANY to safely and adequately provide the health care services described in this Agreement. It is expressly understood by CITY and COMPANY that the provision of security and safety for the COMPANY personnel is a continuing precondition of COMPANY's obligation to provide its services in a routine, timely, and proper fashion. This provision, however shall not be considered to and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY or DOC by a prisoner, employee of company or any other person in anyway whatsoever.
- 4.2 Security During Transportation Off-Site. DOC will provide prompt and timely security as medically necessary and appropriate in connection with the transportation of any prisoner between the PRISON and any other location for off-site services as contemplated herein.

ARTICLE V: OFFICE SPACE, EQUIPMENT, INVENTORY AND SUPPLIES

- 5.1 General. CITY agrees to provide COMPANY with reasonable and adequate office and medical space, facilities, and telephone equipment with dedicated line in the medical area. COMPANY will obtain, with the assistance of CITY, secured internet access (minimum speeds 3MB down/3MB up) with a static public IP address as required for high definition telehealth. This internet connection will be for sole and exclusive use by COMPANY. CITY will pay for utilities (e.g. gas, electric, water). Further, CITY will provide necessary maintenance and housekeeping of the office space and facilities. COMPANY will be responsible for the cost of phone lines, as well as phone usage, including long distance.

With regard to telemedicine, COMPANY will provide for all necessary equipment and any necessary internet / connection line, as set forth above.

COMPANY will provide medical and office supplies used in the healthcare delivery system administered at the PRISON. This includes medical supplies, medical records, office supplies, and forms. COMPANY will also provide for all non-capital medical equipment (i.e. less than \$500). CITY will be responsible for any capital medical equipment (i.e. more than \$500).

- 5.2 Delivery of Possession. CITY will provide to COMPANY beginning on the date of commencement of this Agreement, possession and control of all medical and office equipment and supplies in place at the PRISON's health care unit.

At the commencement of service by COMPANY an inventory of all supplies, medical and office equipment as described herein will be completed in writing by CITY personnel. This inventory will be reviewed and approved in writing by the authorized agent of the CITY as well as the COMPANY.

At the termination of this or any subsequent Agreement, COMPANY will return to the CITY possession and control all supplies, medical and office equipment, in working order, reasonable wear and tear accepted, which were in place at the PRISON's health care unit prior to the commencement of services under this Agreement. Any such return will require written confirmation, executed by the Warden of the PRISON, for proper acceptance.

ARTICLE VI: TERM AND TERMINATION OF AGREEMENT

- 6.1 Initial Term. The initial term of this Agreement will be _____ through _____. This Agreement is renewable under like terms for additional years, subject to negotiation of the service component and agreed-upon compensation adjustments, including compensation escalator as set forth in Section 7.4 below, unless either party delivers written notice of non-renewal to the other party at least ninety (90) days prior to the expiration of the then-existing term.
- 6.2 Termination. This Agreement may be terminated as otherwise provided in this Agreement or as follows:
- a. Termination by Agreement. In the event that each of the parties mutually agrees in writing, this Agreement may be terminated on the terms and date stipulated therein.
 - b. Termination by Cancellation. This Agreement may be canceled, without cause, by either party upon ninety (90) days prior written notice in accordance with Section 9.3 this Agreement.
- 6.3 Responsibility for Prisoner Health Care. Upon termination of this Agreement, all responsibility for providing health care services to all prisoners, including prisoners receiving health care services at sites outside the PRISON, will be transferred from COMPANY to CITY.

ARTICLE VII: COMPENSATION

- 7.1 Base Compensation & Per Diem Compensation. CITY will pay COMPANY an annualized base compensation of \$_____. This will be due in monthly payments of \$_____. This compensation level assumes a maximum prisoner population of 600 prisoners.

COMPANY will invoice CITY during the month prior to the month of service. CITY agree to pay COMPANY within thirty (30) days of receipt of the invoice. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to COMPANY will be prorated accordingly for the shortened month.

- 7.2 Per Diem. When the daily prisoner census exceeds **600**, CITY agree to compensate COMPANY \$____ per prisoner per day for each prisoner in excess of **600**.

This per diem is intended to cover additional costs in those instances where minor, short term increases in the prisoner population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the prisoner population increases to more than **600** prisoners. As such, if the census increases by **20%** and is sustained, the parties agree to negotiate in good faith for additional staffing and associated compensation in order to continue to provide services to the increased number of prisoners and maintain the quality of care consistent with COMPANY's Proposal and this Agreement.

- 7.3 Prisoners From Other Jurisdictions. Medical care rendered within the PRISON to prisoners from outside jurisdictions, and housed in the PRISON pursuant to written contracts between CITY / DOC and such other jurisdictions or the State of Georgia, or by statute, will be the responsibility of COMPANY but as limited by this Agreement. Medical care that cannot be rendered within the PRISON will be arranged by COMPANY and the costs of such care subject to reimbursement by the other jurisdiction, the State of Georgia, or CITY / DOC. This Section does not apply to sentenced felons awaiting transfer to State facilities or prisoners housed in the PRISON on ex parte orders. COMPANY shall directly bill other counties for onsite professional medical fees, supplies, tests and medications. COMPANY will forward other bills for offsite healthcare and program support services provided to other jurisdictions housing prisoners in the PRISON. A nominal standard fee schedule will be utilized and is available upon request. CITY agree to assist COMPANY with these billing activities.

- 7.4 Compensation Escalator. On each subsequent annual renewal, the compensation paid to COMPANY, including base compensation and per diem rate, shall be adjusted by the current Consumer Price Index-Wage Earners and Clerical Workers (CPI-W), Medical Care Component (MCC) for the Southern Region of the United States.

- 7.5 Change in Standard of Care or Scope in Services. The price in Section 7.1, above, quoted reflects the scope of services as outlined herein and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g. treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in the contract price and would need to be negotiated with the CITY. Further, if the mission and/or purpose of the PRISON changes substantially, the CITY agrees to negotiate with COMPANY in good faith for any change in services.

- 7.6 Late Payments. CITY shall pay COMPANY interest on all undisputed payments hereunder that are not paid when due, as specified in Section 7.1, above. Interest shall accrue from the date the original payment was due at a rate of one percent (1%) per month until the payment is made in full. CITY shall bear the costs of any legal or collection fees and expenses incurred by COMPANY in attempting to enforce CITY's payment obligations hereunder.

ARTICLE VIII: LIABILITY AND RISK MANAGEMENT



- 8.1 Insurance. At all times during this Agreement, COMPANY shall maintain professional liability insurance covering COMPANY, and naming CITY as additional insureds, for its work at the PRISON with limits of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the aggregate. Upon request, COMPANY shall provide a Certificate of Insurance to CITY.
- 8.2 Indemnification. COMPANY shall indemnify, defend and hold CITY harmless from and against any and all claims against CITY based on COMPANY's performance of its obligations hereunder; provided, however, that COMPANY will not be responsible for any claim arising out of CITY / DOC or their employee or agent preventing a prisoner from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured prisoner to COMPANY for treatment. CITY shall defend, and hold COMPANY harmless from and against any and all claims against COMPANY arising out of the performance by CITY / DOC, its employees, agents, officers, or contractors in connection with CITY's obligations hereunder or other conduct. This provision, however, shall not be considered and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY / DOC by a prisoner, employee of company or any other person in any way whatsoever.

ARTICLE IX: MISCELLANEOUS

- 9.1 Independent Contractor Status. The parties acknowledge that COMPANY is an independent contractor engaged to provide health care to Prisoners at the PRISON under the direction of COMPANY management. Nothing in this Agreement is intended nor shall be construed to create an agency relationship, an employer - employee relationship, or a joint venture relationship between the parties.
- 9.2 Court Appearance by COMPANY Employees. In the event COMPANY's personnel are required to devote time with regard to litigation or threatened litigation by or on behalf of CITY this shall be part of their service time pursuant to this agreement. CITY shall be responsible for reasonable costs of substitute personnel to fill positions, which would be vacant due to such court or trial appearance requirements.
- 9.3 Notice. Unless otherwise provided herein, all notices or other communications required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been duly given if delivered personally in hand or sent by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following address or to the other person at any other address as may be designated in writing by the parties:

(a) CITY:

(b) COMPANY:

CorrectHealth Muscogee, LLC
ATTN: Carlo A. Musso, M.D.
3384 Peachtree Road, NE, Suite 700
Atlanta, GA 30326

Notices shall be effective upon receipt regardless of the form used.

- 9.4 Entire Agreement. This Agreement constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. No modifications or amendment to this Agreement shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto. All prior negotiations, agreements and understandings with respect to the subject matter of this Agreement are superseded hereby.
- 9.5 Amendment. This Agreement may be amended or revised only in writing and signed by all parties.
- 9.6 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be constructed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 9.7 Other contracts and Third-Party Beneficiaries. The parties acknowledge that COMPANY is neither bound by nor aware of any other existing contracts to which CITY is a party and which relate to the providing of medical care to prisoners at the PRISON. The parties agree that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that the Agreement is intended to be for their respective benefit only and not for the benefit of others who might otherwise be deemed to constitute third-party beneficiaries hereof.
- 9.8 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement which shall remain in full force and effect and enforceable in accordance with its terms.
- 9.9 Cooperation. On and after the date of this Agreement, each party shall, at the request of the other, make, execute and deliver or obtain and deliver all instruments and documents and shall do or cause to be done all such other things which either party may reasonable require to effectuate the provisions and intentions of this Agreement.
- 9.10 Time of Essence. Time is and shall be of the essence of this Agreement.
- 9.11 Authority. The parties signing this Agreement hereby state that they have the authority to bind the entity on whose behalf they are signing.
- 9.12 Binding Effect. This Agreement shall be binding upon the parties hereto, their heirs, administrators, executors, successors and assigns.
- 9.13 Cumulative Powers. Except as expressly limited by the terms of this Agreement, all rights, power and privileges conferred hereunder shall be cumulative and not restrictive of those provided at law or in equity.
- 9.14 Governing Law. This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Georgia, except as specifically noted.



9.15 Jurisdiction and Venue. Should any disputes regarding this Agreement arise and require legal action, the proper jurisdiction and venue for said legal action will be Muscogee County, Georgia.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by and through their duly authorized officers, the day, month and year given below.

COLUMBUS CONSOLIDATED GOVERNMENT ("CITY")

By: _____
Title: _____
Print Name: _____
Date: _____

CORRECTHEALTH MUSCOGEE, LLC ("COMPANY")

By: _____
Title: _____
Print Name: _____
Date: _____



EXHIBIT A – STAFFING

PROVIDER	FTE

** May be provided on-site and/or via tele-medicine, at the discretion of COMPANY.*

EXHIBIT E
Clarification Documents

Della Lewis

From: John Ritter <john.ritter@correcthealth.org>
Sent: Monday, July 2, 2018 2:07 PM
To: Della Lewis; Kevin Robertson
Cc: Carlo Musso
Subject: CorrectHealth RFP No. 18-0022 - Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract)
Attachments: CorrectHealth LitigationHistory (Muscogee Proposal).pdf; Common Medications Pricing Muscogee.pdf

July 2, 2018

Ms. Della Lewis
dlewis@columbusga.org
100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. Box 1340, COLUMBUS, GEORGIA 31902-1340

Subject: Response - RFP No. 18-0022 - Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract)

Dear Ms. Lewis,

This is our response to your email request dated, June 28, 2018:

“Thank you for your submittal in response to the subject Request for Proposals (RFP) for the Muscogee County Prison (MCP). The Evaluation Committee for RFP No. 18-0022 has completed its preliminary review and determined additional information is required”:

1. Litigation History: Please thoroughly explain all litigation involving your firm, or any principal officers thereof, in connection with any contract for similar services. Include current lawsuits pending for allegations relating to inmate health care.

Attached

2. Common Medications: Included in the attached copy of Addendum No. 3 (page 1, Section A, Item 3) is a list of the most common medications dispensed to inmates at MCP. Please provide the cost that your proposed pharmacy provider will charge for each medication.

Attached

3. Telemedicine: Is there a fee for telemedicine? **There are no fees for the use of telemedicine.**

If you should have any further questions, we look forward to speaking with you.

John Ritter

John P. Ritter, NRP, CCHP | Director of Marketing and Business Development | *CorrectHealth Companies* |

Lenox Plaza | 3384 Peachtree Road, Suite 700, Atlanta GA 30326 | O: 770-692-4759 | M: 770-337-8888
www.correcthealth.org

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CorrectHealth / Diamond Pharmacy Common Medication Pricing

Medication	Qty	Diamond AAC
Clobetasol 0.5% cream,	30	\$27.49
Divalproex 500 mg, DR	60	\$5.62
Erythro 500mg,	20	\$239.51
Levothyroxin 75mg	30	\$9.87
Aceta-Gesis 325 mg,	30	\$2.26
Amox.Clav 500mg,	20	\$11.15
Calcium Ex Antacid Tab,	30	\$0.63
Domeboro Pwd packet,	12 Pkts	\$6.71
Geri-Lanta Antacid Susp.,	355	\$1.42
Ibuprofen 800mg,	30	\$1.80
Med-Lyte tabs,	30	\$0.72
Mucinex 600MG,	20	\$4.92
Qvar 80 mcg inhalers,	8.7	\$215.02
Tenivac syringe, 0.5ml	1	\$28.24
Tolnaftate Cream,	28	\$1.87
Trimacin 0.1% Cr Lb,	454	\$14.34
Ventolin HFA inhaler,	18	\$43.11
Clobetasol cream 0.5%	30	\$27.49
Alvesco 160 mcg inhaler	6.1	\$123.22
Xopenex HFA inhaler	15	\$31.65

Litigation History
June 2013 – June 2018

CORRECTHEALTH has NEVER had verdict rendered against it in its eighteen (18) years of existence. Over the last five (5) years, CORRECTHEALTH has been named in 36 lawsuits filed by inmates / prisoners. Of these 36 cases, 16 have been dismissed with no payment being made to the Plaintiff / Patient, 6 have been confidentially settled, and 14 are being aggressively defended by in-house counsel and / or outside counsel.

Date Filed	Plaintiff	Type of Suit	Status
07/30/13	Eric Suffal	Medical Negligence	Dismissed
08/14/13	Albert Wilder	Deliberate Indifference	Settled
09/30/13	Jacoby Maize	Deliberate Indifference	Dismissed
01/21/14	John Spellman	Deliberate Indifference	Dismissed
02/20/14	Thomas Colardo	Deliberate Indifference	Pending
03/27/14	Chavis Bernard Poole	Deliberate Indifference	Settled
06/23/14	Patrick Spencer	Deliberate Indifference	Settled
08/11/14	Kenneth Grochowski	Deliberate Indifference	Pending
10/08/14	Joe Dent	Deliberate Indifference	Dismissed
11/14/14	Wendy Drucker	Deliberate Indifference	Settled
01/27/15	Claude Galmore	Deliberate Indifference	Dismissed
01/28/15	Tracy Griffith	Deliberate Indifference	Pending
02/03/15	Jesus Garcia	Medical Negligence	Dismissed
04/09/15	Dennis Laskey	Deliberate Indifference	Dismissed
05/20/15	Timothy Byrom	Medical Negligence	Dismissed
08/04/15	Brandon Branham	Deliberate Indifference	Settled
08/28/15	Stephen Womble	Deliberate Indifference	Dismissed
12/07/15	Lavester Mays	Deliberate Indifference	Dismissed
02/17/16	Peter Anthony Grandpre	Deliberate Indifference	Dismissed
03/16/16	Tyrone Whittington	Deliberate Indifference	Dismissed
03/21/16	Tracy Edward Johnson	Deliberate Indifference	Dismissed
04/18/16	Susan Carson	Medical Negligence	Pending
04/27/16	Jennifer James	Deliberate Indifference	Pending
08/19/16	Robert Weidman	Deliberate Indifference	Dismissed
12/01/16	Demetrie Jones	Deliberate Indifference	Settled
02/17/17	Braxton Rousell	Deliberate Indifference	Dismissed
03/06/17	Joseph Pershing Brown	Deliberate Indifference	Dismissed
05/26/17	Richard Fischer	Deliberate Indifference	Pending
09/20/17	Louis Fano	Deliberate Indifference	Pending
01/28/18	Dwight Harris	Deliberate Indifference	Pending
03/01/18	Woodrow Kavanagh	Deliberate Indifference	Pending
03/29/18	Jennifer Boutwell	Deliberate Indifference	Pending
04/09/18	Bryan Bright	Deliberate Indifference	Pending
04/25/18	Tiffani Woodward	Deliberate Indifference	Pending
05/11/18	Joshua Bowser	Deliberate Indifference	Pending
06/07/18	Tammy Gilleland	Medical Malpractice	Pending

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

June 28, 2018

Mr. Carlo A. Musso, MD
CorrectHealth Muscogee, LLC
3384 Peachtree Road, Suite 700
Atlanta, Georgia 30326

Subject: RFP No. 18-0022 – Inmate Medical & Pharmacy Services for Muscogee County Prison
(Annual Contract)

Dear Dr. Musso,

Thank you for your submittal in response to the subject Request for Proposals (RFP) for the Muscogee County Prison (MCP). The Evaluation Committee for RFP No. 18-0022 has completed its preliminary review and determined additional information is required:

1. Litigation History: Please thoroughly explain all litigation involving your firm, or any principal officers thereof, in connection with any contract for similar services. Include current lawsuits pending for allegations relating to inmate health care.
2. Common Medications: Included in the attached copy of Addendum No. 3 (page 1, Section A, Item 3) is a list of the most common medications dispensed to inmates at MCP. Please provide the cost that your proposed pharmacy provider will charge for each medication.
3. Telemedicine: Is there a fee for telemedicine?

Your response is respectfully requested no later than **Thursday, July 5, 2018**. Please submit your written response to the attention of Della Lewis via email dlewis@columbusga.org.

Sincerely,

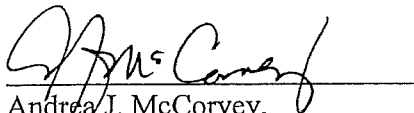

Andrea J. McCorvey,
Purchasing Division Manager

EXHIBIT F
Negotiation Documents

HEALTH SERVICES AGREEMENT

THIS HEALTH SERVICES AGREEMENT (hereinafter referred to as "AGREEMENT") by and between the COLUMBUS CONSOLIDATED GOVERNMENT (hereinafter referred to as "CITY"), acting by and through the Muscogee County Prison, and CORRECTHEALTH MUSCOGEE, LLC (hereinafter referred to as "COMPANY"), is entered into as of the _____ day of _____, _____ to be effective as set forth in Paragraph 6.1, below.

WITNESSETH:

WHEREAS, CITY is charged by law and pursuant to an annual agreement with the Georgia Department of Corrections (hereinafter referred to as DOC) with the responsibility for obtaining and providing certain reasonably necessary medical care for prisoners of the MUSCOGEE COUNTY PRISON (hereinafter called "PRISON") and,

WHEREAS, the CITY desires to provide for health care to prisoners in accordance with applicable law and its agreement with DOC; and,

WHEREAS, CITY desires to enter into this Agreement with COMPANY to promote this objective; and,

WHEREAS, COMPANY is in the business of providing correctional healthcare services under contract and desires to provide such services for the CITY under the express terms and conditions contained herein.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter made, the parties hereto agree as follows:

ARTICLE I: HEALTH CARE SERVICES

- 1.1 General Engagement. CITY hereby contracts with COMPANY to provide healthcare services to all prisoners under the custody and control of the Muscogee County Prison to include prisoners assigned to the PRISON by DOCs (hereinafter referred to as state offenders) as well as local offenders from the Muscogee County Court System held at the PRISON.
- 1.2 Scope of General Services. The responsibility of COMPANY for the healthcare of a prisoner commences with the commitment of a prisoner to the custody of the PRISON. COMPANY shall provide on a regular basis: nursing care, provider (physician and / or midlevel provider) care, dental care, tele-health, onsite emergency medical services, onsite laboratory studies, on-site radiology, medication administration, non-capital medical equipment, medical supplies, office supplies, and medical waste disposal, as set forth in COMPANY's Proposal dated May 18, 2018, in response to RFP No. 18-0022. COMPANY shall not be financially responsible for the cost of pharmaceuticals, on-site specialty care, off-site specialty care, hospitalizations, all other off-site healthcare, or ambulance services.
- 1.3 Pharmacy Management Services. COMPANY shall provide a pharmaceutical management program for the JAIL health services at no additional cost that shall include formulary and non-formulary oversight; prescribing, and dispensing of medications; recordkeeping and

the secure and proper storage of all medications in accordance with NCHC standards, JAIL policy and applicable law. Costs of the actual pharmaceutical products will be invoiced monthly and reimbursed to COMPANY by MCSO at its best-negotiated rate with no commission or management fee.

- 1.4 Specialty Care Services. When non-emergency specialty care is required and cannot be rendered at the PRISON, COMPANY will arrange with DOC staff for the transportation of the prisoners in accordance with Section 1.8 of this Agreement.
- 1.5 On-Site Emergency Services. COMPANY shall provide, at its own cost, on-site emergency medical care, as medically necessary.
- 1.6 Injuries Incurred Prior to Incarceration; Pregnancy. COMPANY will not be financially responsible for the cost of any medical treatment for health care services provided to any prisoner prior to the prisoner's commitment into the custody of the PRISON. Furthermore, COMPANY is not financially responsible for the cost of services outside the PRISON for any healthcare treatment or health care services provided to medically stabilize any prisoner presented at booking with a life threatening injury or illness or in immediate need of emergency medical care, if said prisoner is not in the custody of the PRISON.

Once it has been determined by COMPANY's intake medical personnel that the prisoner has been medically stabilized, and accepted by PRISON personnel into the custody of the PRISON, COMPANY will, commencing at that point, then become responsible for the medical treatment for health care services rendered at the PRISON, regardless of the nature of the illness or injury and whether or not the illness or injury occurred prior or subsequent to the individual's incarceration at the PRISON. A prisoner shall be considered medically stabilized when the patient's medical condition no longer requires immediate emergency medical care or outside hospitalization, and when any and/or all applicable medical clearances have been provided to the DOC personnel, so that the prisoner can reasonably be housed inside the PRISON.

It is expressly understood that COMPANY shall not be responsible for costs associated with the health care of any infants born to prisoners. COMPANY shall provide health care services to prisoners up to, though, and after the birth process, but health care services provided to an infant following birth, other than those services that may be delivered in the PRISON prior to transport to a hospital, will not be the financial responsibility of COMPANY. In any event, COMPANY shall not be responsible for the costs associated with the performing or furnishing of elective abortions.

- 1.7 Prisoners outside the Facility. The health care services contracted in the Agreement are intended only for those prisoners in the actual physical overnight custody of the PRISON. This does not include prisoners who are under guard in outside facilities. Such prisoners are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of COMPANY with respect to the payment or the furnishing of their health care services. Persons in the physical custody of other public safety or other law enforcement/penal jurisdictions at the request of CITY or PRISON are likewise excluded from the population

count and are not the responsibility of COMPANY for the furnishing or payment of health care services.

The cost of medical services provided to prisoners who become ill or are injured while on such temporary release, work release, or escape status will not be the responsibility of COMPANY. However, prisoners on work detail who are supervised by PRISON or other City law enforcement personnel and become injured will be the responsibility of COMPANY as long as they are returned to the PRISON to be treated by COMPANY personnel. These prisoners will be part of the daily census count.

- 1.8 Elective Medical Care. COMPANY is not responsible for providing elective medical care to prisoners. For purposes of the Agreement, "elective medical care" means medical care, which, if not provided, would not cause definite harm to the prisoner's well-being. PRISON, DOC where applicable and / or CITY must review any referral of prisoners for elective medical care prior to provision of such services.
- 1.7 Transportation Services. To the extent any prisoner requires off-site non-emergency health care treatment including, but not limited to, hospitalization care and specialty services, the PRISON or DOC will, upon request by COMPANY, provide transportation as reasonably available provided that such transportation is scheduled in advance. When medically necessary, COMPANY shall arrange for all emergency ambulance transportation of prisoners. COMPANY will not be financially responsible for the cost of ambulance services.
- 1.8 Utilization Management/Billing Adjudication: COMPANY shall provide utilization management services consisting of a prospective review, concurrent review, readmission review and retrospective review for offsite medical services. Such retrospective reviews shall be completed within 30 days of receipt of the invoice for the service. Upon completion of utilization management reviews, a copy of which shall be supplied to the Warden, COMPANY shall pay offsite medical providers on behalf of CITY and invoice CITY for reimbursement of the medical expenses paid by COMPANY. All approved offsite service invoices approved and paid by COMPANY will be billed for reimbursement on the next available monthly billing cycle, but in no event shall more than 90 days elapse between the receipt of an off-site invoice and its presentation to the CITY's Finance Department for payment unless it is placed on a list of disputed claims. The Warden and CCG shall be notified of all outstanding disputed claims on a monthly basis. With respect to any invoices pertaining to off-site services provided by Columbus Medical Center or its affiliates pursuant to a contract by and between the City and the Medical Center Hospital Authority of Columbus, Georgia for the provision of hospital care and certain referrals for care for prisoners dated as of July 1, 1992, as thereafter amended, COMPANY shall provide utilization review services described above, but it will make no payments and instead will, within 60 days from receipt of the invoice, forward approved charges to the Columbus, Georgia Finance Department for approval and payment pursuant to the terms of the contract referenced herein. COMPANY will follow applicable state laws and will keep the CITY and the Warden apprised of its utilization management practices. In addition, COMPANY will manage utilization of all medical services for state offenders in accordance with paragraph 3 of the CITY's annual agreement with DOC for the care of DOC prisoners.

- 1.9 Penalties for Non-compliance. The following are areas of concern that will be addressed with penalties for non-compliance. A period of ninety (90) days will be allotted from the first day of the medical contract to allow the vendor to make necessary adjustments and to correct these issues.

14 Day Health Assessments: Any health assessment not completed within the 14-day period will be assessed a penalty of \$50 for each health assessment not completed.

Sick Call Requests: Any urgent/emergent sick call request not addressed within 4 hours during normal business hours or 24 hours if outside of normal business hours, or any non-emergent sick call not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$10.00 per inmate request, per day until appropriately addressed.

Medical Grievances: Any Medical Grievance not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$25.00 per inmate request/grievance, per day until appropriately addressed.

Medication Distribution: ALL medication passes must be accomplished within the established timeframe dedicated to medication pass. Medication issue shall be conducted within a time as will not disrupt the patient's dosing schedule. Failure to accomplish a med pass for any reason is unacceptable and shall be considered a breach of contract and the Sheriff may elect to void the contract for medical services.

ARTICLE II: PERSONNEL

- 2.1 Staffing. COMPANY shall provide medical and support personnel reasonably necessary for the rendering of health care services to prisoners at the PRISON, as identified on Exhibit A, which is attached hereto. At the sole discretion of the COMPANY, some services may be provided via tele-health.
- 2.2 Licensure, Certification and Registration of Personnel. All personnel provided or made available by COMPANY to render services hereunder shall be licensed, certified or registered, in their respective areas of expertise as required by applicable Georgia law.
- 2.3 CITY's Satisfaction with Health Care Personnel. If the Warden or Deputy Warden of the PRISON becomes dissatisfied with any health care personnel provided by COMPANY hereunder, or by any independent contractor, subcontractor or assignee, COMPANY, in recognition of the sensitive nature of correctional services, shall, following receipt of written notice from the Warden or Deputy Warden of the PRISON of the grounds for such dissatisfaction and in consideration of the reasons therefore, exercise its best efforts to resolve the problem. If the problem is not resolved satisfactorily to the Warden or Deputy Warden of the PRISON, COMPANY shall remove or shall cause any independent contractor, subcontractor, or assignee to remove the individual about whom the DOC has expressed dissatisfaction. Should removal of an individual become necessary, COMPANY will be

allowed reasonable time, prior to removal, to find an acceptable replacement, without penalty or any prejudice to the interests of COMPANY.

- 2.4 Use of DOC Personnel and Prisoners in the Provision of Health Care Services. DOC personnel nor prisoners shall be employed or otherwise engaged by either COMPANY or DOC in the direct rendering of any health care services.
- 2.5 Subcontracting and Delegation. In order to discharge its obligations hereunder, COMPANY will engage certain health care professionals as independent contractors rather than as employees. CITY and DOC consent to such subcontracting or delegation. As the relationship between COMPANY and these health care professionals will be that of independent contractor, COMPANY will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. COMPANY will not exercise control over the manner or means by which these independent contractors perform their professional medical duties. However, COMPANY shall exercise administrative supervision over such professionals necessary to insure the strict fulfillment of the obligations contained in this Agreement. For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide MCSO proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor that satisfies the requirements set forth in Section 8.1 below.
- 2.6 Discrimination. During the performance of this Agreement, COMPANY, its employees, agents, subcontractors, and assignees agree as follows:
- a. None will discriminate against any employee or applicant for employment because of race, religion, color, gender or national origin, except where religion, gender or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor.
 - b. In all solicitations or advertisements for employees, each will state that it is an equal opportunity employer.
 - c. Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of the section.

ARTICLE III: REPORTS AND RECORDS

- 3.1 Medical Records. COMPANY shall cause and maintain complete and accurate medical records for each Prisoner who has received health care services. Each medical record will be maintained in accordance with applicable laws. The medical records shall be kept separate from the prisoner's confinement record. A complete legible copy of the applicable medical records shall be available at all times, to the Warden, as custodian of the person of the patient. Medical records shall be kept confidential. No information contained in the medical records shall be released by COMPANY except as provided by policy, by a court order, or otherwise in accordance with applicable law. COMPANY shall, at its own cost, provide all medical personnel necessary to maintain the medical records. At the termination of this Agreement, all medical records shall be delivered to and remain

with the PRISON. However, PRISON shall provide COMPANY with reasonable ongoing access to all pertinent medical records even after the termination of this Agreement for the purposes of defending or investigating litigation.

- 3.2 Regular Reports by COMPANY to CITY. COMPANY shall provide to PRISON and/or CITY, on a date and in a form mutually acceptable to COMPANY and CITY, monthly reports relating to services rendered under this Agreement.
- 3.3 Prisoner Information. Subject to the applicable Georgia law, in order to assist COMPANY in providing the best possible health care services to prisoners, DOC will provide COMPANY with information pertaining to prisoners that COMPANY and PRISON or DOC mutually identify as reasonable and necessary for COMPANY to adequately perform its obligations hereunder.
- 3.4 COMPANY Records Available to CITY with Limitations on Disclosure. COMPANY shall make available to CITY, at CITY's request, records, documents and other papers relating to the direct delivery of health care services to Prisoners hereunder. CITY understands that written operating policies and procedures employed by COMPANY in the performance of its obligations hereunder are propriety in nature and will remain the property of COMPANY and shall not be disclosed without written consent. Information concerning such may not, at any time, be used, distributed, copied or otherwise utilized by CITY or DOC, except in connection with the delivery of health care services hereunder, or as permitted or required by law, unless such disclosure is approved in advance writing by COMPANY. Proprietary information developed by COMPANY shall remain the property of COMPANY. Provided; however, MCSO will not be prevented from sharing such COMPANY as may be required by applicable provisions of the Georgia Open Records Act.
- 3.5 CITY Records Available to COMPANY with Limitations on Disclosure. During the term of this Agreement and for a reasonable time thereafter, CITY will provide COMPANY at COMPANY's request, CITY's records relating to the provision of health care services to prisoners as may be reasonably requested by COMPANY or as are pertinent to the investigation or defense of any claim related to COMPANY's conduct. Any such information provided by CITY to COMPANY that CITY considers confidential shall be kept confidential by COMPANY and shall not, except as may be required by law, be distributed to any third party without the prior written approval of the CITY .

ARTICLE IV: SECURITY

- 4.1 General. COMPANY and CITY understand that adequate security services are essential and necessary for the safety of the agents, employees, and subcontractors of COMPANY as well as for the security of prisoners and PRISON personnel, consistent with the correctional setting. PRISON personnel will take all reasonable steps to provide sufficient security to enable COMPANY to safely and adequately provide the health care services described in this Agreement. It is expressly understood by CITY and COMPANY that the provision of security and safety for the COMPANY personnel is a continuing precondition of COMPANY's obligation to provide its services in a routine, timely, and proper fashion. This provision, however shall not be considered to and shall not be construed to be a waiver of

any defense, including sovereign or official immunity, to any claim against CITY, PRISON, or DOC by a prisoner, employee of company or any other person in anyway whatsoever.

- 4.2 Security During Transportation Off-Site. PRISON or DOC will provide prompt and timely security as medically necessary and appropriate in connection with the transportation of any prisoner between the PRISON and any other location for off-site services as contemplated herein.

ARTICLE V: OFFICE SPACE, EQUIPMENT, INVENTORY AND SUPPLIES

- 5.1 General. CITY, through the PRISON budget, agrees to provide COMPANY with reasonable and adequate office and medical space, facilities, and telephone equipment with dedicated line in the medical area. COMPANY will obtain, with the assistance of CITY, secured internet access (minimum speeds 3MB down/3MB up) with a static public IP address as required for high definition telehealth. This internet connection will be for sole and exclusive use by COMPANY. CITY will pay for utilities (e.g. gas, electric, water). Further, CITY will provide necessary maintenance and housekeeping of the office space and facilities. COMPANY will be responsible for the cost of phone lines, as well as phone usage, including long distance.

With regard to telemedicine, COMPANY will provide for all necessary equipment and any necessary internet / connection line, as set forth above.

COMPANY will provide medical and office supplies used in the healthcare delivery system administered at the PRISON. This includes medical supplies, medical records, office supplies, and forms. COMPANY will also provide for all non-capital medical equipment (i.e. less than \$500). CITY will be responsible for any capital medical equipment (i.e. more than \$500).

- 5.2 Delivery of Possession. CITY will provide to COMPANY beginning on the date of commencement of this Agreement, possession and control of all medical and office equipment and supplies in place at the PRISON's health care unit.

At the commencement of service by COMPANY an inventory of all supplies, medical and office equipment as described herein will be completed in writing by CITY personnel. This inventory will be reviewed and approved in writing by the authorized agent of the CITY as well as the COMPANY.

At the termination of this or any subsequent Agreement, COMPANY will return to the CITY possession and control all supplies, medical and office equipment, in working order, reasonable wear and tear accepted, which were in place at the PRISON's health care unit prior to the commencement of services under this Agreement. Any such return will require written confirmation, executed by the Warden of the PRISON, for proper acceptance.

ARTICLE VI: TERM AND TERMINATION OF AGREEMENT

- 6.1 Initial Term. The initial term of this Agreement will be two (2) years, from October 1, 2018 through September 30, 2020. This Agreement is renewable under the terms set forth in

Exhibit B for three additional one year terms, upon delivery of written notice of intent to renew provided to COMPANY at least ninety (90) days prior to the expiration of the then-existing term.

6.2 Termination. This Agreement may be terminated as otherwise provided in this Agreement or as follows:

- a. Termination by Agreement. In the event that each of the parties mutually agrees in writing, this Agreement may be terminated on the terms and date stipulated therein.
- b. Termination by Cancellation. This Agreement may be canceled, without cause, by either party upon ninety (90) days prior written notice in accordance with Section 9.3 this Agreement.

6.3 Responsibility for Prisoner Health Care. Upon termination of this Agreement, all responsibility for providing health care services to all prisoners, including prisoners receiving health care services at sites outside the PRISON will be transferred from COMPANY to CITY.

ARTICLE VII: COMPENSATION

7.1 Base Compensation & Per Diem Compensation. CITY will pay COMPANY as indicated on Exhibit B. This compensation level assumes a maximum prisoner population of 600 prisoners.

COMPANY will invoice CITY during the month prior to the month of service. CITY agree to pay COMPANY within thirty (30) days of receipt of the invoice provided that the invoice is properly documented and not disputed. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to COMPANY will be prorated accordingly for the shortened month.

7.2 Per Diem. When the daily prisoner census exceeds 600, CITY agrees to compensate COMPANY a per diem rate (cost per prisoner per day) for each prisoner in excess of 600, as referenced on Exhibit B.

This per diem is intended to cover additional costs in those instances where minor, short-term increases in the prisoner population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the prisoner population increases to more than 600 prisoners. As such, if the census increases by 20% and is sustained, the parties agree to negotiate in good faith for additional staffing and associated compensation in order to continue to provide services to the increased number of prisoners and maintain the quality of care consistent with COMPANY's Proposal and this Agreement.

7.3 Prisoners from Other Jurisdictions. Medical care rendered within the PRISON to prisoners from outside jurisdictions, and housed in the PRISON pursuant to written contracts between CITY / DOC and such other jurisdictions or the State of Georgia, or by statute, will be the responsibility of COMPANY but as limited by this Agreement. Medical care that

cannot be rendered within the PRISON will be arranged by COMPANY and the costs of such care subject to reimbursement by the other jurisdiction, the State of Georgia, or CITY / DOC. This Section does not apply to sentenced felons awaiting transfer to State facilities or prisoners housed in the PRISON on ex parte orders. COMPANY shall directly bill other counties for onsite professional medical fees, supplies, tests and medications. COMPANY will forward other bills for offsite healthcare and program support services provided to other jurisdictions housing prisoners in the PRISON. A nominal standard fee schedule will be utilized and is available upon request. CITY agree to assist COMPANY with these billing activities.

- 7.4 Compensation Escalator. On each subsequent annual renewal, the compensation paid to COMPANY, including base compensation and per diem rate, shall be adjusted by the current Consumer Price Index-Wage Earners and Clerical Workers (CPI-W), Medical Care Component (MCC) for the Southern Region of the United States.
- 7.5 Change in Standard of Care or Scope in Services. The price in Section 7.1, above, quoted reflects the scope of services as outlined herein and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g. treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in the contract price and would need to be negotiated with the CITY. Further, if the mission and/or purpose of the PRISON changes substantially, the CITY agrees to negotiate with COMPANY in good faith for any change in services.

ARTICLE VIII: LIABILITY AND RISK MANAGEMENT

- 8.1 Insurance. At all times during this Agreement, COMPANY shall maintain professional liability insurance covering COMPANY, and naming CITY as additional insureds, for its work at the PRISON with limits of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the aggregate. Upon request, COMPANY shall provide a Certificate of Insurance to CITY.
- 8.2 Indemnification. COMPANY shall indemnify, defend and hold MCSO and CCG harmless from and against any and all claims, actions, lawsuits, damages, judgments, or liabilities of any sort, including attorney's fees, against MCSO and/or CCG based on COMPANY's performance of its obligations hereunder including performance of such obligations by any contractor selected by COMPANY; provided, however, that COMPANY will not be responsible for any claim arising out of MCSO or their employee or agent preventing an inmate from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured inmate to COMPANY for treatment.

ARTICLE IX: MISCELLANEOUS

- 9.1 Independent Contractor Status. The parties acknowledge that COMPANY is an independent contractor engaged to provide health care to Prisoners at the PRISON under

the direction of COMPANY management. Nothing in this Agreement is intended nor shall be construed to create an agency relationship, an employer - employee relationship, or a joint venture relationship between the parties.

- 9.2 Notice. Unless otherwise provided herein, all notices or other communications required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been duly given if delivered personally in hand or sent by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following address or to the other person at any other address as may be designated in writing by the parties:

(a) CITY:	<u>Columbus Consolidated Government</u> <u>Attn. City Manager, Isaiah Hugley</u> <u>P.O.Box 1340</u> <u>Columbus, GA 31902</u>
	<u>Muscogee County Prison</u> <u>Attn. Warden Dwight Hamrick</u> <u>P.O. Box 84041</u> <u>Columbus, GA 31908-4041</u>
(b) COMPANY:	<u>CorrectHealth Muscogee, LLC</u> <u>ATTN: Carlo A. Musso, M.D.</u> <u>3384 Peachtree Road, NE, Suite 700</u> <u>Atlanta, GA 30326</u>

Notices shall be effective upon receipt regardless of the form used.

- 9.3 Entire Agreement. This Agreement is part of a procurement contract file for Procurement No. 18-0022 "the Contract" which constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. To the extent they are in conflict, provisions contained in the initial Request for Proposals, as amended, will govern. No modifications or amendment to the Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto.
- 9.3 Amendment. This Agreement may be amended or revised only in writing and signed by all parties.
- 9.4 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be constructed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 9.5 Other contracts and Third-Party Beneficiaries. The parties acknowledge that COMPANY is neither bound by nor aware of any other existing contracts to which CITY is a party and which relate to the providing of medical care to prisoners at the PRISON. The parties agree

that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that the Agreement is intended to be for their respective benefit only and not for the benefit of others who might otherwise be deemed to constitute third-party beneficiaries hereof.

- 9.6 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement which shall remain in full force and effect and enforceable in accordance with its terms.
- 9.7 Cooperation. On and after the date of this Agreement, each party shall, at the request of the other, make, execute and deliver or obtain and deliver all instruments and documents and shall do or cause to be done all such other things which either party may reasonable require to effectuate the provisions and intentions of this Agreement.
- 9.8 Time of Essence. Time is and shall be of the essence of this Agreement.
- 9.9 Authority. The parties signing this Agreement hereby state that they have the authority to bind the entity on whose behalf they are signing.
- 9.10 Binding Effect. This Agreement shall be binding upon the parties hereto, their heirs, administrators, executors, successors and assigns.
- 9.11 Cumulative Powers. Except as expressly limited by the terms of this Agreement, all rights, power and privileges conferred hereunder shall be cumulative and not restrictive of those provided at law or in equity.
- 9.12 Governing Law. This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Georgia, except as specifically noted.
- 9.13 Jurisdiction and Venue. Should any disputes regarding this Agreement arise and require legal action, the proper jurisdiction and venue for said legal action will be Muscogee County, Georgia.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by and through their duly authorized officers, the day, month and year given below.

COLUMBUS CONSOLIDATED GOVERNMENT ("CITY")

By: _____
Title: _____
Print Name: _____
Date: _____

MUSCOGEE COUNTY PRISON

By: _____
Title: _____
Print Name: _____

Date: _____

CORRECTHEALTH MUSCOGEE, LLC ("COMPANY")

By: _____

Title: _____

Print Name: _____

Date: _____

EXHIBIT A – STAFFING

PROVIDER	FTE	Hours / Week
Medical Director *	0.20	8
Midlevel Provider *	0.20	8
Health Services Administrator	1.00	40
Administrative Assistant	1.00	40
LPN	5.20	208
Dentist	0.10	4
Optometrist	0.10	4
X-Ray Technician	0.025	1
TOTALS	7.825	313

** May be provided on-site and/or via tele-medicine, at the discretion of COMPANY.*

Exhibit B – Compensation

Effective Dates	Annual Compensation	Monthly Compensation	Per Diem Rate
10/01/18 – 09/30/19	\$646,817.48	\$53,901.46	\$1.05
10/01/19 – 09/30/20	\$662,987.91	\$55,248.99	\$1.08
10/01/20 – 09/30/21	\$679,562.61	\$56,630.22	\$1.10
10/01/21 – 09/30/22	\$696,551.68	\$58,045.97	\$1.13
10/01/22 – 09/30/23	\$713,965.47	\$59,497.12	\$1.16

Della Lewis

From: Stacy Scott <stacy.scott@correcthealth.org>
Sent: Wednesday, October 3, 2018 2:17 PM
To: Della Lewis; Lucy Sheftall
Cc: Andrea McCorvey
Subject: RE: Prison and Jail contracts
Attachments: ContractColumbusMuscogeePrison181003.docx

Importance: High

Della and Lucy,
Here is the revised Contract for the Prison, which adds in the weekend nursing.

I still need to get the contact information for the Jail Contract (for the notice section).

Once these items are received/approved, I think we are good to go.

Stacy M. Scott, Esq., Chief Legal Officer
CorrectHealth Companies
Lenox Plaza ▪ 3384 Peachtree Road, N.E. ▪ Suite 700 ▪ Atlanta, GA 30326
Main: 770.692.4750 ▪ Direct: 770.692.4758 ▪ Cell: 770.608.9315 ▪ Legal Fax: 770.692.9379

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From: Stacy Scott
Sent: Thursday, September 27, 2018 4:47 PM
To: 'Della Lewis' <DLewis@columbusga.org>; 'Lucy Sheftall' <LSheftall@columbusga.org>
Cc: 'Andrea McCorvey' <AMcCorvey@columbusga.org>
Subject: RE: Prison and Jail contracts

Thanks. I will get this to Carlo, so he can review and adjust our staffing and compensation. I'll get it to you as soon as I can.

Stacy M. Scott, Esq., Chief Legal Officer
CorrectHealth Companies
Lenox Plaza ▪ 3384 Peachtree Road, N.E. ▪ Suite 700 ▪ Atlanta, GA 30326
Main: 770.692.4750 ▪ Direct: 770.692.4758 ▪ Cell: 770.608.9315 ▪ Legal Fax: 770.692.9379

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From: Della Lewis [<mailto:DLewis@columbusga.org>]

Sent: Thursday, September 27, 2018 4:45 PM

To: Stacy Scott <stacy.scott@correcthealth.org>; Lucy Sheftall <LSheftall@columbusga.org>

Cc: Andrea McCorvey <AMcCorvey@columbusga.org>

Subject: RE: Prison and Jail contracts

Stacy,

This is the information provided by MCP: *Under the previous contract, one medical staff member, RN or LPN was on call for 48 hours beginning 1159 on Friday night until 1159 Sunday night. The duties included coming in twice daily on both Saturday and Sunday and administer medications. GDC SOP only allow medical staff to administer medication. They would also see in sick calls that would need immediate attention. They would spend approximately 2 hours per trip, 4 hours daily, 8 hours for two day weekends. Muscogee County Prison would like to continue this service.*

Please let me know if you require additional information.

Thanks,
Della

Della Lewis, CPPB
Buyer Specialist
Columbus Consolidated Government
Finance Department | Purchasing Division
100 10th Street, 5th Floor | Columbus GA 31901
706.225.3072 | dlewis@columbusga.org
[Procurement Opportunities](#)

From: Stacy Scott <stacy.scott@correcthealth.org>

Sent: Thursday, September 27, 2018 4:42 PM

To: Lucy Sheftall <LSheftall@columbusga.org>

Cc: Della Lewis <DLewis@columbusga.org>; Andrea McCorvey <AMcCorvey@columbusga.org>

Subject: RE: Prison and Jail contracts

Thanks so much, Lucy. I think we are close. I have accepted all of the changes to both contracts. However, could you please provide me with the contact information for the Notice provision in the Jail contract.

Lastly, as you may or may not be aware, we recently learned of weekend nursing coverage at the Prison, that was not in the RFP; therefore, not in our Proposal/Contract. It is our understanding that Warden Hamrick and Deputy Warden Hill have advised they wish to maintain this coverage. I believe that Della was going to check with the Prison Administration to see if they did, in fact, want to maintain this coverage. If so, we will need to adjust the staffing and compensation. Please advise.

Stacy M. Scott, Esq., Chief Legal Officer

CorrectHealth Companies

Lenox Plaza ▪ 3384 Peachtree Road, N.E. ▪ Suite 700 ▪ Atlanta, GA 30326

Main: 770.692.4750 ▪ Direct: 770.692.4758 ▪ Cell: 770.608.9315 ▪ Legal Fax: 770.692.9379

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From: Lucy Sheftall [<mailto:LSheftall@columbusga.org>]

Sent: Wednesday, September 26, 2018 5:02 PM

To: Stacy Scott <stacy.scott@correcthealth.org>

Cc: Della Lewis <DLewis@columbusga.org>; Andrea McCorvey <AMcCorvey@columbusga.org>

Subject: Prison and Jail contracts

Stacy:

Here are my final revisions to the Jail and Prison contracts. The Prison revisions merely incorporate the same provisions you agreed to for the Jail where appropriate to the Prison. Feel free to call if you have any questions. You should be able to accept those last changes and get finals for signature. I am also attaching the other agreement concerning hospital care that you asked for as well as the annual contract between DOC and CCG which I reference in our agreement, Let me know if there is anything else you need.

Lucy T. Sheftall

Assistant City Attorney

P.O. Box 1340, Columbus, Georgia 31902

100 Tenth Street, Columbus, Georgia 31901

(706) 653-4025 phone

(706) 653-4023 fax

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HEALTH SERVICES AGREEMENT

THIS HEALTH SERVICES AGREEMENT (hereinafter referred to as "AGREEMENT") by and between the COLUMBUS CONSOLIDATED GOVERNMENT (hereinafter referred to as "CITY"), acting by and through the Muscogee County Prison, -and CORRECTHEALTH MUSCOGEE, LLC (hereinafter referred to as "COMPANY"), is entered into as of the _____ day of _____, _____ to be effective as set forth in Paragraph 6.1, below.

WITNESSETH:

WHEREAS, CITY is charged by law and pursuant to an annual agreement with the Georgia Department of Corrections (hereinafter referred to as DOC) with the responsibility for obtaining and providing certain reasonably necessary medical care for prisoners of the MUSCOGEE COUNTY PRISON (hereinafter called "PRISON") and,

WHEREAS, the CITY desires to provide for health care to prisoners in accordance with applicable law and its agreement with DOC; and,

WHEREAS, CITY desires to enter into this Agreement with COMPANY to promote this objective; and,

WHEREAS, COMPANY is in the business of providing correctional healthcare services under contract and desires to provide such services for the CITY under the express terms and conditions contained herein.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter made, the parties hereto agree as follows:

ARTICLE I: HEALTH CARE SERVICES

1.1 General Engagement. CITY hereby contracts with COMPANY to provide healthcare services to all prisoners under the custody and control of the Muscogee County Prison to include prisoners assigned to the PRISON by DOC Georgia Department of Corrections (hereinafter referred to as DOC) state offenders) -as well as local offenders from the Muscogee County Court System held at the PRISON.

1.2 Scope of General Services. The responsibility of COMPANY for the healthcare of a prisoner commences with the commitment of a prisoner to the custody of the PRISON. COMPANY shall provide on a regular basis: nursing care, provider (physician and / or midlevel provider) care, dental care, tele-health, onsite emergency medical services, onsite laboratory studies, on-site radiology, medication administration, non-capital medical equipment, medical supplies, office supplies, and medical waste disposal, as set forth in COMPANY's Proposal dated May 18, 2018, in response to RFP No. 18-0022. COMPANY shall not be financially responsible for the cost of pharmaceuticals, on-site specialty care, off-site specialty care, hospitalizations, all other off-site healthcare, or ambulance services.

1.2.3 Pharmacy Management Services. COMPANY shall provide a pharmaceutical management program for the JAIL health services at no additional cost that shall include formulary and

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non-formulary oversight; prescribing, and dispensing of medications; recordkeeping and the secure and proper storage of all medications in accordance with NCHC standards, JAIL policy and applicable law. Costs of the actual pharmaceutical products will be invoiced monthly and reimbursed to COMPANY by MCSO at its best-negotiated rate with no commission or management fee.

- 1.43 Specialty Care Services. When non-emergency specialty care is required and cannot be rendered at the PRISON, COMPANY will arrange with DOC staff for the transportation of the prisoners in accordance with Section 1.8 of this Agreement.
- 1.54 On-Site Emergency Services. COMPANY shall provide, at its own cost, on-site emergency medical care, as medically necessary.
- 1.5 Injuries Incurred Prior to Incarceration; Pregnancy. COMPANY will not be financially responsible for the cost of any medical treatment for health care services provided to any prisoner prior to the prisoner's commitment into the custody of the PRISON. Furthermore, COMPANY is not financially responsible for the cost of services outside the PRISON for any healthcare treatment or health care services provided to medically stabilize any prisoner presented at booking with a life threatening injury or illness or in immediate need of emergency medical care, if said prisoner is not in the custody of the PRISON.

Once it has been determined by COMPANY's intake medical personnel that the prisoner has been medically stabilized, and accepted by ~~DOC~~PRISON personnel into the custody of the PRISON, COMPANY will, commencing at that point, then become responsible for the medical treatment for health care services rendered at the PRISON, regardless of the nature of the illness or injury and whether or not the illness or injury occurred prior or subsequent to the individual's incarceration at the PRISON. A prisoner shall be considered medically stabilized when the patient's medical condition no longer requires immediate emergency medical care or outside hospitalization, and when any and/or all applicable medical clearances have been provided to the DOC personnel, so that the prisoner can reasonably be housed inside the PRISON.

It is expressly understood that COMPANY shall not be responsible for costs associated with the health care of any infants born to prisoners. COMPANY shall provide health care services to prisoners up to, though, and after the birth process, but health care services provided to an infant following birth, other than those services that may be delivered in the PRISON prior to transport to a hospital, will not be the financial responsibility of COMPANY. In any event, COMPANY shall not be responsible for the costs associated with the performing or furnishing of elective abortions.

- 1.6 Prisoners outside the Facility. The health care services contracted in the Agreement are intended only for those prisoners in the actual physical overnight custody of the PRISON. This does not include prisoners who are under guard in outside facilities. Such prisoners are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of COMPANY with respect to the payment or the furnishing of their health care services. Persons in the physical custody of other public safety or other law enforcement/penal jurisdictions at the request of CITY or ~~DOC~~PRISON are likewise excluded from the

population count and are not the responsibility of COMPANY for the furnishing or payment of health care services.

The cost of medical services provided to prisoners who become ill or are injured while on such temporary release, work release, or escape status will not be the responsibility of COMPANY. However, prisoners on work detail who are supervised by ~~PRISON DOC~~ or other City law enforcement personnel and become injured will be the responsibility of COMPANY as long as they are returned to the PRISON to be treated by COMPANY personnel. These prisoners will be part of the daily census count.

- 1.7 Elective Medical Care. COMPANY is not responsible for providing elective medical care to prisoners. For purposes of the Agreement, "elective medical care" means medical care, which, if not provided, would not cause definite harm to the prisoner's well-being. PRISON, DOC where applicable and / or CITY must review any referral of prisoners for elective medical care prior to provision of such services.
- 1.8 Transportation Services. To the extent any prisoner requires off-site non-emergency health care treatment including, but not limited to, hospitalization care and specialty services, the PRISON or DOC will, upon request by COMPANY, provide transportation as reasonably available provided that such transportation is scheduled in advance. When medically necessary, COMPANY shall arrange for all emergency ambulance transportation of prisoners. COMPANY will not be financially responsible for the cost of ambulance services.
- 1.9 -Utilization Management/Billing Adjudication: COMPANY shall provide utilization management services consisting of a prospective review, concurrent review, readmission review and retrospective review for offsite medical services. Such retrospective reviews shall be completed within 30 days of receipt of the invoice for the service. Upon completion of utilization management reviews, a copy of which shall be supplied to the Warden, COMPANY shall pay offsite medical providers on behalf of CITY and invoice CITY for reimbursement of the medical expenses paid by COMPANY. All approved offsite service invoices approved and paid by COMPANY will be billed for reimbursement on the next available monthly billing cycle, but in no event shall more than 90 days elapse between the receipt of an off-site invoice and its presentation to the CITY's Finance Department for payment unless it is placed on a list of disputed claims. The Warden and CCG shall be notified of all outstanding disputed claims on a monthly basis. With respect to any invoices pertaining to off-site services provided by Columbus Medical Center or its affiliates pursuant to a contract by and between the City and the Medical Center Hospital Authority of Columbus, Georgia for the provision of hospital care and certain referrals for care for prisoners dated as of July 1, 1992, as thereafter amended, COMPANY shall provide utilization review services described above, but it will make no payments and instead will, within 60 days from receipt of the invoice, forward approved charges to the Columbus, Georgia Finance Department for approval and payment pursuant to the terms of the contract referenced herein. COMPANY will follow applicable state laws and will keep the CITY and the Warden apprised of its utilization management practices. In addition, COMPANY will manage utilization of all medical services for state offenders in accordance with paragraph 3 of the CITY's annual agreement with DOC for the care of DOC prisoners.

1.10 Penalties for Non-compliance. The following are areas of concern that will be addressed with penalties for non-compliance. A period of ninety (90) days will be allotted from the first day of the medical contract to allow the vendor to make necessary adjustments and to correct these issues.

7 Day Health Assessments: Any health assessment not completed within the 14-day period will be assessed a penalty of \$50 for each health assessment not completed.

Sick Call Requests: Any urgent/emergent sick call request not addressed within 4 hours during normal business hours or 24 hours if outside of normal business hours, or any non-emergent sick call not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$10.00 per inmate request, per day until appropriately addressed.

Medical Grievances: Any Medical Grievance not addressed within 72 hours, will be assessed a penalty for non-compliance at the rate of \$25.00 per inmate request/grievance, per day until appropriately addressed.

Medication Distribution: ALL medication passes must be accomplished within the established timeframe dedicated to medication pass. Medication issue shall be conducted within a time as will not disrupt the patient's dosing schedule. Failure to accomplish a med pass for any reason is unacceptable and shall be considered a breach of contract and the Sheriff may elect to void the contract for medical services.

ARTICLE II: PERSONNEL

- 2.1 Staffing. COMPANY shall provide medical and support personnel reasonably necessary for the rendering of health care services to prisoners at the PRISON, as identified on Exhibit A, which is attached hereto. At the sole discretion of the COMPANY, some services may be provided via tele-health.
- 2.2 Licensure, Certification and Registration of Personnel. All personnel provided or made available by COMPANY to render services hereunder shall be licensed, certified or registered, in their respective areas of expertise as required by applicable Georgia law.
- 2.3 CITY's Satisfaction with Health Care Personnel. If the Warden or Deputy Warden of the PRISON becomes dissatisfied with any health care personnel provided by COMPANY hereunder, or by any independent contractor, subcontractor or assignee, COMPANY, in recognition of the sensitive nature of correctional services, shall, following receipt of written notice from the Warden or Deputy Warden of the PRISON of the grounds for such dissatisfaction and in consideration of the reasons therefore, exercise its best efforts to resolve the problem. If the problem is not resolved satisfactorily to the Warden or Deputy Warden of the PRISON, COMPANY shall remove or shall cause any independent contractor, subcontractor, or assignee to remove the individual about whom the DOC has expressed

dissatisfaction. Should removal of an individual become necessary, COMPANY will be allowed reasonable time, prior to removal, to find an acceptable replacement, without penalty or any prejudice to the interests of COMPANY.

- 2.4 Use of DOC Personnel and Prisoners in the Provision of Health Care Services. DOC personnel nor prisoners shall be employed or otherwise engaged by either COMPANY or DOC in the direct rendering of any health care services.

- 2.5 Subcontracting and Delegation. In order to discharge its obligations hereunder, COMPANY will engage certain health care professionals as independent contractors rather than as employees. CITY and DOC consent to such subcontracting or delegation. As the relationship between COMPANY and these health care professionals will be that of independent contractor, COMPANY will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. COMPANY will not exercise control over the manner or means by which these independent contractors perform their professional medical duties. However, COMPANY shall exercise administrative supervision over such professionals necessary to insure the strict fulfillment of the obligations contained in this Agreement. ~~For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide CITY proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor.~~ For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide MCSO proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor that satisfies the requirements set forth in Section 8.1 below.

2.5

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- 2.6 Discrimination. During the performance of this Agreement, COMPANY, its employees, agents, subcontractors, and assignees agree as follows:
- None will discriminate against any employee or applicant for employment because of race, religion, color, gender or national origin, except where religion, gender or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor.
 - In all solicitations or advertisements for employees, each will state that it is an equal opportunity employer.
 - Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of the section.

ARTICLE III: REPORTS AND RECORDS

- 3.1 Medical Records. COMPANY shall cause and maintain complete and accurate medical records for each Prisoner who has received health care services. Each medical record will be maintained in accordance with applicable laws. The medical records shall be kept separate from the prisoner's confinement record. A complete legible copy of the applicable medical records shall be available at all times, to the Warden, as custodian of

the person of the patient. Medical records shall be kept confidential. No information contained in the medical records shall be released by COMPANY except as provided by policy, by a court order, or otherwise in accordance with applicable law. COMPANY shall, at its own cost, provide all medical personnel necessary to maintain the medical records. At the termination of this Agreement, all medical records shall be delivered to and remain with the PRISON-DOC. However, PRISONCITY and/or DOC shall provide COMPANY with reasonable ongoing access to all pertinent medical records even after the termination of this Agreement for the purposes of defending or investigating litigation.

- 3.2 Regular Reports by COMPANY to CITY. ~~If requested,~~ COMPANY shall provide to PRISON and/or CITY, on a date and in a form mutually acceptable to COMPANY and CITY, monthly reports relating to services rendered under this Agreement.
- 3.3 Prisoner Information. Subject to the applicable Georgia law, in order to assist COMPANY in providing the best possible health care services to prisoners, DOC will provide COMPANY with information pertaining to prisoners that COMPANY and PRISON or DOC mutually identify as reasonable and necessary for COMPANY to adequately perform its obligations hereunder.
- 3.4 COMPANY Records Available to CITY with Limitations on Disclosure. COMPANY shall make available to CITY, at CITY's request, records, documents and other papers relating to the direct delivery of health care services to Prisoners hereunder. CITY understands that written operating policies and procedures employed by COMPANY in the performance of its obligations hereunder are propriety in nature and will remain the property of COMPANY and shall not be disclosed without written consent. Information concerning such may not, at any time, be used, distributed, copied or otherwise utilized by CITY or DOC, except in connection with the delivery of health care services hereunder, or as permitted or required by law, unless such disclosure is approved in advance writing by COMPANY. Proprietary information developed by COMPANY shall remain the property of COMPANY. Provided; however, MCSO will not be prevented from sharing such COMPANY as may be required by applicable provisions of the Georgia Open Records Act.
- 3.5 CITY Records Available to COMPANY with Limitations on Disclosure. During the term of this Agreement and for a reasonable time thereafter, CITY will provide COMPANY at COMPANY's request, CITY's records relating to the provision of health care services to prisoners as may be reasonably requested by COMPANY or as are pertinent to the investigation or defense of any claim related to COMPANY's conduct. Any such information provided by CITY to COMPANY that CITY considers confidential shall be kept confidential by COMPANY and shall not, except as may be required by law, be distributed to any third party without the prior written approval of the CITY.

ARTICLE IV: SECURITY

- 4.1 General. COMPANY and CITY understand that adequate security services are essential and necessary for the safety of the agents, employees, and subcontractors of COMPANY as well as for the security of prisoners and PRISON personnel, consistent with the correctional setting. ~~DOC~~PRISON personnel will take all reasonable steps to provide sufficient security to enable COMPANY to safely and adequately provide the health care services described

in this Agreement. It is expressly understood by CITY and COMPANY that the provision of security and safety for the COMPANY personnel is a continuing precondition of COMPANY's obligation to provide its services in a routine, timely, and proper fashion. This provision, however shall not be considered to and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY, PRISON, or DOC by a prisoner, employee of company or any other person in anyway whatsoever.

- 4.2 Security During Transportation Off-Site. PRISON or DOC will provide prompt and timely security as medically necessary and appropriate in connection with the transportation of any prisoner between the PRISON and any other location for off-site services as contemplated herein.

ARTICLE V: OFFICE SPACE, EQUIPMENT, INVENTORY AND SUPPLIES

- 5.1 General. CITY, through the PRISON budget, agrees to provide COMPANY with reasonable and adequate office and medical space, facilities, and telephone equipment with dedicated line in the medical area. COMPANY will obtain, with the assistance of CITY, secured internet access (minimum speeds 3MB down/3MB up) with a static public IP address as required for high definition telehealth. This internet connection will be for sole and exclusive use by COMPANY. CITY will pay for utilities (e.g. gas, electric, water). Further, CITY will provide necessary maintenance and housekeeping of the office space and facilities. COMPANY will be responsible for the cost of phone lines, as well as phone usage, including long distance.

With regard to telemedicine, COMPANY will provide for all necessary equipment and any necessary internet / connection line, as set forth above.

COMPANY will provide medical and office supplies used in the healthcare delivery system administered at the PRISON. This includes medical supplies, medical records, office supplies, and forms. COMPANY will also provide for all non-capital medical equipment (i.e. less than \$500). CITY will be responsible for any capital medical equipment (i.e. more than \$500).

- 5.2 Delivery of Possession. CITY will provide to COMPANY beginning on the date of commencement of this Agreement, possession and control of all medical and office equipment and supplies in place at the PRISON's health care unit.

At the commencement of service by COMPANY an inventory of all supplies, medical and office equipment as described herein will be completed in writing by CITY personnel. This inventory will be reviewed and approved in writing by the authorized agent of the CITY as well as the COMPANY.

At the termination of this or any subsequent Agreement, COMPANY will return to the CITY possession and control all supplies, medical and office equipment, in working order, reasonable wear and tear accepted, which were in place at the PRISON's health care unit prior to the commencement of services under this Agreement. Any such return will require written confirmation, executed by the Warden of the PRISON, for proper acceptance.

ARTICLE VI: TERM AND TERMINATION OF AGREEMENT

6.1 Initial Term. The initial term of this Agreement will be two (2) years, from October 1, 2018 through September 30, 2020. This Agreement is renewable under the terms set forth in Exhibit B for three additional one year terms, upon delivery of written notice of intent to renew provided to COMPANY at least ninety (90) days prior to the expiration of the then-existing term.

~~6.1 The initial term of this Agreement will be five (5) years, from October 1, 2018 through September 30, 2023. This Agreement is renewable under like terms for additional years, subject to negotiation of the service component and agreed upon compensation adjustments, including compensation escalator as set forth in Section 7.4 below, unless either party delivers written notice of non-renewal to the other party at least ninety (90) days prior to the expiration of the then-existing term.~~

6.2 Termination. This Agreement may be terminated as otherwise provided in this Agreement or as follows:

- a. Termination by Agreement. In the event that each of the parties mutually agrees in writing, this Agreement may be terminated on the terms and date stipulated therein.
- b. Termination by Cancellation. This Agreement may be canceled, without cause, by either party upon ninety (90) days prior written notice in accordance with Section 9.3 this Agreement.

6.3 Responsibility for Prisoner Health Care. Upon termination of this Agreement, all responsibility for providing health care services to all prisoners, including prisoners receiving health care services at sites outside the PRISON, will be transferred from COMPANY to CITY.

ARTICLE VII: COMPENSATION

7.1 Base Compensation & Per Diem Compensation. CITY will pay COMPANY as indicated on Exhibit B. This compensation level assumes a maximum prisoner population of 600 prisoners.

COMPANY will invoice CITY during the month prior to the month of service. CITY agree to pay COMPANY within thirty (30) days of receipt of the invoice provided that the invoice is properly documented and not disputed. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to COMPANY will be prorated accordingly for the shortened month.

7.2 Per Diem. When the daily prisoner census exceeds 600, CITY agrees to compensate COMPANY a per diem rate (cost per prisoner per day) for each prisoner in excess of 600, as referenced on Exhibit B.

This per diem is intended to cover additional costs in those instances where minor, short term increases in the prisoner population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the prisoner

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population increases to more than 600 prisoners. As such, if the census increases by 20% and is sustained, the parties agree to negotiate in good faith for additional staffing and associated compensation in order to continue to provide services to the increased number of prisoners and maintain the quality of care consistent with COMPANY's Proposal and this Agreement.

- 7.3 Prisoners From Other Jurisdictions. Medical care rendered within the PRISON to prisoners from outside jurisdictions, and housed in the PRISON pursuant to written contracts between CITY / DOC and such other jurisdictions or the State of Georgia, or by statute, will be the responsibility of COMPANY but as limited by this Agreement. Medical care that cannot be rendered within the PRISON will be arranged by COMPANY and the costs of such care subject to reimbursement by the other jurisdiction, the State of Georgia, or CITY / DOC. This Section does not apply to sentenced felons awaiting transfer to State facilities or prisoners housed in the PRISON on ex parte orders. COMPANY shall directly bill other counties for onsite professional medical fees, supplies, tests and medications. COMPANY will forward other bills for offsite healthcare and program support services provided to other jurisdictions housing prisoners in the PRISON. A nominal standard fee schedule will be utilized and is available upon request. CITY agree to assist COMPANY with these billing activities.
- 7.4 Compensation Escalator. On each subsequent annual renewal, the compensation paid to COMPANY, including base compensation and per diem rate, shall be adjusted by the current Consumer Price Index-Wage Earners and Clerical Workers (CPI-W), Medical Care Component (MCC) for the Southern Region of the United States.
- 7.5 Change in Standard of Care or Scope in Services. The price in Section 7.1, above, quoted reflects the scope of services as outlined herein and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g. treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in the contract price and would need to be negotiated with the CITY. Further, if the mission and/or purpose of the PRISON changes substantially, the CITY agrees to negotiate with COMPANY in good faith for any change in services.
- ~~7.5 Late Payments. CITY shall pay COMPANY interest on all undisputed payments hereunder that are not paid when due, as specified in Section 7.1, above. Interest shall accrue from the date the original payment was due at a rate of one percent (1%) per month until the payment is made in full. CITY shall bear the costs of any legal or collection fees and expenses incurred by COMPANY in attempting to enforce CITY's payment obligations hereunder.~~

ARTICLE VIII: LIABILITY AND RISK MANAGEMENT

- 8.1 Insurance. At all times during this Agreement, COMPANY shall maintain professional liability insurance covering COMPANY, and naming CITY as additional insureds, for its work at the PRISON with limits of one million dollars (\$1,000,000) per occurrence and three

million dollars (\$3,000,000) in the aggregate. Upon request, COMPANY shall provide a Certificate of Insurance to CITY.

8.2 Indemnification. COMPANY shall indemnify, defend and hold MCSO and CCG harmless from and against any and all claims, actions, lawsuits, damages, judgments, or liabilities of any sort, including attorney's fees, against MCSO and/or CCG based on COMPANY's performance of its obligations hereunder including performance of such obligations by any contractor selected by COMPANY; provided, however, that COMPANY will not be responsible for any claim arising out of MCSO or their employee or agent preventing an inmate from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured inmate to COMPANY for treatment.

8.2 ~~COMPANY shall indemnify, defend and hold CITY harmless from and against any and all claims against CITY based on COMPANY's performance of its obligations hereunder; provided, however, that COMPANY will not be responsible for any claim arising out of CITY / DOC or their employee or agent preventing a prisoner from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured prisoner to COMPANY for treatment. CITY shall defend, and hold COMPANY harmless from and against any and all claims against COMPANY arising out of the performance by CITY / DOC, its employees, agents, officers, or contractors in connection with CITY's obligations hereunder or other conduct. This provision, however, shall not be considered and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY / DOC by a prisoner, employee of company or any other person in any way whatsoever.~~

8.3

ARTICLE IX: MISCELLANEOUS

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9.1 Independent Contractor Status. The parties acknowledge that COMPANY is an independent contractor engaged to provide health care to Prisoners at the PRISON under the direction of COMPANY management. Nothing in this Agreement is intended nor shall be construed to create an agency relationship, an employer - employee relationship, or a joint venture relationship between the parties.

8.1 ~~Court Appearance by COMPANY Employees. In the event COMPANY's personnel are required to devote time with regard to litigation or threatened litigation by or on behalf of CITY this shall be part of their service time pursuant to this agreement. CITY shall be responsible for reasonable costs of substitute personnel to fill positions, which would be vacant due to such court or trial appearance requirements.~~

9.2 Notice. Unless otherwise provided herein, all notices or other communications required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been duly given if delivered personally in hand or sent by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following address or to the other person at any other address as may be designated in writing by the parties:

(a) CITY:

Columbus Consolidated Government

Attn. City Manager, Isaiah Hugley

P.O. Box 1340

Columbus, GA 31902

Muscogee County Prison

Attn. Warden Dwight Hamrick

P.O. Box 84041

Columbus, GA 31908-4041

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(b) COMPANY: CorrectHealth Muscogee, LLC

ATTN: Carlo A. Musso, M.D.

3384 Peachtree Road, NE, Suite 700

Atlanta, GA 30326

Notices shall be effective upon receipt regardless of the form used.

- 9.3 Entire Agreement. This Agreement is part of a procurement contract file for Procurement No. 18-0022 "the Contract" which constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. To the extent they are in conflict, provisions contained in the initial Request for Proposals, as amended, will govern. No modifications or amendment to the Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto.
- 9.2 ~~This Agreement constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. No modifications or amendment to this Agreement shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto. All prior negotiations, agreements and understandings with respect to the subject matter of this Agreement are superseded hereby.~~
- 9.3 Amendment. This Agreement may be amended or revised only in writing and signed by all parties.
- 9.4 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be constructed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 9.5 Other contracts and Third-Party Beneficiaries. The parties acknowledge that COMPANY is neither bound by nor aware of any other existing contracts to which CITY is a party and which relate to the providing of medical care to prisoners at the PRISON. The parties agree that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that the Agreement is intended to be for their

respective benefit only and not for the benefit of others who might otherwise be deemed to constitute third-party beneficiaries hereof.

- 9.6 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement which shall remain in full force and effect and enforceable in accordance with its terms.
- 9.7 Cooperation. On and after the date of this Agreement, each party shall, at the request of the other, make, execute and deliver or obtain and deliver all instruments and documents and shall do or cause to be done all such other things which either party may reasonable require to effectuate the provisions and intentions of this Agreement.
- 9.8 Time of Essence. Time is and shall be of the essence of this Agreement.
- 9.9 Authority. The parties signing this Agreement hereby state that they have the authority to bind the entity on whose behalf they are signing.
- 9.10 Binding Effect. This Agreement shall be binding upon the parties hereto, their heirs, administrators, executors, successors and assigns.
- 9.11 Cumulative Powers. Except as expressly limited by the terms of this Agreement, all rights, power and privileges conferred hereunder shall be cumulative and not restrictive of those provided at law or in equity.
- 9.12 Governing Law. This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Georgia, except as specifically noted.
- 9.13 Jurisdiction and Venue. Should any disputes regarding this Agreement arise and require legal action, the proper jurisdiction and venue for said legal action will be Muscogee County, Georgia.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by and through their duly authorized officers, the day, month and year given below.

COLUMBUS CONSOLIDATED GOVERNMENT ("CITY")

By: _____
Title: _____
Print Name: _____
Date: _____

MUSCOGEE COUNTY PRISON

By: _____
Title: _____
Print Name: _____
Date: _____

CORRECTHEALTH MUSCOGEE, LLC ("COMPANY")

By: _____
Title: _____
Print Name: _____
Date: _____

EXHIBIT A – STAFFING

PROVIDER	FTE	Hours / Week
Medical Director *	0.20	8
Midlevel Provider *	0.20	8
Health Services Administrator	1.00	40
Administrative Assistant	1.00	40
LPN	5.00	200
Dentist	0.10	4
Optometrist	0.10	4
X-Ray Technician	0.025	1
TOTALS	7.625	305

** May be provided on-site and/or via tele-medicine, at the discretion of COMPANY.*

Exhibit B – Compensation

Effective Dates	Annual Compensation	Monthly Compensation	Per Diem Rate
10/01/18 – 09/30/19	\$612,640.60	\$51,053.38	\$1.05
10/01/19 – 09/30/20	\$627,956.62	\$52,329.72	\$1.08
10/01/20 – 09/30/21	\$643,655.53	\$53,637.96	\$1.10
10/01/21 – 09/30/22	\$659,746.92	\$54,978.91	\$1.13
10/01/22 – 09/30/23	\$676,240.59	\$56,353.38	\$1.16

Della Lewis

From: Lucy Sheftall
Sent: Wednesday, September 26, 2018 5:02 PM
To: Stacy Scott
Cc: Della Lewis; Andrea McCorvey
Subject: Prison and Jail contracts
Attachments: 1992 Contract for Hospital Care to Indigent Prisoners.pdf; 1st Amendment to Contract.pdf; Intergovernmental Agreement 7.1.18.pdf; ContractColumbusMuscogeeJail180925Option9-26-18.docx; ContractColumbusMuscogeePrison180904CCGedits2.docx

Stacy:

Here are my final revisions to the Jail and Prison contracts. The Prison revisions merely incorporate the same provisions you agreed to for the Jail where appropriate to the Prison. Feel free to call if you have any questions. You should be able to accept those last changes and get finals for signature. I am also attaching the other agreement concerning hospital care that you asked for as well as the annual contract between DOC and CCG which I reference in our agreement, Let me know if there is anything else you need.

Lucy T. Sheftall
Assistant City Attorney

P.O. Box 1340, Columbus, Georgia 31902
100 Tenth Street, Columbus, Georgia 31901
(706) 653-4025 phone
(706) 653-4023 fax

The information contained in this electronic mail message is attorney privileged and contains confidential information intended only for the use of the individual or entity named. If the reader of the message is not the intended recipient, you are hereby notified that any use, dissemination, distribution or copying of the communication or its contents is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone at (706) 653-4025 or reply email and delete this message.

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STATE OF GEORGIA

COUNTY OF MUSCOGEE

CONTRACT FOR THE PROVISION OF HOSPITAL CARE
TO INDIGENT PERSONS RESIDING IN COLUMBUS, GEORGIA
AND PRISONERS

THIS CONTRACT, made and entered into on July 8, 1992, to be effective on and as of July 1, 1992, by and between COLUMBUS, GEORGIA, a consolidated city-county government and a political subdivision of the State of Georgia (hereinafter referred to as "Columbus"), and THE MEDICAL CENTER HOSPITAL AUTHORITY OF COLUMBUS, GEORGIA, a public body corporate and politic existing under the Georgia Hospital Authorities Law (hereinafter, the "Authority"),

W I T N E S S E T H:

WHEREAS, for many years Columbus has relied upon the Authority to provide hospital care and certain related medical care to the community's indigent sick; and

WHEREAS, at all times after June 30, 1986 the Authority has leased to The Medical Center, Inc. (hereinafter, "Medical Center"), a corporation organized and existing under the Georgia Nonprofit Corporation Code, those hospital facilities in Columbus, Georgia generally known as the Medical Center Hospital (hereinafter, "Hospital") which are owned by the Authority, and Medical Center at all times after June 30, 1986 has assumed, carried out and performed the Authority's obligations to provide inpatient and certain outpatient hospital care to the indigent sick of the community under heretofore existing agreements and understandings between Columbus and the Authority; and

WHEREAS, Columbus and the Authority desire to provide for inpatient and certain outpatient hospital care for the community's indigent sick, as well as for acute inpatient hospital care of the community's prison population and certain outpatient hospital care, pursuant to a long-term contract under which the Hospital's facilities under the Medical Center's management will be made available to the community's indigent sick and its prison population on the terms and conditions hereinafter stated; and

WHEREAS, Columbus is authorized to enter into this contract pursuant to the Constitution and laws of the State of Georgia, including, without limitation, the provisions of O.C.G.A. §31-7-85;

NOW, THEREFORE, in consideration of the premises, the mutual promises and covenants of the parties, the furtherance of the parties' respective corporate purposes which is effected hereby, and of the benefits which will accrue to the citizens of Columbus, the parties hereto do agree and contract as follows:

1. Recitations included as substance of agreement.

The foregoing recitals shall be deemed to form part of the substance of this agreement for all purposes, including any construction or interpretation of the provisions of this agreement.

2. Definition of Certain Terms for purposes of this agreement.

For purposes of this agreement, the following further definitions and related provisions shall apply:

(a) "Acute inpatient hospital care" means that inpatient care to be rendered at Hospital, as herein defined, to seriously ill persons who are prisoners of Columbus, Georgia, as herein defined, and which Medical Center in its good faith judgment determines to be appropriate. Provided, however, that in every circumstance acute inpatient hospital care shall include all care which Columbus, Georgia is required by law to provide to its prisoners, but only to the extent that Medical Center is able to render such care through its own facilities, equipment, and employees.

(b) "Contract year" for purposes of this agreement means the twelve month period beginning July 1 of any calendar year and ending June 30 of the following calendar year during the term of this agreement.

(c) "Indigent resident of Columbus, Georgia" is the term which describes a person other than a prisoner who is eligible to receive care under this agreement. For these purposes, "indigent resident of Columbus, Georgia" means a person who has been a resident of Columbus, Georgia (the geographic limits of Muscogee County, Georgia) for at least ninety days and whose income during the twelve month period immediately preceding the date of determination must not have been greater than one hundred twenty-five percent (125%) of "poverty" as defined in the most recent Federal Poverty Income Definition/Guidelines published by the United States Department of Health and Human Services, as that definition, those guidelines and the interpretations thereof promulgated by said Department exist on July 1 of each current contract year.

(d) "Hospital" means those hospital facilities in Columbus, Georgia owned by the Authority and operated by Medical Center which are known generally as the Medical Center Hospital, as well as those additional entities and facilities for providing diagnosis and treatment which are affiliated with Columbus Regional Healthcare System, Inc. and to which Medical Center may choose to refer persons who are qualified to receive care under this agreement for diagnosis and treatment.

(e) "Hospital care" means that in-patient and out-patient care to be rendered at Hospital, as herein defined, which Medical Center in its good faith judgment determines to be appropriate for a qualified indigent resident or prisoner of Columbus, Georgia.

(f) "Prisoner of Columbus, Georgia" means a person who is in the physical custody of Columbus, Georgia and for whom Columbus bears the legal responsibility of providing medical care.

(g) "Qualified", "qualification", or "qualified person" refers to the status of persons who are determined by Medical Center to be actually eligible and qualified to receive hospital care under this agreement as an indigent resident of Columbus, Georgia, and also refers to and includes the status of persons who are actually eligible and qualified to received acute inpatient or outpatient hospital care as prisoners of Columbus, Georgia.

3. Termination and rescission of all heretofore existing agreements and understandings for the provision of care to indigent residents of Columbus, Georgia and to prisoners.

(a) The parties acknowledge and agree that all heretofore existing agreements and understandings between Columbus and the Authority with regard to indigent care and prisoner care are hereby terminated.

(b) The Authority warrants and represents that since June 30, 1986 Medical Center has acted as the Authority's duly appointed lessee and independent contractor to carry out the Authority's indigent care obligations under any and all heretofore existing contracts for providing hospital care to indigent residents of Columbus, Georgia and to prisoners (whether oral, written, or arising by course of performance), and that the Authority has made binding contractual arrangements, or will enter into binding contractual arrangements, pursuant to which the Medical Center will be obligated to carry out and perform the Authority's obligations under this agreement and make the Hospital available for that purpose.

4. Term of agreement.

The term of this agreement shall commence on its effective date, July 1, 1992, and shall end at midnight on June 30, 2022.

5. Authority's obligation to make available through the Medical Center the Hospital's equipment, facilities, and services to qualified indigent residents of Columbus, Georgia who are determined to be in need of hospital care, and to qualified prisoners of Columbus, Georgia who are also determined to be in need of acute inpatient or outpatient hospital care.

(a) The Authority shall be obligated to afford and make available (through the Medical Center) to indigent residents of Columbus, Georgia who are determined to be actually qualified under Section 6 that hospital care which Medical Center, in its good faith judgment, determines to be appropriate and reasonable. Provided, however, that nothing contained herein shall require the Authority to make available to thus qualified persons any equipment, facilities, or services (including, but not limited to staffing levels) which at any time Medical Center and Hospital do not offer or make available to the general public, or to persons able to pay its established charges.

(b) The Authority shall also be obligated to afford and make available (through the Medical Center) to all prisoners of Columbus, Georgia who are determined to be actually qualified under Section 6 that acute inpatient and outpatient hospital care which Medical Center in its good faith judgment determines to be appropriate and reasonable. Provided, however, that nothing contained herein shall require the Authority to make available to thus qualified persons any equipment, facilities, or services (including, but not limited to staffing levels) which at any time Medical Center and Hospital do not offer or make available to the general public, or to persons able to pay its established charges.

(c) Nothing contained herein shall be deemed to require the Authority, either through contract with the Medical Center or otherwise, to provide Hospital care or other health care which is beyond the scope or capacity of Medical Center's facilities, equipment and services at any given time, or beyond the credentials and qualifications of Medical Center's professional employees, including physicians who are its employees. While the Authority has no obligation hereunder to provide diagnosis and treatment by physicians or other health care professionals practicing in specialty areas in which no health care professional employed by Medical Center is qualified, the Authority and Medical Center may voluntarily endeavor to obtain such care from qualified independent practitioners in private practice who enjoy clinical privileges at the Hospital without waiving the limitation on the Authority's obligation provided herein. Columbus acknowledges that neither the Authority nor the Medical Center (through its contractual arrangements with the Authority) can be obligated to provide the professional services of physicians and other health care professionals whom Medical Center does not employ, or to provide professional services in specialty and professional areas in which no Medical Center employee is qualified. If Medical Center as the Authority's designated independent contractor arranges for another healthcare provider or providers to render care to qualified persons which Medical Center is not able to provide through its own facilities and employees, neither the Authority nor Medical Center shall be responsible under this contract for paying the charges of such other providers or any other expenses associated with the rendering of care to a qualified person by such other provider or

providers. Provided, however, that no action by Medical Center in arranging for care to be rendered to a qualified person by such other provider or providers shall obligate Columbus to pay for that care, and neither the Authority nor Medical Center is empowered hereunder to bind Columbus or to act for Columbus in that regard. Provided, further, that except in the event of life-threatening emergencies Medical Center shall consult with Columbus, Georgia's City Manager or his designee prior to referring and transferring any qualified person for care by such other provider or providers.

(d) It is the intent of this agreement to provide for prisoners' medical and hospital attention as required by law, except that nothing contained herein shall be deemed to require Medical Center to provide any care to prisoners of Columbus, Georgia which Medical Center is not able to render through its own facilities, equipment and employees. Anything contained in this contract to the contrary notwithstanding, and not in derogation of the power and authority of Medical Center as the Authority's designated independent contractor to determine generally both the qualified status of indigent residents of Columbus, Georgia and the appropriate course and scope of treatment for all qualified persons who present themselves for care under this contract, in no circumstances whatever shall Authority or Medical Center be obligated to provide any purely elective care, including but not limited to elective cosmetic surgery. In no circumstances in which Authority and Medical Center are required to render care under this contract, or in which Medical Center as Authority's designated independent contractor elects to do so, shall the Authority or Medical Center be obligated to provide a private patient room to persons receiving such care, excepting, however, those circumstances in which only private rooms are available, and excepting further those circumstances in which the care or service to be provided is made available only on a private room basis.

(e) During the term of this contract, the qualification of any person to receive hospital care under this contract on the basis that such person is an indigent resident of Columbus, Georgia in need of such care, including all determinations as to the extent of diagnosis and treatment required, shall be made by Medical Center as the Authority's designated independent contractor in accord with the provisions of Section 6 of this contract; during the term of this contract all determinations as to the extent of diagnosis and treatment required for prisoners of Columbus, Georgia shall be made by Medical Center as the Authority's designated independent contractor in accord with the provisions of Section 6 of this contract.

6. Determination that a person is qualified as an "indigent resident of Columbus, Georgia" in need of hospital care or as a "prisoner of Columbus, Georgia" in need of acute inpatient or outpatient hospital care; Determinations of indigency status to be

made by Medical Center pursuant to policies and procedures to be established.

(a) Columbus, Georgia and the Authority agree that Medical Center, the Authority's designated independent contractor, pursuant to contract between the Authority and Medical Center, shall establish a system, policies and program for administratively determining the eligibility and qualification of all persons who meet the definition of an "indigent resident of Columbus, Georgia" under this agreement; and for determining when indigent residents who are so qualified are in need of hospital care and when prisoners of Columbus, Georgia are in need of acute inpatient or outpatient hospital care. Nothing contained herein shall empower either the Authority or Medical Center by such system, policies or program to alter or restrict the definition or meaning of "indigent resident of Columbus, Georgia" as established by paragraph 2(c) of this agreement. Medical Center as Authority's designated independent contractor shall further establish a reasonable system, utilizing deductibles or otherwise, by which persons who are qualified indigent residents of Columbus, Georgia share in meeting the cost of care which they receive hereunder according to their ability to pay. Medical Center as the Authority's designated contractor under said contractual arrangements shall, pursuant to Medical Center's procedures and policies, also determine the appropriate extent and choice of all care to be rendered hereunder for qualified persons. Provided, however, that Columbus, Georgia through its City Manager or his designee, or through any other person designated by appropriate resolution adopted by the Council of Columbus, Georgia, shall have the right to review at any time the criteria, policies, and procedures by which determinations are made by Medical Center as to the qualification of persons to be deemed an "indigent resident of Columbus, Georgia".

(b) Excepting emergency and other appropriate acute care circumstances (including but not limited to the emergency delivery of obstetrical patients), any person who is eligible to be treated as an indigent resident of Columbus, Georgia for purposes of this agreement must be qualified in advance of receiving hospital care under this agreement by making application to Medical Center for a determination of such person's qualification, and by making a demonstration to Medical Center's satisfaction, which shall not be unreasonably withheld, that the applicant is an "indigent resident of Columbus, Georgia" as herein defined.

(c) Medical Center as the Authority's designated independent contractor will issue evidence of qualification as an indigent resident of Columbus, Georgia to each person whose qualification and eligibility have been accepted by Medical Center. On subsequent notice to such qualified person, Medical Center may require any person whom it determines to be qualified for coverage under this contract as an indigent resident of Columbus, Georgia to re-qualify

himself prior to the expiration of any time limitation which is imposed by Medical Center on its existing determination that such person is qualified as an indigent resident of Columbus, Georgia for purposes of this contract.

(d) The contemplation of the parties is that, except in emergency or other appropriate acute care circumstances, Medical Center will process and pass upon applications from persons seeking qualification as an indigent resident of Columbus, Georgia promptly and in advance of the Medical Center's rendering either in-patient or out-patient hospital care under this agreement, and that Medical Center shall issue to qualifying applicants appropriate evidence of their qualification. The qualification of a custodial single parent (the qualifications of both parents being required in the case of parents who are married and living together) shall automatically qualify each minor child of the qualifying parent or parents.

(e) Upon presentation of any prisoner for acute inpatient or outpatient hospital care by a peace officer of Columbus, Georgia or of the Muscogee County Sheriff's Department or employees thereof, documentation of the prisoner's status as a prisoner of Columbus, Georgia for purposes of this agreement shall also be presented. Columbus and Medical Center (as the Authority's designated independent contractor) will develop appropriate procedures and policies for assuring Medical Center that any prisoners presented for acute inpatient hospital care or outpatient hospital care are qualified as a "prisoner of Columbus, Georgia" under this agreement.

(f) In emergency circumstances and other appropriate acute care circumstances, Medical Center as Authority's designated independent contractor, in its sole discretion, may make tentative determination of any person's qualification as an indigent resident of Columbus, Georgia, or it may waive the requirement of an advance determination (prior to the rendering of care) of the patient's qualification as an indigent resident of Columbus, Georgia. Medical Center's rendering of care in these circumstances shall not constitute a determination that the person to whom care is rendered is actually qualified as an indigent resident of Columbus, Georgia (or as a prisoner of Columbus, Georgia). In such circumstances, Medical Center may determine all questions of eligibility and qualification for coverage as an indigent resident of Columbus, Georgia subsequent to Medical Center's rendering of care. If an allegedly qualified indigent person (or a prisoner) who receives care in emergency or acute care circumstances is subsequently determined not to be qualified for coverage under this contract, Medical Center shall be free to seek payment of its established charges from that person, or from other persons or entities who may be responsible for such payment (to the extent Medical Center is not prohibited from that action by applicable law and regulations, including but not limited to the limitations imposed by the Medicare and Medicaid programs).

(g) In the event care is rendered by Medical Center as the Authority's designated independent contractor to prisoners for whom Columbus, Georgia is not legally responsible to provide medical care (whether such care be rendered inadvertently or because of an acute medical need), then Columbus shall remit to the Authority all sums received by Columbus from all sources, including federal and state governments and agencies thereof, which are paid or remitted to Columbus in order to defray or assist in funding the expenses of providing hospital or medical care to such prisoners who receive that care hereunder. An appropriate pro-rata payment in respect to any such prisoner shall be remitted to the Authority if Columbus shall receive such funds on a gross basis with respect to a group or groups of such prisoners.

(h) Nothing contained herein shall preclude or prevent Medical Center, as Authority's designated independent contractor, from receiving all benefits of any insurance which is available from any source to cover all or any portion of the care rendered to indigent residents of Columbus, Georgia and to prisoners of Columbus, Georgia under this contract. Medical Center shall be free to accept and require an assignment of such benefits.

(i) Nothing contained herein shall require the Authority or Medical Center to render to qualified persons any care whatever which is not determined by Medical Center, through its qualified professional employees, to be appropriate; and nothing contained herein shall require the Medical Center to make available any equipment, facilities and services which it does not have on hand or offer, or to render or obtain professional services from persons not actually employed by Medical Center, or to render or obtain, professional services in professional areas of practice which are not then engaged in by any Medical Center employee.

7. Payments by Columbus to Authority for hospital care rendered to indigent residents of Columbus, Georgia and for acute inpatient and outpatient hospital care rendered to prisoners of Columbus, Georgia.

Columbus shall pay to Authority for the hospital care which the Medical Center renders to indigent residents of Columbus, Georgia and for the acute inpatient and outpatient hospital care which Medical Center renders to prisoners of Columbus, Georgia, those monies, and only those monies, which are provided for in this Section 7, as follows:

(a) Columbus shall pay to the Authority during each contract year an annual payment in an amount calculated by multiplying three mills (.003) times the taxable value (as of the preceding January 1) of Columbus' real and personal property tax digests maintained for ad valorem property tax purposes. The intent of this contract is that the annual amount payable by Columbus to the Authority hereunder shall be 3/1000 (.003) of the taxable value of all

property reflected in all of Columbus' tax digests. Such annual payments shall be paid to the Authority in nine approximately equal installments on the 1st day of each and every month which is not a public holiday commencing with the first day of October and continuing on the first day of each of the eight succeeding months falling within every contract year of the term of this contract.

(b) Whenever during any contract year the Medical Center's charges for care rendered to prisoners of Columbus, Georgia during the contract year equals \$500,000.00 (calculated on the basis of the Medical Center's then established charges as herein limited), thereafter during the remainder of the contract year Columbus shall reimburse the Authority fifty percent (50%) of the Medical Center's billed established charges for acute inpatient and outpatient hospital care provided to prisoners of Columbus, Georgia. In determining Medical Center's established charges for purposes of this Section 7(b) during any contract year of the term of this contract after the initial contract year, the parties agree that the Medical Center's prices and price increases for services which it renders or may render to prisoners of Columbus, Georgia pursuant to this contract shall be identical to the prices and price increases charged by Medical Center to patients generally, except that for purposes of this contract only the Medical Center's prices for services which it renders or may render to prisoners of Columbus, Georgia shall be limited to an amount which does not exceed 110% of Medical Center's prices for services rendered to prisoners of Columbus, Georgia under this contract during the preceding contract year. Nothing contained herein shall be construed or deemed to limit the volume or number of services to be provided by Medical Center to prisoners of Columbus, Georgia during any contract year and nothing contained herein shall be construed or deemed to limit in any way the Medical Center's prices for services which it renders to persons who are not prisoners of Columbus, Georgia.

8. Columbus' acknowledgement of need for Medical Center to establish charges for paying and insured patients sufficient to enable Medical Center to provide the equipment, facilities, and services required by this agreement; the sums payable under this agreement represent parties' best efforts to arrive at a sum sufficient to cover the present and future anticipated cost and expense of making the Hospital's facilities available and of furnishing the care and other services required hereunder.

Columbus acknowledges that the Authority could not enter into the within contract obligating it to provide hospital care to indigent residents of Columbus, Georgia and to provide acute inpatient and outpatient hospital care to prisoners of Columbus, Georgia through the Authority's contractual arrangements with the Medical Center unless the Medical Center were free to accept paying and insured patients and to establish and collect reasonable competitive charges for their care which are calculated to cover

costs, expenses, and a retained earnings margin sufficient to maintain and replace plant and equipment, and to further Medical Center's beneficent purposes. Both parties acknowledge that the annual payment by Columbus to the Authority required under Section 7(a) hereof is calculated as the present minimum annual sum necessary to cover the existing and anticipated future cost of providing the services and care to be rendered hereunder, and of the existing and anticipated future cost of making the facilities of the Hospital available for the furnishing of the care and services required hereunder.

9. Medical Center, as Authority's designated contractor and lessee, to be authorized and empowered to establish reasonable policies, procedures, and rules to accomplish the purposes of this contract.

Medical Center, as the Authority's designated independent contractor, shall establish reasonable policies, procedures, interpretations and rules in order to effect the purposes of this contract and to administer a program for providing hospital care to indigent residents of Columbus, Georgia and for providing acute inpatient hospital care and outpatient hospital care to prisoners of Columbus, Georgia. All such administrative policies, procedures, interpretations, and rules shall accord with the definitions and substantive provisions of the within contract. It is the contemplation of this agreement that Medical Center may further contract with any entity controlled by or affiliated with Columbus Regional Healthcare System, Inc. for assistance in any aspect of the administration and operation of such program, including the rendering of clinical services.

10. Annual reports from Authority to Columbus summarizing performance under this contract and the operation of the indigent care and prisoner care program contemplated hereunder.

Within 120 days after the close of each contract year, the Authority, with the assistance of Medical Center as its designated independent contractor, shall prepare and render to Columbus a report which fairly summarizes and presents the Authority's performance under this contract and the operation of the program for rendering hospital care to qualified indigent residents and acute inpatient and outpatient hospital care to prisoners as contemplated by this contract. Such annual report shall include, but shall not be limited to, a statement which reflects the number of indigent residents of Columbus, Georgia and the number of prisoners of Columbus, Georgia who have received care under this contract, as well as a statement reflecting what Medical Center's established charges would have been for the care which was rendered under this contract had that care been rendered to paying patients.

11. Captions preceding the numbered sections of this contract are merely labels; masculine gender references to include the feminine; number.

(a) The headings or captions preceding the numbered sections of this agreement are mere labels inserted for convenience only, and they shall not be used in any interpretation or construction of the provisions hereof, and they do not constitute part of the substance of this agreement.

(b) The use of any gender herein shall be deemed to be or include the other gender and the neuter, and the use of the singular herein shall be deemed to be and include the plural (and vice versa) wherever appropriate.

12. This contract to be exclusive contract.

During the term of this agreement Columbus will not enter into any contract other than the within contract by which provision is made for furnishing hospital care or medical care to indigent residents of Columbus, Georgia. During said term Columbus also will not enter into any other contract by which provision is made for furnishing acute inpatient hospital care to prisoners of Columbus, Georgia. Provided, however, that nothing contained in this contract shall prohibit Columbus, Georgia at its own expense from providing on-premises care to its prisoners at prison facilities in which prisoners in need of care are incarcerated, or from providing care to indigent residents of Columbus, Georgia or to prisoners of Columbus, Georgia through a provider other than Medical Center whenever Medical Center is not able to provide necessary care to a qualified person hereunder through its own facilities, equipment, and employees.

13. Binding Effect; Assignability; Severability.

(a) The rights and obligations of the parties to this agreement shall inure to the benefit of and be binding upon the parties and their successors and assigns. The Authority's obligations hereunder may be assigned to and assumed by Medical Center, and may be assigned either wholly or partially by Medical Center to, and assumed by, Columbus Regional Healthcare System, Inc. or any entity controlled by Columbus Regional Healthcare System, Inc.

(b) If any provision hereof whatsoever, whether a section, paragraph, subparagraph, or any other part or provision hereof having substantive content, shall for any reason be held or adjudged to be invalid, illegal or enforceable by any court of competent jurisdiction, such provision or part hereof so adjudicated invalid, illegal or unenforceable shall be deemed separate, distinct, and independent, and the remainder of this

contract shall remain in full force and effect and shall not be affected by such holding or adjudication.

14. Payment of Outstanding Prisoner Care Obligations.
Columbus, Georgia agrees to remit payment to the Authority for any valid outstanding bills or obligations for prisoner care rendered prior to the effective date of this agreement.

15. Counterparts.

This agreement shall be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.

IN WITNESS WHEREOF, the parties hereto, acting by and through their duly authorized officers, have caused this contract to be executed in at least two counterparts on July 8, 1992, to be effective on and as of July 1, 1992.

COLUMBUS, GEORGIA

By:

Frank K. Martin
Frank K. Martin, Mayor

Attest:

Demuel H. Miller, Jr.
Demuel H. Miller, Jr., Clerk of Council

MEDICAL CENTER HOSPITAL AUTHORITY
OF COLUMBUS, GEORGIA

By:

James E. W. Chase, M.D.
James E. W. Chase, M.D., Chairman

Attest:

Josephine O. Varney
Josephine O. Varney, Secretary

STATE OF GEORGIA,

COUNTY OF MUSCOGEE

FIRST AMENDMENT TO CONTRACT FOR THE PROVISION OF
HOSPITAL CARE TO INDIGENT PERSONS RESIDING IN COLUMBUS, GEORGIA
AND PRISONERS

THIS AMENDMENT, made and entered into on this ____ day of June , 2014, to be effective July 1, 2014, by and between COLUMBUS, GEORGIA, a consolidated city-county government as a political subdivision of the State of Georgia (hereinafter referred to as "Columbus"), and THE MEDICAL CENTER HOSPITAL AUTHORITY OF COLUMBUS, GEORGIA, a public body corporate and politic existing under the Georgia Hospital Authorities Law (hereinafter the "Authority"), amending that certain contract between them dated July 8, 1992.

W I T N E S S E T H:

WHEREAS, Columbus and the Authority entered into a contract between them dated July 8, 1992 effective as of July 1, 1992, for the provision of hospital care to indigent persons residing in Columbus, Georgia, and for the provision of hospital care to prisoners; and

WHEREAS, Columbus and the Authority desire to make certain modifications to said contract;

NOW, THEREFORE, in consideration of the premises and of the mutual covenants and agreements contained herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, and intending to be legally bound hereby, the parties hereto agree and contract as follows:

1. Section 7 of the contract executed on July 8, 1992 is deleted in its entirety and a new Section 7 shall be substituted as follows:

7. Payments by Columbus to the Medical Center Hospital Authority for hospital care (including physician services, inpatient services, outpatient services, emergency room services and outpatient pharmacy) rendered to indigent residents of Columbus, Georgia qualifying for coverage under this Agreement

and for acute inpatient hospital care and outpatient hospital care rendered to prisoners of Columbus.

Columbus shall pay to Authority for the hospital care which the Medical Center renders to eligible indigent residents of Columbus, Georgia and certain physician services provided under contract to the Medical Center for the care of eligible indigent residents of Columbus, Georgia and for the acute inpatient hospital care and outpatient hospital care which Medical Center renders to prisoners of Columbus, funds provided for in this Section 7 as follows:

(a) Columbus shall levy a three mills (.003) ad valorem tax on the taxable value of the real and personal property tax digest to pay for the hospital care which the Medical Center renders to eligible indigent residents of Columbus, Georgia and certain physician services provided under contract to the Medical Center for the care of eligible indigent residents of Columbus, Georgia. Beginning July 1, 2014, Columbus shall pay to the Authority the actual collected amount resulting from such levy including any past due amounts collected for tax years 2014 and after. Payments shall be made to the Authority based on actual collections beginning in September, 2014 and each month thereafter on the last business day of each month throughout the term of the contract.

(b) In any contract year in which the ad valorem receipts paid by Columbus to the Authority to administer the delivery of hospital care and those physician services provided under contract to the Medical Center to eligible indigent residents of Columbus, Georgia shall exceed the Indigent Care Utilization for provision of such care to all eligible indigents under this Agreement (who are not Prisoners) rendered by Medical Center, Authority shall refund to Columbus an amount equal to 50% of the Surplus (as defined below) within thirty (30) days of the final accounting by Medical Center for provision of such care, but not later than October 1 of the subsequent contract year. The Indigent Care Utilization shall be the total of the billed charges for indigent care provided by the Medical Center for eligible individuals under the contract discounted by fifty (50) percent (The total charges for Indigent Care Utilization discounted by fifty (50) percent shall be referred to as the Discounted Billed Charges Rate), and the direct cost without markup of professional services rendered by physicians under contract to the Medical Center for the care of eligible indigent residents of Columbus. Surplus is defined as any positive amount remaining when the total indigent care utilization (hospital

services plus contracted physician services) calculated at the above referenced rates is subtracted from the total amount of payments made pursuant to subsection 7(a) above.

(c) Beginning July 1, 2014, Authority shall provide Prisoner Care defined as acute inpatient hospital care and outpatient hospital care, including urgent and emergent care as well as Jail Clearance Care rendered in the Emergency and Trauma Center, which is provided by Medical Center Personnel at Medical Center facilities to prisoners of Columbus, Georgia at the Discounted Billed Charges Rate as defined in paragraph (b) above. Jail Clearance Care is defined as medical services rendered to individuals who are en-route to jail under police escort and who may not be released by Medical Center Personnel without notifying the police whether or not the individual is under arrest at the time medical services are provided. For each contract year, the first \$500,000 of Prisoner Care calculated at the Discounted Billed Charges Rate will be provided by Medical Center and Authority at no cost to Columbus, except for payments required under subsection 7(a) herein; thereafter, the Authority shall bill Columbus and Columbus shall pay Authority for Prisoner Care Medical Center provides at the Discounted Billed Charges Rate. Such amounts will be billed to Columbus annually, with a monthly explanation of benefits provided to the representative designated by Columbus for the purpose of medical contract review. When in accordance with Paragraph 5(c) of the agreement, Columbus elects for the Medical Center to arrange for acute inpatient and outpatient hospital care rendered to prisoners of Columbus by licensed independent practitioners not employed by Medical Center, those independent practitioners will bill Columbus for reimbursement of such patient charges.

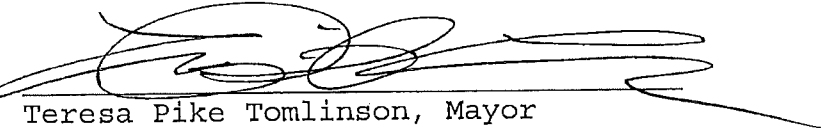
(d) For purposes of this Section 7, the Billed Established Charges for any contract year shall be the charges customarily applied to Medical Center patients generally. Provided however, for purposes of this contract, the aggregate Billed Established Charges for any subsequent contract year shall be limited to 110% of Medical Center's aggregate Billed Established Charges for services rendered during the previous contract year.

2. The remainder of the contract executed on July 8, 1992 remains unchanged.

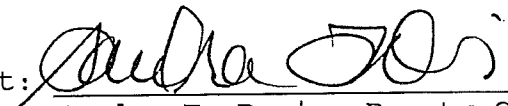
3. This amendment shall be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.

IN WITNESS WHEREOF, the parties hereto, acting by and through their duly authorized officers, have caused this amendment to be executed in at least two counterparts to be effective as of July 1, 2014.

COLUMBUS, GEORGIA

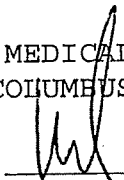
By: 

Teresa Pike Tomlinson, Mayor

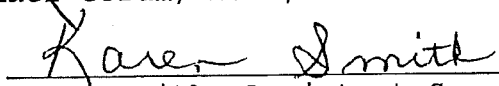
Attest: 

Sandra T. Davis, Deputy Clerk of Council

THE MEDICAL CENTER HOSPITAL AUTHORITY
OF COLUMBUS, GEORGIA

By: 

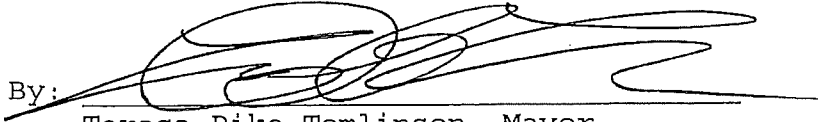
Michael Gorum, M.D., Chairman

Attest: 

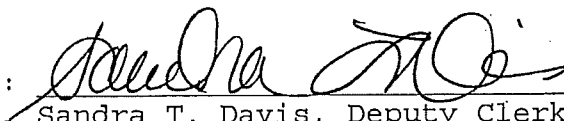
Karen Smith, Assistant Secretary

IN WITNESS WHEREOF, the parties hereto, acting by and through their duly authorized officers, have caused this amendment to be executed in at least two counterparts to be effective as of July 1, 2014.

COLUMBUS, GEORGIA

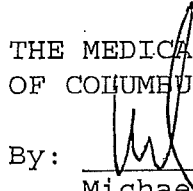
By: 

Teresa Pike Tomlinson, Mayor

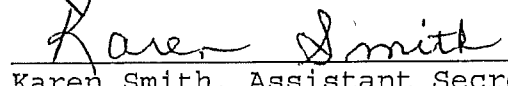
Attest: 

Sandra T. Davis, Deputy Clerk of Council

THE MEDICAL CENTER HOSPITAL AUTHORITY
OF COLUMBUS, GEORGIA

By: 

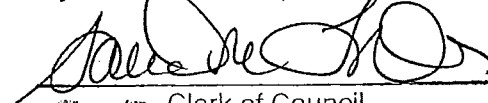
Michael Gorum, M.D., Chairman

Attest: 

Karen Smith, Assistant Secretary

EXECUTION AUTHORIZED

By Resolution No. 180-14


~~Deputy~~ Clerk of Council

INTERGOVERNMENTAL AGREEMENT COUNTY CAPACITY

THIS AGREEMENT is entered into the 1st day of July, 2018, by and between the GEORGIA DEPARTMENT OF CORRECTIONS, an agency of the State of Georgia ("Department"), and Columbus Consolidated Government, a political subdivision of the State of Georgia ("County"), acting by and through its Board of County Commissioners, referred to individually as "Party" or together as "Parties."

WHEREAS, Department desires to contract with County for appropriate care and custody of certain offenders for which Department is responsible, ("State Offenders"); and

County desires to provide appropriate care and custody of State Offenders at a correctional institution operated by County ("Services").

NOW, THEREFORE, in consideration of these premises and the mutual promises and agreements hereinafter set forth, the parties hereby agree as follows:

1. Care and Custody. County agrees to provide complete care and custody of up to 528 State Offenders daily, for the Term of this Agreement and in accordance with all applicable state and federal laws, rules, and regulations. Without limiting the generality of the foregoing, County specifically agrees that no State Offender labor shall benefit private persons or corporations.

2. Recording Offender Movement in SCRIBE. County agrees to record any and all movement of State Offenders transferred in and out of the County facility by entering the movement in Department's SCRIBE system on the same day the movement occurs. Movements that are not entered in SCRIBE on the day the movement occurs will not show as an adjustment and result in an inaccurate daily count. County is solely responsible for implementing procedures to ensure that SCRIBE entries are made accurately and in a timely manner. County is responsible for verifying the State Offender count and all movements in and out of the County facility in SCRIBE on a daily basis to ensure that the count is accurate. County understands that the count reflected in SCRIBE is the official count for purposes of calculating payment under this Agreement. Late documentation, lack of documentation, or inaccurate documentation may result in delayed payment or non-payment under this Agreement. County agrees to grant Department access to County's records, documentation procedure, and personnel for purposes of auditing SCRIBE entries and verifying State Offender count at any time upon Department's request.

3. Notification of Medical Treatment. County shall notify Department of any State Offender that the County transfers to a hospital for treatment that will require an overnight stay or for whom treatment is likely to cost in excess of One Thousand Dollars (\$1,000.00). Said notification shall be provided via telephone contact within Twenty-Four (24) hours of

offender being admitted for treatment on an outpatient or inpatient basis. County shall notify Department pursuant to this paragraph by calling the Department's "On Call Utilization Management Nurse" at 404-863-3079 at any time of day or night.

4. Employee or Offender Misconduct. The County agrees that it will notify the Department within ten (10) business days after terminating an employee of the County correctional institution for misconduct or of the resignation of any employee in connection with an allegation or investigation of misconduct. The County further agrees that it will notify the Department within ten (10) business days if it, one of its employees, or any other law enforcement officer secures a criminal warrant for the arrest or otherwise pursues the prosecution of an offender being housed at the County CI for criminal conduct allegedly committed at the County CI. County agrees that it will not hire any employee terminated by Department for misconduct or who resigns from Department in connection with an allegation or investigation of misconduct.

5. Compensation. Department agrees to pay County the sum of Twenty Dollars (\$20.00) per State Offender per day for the duration of this Agreement. County agrees to invoice Department monthly, in compliance with all billing procedures established by Department. Department shall endeavor to pay County for Services within Forty-Five (45) days of invoice receipt in approved form. County acknowledges and agrees that the Commissioner of Corrections shall have sole authority with respect to the transfer of State Offenders to and from the County correctional institution and Department shall not incur charges for State Offenders not under the care and custody of County. A State Offender is not under the care and custody of County when a State Offender is not housed at the County facility including when a State Offender is out to court or sent to a Department facility for medical or mental health evaluation.

6. Term of Agreement. The term of this Agreement shall be from July 1, 2018 until 11:59 p.m. on June 30, 2019 (the "Term"). The Parties may, by mutual agreement in writing, extend the Term for additional time periods.

7. Termination. Department may at any time and for any reason terminate this Agreement by providing written notice in advance of such termination to County. In the event of termination under this paragraph, Department shall pay County for Services performed prior to the effective date of termination; provided, however, that payments otherwise due County may be applied by Department against amounts due or claimed to be due to Department. In the event that County fails to comply with the provisions of this Agreement, Department may terminate this Agreement for cause and without notice. If termination is for cause, payments may be withheld by Department on account of the Services being deemed deficient and not remedied by County prior to the effective date of termination. County shall be liable to Department for any additional cost incurred by Department as a result of deficiencies in the Services to be provided hereunder.

8. Prison Rape Elimination Act. County agrees that it will adopt and comply with 28 C.F.R. 115, entitled the Prison Rape Elimination Act ("PREA"). As required in 28 C.F.R. 155.12, County further agrees to cooperate with Department in any audit, inspection, or investigation by Department or other entity relating to County's compliance with PREA. Department shall monitor the County's compliance with PREA, and shall have the right to inspect any documents or records relating to such audit, inspection or investigation and County will provide such documents or records at Department's request. County acknowledges that failure to comply with PREA is a material breach of this Agreement and is cause for termination of this Agreement.

9. Notices. Any notice under this Agreement, other than those referenced in Paragraph 3, "Notification of Medical Treatment," shall be deemed duly given if delivered by hand (against receipt) or if sent by registered or certified mail, return receipt requested, to a Party hereto at the address set forth below or to such other address as the Parties may designate by notice from time to time in accordance with this Agreement.

If to the County:

Columbus Consolidated Government
City Manager, Isaiah Hugley
P.O. Box 1340
Columbus, GA 31902

With a copy to:

Muscogee County Prison
Warden, Dwight Hamrick
P.O. Box 84041
Columbus, GA 31908-4041

If to the Department:

Jennifer Ammons
General Counsel
Georgia Department of Corrections
State Office South, Gibson Hall, 3rd Floor
P.O. Box 1529
Forsyth, Georgia 31029

With a copy to:

Robert Toole
Facilities Director
Georgia Department of Corrections
State Office South, Gibson Hall, 1st Floor
P.O. Box 1529
Forsyth, Georgia 31029

10. Reimbursement of Medical Costs.

- a. Department agrees to reimburse County for certain costs of medical services required for medical conditions which: (1) pose an immediate threat to life or

limb, and (2) occur under circumstances in which the State Offender cannot reasonably be placed in a state institution for the receipt of this care ("Emergency Medical Services"). Department's obligation to reimburse County for the cost of any medical services, to include Emergency Medical Services, arises only when the cost per State Offender per incident exceeds One Thousand Dollars (\$1,000.00), and Department shall only be liable for the amount in excess of One Thousand Dollars (\$1,000.00), subject to the limitations of this paragraph and other applicable laws and regulations.

- b. County agrees to invoice Department monthly for the actual cost of Emergency Medical Services paid by County. If there existed any rate agreement between County and the hospital or hospital authority at the time Emergency Medical Services were rendered, the invoice must reflect such rate. All invoices from County must include an invoice or receipt from the hospital that clearly shows the actual cost of Emergency Medical Services paid by County.
- c. Department is not liable to County for any late fees or charges imposed by the hospital, hospital authority (collectively, "Late Fees"), or other service provider, for late or nonpayment by the County. County agrees to exclude Late Fees from its invoices to Department.
- d. If Department reasonably determines that there is a difference between the actual cost incurred by County and the invoice sent to Department, Department may assess an administrative fee of one-half (1/2) of the difference to cover the administrative costs incurred by the Department. Department shall send County written notice of any administrative fees, and County shall have Thirty (30) days to make payment or to dispute the fee in writing. If County does not make payment of undisputed administrative fees by the due date, Department is entitled to a setoff of the same amount against future payments owing to County.
- e. Pursuant to O.C.G.A. § 42-5-2(c), Department shall reimburse County no more than the applicable Georgia Medicaid Rate for Emergency Medical Services provided to a State Offender by a hospital, hospital authority, or other service provider. Department shall not be liable to County for any amount paid by County to a hospital, hospital authority, or other service provider, in excess of the Medicaid Rate for emergency services provided to a State Offender.

11. Entire Agreement. This Agreement constitutes the entire agreement and understanding between the parties hereto and replaces, cancels and supersedes any prior agreements and understandings relating to the subject matter hereof, and all prior representations, agreements, understandings and undertakings between the parties hereto

with respect to the subject matter hereof are merged herein.

12. Sole Benefit. Department and County enter into this Agreement for their sole benefit. Department and County do not intend to give any rights pursuant to this Agreement to any other parties.

13. Choice of Law and Venue. The Contract shall be governed in all respects by the laws of the State of Georgia. Any lawsuit or other action brought against the Department and the State based upon or arising from this Agreement shall be brought in the Superior Court of Fulton County, Georgia.

14. Amendment. The Parties recognize and agree that it may be necessary or convenient for the Parties to amend this Agreement and the Parties agree to cooperate fully in connection with such amendments if and as necessary. However, no change, modification or amendment to this Agreement shall be effective unless the same is reduced to writing and signed by the Parties.

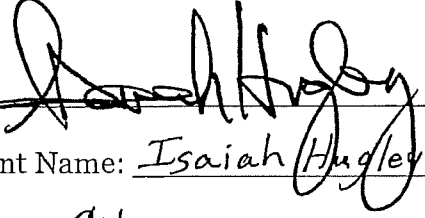
15. Counterparts. This Agreement may be executed in multiple counterparts, each of which shall be an original but all of which shall constitute one agreement. No Party shall be bound by this Agreement until all Parties have executed it.

IN WITNESS WHEREOF, the parties have caused the authorized representatives of each to execute this Agreement on the day and year first above written.

GEORGIA DEPARTMENT OF
CORRECTIONS:

By: _____
Jennifer Ammons
General Counsel

COUNTY:

By: 
Print Name: Isaiah Hugley
Title: City manager

FACILITY WARDEN/SUPERINTENDENT

By: 
Print Name: H. Dwight Hamrick

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-225-4087, Fax 706-225-3033
www.columbusga.org

September 13, 2018

Carlo A. Musso, MD
CorrectHealth Muscogee, LLC
3384 Peachtree Road NE, Suite 700
Atlanta, Georgia 30326

Re: Inmate Medical & Pharmacy Services for Muscogee County Jail; RFP No. 18-0019 and
Inmate Medical & Pharmacy Services for Muscogee County Prison; RFP No. 18-0022

Dear Dr. Musso,

As noted in the August 29, 2018 award letters to CorrectHealth Muscogee, LLC (CorrectHealth), the current contracts with Correct Care Solutions will expire on September 30, 2018. Columbus Consolidated Government (the City) is aware that CorrectHealth is diligently working to facilitate a smooth transition; however, the City requests confirmation that there is sufficient transition time to allow CorrectHealth to begin providing inmate medical and pharmacy services, at both locations, on October 1, 2018. Please respond below:

SMS
Initial

CorrectHealth Muscogee, LLC estimates that there is *sufficient* transition time to begin providing inmate medical and pharmacy services, at both locations, on October 1, 2018.

Initial

CorrectHealth Muscogee, LLC estimates that there is *insufficient* transition time to begin providing inmate medical and pharmacy services, at both locations, on October 1, 2018. Our written response is attached.

Stacy M. Scott, CLO

Authorized Signature

STACY M. SCOTT

Print Name

9-14-18

Date of Signature

Your response is respectfully requested no later than *Friday, September 14, 2018*. Please submit your written response to the attention of Della Lewis via email dlewis@columbusga.org.

Sincerely,

Andrea J. McCorvey
Andrea J. McCorvey,
Purchasing Division Manager

HEALTH SERVICES AGREEMENT

THIS HEALTH SERVICES AGREEMENT (hereinafter referred to as "AGREEMENT") by and between the COLUMBUS CONSOLIDATED GOVERNMENT (hereinafter referred to as "CITY") and CORRECTHEALTH MUSCOGEE, LLC (hereinafter referred to as "COMPANY"), is entered into as of the _____ day of _____, _____ to be effective as set forth in Paragraph 6.1, below.

WITNESSETH:

WHEREAS, CITY is charged by law with the responsibility for obtaining and providing reasonably necessary medical care for prisoners of the MUSCOGEE COUNTY PRISON (hereinafter called "PRISON") and,

WHEREAS, the CITY desires to provide for health care to prisoners in accordance with applicable law; and,

WHEREAS, CITY desires to enter into this Agreement with COMPANY to promote this objective; and,

WHEREAS, COMPANY is in the business of providing correctional healthcare services under contract and desires to provide such services for the CITY under the express terms and conditions contained herein.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter made, the parties hereto agree as follows:

ARTICLE I: HEALTH CARE SERVICES

- 1.1 General Engagement. CITY hereby contracts with COMPANY to provide healthcare services to prisoners under the custody and control of the Georgia Department of Corrections (hereinafter referred to as DOC) at the PRISON.
- 1.2 Scope of General Services. The responsibility of COMPANY for the healthcare of a prisoner commences with the commitment of a prisoner to the custody of the PRISON. COMPANY shall provide on a regular basis: nursing care, provider (physician and / or midlevel provider) care, dental care, tele-health, onsite emergency medical services, onsite laboratory studies, on-site radiology, medication administration, non-capital medical equipment, medical supplies, office supplies, and medical waste disposal, as set forth in COMPANY's Proposal dated May 18, 2018, in response to RFP No. 18-0022. COMPANY shall not be financially responsible for the cost of pharmaceuticals, on-site specialty care, off-site specialty care, hospitalizations, all other off-site healthcare, or ambulance services.
- 1.3 Specialty Care Services. When non-emergency specialty care is required and cannot be rendered at the PRISON, COMPANY will arrange with DOC staff for the transportation of the prisoners in accordance with Section 1.8 of this Agreement.

- 1.4 On-Site Emergency Services. COMPANY shall provide, at its own cost, on-site emergency medical care, as medically necessary.
- 1.5 Injuries Incurred Prior to Incarceration; Pregnancy. COMPANY will not be financially responsible for the cost of any medical treatment for health care services provided to any prisoner prior to the prisoner's commitment into the custody of the PRISON. Furthermore, COMPANY is not financially responsible for the cost of services outside the PRISON for any healthcare treatment or health care services provided to medically stabilize any prisoner presented at booking with a life threatening injury or illness or in immediate need of emergency medical care, if said prisoner is not in the custody of the PRISON.

Once it has been determined by COMPANY's intake medical personnel that the prisoner has been medically stabilized, and accepted by DOC personnel into the custody of the PRISON, COMPANY will, commencing at that point, then become responsible for the medical treatment for health care services rendered at the PRISON, regardless of the nature of the illness or injury and whether or not the illness or injury occurred prior or subsequent to the individual's incarceration at the PRISON. A prisoner shall be considered medically stabilized when the patient's medical condition no longer requires immediate emergency medical care or outside hospitalization, and when any and/or all applicable medical clearances have been provided to the DOC personnel, so that the prisoner can reasonably be housed inside the PRISON.

It is expressly understood that COMPANY shall not be responsible for costs associated with the health care of any infants born to prisoners. COMPANY shall provide health care services to prisoners up to, though, and after the birth process, but health care services provided to an infant following birth, other than those services that may be delivered in the PRISON prior to transport to a hospital, will not be the financial responsibility of COMPANY. In any event, COMPANY shall not be responsible for the costs associated with the performing or furnishing of elective abortions.

- 1.6 Prisoners outside the Facility. The health care services contracted in the Agreement are intended only for those prisoners in the actual physical custody of the PRISON. This does not include prisoners who are under guard in outside facilities. Such prisoners are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of COMPANY with respect to the payment or the furnishing of their health care services. Persons in the physical custody of other public safety or other law enforcement/penal jurisdictions at the request of CITY or DOC are likewise excluded from the population count and are not the responsibility of COMPANY for the furnishing or payment of health care services.

The cost of medical services provided to prisoners who become ill or are injured while on such temporary release, work release, or escape status will not be the responsibility of COMPANY. However, prisoners on work detail who are supervised by DOC personnel and become injured will be the responsibility of COMPANY as long as they are returned to the PRISON to be treated by COMPANY personnel. These prisoners will be part of the daily census count.

- 1.7 Elective Medical Care. COMPANY is not responsible for providing elective medical care to prisoners. For purposes of the Agreement, "elective medical care" means medical care, which, if not provided, would not cause definite harm to the prisoner's well-being. DOC and / or CITY must review any referral of prisoners for elective medical care prior to provision of such services.
- 1.8 Transportation Services. To the extent any prisoner requires off-site non-emergency health care treatment including, but not limited to, hospitalization care and specialty services, the DOC will, upon request by COMPANY, provide transportation as reasonably available provided that such transportation is scheduled in advance. When medically necessary, COMPANY shall arrange for all emergency ambulance transportation of prisoners. COMPANY will not be financially responsible for the cost of ambulance services.

ARTICLE II: PERSONNEL

- 2.1 Staffing. COMPANY shall provide medical and support personnel reasonably necessary for the rendering of health care services to prisoners at the PRISON, as identified on Exhibit A, which is attached hereto. At the sole discretion of the COMPANY, some services may be provided via tele-health.
- 2.2 Licensure, Certification and Registration of Personnel. All personnel provided or made available by COMPANY to render services hereunder shall be licensed, certified or registered, in their respective areas of expertise as required by applicable Georgia law.
- 2.3 CITY's Satisfaction with Health Care Personnel. If the Warden or Deputy Warden of the PRISON becomes dissatisfied with any health care personnel provided by COMPANY hereunder, or by any independent contractor, subcontractor or assignee, COMPANY, in recognition of the sensitive nature of correctional services, shall, following receipt of written notice from the Warden or Deputy Warden of the PRISON of the grounds for such dissatisfaction and in consideration of the reasons therefore, exercise its best efforts to resolve the problem. If the problem is not resolved satisfactorily to the Warden or Deputy Warden of the PRISON, COMPANY shall remove or shall cause any independent contractor, subcontractor, or assignee to remove the individual about whom the DOC has expressed dissatisfaction. Should removal of an individual become necessary, COMPANY will be allowed reasonable time, prior to removal, to find an acceptable replacement, without penalty or any prejudice to the interests of COMPANY.
- 2.4 Use of DOC Personnel and Prisoners in the Provision of Health Care Services. DOC personnel nor prisoners shall be employed or otherwise engaged by either COMPANY or DOC in the direct rendering of any health care services.
- 2.5 Subcontracting and Delegation. In order to discharge its obligations hereunder, COMPANY will engage certain health care professionals as independent contractors rather than as employees. CITY and DOC consent to such subcontracting or delegation. As the relationship between COMPANY and these health care professionals will be that of independent contractor, COMPANY will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. COMPANY will not exercise control over the manner or means by which these independent contractors

perform their professional medical duties. However, COMPANY shall exercise administrative supervision over such professionals necessary to insure the strict fulfillment of the obligations contained in this Agreement. For each agent and subcontractor, including all medical professionals, physicians, dentists, and nurses performing duties as agents or independent contractors of COMPANY under this Agreement, COMPANY shall provide CITY proof, upon prior written request, that there is in effect a professional liability or medical malpractice insurance policy covering the agent or subcontractor.

- 2.6 Discrimination. During the performance of this Agreement, COMPANY, its employees, agents, subcontractors, and assignees agree as follows:
- a. None will discriminate against any employee or applicant for employment because of race, religion, color, gender or national origin, except where religion, gender or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor.
 - b. In all solicitations or advertisements for employees, each will state that it is an equal opportunity employer.
 - c. Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of the section.

ARTICLE III: REPORTS AND RECORDS

- 3.1 Medical Records. COMPANY shall cause and maintain complete and accurate medical records for each Prisoner who has received health care services. Each medical record will be maintained in accordance with applicable laws. The medical records shall be kept separate from the prisoner's confinement record. A complete legible copy of the applicable medical records shall be available at all times, to the Warden, as custodian of the person of the patient. Medical records shall be kept confidential. No information contained in the medical records shall be released by COMPANY except as provided by policy, by a court order, or otherwise in accordance with applicable law. COMPANY shall, at its own cost, provide all medical personnel necessary to maintain the medical records. At the termination of this Agreement, all medical records shall be delivered to and remain with the DOC. However, CITY and / or DOC shall provide COMPANY with reasonable ongoing access to all pertinent medical records even after the termination of this Agreement for the purposes of defending or investigating litigation.
- 3.2 Regular Reports by COMPANY to CITY. If requested, COMPANY shall provide to CITY, on a date and in a form mutually acceptable to COMPANY and CITY, reports relating to services rendered under this Agreement.
- 3.3 Prisoner Information. Subject to the applicable Georgia law, in order to assist COMPANY in providing the best possible health care services to prisoners, DOC will provide COMPANY with information pertaining to prisoners that COMPANY and DOC mutually identify as reasonable and necessary for COMPANY to adequately perform its obligations hereunder.
- 3.4 COMPANY Records Available to CITY with Limitations on Disclosure. COMPANY shall make available to CITY, at CITY's request, records, documents and other papers relating to the direct delivery of health care services to Prisoners hereunder. CITY understands that

written operating policies and procedures employed by COMPANY in the performance of its obligations hereunder are propriety in nature and will remain the property of COMPANY and shall not be disclosed without written consent. Information concerning such may not, at any time, be used, distributed, copied or otherwise utilized by CITY or DOC, except in connection with the delivery of health care services hereunder, or as permitted or required by law, unless such disclosure is approved in advance writing by COMPANY. Proprietary information developed by COMPANY shall remain the property of COMPANY.

- 3.5 CITY Records Available to COMPANY with Limitations on Disclosure. During the term of this Agreement and for a reasonable time thereafter, CITY will provide COMPANY at COMPANY's request, CITY's records relating to the provision of health care services to prisoners as may be reasonably requested by COMPANY or as are pertinent to the investigation or defense of any claim related to COMPANY's conduct. Any such information provided by CITY to COMPANY that CITY considers confidential shall be kept confidential by COMPANY and shall not, except as may be required by law, be distributed to any third party without the prior written approval of the CITY.

ARTICLE IV: SECURITY

- 4.1 General. COMPANY and CITY understand that adequate security services are essential and necessary for the safety of the agents, employees, and subcontractors of COMPANY as well as for the security of prisoners and PRISON personnel, consistent with the correctional setting. DOC personnel will take all reasonable steps to provide sufficient security to enable COMPANY to safely and adequately provide the health care services described in this Agreement. It is expressly understood by CITY and COMPANY that the provision of security and safety for the COMPANY personnel is a continuing precondition of COMPANY's obligation to provide its services in a routine, timely, and proper fashion. This provision, however shall not be considered to and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY or DOC by a prisoner, employee of company or any other person in anyway whatsoever.
- 4.2 Security During Transportation Off-Site. DOC will provide prompt and timely security as medically necessary and appropriate in connection with the transportation of any prisoner between the PRISON and any other location for off-site services as contemplated herein.

ARTICLE V: OFFICE SPACE, EQUIPMENT, INVENTORY AND SUPPLIES

- 5.1 General. CITY agrees to provide COMPANY with reasonable and adequate office and medical space, facilities, and telephone equipment with dedicated line in the medical area. COMPANY will obtain, with the assistance of CITY, secured internet access (minimum speeds 3MB down/3MB up) with a static public IP address as required for high definition telehealth. This internet connection will be for sole and exclusive use by COMPANY. CITY will pay for utilities (e.g. gas, electric, water). Further, CITY will provide necessary maintenance and housekeeping of the office space and facilities. COMPANY will be responsible for the cost of phone lines, as well as phone usage, including long distance.

With regard to telemedicine, COMPANY will provide for all necessary equipment and any necessary internet / connection line, as set forth above.

COMPANY will provide medical and office supplies used in the healthcare delivery system administered at the PRISON. This includes medical supplies, medical records, office supplies, and forms. COMPANY will also provide for all non-capital medical equipment (i.e. less than \$500). CITY will be responsible for any capital medical equipment (i.e. more than \$500).

- 5.2 Delivery of Possession. CITY will provide to COMPANY beginning on the date of commencement of this Agreement, possession and control of all medical and office equipment and supplies in place at the PRISON's health care unit.

At the commencement of service by COMPANY an inventory of all supplies, medical and office equipment as described herein will be completed in writing by CITY personnel. This inventory will be reviewed and approved in writing by the authorized agent of the CITY as well as the COMPANY.

At the termination of this or any subsequent Agreement, COMPANY will return to the CITY possession and control all supplies, medical and office equipment, in working order, reasonable wear and tear accepted, which were in place at the PRISON's health care unit prior to the commencement of services under this Agreement. Any such return will require written confirmation, executed by the Warden of the PRISON, for proper acceptance.

ARTICLE VI: TERM AND TERMINATION OF AGREEMENT

- 6.1 Initial Term. The initial term of this Agreement will be five (5) years, from October 1, 2018 through September 30, 2023. This Agreement is renewable under like terms for additional years, subject to negotiation of the service component and agreed-upon compensation adjustments, including compensation escalator as set forth in Section 7.4 below, unless either party delivers written notice of non-renewal to the other party at least ninety (90) days prior to the expiration of the then-existing term.
- 6.2 Termination. This Agreement may be terminated as otherwise provided in this Agreement or as follows:
- a. Termination by Agreement. In the event that each of the parties mutually agrees in writing, this Agreement may be terminated on the terms and date stipulated therein.
 - b. Termination by Cancellation. This Agreement may be canceled, without cause, by either party upon ninety (90) days prior written notice in accordance with Section 9.3 this Agreement.
- 6.3 Responsibility for Prisoner Health Care. Upon termination of this Agreement, all responsibility for providing health care services to all prisoners, including prisoners receiving health care services at sites outside the PRISON, will be transferred from COMPANY to CITY.

ARTICLE VII: COMPENSATION

- 7.1 Base Compensation & Per Diem Compensation. CITY will pay COMPANY as indicated on Exhibit B. This compensation level assumes a maximum prisoner population of 600 prisoners.

COMPANY will invoice CITY during the month prior to the month of service. CITY agree to pay COMPANY within thirty (30) days of receipt of the invoice. In the event this agreement should terminate on a date other than the end of a calendar month, compensation to COMPANY will be prorated accordingly for the shortened month.

- 7.2 Per Diem. When the daily prisoner census exceeds 600, CITY agrees to compensate COMPANY a per diem rate (cost per prisoner per day) for each prisoner in excess of 600, as referenced on Exhibit B.

This per diem is intended to cover additional costs in those instances where minor, short term increases in the prisoner population result in the higher utilization of routine supplies and services. However, the per diem is not intended to provide for any additional fixed costs, such as new staffing positions, which might prove necessary if the prisoner population increases to more than 600 prisoners. As such, if the census increases by 20% and is sustained, the parties agree to negotiate in good faith for additional staffing and associated compensation in order to continue to provide services to the increased number of prisoners and maintain the quality of care consistent with COMPANY's Proposal and this Agreement.

- 7.3 Prisoners From Other Jurisdictions. Medical care rendered within the PRISON to prisoners from outside jurisdictions, and housed in the PRISON pursuant to written contracts between CITY / DOC and such other jurisdictions or the State of Georgia, or by statute, will be the responsibility of COMPANY but as limited by this Agreement. Medical care that cannot be rendered within the PRISON will be arranged by COMPANY and the costs of such care subject to reimbursement by the other jurisdiction, the State of Georgia, or CITY / DOC. This Section does not apply to sentenced felons awaiting transfer to State facilities or prisoners housed in the PRISON on ex parte orders. COMPANY shall directly bill other counties for onsite professional medical fees, supplies, tests and medications. COMPANY will forward other bills for offsite healthcare and program support services provided to other jurisdictions housing prisoners in the PRISON. A nominal standard fee schedule will be utilized and is available upon request. CITY agree to assist COMPANY with these billing activities.

- 7.4 Compensation Escalator. On each subsequent annual renewal, the compensation paid to COMPANY, including base compensation and per diem rate, shall be adjusted by the current Consumer Price Index-Wage Earners and Clerical Workers (CPI-W), Medical Care Component (MCC) for the Southern Region of the United States.

- 7.5 Change in Standard of Care or Scope in Services. The price in Section 7.1, above, quoted reflects the scope of services as outlined herein and the current community standard of care with regard to correctional healthcare services. If there is any change in or modification of the local, national (e.g. NCCHC, ACA) or community standards of care or scope of services, court order, ruling or interpretation, state or federal law or statute or interpretation thereof that results in sustained and material increase in costs (e.g.

treatment of Hepatitis C, TB, HIV/AIDS, etc.), coverage of costs related to such changes are not included in the contract price and would need to be negotiated with the CITY. Further, if the mission and/or purpose of the PRISON changes substantially, the CITY agrees to negotiate with COMPANY in good faith for any change in services.

- 7.6 Late Payments. CITY shall pay COMPANY interest on all undisputed payments hereunder that are not paid when due, as specified in Section 7.1, above. Interest shall accrue from the date the original payment was due at a rate of one percent (1%) per month until the payment is made in full. CITY shall bear the costs of any legal or collection fees and expenses incurred by COMPANY in attempting to enforce CITY's payment obligations hereunder.

ARTICLE VIII: LIABILITY AND RISK MANAGEMENT

- 8.1 Insurance. At all times during this Agreement, COMPANY shall maintain professional liability insurance covering COMPANY, and naming CITY as additional insureds, for its work at the PRISON with limits of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the aggregate. Upon request, COMPANY shall provide a Certificate of Insurance to CITY.
- 8.2 Indemnification. COMPANY shall indemnify, defend and hold CITY harmless from and against any and all claims against CITY based on COMPANY's performance of its obligations hereunder; provided, however, that COMPANY will not be responsible for any claim arising out of CITY / DOC or their employee or agent preventing a prisoner from receiving medical care ordered by COMPANY or its agent or in failing to promptly present an ill or injured prisoner to COMPANY for treatment. CITY shall defend, and hold COMPANY harmless from and against any and all claims against COMPANY arising out of the performance by CITY / DOC, its employees, agents, officers, or contractors in connection with CITY's obligations hereunder or other conduct. This provision, however, shall not be considered and shall not be construed to be a waiver of any defense, including sovereign or official immunity, to any claim against CITY / DOC by a prisoner, employee of company or any other person in any way whatsoever.

ARTICLE IX: MISCELLANEOUS

- 9.1 Independent Contractor Status. The parties acknowledge that COMPANY is an independent contractor engaged to provide health care to Prisoners at the PRISON under the direction of COMPANY management. Nothing in this Agreement is intended nor shall be construed to create an agency relationship, an employer - employee relationship, or a joint venture relationship between the parties.
- 9.2 Court Appearance by COMPANY Employees. In the event COMPANY's personnel are required to devote time with regard to litigation or threatened litigation by or on behalf of CITY this shall be part of their service time pursuant to this agreement. CITY shall be responsible for reasonable costs of substitute personnel to fill positions, which would be vacant due to such court or trial appearance requirements.

- 9.3 Notice. Unless otherwise provided herein, all notices or other communications required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been duly given if delivered personally in hand or sent by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following address or to the other person at any other address as may be designated in writing by the parties:

(a) CITY:

(b) COMPANY:

CorrectHealth Muscogee, LLC
ATTN: Carlo A. Musso, M.D.
3384 Peachtree Road, NE, Suite 700
Atlanta, GA 30326

Notices shall be effective upon receipt regardless of the form used.

- 9.4 Entire Agreement. This Agreement constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the subject matter hereof. No modifications or amendment to this Agreement shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto. All prior negotiations, agreements and understandings with respect to the subject matter of this Agreement are superseded hereby.
- 9.5 Amendment. This Agreement may be amended or revised only in writing and signed by all parties.
- 9.6 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be constructed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 9.7 Other contracts and Third-Party Beneficiaries. The parties acknowledge that COMPANY is neither bound by nor aware of any other existing contracts to which CITY is a party and which relate to the providing of medical care to prisoners at the PRISON. The parties agree that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that the Agreement is intended to be for their respective benefit only and not for the benefit of others who might otherwise be deemed to constitute third-party beneficiaries hereof.
- 9.8 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement which shall remain in full force and effect and enforceable in accordance with its terms.
- 9.9 Cooperation. On and after the date of this Agreement, each party shall, at the request of the other, make, execute and deliver or obtain and deliver all instruments and documents

and shall do or cause to be done all such other things which either party may reasonable require to effectuate the provisions and intentions of this Agreement.

- 9.10 Time of Essence. Time is and shall be of the essence of this Agreement.
- 9.11 Authority. The parties signing this Agreement hereby state that they have the authority to bind the entity on whose behalf they are signing.
- 9.12 Binding Effect. This Agreement shall be binding upon the parties hereto, their heirs, administrators, executors, successors and assigns.
- 9.13 Cumulative Powers. Except as expressly limited by the terms of this Agreement, all rights, power and privileges conferred hereunder shall be cumulative and not restrictive of those provided at law or in equity.
- 9.14 Governing Law. This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Georgia, except as specifically noted.
- 9.15 Jurisdiction and Venue. Should any disputes regarding this Agreement arise and require legal action, the proper jurisdiction and venue for said legal action will be Muscogee County, Georgia.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by and through their duly authorized officers, the day, month and year given below.

COLUMBUS CONSOLIDATED GOVERNMENT ("CITY")

By: _____
Title: _____
Print Name: _____
Date: _____

CORRECTHEALTH MUSCOGEE, LLC ("COMPANY")

By: _____
Title: _____
Print Name: _____
Date: _____

EXHIBIT A – STAFFING

PROVIDER	FTE	Hours / Week
Medical Director *	0.20	8
Midlevel Provider *	0.20	8
Health Services Administrator	1.00	40
Administrative Assistant	1.00	40
LPN	5.00	200
Dentist	0.10	4
Optometrist	0.10	4
X-Ray Technician	0.025	1
TOTALS	7.625	305

** May be provided on-site and/or via tele-medicine, at the discretion of COMPANY.*

Exhibit B – Compensation

Effective Dates	Annual Compensation	Monthly Compensation	Per Diem Rate
10/01/18 – 09/30/19	\$612,640.60	\$51,053.38	\$1.05
10/01/19 – 09/30/20	\$627,956.62	\$52,329.72	\$1.08
10/01/20 – 09/30/21	\$643,655.53	\$53,637.96	\$1.10
10/01/21 – 09/30/22	\$659,746.92	\$54,978.91	\$1.13
10/01/22 – 09/30/23	\$676,240.59	\$56,353.38	\$1.16

Della Lewis

From: Stacy Scott <stacy.scott@correcthealth.org>
Sent: Thursday, September 6, 2018 4:43 PM
To: Della Lewis
Subject: RE: RFP 18-0022: Inmate Medical Services & Pharmacy Services for the Muscogee County Prison
Attachments: ContractColumbusMuscogeePrison180904.docx

Della,

Here is the revised Contract for the Prison with the corrected monthly amounts on Exhibit B. Again, so sorry for the confusion.

Stacy M. Scott, Esq., Chief Legal Officer

CorrectHealth Companies

Lenox Plaza ▪ 3384 Peachtree Road, N.E. ▪ Suite 700 ▪ Atlanta, GA 30326

Main: 770.692.4750 ▪ Direct: 770.692.4758 ▪ Cell: 770.608.9315 ▪ Legal Fax: 770.692.9379

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From: Stacy Scott

Sent: Thursday, September 6, 2018 4:03 PM

To: 'Della Lewis' <DLewis@columbusga.org>

Subject: RFP 18-0022: Inmate Medical Services & Pharmacy Services for the Muscogee County Prison

Importance: High

Della,

Pursuant to your letter of August 29, 2018, attached is our proposed Contract for the Medical and Pharmacy Services at the Muscogee County Prison.

Thank you so much for your assistance, patience, and continued support of CorrectHealth.

Kindly,
Stacy

Stacy M. Scott, Esq., Chief Legal Officer

CorrectHealth Companies

Lenox Plaza ▪ 3384 Peachtree Road, N.E. ▪ Suite 700 ▪ Atlanta, GA 30326

Main: 770.692.4750 ▪ Direct: 770.692.4758 ▪ Cell: 770.608.9315 ▪ Legal Fax: 770.692.9379

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COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-653-4105, Fax 706-225-3033
www.columbusga.org

August 29, 2018

Carlo A. Musso, MD
CorrectHealth Muscogee, LLC
3384 Peachtree Road NE, Suite 700
Atlanta, Georgia 30326

Re: RFP No. 18-0022; Inmate Medical & Pharmacy Services for Muscogee County Prison (Annual Contract)

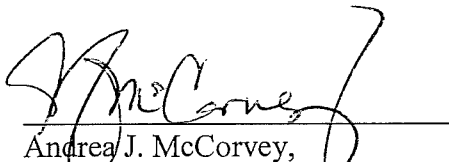
Dear Dr. Musso,

Congratulations! During its meeting of August 28, 2018, Columbus Council authorized the execution of the referenced annual contract with CorrectHealth Muscogee, LLC. Please provide a copy of the draft contract, for review by the City Attorney's Office, for the Muscogee County Prison. Please email the document at your earliest convenience to the attention of Della Lewis at dlewis@columbusga.org.

The current contract with Correct Care Solutions will expire on September 30, 2018. Therefore, you should contact Correct Care Solutions for all necessary records, files and any other items required for the transition to the new contract. The contacts for Correct Care Solutions are Alex English (telephone 615-324-5758 and email aenglish@correctcaresolutions.com) and Patrick Cummiskey (telephone 615-324-5777 and email patrick@correctcaresolutions.com).

Thank you again for your submittal, presentation and for being so accommodating to the requests of the Evaluation Committee.

Sincerely,



Andrea J. McCorvey,
Purchasing Division Manager

CC: Warden Dwight Hamrick, Muscogee County Prison
Deputy Warden Daniel King, Muscogee County Prison
Deputy Warden Sherman Thomas, Muscogee County Prison
Stacy M. Scott, Esq., Chief Legal Officer
Lucy Sheftall, Assistant City Attorney