



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

Solicitation

NUMBER
COR61566

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
TARA LYLE 304-558-2544

RFQ COPY
TYPE NAME/ADDRESS HERE

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DIVISION OF CORRECTIONS

1409 GREENBRIER ST

CHARLESTON, WV
25311

304-558-8045

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DATE PRINTED
07/24/2014

BID OPENING DATE: 08/05/2014

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 15						
SEE ATTACHED PAGES.						
END OF ADDENDUM NO. 15						
0001	1	LS		948-74		
PROFESSIONAL MEDICAL SERVICES						
***** THIS IS THE END OF RFQ COR61566 ***** TOTAL:						

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE

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

SOLICITATION NUMBER: COR61566

Addendum Number: 15

The purpose of this addendum is to modify the solicitation identified as COR61566 ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

- ☒ [X] Modify bid opening date and time
- ☐ [] Modify specifications of product or service being sought
- ☒ [X] Attachment of vendor questions and responses
- ☐ [] Attachment of pre-bid sign-in sheet
- ☐ [] Correction of error
- ☒ [X] Other

Description of Modification to Solicitation:

1. Vendor response from questions (July 10, 2014 and July 21, 2014 deadlines) attached.
2. The bid opening has moved from 07/30/2014 to 08/05/2014. The bid opening time remains at 1:30 pm.
3. Exhibits A through D attached.
4. Attachment C-1, cost sheet for the Northern Regional Jail attached.

Vendors must complete Attachment C – Cost Sheet revised on Addendum No. 12 and Attachment C-1 – Cost Sheet issued with this addendum. Both cost sheets must be submitted and placed in a separate sealed envelope as described in Section Five, Vendor Proposal, of the RFP. The total for both cost sheets, Attachment C and Attachment C-1, will be added together in order to arrive at a grand total price. A grand total price will be used to access cost proposal point.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A**Questions from July 10, 2014 deadline:**

1. Please clarify that staffing at OCCC, NCC and NRJ include 24/7 staffing coverage. If not, please clarify the hours of coverage provided.

A1. All facilities are staffed 24/7/365.

2. Medical observation unit at NRJ – please clarify if this unit is, by NCCHC guidelines, defined as an infirmary.

A2. This facility does not have an infirmary.

3. Please provided the scope of services provided in the NRJ medical observation unit routinely, i.e., wound care, IV, etc.

A3. Inmates housed in the medical observation unit may have issues or needs related to wound care, IV's, C-Pap machines, post-op procedures, casts/splints, oxygen use, etc.

4. Regarding the complaint procedure at NJR, please clarify why complaints related to onsite service delivery are referred to a “utilization review committee” as opposed to not being handled through review, oversight, response by onsite health services clinical and administrative management? Was this meant to be complaint procedure related to specialty care services only?

A4. Complaints related to onsite services delivery are reviewed by the health service administrator according to the Agency policies.

5. Has the DOC extended the contract with the current vendor during this procurement? If so, will the Division please provide a copy of the contract amendment?

A5. Yes, the contract is extended through July 31, 2014. See Exhibit A.

6. Pursuant to Page 53, Section 6 – Experience of the above referenced RFP, the “Primary Vendor must have a minimum of five (5) years previous experience with proven effectiveness in administering a correctional health care program in a single state prison system housing adult offenders, with multiple facilities and an inmate population of 5,000 sentenced offenders or more”

Additionally, pursuant to Addendum 8 of said RFP, issued May 2, 2014, Question #88 states “Since the Department’s last procurement for inmate healthcare services in 2007, there have been several changes to the landscape of correctional healthcare companies, such as mergers, acquisitions, and joint ventures, resulting in new companies being incorporated in the past five years. In instances where the Primary Vendor is a newly incorporated company formed by one or more companies that otherwise meet the five

year experience requirement, will the Department allow the experience of the parent and/or partner companies to a newly formed entity (i.e. merger, joint venture, partnership, etc.) to count towards meeting the five-year experience requirement?" The Department's response to this question states "Vendor should provide details of such instances if key officers and/or executive staff meet or exceed the previous requirement."

PrimeCare Medical of West Virginia, Inc.'s request for clarification: As is a customary experience requirement in typical RFP's, would a vendor possessing a minimum of five (5) years previous experience with proven effectiveness in administering a correctional health care program in a single statewide correctional system housing adult offenders, with multiple facilities comparable in size to that of the WVDOC and/or a vendor possession such experience in various other correctional settings comparable in size to those facilities under the control of the WVDOC, meet the experience requirements of this RFP?

A6. Yes, this will meet the Agency's requirement. The vendor must have at least 5 years' experience in a correctional-type facility, single state, comparable in size to Agency's facilities.

7. Do all of the Regional Jail Authority locations have video teleconferencing equipment for the purposes of conducting the mental health appraisals? Please provide a listing of the equipment available, by regional jail facility.

A7. Yes, all RJA facilities have video teleconferencing equipment.

8. What population(s) statistical information is included on pages 78 – 86? Is this the sum of regional jail, DOC and Federal inmates? Or is this summary regional jail inmates only?

A8. Population may include all of the above. No breakdown is available.

9. Please clarify how many federal inmates are housed in the North Regional Jail and Correctional Facility for each of the three years 2011 – 2013. Please provide statistical information for just the Federal inmates housed at this location.

A9. 2011 – 16, 2012 – 19, 2013 – 28. There is not a breakdown available for only federal inmates of statistical information.

10. Please provide 3 years of statistical information for just the DOC inmates housed at the Northern Correctional Facility.

A10. The statistical information provided is combined NRJ and DOC inmates. No breakdowns are available.

11. Page 12 references Northern Correctional Center and page 20 references Northern Regional Jail and Correctional Facility. Please confirm that the Correctional Center and Correctional Facility are one in the same.

A11. Northern Regional Jail & Correctional Facility is the name of the facility/building. Northern Regional Jail (NRJ) equals jail inmates. Northern Correctional Center/Facility (NCC) equals WVDOC inmates.

12. As previously noted in Addendum #8, the recommended MOCC staffing plan does not include enough RN staff to meet the requirements of 5.2.1.6.9 for daily coverage in the infirmary. Please confirm that the proposed 2.0 FTE RN is sufficient to meet the DOC's requirements.

A12. Please refer to the staffing sheet. There are RN's in various capacities on the staffing sheet. For example, DON, ADON, Charge RN, and RN.

13. In accordance with Addendum #12, page 20, the vendor will be responsible for providing health and mental health services to regional inmates housed in the North Regional Jail. The revised cost sheet does not include a section to itemize costs required for these regional jail inmates. Please provide an additional form for this information or clarify how vendors should provide this information in our response.

A13. See Attachment C-1, Cost Sheet for Northern Regional Jail.

Vendors must complete Attachment C – Cost Sheet revised on Addendum No. 12 and Attachment C-1 – Cost Sheet issued with this addendum. Both cost sheets must be submitted and placed in a separate sealed envelope as described in Section Five, Vendor Proposal, of the RFP. The total for both cost sheets, Attachment C and Attachment C-1, will be added together in order to arrive at a grand total price. A grand total price will be used to access cost proposal point.

14. Please further describe the vendor's role in implementation of the ACA/Medicaid Expansion. Who is responsible for the enrollment process – the vendor or the WV DOC? How many employees are currently handling this function?

A14. The Agency is still working through the process, but currently only WVDOC staff is involved in implementation of Medicaid Expansion. Assistance from the vendor may be required at a future date.

15. If ACA/Medicaid Expansion has not been implemented, please provide a timeline on when this is anticipated to occur. Please identify the expected number of resources for the process and who will be responsible for providing those resources.

A15. Agency has already implemented.

16. Please provide the # of inmates that have been successfully enrolled in Medicaid since January 2014.

A16. 63

17. Please provide the # inpatient stays, by month, that have been paid by Medicaid as a result of the expansion enrollment.

A17. No bills have been paid yet, as applications have just now been processed by DHHR.

18. Will the state be providing an opportunity to tour the recently added jail facilities?

A18. Optional site visits were held on July 21, 2014. A copy of the sign-in is attached. See Exhibit B.

19. *RFP Addendum #12 (issued July 2, 2014)* refers to the Northern Correctional Center, Northern Regional Jail, and Northern Correctional Facility. Are these names interchangeable? If not, can the DOC please clarify 1) the components of this addition to the scope of services and 2) the name(s) we should utilize in identifying each component?

A19. Northern Regional Jail and Correctional Facility refer to the building that houses WVDOC inmates and Regional Jail inmates. Northern Correctional Center refers to the WVDOC inmates. Northern Regional Jail refers to the Regional Jail inmates. Yes, Northern Correctional Center and Northern Correctional Facility are interchangeable terms.

20. We understand that *RFP Addendum #12* adds Northern Correctional Center/Northern Regional Jail (NCC/NRJ) to the scope of work for all bidders, and it appears that Ohio County Correctional Center (OCCC) is to be added also but we do not see any information provided on the OCCC similar to those details provided on the NCC/NRJ starting on *page 20*. Can the DOC please provide more information on the OCCC for all bidders?

A20. OCCC is located at 1501 Eoff Street, Wheeling, WV. It is a 64-bed unit that houses all WVDOC inmates. It is located approximately 20 minutes north of the NRJ/NCC facility. The inmates assigned to this center participate in community work programs.

21. We appreciate the equipment list that was provided for NCC/NRJ but do not see an equipment list for OCCC. Can the DOC please provide an equipment list for OCCC for all bidders?

A21. Equipment list is attached, See Exhibit B.

22. Please confirm the population that each vendor should use to bid on the OCCC and NCC/NRJ, respectively.

A22. NRJ – 300, NCC – 250, OCCC - 64

23. Do the OCCC and the Northern Regional Jail currently utilize an electronic medical record (EMR)? If yes, please provide the name of the EMR. Is the EMR the property of the DOC, RJA, or the incumbent provider?

A23. An EMR is used at NRJ/NCC, CorEMR. The EMR is owned and operated by the incumbent provider. No EMR is used at OCCC

24. Please provide the following information for each site (OCCC and NCC/NRJ), respectively.

- a. The current contract's annualized value.

Current contract is \$1,903,832.16

- b. The amounts of any annual increases by year.

No increases to date

- c. The total pharmaceutical spend for 2013.

Agency does not have this information. Current incumbent advised this is proprietary information.

- d. The current per diem rate per inmate over the base ADP

\$6.99 per inmate

25. Please confirm if any of the services provided in the current vendor's contract for the OCCC and NCC/NRJ are not included in *RFP Addendum #12*.

A25. Agency does not have the RJA current contract. We have supplied specifications for the NRJ inmates that were supplied by the Regional Jail Authority for this RFP. All inmates at NCC and OCCC shall be supplied medical and mental health care in accordance with this RFP and all subsequent addenda.

26. What is the amount of medication that an inmate is to receive upon discharge (transfer or paroled) from the OCCC and NCC/NRJ?

A26. All inmates at OCCC and NCC will receive medication in accordance with procedures outlined in the RFP/addenda. Inmates at NRJ typically receive a three-day supply. Federal detainees receive a seven to ten day supply.

27. On average, how many inmates require this supply of medication upon discharge from the OCCC and NCC/NRJ each month?

A27. Agency does not have this information. Current provider advised this is proprietary information.

28. Please provide a detailed report of all individual treatments for inmates at the OCCC and NCC/NRJ that exceeded the \$5,000 catastrophic cap limit for the past three (3) years.

A28. Information is not available.

29. Please provide the total number of patients who exceeded the \$5,000 catastrophic cap in 2012 and 2013, respectively.

A29. 2012 – 16 inmates exceeded the cap. 2013 – 20 inmates exceeded the cap.

30. Please provide the amounts billed to the DOC and/or RJA over the cap for the OCCC and NCC/NRJ.

A30. 2012 – Total invoiced \$86,127.20. 2013 – Total invoiced \$95,558.14

31. Please provide the total cost of off-site medical payments for all inmate patients at the OCCC and NCC/NRJ in 2012 and 2013.

A31. Agency does not have this information. Current provider advised this is proprietary information.

32. What phone services are available to the incoming vendor at the OCCC and NCC/NRJ? Also, who is financially responsible for the charges associated with line usage?

A32. The Agency will provide the phone services at these facilities as we do at all other facilities.

33. Is the incumbent provider utilizing the DOC's or Regional Jail Authority's (RJA's) IT network for telemedicine sessions?

A33a. The Agency will provide the IT network.

- 33b. If yes, does the DOC/RJA charge the incumbent provider to utilize the network? What is the monthly charge to utilize the network?

A33b. No charge. This is currently used by the incumbent.

34. Please provide the monthly chronic care clinic reports for 2013 for both the OCCC and NCC/NRJ, respectively.

A34. Refer to statistical summary reports provided with previous addenda.

35. In RFP Addendum #12 on page 12, an average daily population of 253 inmates is provided for the NCC/NRJ. In the PrimeCare Medical 2013 statistical summary, the monthly ADP is listed as 553. Please explain the variance in these two provided numbers.

A35. NCC has approximately 253 inmates. NRJ has approximately 300 inmates, these numbers were combined.

36. Are the OCCC and NCC/NRJ accredited by the National Commission on Correctional Health Care (NCCHC)? If yes, please provide the date of the last accreditation for each facility. Who is financially responsible for the accreditation fees, etc?

A36. Yes. The last date of accreditation was March 2013. The RJA is responsible for the accreditation fees.

37. Do the OCCC and NCC/NRJ currently house any work release inmates? If yes, please provide the following information.

- a. How many work release inmates are there at each facility per month?

There are no work release inmates at these locations.

- b. Are the inmates responsible for obtaining their own health care and medications?

Not applicable, these are not work release centers.

38. Are there any current consent decrees involving the inmate health and mental health care at the OCCC and NRJ, respectively? If yes, please provide details.

A38. No

39. Please provide the total number of staff physical examinations performed at the OCCC and NCC/NRJ, per facility, for 2012 and 2013.

A39. Information is not available.

40. On page 20 of RFP Addendum #12, it states in the new information for NRJ inmates that “vendor shall directly invoice NRJ. No charge for care for NRJ inmates shall be included on any WVDOC inmate”. To ensure all bidders can meet these requirements, please confirm if the current health care services vendor at NRJ bills the RJA or the actual facility for the following services separately.

- a. On-site care services (including, but not limited to, sick call (nurse and/or provider), lab work, x-rays, infirmary care, chronic care clinics, dental, mental health)
- b. Medications
- c. Off-site care services
- d. Audit charges
- e. Liability and insurance costs
- f. Staffing

A40. Vendor shall submit an itemized invoice to NCC outlining separate charges for inmates housed on the NRJ side and separate charges for inmates housed on the NCC side. WVDOC will pay the total invoice and NRJ/RJA will reimburse WVDOC for inmates on the NRJ side of the facility.

41. In 2012 and 2013, how many pretrial inmates were sent to Sharpe State Hospital? Will the awarded vendor have any financial responsibilities other than medications for any inpatient stabilization stays?

A41. Zero for both years, according to the statistical summary report.

42. Page 23 of RFP Addendum #12 notes that the awarded vendor will need to subcontract body cavity searches at the request of the Administrator. Please provide the following details.

- a. Is this subcontracted cost meant to be an additional cost to the total contract value?

Because of NCCHC accreditation, these patients are sent to outside hospitals. The charges are paid by the medical provider up to the contract cap.

- b. Please provide the number of body cavity searches that were performed in 2012 and 2013.

Information is not available.

- c. Please provide the hospital and/or clinic location where the body cavity have been performed under the current contract.

Various locations. Refer to the list of outside medical facilities that were provided on Addendum No. 8 issued 5/2/2014.

43. Do the OCCC and/or NCC/NRJ have special medical housing, observation beds, and/or an infirmary? If “yes,” please provide the following information about each unit separately.

A43. Special medical housing.

- a. Number of beds

6

- b. Average occupancy/fill rate for the unit

90-100 percent occupancy rate

- c. Staffing schedule for the unit’s clinical personnel

See Staffing Exhibits C and D.

- d. Are patients in the unit always within sight or hearing of a qualified health care professional?

Yes

44. Is it possible for all potential vendors to have a tour of the newly added facilities (OCCC and NCC/NRJ)?

A44. Yes, see Addendum #13.

45. Please provide annual spend amounts for the past two years for total pharmaceutical expenditures for the OCCC and NCC/NRJ separately.

A45. Vendor proprietary information.

46. Do the OCCC and NCC/NRJ currently have time clocks in place at each facility? If yes, please identify the type of time clock system in each. Will these time clocks transition to the new vendor?

A46. No time clocks are utilized in these facilities.

47. Please confirm that the mental health staffing for the OCCC listed in *Attachment 7 of RFP Addendum #12* is in addition to the mental health staffing for the OCCC provided in the RFP’s original staffing *attachment E-2*.

A47. For clarity, Agency hereby attaches current and proposed staffing plans for all facilities included in this RFP. When Addendum #12 was issued, we inadvertently omitted the mental health staffing.

The staffing for the OCCC listed in Attachment 7 of the RFP Addendum #12 is in addition to the mental health staffing for the OCCC provided in the original staffing attachment E-2.

48. Does the Regional Jail Authority (RJA) currently utilize EMTs? Can bidders include them in their staffing plans for the OCCC and NCC/NRJ?

A48. The RJA does not currently utilize EMTs. This is an RFP, so vendors should propose the most feasible and economical solution for the Agency.

49. Please confirm the usage of Physician Assistants/Nurse Practitioners in the OCCC and NCC/NRJ and the number of FTEs currently utilized at each facility. How many hours/FTEs should be attributed to the PRN Physician Assistant/Nurse Practitioner classification?

A49. See attached staffing for NRJ/NCC/OCCC. See Exhibits C and D.

50. The DOC provided in *RFP Addendum #12* two answers with contradicting facility populations that all vendors should use for their bid pricing. Please confirm that the answer given for *Question #21* includes the correct bid populations that all vendors should use for their response.

A50. With the issuance of the original RFP, the Facility Description attachment outlines the number of beds and ADP. With most of WVDOC facilities, we are at capacity so vendor should use the number of beds to bid populations. With the NRJ, NCC and OCCC, we included in this addendum, NRJ has approximately 300 inmates, NCC has approximately 250 inmates and OCCC has approximately 64 inmates.

ATTACHMENT A**Questions from July 21, 2014 deadline:**

1. Pursuant to Addendum 12, Page 5, Question 8 – Annualized value for the inmate health care contract for the current year is \$23,055,480.00. Please confirm that this is the current annual base contract fee being paid to the incumbent vendor and if so, provide a detailed breakdown of how this dollar value was determined (i.e., salaries and wages, off-site care, pharmaceuticals, mental health expense, etc.)

A1. The current annualized contract is \$23,055,480 annually. Please refer to question/answer numbers 3 and 8 on Addendum #12.

2. For previous contract years, please provide the total expenditures paid by the WVDOC for inmate health expenses above the \$5,000.00 catastrophic CAP. Based upon our review of previous Addendums issues pursuant to this RFP, there appears to be some discrepancies with respect to this question. Please clarify.

A2. Over CAP costs were \$1,495,699 for May 2011-April 2012, and \$1,576,154 for May 2012-April 2013.

3. In addition to the \$5,000.00 per inmate per catastrophic CAP, does the existing health services agreement have any additional catastrophic CAPS/risk sharing options? If so, please provide a detailed breakdown of such, to include any additional expenditures paid by the WVDOC above such CAPs.

A3. No. The vendor pays the first \$5,000, then DOC is responsible for the remainder.

4. What percent of offenders housed at OCCC leave the facility each day to work?

A4. Approximately 20-25 inmates leave the facility each day for work assignments.

5. How do work release offenders at OCCC obtain offsite health services?

A5. This is not a “work release facility” even though some inmates work through community work programs. They do not receive furloughs for the weekends and evenings.

6. Who is financially responsible for payment of offsite health services for work release offenders?

A6. Not a work release facility. However, true “work release inmates” are responsible for their health services.

7. Please provide intake and release volumes for NRJ.

A7. Admissions: 2011 – 3,364; 2012 – 3,672; 2013 – 3,837; 2014 – 3,591

Releases: 2011 – 3,382; 2012 – 3,625; 2013 – 3,841; 2014 – 3,666

8. How often is the optometry clinic held at NRJ/NCF?

A8. 1-2 times per month.

9. Are there mental health housing beds at NRJ/NCF? If so, how many?

A9. No

10. Are there segregation beds at NRJ/NCF? If so, how many?

A10. Segregation for medical need is dependent on space available. Primarily in the medical unit or holding. Five in medical and six in holding.

11. How are medications distributed at OCCC? Is a Keep On Person program acceptable?

A11. Administered via medication cart from centralized location. Keep on Person program is unknown.

12. Addendum 12, page 20 states, "The vendor shall directly invoice NRJ. No charges for care for NRJ inmates shall be included on any WVDOC invoice." Should the vendor's price submitted on the cost sheet for this RFP include costs of providing medical services to NRJ inmates?

- a. If the answer is yes to the above, how will the DOC handle reimbursement to the vendor to exclude costs invoiced to the NRJ by the vendor?

An additional cost sheet, Attachment C-1 is attached for the Northern Regional Jail.

Vendors must complete Attachment C – Cost Sheet revised on Addendum No. 12 and Attachment C-1 – Cost Sheet issued with this addendum. Both cost sheets must be submitted and placed in a separate sealed envelope as described in Section Five, Vendor Proposal, of the RFP. The total for both cost sheets, Attachment C and Attachment C-1 will be added together in order to arrive at a grand total price. A grand total price will be used to access cost proposal point.

- b. If not, what will be the cost mechanism for the vendor to bill the NRJ? (Fixed fee, PIPD, etc.?)

See answer above.

13. Section D.iii. of Addendum 12 on page 21 states, "Hospitalization of federal inmates shall require the specific approval of the responsible federal agency. Federal inmates will be billed directly to the responsible federal agency rather than the NRJ, in accordance with WV Code 31-2-30."

- a. How many federal inmates are currently housed at NRJ that would fall under this process?

See responses under "Questions from July 10, 2014 deadline" hereto attached.

- b. Is the current vendor providing medical services to the NRJ following this process now?

Yes

- c. Is the vendor required to bill all inpatient and outpatient care to the federal agency or just portions over the annual aggregate limit?

The healthcare provider in the community invoices the federal agency directly.

14. On the revised Attachment C Cost Sheet provided with Addendum 12, please confirm that the vendor is to provide a rate per appraisal and per evaluation and a total estimated cost extended by 100 appraisals per month and 40 evaluations per month, respectively.

A14. Vendor shall use 100 appraisals/month and 40 evaluations/month for bid purposes. These are estimated quantities only. Agency may require more or less during the term of this contract.

15. During the tours, it was stated that OCC utilizes the dental and psychiatric staff from NRJ, as needed. Are the hours listed for NRJ for dental and psychiatry listed in Addendum #12 inclusive of hours required at OCC? Are there any other services or specialties that are shared between the two sites?

A15. The hours provided in Addendum #12 are inclusive.

16. Will you provide a list of medications used by NDC, Drug name, total units and total cost at the RJA sites (NRJ and OCC) for the last twelve months? If not available, will you provide top 100 drugs by cost and quantity for the same time period?

A16. Agency does not have this information. Current provider indicates proprietary information.

17. What is the total spend and number of patients on HIV at the RJA sites (NRJ and OCC) for the previous calendar year and current year to date through June 30?

- A17. See statistical summary provided with Addendum #12 issued on or around 7/02/2014. Costs of medications are considered proprietary by current vendor.**
18. What is the total spend and number of patients on Psych meds at the RJA sites (NRJ and OCC) for the previous calendar year and current year to date through June 30?

A18. This information is considered proprietary by current vendor.

19. What is the total spend and number of patients on Hep C meds at the RJA sites (NRJ and OCC) for the previous calendar year and current year to date through June 30?

- A19. See statistical summary provided with Addendum #12 issued on or around 7/02/2014. Costs of medications are considered proprietary by current vendor.**

Clarifications/Other Information:

The following terms and provisions are hereby added and/or amended:

1. The Vendor shall ensure that at least one RN at each facility, with the exception of the Work Release facilities, shall be trained as a Sexual Assault Nurse Examiner.
2. Current and Proposed Healthcare Staffing sheets are attached. See Exhibit C.
3. Current and Proposed Mental Health Staffing sheets are attached. See Exhibit D.
4. The St. Mary's Correctional Center will add a Sheltered Housing Unit. This is not a medical unit but rather a unit for inmates that are unable to be housed in general population due to a condition that is medical or mental health related, yet does not require infirmary level care. The Agency added 4.2 CNAs and 1.0 LPN for this unit. The CNAs and inmate workers will assist the sheltered unit housed inmates with activities of daily living. The LPN will be responsible for administering medication as well as minor medical treatments. The proposed staffing is amended to reflect these changes. Vendors should bid accordingly.
5. Due to the recent Medicaid Expansion, inmate inpatient hospitalizations, 24 hours or more, are covered by Medicaid. Vendor shall be responsible for all hospitalizations not covered by Medicaid. Since this is new to the Agency, we do not know how many inmates will qualify for Medicaid payment; however, we feel the majority will qualify.
6. The bid opening has moved from 07/30/2014 to 08/05/2014. The bid opening time remains at 1:30 pm.
7. Attachment C-1, cost sheet attached.
8. Exhibits A through D attached.
9. No additional questions will be accepted on this RFP.

List of Exhibits listed in Addendum No. 15:

Exhibit A – Change Order No. 15 for current medical contract, COR61359.

Exhibit B – Equipment list for OCCC.

Exhibit C - Current and Proposed Healthcare Staffing

Exhibit D - Current and Proposed Mental Health Staffing

EXHIBIT A



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

Purchase Order

000020

PURCHASE ORDER NO
COR61359

PAGE
1

BLANKET RELEASE
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CHANGE ORDER
15

BAT
CORRECT PURCHASE ORDER NUMB
MUST APPEAR ON ALL PACKAGES,
INVOICES, AND SHIPPING PAPERS.
QUESTIONS CONCERNING THIS PUR
CHASE ORDER SHOULD BE DIRECTE
TO THE BUYER AS NOTED BELOW.

INVOICE TO	DIVISION OF CORRECTIONS 1409 GREENBRIER ST STE 300 CHARLESTON, WV 25311
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VENDOR	*B01141641 412-937-8590 WEXFORD HEALTH SOURCES INC 501 HOLIDAY DR FOSTER PLAZA FOUR PITTSBURGH PA 15220
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14
FILE LOCATION 28368

SHIP TO	DIVISION OF CORRECTIONS 1409 GREENBRIER ST CHARLESTON, WV 25311
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304-558-8045

DATE PRINTED		TERMS OF SALE		FEIN/SSN		FUND	
04/29/2014		NET 30		592363973			
SHIP VIA		F.O.B		FREIGHT TERMS		ACCOUNT NUMBER	
BEST WAY		DESTINATION		PREPAID		MUL-MUL	
LINE	QUANTITY	UQP	VENDOR ITEM NO.		UNIT PRICE	AMOUNT	
	DELIVERY DATE	CAT.NO	ITEM NUMBER				
<p>CHANGE ORDER #15</p> <p>TO PROVIDE AN EMERGENCY EXTENSION TO THE ORIGINAL CONTRACT ACCORDING TO ALL TERMS, CONDITIONS, SPECIFICATIONS, AND PRICING CONTAINED IN THE ORIGINAL CONTRACT INCLUDING ALL AUTHORIZED CHANGE ORDERS.</p> <p>EFFECTIVE DATE OF EXTENSION: 05/01/2014 THROUGH 07/31/2014</p> <p>NO OTHER CHANGES</p> <p>Purchasing Division's File Copy</p> <p>PURCHASING DIVISION CERTIFIED ENCUMBERED</p> <p>MAY 7 2014</p> <p><i>Beverly Toler</i></p> <p>ENTERED</p> <p>PREVIOUS PO TOTAL==> OPEN END PO NET CHANGE (+)==></p>							

IF APPROVAL AS TO FORM IS REQUIRED BY ATTORNEY GENERAL, CHECK HERE ☒

Daffin
APPROVED AS TO FORM BY
ASSISTANT ATTORNEY GENERAL

4-30-14
BAT

✓ BY

PURCHASING DIVISION AUTHORIZED SIGNATURE

OPEN END

TOTAL

304-558-2544

**GENERAL TERMS & CONDITIONS
PURCHASE ORDER/CONTRACT**

000021

1. **ACCEPTANCE:** Seller shall be bound by this order and its terms and conditions upon receipt of this order.
2. **APPLICABLE LAW:** 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.
3. **NON-FUNDING:** All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the terms of the Purchase Order/Contract, 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.
4. **COMPLIANCE:** Seller shall comply with all federal, state and local laws, regulations and ordinances including but not limited to, the prevailing wage rates of the WV Division of Labor.
5. **MODIFICATIONS:** This writing is the parties' final expression of intent. No modification of this order shall be binding unless agreed to in writing by the Buyer.
6. **ASSIGNMENT:** Neither this Order nor any monies due, or to become due hereunder may be assigned by the Seller without the Buyer's consent.
7. **WARRANTY:** The Seller expressly warrants that the goods and/or services covered by this order will:
(a) conform to the specifications, drawings, samples or other description furnished or specified by the Buyer; (b) be merchantable and fit for the purpose intended; and/or (c) be free from defect in material and workmanship.
8. **CANCELLATION:** The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
9. **SHIPPING, BILLING & PRICES:** Prices are those stated in this order. No price increase will be accepted without written authority from the Buyer. All goods or services shall be shipped on or before the date specified in this Order.
10. **LATE PAYMENTS:** Payments may only be made after the delivery of goods or services. Interest may be paid on late payments in accordance with the *West Virginia Code*.
11. **TAXES:** The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
12. **RENEWAL:** 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, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and 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. **CONFIDENTIALITY:** The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in <http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf>.
16. **LICENSING:** Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agency or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
17. **ANTITRUST:** In accepting this purchase order or signing this contract with any agency for the State of West Virginia, the vendor agrees to convey, sell, assign, or transfer to the State of West Virginia all rights, title, and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to vendor. Vendor certifies that this purchase order or contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law. Vendor further certifies that this purchase order or contract is in all respects fair and without collusion or fraud.



April 28, 2014

James J. Ielapi
Deputy Commissioner
West Virginia Division of Corrections
1409 Greenbrier Street
Charleston, WV 25311

Debbie E. Hissom
Director of Inmate Health Services
West Virginia Division of Corrections
1409 Greenbrier Street
Charleston, WV 25311

Ms. Patricia Withrow
Director of Administration
West Virginia Division of Corrections
1409 Greenbrier Street
Charleston, WV 25311

Re: 3 Month Emergency Contract Extension - COR 61359

Dear Deputy Ielapi, Director Hissom, and Director Withrow,

Wexford Health is pleased to work with the Division to extend contract COR61359 for an additional 3 month term for the period of May 1, 2014 through July 31, 2014 under the same terms and conditions as our current contract. We have enjoyed working with the Division and look forward to continuing our relationship for this contract extension.

Wexford Health further understands that the extension shall include:

- A thirty day termination clause;
- The \$5,000 annual cap for offsite services shall be prorated based on the actual number of months of the extension.

Wexford Health is offering to extend the contract with WVDOC at no increase to help meet the continuing financial pressure placed on the Division.

I have attached a signed copy of the Purchasing Affidavit and Agreement Addendum. Thank you for your review and approval of this contract extension, if you have any questions or need additional information please let me know.

Deputy Ielapi, Director Hissom, and Director Withrow
Contract Extension

April 28, 2014

Page 2 of 2

Wexford Health has enjoyed working with the Division and we look forward to continuing our relationship for this extension of contract COR61359 for an additional 3-month term.

Sincerely,



Nickolas A. Little, MBA, CCHP
Vice President, Quality, Compliance & Business Affairs
Wexford Health Sources, Inc.
(412) 937-8590 extension 264

"R.A.I.S.E. The Standard"

CC: Daniel Conn, Executive Vice President and COO, Wexford Health
John Froehlich, Vice President of Finance and CFO, Wexford Health
Mr. Terrance E. Rusin, President and CEO, PSIMED Inc.

WV-96
Rev. 10/07

AGREEMENT ADDENDUM

In the event of conflict between this addendum and the agreement, this addendum shall control:

1. **DISPUTES** - Any references in the agreement to arbitration or to the jurisdiction of any court are hereby deleted. Disputes arising out of the agreement shall be presented to the West Virginia Court of Claims.
2. **HOLD HARMLESS** - Any clause requiring the Agency to indemnify or hold harmless any party is hereby deleted in its entirety.
3. **GOVERNING LAW** - The agreement shall be governed by the laws of the State of West Virginia. This provision replaces any references to any other State's governing law.
4. **TAXES** - Provisions in the agreement requiring the Agency to pay taxes are deleted. As a State entity, the Agency is exempt from Federal, State, and local taxes and will not pay taxes for any Vendor including individuals, nor will the Agency file any tax returns or reports on behalf of Vendor or any other party.
5. **PAYMENT** - Any references to prepayment are deleted. Payment will be in arrears.
6. **INTEREST** - Should the agreement include a provision for interest on late payments, the Agency agrees to pay the maximum legal rate under West Virginia law. All other references to interest or late charges are deleted.
7. **RECOUPMENT** - Any language in the agreement waiving the Agency's right to set-off, counterclaim, recoupment, or other defense is hereby deleted.
8. **FISCAL YEAR FUNDING** - Service performed under the agreement may be continued in succeeding fiscal years for the term of the agreement, contingent upon funds being appropriated by the Legislature or otherwise being available for this service. In the event funds are not appropriated or otherwise available for this service, the agreement shall terminate without penalty on June 30. After that date, the agreement becomes of no effect and is null and void. However, the Agency agrees to use its best efforts to have the amounts contemplated under the agreement included in its budget. Non-appropriation or non-funding shall not be considered an event of default.
9. **STATUTE OF LIMITATION** - Any clauses limiting the time in which the Agency may bring suit against the Vendor, lessor, individual, or any other party are deleted.
10. **SIMILAR SERVICES** - Any provisions limiting the Agency's right to obtain similar services or equipment in the event of default or non-funding during the term of the agreement are hereby deleted.
11. **ATTORNEY FEES** - The Agency recognizes an obligation to pay attorney's fees or costs only when assessed by a court of competent jurisdiction. Any other provision is invalid and considered null and void.
12. **ASSIGNMENT** - Notwithstanding any clause to the contrary, the Agency reserves the right to assign the agreement to another State of West Virginia agency, board or commission upon thirty (30) days written notice to the Vendor and Vendor shall obtain the written consent of Agency prior to assigning the agreement.
13. **LIMITATION OF LIABILITY** - The Agency, as a State entity, cannot agree to assume the potential liability of a Vendor. Accordingly, any provision limiting the Vendor's liability for direct damages to a certain dollar amount or to the amount of the agreement is hereby deleted. Limitations on special, incidental or consequential damages are acceptable. In addition, any limitation is null and void to the extent that it precludes any action for injury to persons or for damages to personal property.
14. **RIGHT TO TERMINATE** - Agency shall have the right to terminate the agreement upon thirty (30) days written notice to Vendor. Agency agrees to pay Vendor for services rendered or goods received prior to the effective date of termination.
15. **TERMINATION CHARGES** - Any provision requiring the Agency to pay a fixed amount or liquidated damages upon termination of the agreement is hereby deleted. The Agency may only agree to reimburse a Vendor for actual costs incurred or losses sustained during the current fiscal year due to wrongful termination by the Agency prior to the end of any current agreement term.
16. **RENEWAL** - Any reference to automatic renewal is hereby deleted. The agreement may be renewed only upon mutual written agreement of the parties.
17. **INSURANCE** - Any provision requiring the Agency to insure equipment or property of any kind and name the Vendor as beneficiary or as an additional insured is hereby deleted.
18. **RIGHT TO NOTICE** - Any provision for repossession of equipment without notice is hereby deleted. However, the Agency does recognize a right of repossession with notice.
19. **ACCELERATION** - Any reference to acceleration of payments in the event of default or non-funding is hereby deleted.
20. **CONFIDENTIALITY** - Any provision regarding confidentiality of the terms and conditions of the agreement is hereby deleted. State contracts are public records under the West Virginia Freedom of Information Act.
21. **AMENDMENTS** - All amendments, modifications, alterations or changes to the agreement shall be in writing and signed by both parties. No amendment, modification, alteration or change may be made to this addendum without the express written approval of the Purchasing Division and the Attorney General.

ACCEPTED BY:
STATE OF WEST VIRGINIA

Spending Unit:

Signed:

Title:

Date:

VENDOR

Company Name:

Signed:

Title:

Date:

Spending Unit: Corrections
Signed: Beth K. Slack
Title: Procurement
Date: 4/25/14

Company Name: WEXFORD HEALTH SOURCES, INC.
Signed: John P. Miller
Title: CFO
Date: 4/21/14

EXHIBIT B

**PrimeCare Medical Inc.
Ohio County Correctional Center
1501 Eoff Street
Wheeling, WV 26003**

MEMORANDUM

**To: Becky Davis, RN, BSN, CCHP
Vice President of WV operations**

**From: Jason Kindelberger, LPN
Health Services Administrator**

Date: July 18, 2014

RE: Medical Inventory

Below is a list of items in the medical areas and ownership of those items.

Exam Room

1 Exam Table	DOC
1 Bio Waste Can	DOC
1 Trash Can	DOC
1 Cart on Wheels	DOC
1 EKG Machine	PrimeCare
1 Standing B/P Unit on Wheels	PrimeCare
1 Nebulizer	PrimeCare
1 water Pick	PrimeCare
2 Chairs	DOC
1 Pair Clippers for EKG's	DOC
1 Otoscope	PrimeCare
3 Glove Dispensers	DOC

Med Room

1 Med Cart	PrimeCare
1 Chair	DOC
2 Refrigerators	PrimeCare
1 Tall Cabinet/Shelf	DOC
1 Standing adjustable Lamp	DOC
1 Backboard	DOC
1 Lab Centrifuge	PrimeCare/Bioreference
1 Oxygen Tank with stand	PrimeCare/Matheson Gas
1 - 2 Step Ladder	PrimeCare

1 Dynamap
1 Otoscope
1 Pulse Oximeter
3 Glucometers
1 Trash Can
1 - 2 Drawer File Cabinet
3 Glove Dispensers

PrimeCare
PrimeCare
PrimeCare
PrimeCare
DOC
DOC
DOC

Medical Office

1 Large Desk
1 Small desk
2 Swivel Chairs on Wheels
1 Chair
1 Dell Computer
1 Brother Fax/Printer
1 Phone
1 Shredder
1 Trash Can
2 - 4 Drawer File Cabinets
1 - 2 Drawer File Cabinet
4 Shelf/Bookcases
1 Stand
2 sets staff wooden mailboxes
1 Refrigerator
1 Microwave
2 Coffee Makers
1 AED
1 Scale
2 Glove Dispensers

DOC
DOC
1 PrimeCare 1 DOC
DOC
PrimeCare
Primecare
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PrimeCare
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PrimeCare
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1 DOC 1 personal
DOC
PrimeCare
DOC

Storage Room

1 Walker
2 Sets of Crutches
1 Gurney
1 Wheelchair
1 Stair Chair
1 Suicide Smock
1 - 5 Drawer file cabinet
1 Folding Table

PrimeCare
PrimeCare
PrimeCare
PrimeCare
PrimeCare
DOC
DOC
DOC

EXHIBIT C

Current Staffing Healthcare

Health Care - Current Staffing

SITE/POSITION	Current Staffing
Regional Office	
Regional Manager	1.00
Regional Administrative Assistant	1.00
Regional Medical Director	1.00
Anthony Correctional Center	
Health Services Administrator (Nurse Manager)	1.00
Dental Assistant	0.25
Dentist	0.25
Licensed Practical Nurse	4.20
Physician	0.40
Medical Records Clerk	1.00
Registered Nurse	1.00
Beckley Correctional Center	
Licensed Practical Nurse	0.20
Physician Assistant/Nurse Practitioner	0.20
Denmar Correctional Center	
Health Services Administrator	1.00
Dental Assistant	0.20
Dentist	0.20
Licensed Practical Nurse	4.20
Physician	0.40
Medical Records Clerk	1.00
Optometrist	0.05
Registered Nurse	1.00
Huttonsville Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	2.00
Dental Assistant	0.90
Dental Hygienist	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	8.00

SITE/POSITION	Current Staffing
Physician	1.00
Medical Records Clerk	2.00
Optometrist	0.20
Physician's Assistant / Nurse Practitioner	1.00
Registered Nurse	8.00
X-Ray Technician	0.25
Lakin Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	4.20
Dental Assistant	0.80
Dental Hygienist	0.20
Dentist	0.80
Director of Nursing	1.00
Licensed Practical Nurse	7.00
Physician	0.40
Medical Records Clerk	1.00
Optometrist	0.10
Physician's Assistant / Nurse Practitioner	1.00
Registered Nurse	5.40
Martinsburg Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	2.00
Charge RN	1.00
Dental Assistant	0.25
Dentist	0.25
Licensed Practical Nurse	3.20
Physician	0.25
Mount Olive Correctional Complex	
Health Services Administrator	1.00
Administrative Assistant	1.00
Assistant Director of Nursing	2.00
Certified Nursing Assistant	6.00
Charge RN	3.00
Dental Assistant	1.00
Dental Hygienist	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	11.50
Physician	1.00
Medical Records Clerk	2.00
Medical Records Supervisor	1.00
Optometrist	0.20
Physician's Assistant / Nurse Practitioner	2.00
Registered Nurse	2.00

SITE/POSITION	Current Staffing
X-Ray Technician	1.00
Pruntytown Correctional Center	
Health Services Administrator (regular Director of Nursing)	1.00
Administrative Assistant	1.00
Dental Assistant	0.50
Dentist	0.50
Licensed Practical Nurse	5.60
Physician	0.40
Medical Records Clerk	0.50
Optometrist	0.05
Registered Nurse	3.00
Parkersburg Correctional Center	
Licensed Practical Nurse	0.20
Physician's Assistant / Nurse Practitioner	0.20
Salem Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Dental Assistant	0.25
Dentist	0.25
Licensed Practical Nurse	5.80
Physician	0.40
Medical Records Clerk	0.40
Optometrist	0.05
Registered Nurse	3.00
St. Mary's Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	3.40
Dental Assistant	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	8.40
Physician	1.00
Medical Records Clerk	1.00
Optometrist	0.10
Registered Nurse	4.20
X-Ray Technician	0.05
Total FTE's	0 166.70

Proposed
Staffing
Healthcare

Healthcare - Proposed Staffing

SITE/POSITION	Current Staffing
Regional Office	
Regional Manager	1.00
Regional Administrative Assistant	1.00
Medical Director	1.00
Director of Nursing	1.00
Anthony Correctional Center	
Health Services Administrator (Nurse Manager)	1.00
Dental Assistant	0.40
Dentist	0.40
Licensed Practical Nurse	4.20
Physician	0.40
Medical Records Clerk	1.00
Registered Nurse	1.00
Beckley Correctional Center	
Licensed Practical Nurse	0.20
Physician Assistant/Nurse Practitioner	0.20
Denmar Correctional Center	
Health Services Administrator	1.00
Dental Assistant	0.20
Dentist	0.20
Licensed Practical Nurse	4.20
Physician	0.40
Medical Records Clerk	1.00
Optometrist	0.05
Registered Nurse	1.00
Huttonsville Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	2.00
Dental Assistant	0.90
Dental Hygienist	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	8.00
Physician	1.00
Medical Records Clerk	2.00
Optometrist	0.20
Physician's Assistant / Nurse Practitioner	1.00
Registered Nurse	8.00
X-Ray Technician	0.25

SITE/POSITION	Current Staffing
Lakin Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	4.20
Dental Assistant	0.80
Dental Hygienist	0.20
Dentist	0.80
Director of Nursing	1.00
Licensed Practical Nurse	7.00
Physician	0.40
Medical Records Clerk	1.00
Optometrist	0.10
Physician's Assistant / Nurse Practitioner	1.00
Registered Nurse	5.40
Martinsburg Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	2.00
Charge RN	1.00
Dental Assistant	0.25
Dentist	0.25
Licensed Practical Nurse	3.20
Physician	0.25
Mount Olive Correctional Complex	
Health Services Administrator	1.00
Administrative Assistant	1.00
Assistant Director of Nursing	2.00
Certified Nursing Assistant	6.00
Charge RN	3.00
Dental Assistant	1.00
Dental Hygienist	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	11.50
Physician	1.00
Medical Records Clerk	2.00
Medical Records Supervisor	1.00
Optometrist	0.20
Physician's Assistant / Nurse Practitioner	2.00
Registered Nurse	2.00
X-Ray Technician	1.00
Pruntytown Correctional Center	
Health Services Administrator (regular Director of Nursing)	1.00
Administrative Assistant	1.00
Dental Assistant	0.25
Dentist	0.25

SITE/POSITION	Current Staffing
Licensed Practical Nurse	5.60
Physician	0.40
Medical Records Clerk	0.50
Optometrist	0.05
Registered Nurse	3.00
Parkersburg Correctional Center	
Licensed Practical Nurse	0.20
Physician's Assistant / Nurse Practitioner	0.20
Salem Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Dental Assistant	0.25
Dentist	0.25
Licensed Practical Nurse	5.80
Physician	0.40
Medical Records Clerk	0.40
Optometrist	0.05
Registered Nurse	3.00
St. Mary's Correctional Center	
Health Services Administrator	1.00
Administrative Assistant	1.00
Certified Nursing Assistant	7.60
Dental Assistant	1.00
Dentist	1.00
Director of Nursing	1.00
Licensed Practical Nurse	10.00
Physician	1.00
Medical Records Clerk	1.00
Optometrist	0.10
Registered Nurse	4.20
X-Ray Technician	0.05
Total FTE's	0 173.30

EXHIBIT D

Current
Staffing
Mental Health

Mental Health - Current Staffing

SITE/POSITION	Current Staffing
Regional Office - Mental Health	
MH Regional Administrator	1.00
Psychiatrist	0.75
Program Mentor	1.00
Psychiatric RN	1.00
Physician Extender/Video Tech	0.60
Referral Coordinator	1.00
Regional Psychologist	2.00
Administrative Assistant	1.00
Anthony Correctional Center	
Psychologist	1.00
Therapist	1.00
Denmar Correctional Center	
Psychologist	0.10
Therapist	0.50
Huttonsville Correctional Center	
Psychologist	3.00
Therapist	1.00
Lakin Correctional Center	
Psychologist	1.00
Therapist	2.15
Martinsburg Correctional Center	
Psychologist	2.00
Administrative Assistant	1.00
Mount Olive Correctional Complex	
MH Administrator	1.00
Administrative Assistant	0.50
Psychologist	3.00
Therapist	2.00
LPN	1.00
Behavioral Health Technician	1.40
Northern Correctional Center	
Psychologist	0.20
Ohio County Correctional Center	
Psychologist	0.20
Pruntytown Correctional Center	
Psychologist	1.00
St. Mary's Correctional Center	
Psychologist	1.00
Therapist	1.00
RSAT	
Regional/Advance Level Practitioner	0.25
Psychologist	0.20
MH Referral Coordinator	0.20

Lakin BHU		
Regional/Advance Level Practitioner		0.40
Psychologist		1.00
BHT		1.00
MH Referral Coordinator		0.20
Salem Correctional Center		
Psychiatrist		0.10
Psychologist		1.40
Psych Assistant		1.00
Sex Offender/Substance Abuse		
Sex Offender Counselor/Master MHP		0.98
Substance Abuse Counselor/Master MHP		1.01
Total FTE's		41.14

Proposed Staffing Mental Health

Mental Health - Proposed Staffing

SITE/POSITION	Current Staffing
Regional Office - Mental Health	
MH Regional Administrator	1.00
Psychiatrist	1.50
Program Mentor	1.00
Psychiatric RN	1.00
Physician Extender/Video Tech	0.50
Referral Coordinator	1.50
Regional Psychologist	2.00
Administrative Assistant	1.00
Anthony Correctional Center	
Psych Assistant	0.50
Therapist	1.00
Denmar Correctional Center	
Psychologist	0.10
Therapist	0.50
Huttonsville Correctional Center	
Psychologist	2.00
Therapist	2.00
Psych Assistant	1.00
Lakin Correctional Center	
Psychologist	2.00
Therapist	2.00
Psych Assistant	1.00
Behavioral Health Technician	1.00
Martinsburg Correctional Center	
Psychologist	2.00
Administrative Assistant	1.00
Mount Olive Correctional Complex	
MH Administrator	1.00
Administrative Assistant	1.00
Psychologist	2.00
Therapist	2.00
LPN	1.00
Behavioral Health Technician	1.50
Northern Correctional Center	
Psychologist	0.50
Ohio County Correctional Center	
Psychologist	0.20
Pruntytown Correctional Center	
Psychologist	1.00
St. Mary's Correctional Center	
Psychologist	1.00
Psych Assistant	1.00
Therapist	1.00
Salem Correctional	

[illegible]

COST ATTACHMENT

C-1

ATTACHMENT C-1
COST SHEET

NORTHERN REGIONAL JAIL RD2, Box 1 Moundsville, (Marshall County) WV 26041	RJCFA
Total monthly all inclusive fee for Medical/Mental Health Services	\$
Total annualized all-inclusive fee for Medical/Mental Health Services	\$
Vendor must also provide an annualized itemized proposal cost to include:	
Salaries	\$
Associated Benefits	\$
Pharmaceuticals	\$
<i>Provide Vendor Name & Location:</i>	
Optical	\$
<i>Provide Vendor Name & Location:</i>	
Other Miscellaneous Supplies	\$
Contract Mental Health	\$
Subcontractor Name	
Hospital	\$
Specialty Consult, referrals, etc.	\$
Malpractice	\$
Administrative Overhead/Management Fee	\$
TOTAL ANNUALIZED COST:	

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: COR61566

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

<input type="checkbox"/> Addendum No. 1	<input type="checkbox"/> Addendum No. 6	<input type="checkbox"/> Addendum No. 11	<input type="checkbox"/> Addendum No. 16
<input type="checkbox"/> Addendum No. 2	<input type="checkbox"/> Addendum No. 7	<input type="checkbox"/> Addendum No. 12	<input type="checkbox"/> Addendum No.17
<input type="checkbox"/> Addendum No. 3	<input type="checkbox"/> Addendum No. 8	<input type="checkbox"/> Addendum No. 13	<input type="checkbox"/> Addendum No.18
<input type="checkbox"/> Addendum No. 4	<input type="checkbox"/> Addendum No. 9	<input type="checkbox"/> Addendum No. 14	<input type="checkbox"/> Addendum No.19
<input type="checkbox"/> Addendum No. 5	<input type="checkbox"/> Addendum No. 10	<input type="checkbox"/> Addendum No. 15	<input type="checkbox"/> Addendum No.20

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Authorized Signature

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.