

ADDENDA 3

Troup County Jail Inmate Health Care & Pharmacy Services

Many of the questions submitted have not been answered. We have made EVERY effort available to us to get you the requested information, it seems that it is out of our hands. I hope that each of you that intended to submit a proposal will do so and when each company is evaluated and a selection is made, we will be open to further negotiations when the contract is underway and we all have the requested information. Please accept my apology for this and I give you my word that in all my years here with Troup County, this is the FIRST time I have ever not been able to supply all the requested information to potential bidders.

1. Please provide a copy of the current staffing matrix/schedule, including the Health Services Administrator and any clerical staff.

<u>Position</u>	<u>Weekly Hours</u>
General Dentist	2
LPN	200
LPN OT	0
RN Director	40
Chronic Care Rn	40
Physician	10
Clerical	20

***** Psychiatric billed as outpatient procedure**

2. We understand that the site nurses currently work 12-hour shifts? Does the County prefer 12-hour scheduling?
Whatever makes the medical staff happy is what we want.
3. From the Site Visit, we learned that the County wishes to increase staffing by 4 to 5 more FTEs. In which specific positions is the County wanting to add FTEs? Will these positions be in place at contract start? Or do they want the new contractor to add these positions to their staffing plans?
We believe if you have the staff to cover 24 hours as described in "Objectives of the RFP", item 3, you can fulfill the requirements of the contract. The current provider does not have the full time employees to do so and therefore requires several hours of overtime from their employees to maintain 24 hour coverage. If a provider has the coverage described and does not feel they have adequate coverage, we look at be negotiating at that time.

4. Please provide the total costs of off-site care (off-site specialty providers and hospitalization) for each of the last three years.
2021 - \$278k, 2022 - \$229k, YTD 6/2023 - \$134k
5. Please provide the total costs for pharmacy for each of the last three years.
2021 - \$203k, 2022 - \$335k, YTD 6/2023 - \$159k
6. Please provide copies of the facility's medical statistical reports (Health Services Reports) for each of the last three years, if available.
Attached
7. What company currently provides laboratory services for the County (specimen pick up and testing)?
LabCorp
8. Is the County satisfied with the mobile x-ray services provide by Mobile HCX? **YES**
9. Would the County like the contractor to conduct initial medical and mental health receiving screenings rather than booking staff? **No**
10. Please provide an inventory of all medical and office equipment that will be available for use by the new contractor.

DENTAL CHAIR	EKG	O2 Mixer(rent)	O2 tanks x 4	WelchAllen Thermometers x 4
AUTOCLAVE	STRETCHER/ IV pole		AED/jump bag	WelchAllen Oto/Opth Scopes x 2
SONIC CLEANER	WC x 3/walkers/crutches		NEBULIZER x 2	TruMetrix BS monitor x 4
Handheld DDS XRAY	BS toilet		STETHOSCOPES	BP monitors (auto/manual x 5)

FILM/DDS XRAY DEVELOPER	TOOL CART	PORTABLE CARTS x 5	CENTRIFUGE	EAR/EYE IRRIGATION
DENTAL TOOLS	PILL CART	MEDICATION and STAFF REFRIDGERATOR (dorm size x2)		
HOSPITAL STYLE BED x 1	Various tools: hemostats, scissors, clippers, tweezers			

11. Will the County pay for any necessary new medical or office equipment required?
Yes, anything that is discussed and agreed that is needed beyond what is already provided.
12. Does the County want to continue pharmacy services through Holmes Pharmacy? Does this pharmacy provide medications in blister packs per each inmate prescription? Does this pharmacy deliver medications to the facility on a daily basis?
All inmate health care providers Troup County have utilized Holmes Pharmacy some. They help to provide what is needed.. We do like to keep as much of the business local as we can, but it will not be required.
13. If the contractor wants to utilize a national pharmacy and receive medications via shipping, will this be acceptable? Will arrival of medications ordered within 24 hours be sufficient as long as stock medications are maintained on site for same day dispensing?
Use of a national pharmacy is acceptable with Troup County, but as specified, medication required for an inmate must be available or delivered to the jail the day it is ordered/prescribed..
14. Does the County conduct any special medication passes during the day? (For medications that are required to be administered 3 or more times per day.)? **NO**

15. Will the County consider a proposal for an electronic medical records system? Will such proposal need to be separate and optional?
As addressed in Addenda 1, the county does not currently utilize electronic medical records but we would like for each proposer to include an option for the use of electronic medical records.
16. Will the County allow an electronic medical records system to be hosted remotely in a secure cloud environment? **YES**
17. What is the Jail's current Jail Management System?
Professional Technical Solutions
18. Does the Jail have Wi-Fi available in the clinic? In the living units?
Clinic – Yes - Housing - No
19. Will the County accept the use of a licensed mid-level provider (APRN or PA) to supplement physician services and serve with the physician on call on a rotational basis?
Yes
20. We understand that the current contractor provides psychiatric care and refers patients that need mental health services to the Pathway Center. What were the costs for mental health services through the Pathway Center for each of the last three years?
CURRENT CONTRACTOR DOES NOT REFER TO PATHWAYS. TROUP COUNTY MENTAL HEALTH COURT REFERS TO PATHWAYS.
21. Will the County accept a proposal for on-site mental health care through the selected contractor? If so, will this proposal need to be separate and optional?
We will accept on site mental health care. Please provide the pricing separate for the mental health care but it is not our intention for it to be optional.
22. Does the County currently have a Medication Assisted Treatment (MAT) program in place for inmate opioid users? If not, would the County want to include a MAT program as part of this contract? **No**
23. Is the County currently accredited by the National Commission on Correctional Health Care (NCCHC) or the American Correctional Association (ACA)? If not, will the County want the Jail's medical and mental health services to be accredited in the future? **No**
24. Do you wish to retain any of the current medical staff?
Yes, the Sheriff does want to retain some of the current medical staff.
25. Can you provide current staff's salary range and seniority with the current vendor?
Is there a shift differential?
Current provider would not provide this information.
26. How many officers currently work at the Effingham County Jail/Prison?
We have no idea about Effingham County, Troup County has 75 jail staff members.
27. Is the health services provider responsible for the cost of all drug screenings for employees at the facility?
No, the provider is not responsible for any drug screenings or medical treatment for employees unless there is an emergency while the employee is on the job.
28. Who is/are your current physician(s)? **Dr. Leilani Shivers**
29. Would you like the vendor to work with this physician if possible?

The choice of physician is up to the provider.

30. How many days is the current physician in the facility? **2 Days**
31. How long does the physician stay? **4 Hours Each Day**
32. Is an Advanced Practice Provider (NP/PA) acceptable with oversight by a licensed physician?
Yes, this is acceptable.
33. Is the practitioner required to have a Medicaid Number?
34. Is there a supervising nurse? **Yes**
- a. If so, is he or she an RN or LPN? **RN**
 - b. Is he or she administrative only? **No**
35. Will the County or the Medical Service Provider be responsible for paying the bills of the current pharmacy company (Contract Pharmacy Services) under the new contract?
Under the new contract, the provider will pay for the pharmacy for anything from the start date of the new contract forward only.
36. Please provide the following information about medication administration.
- a. Who administers medications, e.g., RNs, LPNs, medical assistants? **RN/LPN**
 - b. How many medication passes per day do you currently have and at what times? **2**
- 1. Are medications passed out in the housing unit and by whom? **Yes, by the nurse.**
 - 2. Are any medications sent with inmates/detainees upon discharge? **Yes**
 - 3. Are the medication carts owned by the county? **Yes**
37. Are any medications allowed to be brought in from home? **Yes**
38. Are any medications allowed to be “kept on person” within the jail?
- a. If so, which are allowed? **At the discretion of the medical director.**
39. Are there over-the-counter medications on commissary?
- A. If so, are the inmates/detainees allowed to keep commissary medications on person?
40. Please provide a listing of current medical commissary items.
41. Under the current contract, who is financially responsible for the cost of HIV medications and other AIDS-related drugs? Will this remain the same under the new contract?
Under the current contract, Troup County pays for all medications.
42. What time(s) and location(s) are sick call currently conducted?
Medical Unit Time Varies
43. Are there specific times that jail security does not want inmate/detainee movement for sick call?
- a. If so, when? **Yes, when we are feeding meals.**
44. Is a security officer currently present for every sick call?
We have a security officer Monday - Friday 8 am to 5 pm.
45. What on-site specialty clinics are conducted?

46. How many health assessments are performed each week?
47. Do you have a dental room and equipment? **Yes**
48. Do you currently have a dentist who comes on-site? **Yes**
- If so, how long is the dentist onsite? **8 Hours**
 - How many days per week is the dentist on-site? **Once Monthly**
 - Does the dentist have an assistant? **Nurse on Duty Assists**
49. Do you use a mobile x-ray service?
- If so, who? **Trident**
50. Do you currently do TB screening by asking questions and/or TB skin test? If you do TB screening, when do you complete the screening or skin tests? How many TB tests did you perform in 2022? How many done so far in 2023?
Both screenings/tests Within 10 days / 2022-1,535 / 2023-938
51. Are there any special business license fees or taxes that are to be paid to the city or county?
52. Do you currently have a financial limit (POOL) with the current contract?
- If so, what does it cover and how much is it?
We do not currently have a financial limit (Pool). We have with previous contracts and it is our goal to return to having a cost pool.
53. Have you gone over the financial limit (POOL)?
- If so, how many months into the contract was it before you went over the limit? **N/A**
 - If so, how much over the financial limit (POOL) did you go over every year? **N/A**
54. How much is the current co-pay? **\$5.00**
55. Would you like the new contractor to re-price all medical claims?
Yes
56. What is your current process for re-pricing medical claims? **Sent out to a third party.**
57. Do you have a state statute that you reprice to?
58. What is the 3-year average spending on the following: ambulance, in/outpatient, pharmacy, medical supplies, durable medical supplies, mobile x-ray and laboratory?
59. May we provide an alternate proposal? **Yes**
60. Would the county prefer the vendor to review/verify the inmate/detainee medical bills, apply any discounts and pay the invoice for the county (act as a third-party administrator)? **Yes**
61. Is there a dedicated fax line to medical? **Yes**
62. Is there internet connection already in the medical unit? **Yes**
- Is this provided by the county or the current contractor? **County**
 - If the current contractor is providing, do you know the cost? **N/A**

- c. What kind of network gear is needed or currently in place for internet at your facility if contractor must supply? **None**
63. How many simultaneous med passes occur? **1 Complete pass twice per 7p-7a shift.**
64. How many desktop computers do the medical staff currently use? **2**
- a. How many are county owned vs. contractor owned? **County X 2**
65. How many laptops do the medical staff currently use? **1**
- a. How many are county owned vs. contractor owned? **Contractor x1**
66. How many scanners do the medical staff currently use? **1**
- a. How many are county owned vs. contractor owned? **County X 1**
67. How many printers do the medical staff currently use? **1**
- a. Are they county owned, or contractor owned? **County X 1**
68. Can we please have a copy of all questions/answers received by other vendors?
All questions have been combined for this addenda.
69. Are any members of the jail's current health service workforce unionized? **NO**
70. Is the site accredited? If so, by who and when is the next accreditation date? Can we get a copy of the last audit? **No**
71. Is the jail currently subject to any court orders or legal directives? If yes, please provide copies of the order/directive. **No**
72. Of the total population, how many are: **551**

County	28
ICE	
US Marshal	
Juveniles	
Native American	
Federal	
DOC	6
Work Release	20
Indigent	30
Other	497 Pretrial

73. What mental health services are available to inmates/detainees in your jail? (Check all that apply)
- Crisis intervention
- Medications and their management
- Psychiatric medications and their management
- Referral of inmates/detainees to mental health provider
- Individual counseling/therapy
- Group counseling/therapy

- Substance abuse treatment/services
- In-depth physical evaluation assessment (typically occurs after 14 days in custody – includes mental health issues)
- Case management
- Release planning
- Other (please explain)

74. Is crisis intervention available 24 hours per day/7 days per week? **Yes**

75. Indicate the titles of the provider(s) of mental health services in your jail. Please check all that apply and indicate the average number of hours **per week** for each.

<input checked="" type="checkbox"/> Psychiatrist –	<input checked="" type="checkbox"/> 2 hours/week
<input type="checkbox"/> Psychologist –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Masters Level Social Worker –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Registered Nurse (RN) –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Nurse Practitioner –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Licensed Practical Nurse (LPN) –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Jail Chaplain –	<input type="checkbox"/> _____ hours/week
<input type="checkbox"/> Other (please explain) –	<input type="checkbox"/> _____ hours/week

76. Indicate the level of screening for inmates/detainees at your jail. (Check all that apply)

- Yes Basic intake health screening, generally done at booking for medical and mental health issues by correctional officer.
- Separate screening tool specific to mental health/suicide prevention issues completed by correctional officer.
- Separate screening tool specific to mental health/suicide prevention issues completed by RN or mental health professional.
- Other (please explain)

77. Is there a secondary review of screening reports for accuracy, completeness, legibility, and the referral process? (e.g., by first line supervisor, jail nurse, etc.)

Yes, by whom? **No**

78. Is staff required to use a prescribed form when making mental health referrals?

Yes No

79. Are arresting/transporting officers and probation agents, etc. required to complete a pre-incarceration form identifying mental health risk issues? **Yes**

80. Does your jail staff receive ongoing training on **mental health issues**?

If Yes, How often? (please explain) **No**

How is training delivered? (please explain)

_____ No

81. Does your jail staff receive ongoing training on suicide prevention issues? **No**

_____ Yes, How often? (please explain)

_____ How is training delivered? (please explain)

_____ No

82. Will the county want the vendor to do CPR and AED training with their staff at the Jail? **Yes**

83. Will the County allow for the top 2 or 3 vendors to make oral presentations after the panel scores the responses? **Possibly**

84. Please list the programs offered to inmates/detainees in your jail, such as education, religious, recreation, life skills, substance abuse, etc. **We offer church services.**

85. Does the Facility wish to obtain NCCHC and/or ACA accreditation? **No**

86. What is the bidding ADP? **570**

87. Population:

a. Are there any juveniles housed in the Facility? **NO**

i. Transgender **Yes**

88. Staffing:

a. Are there currently any unfilled positions/vacancies?

i. If so, please identify the position(s) and length of time unfilled.

b. Is the current staffing plan considered adequate for the Facility? **When fully staffed, yes.**

c. Are mental health staff responsible for coordinating trial competency examinations and transfers? **No, they are court ordered.**

d. Is there any specialty housing available for inmates with mental health problems? **No**

i. If so, please provide the number and capacity of mental health housing units.

e. What are the number and location of suicide watch cells? **4**

f. How many inmates are currently receiving mental health services?

89. Mental Health Statistics: Please provide the following information:

a. Number of attempted suicides in the past two (2) years **17**

b. Number of completed suicides in the past two (2) years **2**

c. Number of episodes of suicide watch per month in the past two (2) years

90. Number of mental health grievances per month

91. Number of episodes of seclusions per month

92. Are any mental health services provided by a community services board (CSB) or private provider, other than those addressed in the RFP?
- If so, please identify the mental health services, personnel, and hours provided by the CSB/private provider.
 - Will the County continue to use a CSB/private provider of mental health services in addition to those to be provided by the new Contractor?
- a. How many AEDs are on site? **1**
- b. Who is responsible for maintaining the AEDs—the Contractor or the County? **County**
93. Expenses: Please provide the following information for the past two (2) years:
- Total pharmacy costs **See Question 3**
 - Total psychotropic medication costs
 - Total HIV/AIDS medication costs **\$556,000.00 Approximately**
 - Total Hep C medication costs **\$0.0**
94. Please identify the following current providers:
- Pharmacy services **Holmes Pharmacy**
 - Laboratory services **Labcorp**
 - Mobile X-ray services **Trident**
 - Ambulance service(s) **AMR**
 - Biohazardous waste removal services **Sunbelt**
95. What telemedicine services are currently provided, if any? **PSYCH VISITS**
- If none, will the County consider the use of telemedicine services? **Yes**
96. Are dental services provided using an on-site dental operator or through a mobile dentistry provider? **On-Site**
- If there is an on-site dental operator, how many dental chairs are there? **One**
 - Is the dental X-ray equipment film or digital? **Film**
97. Please identify names and provide contact information for the following individuals:
- Medical Director **Dr. Leilani Shivers C 706-302-4224**
 - Midlevel Practitioner **N/A**
 - Psychiatrist **Dr. Usmair Janjua C 404-667-5329**
 - Dentist **Dr. Jasmine Ahn C 213-220-2326**
98. Please identify all local hospital(s) utilized for emergencies and inpatient stays.
Wellstar WGMC
99. Which discipline/credential conducts the intake/receiving screening (e.g., RN, LPN, EMT, Correctional Officer)?
- If this is a medical post, is it staffed 24/7?
100. How many intakes are conducted on average per day, per month, and per year?

101. Practitioner Which discipline/credential currently conducts the 14-day health assessment (e.g., RN, Midlevel, Physician)?

102. When are PPDs implanted—during intake or during the 14-day health assessment? **Within 7 Days**

103. Are PPDs implanted on all inmates or only as medically indicated? **All Patients**

104. Is Nurse Sick Call conducted by RNs or by LPNs? **Both**

105. What is the Facility's policy on providing medication to inmates upon discharge?

106. Methadone:

a. Is methadone provided to any patients other than pregnant females?

b. Is methadone provided on site or off site?

c. Who is the local methadone provider?

107. Catastrophic Financial Capitation:

a. What is the current offsite catastrophic financial capitation, if any?

b. Have the costs for capitated services fallen below or exceeded the capitation limits in the past two (2) years?

c. By how much has the current Contractor fallen below or exceeded the cap in each of the past two (2) years?

d. Is there a cap on pharmaceuticals?

108. Will there be an opportunity to ask additional questions? **NO**

109. What amount is budgeted for inmate medical services in the upcoming fiscal year? **\$2,400,000.00**

a. Does this include offsite specialty care and inpatient hospital stays? **Yes**

*For inpatient hospitalization, please include the average length of stays and the longest length of stay for each period.

**Please specify off-site or on-site.

110.. a. Please verify whether the Jail holds weekends.

b. If yes, please indicate the average number per week for 2021, 2022 and 2023 year-to-date.

Behavioral Health

110. In what fashion are behavioral health patients seen (at their cell door, in an interview room, in the counselor's office, etc.)?

111. Is there a behavioral health unit?

112. Where are patients held who are on suicide watch (intake, medical, the pod)?

113. a. How many inmates are currently on psychotropic medications?

a. Please confirm your current ADP.

b. What is the average number of inmates who were given psychotropic medications during 2022? What was the average ADP during that time?

- c. What is the average number of inmates who were given psychotropic medications during 2021? What was the average ADP during that time?

114. Confirm the responsibility of the 15-minute checks for suicide watches.

115. In case of the need for one-to-one monitoring for an actively suicidal patient, who does the one-to-one monitoring?

Pharmacy

116. Please provide pharmaceutical data for the past two years and year to date to include:

- a. number of inmates on HIV medications each month or an annual average/year (2021, 2022 and 2023 to date)
- b. number of inmates on Hep C medications each month or an annual average/year (2021, 2022 and 2023 to date)
- c. blood or plasma factoring medications each month or an annual average/year (2021, 2022 and 2023 to date).

117. How many medication carts are you currently using for medication administration pass?

118. On average, how long does each medication administration pass take?

119. Who is currently providing the Covid-19 vaccines?

120. a. 1. Please provide how many current nursing staff vacancies, by position and shift, the Jail is currently experiencing.

121. What percentage of staffing does this represent?

122. How many of these positions are filled by agency nurses currently?

- b. Please provide the average amount of nursing shifts covered by agency nurses per year for the past two years.

123. a. Please specify whether you have experienced a vacancy in the physician position at any facility for the past two years.

- a. If yes, how long was this position vacant?

124. Was this position filled by an agency physician?

125. a. Please specify whether you have experienced a vacancy in the midlevel provider (nurse practitioner/physician assistant) position at any facility for the past two years. **NO**

- a. If yes, how long was this position vacant?

Was this position filled by an agency provider?

126. Would the Sheriff's office be agreeable to upgrading the licensure requirements on the Matrix submitted in the RFP ? Example upgrading from an LPN to an RN, or a Medical Technician to an LPN.

127. Please define the parameters or requirements surrounding the "Additional Requirement" of the Sheriff's approval of on-site staff. For example:

128. Is this for all staff or just certain positions? If position related, which positions?

129. Does the contractor have to wait for approval from the Sheriff's Office before offering a position to a particular candidate? This may delay hiring or cause the candidate to select another employer if Contractor does not timely respond to the candidate.

Accreditation

130. Did the facility pass the National Commission on Correctional Health Care (NCCHC) survey?
- a. When is the next survey date?
131. Did the facility pass the DOC audit?
- a. When is the next audit date?
132. Do you have any other accreditations?
133. Please provide a listing of currently owned/used medical and office equipment, including the current condition and the owner of the item (Contractor or County).
134. Section O – Are there any current programs or plans for change that Troup County is considering for the near future?

STAFFING

The most recent version of the services agreement lists staffing as: MD 8 hrs/week, LPN 200 hrs/week, RN 40 hrs/week, dentist 2 hrs/week, clerical 20 hrs/week, psychiatrist 2 hrs/week

135. Is this the staffing model that the current provider is delivering?
136. Is this the staffing model that the jail wishes to continue? If not, what changes would the jail like to see?
137. Do any of the current staff have overtime built into their regular schedule (e.g. a nurse works 36 hours one week and 48 the next, resulting in 8 hours of overtime)? If so, what are those schedules?
138. What are the current rates of pay for each staff level? When was their last pay increase and by what amount? If that information is unavailable, what is the average/expected rate for RN, average/expected rate for LPN, average/expected rate for theclerk?

OFF SITE CARE

139. Does the county or current vendor carry medical insurance for the inmate send-out expenses?
140. Does the county or current vendor utilize ACCG for repricing? If not, which service (if any) is being used, and is there an additional price or percentage added for that service?

COST POOL

141. If the new healthcare contract is to include a Cost Pool/Cost Cap for the first time, what amount will that cap be, what is included, and at what limits of liability?

The amount will be negotiated with the chosen provider.

MENTAL HEALTH SERVICES

The RFP states that the jail has an existing contract for mental-health/psychological services.

142. Does that mental-health provider prescribe medications?
- a. Does that mental-health provider handle crisis-type responses in the jail, including seeing inmates who are placed on suicide watch?
143. Does that mental-health provider refer patients to the psychiatrist provided by the Health Care Services vendor? If so, approximately how many inmates are referred to the psychiatrist each week?

URINE DRUG SCREENS

144. Does the current inmate healthcare services contract include urine drug screens for every new intake? **NO**

If so, at whose expense?

145. Does the jail currently screen all inmates for illicit drugs via urine drug screen?
146. Does the jail intend to screen all inmates for illicit drugs via urine drug screen?
147. Has the jail, county, or current health services vendor been party to any litigation resulting from inmate health services at the jail? **Yes**
148. Does the jail know of or expect any forthcoming litigation that will impact health services delivery? **No Current/Expected Forthcoming**