

Addendum # 1
Jail Health Services
RFP# FY18-SCDC-01

1. What is the anticipated start date of the new contract?
The new contract will go into effect July 1, 2018
2. Is the SCDC currently NCCHC and/or ACA accredited? **No**
 - a. If so, when was the most recent accreditation audit(s)? **N/A**
 - b. Were there any deficiencies, and if so, please describe. **N/A**
 - c. If not accredited, does the County desire NCCHC and/or ACA accreditation? **Yes**
 - d. If so, what is the time frame? **12-18 months**
3. Please provide details of any lawsuits against the facility for medical services for the past five years:
Nancy Legarda-Mata (2016), Curtis Caylor (2017)
4. Please provide the Average Daily Population (ADP) for the past three years.
2015 – 390 2016 – 396 2017 - 403
5. Please provide the ADP for Bureau of Indian Affairs inmates for the past three years.
2015 – 30 2016 – 33 2017 – 30
6. Please confirm the ADP to be used for staffing and pricing.
Average Daily Population of 403
7. Please identify the hospital(s) for emergency and inpatient care.
Sandoval Regional Medical Center / UNMH Downtown
8. Please provide a list of medical equipment that will be available to the new Contractor with the model, age, and condition of each piece of equipment.
The Sandoval County Detention Center will provide desks, chairs and an exam table. The contractor will be required to supply all other equipment.
9. Please provide a list of office equipment that will be available to the new Contractor with the model, age, and condition of each piece of equipment.
As in the previous question, the contractor will be required to supply all other equipment.
10. Please provide current salaries for each of the current positions.

The County does not have this information as it is proprietary to the current contractor.

11. Are there currently any unfilled positions? **The County does not have this information.**
a. If so, please identify the position and length of time vacant. **N/A**

12. What mental health services are currently provided on-site at the SCDC by the current Contractor?

Mental Health services are offered 7 days a week by both counselors as well as two psychiatric providers that are here two days out of the week. Sunday and Thursday for 8 hours.

13. Is mental health on-site staff coverage required for evening and/or weekends? If so, what hours?

Mental health coverage is required from 7PM to 5PM 7 days a week

14. Please identify the number and types of groups per week that are currently being provided, if any? **No mental health services are provided by outside groups.**

15. Are any mental health services provided by any other group (i.e., community-based services) that than those provided by the current Contractor? **N/A**

- a. If so, please identify (i) agency; (ii) staffing; and (iii) services provided. **N/A**
b. If so, will the provider continue to provide services under the new Contractor? **N/A**

16. Who is financially responsible for psychiatric emergencies and/or psychiatric hospitalizations – the Contractor or the County?

Sandoval County

17. What is the County's policy regarding the cost of care for pre-existing conditions?

The County is responsible to provide care for the detainee regardless of pre-existing conditions

18. Are any specialty consults provided at the hospital? If so, please identify.

Specialty consults may be conducted off-site depending on the providers orders

19. Please identify the level of provider (i.e., RN, LPN, Mid-level, etc.) who conducts the following:

- a. Intake – **RN / LPN / EMT**
b. Sick call – **RN / LPN**
c. 14 day H&Ps - **RN**
d. Med pass - **RNN / LPN / CMA / EMT (with certification)**

20. Please identify the following current providers:

- a. Pharmacy- **Correct RX**
b. Laboratory – **Quest Diagnostics**
c. Mobile X-ray Services – **Schryver Mobile**

- d. Ambulance Service(s) **Sandoval County and Rio Rancho**
21. Please identify and provide contact information for the following individuals: **The County does not have this information as it is proprietary to the current contractor.**
- a. Medical Director - **N/A**
 - b. Mid-level Practitioner – **N/A**
 - c. Psychiatrist - **N/A**
 - d. Dentist – **N/A**
22. What Jail Management program does the County currently use?
(XJAIL) Hosted by Securus
23. When are PPDs implanted – during intake or during the 14-day health assessment? **PPD's are planted at the time of intake**
- a. Are they implanted on all inmates or just as medically indicated? **All Detainees**
24. How frequently is Nurse Sick Call conducted? **Sick call is conducted on a daily basis**
25. Which discipline conducted Nurse Sick Call – RN or LPN? **RN or LPN may conduct nurse sick call**
26. Appendix G; SS-14. Please provide the volume of testing/vaccinations for the following over the past two years to staff for Hepatitis B:
- a. TB testing – prior to job assignment and annual screening – **All County and contracted employees are tested on an annual basis**
 - b. Hepatitis B vaccination. **The vaccinations were not tracked.**
 - c. Who is financially responsible for the cost of the serums – the County or the Contractor? **Contractor is responsible for costs.**
27. Is telemedicine currently utilized? **Telemedicine is not currently being used at the County.**
- a. If so, please identify the services and frequency. **N/A**
28. Is the SCDC currently using an electronic medical record system? **Yes**
- a. If so, please identify it. **UNIEK-EMR**
29. Is the SCDC currently using an electronic medication administration record (eMAR)?
The County does not currently use an electronic medication administration record.
- a. If so, please identify it. **N/A**
30. Does the SCDC currently have wireless capability? **No but wireless should be installed in the next 3-6 months.**
31. Who currently enrolls eligible patients in Medicaid – the Contractor or the County? **County**
32. Please identify the current on-site specialty clinics and frequency.

Chronic Care and Psychiatric Services twice a week

33. Please identify the on-site specialty clinic providers and provide their contact information

Chronic Care – Dina Kotova

Psych Services – Alicia Burbano and Karen Jones

34. Please provide a list of currently utilized off-site specialty providers and outpatient providers.

SRMC and UNMH Specialties Clinic

35. Dialysis.

- a. Does the County wish to include the provision of Dialysis Services in the new contract?
In the past, the contractor would advise the security staff that the detainee would need this service and the detainee would be transported either to a dialysis clinic or hospital.
- b. If so:
 - i. How many inmates required dialysis in the past two (2) years? 1
 - ii. How many inmates are currently dialysis patients? None
 - iii. How much has been spent annually on dialysis over the past two (2) years? N/A

36. Medication Administration.

- a. How many med passes are currently conducted daily?
Two – AM(0400-0800) PM(1600-2000)
- b. How many carts are utilized per med pass? Two
- c. How long does the average med pass take to complete? 4 to 5 hours

37. What is the County's policy on providing medication to inmates upon discharge?

Medications can be provided to all USMS detainees upon release. County detainees must provide pharmacy of choice and have current medications on file

38. Methadone.

- a. Is methadone provided to any patients other than pregnant patients? Methadone is not provided to any patients at the Detention Center.
- b. Is methadone being provided on-site or off-site? N/A
- c. Please identify the local methadone provider. N/A

39. Pharmacy Statistics. Please provide the following information for the past three years:

- a. Number of inmates on medication(s)
2015 (1943) 2016 (1145) 2017 (1494)
- b. Number of inmates on psychotropic medication(s)
2015 (1293) 2016 (1308) 2017 (651)
- c. Number of inmates on HIV/AIDS medication(s)
2015 (19) 2016 (0) 2017 (9)

- d. Number of inmates on Hepatitis medications(s) N/A
 - e. Number of inmates with diabetes 2015 (221) 2016 (246) 2017 (211)
40. On-Site Statistics. Please provide the monthly statistics for on-site services for the past three (3) years, including but not limited to the following:
- a. Intakes
2015 (7083) 2016 (7570) 2017 (7697)
 - b. Nursing sick call, midlevel sick call, physician sick call –
2015 (3261) 2016- (2763) 2017- (3107)
 - c. Inmate physicals
2015 (1482) 2016 (2763) 2017 (1350)
 - d. Numbers of inmates evaluated by Psychiatry
2015 (871) 2016 (1358) 2017 (1155)
 - e. Number and volume of chronic care visits by type N/A
 - f. Number of on-site clinic visits by type (OB/GYN, orthopedics, ophthalmology, cardiology, etc.) N/A
 - g. Labs
2015 (192) 2016 (400) 2017 (432)
 - h. X-rays
2015 (233) 2016 (316) 2017 (285)
 - i. Telehealth encounters by specialty N/A
41. Off-Site Statistics. Please provide the monthly statistics for off-site services for the past three (3) years, including but not limited to the following:
- a. Total number of emergency room visits by facility
2015 (77) 2016 (90) 2017 (120)
 - b. Number of ER visits that resulted in inpatient admissions
2015 (15) 2016 (21) 2017 (30)
 - c. Number of ambulance transfers by facility. County does not have this information.
 - d. All non-ambulance transfers. County does not have this information.
 - e. All 911 transfers. The County does not have this information.
 - f. All life flight/helicopter transfers. The County does not have this information.
 - g. Number of inpatient admits. The County does not have this information.
 - h. Number of inpatient days 2017 (160)
 - i. Average hospital length of stay. The County does not have this information.
 - j. Number of outpatient visits by provider type. The County does not have this information.
 - k. Number of one-day surgeries by type. The County does not have this information.
 - l. Number of off-site radiology exams by type (i.e., CT scan, MRI etc.)

2015 (5) 2016 (N/A) 2017 (11)

42. Mental Health Statistics (for the past three years)

- a. Number of attempted suicides
2015 (9) 2016 (2) 2017 (1)
- b. Number of completed suicides (0)
- c. Number of mental health grievances. The County does not have this information.
- d. Number of episodes of seclusions, if any. The County does not have this information.
- e. Number of episodes of restraint per month, if any. The County does not have this information.
- f. Number of episodes of suicide watch per month. The County does not have this information.
- g. Number of psychiatric hospitalizations. The County does not have this information.
- h. Number of psychiatric inpatient hospital days. The County does not have this information.
- i. Total cost of psychiatric inpatient hospitalizations. The County does not have this information.
- j. Is the MP financially responsible for hospitalization in psychiatric facilities? The County does not have this information.
- k. Number of psychiatrist visits per month. The County does not have this information.
- l. Number of Mental Health Professional visits per month. The County does not have this information.

43. Expenses. Please provide the following information for the past two years. N/A

- a. Total pharmacy costs. The County does not have this information.
- b. Total psychotropic medications costs. The County does not have this information.
- c. Total HIV/AIDS medications costs. The County does not have this information.
- d. Total ER visit costs. The County does not have this information.
- e. Total inpatient hospitalization costs. The County does not have this information.
- f. Total off-site specialist visits costs. The County does not have this information.

44. Catastrophic Financial Capitation.

- a. Recent changes in Hepatitis C treatment protocols have created significant unpredictability in the cost of this treatment. Would the County be willing to either:
 - i. Apply a specified annual limit to the Contractor's financial responsibility for the cost of Hepatitis C treatment; or
 - ii. Allow the Contractor to pass through to the County the actual costs associated with Hepatitis C treatment? (i.e., carve out)
The contractor will need to build this cost into the contract

b. Given the unpredictable costs associated with hemophilia replacement factors for the treatment of blood disorders (and also the infrequent need for such treatment in a jail setting with a more transient population), would the County be willing to:

i. Allow the Contractor to pass through to the County the actual costs associated with factor medications? (i.e., carve out)

The contractor will need to build this cost into the contract

45. What is the frequency and length of the SCDC-sponsored Safety, Security and Orientation training?

4 hours of initial training and minimum of 40 in total throughout the year.

46. Will there be an opportunity to ask clarifying questions of responses provided? Yes

GENERAL

47. The "Sequence of Events" on page 5 of the RFP doesn't cite a transition/start date. When is the County requesting, and anticipating the County's new provider to transition and begin services? July 1, 2018

48. In an effort to completely understand the county's intent and the scope of this RFP, please confirm Sandoval County intends to contract with a provider whose proposal is based on a comprehensive and turn-key inmate healthcare programs where the provider hires the provider's employees, not the County's. Please confirm Sandoval County is not interested in entering into an agreement with a consulting group who proposes management and oversight services where the provider manages the County's employees. These are two very different models, both involve different costs, management structures and liabilities and it's critical for interested bidders to fully understand the County's intent.

The contractor will hire its own employees. At this time, The County is not interested in a consulting group managing County employees to administer the Jail's Health Services.

49. Page 3 of the RFP cites the County holds approximately 200 Federal inmates of the total 400 average daily population (ADP). Does the County anticipate any changes with these Federal inmates, or changes in this population in the near future? Please provide any plans with changes in the County's ADP.

The population may change based on upcoming construction and renovation. The possibility of population reduction will be 96 detainees for a period of 18-24 months.

50. The third sentence in Section A. under the “General Specifications” on page 18 of the RFP states, “...Within these categories includes but is not limited to the recruitment and management of appropriately licensed providers, staff training, policies, procedures, and treatment protocols, laboratory, diagnostic/x-ray, **EMS/ambulance**, utilization management (UM), and on-site routine medical services.”

Item 2. of this same section states, “**Off-site services may be a component of this RFP** by which the successful provider may be responsible for off-site costs.”

Being responsible for EMS/ambulance, off-site services and/or including an aggregate cap for such services will substantially impact bidder’s financial models and the County’s price. Please specify whether the County is requiring all bidders to base their models on EMS/ambulance and/or off-site services. If so, please provide a report citing annual expenditures related to EMS/ambulance and Off-Site services over the past three years (2015, 2016, and 2017) and 2018 to date.

The Sandoval County Detention Center utilizes the Sandoval County EMS for services and these costs are covered by the County however when EMS is unable to respond, a municipality will respond and transport. Over the last four years, no ambulatory services were paid out.

51. Section “17. Insurance” on page 32 and 33 of the RFP requires,

“2. Commercial General Liability on ISO form CG 0001 0798 or equivalent.

Bodily Injury/Property Damage: \$1,000,000 Each Occurrence
\$2,000,000 General Aggregate

Products/Completed Operations: \$1,000,000 Each Occurrence
\$2,000,000 General Aggregate

3. Business Automobile Liability

Combined Single Limit \$1,000,000 Each Occurrence on ISO CA0001 1001 or equivalent.

Business Automobile Liability Insurance shall include coverage for the use of all owned, non-owned and hired automobiles and vehicles.

a. Independent Contractors: Included

b. Contractual Liability: Included in Commercial General Liability

4. Professional Liability: (if applicable) \$1,000,000 Each Occurrence
\$3,000,000 General Aggregate”

This type of coverage is specific to manufacturers, distributors, suppliers, retailers, and others who make products available to the public and are held responsible for the injuries those products cause. Would the County please consider deleting this requirement since it’s not a standard requirement and doesn’t apply to comprehensive inmate medical, mental and ancillary healthcare programs and services?

The insurance requirements are the standard requirements that we require as part of our contracts and part of our procurement code.

52. Section c. on page 20 of the RFP cites, “c) Vacancies in whole or in part of any shift will result in a credit to the SCDC based on salary plus benefits of the position assigned to that post and for the hours the post is vacant. Additionally, any unfilled shift staffing position not provided shall be a cost credit to SCDC until filled. See Section VIII 2 D of this RFP”. Please provide a detailed vacancy report for any, and all of the current Contractor’s healthcare positions, as well as with any contracted providers over the past three years (2015, 2016 and 2017) and 2018 to date. Please also include the duration for how long each position remained vacant.

The County does not have this information.

53. On an average, how many detox patients does the Contractor manage per week, per month and annually? The County does not have this information.
54. Does the current Contractor provide TB and Hepatitis testing on your inmates? Do they provide TB and Hepatitis testing for County employees? If so, how many County employees are tested annually? Does the County currently provide the serum and is so, will this continue through this agreement? Does the Sandoval County Health Department currently manage any of these services and do they currently provide the serum?

The current contractor does provide TB and Hepatitis testing for detainees. The current contractor does provide TB testing and the hepatitis series. The contractor will test further if needed for staff. The serum will be provided by the contractor.

55. Is the County interested in the successful Contractor providing new hire physicals and/or testing on County employees? If so, how many should be considered annually and will the County provide the test kits? No, the County is not interested in new hire physicals or testing.
56. Does your current Contractor provide any tele-psych or tele-med services to either facility? If so, please provide detail specific to how many hours per week of tele-psych and or tele-med services are provided. Would the County like to see similar tele-based services proposed through this RFP?

No but the county is willing to consider these services.

57. Which hospital and/or clinic(s) does the County utilize for inmate based off-site services? Is this a County owned/operated hospital/clinic? Has the County and/or the current provider been able to negotiate discounted rates such as Indigent, Medicaid, Medicare, etc.?

Sandoval Regional Medical Center / UNMH Downtown

58. Section 14, on page 21 of the RFP states, “Please describe how you will operationalize effective discharge planning to ensure continuity of care. Please include your knowledge of the current system of care in Sandoval County and/or how you will develop or enhance relationships with

community-based Providers to strengthen the safety net for high needs residents of Sandoval County exiting from the SCDC.”

Does the Contractor or Sandoval County currently collaborate/work with any locally based, community health care providers to provide a linkage to the inmates in an effort to assist with their re-introduction into the community and to help reduce recidivism? If so, what are the names of these providers? How is communication and coordination between the jail and these entities? Please describe community agency support, county mental health, public health or other community agency support or care and treatment of the Sandoval inmate population (if any)? Does the County desire to include a re-entry/linkage program as part of their mental health services program?

The county is interested in including re-entry/linkage programs as a part of the mental health services program.

59. Would the County like to see options which include a Case Manager and/or Discharge Planner to help reduce recidivism? **Yes**
60. What has been the Counties off-site and specialty services expenditures over the past three years (2015, 2016, and 2017) and 2018 to date? **The County does not have this information.**
61. What has been the County’s census for pregnant females each of the past three years (2015, 2016 and 2017)? What is the average length of stay for this population?
2015-3 2016-9 2017-11
62. Who is the County’s EMS/ambulance provider? What do they charge the county per trip, if anything? On average, how many EMS calls are made per month?
Sandoval County EMS. The county is not charged.
63. On average, how many medical related transports does the County manage per week? Per month? Annually over the past three years (2015, 2016, 2017) and 2018 to date?
Annually 2015(164) 2016(192) 2017 (268)
64. On average, how many inmates with HIV does the County manage annually? Does the County currently take advantage of any programs to assist with high-cost HIV medications?
Annually 2015(19) 2016(10) 2017 (13) HIV medications are allowed to be brought in by detainee or family members due the severity of medication needs.
65. Please provide a complete listing of the equipment used in the medical department along with the ownership, age and condition of each piece of equipment. **The County will provide desks, chairs and an exam table.**
66. Section e) on page 20 of the RFP, *“All Health Services Vendors are required to participate in SCDC sponsored Safety, Security, and Orientation training prior to providing patient care for the Contract.”* How often does the County hold these trainings? What is the duration of these

trainings? **The County has not had any professional development and/or continuing education and training programs that the contractor has provided over the last three (3) years.**

67. Item 10 on page 20 of the RFP states, *“Please provide your Professional Development and/or Continuing Education and Training program.”* Please provide a listing of the professional development and/or continuing education and training programs the Contractor has provided over the past three-years. **No**

PHARMACEUTICAL

68. Does the Sandoval County Adult Detention Center allow Methadone or Suboxone to be prescribed to inmates? If so, who is the provider? **No**
69. Does Sandoval County Detention Center currently educate and dispense Narcan to discharging inmates with Opioid use disorder as required by House Bill 370/HHCS? If not, does the County plan to do so in the near future?
The Sandoval County Detention currently does not dispense Narcan. Sandoval County is currently working with NMAC to begin this process. It will be implemented in the next 90-120 days
70. On average, how many inmates are prescribed, and receive psychotropic medications annually?
2015 (1293) 2016(1308) 2017 (651)
71. What are the top 20 most prescribed pharmaceuticals? **The County does not have this information as it is proprietary to the current provider.**
72. What are the top 20 most prescribed psychotropics? **The County does not have this information as it is proprietary to the current provider.**
73. Are inmates provided with pharmaceuticals upon release? If so, how many days’ worth of medications are provided?
Prescriptions may be called in to any pharmacy of choice with the approval of prescribing provider for up to 14 days until they are able to see Primary Care Provider.

MENTAL HEALTH

74. What percentage of the total ADP are mentally-ill inmates or inmates with a Mental Health diagnosis? Substance Abuse disorder or co-occurring disorder? **38%**
75. What type of mental health programming does the current Contractor provide for both the adult mental health populations (i.e. Individual, group therapy, etc.)?

Mental Health services are offered 7 days a week by both counselors as well as two psychiatric providers that are here two days out of the week. Sunday and Thursday for 8 hours.

76. Please provide the number of suicides over the last 12 months, and a three-year history (2015, 2016, and 2017) and 2018 to date regarding suicide attempts or completed suicides. Has any litigation resulted from these occurrences?

Attempts

2015 (9) 2016 (2) 2017 (1) No successful suicides

77. Please list the County's top issues and struggles with managing the mental health population.

The provider hours need to be reviewed to ensure proper coverage. The County does have a high number of reoccurring offenses due to not having resources upon release dates for continuing mental health treatment.

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