



RFP Page	RFP Section Number/Name	Question
Response preparation & assembly		
p. 2	Table of Contents	Please identify or provide Exhibit B as listed as an enclosure on p. 2
p. 2	Table of Contents	Please identify or provide Exhibit C as listed as an enclosure on p. 2.
p. 12	3. Preparation and Submittal of Proposals	Please outline the desired organization of response and documents for a vendor's response. What order would the County prefer the answers to: 7. Specifications of Program Requirements; items in Part C; signed forms including cost proposal; references; and/or any other requested documentation?
p. 22	7. Specifications and Program Requirements	Please confirm that the County wants to see written narrative or acknowledgement of all items in 7. Specifications and Program Requirements, sections A-H.
p. 38	Part C Bid Proposal for Inmate Health Care Services	Please confirm that the County would like written narrative and/or requested documentation for each item in Part C.
p. 38	Part C Bid Proposal for Inmate Health Care Services	Please clarify what is requested by "samples of all forms to be used in the performance of the contract"
p. 44	Statement of Financial References	How many financial references are required? Will the County accept fewer than four (4)?
Legal		
p. 15	Part B section 6B	Does Lake County/Sheriff require that the contractor indemnify and hold harmless the County and Sheriff for the acts or negligence on the part of Lake County/Sheriff as stated in the last sentence in the Hold Harmless clause? Would Lake County/Sheriff agree to an indemnity provision similar to that in the contract with the current provider?
Pharmacy		
p. 26	7.B.10	The RFP requires "Provisions for pharmaceutical services to assure the availability of prescribed medications within eight, (8), hours of the order of issue being written and provisions for emergency pharmacy services within two, (2), hours.

		<ul style="list-style-type: none"> • Is this requirement currently being met? • Is this for all medications or for only critical medications or 'no miss' meds?
	Pharmacy	<p>1) Will the County allow pharmacy vendors to operate consistent with applicable state law and as further delineated by their existing Board of Pharmacy issued licensure specific to their business model?</p> <p>It has come to our attention that certain bidders within the industry are submitting questions to state and local correctional agencies during the bid process with misleading information regarding pharmacy operations in an effort to eliminate competition. For example, a competitor in the industry stated that a “company must be an FDA Registered Repacker to legally repackage stock medications from bulk containers into blister cards.” However, not every pharmacy is required to hold a repacker registration merely because it is repackaging stock medication. The Code of Federal Regulations governing FDA Registered Repackers provides certain specific exemptions from registration under Section 207.10. It provides that if a pharmacy is operating under all applicable local laws that regulate the dispensing of medication and further if it is manufacturing or processing drugs in the normal course of pharmacy business and those drugs are being supplied to a licensed practitioner for use in his or her professional practice, then a pharmacy is exempt from the registration requirements. Therefore, based on most business models, wherein it is providing stock medications in a container relabeled by a pharmacist to a physician, then the repacker registration is not required. This unnecessary requirement only serves to eliminate competition and prevent the use of other significantly qualified pharmacy vendors who would provide cost effective, efficient and clinically sound pharmacy services to CCDC.</p>



		Will the County agree and acknowledge that holding a FDA Repacker registration is not required in order to provide services?
	Pharmacy	<p>A competitor has also stated that “the Prescription Drug Marketing Act of 1987 (PDMA) requires vendors to provide electronic pedigree papers (ePedigrees) with all stock medications.” However, not every pharmacy is required to provide pedigree papers with its stock medications. Pedigree papers are only required of wholesale distributors under the Prescription Drug Marketing Act.</p> <p>Will the County agree and acknowledge that pedigree papers are not required in order to perform services under this contract?</p>
	Pharmacy	<p>A competitor has stated that “true unit-dose dispensing is required in many states before a pharmacy vendor is allowed to accept returns and provide credit on returned medications. A pharmacy vendor that dispenses medication in blister cards (both stock and patient-specific) must individually label each bubble of the blister card with a medication’s name, strength, manufacturer, NDC number, lot number and expiration date.” However, not every pharmacy is required to label its stock and patient specific medications as identified above. The labeling requirement is applicable only to those who hold a repacker registration.</p> <p>Will the County agree and acknowledge that bidders are not required to label their medications as identified above in order to service the County?</p>
		<p>How many medication passes are there per day?</p> <p>Do inmates come to a central location or are medications taken cell to cell?</p>
p. 9	Background Information	Does the current subcontracted x-ray service provide digital x-rays?
		Are MRIs or CT scans provided onsite?
		Please provide a list of current community-based providers utilized for reentry services.
		Please provide a list of current onsite and offsite specialists providing treatment to patients.



Staffing		
		Please provide list of current vacancies by job description. What is turnover rate for past 12 months for each position?
		Please provide the current average hourly/salaried compensation rates for job title of the current incumbents. Please also provide shift differentials (by job title/shift) for all current staff.
p. 9	B. Background Information	Please confirm that no medical staff is necessary at the South Lake District intake facility.
Scope/Clinical		
		Are there any Negative Pressure Rooms? Please provide the number working and available to the medical vendor.
		Please provide a list of current community-based providers utilized for reentry services.
p. 9	Scope	What onsite specialty clinics are currently not provided but desired?
p. 27	13.b	RFP language: <i>Certified, modified diets available for inmates when ordered by facility physician.</i> Please confirm that it is acceptable for the midlevel (NP or PA) to order these diets.
p. 27	13.a	RFP language: <i>Menus planned for not less than 28 days in advance an certified by a nutritionist</i> Please confirm who is responsible for arranging nutritionist review – Food Services or Medical Vendor
		Please confirm that there is WiFi available throughout the facility to include the exam rooms on the housing units.
		Please provide the date of the last inspections and last reports for : a. NCCHC b. FMJS c. FCAC
		For purposes of Accreditation, is the “Infirmary” area considered an Infirmary by NCCHC definition?
		During the site tour it was stated that there is nursing personnel present in Intake 24/7. Please confirm this is a requirement of the



		current contract and is the expectation of the County going forward.
		Please provide the number of intakes which were considered "late" (i.e, exceeded the 4 hour threshold) for the last 12 months.
		Please provide the average length of time inmates are held in the holding cells in Intake prior to being moved to assigned housing.
		Please provide Health Services Report (HSR) for 2016 through present.
		Is the Sheriff's Office staff currently responsible for maintaining observation of any patient placed on Suicide Watch 1:1? If yes, will this continue with the new award?
p. 27		Is Methadone currently provided onsite for pregnant patients?
p. 27		Who is the current Methadone Provider?
General	Statistics	<p>Please provide the following <u>monthly</u> statistics for 2016, 2017 and 2018 for the following items:</p> <ul style="list-style-type: none"> • Average daily population • Segregation bed counts (total capacity and average beds filled) • Medical Infirmary bed counts (total capacity and average beds filled) • MH housing unit bed counts (total capacity and average beds filled) • Intakes / Bookings • Health & Physicals (H&Ps) • Medical Provider Sick call • Nursing Sick call • Psychiatry provider evaluation • MH Staff individual evaluations • MH groups (including type) • Inpatient Admissions • Inpatient Days • ER visits (not admitted) • # of ambulance runs • Offsite surgeries • Hospital observation stays • Offsite specialty medical appointments (provide by specialty type) • Oral surgeries • Dialysis patients • Dialysis treatments



		<ul style="list-style-type: none"> • Optometry visits • # of eyeglasses prescribed • Ultrasounds • Mammograms • Routine x-rays offsite • MRIs • CT scans • OB/GYN visits • Pregnant females • EKGs • Patients receiving medications for HCV • Patients receiving medications for HIV • Patients receiving medications for psychotropics • Patients receiving medications for cancer • Patients receiving medications for hemophilia • Average # of patients on medications • # of prescriptions reviewed • # of patient specific medication orders • # of stock medication orders • Liquidated damages/penalties assessed against vendor for service delivery • Staffing paybacks or damages assessed against vendor for failure to staff
	General	<p>For the years ending 2016, 2017 and 2018, please provide a detailed listing of each and all pharmacy orders, including:</p> <ul style="list-style-type: none"> • the drug name, • NDC, • quantity dispensed, • date dispensed, • amount paid. <p>Please include unique masked patient identifiers for each patient specific pharmacy order.</p>
	General	<p>If detailed pharmacy orders are not available, please provide total cost by major pharmacy category for the years ending 2016, 2017, and 2018.</p>
	General	<p>For the years ending 2016, 2017 and 2018, please provide a detailed listing of each and all offsite and specialty claims, including:</p>



		<ul style="list-style-type: none"> • the billing provider name, • date of service, • type of service provided (ED, inpatient admission, etc.), • ICD/CPT codes, • amount billed, • amount paid. <p>Please include unique masked patient identifiers for each claim.</p>
	General	If detailed claims are not available, please provide total cost for each offsite and on-site specialty category for the years ending 2016, 2017, and 2018.
	General	Are any of the existing staff currently unionized? If so, please provide the position in the union and the union group. Please provide a copy of the current union agreement(s).
	General	Are there any current or pending consent decrees, lawsuits, or other court action that may influence the standards of care or required services at the facilities? If so, please identify and provide documentation.
	General	Please provide a comprehensive listing of all equipment owned by the current vendor. Please include description/model, date acquired, and current condition. Will the equipment remain with the County for the new vendor?
	General	Please provide a comprehensive listing of all equipment owned by the County that will remain in service for the new contract period. Please include description/model, date acquired, and current condition.
	General	Please provide a comprehensive listing of all equipment needs that currently exist at each facility.
p. 10	Price	Please clarify who owns the medication carts: The County, the medical vendor, or the pharmacy?
p. 11	Price Sheet	Please confirm that the County expects 3 separate invoices – onsite base fees, pharmacy, and offsite costs.
p. 11	Price Sheet	The RFP states that the base price will be invoiced to Lake County Sheriff. Who will be invoiced for pharmacy and offsite costs?



p. 19	Payment for Services	Please confirm that the Lake County Sheriff's office expects monthly invoices for base fees on or before the first day of the month of service and that payment will be rendered within 30 days of invoice receipt.
p. 20	Payment for Services	Please confirm that the daily counts include individuals who are in the custody and control of the County, may not be physically present at the time, but are the financial responsibility of the medical vendor (i.e. in hospital, etc.).
p. 14	Evaluation of proposals	The score for pricing references that the lowest bidder will receive 80 points and that the high bid will receive 0 points. Please define how bidders in between the low bid and high bid will be allocated points. Is this based upon the fractional difference between the two prices (i.e. \$2m low bid, next bid of \$2.5m receives 80% of the point value or 64 points).
	General	Will medical supplies on site as of the date of transition remain for use by the incoming medical vendor?
	General	Will stock pharmaceuticals on site as of the date of transition remain for use by the incoming medical vendor?
p. 20	Obligations of County/Sheriff	Please confirm that the vendor is only financially responsible for medical contaminated waste.
p. 22	Available Equipment	Please provide a copy of the health care equipment list that was to be provided at the bidder's conference.
p. 23/24, 35	Monthly Statistics, Regular Reports to Sheriff	The required information for offsite services and staffing reports are not complete/accurate by the 15 th of the month following service. Will the County accept complete and accurate reporting no later than the last day of the month following service?
p. 25	Staffing Schedule	The RFP requires that bidders include on site specialty clinics on the staffing schedule. Please confirm that the specialty clinics are not subject to staffing paybacks as detailed on page 25.
p. 32	Unusual/Off-Site Health Care	Please confirm that any specialty care provider (beyond primary care) who is brought on-site for clinics to reduce transportation will be included in costs billed separately to the County as part of Unusual/Off-site health care.



p. 35	Financial Requirements	Please clarify if orthotics and prosthetics ordered by offsite specialty providers are included in costs to be reimbursement by the County as part of Unusual/Off-site health care.
p. 40	Pricing	Please clarify – does the County wish to have an annual cost or a three month cost identified for item A) Total Cost First Year of Contract Including Equipment?
IT & Electronic Health Records		
p. 22	terms of contract section V - Equipment and space available	Can Proposer utilize existing network drops (assuming they exist) in the medical facilities?
p. 22	terms of contract section V - Equipment and space available	Will vendor be allowed to use existing network infrastructure to access EHR application and any other necessary applications required to provide medical care
p. 22	terms of contract section V - Equipment and space available	What is the current number of wireless access points currently in use in the facility?
p. 22	terms of contract section V - Equipment and space available	Please confirm that incoming vendor will have access to the existing network system including wi-fi antennas, routers, and network switches
p. 22	terms of contract section V - Equipment and space available	What is the total bandwidth being provided by your current network
p. 22	terms of contract section V - Equipment and space available	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?
p. 22	terms of contract section V - Equipment and space available	Can the current internet connection be transferred to the incoming vendor
p. 27	C. Care and treatment requirements	Is telemedicine and/or telepsychiatry currently utilized anywhere in the facility? If so, please describe the equipment used, including number of units, location, age, and condition. Please also confirm whether or not the equipment will be available for the new vendor. If not, is telemedicine and/or telepsychiatry an option in the delivery of services at your facility?
p. 27		If telemedicine and/or telepsychiatry currently are used, please provide the number of visits and detail by specialty for the last 12 months.
p. 33	D. Medical Records Requirements	Please provide name and version of current JMS software?
p. 33	D. Medical Records Requirements	Is current JMS software HL7 capable?



p. 33	D. Medical Records Requirements	Will the incoming vendor work with the JMS vendor or the county to integrate the JMS with proposed EHR solution
p. 33	D. Medical Records Requirements	Will the County provide resources to develop, configure, and test JMS side integration routines with the EHR and eMAR solutions? If not, how does the County intend for the Proposer to accomplish integration and testing with the JMS?
p. 33	D. Medical Records Requirements	Can current vendor provide health record data in both PDF and CCD format?
p. 22	terms of contract section V - Equipment and space available	Who is responsible for computer hardware purchases and maintenance related to medical and the EHR during the contract?
p. 22	terms of contract section V - Equipment and space available	Please confirm that existing computer equipment will be available to the incoming vendor on day one of the contract?
p. 22	terms of contract section V - Equipment and space available	Please provide an inventory of all existing computer related equipment currently used to provide medical services under the current contract?
p. 22	terms of contract section V - Equipment and space available	If additional or replacement hardware is required for use with EHR is county or vendor responsible for costs?
p. 22	terms of contract section V - Equipment and space available	What is the total number of Desktop and Laptop computers being used by current staff today? Are they owned by the county and can be used if in working condition? Or are they owned by the current vendor and will be removed?
p. 22	terms of contract section V - Equipment and space available	Can Proposer utilize existing network drops (assuming they exist) in the medical facilities?
p. 22	terms of contract section V - Equipment and space available	Will vendor be allowed to use existing network infrastructure to access EHR application and any other necessary applications required to provide medical care
p. 22	terms of contract section V - Equipment and space available	What is the current number of wireless access points currently in use in the facility?
p. 22	terms of contract section V - Equipment and space available	Please confirm that incoming vendor will have access to the existing network system including wi-fi antennas, routers, and network switches
p. 22	terms of contract section V - Equipment and space available	What is the total bandwidth being provided by your current network
p. 22	terms of contract section V - Equipment and space available	Does Wireless exists everywhere that Medical services are provided including the housing units? If Wi-Fi exists but not in all areas needed, can vendor expand?



p. 22	terms of contract section V - Equipment and space available	Can the current internet connection be transferred to the incoming vendor
p. 33	D. Medical Records Requirements	Will the vendor be responsible for data migration if a new EHR is chosen for use in the County?
Behaviorial Health		
p. 27	5 c	Please provide the number of patients in segregation for the last 12 months
p. 27	5 b	Please provide the average number of patients on suicide watch per day for the last 12 months
p. 27	5f	Please provide the number of patients designated serious mental illness (SMI)
		Please provide the number of inmates currently receiving MH services
		Does the current mental health program include group mental health programming? If so, please provide the types of therapeutic groups being offered.
		Is there any existing specialized behavioral health programming in place? If so, please describe the current specialized programming.
		Are there currently any contracts with outside agencies to provide behavioral health services in house? (for example, group programming or substance abuse treatment)
		Please provide the average number of Stat/urgent behavioral health referrals per day for the last 12 months.
		Please provide the average number of routine behavioral health referrals per day for the last 12 months.
		The provided staffing plan indicates that 40 hours of behavioral health professional were to be schedule. Please provide the current staffing schedule for the behavioral health staff.
		Please provide the average number of patients on Close Observations (or Step Down) per day



		Please provide the name of hospitals used for offsite MH treatment
		Please describe the current reentry program in place. Is the County interested in expanding reentry services in the facility?
		Are there currently any formal agreements in place for reentry services/ Partnerships for Reentry services? If so please describe.
		Are there currently any accountability courts or jail diversion programs in Lake County? If so, what is the behavioral health staff's role in these courts/programs?