



State of West Virginia  
 Department of Administration  
 Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

# Request for Quotation

RFQ NUMBER  
**RJC672**

PAGE  
**1**

ADDRESS CORRESPONDENCE TO ATTENTION OF:  
**JOHN ABBOTT**  
**304-558-2544**

RFQ COPY  
 TYPE NAME/ADDRESS HERE

VENDOR

SHIP TO

REGIONAL JAIL AND CORRECTIONAL  
 FACILITY AUTHORITY  
 JOBSITE  
 SEE SPECIFICATIONS

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
07/20/2009				

BID OPENING DATE: **08/20/2009** BID OPENING TIME: **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
				ADDEDNDUM #03		
				THIS ADDENDUM IS ISSUED TO ANSWER VENDOR QUESTIONS, ESTABLISH A SECOND QUESTION SUBMISSION PERIOD, AND EXTEND THE BID OPENING DATE.		
				SECOND AND FINAL ROUND OF QUESTIONS ARE DUE: 7/30/2009; 2:00 PM.		
				REVISED BID OPENING DATE: 8/20/2009; 1:30 PM		
0001	1	LS		948-74		
				PROFESSIONAL MEDICAL SERVICES		
				***** THIS IS THE END OF RFQ	RJC672 *****	TOTAL: _____

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

**GENERAL TERMS & CONDITIONS  
REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)**

1. Awards will be made in the best interest of the State of West Virginia.
2. The State may accept or reject in part, or in whole, any bid.
3. All quotations are governed by the *West Virginia Code* and the *Legislative Rules* of the Purchasing Division.
4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
5. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
6. Payment may only be made after the delivery and acceptance of goods or services.
7. Interest may be paid for late payment in accordance with the *West Virginia Code*.
8. Vendor preference will be granted upon written request in accordance with the *West Virginia Code*.
9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
13. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
14. **HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (<http://www.state.wv.us/admin/purchase/vrc/hipaa.htm>) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
15. **WEST VIRGINIA ALCOHOL & DRUG-FREE WORKPLACE ACT:** If this Contract constitutes a public improvement construction contract as set forth in Article 1D, Chapter 21 of the West Virginia Code ("The West Virginia Alcohol and Drug-Free Workplace Act"), then the following language shall hereby become part of this Contract: "The contractor and its subcontractors shall implement and maintain a written drug-free workplace policy in compliance with the West Virginia Alcohol and Drug-Free Workplace Act, as set forth in Article 1D, Chapter 21 of the West Virginia Code. The contractor and its subcontractors shall provide a sworn statement in writing, under the penalties of perjury, that they maintain a valid drug-free work place policy in compliance with the West Virginia and Drug-Free Workplace Act. It is understood and agreed that this Contract shall be cancelled by the awarding authority if the Contractor: 1) Fails to implement its drug-free workplace policy; 2) Fails to provide information regarding implementation of the contractor's drug-free workplace policy at the request of the public authority; or 3) Provides to the public authority false information regarding the contractor's drug-free workplace policy."

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**INSTRUCTIONS TO BIDDERS**

1. Use the quotation forms provided by the Purchasing Division.
2. **SPECIFICATIONS:** Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
3. Complete all sections of the quotation form.
4. Unit prices shall prevail in case of discrepancy.
5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
6. **BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130

Q & A  
Inmate Medical Services  
RJC672

**Correctional Medical Services (CMS) dated June 10, 2009**

Page 22, 3.1

It may not be possible for NCCHC to schedule a survey within one year of the contract award. If this were the case, would that be taken into account in order to defer the penalty until the survey could be scheduled?

**This agency currently has all ten (10) facilities accredited. This has not been a concern or issue to the date. The current vendor has not encountered this issue.**

Page 24, 3.2 N1 Pharmaceutical Services

"The contractor may be required to purchase prescription medications from Minnesota Multi-State Contracting Alliance for Pharmacy if determined that it is advantageous to the authority"

What process will be used to determine if such an arrangement is advantageous to the authority? Would the vendor have an opportunity to provide comparisons for evaluation of their preferred services?

**This agency would look at the most cost effective method for the State of West Virginia as a whole while still meeting the standards related to the incarceration of inmates within the WV Regional Jail System.**

**The vendor should also advise the agency of methodology that is cost effective while maintaining applicable standards.**

Which jails have an infirmary? How many beds?

**All ten (10) regional jail facilities have a medical unit in them. The units have office space, storage space, exam rooms, and cells. The WV Regional Jail Authority has facilities with 2, 3 and 4 pod housing units. Two pod facilities have four (4) med cells. Three (3) and four (4) pod facilities have six (6) med cells. The cells are single occupancy, but due to system wide overcrowding are sometimes double celled.**

Is the Agency deemed a "covered entity" under HIPAA? If so, please elaborate on what activity the Agency participates in that makes it a covered entity.

**No.**

Public Records

Will the State notify the vendor of any request for disclosure of its proprietary documents prior to disclosing the documents so that the vendor may seek available legal remedies to prevent the disclosure of its confidential and proprietary documents?

**Any records that are required to be provided to the agency by contractual obligation, are public record and as such may be disclosed to others pursuant to applicable state law.**

Page 22, 1.19.3

This section refers to the use of federal funds. Are federal funds used for reimbursement under this contract?

**Only in the sense that the agency contracts with the Federal Government Marshal's Service, Federal Bureau of Prisons, etc. and houses approximately 200 inmates system wide on a daily basis.**

Page 1.19.10 Regarding change in law or court action –

In the event a change in law or court action significantly alters the Vendor's required activities or availability of funds, the parties will enter into good faith negotiations to amend the compensation and other provisions of the contract that are affected by the change. If negotiations are unsuccessful, would the State agree to allow the vendor to exercise the termination right as well?

**The State would require the exercise of the reasonable time period clause which does allow the vendor to terminate the contract "upon giving the agency Ninety (90) day written notice"**

Please provide Attachment 2 referenced in the RFP.

**Attachment 2 Typical Inventory of Medical Equipment Provided. This page is provided in the RFP (page 69).**

Please provide data regarding:

#### Staffing

Current staffing plan for each facility – **See attachment #6**

Current vacancies, length of vacancy: **This information is proprietary.**

Actual current salary rates and shift differentials: **This information is proprietary.**

Copies of any union affiliation / agreements: **None**

Adequacy of current staffing plan: **Adequate**

#### Contract Medical

Provider network utilized and contracting information: **This information is proprietary.**

Current annual amount of dollars spent on hospital/specialty services and amount billed to the authority in excess of contract limits: **This information is proprietary.**

Infirmery availability, size utilization, and capacity: **Each jail has either 4 or 6 medical beds in the medical unit, with one of them being a negative air flow room. They**

are most often used as observation beds. No individual statistics exist for the number of inmates housed there, but most of them are occupied 24/7.

Outpatient referrals per 1000: For the year 2008, there were 1641 outpatient referrals.

Top five specialty categories for referrals: **Obstetrics, Orthopedics, Ophthalmology, General Medicine and Physical Therapy**

Number of dialysis, diabetic, cancer patients: **Number unavailable, this statistic not kept**

Current onsite clinics/utilization: **For 2008 there were 4,949 onsite clinics held**

#### Pharmacy

Number / percentage of inmates on medication: **25,707/49%**

Number / percentage of inmates on psychotropic medication: **14,368/27.3%**

Number of HIV patients: **116**

Number of HIV patients on meds: **Unavailable, not kept**

Number of Hep C patients: **Total number of Hepatitis B & C patients for 2008 was 2393**

Number of Hep C patients on meds: **Unavailable, not kept**

Pharmacy provider / contracting information: **This information is proprietary.**

Number / percentage of diabetics: **Unavailable, not kept**

Current pharmacy cost reports: **This information is proprietary.**

#### Other

Current fiscal budget for each facility: **This information is proprietary.**

Current inventory on hand: **A list of Regional Jail Inventory in the medical unit is listed in Attachment 2 of the RFP RJC672. The inventory of the current medical provider is proprietary**

Current payment terms and payment history: **This information is proprietary.**

#### CMS Additional Questions dated June 11, 2009

##### General: Audits and Inspections

Is the Agency currently, or anticipated to be, under investigation, audit, or review by any federal State or local governmental authority or regulatory agency for inmate health services provided?

- Is any visit/audit/inspection currently scheduled or pending at any of the facilities?
- Is the County waiting for results of any report from or any prior inspection/audit review?
- Have any reports of audits or visits been issued or received in the last 24 to 36 months?
- Will the County share such reports of audits or visits?

**No, on all points. (the exception of course is NCCHC Accreditation)**

##### General: Litigation

Will the Agency provide the number of inmates' healthcare lawsuits currently pending in

which the Agency, its employees or agents are a named party?

Also, will the Agency provide a list of the inmate healthcare cases closed over the last two (2) years and the outcome of the cases including the amount of any payments (judgments or settlements ) paid by the Agency over the course of the last two (2) years?

**The Agency currently has 15 active cases - 2 closed. The amount paid is unknown.**

General: Licenses and Permits

Are any special licenses or permits required to provide services at any of the facilities? If so, please identify the nature of the license or permit required and any fee associated herewith. For those operations that are contracted out, does the current vendor possess any licenses or permits?

**Other than professional licensing for personnel or what is required in the RFP, There is no special licensing.**

Contract Termination 1.19.12 (RFP p. 17)

The RFP states that the Agency will provide an advance notice of performance conditions, which may prove to be damaging to the contract and the Agency will issue an order to cease and desist any and all work immediately if the Vendor fails to remedy the conditions within the time frame contained in the notice. Will the Agency clarify what it means by "time frame" and provide what its past practice is as far as a time frame is considered.

**If an egregious or negligent condition occurs as contemplated under that provision 1.19.12, immediately means immediately.**

General Requirements 3.1 (RFP p. 22)

Will the Agency provide a copy of the WVDOC Policy directives to the bidder?

**If the Division of Corrections will allow it, the Authority has no concern, however, the contract w/the Authority including those inmates from the Ohio County Center and the DOC of the Northern Regional Jail will be treated pursuant to the RFP or Contract, no exception.**

General Requirements 3.1 (RFP p.22)

Are the Facilities currently accredited by ACA? If so, when are the Facilities scheduled for reaccreditation?

- If the Facilities are not accredited, does the Agency plan to become accredited and if so, does the Agency have a specific timeframe in which it expects the Facilities to become accredited?

**No, the RJA facilities are not ACA accredited. The DOC side of the Northern Regional Jail and the Ohio County Correctional Center are both ACA accredited.**

Personnel Selection and Retention Requirements 3.2.4 (RFP p. 26)

When are background checks conducted? How long does it take to receive notice from the Agency that an individual has either been cleared or not cleared? Who bears the cost of the background checks?

**Usually, two weeks and the Agency will provide them.**

Drug and Alcohol Detoxification 3.2.2 B (RFP p. 27)

Are inmates that are going through detoxification from alcohol and/or drug use kept in the infirmary for observation?

**Not necessarily, it is up to the Medical Administrator and the attending Physician to decide who is housed in the medical unit.**

Physical Examination of Staff 3.2.4 (RFP p.30)

Who bears the cost of the pre-employment physicals for the Agency's employees?  
What is the monthly average number of pre-employment physicals for the Agency's employees?

**The vendor is. Number on Physicals in 2008 was 399.**

**Prime Care Medical dated June 10, 2009**

Page 23 F. Medical Observation Unit:

When a nurse is required to conduct an intake or the two nurses are conducting medication pass, does the vendor have to ensure another nurse and / or designee is available to stay in the medical unit? This potentially could increase the Table of Organization. If so, may a PrimeCare Medical of West Virginia, Inc. Health Services professional, employee, subcontractor and / or designee stay in the medical unit when the nurse is out of the unit? May a Correctional Officer man this post when a nurse is unavailable?

**Correctional staff will not maintain routine manning of this post when a nurse is not available due to routine duties. This is the responsibility of the vendor.**

Page 29.3.2.4 Additional Information:

Applicable excerpts from the West Virginia Standards for the Construction, Operation and Maintenance of Jails (95CSR1). A listing of typical Owner-furnished equipment is appended to this requisition (See Attachment 2). The Contractor shall be responsible for maintenance, repair and replacement of Owner-supplied equipment and for acquisition or additional equipment and supplies necessary for the proper conduct of inmate medical services under this Contract.

Is the vendor responsible to fix and / or place the existing WVRJA equipment to include but not limited to the dental suite, X-Ray Machine, Sterilizer, X-Ray developer, dental Chair, etc.? Is the Vendor responsible for office furniture for the medical unit to include chairs, desks, filing cabinets, etc.?

**The standard is applicable to all equipment which is supplied by the owner or any equipment or supplies accrued by the vendor for the proper conduct of inmate medical services under this contract.**

**However, the vendor would not be responsible for general office furniture such as chairs, desks, filing cabinets, etc; unless an employee of the vendor purposely destroys or damages such general office furniture.**

Page 30:

Is the vendor finically responsible for all costs associated with physical examinations to include; but not limited to, any and all diagnostic tests? If so, how many physicals were conducted in 2008 and type of and expense of any and all diagnostic testing?  
When is the expected WVRJA Medical Services Contract Award Date and Start Date?

**Yes, on being responsible for the costs. 399 is the number of physicals in 2008.**

Can the Vendor obtain an electronic/digital copy (Microsoft Word) of the WVRJA RFP RJC672?



**Any registered vendor may acquire a copy of the RFP by accessing the WV Purchasing Divisions web site at <http://www.state.wv.us/admin/purchase>. Will all vendors be provided answers to all written questions submitted by all vendors?**

Will all vendors be provided a copy of the mandatory pre-bid sign in sheet?

**Yes**

May vendors submit alternate proposals?

**No**

**Prison Health Services (PHS) dated June 11, 2009**

Would the Agency consider extending the due date of the proposal for one or two weeks give the short time period between the potential posting of the Answers to Questions submitted on June 11<sup>th</sup> and the short time period between the Pre-bid Conference on June 17<sup>th</sup> and the June 30<sup>th</sup> due date of the proposal? This would allow bidders time to evaluate the responses and prepare thorough proposals that meet the Agency's goals and objectivities.

**Yes, bid opening date has been changed to August 5, 2009 as per Addendum #2.**

Please clarify the Agency's intention pertaining to Part 3 – Procurement Specifications. Should we also include our response to F-Q from pages 23-25 as part of the required response as described in Part 4 – 4.1.D.b? Will this also include response to Sections 3.2.1 through 3.3?

**Yes and Yes. You should include F-Q from pages 23 -25 and Part 4 4.1.D.b and Sections 3.2.1 through 3.3.**

Are there currently any pending lawsuits or consent decrees related to the provision of medical care, mental health care or sex offender treatment services?

**There is always litigation concerning the delivery of Health Care. There are no "Consent Decrees.**

Please clarify the "reasonable time" a vendor may give the Agency notice of contract termination.

**A reasonable time cannot exceed 12 months pursuant to the RFP. What the time less than 12 months might be would depend on the nature of the failure to render services or meet the terms of the contract.**

Please provide the anticipated contract start date.

**Unknown at this time.**

What percentage of inmates comes from other jurisdictions (i.e. Federal)?

**We currently have approximately 200 Federal inmates within the system. Balance of the population is state inmates.**

Has the current vendor had medical staff recruitment or turnover issues in the past year? If yes, please describe.

**Not that the Agency is aware of. The delivery of services has been consistent with the existing contract and all facilities are NCCHC Accredited.**

Are offsite service providers limited to reimbursement as outlined under House Bill 2422?

**Yes.**

Does the current vendor process and pay all medical claims, then bill back the amount above the limit for reimbursement?

**Yes, vendor makes all payments then bills the Agency for costs exceeding the catastrophic limit outlined in the Current contract and new RFP.**

Please provide the amount that the Agency has paid in excess of the \$5000 catastrophic limit for dates of service 7/1/08 and beyond.

**FY 2009 \$891,782.51**

Please provide copies of Statistical Summary reports covering the last 2 years. How many inpatient hospital admissions were there in 2008? Please provide for each facility.

**See Attachment # 1**

Please describe the current Electronic Medical Records (EMR) system.

**The current vendor has an exclusive proprietary EMR.**

Which facilities currently utilize an EMR system?

**The EMR system is currently being used at the Eastern Regional Jail and the Potomac Highlands Regional Jail.**

Please provide the most recently approved Agency budget allocation for inmate medical services covered under this RFP.

**FY 2009 Estimated Budget for Medical \$13,778,250.00**

How much is the current provider paid monthly for services provided at Northern Correctional Center?

**Current monthly billing for the first 400 inmates is \$123,765.**

How much is the current provider paid monthly for services provided at Ohio County Correctional Center?

**Current monthly billing for the first 54 inmates is \$32,658.**

Please provide the current annual contract value for all 12 facilities covered under this RFP.

**See answer to question 14**

Please provide the most current staff turnover rate for the Agency's facilities.

**This information is proprietary.**

Please identify each primary and tertiary hospital currently being accessed for inmate care, by site.

**See attachment # 3**

Please provide the vacancies for each facility.

**Unknown for Medical contracted employees.**

Will any medical positions be filled by State Employees?

**No.**

Please provide a list (including the frequency) of medical care clinics that are provided on-site.

**See CMS question on issue.**

Please provide the current staffing plan for each facility and the pay rates.

**See CMS question on issue.**

How long does the background investigation take from the time of request until a new employee is "cleared"? Is there a fast track for employees to begin working while waiting final clearance?

**Approximately 2 weeks. No fast track.**

Is telemedicine/telepsychiatry offered at any of the Regional Jails? If yes, how many clinics are held each month? Would the current equipment be available to the selected vendor?

**Yes, the equipment is available, how many is unknown. Yes, the equipment would be made available to any vendor, however the Court System and Parole Board has first priority in use.**

Dental Services: Please provide a list of dental equipment, by site, owned by the state. For any dental equipment owned by the state, who will be responsible for maintenance cost?

**See attachment #2 and 3.2 M of the RFP for equipment. The vendor is responsible for any maintenance cost.**

Optometry Services: Are optometry services to be provided under the Vendor agreement? Please provide a list of optometry equipment, by site, owned by the state. For any optometry equipment owned by the state, who will be responsible for maintenance and replacement costs?

**These issues are addressed in the RFP section 3.2.4 A. The vendor is responsible for any maintenance or replacement cost.**

Referrals to off-site health care provider: Does the state have any standing discount contractual arrangements with off-site health care providers which the Vendor will be able to access for inmate health care services? If so, please provide a directory and the corresponding rates.

**The Agency knows of nothing other than Medicaid rates. Anything else, the vendor considers proprietary information.**

Radiology services: Please provide, by site, a list of x-ray equipment currently owned by the state. For any x-ray equipment owned by the state, who will be responsible for maintenance and replacement costs?

**These issues are addressed in the RFP.**

Hospitalization: does the state have any standing discount contractual arrangements with any hospitals which the Vendor will be able to access for inmate hospital services? If so, please provide a directory and the corresponding rates.

**The Agency knows of nothing other than Medicaid rates. Anything else, the vendor considers proprietary information.**

Dialysis Services: are dialysis services provided on-site at any of the correctional facilities, If so, 1) which facilities? 2) What dialysis equipment, by site, is owned by the state? And 3) Who is the current dialysis provider?

**No.**

## PHARMACY

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

**See Attachment #1 and CMS answer.**

What percentage of medications ordered each month are stock vs. patient specific prescriptions?

**See Attachment #1 and CMS answer.**

Who is currently providing your pharmacy services at the Regional jail facilities?

**Proprietary information of vendor.**

Please provide the most recent three months of drug utilization.

**See Attachment #1**

How many inmates receive Hep C treatment? What is the nature of the treatment?

**See Attachment #1 and CMS answer.**

Where are medications administered? What is the frequency of medication administration? What role, if any, do the corrections officers have in administering medication?

**Primarily medications are administered in the housing units and medical unit. Other than providing security while in a housing unit, the Correctional Officers have no involvement in dispensing medications.**

What form of psychotropic medication is currently being used – liquid or tablet? Please address the use of atypical antipsychotics.

**Liquid or Crushed. Unknown by the Authority on type or brand (See RFP 3.2.3 – F).**

Please provide the number of prescriptions per inmate.

**See Attachment #1 and CMS answer.**

Please provide the number of HIV patients and the number of inmates of HIV therapy by drug type.

**See Attachment #1 and CMS answer.**

Does your current pharmacy provider offer credit for full and partial returns of medication? If so, please describe that return policy.

**Unknown by the Authority.**

Are Medication Aides allowed to pass medication?

**No.**

Please provide the percentage of inmates on HIV medications January 2006 to present.

**See Attachment #1 and CMS answer.**

#### MENTAL HEALTH

What mental health services are currently available to inmates? Who provides these services?

**See RFP 3.2 par. K; N - 3; 3.3.3A etc. The vendor provides the services.**

What is the average number of inmates receiving mental health services?

**See Attachment #1 and CMS answer.**

Are any beds designated for mental health observation? If so, how many?

**No, however each facility does have individual holding cells in the booking area that can be utilized for this purpose if available.**

What is the procedure for inpatient mental health confinement of an inmate outside of the facility? Who pays for this?

**This does not occur unless the Court orders them to a State Mental Health Facility under the care of the DHHR. The DHHR pays as referenced in the RFP.**

Are there special mental health centers (housing units) staffed by mental health professionals and levels of care specific to inmate's acuity?

**Yes but only at the South Central Regional Jail Forensic Unit mandated by the DHHR. See RFP 3.2 and 3.2A.**

Is there an expectation that psychological evaluations for parole or probation be conducted? If yes, how many are done per month and what is the time frame from the request to the need to produce the written evaluation? What qualifications are required of the person doing the evaluations?

**No, the Court will Order this if necessary, pay for and select the vendor.**

Please provide the number of suicide attempts and suicides completed.

**See Attachment #7**

**Additional Q's Prison Health Services, Inc. dated June 24, 2009**

In response to the 2007 RFP for Inmate Medical Services, the current provider for the WVRJ&CFA committed to implementing CorEMR over a two year period.

- a. In the event CorEMR has been implemented at one or more facilities, is it the County's intent to uninstall these capabilities so as to enable a new vendor to implement its EMR at each of the 10 facilities?
- b. What was the implementation cost to the Regional Jail Authority?
- c. Is the Regional Jail Authority currently paying a monthly access fee?

**See response in previous set of questions.**

Can the state provide a resource that lists the Medicaid rates for hospitals where inmates will be treated under the proposed agreement?

**No, that information is within the DHHR domain.**

What is the average number of patients receiving dialysis treatment at any given time?

**Less than two per month. Average three to five per year.**



**Correct Care Solutions (CCS) dated June 11, 2009**

Can you provide the ALOS or # of hospital admits by facility ideally 2007 – 2008 YTD 2009)?

**See attachment #1 and #2.**

Can you provide the number of events and dollars that exceeded the \$5,000 catastrophic limit in 2007-2008?

**Not available.**

Can we get hospital days and ER data for 2007 also ideally YTD 2009?

**See attachment #1 and #2.**

Can you provide the current staffing by facility as well as a listing of any vacancies?

**See Attachment # 6 for current staffing. The vacancy information is proprietary.**

Can you provide the number of off-site consults (we only have ER and inpatient days) by facility for 2007-YTD 2009.

**See attachment #1 and #2.**

Please define the qualifications for the "psychologist"; is this individual a Ph. D or masters prepared?

**As licensed by the State of West Virginia.**

Are dental assistants being utilized in the facilities as there are none listed on the staffing form?

**No.**

Please identify how many hours a day of on-site medical staff is preferred at each facility (16 versus 24 etc.)

**24 hours per day, every day. See RFP and Minimum Jail Standards 95CSR1.**

Which of the facilities have dental operatories and currently have a dentist visiting the site?

**All**

Which facilities currently have on-site psychiatry?

**All**

Which facilities currently have on-site mental health staff routinely scheduled?

**All**

Please identify the location of any Program Administrators who are handling multiple facilities, and what are those facilities are?

**Each facility must have a Medical Administrator (Program Administrator)**

Please identify current monthly hours provided at each facility for optical needs? Who is the current provider?

**Optical services are provided on an as needed basis. The current provider is proprietary information.**

What additional on-site specialty clinics are provided and at which sites?  
Can the WVRJA Policies and Procedures as well as the WV DOC Policy Directive be made available?

**See attachment #1 and #2**

Can the WVRJ&CFA Policy and Procedures as well as the WVDOC Policy Directives be made available?

**Some policies may be available, but not all are public information.**

Please identify if any "pooling" of inmates is currently occurring for medical reasons and at what locations (e.g. grouping Mental Health together or chronic care patients)?

**Does not exist within the WVRJA system.**

Can you provide accreditation detail for each facility (whether or not facility is currently accredited and next accreditation date)?

**All facilities are expected to be accredited; all currently are.**

What is the significance of the project account numbers listed on Page 30?

**Billing purposes for the WVRJA.**

Where are the fit for duty examinations conducted and can you provide detail regarding number of exams annually?

**Assuming you are speaking of the pre-employment physical for RJA staff, they are done on site. The number of physicals for 2008 is 399.**

Can you provide average numbers of federal inmates housed in each facility?

**Daily average of federal inmates is 200 system wide.**

Is the technical bid opening public and will the vendors be notified of the date and time?

**The Purchasing Division will open only the technical proposals on the date and time specified in the Request for Proposal. The Purchasing Division representative will read aloud the names of those who responded to the solicitation and confirm that the original package contained a separately sealed cost proposal.**

**Upon approval of the technical evaluation from the internal review committee, the Purchasing Division shall schedule a time and date to publicly open and read aloud the cost proposals. The agency and the vendors shall be notified of this date.**

**Wexford Health dated June 11, 2009**

What is the State's targeted award date for the contract?

**Unknown at this time; The Authority and the Purchasing Division will make every effort to complete the procurement process as quickly as possible.**

What is the State's targeted start date for the contract?

**Unknown at this time; the start date will be based on the encumbrance date of the contract, upon receipt by the vendor the contract will begin immediately.**

Will the State allow bidders the opportunity to tour the facilities covered under the RFQ/RFP, to give bidders other than the incumbent a look at the facilities and thereby negate the incumbent's advantage of being the only bidder with first-hand knowledge of the sites?

**The WVRJA has no concerns with vendors making site visits, however all facilities are of a prototypical design and therefore are the same. Selecting one facility would suffice and thereby not unduly disrupt the operations of all. If you would like to request a site visit, please contact John King through John Abbott at the WV Division of Purchasing.**

Will the State consider extending the question deadline and allowing bidders to ask additional questions after (A) any site visits are conducted and (B) bidders have reviewed the State's responses to submitted questions and any other addenda?

**See Addendum #2 issued by the WV Division of Purchasing. The bid opening date is currently August 5, 2009.**

Please indicate the dollar value (and the contact term to which that value applies) of the current health services contract for the Regional Jail & Correctional Facility Authority.

**FY 2009 (8/15/08 – 2/14/09) Monthly total for RJA locations (9) \$779,924.48.**

Please provide a copy of the current health services contract for the WVRJA, including any exhibits, attachments, and amendments.

**To obtain a copy of the current contract, please contact Diana Johnson at [djohnson@wvrja.state.wv.us](mailto:djohnson@wvrja.state.wv.us) with an email address and one will be emailed to you.**

Please provide (by year) the amounts and reasons for any paybacks, credits, and/or liquidated damages the WVRJA has assessed against the incumbent vendor over the term of the current contract.

**None**

Are any of the facilities covered under the RFQ/RFP currently subject to any court orders or legal directives? If "yes" please provide copies of the order/directive.

**No.**

Please provide two years' worth of historical data describing the inmate population, broken down by gender.

**See attachment #4**

What is the average length of stay (ALOS) at the WVRJA facilities?

**See attachment #5**

What is the average length of stay (ALOS) at the DOC facilities covered under the RFQ/RFP?

**Authority unable to answer; DOC product unavailable at this time.**

Please list any WVRJA facilities that are NOT currently accredited by the National Commission on Correctional Health Care (NCCHC).

**There are none.**

For each WVRJA facility that is currently NCCHC accredited, please provide the renewal/next audit date.

**Central Regional Jail – 2010  
 Eastern Regional Jail - 2009  
 North Central Regional Jail – 2011  
 Northern Regional Jail & OCCC – 2009  
 Potomac Highland Regional Jail - 2011  
 South Central Regional Jail –2011  
 Southern Regional Jail –2010  
 Southwestern Regional Jail – 2009  
 Tygart Valley Regional Jail –2011  
 Western Regional Jail -2009**

Are any of the WVRJA facilities currently accredited by the American Correctional Association (ACA)? If "yes" please provide the renewal/next audit date for the facility.

**No WVRJA facility is currently accredited by the ACA however the DOC side of the Northern Regional Jail and Ohio County Correctional Center is.**

Is either the Northern Correctional Center or the Ohio County Correctional Center currently accredited by either the American Correctional Association (ACA) or the National Commission on Correctional Health Care (NCCHC)? If "yes" please provide the renewal/next audit date for the facility.

**Yes, see previous answer on NCCHC accreditation date for the RJA. DOC dates are a product of the DOC.**

Please provide current health service staffing schedules by facility, shift, and day of the week for each WVRJA and DOC facility covered under the RFQ/RFP.

**See CMS question/response and Attachment # 6.**

In the opinion of the WVRJA, are the current staffing levels at the facilities adequate?

**Yes.**

Does the WVRJA (and /or DOC) wish bidders to submit bids based on (a) the staffing currently in place at the facilities, (b) increased staffing, or (c) reduced staffing?

**Bid pursuant to the RFP.**

If (b) or (c), please indicate which positions the WVRJA (and/or DOC) would like to see increased/decreased.

**N/A**

Please provide a listing of the current health service vacancies by position for each WVRJA and DOC facility covered under the RFQ/RFP.

**Proprietary information.**

Are any members of the current health service workforce unionized? If yes, please provide the following;

- a. A copy of each union contract
- b. Complete contact information for a designated contact person at each union.

**No.**

Please provide current wage/pay/reimbursement/seniority rates for incumbent health service staff at the WVRJA and DOC facilities covered under the RFQ/RFP.

**Proprietary information.**

Please indicate how long (on average) it takes to complete the security and clearance process for new onsite staff.

**If you are referring to the Background checks conducted by the Authority, approximately 2 weeks.**

Please confirm that the time health services staff members spend in orientation, in-service training, and continuing education classes will count toward the hours required by contract.

**The Authority does not conduct orientation. This is a vendor concern.**

For each facility covered under the RFQ/RFP, please provide the capacity and average daily population of its segregation units.

**The Facilities do not have segregation units per say. Each facility Administrator has the option of utilizing a housing unit for special needs population. The constant fluctuation of inmates makes the question not possible to answer. However, it should be noted that each facility housing unit is alike except half are 8 cell sections and the other half are 16 cell sections. As additional information some cells have slider doors and some swing arm doors.**

Please provide an inventory of office equipment (e.g. PC's printers, fax machines, copiers) currently in use at the facilities covered under the RFQ/RFP and identify which equipment will be available for use by the selected provider.

**The inventory of equipment provided by the Authority is included as attachment #2 in the RFP.**

To ensure accurate pricing, please confirm that bidders can expect to have all of the items listed in RFP Attachment 2 (Medical Equipment) made available to them, at no charge, at each of the facilities covered under the RFP/RFQ.

**Confirmed.**

If there are any facilities where the Contractor will not be provided with all of the items listed in RFP Attachment 2 (Medical Equipment) at no charge, please list those facilities and indicate which equipment will not be made available.

**N/A**

How do health unit staff at the facilities covered under the RFQ/RFP currently access the Internet: through a facility network or through connectivity provided by the incumbent Contractor? Who is financially responsible for such Internet access?

**Vendor responsibility.**

Do any of the facilities covered under the RFQ/RFP currently utilize an Electronic Medical Record (EMR)? If so:

- a. Please provide more details, including software name, version, vendor, etc.
- b. Please indicate which facilities utilize the EMR
- c. Will the incoming vendor have access to and be permitted to use this EMR?
- d. Please describe the process that will occur to transition management of the existing EMR from the old health care provider to the new.

**Yes, see PHS question/response.**

Please identify which of the facilities covered under the RFQ/RFP currently have video-conferencing equipment and connection capabilities.

**All.**

Do any of the facilities covered under the RFQ/RFP currently utilize telemedicine technology? If so:

- a. Please provide a listing of the clinics currently conducted using telemedicine, and indicate how often they take place.

**Psychiatric only**

- b. Other than inmate health care, please describe any other ways in which the WVRJA utilizes the telemedicine equipment, and indicate how often these other uses take place.

**The equipment is the property of the WV Court System. Primarily used by Courts Parole Board. Telemedicine may be used when the courts do not occupy the equipment.**

- c. Please provide a detailed inventory of the telemedicine equipment and peripherals available at each facility.

**One at each facility**

- d. Please provide an inventory of the communications used in support of telemedicine (e.g., dedicated WAN, ISDN).

**Telephone; High speed internet over T1 lines.**

- e. Will the existing telemedicine equipment/communications capability be available for incoming contractor(s)? If so, who will be responsible for the ongoing operational costs?

**Yes, under the paragraph explained in question (b)**

- f. Will the WVRJA allow off-network connectivity for telemedicine?

**No.**

- g. Does any hospital or health care system currently connect into the existing telemedicine equipment? If so, please identify the entity, provide contact information, and describe the entity's current utilization.

**No.**

- h. Does the WVRJA have plans to expand the utilization of telemedicine equipment and connectivity to include purposes other than inmate health care, e.g., legal hearings, education, etc.?

**See response (b)**

Please identify the incumbent Contractor's current sub-contracted provider(s) of body cavity search services.



**The physician that is on contract at that particular facility.**

Please identify the incumbent Contractor's current sub-contracted provider(s) of laboratory services.

**This information is proprietary.**

How are radiology services currently provided: (a) onsite, with permanent WVRJA owned equipment; (b) onsite by mobile radiology vendor (PLEASE IDENTIFY VENDOR); or (c) offsite?

**Both b and c if necessary. Additional information is proprietary.**

Please identify any facilities covered under the RFQ/RFP that do not possess the resources/equipment/physical space to allow them to provide onsite dental services, and describe how dental services ARE provided.

**There are none.**

How are optometry services currently provided: (a) onsite, with permanent WVRJA owned equipment (b) onsite by mobile optometry (PLEASE IDENTIFY VENDOR); or (c) offsite?

**(c) offsite if necessary.**

How are dialysis services currently provided: a) onsite, with permanent WVRJA owned equipment (b) onsite by mobile dialysis (PLEASE IDENTIFY VENDOR); or (c) offsite?

**(c) Offsite.**

Who is financially responsible for providing dialysis services?

**Vendor up to catastrophic limits outlined in the RFP.**

For each facility covered under the RFQ/RFP, please provide the designated emergency or "911" hospital(s) for the site, as well as the most commonly used hospital(s)

**See attachment #3; Refer to similar PHS question/response**

For each facility covered under the RFQ/RFP, please provide any specialty clinics currently conducted onsite, and indicate how many hours per week each clinic is held.

**See attachments #1 and #2**

For each facility covered under the RFQ/RFP, please provide the following information:

- a. Does the site have special medical housing (observation unit, infirmary)?  
**There is a medical unit.**
- b. How many beds?  
**Some facilities have 4 cells, some have 6 cells; See question/response of other vendor**
- c. On average, how many inmates are housed in the Unit on a daily basis?  
**They remain full.**
- d. Is this unit classified as an infirmary?  
**No, it is a medical unit.**

For each facility covered under the RFQ/RFP, please provide the following information:

- a. Does the site have a mental health unit, or beds assigned to mental health patients?  
**None, except for the South Central Regional Jail Forensic Unit managed by the DHHR; See sections 3.2.3 A of the RFP**
- b. How many beds?  
**N/A**
- c. On average, how many inmates are housed in the Unit on a daily basis?  
**N/A**

With regard to Sharpe State Hospital and the requirements of Item 3.2.N.3 on Page 25 of the RFP:

- a. Which of the 12 facilities covered under the RFQ/RFP send inmates to Sharpe State Hospital?  
**Just the 10 WVRJA facilities send inmates to Sharpe State Hospital**
- b. Please provide two years' worth of historical data on the average monthly number of pre-trial inmates sent to the Sharpe State Hospital for restoration/stabilization.  
**This information is not available. It is done by Court Order from various State courts including Mental Hygiene commissioners, Circuit court Judges and Magistrates.**
- c. What is a pre-trial inmates' average length of stay at the Sharpe State Hospital?  
**Not available.**

Please provide the following information about medication administration;

- a. Who administers medications, e.g. RNs, LPNs, medical assistants?  
**Nurses, but no MA's**
- b. How are medications distributed, i.e., pill line, or med pass?  
**Med pass in housing unit.**
- c. Where does medications distribution take place, i.e. do medication carts go to the housing units or do the inmates come to medical units?  
**Med carts go to door of housing unit. Inmates are locked down and come out one at a time to receive meds at the section door.**
- d. How often is medication distributed each day?  
**Pursuant to doctors order; but generally twice per day.**

- e. How long does it take to perform the average medication distribution process?  
**Each facility is different by population; generally one hour per pod or less.**

How many medication carts will the WVRJA make available for use of the incoming vendor?

**Central Regional Jail – 1  
 Eastern Regional Jail – 2  
 North Central Regional jail – 2  
 Northern Regional Jail & Correctional Facility – 2  
 Ohio County Correctional Center – 1  
 Potomac Highland Regional Jail – 2  
 South Central regional Jail – 2  
 Southern Regional Jail – 2  
 Southwestern Regional Jail – 2  
 Tygart Valley Regional Jail – 2  
 Western Regional Jail - 2**

Does the WVRJA currently maintain a Keep-On-Person (KOP) program?

**Absolutely not; Never.**

Please provide copies of the following documents:

- a. The formulary currently in use at the WVRJA facilities.
- b. A current formulary management report.

**Proprietary information.**

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

**See attachments #1 and #2**

What is the average number of inmates receiving pharmaceutical treatment each month for the following conditions?

- a. Hemophilia
- b. Hepatitis C
- c. HIV/AIDS

**See attachments #1 and #2**

Please provide the monthly statistical data for each of the following categories:

- a. Number of inpatient offsite hospital days
- b. Number of outpatient surgeries

- c. Number of outpatient referrals
- d. Number of trips to the emergency department
- e. Number of ER referrals resulting in hospitalization
- f. Number of ambulance transports
- g. Average number per month of inmates undergoing dialysis treatments

**See attachments #1 and #2**

Please provide historical health services cost data broken out into at least the following categories:

- a. Total offsite care.
- b. Total pharmaceutical expenditures
- c. Laboratory services
- d. X-ray services

**See attachments #1 and #2**

Please confirm that the following costs will be included under the aggregate per inmate per illness/injury caps

- a. Inpatient hospitalization
- b. Outpatient surgeries
- c. Other outpatient referrals
- d. ER visits
- e. Ambulance services
- f. Dialysis
- g. Offsite diagnostics (lab/x-ray) and other ancillary services

**Yes to all the above.**

With regard to the aggregate per inmate per illness/injury caps:

- a. Please identify the amount of any cap(s) in the current contract.  
**Same as the current RFP.**
- b. For each of the past three (3) years, please indicate by how much (if at all) WVRJA offsite care expenses (and any other capped expenses) expenses have exceeded the contracted cap amount.  
**FY 2009 - \$891,782.51**

For offsite care expenses, does the WVRJA have access to, and pay, at the State Medicaid rate (like the DOC contract)?

**Yes.**

On average, how many Federal inmates are housed at each facility covered under the RFQ/RFP?

**Approximately 200 system wide.**

Item 3.2.4 C on Page 29 of the RFP states that "charges for federal inmates are the responsibility of the United States Marshal's office; and excess charges for state inmates are the responsibility of the Division of Corrections." However Item 3.2.4.G on Page 30 conflicts with this, stating State and Federal agencies are responsible of all non-routine inmate medical costs outside the facility (hospitalization and specialty consultations) after the catastrophic cap has been met."

- a. Please confirm that the Federal Agency is financially responsible/reimburses the contractor for ALL offsite care costs for federal inmates, not just after the cap(s) are reached.

**Confirmed; yes**

- b. Please confirm that the Federal Agency is financially responsible for pharmacy costs for federal inmates.

**Yes, except for over the counter routine items such as; aspirin, cold medicine, etc.**

Will the Cost Performance Index be the basis for the four 1-year extensions?

**The State of West Virginia is currently not allowing cost increases for contracts up for renewal based on the Consumer Price Index/Cost Performance Index, or any other % based publication(s). Any increase request may be considered, on a pass-through cost, at the time of renewal; no guarantees can be provided at this time.**

Does the same scope of work described in the RFP apply to the Northern Correctional Center and the Ohio County Correctional Center as well as to the Regional Jails?

**Yes.**

If no, please provide a detailed description of the scope of work to be performed by the successful vendor at the Northern Correctional Center and the Ohio County Correctional Center.

**N/A**

As the RFP/RFQ does not contain a separate pricing form for the forensic unit located adjacent to the South Central Regional Jail (SCRJ), does the WVRJA want bidders to include costs to provide staff and mental health services for this Unit included in the base price for the SCRJ?

**This is reimbursed through a Grant Agreement to pay for Services Rendered to the Vendor through the RJA.**

Attachment 1

Statistical Summary Report  
Year 2008

Facility: Master - Adult

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Monthly ADP	4013	3960	4009	4051	4139	4183	4310	4329	4315	4262	4122	4057	4116
Death	1	0	1	0	0	0	1	1	0	0	0	2	6
Inpatient Hosp	27	27	18	18	26	46	17	19	30	24	14	11	277
Total Patient Days	80	98	79	39	104	95	65.5	39.5	47	39	27	39	752
Outside Consultations	66	115	115	157	107	113	119	194	169	128	92	140	1641
Allergy	0	0	0	0	0	0	0	0	1	0	0	0	1
Cardiology	2	0	1	2	0	3	3	2	0	0	0	2	16
Chest Disease	0	0	0	0	0	0	0	0	0	0	0	0	0
Dermatology	2	0	0	0	0	0	0	0	0	0	0	0	2
Emergency Room	33	32	32	27	46	36	25	39	26	33	35	20	384
Ambulance Trips	20	15	16	7	11	7	9	10	11	5	6	8	125
Gastroenterology	0	0	0	0	1	1	0	0	0	3	1	1	7
General Medicine	3	2	5	7	2	2	3	29	8	5	5	8	79
General Surgery	5	4	2	5	6	3	5	5	3	2	2	2	44
Gynecology	0	1	0	0	1	1	1	0	4	1	1	3	13
Hematology/Oncology	1	1	0	1	3	1	15	17	10	5	2	2	58
Neurology	2	0	1	0	1	1	2	1	0	1	0	0	11
Neurosurgery	1	1	0	4	0	0	0	0	0	1	0	0	7
Obstetrics	22	13	27	24	38	21	19	27	18	18	27	19	273
Ophthalmology	20	17	18	19	17	9	15	20	21	14	7	17	194
Orthopedics	18	11	10	14	9	8	15	15	13	8	10	20	151
Physical Therapy	11	8	4	13	7	12	13	3	1	1	1	0	74
Plastic Surgery	4	2	6	2	1	2	3	1	2	0	0	7	30
Podiatry	0	2	0	0	1	1	1	1	0	1	1	1	8
Proctology	0	0	0	0	0	0	0	0	0	0	0	0	0
Psychiatry	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgery Performed	4	3	2	2	3	3	4	2	3	4	6	5	41
Thoracic Surgery	0	0	0	0	0	0	0	0	0	0	0	0	0
Urology	3	1	0	1	0	2	5	4	1	2	1	7	27
Outside X-Rays	8	7	2	4	2	3	8	6	9	3	9	6	67
Diagnostic Test (outside)	13	7	9	19	14	4	15	14	4	20	11	7	137
Other Trips	20	22	28	36	24	18	19	23	18	26	16	16	266

Attachment 1 con't

Statistical Summary Report  
Year 2008

Facility: <u>Master - Adult</u>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
In-House EKG's	211	222	229	181	202	193	189	173	172	204	144	142	2267
In-House X-Ray's	270	269	297	297	223	304	248	283	244	285	217	209	3146
MD/PA/CRNP Sick Call	366	366	366	366	366	366	366	366	366	366	366	366	4398
Nurse Sick Call	5142	4659	4851	4301	4955	4293	4826	4647	5483	5296	5519	5099	59077
MD Physicals	9	11	14	37	6	14	16	7	8	9	10	290	491
NP/PA Physicals	391	449	446	459	532	452	474	591	474	404	345	428	5743
Nursing Physicals	581	664	573	508	525	489	523	411	691	699	408	488	6569
Annual Physicals	44	48	65	72	89	90	79	57	114	86	86	79	939
Psychiatrist / Group Seen	0	0	0	0	0	0	0	0	0	0	0	0	0
Psychiatrist / Indiv. Seen	653	642	572	629	636	551	715	685	732	768	613	749	7945
Psychologist Group	0	0	0	0	0	0	0	0	0	0	0	0	0
Psychologist Indiv. Seen	578	549	554	572	519	614	629	587	603	598	526	619	6948
M.H. Worker Groups	0	0	0	0	0	0	0	0	0	0	0	0	0
M.H. Worker Indiv. Seen	72	48	46	72	80	70	60	52	65	77	75	88	805
Involuntary M.H. Commitments	2	4	3	2	3	2	3	0	0	1	4	2	28
Inmates Seen by Dentist	350	392	388	583	692	572	643	589	741	722	641	716	7859
Extractions	125	222	168	149	185	149	169	220	201	199	176	185	2148
Fillings	107	125	88	95	108	96	86	121	158	137	128	132	1361
Exams	250	373	267	286	299	265	241	284	297	336	255	276	3426
Other	68	72	115	53	100	62	47	44	85	50	82	123	904
Inmates seen by Oral Surgeon	1	1	3	6	7	1	3	4	2	2	1	1	21
In-House Surgeries	2	1	5	3	1	1	2	2	1	1	0	3	21
# Inmates @ in-house clinics	529	367	448	379	373	363	463	455	443	428	349	352	4949
# Intake Screening	3816	3603	4038	4014	4136	3928	3941	3789	3903	3827	3289	3399	45683

Statistical Summary Report  
Year 2008

Facility: **Master - Adult**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
<b>Pharmacy</b>	2054	1945	2051	1937	2157	2259	2200	2326	2246	2220	2224	2088	25797
# of patients on Medical Meds	29.3%	29.0%	29.0%	26.3%	29.9%	31.1%	28.1%	30.0%	29.6%	30.0%	31.1%	28.5%	29.3%
% ADP on Medical Meds	5	5	8	6	6	4	9	8	9	9	9	7	85
# of patients on HIV Meds	0.1%	0.1%	0.2%	0.1%	0.1%	0.1%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.1%
% ADP on HIV Meds	1002	1065	1109	1087	1197	1278	1219	1317	1306	1269	1284	1235	14368
# of patients on Psych Meds	21.5%	25.3%	26.1%	25.2%	27.2%	28.0%	26.3%	28.5%	28.7%	28.4%	28.5%	29.0%	27.3%
% ADP on Psych Meds	1733	1591	1604	1532	1669	1757	1757	1814	1882	1670	1645	1662	20336
# of patients on OTC Meds	146.9%	136.5%	137.1%	135.0%	139.0%	142.1%	138.6%	139.2%	141.0%	137.2%	138.1%	139.2%	138.7%
% ADP on OTC Meds	1392	1406	1383	1342	1481	1571	1605	1586	1683	1609	1565	1494	18117
# of patients on Multiple Meds	33.8%	34.0%	32.8%	31.4%	32.7%	34.2%	34.9%	37.0%	35.5%	34.6%	34.1%	33.2%	33.7%
% ADP on Multiple Meds	1493	1783	1658	1374	1563	1859	1902	1812	1953	1781	1860	1629	20667
# of patients on all Prescription and OTC Meds	34.1%	40.3%	36.9%	30.5%	33.5%	40.1%	41.1%	37.2%	40.1%	36.4%	39.3%	34.6%	37.1%
% ADP on all Prescription and OTC Meds	41	47	40	50	36	48	56	68	97	117	68	43	711
HIV Test Done	5	7	7	11	12	8	12	10	10	10	10	12	116
HIV Cases	0	0	1	1	0	0	1	1	4	1	1	1	11
AIDS Cases	183	158	197	182	221	232	182	196	218	209	205	210	2393
Hepatitis Cases	0	0	0	0	0	0	1	0	0	0	0	0	1
Syphilis Cases	1	1	1	3	3	1	3	1	1	0	0	4	18
Gonorrhea Cases	16	28	27	24	39	27	15	24	25	22	19	16	282
# of pregnant females	66	71	59	85	71	71	61	60	59	76	57	52	788
# of patients isolated to rule out MRSA	44	47	33	31	39	42	30	28	40	46	18	15	413
# of confirmed MRSA cases	0	0	0	0	0	0	2	0	0	0	0	0	3
TB Cases	2679	2449	2778	2673	2723	2642	2643	2677	2822	2530	2198	2369	31183
PPD Test	42	10	9	6	12	6	5	6	6	9	11	7	129
(+) PPD's	145	84	135	126	151	142	157	106	152	133	103	113	1547
RPR Test	302	210	237	207	212	234	223	256	284	317	225	291	2998
Inmates on Suicide Watch	26	27	19	18	26	19	23	22	26	25	24	22	277
# of Inmates on Restraints	21	24	14	14	23	22	18	18	24	20	18	30	246
# of Shifts involving Restraints	170	129	150	169	156	151	159	212	182	134	128	156	1896
# of Medical Transport													



Attachment 2

Statistical Summary Report  
Year 2007

Facility: Master - Adult

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Monthly ADP	4476	4423	4312	4310	4290	4272	4254	4324	4149	4153	4113	4019	4238
Death	1	0	0	0	0	1	0	1	1	0	0	0	4
Inpatient Hosp	15	12	9	12	21	13	26	26	16	29	23	36	238
Total Patient Days	28	52	26	40	58	71	83	69	65	110	83	95	780
Outside Consultations	155	142	139	132	141	135	144	132	177	181	169	186	1861
Allergy	0	0	0	0	0	0	1	0	0	0	0	1	2
Cardiology	1	0	1	0	1	2	1	0	1	4	5	3	19
Chest Disease	0	2	0	2	0	0	0	1	0	0	0	0	5
Dermatology	1	2	3	0	0	1	1	5	1	2	3	2	21
Emergency Room	25	21	28	19	31	24	26	29	41	44	28	40	356
Ambulance Trips	10	8	7	12	17	7	16	21	20	21	17	17	173
Gastroenterology	2	3	2	0	0	1	0	1	0	4	3	0	16
General Medicine	5	1	0	2	0	11	3	6	9	3	7	2	69
General Surgery	4	6	4	1	5	5	5	7	7	6	5	3	58
Gynecology	2	5	2	1	2	0	1	3	1	0	2	0	19
Hematology/Oncology	3	0	0	0	1	0	8	1	0	1	0	1	15
Neurology	1	2	2	0	0	2	0	0	0	4	0	0	11
Neurosurgery	0	0	1	0	0	0	1	3	2	2	2	1	12
Obstetrics	25	19	22	24	18	16	22	26	31	20	15	23	261
Ophthalmology	19	14	15	11	17	20	17	19	5	14	15	28	194
Orthopedics	14	11	8	9	8	9	5	14	16	19	22	15	150
Physical Therapy	1	4	1	4	2	3	0	1	0	0	4	10	50
Plastic Surgery	0	0	0	2	4	5	3	4	3	3	7	6	57
Podiatry	0	0	0	3	1	2	0	0	0	1	1	0	16
Proctology	0	0	0	0	1	0	0	0	0	0	0	0	1
Psychiatry	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgery Performed	7	9	2	4	6	5	6	3	6	5	8	5	68
Thoracic Surgery	1	1	1	0	0	0	0	0	0	0	0	0	3
Urology	4	5	3	2	2	1	5	1	1	1	3	0	28
Outside X-Rays	5	3	2	2	3	2	7	5	12	7	5	8	61
Diagnostic Test (outside)	14	17	8	19	13	14	12	22	15	15	13	15	177
Other Trips	9	9	19	15	9	5	4	10	6	5	4	6	101

Statistical Summary Report  
Year 2007

Facility: Master - Adult

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
In-House EKG's	149	123	189	132	175	162	163	143	174	228	201	197	2308
In-House X-Ray's	311	311	336	327	300	287	321	288	245	311	235	244	3516
MD/PA/CRNP Sick Call	289	146	128	146	121	139	152	130	178	156	130	194	1697
Nurse Sick Call	5080	4801	5300	4876	4507	4610	5381	4752	4989	5278	5063	4650	59287
MD Physicals	32	14	49	23	21	7	13	16	5	9	3	5	197
NP/PA Physicals	67	90	84	131	191	106	135	139	95	113	105	249	1505
Nursing Physicals	656	575	588	629	644	842	821	899	989	849	623	611	8726
Annual Physicals	74	64	64	70	106	80	72	123	110	88	69	36	958
Psychiatrist / Group Seen	0	0	0	0	0	0	0	0	0	0	0	0	0
Psychiatrist / indiv. Seen	845	720	843	707	738	782	635	879	722	800	674	537	8882
Psychologist Group	5	5	12	8	4	5	5	5	5	0	0	0	54
Psychologist indiv. Seen	564	508	614	516	586	522	532	565	554	516	448	504	6429
M.H. Worker Groups	0	0	0	0	0	0	0	0	0	0	0	0	0
M.H. Worker indiv. Seen	56	72	52	35	42	42	41	26	35	61	34	46	542
Involuntary M.H. Commitments	0	0	3	2	4	2	0	4	2	0	1	2	20
Inmates Seen by Dentist	920	810	869	897	901	752	705	849	1011	866	718	992	9888
Extractions	240	162	164	187	174	137	173	204	256	216	155	111	2179
Fillings	136	107	139	128	123	123	119	118	167	137	171	135	1693
Exams	455	466	485	506	448	389	400	453	518	424	305	299	3148
Other	89	75	81	76	156	103	13	74	70	89	85	47	958
Inmates seen by Oral Surgeon	3	4	6	4	3	4	0	3	4	3	2	4	40
In-House Surgeries	2	1	1	4	0	3	4	1	1	0	2	0	19
# Inmates @ in-house clinics	472	439	389	424	485	405	353	265	301	420	300	331	4584
# Intake Screening	3985	3295	4100	3934	4044	3991	4015	4372	3988	3887	3496	3478	46885

Statistical Summary Report  
Year 2007

Facility: <u>Master - Adult</u>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Pharmacy	1939	1798	1822	1859	1924	1784	1772	1892	1999	1973	1936	1906	22593
# of patients on Medical Meds	45.5%	41.8%	43.1%	42.9%	44.0%	42.6%	41.5%	45.4%	47.6%	47.6%	46.7%	46.7%	47.4%
% ADP on Medical Meds	14	12	12	12	15	12	9	10	12	11	9	8	136
# of patients on HIV Meds	0.2%	0.2%	0.2%	0.2%	0.3%	0.2%	0.2%	0.3%	0.3%	0.2%	0.2%	0.2%	6.7%
% ADP on HIV Meds	935	930	1032	965	1007	936	881	961	1030	989	1041	994	1701
# of patients on Psych Meds	21.6%	21.3%	23.7%	22.7%	24.2%	22.2%	21.3%	23.1%	25.1%	23.7%	27.1%	25.0%	23.4%
% ADP on Psych Meds	1665	1650	1727	1658	1571	1526	1533	1547	1683	1734	1711	1714	19319
# of patients on OTC Meds	38.0%	37.0%	39.4%	37.4%	35.9%	34.9%	34.1%	34.4%	33.1%	32.3%	31.2%	31.5%	37.8%
% ADP on OTC Meds	1399	1407	1474	1413	1522	1352	1333	1428	1542	1379	1664	1331	1244
# of patients on Multiple Meds	29.2%	30.9%	32.7%	31.4%	33.3%	29.9%	29.7%	32.0%	35.6%	31.3%	39.1%	33.3%	32.4%
% ADP on Multiple Meds	1715	1731	1717	1729	1634	1511	1558	1603	1634	1518	1557	1297	19204
# of patients on all Prescription and OTC Meds	38.0%	37.7%	37.8%	37.6%	35.6%	34.0%	34.1%	35.0%	37.0%	33.6%	36.3%	31.4%	35.6%
% ADP on all Prescription and OTC Meds	39	33	55	51	31	33	27	49	35	74	43	49	519
HIV Test Done	17	18	16	14	21	17	12	14	20	18	8	7	132
HIV Cases	3	2	2	2	2	2	1	1	1	1	1	0	18
AIDS Cases	212	245	234	236	290	229	251	224	205	218	167	158	2669
Hepatitis Cases	0	0	0	0	0	1	0	0	0	0	0	0	3
Syphilis Cases	2	0	2	1	1	1	0	2	3	1	5	4	22
Gonorrhea Cases	16	24	19	25	33	20	29	29	26	15	17	24	272
# of pregnant females	45	52	41	45	52	54	48	70	79	62	68	68	684
# of patients isolated to rule out MRSA	34	39	33	43	49	38	46	49	48	29	47	45	500
# of confirmed MRSA cases	1	0	0	0	0	0	0	1	1	1	0	0	14
TB Cases	2516	2080	2528	2477	2616	2582	2702	2967	2680	2611	2406	2303	30168
PPD Test	3	6	7	9	25	9	4	20	12	1	158	7	61
(+) PPD's	191	143	187	170	197	162	127	156	170	152	145	130	1930
RPR Test	142	115	187	207	220	257	427	265	344	323	262	252	3007
Inmates on Suicide Watch	24	25	57	41	38	45	32	38	31	22	27	15	388
# of Inmates on Restraints	40	20	47	28	42	45	31	31	25	18	21	11	359
# of Shifts involving Restraints	139	164	145	144	134	147	150	155	148	165	148	165	1804
# of Medical Transport													

HOSPITALS THAT PRIME CARE MEDICAL USES 2009

FACILITY	HOSPITAL	HOSPITAL	HOSPITAL	HOSPITAL	HOSPITAL
#9 Eastern Regional	City Hospital	Jefferson Memorial			Grant Hospital
#10 Central Regional	Beckley ARH	Braxton County Memorial	Cabell Huntington		Raleigh General Summersville Memorial
#12 Southern Regional	Beckley ARH	Cabell Huntington		Raleigh General	
#13 South Central Regional	Charleston Area Hospital	St Francis' Hospital		Thomas Memorial Hospital	
#15 Northern Regional	Ohio Valley Medical Center	Reynolds Memorial		Wheeling Hospital	WVU Hospital
#27 South Western Regional	Cabell Huntington	Charleston Area Hospital		Logan Regional Med Center	Thomas Memorial
#28 Ohio County Jail	Ohio Valley Medical Center				
#33 Potomac Regional	Grant Memorial	Hampshire Memorial Hospital		Jefferson Memorial Hospital	
#38 North Central Regional	Camden Clark Memorial	St Joseph's Hospital		United Hospital Center	WVU Hospital
#44 Western Regional	St Mary Medical				
#59 Tygart Valley Regional	Davis Hospital				

West Virginia Regional Jail and Correctional Facility Authority

AVERAGE YEARLY INSTITUTIONAL INMATE POPULATION REPORT

*Calendar Year 2008*

REGIONAL JAIL FACILITY	DIVISION OF CORRECTIONS INMATES		FEDERAL INMATES		MISDEMEANOR PRE-TRIAL		MISDEMEANOR SENTENCED		PRE-TRIAL FELON		CONVICTED FELON		AVERAGE DAILY TOTAL	ORIGINAL DESIGN	EXCESS OF ORIGINAL DESIGN	BUNKS ADDED	EXCESS OF TOTAL BEDS
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females					
Central	106	5	13	3	14	3	27	5	52	6	17	3	254	192	62	30	32
Eastern	40	7	37	4	47	8	65	7	137	12	12	3	379	288	91	0	91
North Central	118	10	12	3	43	7	63	10	161	19	81	11	518	384	134	0	134
Northern	68	14	26	2	30	6	30	2	93	11	9	2	293	192	101	31	70
Potomac Highlands	106	13	0	0	25	3	19	3	57	5	7	2	240	192	48	0	48
South Central	93	10	54	5	49	10	27	6	131	16	43	8	451	288	163	84	79
Southern	81	14	23	3	49	7	36	3	180	35	17	6	465	288	177	64	173
Southwestern	119	12	0	0	30	7	37	6	128	20	11	2	372	288	84	0	84
Tygart Valley	167	18	6	1	28	6	30	6	66	11	8	2	346	288	58	0	58
Western	167	20	0	0	35	7	56	7	145	23	33	8	501	384	117	0	117
<b>TOTAL</b>	<b>1065</b>	<b>123</b>	<b>177</b>	<b>21</b>	<b>347</b>	<b>64</b>	<b>390</b>	<b>60</b>	<b>1150</b>	<b>157</b>	<b>218</b>	<b>47</b>	<b>3819</b>	<b>2784</b>	<b>1035</b>	<b>209</b>	<b>826</b>
Total Combined Males and Females	1188		198		411		450		1307		265						

West Virginia Regional Jail and Correctional Facility Authority

AVERAGE YEARLY INSTITUTIONAL INMATE POPULATION REPORT

Calendar Year 2009 (January - June)

REGIONAL JAIL FACILITY	DIVISION OF CORRECTIONS INMATES		FEDERAL INMATES		MISDEMEANOR PRE-TRIAL		MISDEMEANOR SENTENCED		PRE-TRIAL FELON		CONVICTED FELON		AVERAGE DAILY TOTAL	ORIGINAL DESIGN	EXCESS OF ORIGINAL DESIGN	BUNKS ADDED		EXCESS OF TOTAL BEDS
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females				prior to 2009	since 2009	
Central	106	15	9	4	18	2	24	6	55	7	17	5	268	192	76	30	0	46
Eastern	60	12	36	3	35	6	52	6	135	15	15	4	379	288	91	0	0	91
North Central	101	12	12	3	41	5	65	8	160	14	57	12	490	384	106	0	0	56
Northern	87	20	16	0	26	4	27	3	99	14	7	1	303	192	111	31	50	30
Potomac Highlands	119	12	0	0	18	2	19	4	58	8	9	1	250	192	58	0	0	58
South Central	80	14	55	9	46	7	22	4	133	17	50	9	446	288	158	84	50	24
Southern	94	12	20	4	56	7	38	6	192	37	15	6	487	288	199	64	50	85
Southwestern	117	15	0	0	34	8	31	8	136	36	21	4	410	288	122	0	0	122
Tygart Valley	181	20	5	1	19	4	31	6	74	14	6	1	362	288	74	0	0	74
Western	190	18	0	0	36	7	53	7	162	21	36	9	539	384	155	0	0	155
<b>TOTAL</b>	<b>1135</b>	<b>150</b>	<b>153</b>	<b>24</b>	<b>328</b>	<b>52</b>	<b>362</b>	<b>58</b>	<b>1204</b>	<b>183</b>	<b>233</b>	<b>52</b>	<b>3934</b>	<b>2784</b>	<b>1150</b>	<b>209</b>	<b>200</b>	<b>741</b>
Total Combined Males and Females	1285	177	380	420	1387	285												

## Attachment 5

WV Regional Jail and Correctional Facility Authority
<b>Average Length of Inmate Stay (Days)</b>

***Fiscal Years 2004 - 2009***

Facility	Average Days
Central Regional Jail	39
Eastern Regional Jail	23
North Central Regional Jail	28
Northern Regional Jail	27
Potomac Highlands Regional Jail	43
South Central Regional Jail	22
Southern Regional Jail	25
Southwestern Regional Jail	34
Tygart Valley Regional Jail	49
Western Regional Jail	25
<b>TOTAL</b>	<b>31.5</b>

Attachment 6

West Virginia Regional Jail Authority - PrimeCare Medical of West Virginia, Inc Medical Staffing (2009)  
Total Hours / Facility

POSITION	WV Regional Office	ERJ	CRJ	SRJ	SCRJ	SCRJ (Fot)	NRJ & CF	SWRJ	OCCC	PHRJ	NGRJ	WRJ	TYRJ	TOTAL
1. Vice President of WV Operations	40													40
2. Junior Vice President of WV Operations	40													40
3. Two (2) Regional Managers	80													80
4. Medical Director of WV	40													40
5. X-Ray Technicians	40													40
6. Corporate Medical Director	25													25
7. Legal Counsel for WV	30													30
8. Three (3) WV Law Firms	25													25
9. Risk Manager for WV	15													15
10. QA - QI Committee	10													10
11. Human Resources for WV	15													15
12. Recruiter for WV	40													40
13. Computer - Information Technology	10													10
14. Accounts Payable Personnel	15													15
15. Accounts Receivable Personnel	40													40
16. Payroll Clerk for WV	15													15
17. Medical Director (Physician)		10	7	11	10	FRN	14	10	2	7	11	13	10	105
18. Contract Administrator		40	40	40	40	40	40	40	40	40	40	40	40	480
19. Physician Assistant / Nurse Practitioner		2	14	7	24	PRN	6	11	PRN	2	15	6	FRN	87
20. Registered Nurse		40	40	40	40	0	80	40	0	40	40	40	40	440
21. Licensed Practical Nurse		372	240	352	388	16	308	280	140	224	380	320	240	3210
22. Medical Assistant		72	40	112	120	0	40	64	0	16	88	160	60	772
23. Dentist		6	4	6	6	PRN	10	6	NRJ	4	8	10	6	66
24. Psychiatrist		2	2	6	4	2	4	4	NRJ	2	4	4	4	38
25. Psychologist		4	4	6	6	10	8	4	2	4	8	8	4	68
26. Clerical / Support Staff		0	0	0	0	0	40	0	0	20	40	0	40	140
27. Activity Technician		0	0	0	0	84	0	0	0	0	0	0	0	84
28. Mental Health Worker		0	0	0	0	112	0	0	0	0	0	0	0	112
<b>TOTAL HOURS / FACILITY</b>	<b>480</b>	<b>488</b>	<b>381</b>	<b>580</b>	<b>638</b>	<b>244</b>	<b>550</b>	<b>459</b>	<b>184</b>	<b>359</b>	<b>644</b>	<b>601</b>	<b>444</b>	<b>4062</b>

\*Information is in Total # of Hours Worked Per Position

PRN = As needed / NRJ = Medical services provided at NRJ&CF

\*\*Current PrimeCare Medical of West Virginia, Inc. Vacancies: ERJ - 1 FT LPN (3rd Shift); NRJ - 1 FT LPN (2nd Shift); SWRJ - 1 FT HSA (currently being covered by Regional Coordinator); WRJ - 1 FT LPN (2nd Shift) - Recruiting Efforts On-Going for All Staff Vacancies.



## Attachment 7

## WV Regional Jail and Correctional Facility Authority

## Suicide and Suicide Attempts

**Fiscal Year 09**

Facility	Attempted Suicide	Suicide
Central Regional Jail	2	1
Eastern Regional Jail	2	0
North Central Regional Jail	11	0
Northern Regional Jail	1	1
Potomac Highlands Regional Jail	2	0
South Central Regional Jail	16	0
Southern Regional Jail	0	0
Southwestern Regional Jail	0	0
Tygart Valley Regional Jail	0	0
Western Regional Jail	0	1
<b>TOTAL</b>	<b>34</b>	<b>3</b>