

A Virtual Pre-Proposal Conference to hear question, etc from contractors proposing to bid on RFP 875-20 issued for Medical Services. Michelle Jackson presented a virtual tour of the medical facility for the individuals logged into the Virtual Pre-Proposal Conference. Once the tour was completed the following questions were asked.

Chris Bell, Corizon

Question: Where is nursing sick call being completed, in the pods or in the unit

Answer Major Armstrong: The inmates when they have a sick call slip give it to the nurse when they come into the pod for medications. They are put on the schedule usually within the next 24 hours. But it is conducted in the clinic.

Chris Bell, Corizon

Question: What about the face to face triage. Are they using the kiosk system for the sick call requests?

Major Armstrong Answer: No, No what we do whenever the nurse comes into the pod to do the medication if anybody has a sick call request they are suppose to fill it out in-front of the nurse so the nurse can make a decision immediately as if the person needs to go to the clinic now or if they can wait for 24 hrs later for a normal sick call like if someone has a sore throat or cough as opposed to some other type of injury that would need immediate treatment. But they do make that face to face interaction with the nurse when they fill out the sick call slip.

Eva Podiacha, Armor

Question: Do you have a medical observation unit or an infirmary?

Michelle Jackson Answer: We have an infirmary

Mandi Hixenbaugh

Question: What is Housing Unit 6?

Michelle Jackson Answer: Housing unit 6 is our pre release center which houses weekenders, work release and some FBOP inmates, houses weekenders, work release inmates and Federal Bureau of Prisons.

Chris Bell, Corizon

Question: Michelle can you tell us if it is 12 or 8 hour shifts.

Michelle Jackson Answer: That is going to be up to y'all on how you choose to propose it. Right now it is 12 hours shifts.

Shane Sunday Quails Group

Question: In researching the facility I saw in a couple of news articles that they were currently under probation by the state. Is there a record of what that might in tell for the medical unit any were that can be provided?

Major Armstrong, Answer: What was the question again?

Shane Sunday Quails Group

Question: Several article noted that the facility was under probation by the state I was just curious what impact that might have on the medical vendor and the needs of the job.

Lt. Col. Reed Answer: We have guidelines we must meet by the Department of Corrections. That is with intakes making sure they are screened in proper amount of time as outlined in their standards so that is one thing that will really affect you guys.

Michelle Jackson Answer: Basically that is also covered in the RFP requirements for the 4 hr intake as well as the 14 day assessment and the 15 day assessments.

Chris Bell Corizon,

Question: Michelle can you tell us how long it takes as far as the new hire clearance process now. How quickly can we get people through clearance for new hires?

Lt. Col Reed Answer: We can probably get them through in about three days. Cause they have to go through our PREA classes, orientation classes, background check completed and that is pretty much it.

Karen Davis, Corizon

Question: Can I clarify one point? So from the time they submit a candidate for work it only takes three day to get them cleared and able to come to the facility for orientation or does that three days include the orientation.

Lt. Col Reed Answer: Well it takes in three days, it depends on the background the background is the slowest part of the process after that it is just a matter of sitting through the classes not even a full day of classes. In three days we have been able to get people here.

Karen Davis, Corizon

Question: So the background check do you have a typical with a clear background does it typically take 24 to 48 hours to clear or is that a longer process. Some sites it is much longer so I just wanted to get a feel.

Lt. Col Reed Answer: No if they have a pretty clear background and we run it through our VCIN and screen everything. It is just a matter of a couple of days.

Karen Davis, Corizon

Question: Follow up how often is there training classes for those new hires

Lt. Col Reed Answer: Currently we always schedule on Wend. We start our training for contractor at 08

Will the vendor be financially responsible for the next ACA, NCCHC accreditation for the next audit?

Michelle Jackson Answer: Yes

Karen Davis, Corizon

Question: Follow up for the ACA, NCCHC accreditation is there a date set for either of those surveys.

Michelle Jackson Answer: I believe Major Armstrong do you have the date I thought we were coming up for the NCCHC

Major Armstrong, Answer: I thought we were coming up for the end of June. I do not have the date on me but I do believe that is for the end of June. We just went through the ACA so we do have a couple of years for that.

Mandi Hixenbaugh

Question: Describe any special programming for the mental health patients in the facility.

Michelle Jackson Answer: We have TC programs that are set up for various aspects. I can provide you with more details in the written response because I do not have that information in front of me at this time.

Questions submitted by Contractors

Corizon

1. Please provide the current contract and exhibits.

Yes, please see attachments

2. Please provide the last 12 months of staffing withholds and the most current three months staffing reconciliations.

<i>Month</i>	<i>Staffing</i>
<i>May -20</i>	
<i>April -20</i>	<i>\$22,919.02</i>
<i>March -20</i>	<i>\$26,000.02</i>
<i>Feb -20</i>	<i>\$26,169.02</i>
<i>Jan - 20</i>	<i>\$24,089.02</i>
<i>Dec - 19</i>	<i>\$29,046.35</i>
<i>Nov-19</i>	<i>\$24,392.34</i>
<i>Oct -19</i>	<i>\$29,947.68</i>
<i>Sept -19</i>	<i>\$18,464.34</i>
<i>Aug - 19</i>	<i>\$19,114.34</i>
<i>July -19</i>	<i>\$17,645.34</i>
<i>June- 19</i>	<i>\$16,817.67</i>
<i>Totals</i>	<i>\$254,605.14</i>

3. **Please** provide the last 12 months performance withholds and the corresponding calculations.

<i>Month</i>	<i>Intake Screen</i>		<i>Health and Physicals</i>	
	<i>Quantity</i>	<i>Penalty</i>	<i>Quantity</i>	<i>Penalty</i>
<i>May -20</i>	<i>41</i>	<i>\$4,100.00</i>	<i>4</i>	<i>\$800.00</i>
<i>April -20</i>	<i>16</i>	<i>\$1,600.00</i>	<i>0</i>	<i>\$0.00</i>
<i>March -20</i>	<i>38</i>	<i>\$3,800.00</i>	<i>15</i>	<i>\$3,000.00</i>
<i>Feb -20</i>	<i>52</i>	<i>\$5,200.00</i>	<i>19</i>	<i>\$3,800.00</i>
<i>Jan - 20</i>	<i>38</i>	<i>\$3,800.00</i>	<i>28</i>	<i>\$5,600.00</i>
<i>Dec - 19</i>	<i>56</i>	<i>\$5,600.00</i>	<i>20</i>	<i>\$4,000.00</i>
<i>Nov-19</i>	<i>28</i>	<i>\$2,800.00</i>	<i>9</i>	<i>\$1,800.00</i>
<i>Oct -19</i>	<i>65</i>	<i>\$6,500.00</i>	<i>7</i>	<i>\$1,400.00</i>
<i>Sept -19</i>	<i>51</i>	<i>\$5,100.00</i>	<i>17</i>	<i>\$3,400.00</i>
<i>Aug - 19</i>	<i>37</i>	<i>\$3,700.00</i>	<i>31</i>	<i>\$6,200.00</i>
<i>July -19</i>	<i>39</i>	<i>\$3,900.00</i>	<i>23</i>	<i>\$4,600.00</i>
<i>June- 19</i>	<i>108</i>	<i>\$10,800.00</i>	<i>10</i>	<i>\$2,000.00</i>
<i>Totals</i>	<i>528</i>	<i>\$52,800.00</i>	<i>179</i>	<i>\$35,800.00</i>

4. Please provide pricing forms or instructions on how the RRJA would like prices to be submitted. Please also indicate if pricing is for single year or term of contract.
Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.
5. Please provide a copy of the most recent ACA and NCCHC accreditation reports.
The requested information will be provided to the successful vendor.
6. 6.1 Accreditations Please define what areas the indicated \$10,000 penalties address – medical, operational, structural?
The contractor would receive the penalty if RRJA failed to meet accreditation require due to medical.
7. What is the RRJA's position on Virginia Code 53 .1-126 as it relates to financial responsibility of necessary medical services associated with pre-existing conditions?
RRJA follows the Virginia Code 53.1-126 and does not authorize payment for any hospital treatment and or hospitalization for pre-existing conditions.
8. What ADP should be utilized for price submission? Annually?
Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.
9. 1.12 Definitions - The Off-site Medical Expenses references dialysis services, physical therapy, and laboratory services. To clarify, are these costs for only off-site services or do they also include on-site services for Aggregate Cap calculations?
Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.
10. 6.3 Paybacks & Credits Would the RRJA consider staffing withhold calculations we calculated on a monthly basis as is industry standard versus an "hour for hour" approach?
RRJA currently utilizes the monthly version.
11. 6.5 Staffing and Personnel Does the RRJA utilize 8- hour- or 12-hour shifts for corrections staff? Will the RRJA allow vendor to decide on this shift aspect for their staffing plan?
The Vendor should develop an appropriate staffing plan to meet the requirements of the RFP.
12. 6.12 Personnel Security Requirements Can you describe in further detail the timeframe for new hire clearance?
Backgrounds can be completed in approximately 72 hours and orientation takes a minimum of 8 hours
13. Off-site Reconciliation The reconciliation report reflects a \$750,000 aggregate cap. Should bidders utilize a \$750,000 Aggregate Cap for the response?
Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.

14. General/Pharmaceuticals - Would the RRJA consider a Pharmacy Aggregate Cap or limits on such medications associated with Hepatitis C, HIV, and hemophilia? Is the medical vendor responsible for the pharmaceuticals cost?

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

15. Please provide a list of all equipment in the medical unit, medical administrative area or behavioral health areas that will remain in the facility and is property of the RRJA. Also, a list of other property that is vendor-owned and can be negotiated upon award.

Please refer to exhibit 7 of the RFP for Office Furnishings and Medical Equipment.

16. 7.14.2 Pharmacy Services Given that Westwood Pharmacy is the pharmacy provider, will the medical provider be responsible for pharmacy costs?

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

17. 7.29.9 Transfer Who is responsible for 1:1 / 15-minute increment checks? How are these presently done? Paper or electronic?

The mental health contractor after an assessment of a mental health inmate will fill out paperwork indicating what type of special watch the inmate needs to be placed on. This information is hand delivered to the on duty Watch Commander.

Security staffs are responsible for conducting any special watch such as 15 min suicide watch and they are done paper

18. Accreditation – General Please provide all upcoming audit dates for accreditation. (VADOC, NCCHC, ACRS and ACA)

NCCHC June 2020

VADOC February 2021

ACA May 2023

ACRS May 2023

19. Accreditation – General - Is the current vendor leaving all required information needed for the audits?

Yes, the contractor is required to leave all required information needed for audits.

20. Accreditation – General Were any issues noted during previous audits? (VADOC, NCCHC, ACRS and ACA)

- a. Please provide that information if possible.

The requested information will be provided to the successful vendor.

21. 7.3.2. Subcontractor Agreements Can RRJA please provide a list of community providers currently contracted to provide offsite care, in order to ensure continuity of care? If not, will RRJA provide to the selected vendor upon award?

The requested information will be provided to the successful vendor.

22. 7.8.5. Ambulance Services - Please provide a list of currently utilized ambulance providers servicing RRJA.

RRJA currently has an agreement for direct billing with PG EMS and Fire for transports from the facility. PG EMS and Fire is the primary ambulance service that is sent to the facility by 911.

23. 7.13.9. Biohazard Waste How many biohazard waste bins are currently onsite? How often are these bins picked up?

The requested information will be provided to the successful vendor.

24. 7.17.1. Laboratory Services - Who is the current laboratory services provider?

The requested information will be provided to the successful vendor.

25. 7.17.2. Dialysis Services - How many days per week is dialysis provided on-site at RRJA? Are any patients sent off-site for treatment? If so, please provide location.

The days per week and off site treatment vary based on the requirements of the inmates.

26. 7.17.2. Dialysis Services - Who is the current dialysis provider? How many patients are currently on dialysis?

The requested information will be provided to the successful vendor.

27. 7.17.4. EKG Services - How many EKG devices are located at RRJA? Who is the owner of these devices? Who is the current EKG provider?

There is one EKG device that is owned by RRJA.

28. 7.17.4 EKG Services - How many EKGs have been performed onsite in the past 12 months?

There have been over 100 performed over the past 12 months.

29. 7.17.5. Radiology Services - Who is the current radiology provider? Do they provide any other imaging services besides x-rays?

The requested information will be provided to the successful vendor.

30. 7.17.6. Other Specialty Services - Where are mammography, CT scans, MRIs and ultrasounds currently provided? How many of each test has been performed in the past 12 months?

The requested information will be provided to the successful vendor.

31. 7.18 Hospital & Specialized Ambulatory Care - Which hospital is the main Emergency services hospital closest to RRJA? Which Tri-City area hospitals are currently contracted to treat the RRJA patients?

The requested information will be provided to the successful vendor.

32. 7.18 Hospital & Specialized Ambulatory Care - The RFP states "All agreements for off-site services, inpatient or outpatient, as well as all subcontractor agreements in general, shall be subject to the approval of RRJA." Does this mean that the negotiated reimbursement rates must be pre-approved by the RRJA before the Contractor can establish a contract with hospitals & subcontractors?

No

33. 7.19. Translation/Interpretation Services - Who is the current provider of translation services? Are these translation services provided by telephone?
RRJA is currently utilizing Voiance Language Services.
34. 7.28.3. On-Site Services - Please list all current Onsite Specialty clinics being provided, along with the frequency of each clinic; i.e. once per week, once per month, etc. Please list the names of the physicians providing the onsite clinics.
The requested information will be provided to the successful vendor.
35. 7.28.3. On-Site Services - Who is the current oxygen tank vendor?
The requested information will be provided to the successful vendor.
36. 7.28.3. On-Site Services - Are shredding services provided onsite? If so, are those services the responsibility of the Contractor? How many shred bins are currently onsite at RRJA?
No, there is not shredding services provided onsite.
37. 7.36.2. Pregnancy & Withdrawal - Where are pregnant methadone patients taken for treatment? How many pregnant inmates are currently in custody?
The requested information will be provided to the successful vendor.
38. 7.40.11 Types of Devices - Who is the current provider of prosthetics & orthotics?
The requested information will be provided to the successful vendor.
39. Expenses Incurred Offsite Services - How many offsite visits/encounters were denied as pre-existing conditions in the past 12 months?
There were 140 pre-existing of the 215 inpatient hospitalizations and emergency room visits.
40. 9.13.4. Professional Liability Insurance - Will subcontractors be denied from providing care or be denied from being contracted to provide services if they don't carry the \$2,150,000/\$4,250,000 liability limits?
For construction contract, if any subcontractors are involved, the subcontractor will have workers' compensation insurance in accordance with §§2.2-4332 and 65.2-800 et seq. of the Code of Virginia. The offeror further certifies that the contractor and any subcontractors will maintain the insurance coverage during the entire term of the contract and that all insurance coverage will be provided by insurance companies authorized to sell insurance in Virginia by the Virginia State Corporation Commission.
41. 7.29.1 What group interventions are currently being provided, by the mental health staff?
RRJA does not have group interventions at this time.
42. 7.33.2 In restricted housing areas, will medical staff be approved to share weekend responsibility for mental health rounds, per NCCHC?
Yes
43. Exhibit 3 Staffing - What are the current weekend hours for mental health staffing?
Refer to the Staffing Matrix in Exhibit 3.

44. Exhibit 5 Stats - Will you break down "suicide event" into number of attempts and number of completed suicides?

There were a total of 8 attempts and 1 successful over the past 12 months.

45. Exhibit 5 Stats - What is the average number of inmates prescribed psychotropic medications?

34.11%

46. Exhibit 3 Staffing - What are the current weekend hours for mental health staffing?

Refer to the Staffing Matrix in Exhibit 3.

47. Exhibit 5 Stats - Will you break down "suicide event" into number of attempts and number of completed suicides?

There were a total of 8 attempts and 1 successful over the past 12 months.

48. Office Furnishings and Medical Equipment - Please confirm that existing computer equipment will be available to the incoming vendor on day one of the contract.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor.

49. Office Furnishings and Medical Equipment - Will the incoming vendor or RRJA be responsible for procurement of computers and peripherals?

The incoming vendor will be responsible for supplying their computers and peripherals.

50. Office Furnishings and Medical Equipment - Please provide inventory of all laptop computers.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor. 11

51. Office Furnishings and Medical Equipment - Please provide inventory of all desktop computers.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor. 22

52. Office Furnishings and Medical Equipment - Please provide inventory of all scanners.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor. 6

53. Office Furnishings and Medical Equipment - Please provide inventory of all printers.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor. 9

54. Office Furnishings and Medical Equipment - Please provide inventory of all signature pads.

Current computer equipment is the property of the current vendor and will not be available to the incoming vendor. 0

55. 7.41.1 Information Technology Requirements - Is the RRJA responsible for licensing, support, and maintenance of the existing EHR during the term of the contract?
- The successful contractor will not be responsible for the cost of the EMR system except for outside interface costs.*
56. 7.41.1 Information Technology Requirements - If the RRJA requires the incoming vendor to pay for the EHR licensing, support and maintenance of existing EHR, please provide the pricing.
- Not applicable.*
57. 7.41.1 Information Technology Requirements - Is the RRJA responsible for the cost of upgrading forms in the EHR?
- The successful contractor will not be responsible for the cost of the EMR system except for outside interface costs.*
58. 7.41.1 Information Technology Requirements - Will vendor be allowed to use existing network infrastructure including Internet access for required applications? If yes, what is the bandwidth available?
- Yes we have a 100mb circuit for the Jail*
59. 7.41.1 Information Technology Requirements - If vendor is required to provide its own Internet circuit, are there network drops in all locations where medical is provided?
- Not applicable.*
60. 7.41.1 Information Technology Requirements - Does wireless exist everywhere that medical services are provided including the housing units? If Wi-Fi exists but not in all areas needed, can vendor expand?
- Yes Wi-Fi is throughout the facility.*
61. 7. MEDICAL SERVICES - Is tele-medicine and/or tele-psychiatry currently utilized anywhere in the facility? If so, please list services provided or specialties.
- No, tele-medicine or tele-psychiatry*
62. 7. MEDICAL SERVICES - Is tele-medicine and/or tele-psychiatry an option in the delivery of services at your facility?
- Propose to RRJA how you would provide the services.*
63. 7.41.1 Information Technology Requirements - Please provide name and version of current JMS software.
- GTL Offender Management System v5.0.4*
64. Staffing and Personnel - Will vendor be allowed to install secure, IT-based time clocks that communicate to an external server for purposes of staff time management?
- Yes*
- a. Staffing and Personnel - Will time clocks be allowed to reside on the state network, or will the vendor be required to add a dedicated network?
- Jail's Network*

- b. Staffing and Personnel - Does current network provide PoE (power over ethernet), for time clock usage?

Yes

- c. Staffing and Personnel - If a clock needs to be relocated on-site, who is responsible for the cost, RRJA or vendor?

If the vendor is requesting the move and it requires new wiring to be pulled the vendor would be responsible

STGI

- 65. Will the Government provide the name of the incumbent contractor?

Wellpath is the current contractor.

- 66. 1. RFP Requirements and Information: Offerors need to submit their Federal Identification Number on a W-9 form included in the proposal” Question – Please confirm that Offerors should use a W-9 form from the IRS (online) and include it with our submission.

Yes

- 67. 1.9 Schedule “Tentative Pricing Proposals Due July 27th, 2020” Question – While we understand the price will be due following oral presentations, can the Government please provide templates/requirements for how price proposals should be submitted?

Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.

- 68. 6.1 Accreditation: Considering the security components of the ACA/NCCHC standards, does the jail authority have an accreditation manager/compliance officer we will be working with or is re-accreditation the sole responsibility of the contractor?

The successful vendor will be working with RRJA’s accreditation department for the ACA accreditation audits. NCCHC accreditation is the sole responsibility of the contractor.

- 69. 6.1 Accreditation Can the Government please provides estimated costs associated with procuring/maintaining NCCHC, ACA, Adult Community Residential Service, and VADOC certifications?

RRJA will be responsible for the cost associated with the ACA, ACRS and VDOC accreditations. The successful contractor shall be responsible for the cost of the NCCHC accreditation.

- 70. 6.5.2 Staff – Temporary Personnel Failure to meet the requirements by the Contractor may result in a penalty of \$1000 per occurrence.” In Section 6.4.2, Temporary Agency Personnel, the solicitation states “If temporary, PRN and/or agency personnel usage exceeds 10% of the total hours provided according to the contracted hours, RRJA may invoke a penalty of \$1,000 per month of occurrence. “ Question – Can the Government please clarify if the penalty is \$1000 per occurrence or \$1000 per month per occurrence?

The penalty is \$1000 per month.

71. 6.1.3 Training for Health Services Personnel: All training required under the terms of the contract shall apply to coverage hours and shall not be billed separately.” Question – Can the Government please explain what “all training required under the terms of the contract shall apply to coverage hours”? Does this mean that training will be performed during normal duty hours?

CEU hours do not count. Pre-approved hours may count.

72. 7.8.6 On-Call Availability A primary care physician shall be on-call around the clock.” Question – Will this physician be required to report back to the facility, or does he/she only need to be available telephonically?

Available by telephone.

73. 7.14 Health Care Services Support: “The Contractor shall establish a stock supply of commonly used medications (over-the-counter, legend and controlled substances) for administration to inmates prior to receipt of their actual patient-specific prescription.” Question – please confirm the stock supply of medications will be provided at no cost to the Contractor.

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program

74. 7.23.6 Immunizations: “However, during flu season, based on availability of a sufficient quantity of the vaccine that the Contractor shall purchase from an outside company, flu vaccination shall be carried out for the inmate population according to clinical priority, i.e. chronically ill, immune compromised, frail elderly, etc.” Question – Please confirm that flu immunization costs for inmates will be borne by the Government.

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program

75. Can the Government please provide the estimated budget for this requirement, as well as the current incumbent pricing?

*Current budget is 6.2million
FY 21 budget is not available.*

76. 7.36.3 Intake Pregnancy Questioning Pregnancy testing. In medicine, early detection is key to prevent complications, is there a specific reason the RFP states not all women will be tested?

The inmate has the right to refuse the test as well as the inmate being menopausal.

77. 7.41.2 Consolidated Health Record Medical record: Does the current system have an integrated medication administration record (MAR) or is this documented on paper and scanned into the medical record?

MAR

78. Expenses Incurred – Offsite Services: The information provided in the tables appears to be dated. Can the Government please provide more current data regarding offsite services expenditures (and for an entire year)?

Offsite services exhibit is an examples of reports to be provided to RRJA.

79. Expenses Incurred – Offsite Services In the provided 6 months of expenses on page 83, off-site services and dialysis is over budget, will the Government provide some additional context as to what caused increase- were there some extended in-patient hospitalizations?

Offsite services exhibit is an examples of reports to be provided to RRJA.

80. Regarding the payment structure of off-site, i.e. hospitalizations- is the contractor absorbing the full cost, are costs split with facility, or will the contractor be reimbursed for actual costs?

Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.

Armor

General:

81. Does the site have any contracts with hospitals or specialists? If so, please disclose and provide any special arrangements (formal or informal) or contracts with local hospitals, specialty and/or ancillary providers regarding inmate services, along with any amendments and attachments.

Contract with hospital and specialists is the responsibility of the successful vendor.

82. Please provide a list of the current offsite healthcare delivery network.

The requested information is not currently available.

83. Please provide a list of telemedicine/tele-communication equipment used in the delivery of healthcare.

None

84. Will the RRJA entertain suggestions for operational changes to the health services program if such changes remain in compliance with governing standards and result in an overall cost savings?

No

85. Will the hours of service delivered via tele-medicine and tele-psychiatry, count towards the contract provider hours?

No

86. Please confirm that the Vendor will be responsible for contracting with all specialty services providers for on-site and off-site services.

Yes

87. Will the Vendor be responsible for contracting with an ambulance service, or will the vendor use a RRJA system?

RRJA is responsible for costs associated with emergency medical transports provided by Prince George EMS. The successful contractor will be responsible for all other medical transports provided by EMS.

88. Please confirm the schedules of the following staff members:
- a. Correctional Staff: 8 hours, 12 hours, or a combination of both.
Combination of both
 - b. Health Care Staff: 8 hours, 12 hours, or a combination of both.
Refer to the staffing matrix within the RFP
 - c. Please provide a breakdown of the positions that work both, if a combination exists.
Refer to the staffing matrix within the RFP
89. Will RRJA be open to 12-hour shifts for some of the staff?
Propose to RRJA how your company would provide the services.
90. Are medical records currently paper, electronic or both? If both, please identify which records are paper and which are electronic.
The records are electronic
91. **RFP Page 16, Section 5.2.** Where are the infirmary beds located (Hall1 or Hall 2)? How many infirmary beds are there at the facility?
Hall 2, 3 male, 1 female and hospital beds
92. **RFP Page 27, Section 6.1.3** states, "RRJA is currently Adult Community Residential Services Certified at the time of this RFP. The Contractor is required to assist RRJA in maintaining the ACRS accreditation throughout the life of the contract. The cost of ACRS accreditation shall be borne by the Contractor." Please provide the cost of ACRS accreditation as well as any associated maintenance costs?
RRJA is responsible for the cost associated with the ACA, ACRS and VDOC accreditations. The successful contractor shall be responsible for the cost of the NCCHC accreditation.
93. **RFP Page 25, Section 6.13.1.** What is the duration and frequency of the jail orientation training conducted by security?
The orientation is conducted every Wednesday and it consists of approximately 8 hours.
94. **RFP Page 26, Section 6.13.7.** Is RRJA requiring annual security training for medical staff? If yes, for how long?
Yes, approximately 8 hours.

Pricing:

95. Please provide the ADP that should be used in pricing / staffing.
Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.
96. Please identify the number of ICE, Federal detainees, or DOC inmates at the facility.
- | | |
|-------------|------------|
| <i>ICI</i> | <i>0</i> |
| <i>FBOP</i> | <i>22</i> |
| <i>DOC</i> | <i>231</i> |

97. Please identify whether the following services are available on-site or off-site, the frequency (hours or visits per week/month), and who provides the services for:
- Dental
 - Oral Surgery
 - Optometry
 - Laboratory
 - Radiology (specify mobile or fixed equipment)
 - Fluoroscopy
 - Mammography
 - Physical Therapy
 - Dialysis
 - Chronic Care Clinics (please specify which clinics and frequency)
 - Specialty Clinics (please specify which clinics and frequency)
 - OB/Prenatal care

Propose to RRJA how your company would provide the services.

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

<i>Position Title</i>	<i>Salary / hr</i>	<i>Shift Differential</i>	<i>Status</i>
<i>Health Services Adm.</i>	<i>\$89,999.78</i>	<i>NA</i>	<i>E/S</i>
<i>Dir. Of Nursing</i>	<i>\$92,000.22</i>	<i>NA</i>	<i>E/S</i>
<i>Medical Director/Staff Physician</i>	<i>\$301,600.00</i>	<i>NA</i>	<i>E/H</i>
<i>Midlevel Provider</i>	<i>\$65.00</i>	<i>NA</i>	<i>E/H</i>
<i>Dir. of Mental Health</i>	<i>\$90000.00</i>	<i>NA</i>	<i>E/H</i>
<i>Psychiatrist</i>	<i>\$121,189.12</i>	<i>NA</i>	<i>E/H</i>
<i>Mental Health Profess.</i>	<i>\$30.00</i>	<i>WE \$1</i>	<i>E/H</i>
<i>Admin. Asst./Sec.</i>	<i>\$18.00</i>	<i>NA</i>	<i>E/H</i>
<i>Charge Nurse/RN</i>	<i>\$38.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>Staff Nurse/RN</i>	<i>\$35.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>LPN</i>	<i>\$25.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>Phlebotomist/CMA</i>	<i>\$16.00</i>	<i>NA</i>	<i>E/H</i>
<i>Medical Records Clerk</i>	<i>\$15.00</i>	<i>E \$1</i>	<i>E/H</i>
<i>Dentist</i>	<i>\$102.00</i>	<i>NA</i>	<i>E/H</i>
<i>Dental Assistant</i>	<i>\$16.00</i>	<i>NA</i>	<i>E/H</i>

99. Please provide the amounts relating to staffing withholds or performance withholds incurred by the incumbent by year for the last three years.

Month	Staffing	Intake Screen		Health and Physicals	
		Quantity	Penalty	Quantity	Penalty
May -20	\$18,369.01	41	\$4,100.00	4	\$800.00
April -20	\$22,919.02	16	\$1,600.00	0	\$0.00
March -20	\$26,000.02	38	\$3,800.00	15	\$3,000.00
Feb -20	\$26,169.02	52	\$5,200.00	19	\$3,800.00
Jan - 20	\$24,089.02	38	\$3,800.00	28	\$5,600.00
Dec - 19	\$29,046.35	56	\$5,600.00	20	\$4,000.00
Nov-19	\$24,392.34	28	\$2,800.00	9	\$1,800.00
Oct -19	\$29,947.68	65	\$6,500.00	7	\$1,400.00
Sept -19	\$18,464.34	51	\$5,100.00	17	\$3,400.00
Aug - 19	\$19,114.34	37	\$3,700.00	31	\$6,200.00
July -19	\$17,645.34	39	\$3,900.00	23	\$4,600.00
June- 19	\$16,817.67	108	\$10,800.00	10	\$2,000.00
Totals	\$254,605.14	528	\$52,800.00	179	\$35,800.00

100. Please provide the DOLLARS spent on offsite services for by year for the last three years by the categories below:

- a. Hospitalization
- b. Emergency room visits
- c. Specialty visits
- d. Outpatient surgeries
- e. Diagnostics

Select information will be provided to Offerors submitting pricing proposals upon request.

101. Please provide the offsite EVENTS for by year for the last three years by the categories below:

- a. Hospital days
- b. Hospital admissions
- c. Emergency room visits
- d. Specialty visits
- e. Outpatient surgeries
- f. Diagnostics

Refer to exhibit 5 in the RFP

102. Please provide the following by year for the last three contract years:

Information shall be for the past 12 month period

- a. Average monthly number of patients on HIV medications *31.5*
- b. Average monthly number of patients on psychotropic medications *34.11%*
- c. Average monthly number of patients on hepatitis medications *0*
- d. Average monthly number of patients on blood products relating to hemophilia *4.8*
- e. HIV medications dollars *\$704,260.85*
- f. Psychotropic medications dollars *\$240,702.29*
- g. Hepatitis medications dollars *\$0.00*
- h. Blood products relating to hemophilia dollars *Not available*

103. Will vendors be financially responsible for:

a. prior to booking cases,

No

b. bedside bookings, or

Yes

c. pre-existing conditions?

RRJA follows the Virginia Code 53.1-126 and does not authorize payment for any hospital treatment and or hospitalization for pre-existing conditions.

104. Please provide the TOTAL dollars spent on pharmacy at the facility by year for the last three years.

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

Pharmaceutical:

105. How many prescriptions per month on average are ordered for the inmates at the facility?

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

106. What percentage of your medications ordered each month is stock vs. patient specific prescriptions?

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

107. What are the pricing terms of your current pharmacy agreement? (i.e. average wholesale price less a discount, or acquisition cost plus a dispensing fee, etc.).

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

108. Please provide three (3) years of drug utilization at the facility preferably in an electronic format.

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

109. Of inmates receiving Hepatitis C treatment, what is the nature of the treatment?

There currently aren't any inmates receiving treatment.

110. How are current medication orders being transcribed to pharmacy?

Through the EMR MAR system.

111. How are medications delivered and dispensed: patient-specific or stock/pill line?
Patient specific pill line
112. Is there a self-administration or “keep-on-person” (KOP) medication system? If so, please provide a list of KOP medications approved by facility.
Yes, the requested information will be provided to the successful vendor.
113. Please provide the number of prescriptions per inmate at the facility.
The requested information is not currently available.
114. Does your current pharmacy provider offer drug destruction for outdated/expired drugs? If so, please describe the destruction policy.
Yes
115. Does your current pharmacy provider offer monthly/quarterly pharmacy consultation/inspection? If so, please describe?
Yes
116. Does your facility have a DEA License? If so, whose name is under licensure?
No
117. Does your facility have a current state pharmacy license?
No
118. Where are inmate’s personal medications kept upon booking?
Medical
119. Will proposers be required to use the current pharmacy vendor?
Yes
120. Please provide all terms and conditions regarding purchases, returns, and management fees that will be applied regarding pharmacy vendor.
RRJA is responsible for the cost of pharmacy.

Behavioral Health:

121. How many completed suicides took place at your facility in the past 2 years?
1
122. How many persons on average per month have been placed on suicide precaution over the past year?
34
123. How many persons are currently receiving psychotropic medications per month?
34.11% of population
124. How many persons are currently receiving anti-psychotic medications per month?
The requested information is currently not available.

125. How many persons are currently receiving mood-stabilizing medications (Lithium, Depakote, Lamictal etc.) per month?

The requested information is currently not available.

126. How many group therapy sessions are provided per week by the current vendor?

The current vendor does not provide any mental health group counseling sessions. The focus of mental health services is individual counseling and risk management.

127. How many patients were sent to the state mental hospital from your facility in the past year?

42

128. How many patients required placement in some sort of restraint device in the past 6 months?

2

129. Is it the responsibility of the officers to provide direct observation and/or 15-minute checks and logs on all patients placed in suicide watch?

Yes

Discharge Planning:

130. How are medications currently made available to inmates on release from the correctional facilities?

Individuals are provided a minimum of 7 days of medications.

131. Does the RRJA's standard operating policies provide that inmates who are receiving mental health or medical services encounter medical or mental health staff as they are released from facilities? Please describe the process.

Yes, if there is a need for continued treatment, efforts are made to ensure they have appointments and services available.

132. What is the percentage and number of inmates with estimated release dates? Are those inmates predominantly sentenced?

There is not a percentage or set number of inmates with estimated release date.

133. How many planned or predicted releases occur each day?

There is not a percentage or set number of inmates with estimated release date.

134. Please provide a description including average daily enrollment of your inmate substance abuse education, cognitive behavioral classes, and other inmate programs.

Propose to RRJA how your company would provide the services.

Electronic Medical Records (EMR):

135. Please provide the name of the current EMR provider.

Marquis EOMIS

136. What are the data requirements upon termination of the current vendor:
- Data to be provided and in what format,
 - System availability during transition, and
 - Time requirement of data availability.

EMR system is owned by RRJA

137. Is the current records system a combination of electronic and paper records? If so:
- What records are electronic?
 - What records are paper?

The current records system is electronic.

138. Will the existing facility network be available for EMR connectivity?

EMR system is owned by RRJA.

139. Is there wireless access available in the:
- Pods,
 - Clinic, or
 - Other areas of health delivery?

Yes in all areas

140. What interfaces are currently in place, if any:

- JMS,
- Lab,
- Pharmacy, or
- Other.

JMS

141. Can the EMR be installed on existing jail hardware?

EMR system is owned by RRJA

142. Can the EMR be installed on existing jail hardware with upgrades?

EMR system is owned by RRJA

143. Should servers be proposed as a stand-alone system?

EMR system is owned by RRJA

144. Does the existing jail data center/computer room have space available for any or all of the above?

Yes

145. Will the RRJA pay the cost of facility improvements for the EMR through:
- Cable and wireless connections, or
 - Additional power requirements for server and rack installation.

No

146. Will the RRJA assume the responsibility of system administration and routine maintenance of data center additions and/or upgrades?

EMR system is owned by RRJA

147. Will the RRJA assume responsibility of performing routine back-ups and offsite storage of back-ups?

EMR system is owned by RRJA

Risk Management

148. How many medical malpractice and/or civil rights lawsuits have been filed against the prison's healthcare provider related to the services rendered at any of the facilities in the past five (5) years?

19

149. Do any of your facilities currently operate under a consent decree; have a contract monitor or similar oversight? If yes, please describe in greater detail.

The facility is under probation by the Virginia Board of Corrections.

CBH Medical

Contractual

150. Is the County currently subject to any court orders or legal directives that would impact the services provided?

No

151. How many lawsuits (frivolous or otherwise) have been filed against the County or Contractor pertaining to inmate health care in the past three years?

7

152. Please confirm who is responsible for conducting drug testing for prospective employees.

The successful contractor will be responsible for conducting drug testing on their prospective employees.

153. Who is responsible for running background checks on potential personnel – County or Contractor?

RRJA will be responsible for running background checks on potential personnel.

154. Please provide a current list of staffing vacancies by position.

<i>RN</i>	<i>3.0 FTE</i>
<i>LPN</i>	<i>11.9 FTE</i>
<i>QMHP</i>	<i>2.0 FTE</i>

155. Are any members of the current health service staff unionized?

No

- a. If yes, please provide a copy of the union contract.

156. Please confirm that overtime and temporary employee hours will count toward the hours required by the contract.

Overtime and agency hours can count with pre-approval.

157. What is the annual spend amounts for the past three years for the following categories:
- a. Total off-site care?
March 19 to Feb 20 \$854,633.00
 - b. Total pharmacy expenditures?
March 19 to Feb 20 \$1,556,517.68
 - c. Laboratory services?
March 19 to Feb 20 \$80,839.00
158. Please confirm that Proposer would not be responsible for elective or cosmetic surgeries and health care services.
Refer to Section 7.44, 7.53.1 and 7.53.2 of the RFP
159. Please identify any services (PPD, education, etc.) that must be provided to correctional staff as part of the scope of work.
Refer to Section 7.52 of the RFP

IT/Infrastructure

160. What software is utilized for the facility's jail management system (JMS)?
GTL Offender Management System v5.0.4
161. Can you briefly describe the IT infrastructure within the facility?
The requested information is not currently available.
- a. Will Proposer's hardware be placed on the County network?
Yes (jail network)
 - b. Will the County host software to be used in the scope of work?
Please refer to RFP Section 7.41.1
162. How do medical personnel connect to the EMR in the medical department? When making medication rounds?
Wi-Fi connected laptops. EMR is internet based.
163. How do personnel currently access the Internet while in the health care unit?
Wi-Fi connected laptops. EMR is internet based.
164. Does the facility have Wi-Fi connectivity throughout?
Yes

Equipment

165. Please identify the number of dialysis units available in the facility

166. Please confirm that all equipment is in correct working order and certified in good condition.

Yes at this current time.

167. Will any of the current equipment in the facility require replacement during the scope of the contract?

Not at this current time.

Scope of Work

168. Can you confirm the total number of med carts in the facility?

8

169. How often is medication distributed each day?

There are currently 2 medication passes established each day

170. How long does it take to perform medication distribution?

The average medication pass is approximately 2 hours

171. Please provide the following historical data regarding the size of the inmate population:

a. Average daily population over the past two years.

2018 1538

2019 1379

b. Two years of projected populations.

2020 1301

2021 1035

c. Number of intakes over the previous three years.

230,246

172. How are the following services rendered under the current scope of work (on-site/off-site)? (Please identify vendor, if applicable)

a. Vision.

Both

b. Dialysis.

Both

c. OB/GYN.

Both

173. Are there currently any backlogs in services/clinics – chronic care, sick call, dental, etc.?

<i>Service</i>	<i>Backlog</i>
<i>Mental Health Intake</i>	<i>38</i>
<i>Mental Health Sick Call</i>	<i>64</i>
<i>Dental</i>	<i>114</i>
<i>Nursing Sick Call</i>	<i>57</i>
<i>Provider Chronic Care</i>	<i>0</i>
<i>Provider Sick Call</i>	<i>8</i>

174. Please provide the previous three years of statistical data for each of the following:

- a. Number of off-site inpatient hospital days.
- b. Number of outpatient surgeries.
- c. Number of outpatient referrals.
- d. Number of trips to the emergency department (ED).
- e. Number of ED referrals resulting in hospitalization.
- f. Number of ambulance transports.
- g. Number of air ambulance transports.
- h. Number of dialysis treatments.
- i. Number of inmates on suicide watch.
- j. Number of completed suicides.
- k. Number of deaths.

Refer to Exhibit 5 of the RFP

175. How are detainees screened for suicide risks and mental health concerns at intake?

Medical staff administers a "Brief Jail Mental Health Screen" at intake.

176. How are mental health patients identified/referred for services?

Medical staff administers a "Brief Jail Mental Health Screen" at intake.

177. How many patients required some form of detox and/or medical intervention due to opiate misuse in the past year?

Please refer to the statistical data located in the RFP

178. Are patients deemed too acute to house in the jail sent to a public mental health facility?

Yes

179. Does the facility provide and/or encourage group therapy?

The current vendor does not provide any mental health group counseling sessions. The focus of mental health services is individual counseling and risk management.

180. Please provide any facility statistical reports related to the medical operation for the past 12 months.

Please refer to the statistical data located in the RFP

181. Does the facility currently house any pregnant inmates?

Yes

182. How does the facility provide OB/GYN care to pregnant inmates?

Onsite and offsite. Propose to RRJA how your company would provide the services.

Pharmacy

183. Who is the current pharmacy contractor?

Westwood Pharmacy

184. Where does medication distribution take place, i.e., med carts on the housing unit or inmates coming to medical?

Med Carts in the Housing Units

185. On average, what percentage of inmates are prescribed psychotropic drugs each month?

34.11%

186. What is the average monthly number of inmates receiving pharmaceutical treatment for the following conditions?

- a. Hepatitis C.
- b. HIV/AIDS.
- c. Hemophilia and other bleeding disorders.

Requested information is currently not available

187. How are medications made available to inmates on release from the correctional facility?

Individuals are provided a minimum of 7 days of medications.

188. Does the facility currently utilize a Medication Assisted Treatment (MAT) program?

No

- a. Will the County anticipate implementing such a program in the future?

Possibly

Mediko

189. The RFP specifies that the proposal package must include a redacted copy of the proposal. Do you want the redacted copy to be in electronic format or hard copy format?

Please provide an electronic redacted copy

190. Will respondents be able to deliver proposals in person?

Yes

- a. If yes, what are the instructions for delivering in person (pursuant to operational considerations due to COVID-19)?

Required to wear a mask inside the facility

- b. If yes, what will be your public office hours?

8:00 am to 4:30pm Monday through Friday.

c. If yes, does one need to call in advance?

No

191. Please specify all inmate programs currently being performed in Housing Unit 6.

Work education and rehabilitation release, weekenders and home electronic monitoring

192. Please specify all services currently provided by community social services (i.e. District 19 Community Services Board, mental health clinics in the community, addiction, recovery facilities, etc.).

This information will be provided to the successful vendor.

193. Please identify all grants (related to medical and mental health) that RRJA has received?

None

194. Please specify the timeframe in which each grant will expire.

Not Applicable

195. Please special what programs/services the grants support?

No grants

- a. What is the degree of involvement and expectations by the contractor for the grant driven programs? Please specify per program.
- b. Is the contractor expected to continue services once any grant has expired? If so, please specify.

196. Do you have a therapeutic community?

Yes

- a. If yes, are the counseling services in the therapeutic community provided by CSB/community services staff or contracted staff?

The therapeutic community department is staffed by RRJA staff

197. If no, do you wish to create a therapeutic community with the contractor providing counseling services?

Not Applicable

198. Please provide us with the monthly vacancy reports for the past 12 months that include position, titles and dates positions were vacated.

<i>Position</i>	<i>June</i>	<i>July</i>	<i>Aug</i>	<i>Sept</i>	<i>Oct</i>	<i>Nov</i>	<i>Dec</i>	<i>Jan</i>	<i>Feb</i>	<i>Mar</i>	<i>Apr</i>	<i>May</i>
<i>Med Dir</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>					
<i>HSA</i>				<i>1</i>								
<i>DON</i>				<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>			
<i>Mid Lev</i>				<i>1</i>	<i>1</i>			<i>1</i>	<i>1</i>	<i>1</i>		
<i>RN</i>	<i>2.4</i>	<i>2.7</i>	<i>2.4</i>	<i>5.3</i>	<i>5.1</i>	<i>6.6</i>	<i>5.4</i>	<i>5.1</i>	<i>6</i>	<i>6.9</i>	<i>6</i>	<i>3</i>
<i>LPN</i>	<i>6.9</i>	<i>6</i>	<i>6.9</i>	<i>10.7</i>	<i>11.6</i>	<i>10.7</i>	<i>13.1</i>	<i>11.7</i>	<i>12.9</i>	<i>11.8</i>	<i>12.9</i>	<i>11.9</i>
<i>Records</i>	<i>1</i>		<i>1</i>	<i>1</i>	<i>1</i>							
<i>QMHP</i>	<i>2</i>	<i>1.5</i>	<i>1.5</i>	<i>1</i>					<i>1</i>	<i>1</i>	<i>1</i>	<i>2</i>
<i>MHD</i>					<i>1</i>	<i>1</i>						

199. If these reports are not available, please provide how many current staffing vacancies by position (title) and shift as well as shifts that are currently filled by agency nurses.

Refer to answer to question 198.

How long have these positions been vacant?

How many shifts have been filled by using agency nurses during the past 12 months?

200. Based on your most recent monthly report, please provide the current average pay rate for LPN, RN, MD, PA/NP, CMA, Psychiatrist, mental health professionals (specify degree), and Dentist.

<i>Position Title</i>	<i>Salary / hr</i>	<i>Shift Differential</i>	<i>Status</i>
<i>Health Services Adm.</i>	<i>\$89,999.78</i>	<i>NA</i>	<i>E/S</i>
<i>Dir. Of Nursing</i>	<i>\$92,000.22</i>	<i>NA</i>	<i>E/S</i>
<i>Medical Director/Staff Physician</i>	<i>\$301,600.00</i>	<i>NA</i>	<i>E/H</i>
<i>Midlevel Provider</i>	<i>\$65.00</i>	<i>NA</i>	<i>E/H</i>
<i>Dir. of Mental Health</i>	<i>\$90000.00</i>	<i>NA</i>	<i>E/H</i>
<i>Psychiatrist</i>	<i>\$121,189.12</i>	<i>NA</i>	<i>E/H</i>
<i>Mental Health Profess.</i>	<i>\$30.00</i>	<i>WE \$1</i>	<i>E/H</i>
<i>Admin. Asst./Sec.</i>	<i>\$18.00</i>	<i>NA</i>	<i>E/H</i>
<i>Charge Nurse/RN</i>	<i>\$38.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>Staff Nurse/RN</i>	<i>\$35.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>LPN</i>	<i>\$25.00</i>	<i>E \$1, N \$2, WE \$1</i>	<i>E/H</i>
<i>Phlebotomist/CMA</i>	<i>\$16.00</i>	<i>NA</i>	<i>E/H</i>
<i>Medical Records Clerk</i>	<i>\$15.00</i>	<i>E \$1</i>	<i>E/H</i>
<i>Dentist</i>	<i>\$102.00</i>	<i>NA</i>	<i>E/H</i>
<i>Dental Assistant</i>	<i>\$16.00</i>	<i>NA</i>	<i>E/H</i>

201. Please provide the shift differential for the current evening/night staff for RN and LPN.

Refer to answer to question 200.

202. Please specify how many security staff are allocated for this facility?

365

- a. How many current vacancies are there for security staff?

Information is not available.

203. What hospital do you most frequently utilize for offsite care?

- a. Please specify the percentage breakdown per hospital used for offsite care during the past year.

<u>INPATIENT HOSPITALIZATIONS</u>	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>YTD</u>
<u>SOUTHSIDE REGIONAL MEDICAL CTR</u>	7	7	6	3	6	5	4	1	4	2	2	3	50
<u>VCU</u>	2	0	2	1	3	0	1	1	2	0	0	1	13
<u>ST. MARY'S</u>	0	0	0	0	0	0	1	0	1	0	0	0	2
<u>JOHN RANDOLPH</u>	0	1	0	0	1	0	0	1	0	0	0	0	3
<u>ST. FRANCIS</u>	0	0	0	0	0	0	0	0	0	0	0	0	0
<u>CHIPPENHAM</u>	3	1	0	0	0	0	1	0	0	0	0	0	5
<u>JOHNSTON WILLIS</u>	0	0	0	0	0	0	1	0	0	0	0	0	1
<u>Total</u>	12	9	8	4	10	5	8	3	7	2	2	4	74

<u>EMERGENCY ROOM RUNS</u>	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>YTD</u>
<u>SOUTHSIDE REGIONAL MEDICAL CTR</u>	10	8	18	4	8	20	13	9	13	13	7	3	126
<u>VCU</u>	1	0	0	1	1	0	0	1	0	1	2	0	7
<u>ST. MARY'S</u>	0	0	0	0	0	0	0	0	0	0	0	0	0
<u>JOHN RANDOLPH</u>	2	1	1	0	0	0	1	0	0	0	0	0	5
<u>TRICITIES ER/JRMC CAMPUS</u>	0	0	0	0	0	0	1	0	0	0	0	0	1
<u>ST. FRANCIS</u>	0	0	0	0	0	0	0	0	0	0	0	0	0
<u>CHIPPENHAM</u>	0	1	1	0	0	0	0	0	0	0	0	0	2
<u>Total</u>	13	10	20	5	9	20	15	10	13	14	9	3	141

204. Please provide the names of the healthcare provider sub-contractors (i.e., OB/GYN, optometry, orthopedics, etc.) that have a current negotiated contractual agreement.

Requested information is not available.

- a. Please provide the contracted agreement per sub-contractor.

Requested information is not available.

205. Please provide the name of your dialysis sub-contractor.

Requested information is not available.

206. What are the education levels (bachelors, masters or doctorate degree) and credentials (LPC, LCSW, or QMHP) of the current mental health staff? Please separate them by those who are provided by your current vendor, your facility and your local community services.

Qualified Mental Health Professional - a person who by education and experience is professionally qualified and registered by the board of counseling to provide collaborative mental health services for adults or children.

207. Does the facility currently have a Medication Assisted Treatment (MAT) program?

No

- a. If no, do you desire to have the vendor implement a MAT program in collaboration with outside agencies?

Propose to RRJA how you would provide the services.

- b. Does the RRJA intend to seek any grant funding for MAT programming in collaboration with DHS or Virginia Department of Criminal Justice?

208. Please provide the name of the companies that attended the mandatory virtual pre-bid meeting on June 10, 2020?

Requested information is not available until the award on the contract.

209. Does RRJA currently work with the Drug Court to provide substance use disorder programming for inmates?

No

210. Would you consider the use of telepsychiatry for onsite psychiatry?

Propose to RRJA how you would provide the services.

211. Please verify that the medical provider will be financially responsible for all ACRS, ACA and NCCHC accreditation/survey associated fees.

RRJA is responsible for the cost associated with the ACA, ACRS and VDOC accreditation. The successful contractor shall be responsible for the cost of the NCCHC accreditation.

- a. Please specify the last date when each of these accreditations was completed.

NCCHC June 2020

VADOC February 2021

ACA May 2023

ACRS May 2023

- b. Please verify the status of your NCCHC accreditation.

Active

- c. Due to your requirements for your provider to maintain all listed accreditations, please provide us the most recent ACRS, NCCHC and ACA auditor's survey report.

The requested information will be provided to the successful vendor.

212. Please verify, as stated in pre-bid conference, RRJA is under VADOC probation.

- a. Please specify the terms and conditions for this probation by providing a copy of the agreement.

The requested information will be provided to the successful vendor.

- b. Is RRJA subject to any other probation by outside agencies?

No

- c. If yes, please specify what agency and the terms and conditions for the probation by providing a copy of the agreement.

213. Currently, what percentage of the inmate population are currently on prescription medications?

68.19%

a. What percentage of the inmate population are receiving psychotropic medications?

34.11%

b. What percentage of your population currently prescribed medications are enrolled in the Keep on Person (KOP) program?

Requested information not currently available.

214. Please verify the contract between the current pharmacy and RRJA is separate from this contract.

Yes it is a separate contract.

a. Please verify the vendor will not be responsible for the cost of pharmaceuticals.

RRJA currently has a contract for pharmacy services and is responsible for all pharmacy costs. The successful contract will be responsible for the cost management of the day to day program.

215. What were the costs associated with all offsite care for the calendar year 2019?

Select information will be provided to Offerors submitting pricing proposals upon request.

a. Please specify the breakdown of costs by type (i.e., hospitalizations, ER visits, etc.).

216. Has the Medicaid Expansion Program been implemented at RRJA?

Yes

a. If yes, what percentage of the inmates seen offsite during the calendar year 2019 were enrolled in the Medicaid expansion program.

Information is not currently available.

217. Please provide Expenses Incurred vs. Aggregate Cap Amount Report for the fiscal years 2017, 2018 and 2019 (to date).

Pricing proposals are not to be provided until a written request is received from RRJA.

Requirements for pricing will be presented in the written request.

a. If the above reports are not available, please specify what the catastrophic aggregate cap was per fiscal year (2017, 2018 and 2019 (to date) and how much RRJA paid beyond the catastrophic aggregate cap for each fiscal year.

Pricing proposals are not to be provided until a written request is received from RRJA. Requirements for pricing will be presented in the written request.

218. Your statistical data information provided in the RFP (Exhibit 5) covers what period of time?

March 2019 to February 2020

a. If this data is older than a year, please provide data from 2019 to current.

Not applicable

219. On Page 46, the RFP states: "Health care staff shall complete an initial health assessment and medical screening in the admissions area within four (4) hours of an inmate being booked into the facility." Page 48 of the RFP states: "The Contractor shall complete a full health assessment/history and physical examination within the first 14 calendar days of an inmate's arrival at RRJA." Is the intent of RRJA to have an initial medical receiving/screening as well as the initial health assessment both completed within the first 4 hours of booking?

No

220. Please provide a copy of your current contract and all associated addendums. (Due to the short time period to prepare a proposal, submitting a FOIA request will not be a viable option.)

See attached

221. Please provide us with the monthly vacancy reports for the past 12 months that include position, titles and dates positions were vacated.

<i>Position</i>	<i>June</i>	<i>July</i>	<i>Aug</i>	<i>Sept</i>	<i>Oct</i>	<i>Nov</i>	<i>Dec</i>	<i>Jan</i>	<i>Feb</i>	<i>Mar</i>	<i>Apr</i>	<i>May</i>
<i>Med Dir</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>					
<i>HSA</i>				<i>1</i>								
<i>DON</i>				<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>			
<i>Mid Lev</i>				<i>1</i>	<i>1</i>			<i>1</i>	<i>1</i>	<i>1</i>		
<i>RN</i>	<i>2.4</i>	<i>2.7</i>	<i>2.4</i>	<i>5.3</i>	<i>5.1</i>	<i>6.6</i>	<i>5.4</i>	<i>5.1</i>	<i>6</i>	<i>6.9</i>	<i>6</i>	<i>3</i>
<i>LPN</i>	<i>6.9</i>	<i>6</i>	<i>6.9</i>	<i>10.7</i>	<i>11.6</i>	<i>10.7</i>	<i>13.1</i>	<i>11.7</i>	<i>12.9</i>	<i>11.8</i>	<i>12.9</i>	<i>11.9</i>
<i>Records</i>	<i>1</i>		<i>1</i>	<i>1</i>	<i>1</i>							
<i>QMHP</i>	<i>2</i>	<i>1.5</i>	<i>1.5</i>	<i>1</i>					<i>1</i>	<i>1</i>	<i>1</i>	<i>2</i>
<i>MHD</i>					<i>1</i>	<i>1</i>						

222. On Page 11, the RFP states: "Legal Action, Include disclosure of any legal action pending or settled against the company or corporate principals within the company within the past 60 months.? On page 14, the RFP states: Litigation and Claims History and Experience, Each company must submit a listing of all legal claims closed and pending relating to inmate health services, problems or disputes over the firm's performance on contracts or projects held during the last five (5) years, specifying the jurisdiction of the case, i.e. state tort, malpractice, civil rights - individual versus class action, etc." Please confirm each vendor should include all required legal action information under their current and any/all previous names/ownerships during the past 60 months.

Yes

223. What penalties have the current vendor been assessed during the past 12 months? Please specify per month the type (vacancies, agency usage, 4-hour receiving/screening, 14-day assessment, loss of accreditation, etc.), quantity and penalty amount.

Month	Staffing	Intake Screen		Health and Physicals	
		Quantity	Penalty	Quantity	Penalty
May -20	\$18,369.01	41	\$4,100.00	4	\$800.00
April -20	\$22,919.02	16	\$1,600.00	0	\$0.00
March -20	\$26,000.02	38	\$3,800.00	15	\$3,000.00
Feb -20	\$26,169.02	52	\$5,200.00	19	\$3,800.00
Jan - 20	\$24,089.02	38	\$3,800.00	28	\$5,600.00
Dec - 19	\$29,046.35	56	\$5,600.00	20	\$4,000.00
Nov-19	\$24,392.34	28	\$2,800.00	9	\$1,800.00
Oct -19	\$29,947.68	65	\$6,500.00	7	\$1,400.00
Sept -19	\$18,464.34	51	\$5,100.00	17	\$3,400.00
Aug - 19	\$19,114.34	37	\$3,700.00	31	\$6,200.00
July -19	\$17,645.34	39	\$3,900.00	23	\$4,600.00
June- 19	\$16,817.67	108	\$10,800.00	10	\$2,000.00
Totals	\$254,605.14	528	\$52,800.00	179	\$35,800.00

Dass Advisory Group

224. Who is the current ancillary community partners (lab, radiology, dental, pharmacy, specialist, etc)? And is the expectation for the vendor to continue those partnerships?

The requested information is not currently available.

225. What's the population demographics (age/gender/ethnicity)?

The requested information is not currently available.

226. Is Anthem BCBS the current Health Care billing administrator?

No

227. What's the health care services budget (total)?

The requested information is not currently available.

228. Is the current HS provider a nationwide correctional HC provider?

Current contract is Wellpath

229. HR: open positions, # days open; retention stats; recruitment efforts? Most difficult position to retain? Turnover? Why?

Position	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May
Med Dir	1	1	1	1	1	1	1					
HSA				1								
DON				1	1	1	1	1	1			
Mid Lev				1	1			1	1	1		
RN	2.4	2.7	2.4	5.3	5.1	6.6	5.4	5.1	6	6.9	6	3
LPN	6.9	6	6.9	10.7	11.6	10.7	13.1	11.7	12.9	11.8	12.9	11.9
Records	1		1	1	1							
QMHP	2	1.5	1.5	1					1	1	1	2
MHD					1	1						

230. Please identify areas of opportunity/improvement based on most recent audit?

The requested information is not currently available.

231. Do you have any interactions of Joint Commission and/or State auditing firms. what auditing entity does your organization interact with?

Refer to section 6.1 of the RFP

232. Are the CSB's included in the community partnership? What is the correlation between the CSB's & RRJ?

Community Service Board which include District 19 and Richmond Behavioral Health are involved in mental healthcare.

233. What is the ratio of patient to HC worker?

Refer to exhibit 3 of the RFP

234. Who is the current contract company/vendor? Are there any limitations with the current contract?

Wellpath

235. Is subcontracting allowed with other organizations?

Refer to the specifications of the RFP

236. Do you have an EHR (Electronic Health Record) system in place? If so, are there any limitations/setbacks?

Refer to section 7.41 of the RFP

237. Are you looking to maintain any of the current staff?

Yes

238. Is the current contactor/vendor eligible for the competition? Have they met the requirements of the contract?

Competition is open to only the companies that attended the mandatory pre proposal conference.

Wellpath

250. **Staffing Shortfall; p 10.** What are the Category I positions?

The Category 1 positions will be negotiated with the successful vendor.

251. Please explain the difference or clarify the discrepancy of the following two RFP items:

a. **Staffing Shortfall; p 10.** This item identifies a shortfall as a vacancy of more than 30 days

b. **Vacancy. 6.4.1; p 20.** This item states 60 days vacancy before penalty.

RFP changed to read "Staffing Shortfall - A vacancy of any Personnel position, other than Category I positions, at the Facility for a period of more than sixty (60) days."

252. **Temporary Agency Personnel. 6.4.2; p 20.**

The current staffing matrix indicates that much of the nursing staff works 12 hour shifts. With this being the case, 7-day coverage involves use of two staff members working 36 hours each and one staff member working 12 hours.

Please confirm that the 12 hour worker who will have completed all required orientations and training, but may be considered scheduled part-time/PRN, is not to be considered as temporary or agency personnel for the purpose of the calculation of the 10% limitation on the use of temporary or agency staff and application of a penalty.

PRN staffs are considered in the calculation of temporary and agency use and the 10% threshold.

Language in the paragraph titled "Temporary Personnel" on page 22 appears to confirm that the use of such part-time/PRN staff on a recurring basis with a commitment to the RRJA is acceptable.

Temporary personnel, including PRN and agency staff are acceptable to use but usage over 10% is subject to the penalty.

253. **Waivers. 6.4.3; p 20.** What is a 15-day Restricted Housing Assessment?

This is a VADOC standard requirement that all inmates in restricted housing (segregation) have documented weight and vital checks every 15 days.

254. **Staffing Plan. 6.5.1; p 20.** Please confirm that the use of full-time staff providing 1- hour shift coverage, as with the current staffing matrix, is not subject to the requirement for a five-day, 40-hour workweek.

This item may be negotiated with the successful vendor.

255. **CPR Certification and AED. 6.13.4; p 26.** This paragraph indicates that the Medical Director should be currently certified in Advanced Cardiac Life Support (ACLS). Item 6.6 (p 23) indicates that BCLS/CPR/AED certification is acceptable. Please clarify.

The Medical Director is required as stated to have ACLS, all other staff may have BCLS.

256. Please clarify the discrepancy of the following two RFP items as to when an asymptomatic patient is to receive a PPD:

- a. **PPD Testing 7.20.6; p 47.** "Asymptomatic individuals shall receive the Mantoux skin test or a chest radiograph within fourteen (14) days of arrival."
- b. **Tuberculosis Testing 7.13.5; p 37.** "Asymptomatic individuals shall receive the Mantoux skin test or a chest radiograph within seven (7) days of arrival."

RFP PPD Testing 7.20.6; p 47. changed to read "Asymptomatic individuals shall receive the Mantoux skin test or a chest radiograph within seven (7) days of arrival."