

Centurion Questions for Lake County Sheriff's Detention Center RFP No. 1-572019

Centurion Question No.	RFP Reference	Question
1.	General, also p. 21, paragraph S	Is the LCJ or Sheriff's Office currently under any court order, consent decree, settlement agreement, or memorandum of understanding resulting from litigation related to the provision of healthcare services? If so, please provide the controlling documents.
2.	General, also p. 21, paragraph S	Paragraph S notes the requirement to comply with "any future consent decree ordered against County/Sheriff concerning inmate health care." Is a consent decree, settlement agreement, or any other litigated or court-ordered resolution regarding inmate healthcare pending or anticipated?
3.	General	Please provide healthcare statistics for calendar years 2016, 2017, and 2018 sufficient to determine the number of onsite and offsite specialty care appointments, emergency department runs, and hospitalizations for each year, as well as the number of intake screenings, initial health screenings, sick call appointments (identified as medical, mental health, and dental), chronic care appointments, etc., completed in each of those years.
4.	p.13, No.4	The RFP is requesting references and validated accounts to be submitted. Please clarify the meaning of validated accounts and what would satisfy this criteria.
5.	General, also p. 35, paragraph F.1	For calendar years 2016, 2017, and 2018, please provide the total pharmaceutical costs and the average and total number of inmates treated for HIV, HCV, and blood disorders.
6.	General	For calendar years 2016, 2017, and 2018, please provide the total number of bookings completed, the average daily population, the proportion of the population that is female, and the average length of stay.
7.	General	Please provide a list of the current specialty services being provided onsite such as dialysis, physical therapy, orthopedics, optometry, OB/GYN; as well as the current vendors for each service.
8.	General	Please provide a list of equipment that will be available for use by the awarded vendor.
9.	General, also p. 9, paragraph B.1	For calendar years 2016, 2017, and 2018, please provide the average number of juveniles held at the LCJ, including their age ranges.

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10.	p.13, #3, Financial Status	<p>Under Section 4 A, the RFP states that, <i>“The certified Income Statement and Balance Sheet must be from the Company/Organization contracting with Lake County to perform services. <u>Not a parent Company, Group Division, or Subsidiary.</u>”</i></p> <p>Most contracting entities within the correctional healthcare market are subsidiaries or are owned in some part, wholly or otherwise, by a larger parent company. Usually, only the financial statements of the ultimate parent company are audited. Given that the parent company provides the financial support necessary to ensure that the highest level of healthcare services are provided for a given contract, would the Lake County Sheriff’s Detention Center accept the audited Income Statement and Balance Sheet (financial statements) of the parent company and the financial statements of the contracting Company when the contracting Company is a subsidiary entity?</p>
11.	p. 9, paragraph B.1	Is the 30-bed infirmary intended to be staffed and operated in a manner that meets NCHC Standard J-F-02, <i>Infirmary-Level Care</i> ?
12.	p. 9, paragraph B.1	Is there a mental health unit that is distinct from the 30-bed infirmary, or do patients who require acute mental health stabilization receive those services on the infirmary? If there is a distinct mental health unit, please describe.
13.	p. 9, paragraph B.1	Please provide the average occupancy rate and average length of stay for the 30-bed infirmary.
14.	p. 9, paragraph B.1	Does the South Lake District Facility receive bookings 24 hours a day, 7 days a week, or only at certain times of the day?
15.	p. 9, paragraph B.1	During the site tour, it was reported that there is a medical exam room available on each housing unit. Please provide the total number of exam rooms available throughout the jail. Are these exam rooms routinely used for sick call appointments?
16.	p. 9, paragraph B.1	Please confirm that no contracted healthcare staff are stationed at the South Lake District Facility and that the medical screening occurs after the arrestee is brought to the LCJ in Tavares. Please confirm that the four-hour timeframe for completion of the medical screening begins once the arrestee is brought to the primary jail facility in Tavares.
17.	p. 9, paragraph B.1	During the site tour, bidders were shown the office where the intake medical screening takes place. The arrestee is placed in an adjacent room and the screening is conducted through a pass-through window. How are vital signs obtained during the screening?

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18.	p. 9, paragraph B.1	Does the LCJ have a process in place that permits medical staff to direct that an arrestee not be accepted for booking and instead be sent for emergency medical stabilization at a community emergency department? If so, please describe this process and indicate how frequently it occurs.
19.	p. 11, paragraph F.3.e	Is the LCJ currently accredited by the FCAC or FMJS? If so, please provide the most recent dates of accreditation and the most recent survey reports. If not, please indicate the expected or desired timeframe for accreditation.
20.	p. 17, paragraph G	The Sheriff's Office interest in seeing alternatives to the current EHR is noted. During the site tour, it was reported that the version of CorrecTek that is in use is not the most current version. Which version of CorrecTek is currently in use?
21.	p. 17, paragraph G	Please indicate all interfaces currently in place with the EHR (e.g., jail management system, pharmacy, radiology, laboratory, x-ray) Of these interfaces, are they bi-directional?
22.	p. 17, paragraph G	Please identify the jail management system in use and the current version being used.
23.	General - IT	Please clarify who owns/manages/provides support for the <i>medical staff</i> computers. In the new contract, who will be responsible for providing computers for the medical staff? If the medical vendor, how many computers are needed?
24.	General - IT	Are the medical staff computers on the county's network domain or the contractor's domain?
25.	General - IT	Does the County provide internet access for the medical computers or does the contractor provide that?
26.	General - IT	Is CorrecTek on the County servers or hosted by the medical vendor? If bidders recommend a new system, will the County permit it to be installed on existing county servers?
27.	p. 17, paragraph G	During the site tour, bidders were informed that the LCJ is Wi-Fi enabled and that the successful bidder will be permitted to access the Wi-Fi for EHR wireless connectivity. Please confirm.
28.	General - IT	For other areas outside of EHR connectivity, is Wi-Fi available in any areas of the jail? If so, does the county provide that or does the medical vendor need to provide it?
29.	p. 17, paragraph G	During the site tour, bidders were informed that the computers in use for the EHR were the property of the Sheriff's Office and will be available for use in the new contract. Please confirm.

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30.	p. 21, paragraph R	Please provide the date of the most recent NCCHC accreditation together with the most recent NCCHC survey report.
31.	p. 21, paragraph V	During the site tour, bidders were informed that there are five medication carts currently in use for medication administration at the LCJ. Please confirm. Do the medication carts belong to the Sheriff's Office or the current healthcare provider?
32.	General - Pharmacy	What type of medication carts are used? Are they electronic and do they have interfaces with the EHR and Pharmacy?
33.	p. 22, paragraph 7	How do inmates submit sick call requests? Is this a paper process, or do they use kiosks or electronic tablets?
34.	p. 22, paragraph 7	Do any non-contracted (e.g., County or Sheriff's Office) employees provide direct care health services at the LCJ? For example, are there any mental health staff employed by the Sheriff's Office or the County? If so, please identify the number of individuals and their roles and responsibilities so that bidders do not duplicate these services in their proposal.
35.	p. 27, paragraph 13.a	Please confirm the nutritionist is employed or subcontracted by the Sheriff's Office and that the healthcare contractor is not expected to provide this position.
36.	p. 28, paragraph 5.g	Does this Sheriff's Office employ any case managers or release planners who help coordinate post-release care, or is release planning entirely the responsibility of the healthcare contractor? Please clarify the scope of these responsibility both for inmates who require alcoholism services and inmates who do not require alcoholism services but will need continuity of care upon release.
37.	p. 28, paragraph 5.g	Please identify the requirements for providing inmates with medications upon release from the jail, including whether inmates are provided with a voucher, prescription, or supply of medications and the length of this supply. Please clarify these requirements for all inmates who are prescribed medications while incarcerated, not just those receiving alcoholism services.
38.	p. 29, paragraph 6.b	The requirement to monitor inmates who are intoxicated or withdrawing from drugs and alcohol is noted. In what unit or units is this currently occurring?
39.	p. 29, paragraph 6.b	Does the Sheriff's Office currently provide, or plan to implement, a medication-assisted treatment (MAT) program for inmates with opioid use disorders?
40.	p. 29, paragraph 6c	Please identify the number of location of cells where close observation takes place.

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41.	p. 29, paragraph 6c	When an inmate is placed on suicide precautions or constant observation, who conducts the observation (fulfills the role of actually observing the inmate), LCJ security staff or the healthcare contractor?
42.	p. 29, paragraph 8	For pregnant inmates with opioid use disorders, please describe the current mechanism for providing methadone, including whether this is done on- or offsite and whether this process is subcontracted through a community provider.
43.	p. 29, paragraph 9	Does the term “Communicable Disease Unit” refer to an infection prevention and control program, or to a physical unit composed of cells or housing quarters within the jail? If it refers to a physical location, please identify the number of cells allocated for this purpose.
44.	p. 29, paragraph 9	How many negative pressure/reverse airflow cells are available?
45.	p. 29, paragraph 10	Please identify which specialty health services are currently provided on site.
46.	p. 29, paragraph 10	Are any specialty care or other healthcare services, including psychiatry, currently provided by telehealth? If so, please identify which services are so provided. If not, is this option of interest to the Sheriff’s Office?
47.	p. 29, paragraph 11	On average, how many work release inmates are held at the LCJ?
48.	p. 30, paragraph 12.c.2	The requirement to identify medications the inmate was taking prior to intake is noted. Does the LCJ have access to a health information exchange (HIE) for purposes of medication verification and other electronic records that can be used to support continuity of care?
49.	p. 30, paragraph 12.f	The requirement that a medical provider review all new intake screenings within 24 hours is noted. Is this requirement currently in place? If so, how do the reviews take place on weekends, when no providers appear to be on site according to the position roll-up provided on pp. 36-37?
50.	p. 30, paragraph 12.g	If the liquidated damages provision for late intake screenings is currently in place, please provide data for the last three years indicating how many intake screenings have not been initiated within four hours of notification of inmate arrival.
51.	p. 31, paragraph 13.e	If the liquidated damages provision for late health appraisals is currently in place, please provide data for the last three years indicating how many health appraisals have not been completed within 14 days of booking.
52.	p. 32, paragraph 17	Please clarify what “inspection reports” are being referenced in this requirement.

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53.	General	During the bidders' conference and site tour, interest in telehealth services was indicated. Please confirm that currently no telehealth services are provided. If telehealth services are currently provided, please clarify the current telehealth capabilities (i.e. equipment, connectivity, etc.)
54.	General	Would the County find value in obtaining telehealth linkages to community resources? (i.e., CMH, parole, housing, etc.)
55.	General	For calendar years 2016, 2017, and 2018, please indicate the volume of offsite emergency department trips and trips for offsite specialty care separately
56.	General	Please provide health care statistics for the past year and average length of stay if this is not included in the report.
57.	General	Please provide clarification regarding who oversees reentry planning. There are no FTEs allocated in the staffing information provided and there does not appear to be enough direct care staff to cover both care and reentry coordination. Does LCJ have staff assigned to support reentry?
58.	General - Pharmacy	Will the LCJ consider a cap on Biologicals, Hepatitis C, hemophiliac, cancer, and other high cost medications? This will allow vendors to avoid including risk premium for these treatments in their proposals, therefore reducing their cost
59.	General - Pharmacy	Please provide the monthly prescriptions by major medication name and category, including but not limited to Biologicals HIV, Hepatitis C, Hemophiliac, Cancer, and Psychotropics.
60.	p. 26, #10	The RFP states, <i>"Provisions for pharmaceutical services to assure the availability of prescribed medications within eight, (8), hours of the order of issue being written and provisions for emergency pharmacy services within two, (2), hours."</i> Are the medications currently available within eight hours of the order being issued, and if so, is this requirement being met by having floor stock medications available?
61.	General - Pharmacy	Please provide the top 100 medications by cost for the last 6 months.
62.	General - Pharmacy	Please provide the top 100 medications by quantity dispensed for the last 6 months.
63.	General - Pharmacy	Please confirm the name of the pharmacy vendor currently providing pharmacy services.
64.	General - Pharmacy	Please provide a current copy of the Drug Formulary.

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65.	General - Pharmacy	What is the current pharmacy drug delivery requirements?
66.	General - Pharmacy	Are back up pharmacies used? If so, please provide the names.
67.	General - Pharmacy	Is an electronic MAR used? If so, what is the name of the providers software?
68.	General - Pharmacy	Is there an active interface with the pharmacy?
69.		
70.	General - Pharmacy	Please provide an example of the monthly pharmacy utilization reports.
71.	General - Pharmacy	How many inmates have been treated with Hepatitis C medications in the last 12 months?
72.	General - Pharmacy	Do the pharmaceutical costs in the RFP include the pharmacy dispensing or management fees?
73.	General - Pharmacy	What are the current drugs that have “automatic stop” orders?
74.	General - Pharmacy	How many medication room inspections are required annually?
75.	General - Pharmacy	Is an electronic physician order entry and electronic medication administration record being use and if so, what is the software name?
76.	General - Pharmacy	Are floor stock medications used?
77.	General - Pharmacy	Please provide a list of the floor stock medications.
78.	General - Pharmacy	Please provide the monthly trend in medication return credits and administrative fees for the current and prior fiscal years.
79.	General - Pharmacy	Were there any inmates over the past 12 months on a limited distribution medication?
80.	General - Pharmacy	How many inmates per month are on second generation injectable psych medications (Risperdal Consta, Invega, Abilify. Etc.)
81.	General - Pharmacy	Are the facilities currently utilizing a paper medication pass or is the med pass electronic?
82.	General - Pharmacy	Please clarify the type of pharmacy licenses held and whether the pharmacy licenses and DEA registration are held by the facility, the County, or the contracted medical vendor.

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83.	p.32, Section 21, Unusual Costs/Offsite Health Care	<p>The RFP states that the costs of all offsite services will be paid by the awarded vendor and 100% reimbursed by the County (commonly referred to as a pass through model).</p> <p>However, there is a line on page 40 (under “Cost Categories for Each Contract Period”) for Offsite Services Cost. It is our understanding that this item would be a pass through and would not require a line item. Please clarify and provide more detail on this line item and how it will be scored.</p>
84.	p.11, First Paragraph	<p>In the RFP, under Price Sheet, it states, <i>“Pharmacy will be listed separately, and bidders will manage care, coordinate care, adjudicate claims, to include coordination with off-site care providers of all potential third-party payment resources, and pay all inmate off-site health care cost, to include Prior To Booking cost, monthly. The successful bidder will then submit an invoice to Lake County, on a quarterly basis, for all claims PAID by the bidder.”</i></p> <ul style="list-style-type: none"> ▪ Are pharmacy services to be 100% reimbursed by the County to the awarded vendor (pass through cost) in addition to Offsite Services? ▪ Are pharmacy services to be 100% reimbursed by the County to the awarded vendor (pass through cost) in addition to Offsite Services? ▪ Will the awarded vendor be at full risk for the costs of pharmaceuticals? ▪ Is the Sheriff’s Office/County willing to accept cost sharing alternatives such as an annual aggregate cap or specific medication carve outs (blood products, hepatitis C, etc.)? ▪ Please provide the last two pharmacy reconciliations between the County and the incumbent and/or the total annual costs of pharmacy for the last two years. ▪ It was mentioned during the pre-proposal meeting that pharmacy pricing shall be fixed annually, billed monthly in 1/12th increments, with a 12th month reconciliation. On this reconciliation, any unspent pharmacy monies will be returned to the County. Can it also be assumed that any pharmacy monies in excess of the annual pharmacy budget will also be paid by the County?
85.	pp. 26-27, paragraph 11	<p>Does the Lake County Sheriff’s Office currently have a “keep on person” (KOP) or “self-administration” program for medications, or all medications administered as direct observation therapy (DOT) or “watch-take”?</p>

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86.	pp. 27-28, paragraph 5	The RFP requires the development of a “mental health program.” In addition to the examinations, placement determinations, diagnostic examinations, psychotropic medication services, and alcoholism services described, are any group or individual counseling services offered?
87.	p. 27, paragraph 5.a	For calendar years 2016, 2017, and 2018, please provide the total number of inmates who were “isolated for psychiatric purposes” each year.
88.	p. 28, paragraph 5.e	For calendar years 2016, 2017, and 2018, please provide the total number of inmates who were referred for mental health evaluations each year.
89.	p. 28, paragraph 5.e	Is the “comprehensive diagnostic examination” referred to in the RFP completed by mental health professionals, psychiatric staff, or both?
90.	p. 28, paragraph 5.f	For calendar years 2017, 2017, and 2018, please indicate the average number of inmates who received psychotropic medications at any given time.
91.	p. 28, paragraph 5.f	Are orders for psychotropic medications written exclusively by the psychiatrist, or do medical providers also prescribe psychotropic medications?
92.	p. 28, paragraph 5.g	For calendar years 2016, 2017, and 2018, please indicate the average number of inmates who received alcoholism services at any given time. In addition, please clarify whether similar services are expected for inmates who have other substance use-related problems (e.g., opioid use, amphetamine use, other illicit drug use problems). We ask because the exclusive focus on alcohol use problems is unusual.
93.	p. 28, paragraph 5.f	For calendar years 2016, 2017, and 2018, please indicate the average number of inmates who are placed on the mental health caseload at any given time.
94.	p. 27-28	For calendar years 2016, 2017, and 2018, please provide the total number of inmates who were referred under the Baker Act for inpatient commitment each year.
95.	p.16, C.1.a	The RFP states, “\$3,000,000 Bodily Injury and Property Damage per occurrence and \$5,000,000 aggregate for bodily injury and property damage <i>with no annual aggregate on an occurrence form.</i> ” The italicized language appears to contradict the requested \$5,000,000 aggregate requested. Will the County please confirm the required insurance coverage?

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96.	p.22, Administrative Requirements, #1	<p>The RFP states, <i>“A singularly designated physician health authority (Medical Director), Psychiatrist for mental health services and a Dentist for dental services, all with responsibility assuring the appropriateness and adequacy of inmate health care.”</i></p> <p>Please clarify if 0.2 Psychiatrist reflected on the current contract staffing plan supervises all mental health services, in addition to providing on-call and onsite services.</p>
97.	p.22, Administrative Requirements, #6	<p>This requires monthly statistics for “Inmates seen by psychologists.” However, in the current staffing plan, there are no psychologists listed. Please clarify.</p>
98.	General	<p>Please provide the statistics for juvenile mental health and psychiatric services in the jail for the last full calendar year.</p>
99.	p. 27-28	<p>Please describe the processes used and staff involved in Baker Act filings. For example, are filings for Baker Act commitments completed by the psychiatrist, the mental health professional, or another staff member?</p>