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**CORRECT CARE
SOLUTIONS**

RFP No. 18-0022

**Inmate Medical & Pharmacy Services for
Muscogee County Prison (Annual Contract)
Columbus, Georgia**

Technical and Cost P

**Due: M
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Nashville, Tennessee 37217

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Columbus Consolidated Government

Muscogee, Georgia

Inmate Medical and Pharmacy Services for Muscogee County
Prison (Annual Contract)

RFP No. 18-0022

Technical and Cost Proposal

May 18, 2018

5 p.m. EST



Respectfully Submitted to:

Columbus Consolidated Government – Purchasing Division
RE: Inmate Medical and Pharmacy Services for Muscogee
County Prison
100 10th Street
Columbus, Georgia 31901
706-653-4105



Submitted by:

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Point of Contact:

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This submission includes the following required copies:
Technical and Cost Proposal – 1 original and 7 copies



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Part A. Technical Proposal



Section 1: Transmittal Letter

May 16, 2018

Members of the Columbus Consolidated Government Review Team,

Correct Care Solutions (CCS) is proud to serve as the current Inmate Health Care Services provider for the Muscogee County Prison (MCP). We have been serving as your health care provider since 2013, and we are excited for the opportunity to present our proposal in response to RFP No. 18-0022 to continue our program. We are confident in our ability to continue to meet and exceed the evolving needs of the MCP. As your current health care provider, we possess an unmatched knowledge of the intricacies of caring for your incarcerated patient population. We maintain a successful working relationship with the Columbus consolidated Government (the City), and our team approach to providing health care services has raised the quality of patient care while reducing the City's financial liability.

In our proposal, we will describe how changes in the management of the pharmacy services and staffing pattern will lead to better patient care and a reduction in medication cost. At the request of RFP 18-0022, CCS has included in its proposal our plan to manage the pharmacy program at MCP. In April 2017, we instituted the changes that we have outlined in this proposal at the Muscogee County Jail. Due to CCS' status as one of the largest healthcare providers in our industry, we were able to utilize our bulk pricing discounts and correction-specific formulary to lower the average monthly cost of medications by 27%. While we are fully aware that the jail and prison have completely different operations and patient populations, we are certain that our buying power as Diamond Pharmacy's largest customer and formulary management will be able to significantly lower the cost of pharmaceuticals at the MCP.

CCS is also proposing changes to the current staffing plan at the MCP. Our proposed staffing plan includes the addition of a fulltime Administrative Assistant (AA) and .2 additional Nurse Practitioner (NP) hours. The addition of the AA will reduce the amount of time our clinical staff is performing administrative duties and will allow them to focus on patient care more fully. The addition of the NP will provide additional provider time which will ensure patients are seen in a timely manner. In our proposed matrix, we are also expanding the nursing services to 7 days a week from the current 5 days a week with a nurse on call for weekends. This enhancement will allow us to perform sick call 7 days a week.

We are proud of our past success in Muscogee County, and we are excited to discuss the future of the Inmate Medical and Pharmacy Services program at the MCP in our proposal. As your health care provider, we have the historical knowledge, experience, and resources to continue improving care at the MCP. We value our partnership and welcome the opportunity to submit this proposal to continue our relationship with the City and the MCP. We thank you for considering us as the continued Inmate Health Care Services provider for the MCP, and we look forward to discussing our proposal program with you.

This proposal is binding for at least 120 days from the proposal opening date.

Sincerely,

Patrick Cumiskey
President & Chief Strategy Officer

P: 615-324-5777

Patrick@correctcaresolutions.com



Section 2: Affidavit for E-Verify

FORM 1

CONTRACTOR AFFIDAVIT E-VERIFY / GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

860960 5/16/2018
Company ID Number (numerical, 4-7 digits) Date of Authorization
****See <https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES> to access your E-Verify Company Identification Number.**

Correct Care Solutions
Name of Contractor

Inmate Medical & Pharmacy Services for MCPPrison (Annual Contract): RFP No. 18-0022
Name of Project

Columbus Consolidated Government
Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on May, 16, 2018 in Nashville (city), TN (state).

[Signature]
Signature of Authorized Officer or Agent

Patrick Cumiskey, President
Printed Name and Title of Authorized Officer or Agent



Subscribed and sworn before me on this the 16 day of May, 2018.

Angela Davis
NOTARY PUBLIC

My Commission Expires:

May 2, 2022

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.



Section 3: Addenda Acknowledgement

CCS acknowledges receipt of **Addenda No. 1** and **Addenda No. 1 – Attachment A**, **Addenda No. 2**, and **Addenda No. 3**.



Section 4: Experience and Qualifications

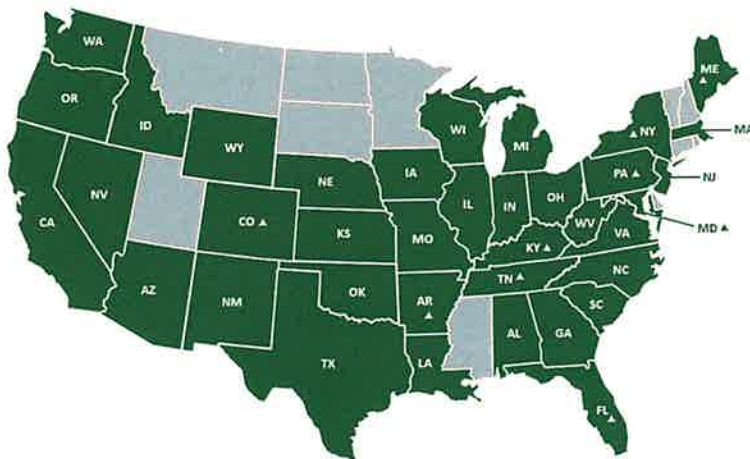
A. CCS Experience with services specified in Appendix A

Correct Care Solutions (CCS), now in our 15th year of operation, is dedicated to meeting the growing industry need for correctional health care services with an innovative approach to the MCP and similar facilities. Each of our successful contracts and satisfied clients demonstrates our ability to provide the necessary capabilities and resources to ensure that we are the most qualified and willing partner for the MCP and the City.

CCS is specifically organized to provide comprehensive correctional health care services to the MCP. Our currently implemented programs include the design and successful operation of comprehensive medical and pharmacy services for the MCP inmate population. Given the opportunity to continue our work at the MCP, we will provide the same dedicated level of service that you have come to expect from CCS.

CCS prides itself on being a public health company, and we view our corrections business as a diverse public health setting. Today, 12,000 CCS employees care for more than 270,000 patients in 37 states, including the approximately 576 MCP inmates, with more than 60,000,000 patient encounters each year nationally.

As we continue to grow, our dedicated professionals continue to learn from their many daily patient encounters across the country and in the MCP. This growth and continued education of the CCS employees allows our company to stay on the cutting edge of quality health care and programs. The knowledge we gain from the patients we treat throughout our client base leads to improved care for patients at the MCP and all of our sites.



Home Office*
1283 Murfreesboro Rd., Ste. 500
Nashville, TN 37217

Maryland Office
Hanover, Maryland

Florida Office
Deerfield Beach, Florida

Mountain States Office
Centennial, Colorado

Pennsylvania Regional Office
Lemoyne, Pennsylvania

Maine Regional Office
Augusta, Maine

Arkansas Regional Office
Pine Bluff, Arkansas

Kentucky Regional Office
Louisville, Kentucky

**The CCS Home Office will support this contract*

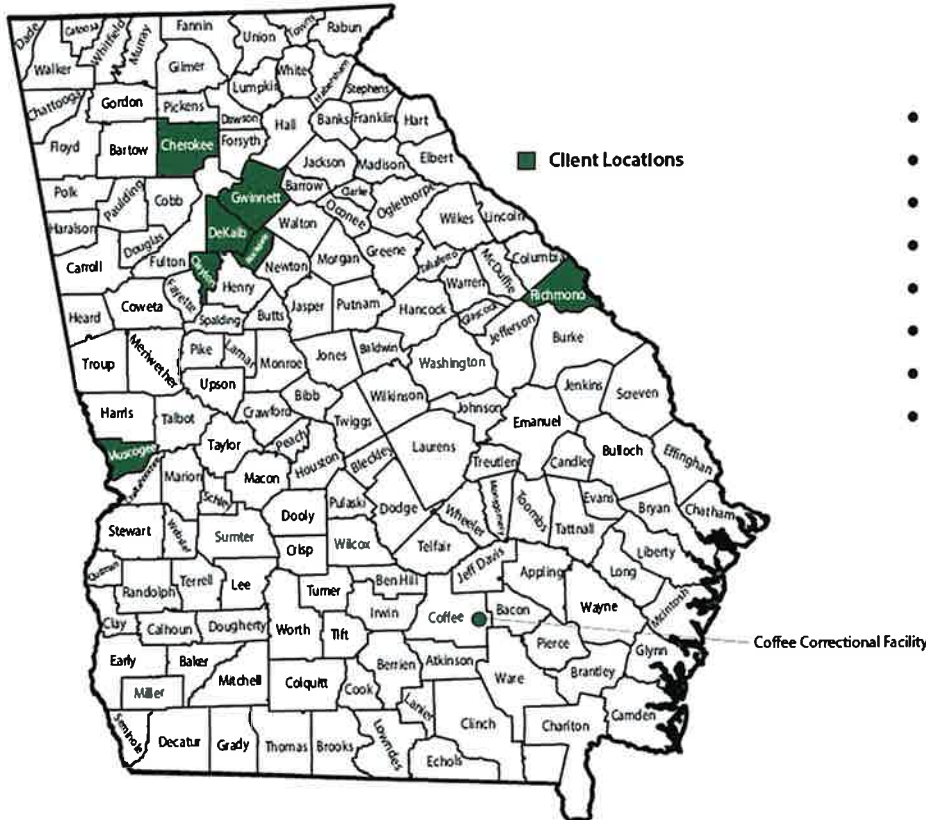
Our philosophy is simple: we listen to our clients; we assess the situation; and we offer targeted, implementable solutions. We focus on creating and maintaining successful partnerships with our clients, and create value in our partnerships through **long-term cost savings** and **improved patient care**.



practices, and local resources are readily available and currently supporting the success of the MCP health care program.

Our Georgia clients include:

Georgia



- Augusta-Richmond County*
- Cherokee County
- Clayton County Sheriff's Office
- Muscogee County Jail
- Muscogee County Prison
- DeKalb County
- Gwinnett County*
- Rockdale County

* Locations in which CCS is providing healthcare services to both the jail and the prison.

The CCS program for the MCP currently meets or exceeds community standards of care, as well as standards established by the National Commission on Correctional Health Care (NCCHC) and American Correctional Association (ACA). We understand that the MCP is not currently seeking accreditation; however, CCS has extensive experience achieving and maintaining NCCHC and ACA accreditation, and operates all of our programs at an appropriate level of care consistent with standards established by the NCCHC and ACA. For more information regarding our accreditation experience, please see *Section C. Additional Information*.



Patrick Cummiskey
*President &
Chief Strategy Officer*



Mr. Cummiskey was a founding member of Correct Care Solutions, where he has served in a variety of leadership roles. He is currently President of CCS Group Holdings, and also Chief Strategy Officer for the company, with a focus on developing, communicating, executing, and sustaining corporate strategic initiatives. Mr. Cummiskey leads business development, client retention, and support services for all CCS divisions. He works closely with each division president to ensure ongoing success and strategic growth of the company. Under his leadership, CCS stays consistently focused on understanding and supporting internal and external customer needs while developing innovative solutions to meet client budget objectives. Mr. Cummiskey has a bachelor's degree in business administration from the University of Georgia and a master's degree in business administration with a marketing emphasis from Georgia State University.

Chris Bove
Chief Operating Officer



Mr. Bove joined CCS in 2011 after successful leadership in a multi-service organization where he led a variety of teams. He brings this wealth of corporate experience along with his military leadership to the position of Chief Operating Officer. Mr. Bove is responsible for leading and coordinating the efforts of all CCS divisions. Prior to his most recent promotion, he served as President of our Local Detention Division (the largest within CCS), with operational oversight of local adult and youth detention and responsibility for the overall management and administration of the division. Mr. Bove graduated with a bachelor's degree in engineering management from the United States Military Academy at West Point and a master's degree in business organizational management from the University of La Verne in California.

Bill Kissel, CCHP
*Senior Regional
Vice President*



Mr. Kissel joined CCS as a Regional Vice President in September 2013. He has 28 years of combined correctional health care experience serving the Georgia Department of Corrections (GDC) and private correctional health care companies. Mr. Kissel has a master's degree in Mental Health Counseling, and he has served as a Mental Health Counselor, Mental Health Director, and State Director of Mental Health for the GDC. He is a Certified Correctional Health Professional (CCHP) and an NCCHC Accreditation Surveyor. Mr. Kissel is a member and former president of the Georgia Chapter of the Board of the National Alliance on Mental Illness, and is a member of the American Correctional Association and the American Jail Association.



C. Additional Information

CCS is committed to being a true solutions provider in the health care industry and in the communities we serve.

Our Vision

Our philosophy is simple: we listen to our clients; we assess the situation; and we offer targeted, implementable solutions. We focus on creating and maintaining successful partnerships with our clients, and create value in our partnerships through **long-term cost savings** and **improved patient care**.

CCS is committed to being a true solutions provider in the health care industry and in the communities we serve. We establish partnerships with county, state, or federal agencies that are experiencing challenges meeting their health care delivery needs in a fiscally responsible way. With a constant focus on patient care, we offer innovative solutions to the City and efficiently execute our operational plans in coordination with your program objectives, and national, Georgia, and Muscogee County standards.

We recruit and retain the best personnel in the industry and strive to hire those who possess the qualities that we value most in ourselves, our employees, and in others. These attributes are known among the CCS family as *The Five Hs*.

The Five Hs

Hunger: We have the fire to learn, teach, and grow. We encourage each other and ourselves. Teamwork helps everyone reach their goals, from the smallest unit to the company as a whole.

Honesty: We uphold the highest level of integrity in all our dealings with each other, with our clients, and with our patients. We treat everyone with respect and dignity.

Hard Work: We are willing to out-work and out-think the competition so that we remain constant in placing our customers first. We strive for quality in everything we do.

Humility: No matter how much success we achieve, it is important to remain humble and remember not to lose our roots, vision, values, and identity. We maintain our loyalty to our community by being good citizens in the areas where we live and work.

Humor: Given the amount of time we put toward our work, it is important to have a sense of humor. This allows us to remain passionate and enjoy our work.

CCS Awards and Designations

CCS is proud to have received many awards and designations. In this section, we have provided a sample of recent awards and designations bestowed upon CCS, our sites, and our employees.

Accreditation Distinctions

CCS is a two-time recipient of the NCCHC's prestigious Program of the Year Award, which is awarded each year to one facility from the NCCHC national accreditation program. The Community Oriented Re-Entry (C.O.R.E.) Program at our Westchester County Correctional Facility in New York was named 2017 Program of the Year. In 2012, the NCCHC recognized the professional delivery of health care services at



Section 5: Client Work History

CCS has selected the following client references that best communicate our strengths and ability to meet and exceed your requirements and expectations for the years ahead. You are our best reference; however, we will gladly arrange a tour at any of our client facilities gain further insights.

FORM 2

CLIENT WORK HISTORY

Provide details of the last three (3) state, county or private jails/prison for which you have provided the specified services. The City reserves the right to contact additional clients not listed.

Facility Name: Shelby County Corrections Contact Name: Bill Gupton	
Address: 1045 Mullins Station Rd Memphis, TN 38134	Telephone: 901 222 8580 Fax Number: (901) 222-8581 E-Mail Address: William.gupton@shelbycountyttn.gov
Description of Services Provided: CCS is responsible for the comprehensive healthcare needs of inmates housed in the Shelby County Department of Corrections. We provide 24 hour coverage 7 days a week for medical, dental, and psychiatry services. CCS is responsible for all utilization management functions and continually strive to find cost savings for our client by maximizing on-site services.	
Facility Name: Johnson County Department of Corrections Contact Name: Antonio Booker	
Address: 141 Mission Parkway New Century, KS 66031	Telephone Number: 913-715-6345 Fax Number: 913-715-6305 E-Mail Address: Antonio.Booker@jocogov.org
Description of Services Provided: CCS is responsible for the healthcare needs of the residents of the Johnson County Department of Corrections Adult Residential Facility. We provide 16 hour coverage 7 days a week for medical and psychiatric services.	
Facility Name: Rockdale County Sheriff's Office Contact Name: Major Mike Kinlein	
Address: 911 Chambers Dr. NW Conyers, GA 30012	Telephone Number: 770-278-8062 Fax Number: 770-918-6319 E-Mail Address: mike.kinlein@rockdalecounty.org
Description of Service Provided: CCS is responsible for the comprehensive health care needs of inmates housed in the Rockdale County Jail in Conyers, Georgia. We provide 24-hour coverage inclusive of medical, mental health, and psychiatry services. CCS is responsible for all utilization management functions and we continually strive to find cost savings for our client by maximizing on-site services. We implemented our full ERMA system at the Jail in September 2014.	

Correct Care Solutions		2/16/2018
Company Name	Authorized Signature	Date



Section 6: Services Plan

A. Scope of Services

I. Scope of Services

A. Health Care Services:

1. Intake Screenings

CCS medical personnel currently complete approximately 8–15 inmate intake screenings in the medical unit per week. CCS intake screenings emphasize the identification, referral, and treatment of inmates with acute and chronic health care conditions, including behavioral health disorders, suicide risk, detoxification (if needed), and dental issues, as well as inmates who require medication, isolation, or close observation. The intake screening sets the course for the inmate’s medical care throughout their incarceration. Early identification of problems using a systematic intake evaluation prevents serious and costly problems from developing. Because the MCP is a work camp, vitals, medical history, and evaluations can only be a level 1 for state inmates to stay at the MCP. If the inmate has too many health issues, as determined by the Georgia Department of Corrections, the inmate is sent to another facility that is not a work camp.

Screenings include:

Inquiry into current illnesses, health problems, and conditions:

- Illnesses and special health needs, including allergies
- Current medications
- History of hospitalization
- Dental conditions or complaints
- History of tuberculosis or other infectious diseases)
- Medical dietary needs
- Drug and alcohol use, including types, methods, date and time of last use, problems associated with ceasing use, and history of substance abuse treatment
- Tobacco use
- Current pain
- Notation of personal physician and any medical risks

Visual observation of inmate:

- Abnormal appearance (e.g., sweating, tremors, anxious, disheveled, signs of trauma or abuse)
- Restricted or compromised movement (e.g., body deformities, physical abnormality, unsteady gait, cast or splint)
- Abnormal breathing or persistent cough
- Skin conditions, including obvious lesions or wounds, lice, jaundice, rash, bruises, edema, scars, tattoos, and needle marks



- Seizures
- New or recent injuries
- Mental conditions or personality disorders (potential for violence)
- Any contagious illness or disease that poses an immediate threat to the inmate population or detention staff
- Any other issues deemed urgent or emergent

Receiving Screening Guidelines

Our physician-approved Receiving Screening guidelines guide the assessment, treatment, and referral process of inmates admitted with health care needs. CCS nurses follow these guidelines to determine the appropriate intervention based on various conditions presented at intake. The responsible physician or designee trains the health care staff in the early recognition of medical needs requiring clinical attention. Training includes instructions on completing the Receiving Screening form and when to contact medical staff to determine appropriate disposition of the patient.

MUSCOGEE COUNTY PRISON		
INMATE PHYSICAL & LAB WORK PROCEDURES		
AGE GROUP	PHYSICAL SCHEDULE	BLOOD WORK TO BE DONE
17 to 34	Every 3 years	HIV, RPR
34 to 40	Every 3 years	HIV, RPR & Fasting Lipid Panel <i>CMP</i>
41 to 49	Every 2 years	HIV, RPR, Fasting Lipid Panel
50 & Over	Every year	HIV, RPR, Fasting Lipid Panel, CMP, PSA, FOBC = Occult Blood

Admission Deferrals

Admission to the MCP requires clearance for injuries or medical problems. Health care staff performing the intake screening may identify inmates whose clinical status suggests a need for immediate health services beyond the scope of care available at the MCP. In such cases, patients are referred immediately for care to a local emergency room or approved hospital. The inmate's subsequent admission to the MCP requires written medical clearance from the hospital.

CCS currently performs Quality Improvement reviews on all admission deferrals, as well as a utilization review on all emergency room and hospital-direct admissions/pre-booking injuries/illnesses, to ensure inmates return as soon as clinically indicated.

Access to Care

During the intake screening process, we advise all inmates of their right to access care and the process for requesting health care services. We communicate this information upon the inmate's arrival at the MCP verbally and in writing in a language he or she comprehends. We ensure that non-English speaking inmates understand how to obtain health care.

Medication Verification

Prescription medications are prescribed only by licensed physicians, physician's assistants, or nurse practitioners within the scope of their licensures. If there is an immediate need to initiate medication, the medication is obtained from the MCP's backup pharmacy, CVS. *Medications for life-threatening or serious chronic diseases are not delayed on admission.*



Nursing Documentation Pathways

CCS nurses conduct sick call using Nursing Documentation Pathways (NDPs), which represent a standard of care to be provided to patients in a variety of situations. CCS physicians developed the NDPs to assist nurses with diagnoses and ensure consistent care.

NDPs provide a **consistent structure for patient care, justification for actions, and a set of interventions specific to the patient's presenting condition**. Their purpose is to provide facts and information regarding specific health conditions or complaints. This information facilitates the nurse's ability to draw logical conclusions from observations and provide appropriate intervention and follow up for a particular health condition.

In its simplest form, a Nursing Documentation Pathway is a decision-tree process for nurses to follow, which also improves ease of training and **maximizes practitioners' time**. We train all CCS nurses in the use of NDPs.

The CCS Nursing Documentation Pathways manual for the MCP is subject to your approval. The manual is reviewed annually by the site Medical Director and updated as required by the CCS Nursing Department. As part of the annual review process, the site coordinator instructs all nursing staff on revised NDPs.

Provider Clinics

Patients referred for provider consultation are seen during the next scheduled provider clinic. A physician or mid-level provider conducts provider clinics on and scheduled with a frequency and duration sufficient to meet the health needs of the patient population. A physician or mid-level provider is also available on-call 24/7 for emergencies.

The medical provider assesses the patient and provides the appropriate treatment and follow-up. CCS practitioners use evidence-based practices to make clinical decisions regarding patient treatment. CCS has developed Clinical Monographs that represent best practices our practitioners should use when treating both episodic and chronic medical needs. CCS practitioners also receive training from the CCS Clinical Department on clinical decision making in the correctional environment.

4. Chronic Care

CCS tracks all inmates with chronic illnesses on a chronic care roster and reports these inmates to the MCP monthly. We maintain a list of chronic care patients that includes the date of intake, date referred to the chronic care program, date of most recent visit, and date of next scheduled visit. Monthly Medical Audit Committee (MAC) meetings include discussion of statistics such as number of patients by chronic care diagnosis and number of chronic care patients seen in the clinic by the providers. The frequency of chronic care visits is determined by the medical provider, based on the patient's condition(s). CCS



Health care services are provided by persons who are fully qualified and appropriately licensed, certified, or registered in the State of Georgia.

7. Emergency Services

CCS provides emergency medical services 24 hours a day for any person accepted into the custody of the MCP pursuant to Georgia State law. We establish a physician/mid-level provider "call back" schedule during off hours so that urgent but non-emergent services, such as suturing, can be provided on-site.

Correctional health care personnel are trained to respond to emergencies within four minutes. A CCS staff member responds to all emergencies upon notification by reporting to the area of the emergency with necessary emergency equipment and supplies. The patient is stabilized on-site, then transferred to an appropriate medical facility, if necessary.

By training our nurses in emergency response, CCS reduces off-site/ER trips and hospital stays. CCS staff determines if a patient needs to be transported to a local emergency room for treatment. We coordinate with local hospitals, including the Piedmont Medical Center, as appropriate in emergency situations, and coordinate emergency transport and ambulance services with correctional staff as needed.

On-site health care staff may make emergency off-site referrals based on established guidelines and their professional interpretation of a patient's need. The on-call physician is notified as soon as the situation allows. The CCS Medical Director conducts a retrospective review following an ER referral to ensure that the action was appropriate and identify additional staff training requirements.

Retrospective Review Form for Emergency Services – Care Management System

The screenshot shows the ERMA software interface for a retrospective review form. The patient information section includes: Name: Bruce Wayne, Inmate#: 951, SSN: 547896320, DOB: 2/12/1958, Site: Oz Correctional..., Sex: M, Custody: 4/1/2010, Housing: N/A, Type: None. The common referral reasons section has checkboxes for Infirmity Housed, Workers Comp, Confirmed Inmate Violence, Probable Inmate Violence, Not Financially Liable, Other Insurance, Inpatient Stay, and Prebooking Event. The referral type is set to ER/Inpatient. The service section includes Category of Service (Emergency Room, Direct Admit Patient), Means of Transportation (custody car, ambulance, air ambulance), Hospital Name, Date of Service / Admission, Diagnosis, and Reason for ER Visit. A tree view on the left shows the referral history for the patient, with the most recent referral selected: 12/3/2008 #41912.



Emergency Room and Inpatient Referral Form – Care Management System

The screenshot shows a web-based form for creating referrals. On the left is a navigation menu with 'New Referral' and 'Off Site Services'. The main form area is titled 'Patient Eligibility' and contains several sections:

- Requesting Provider:** Radio buttons for 'Pre-Sentenced' (selected) and 'Sentenced'.
- Insurance/Status:** Checkboxes for 'Pre-Booking', 'Probable Inmate Violence', 'Workers Compensation', 'Safekeeper', 'Pre-Existing', 'Confirmed Inmate Violence', 'Not Financially Liable', and 'Medicaid'. 'Other Insurance' is a text input field.
- Bed Type:** Radio buttons for 'Inpatient Stay' (selected) and 'Observation'.
- Referral Type:** A dropdown menu with 'ER/Direct Admit' selected.
- Service Details:** A button to expand this section.
- Treatment Type:** Radio buttons for 'EMERGENCY ROOM' (selected) and 'DIRECT ADMIT'.
- Means of Transportation:** Radio buttons for 'Custody Car' (selected), 'Ambulance', and 'Air Ambulance'.
- Hospital Name:** A text input field.
- ER Admit Date:** A date/time picker set to 12:00 AM.
- Discharge Date:** A date/time picker set to 12:00 AM.
- Presenting Problem:** A text area with 'Diagnosis' and 'No records to display.' below it.
- Reason for Visit:** A text area.

 At the bottom are buttons for 'Send', 'Submit', 'Cancel', and 'View Chart'.

CCS provides the MCP with a daily inpatient report that can be accessed directly through the CCS Care Management system. We communicate frequently with the MCP to provide the most complete evaluation and treatment of your patient population.

9. Case Management

Case management is conducted by counselors at the MCP.

10. Utilization Management

The CCS Care Management Program uses evidence-based guidelines to determine medical necessity as part of our approval process. Medical Director of Care Management, Dr. Erin Orlebeke, oversees our Care Management clinical program. Pablo Viteri, Vice President of Care Management, provides operational management of the program. Dr. Orlebeke and the Care Management team work together with the Regional Medical Director and on-site medical personnel to ensure that patients receive medically necessary health care services in the most appropriate setting.

Utilization Review

CCS uses an established review process to ensure that off-site referrals are medically necessary and that any payments made are appropriate. We coordinate, validate, and track off-site care and invoicing through the Care Management system, which generates reports that allow us to analyze the utilization of off-site services on behalf of our clients.

CCS uses this data to assess the need for additional on-site and off-site services. We continuously evaluate the number of cases as well as the costs associated with transporting inmates in determining which clinics are held on-site. Constant evaluation of specialty services ensures the most cost-effective solution for clinics.



13. Quality Assurance/Quality Improvement

CCS uses proven performance monitoring techniques at the MCP, including our Continuous Quality Improvement Program (CQIP). CQIP includes audit and medical chart review procedures to meet compliance with contract requirements, as well as NCCHC and ACA standards. We also conduct Medical Audit Committee (MAC) meetings and peer reviews to evaluate the MCP health care program.

Continuous Quality Improvement Program

CCS remains focused on providing high quality care for our patients. Our policies and procedures and a data-driven CQIP promote continued quality of our medical programs. The CCS CQIP ensures that clinical care delivery meets our high expectations, as well as NCCHC and ACA standards.

The CQIP is defined by written policies and procedures, and is operated under the authority of CCS Chief Clinical Officer Carl Keldie, MD. The goal of the CQIP is to ensure that systems and programs work effectively to guarantee that patients receive quality health care services. CCS uses established techniques like electronic CQI screens and advanced technology to make our programs even better.

Scope of CQIP

We conduct CQI studies to ensure that all services at the MCP meet established minimum thresholds. We do this by monitoring relevant areas for quality improvement, including accreditations, credentialing, environmental inspections, emergency drills, nursing, intake, medication management, special housing, and ancillary services.

Routine CQI studies examine areas where overlap or hand-offs occur, as well as other problem-prone, high frequency/volume, and risk management processes, including but not limited to Receiving Screenings, Screening and Evaluation at Health Assessment, Special Needs, Segregation, Treatment Planning, Suicide Prevention, Medication Administration, Initiating Medication at Intake, as well as processes exclusive to the MCP.

We complete monthly CQI screens as outlined in the CCS CQI Calendar, plus at least one ad hoc screen per quarter to evaluate a site-specific issue presenting challenges.

Examples of ad hoc screens include:

- Missed Medication (investigative study)
- TB Screening
- Health Assessment – Periodic
- Grievances
- Communication with Custody
- Initiating Essential Medications – Return from Hospital

Quality Improvement Committee

A multidisciplinary Quality Improvement Committee (QIC) directs all QI activities. The QIC is led by the CCS Medical Director and includes the site's designated dentist, site coordinator, site Safety Coordinator, and appropriate MCP representative(s). The QIC typically meets quarterly to review significant issues and changes and provide feedback for improving processes or correcting deficiencies.



14. Inmate Health Education

CCS emphasizes the importance of patient education at all of our client sites. It is imperative that inmates receive basic, and often critical, knowledge about common health care needs, issues, and diseases. CCS staff provides MCP inmates with complete education information upon orientation and admittance to the MCP. This information is reinforced during subsequent health care encounter as determined by the provider. Detailed information is provided on health issues to promote self-care strategies. These include, but are not limited to, personal hygiene, healthy lifestyle choices, sleep, and how to maintain optimal health. Health education can also be provided through group sessions for more widespread issues such as MRSA, smoking cessation, fitness, and the flu.

Inmates with chronic conditions (e.g., asthma, diabetes) receive additional health education on proper health management and nutrition. CCS staff educates inmates on their condition, their role in the treatment plan, and the importance of following their plan. Education also includes recommendations for lifestyle modifications and information regarding continuity of care upon release. The education is documented in the inmate's health record.

15. Medical Records Management

CCS maintains up-to-date medical records at all times, consistent with NCCHC, ACA, and GBC standards, MCP policies and procedures, community standards of practice, and all federal, state, and local laws. Following the receiving screening, health care staff initiates a comprehensive medical record that becomes the single source of medical and dental information for each inmate. CCS staff enters patient information in the individual medical record. Each record contains an accurate account of the inmate's health status at the time of admission, patient-provider encounters, and on-site and off-site services provided.

At a minimum, medical records contain:

- Identifying information (i.e., name, number, date of birth, sex)
- A problem list containing medical diagnoses and treatments and known allergies
- Receiving screening and health assessment data
- Progress notes of all significant findings, diagnoses, treatments, and dispositions
- Clinician orders for prescribed medication and medication administration records
- Reports of laboratory, X-ray, and diagnostic studies
- Flow sheets
- Consent and refusal forms
- Release of information forms
- Results of specialty consultations and off-site referrals
- Discharge summaries of hospitalizations and other inpatient stays
- Special needs treatment plans, if applicable
- Immunization records, if applicable
- Place, date, and time of each clinical encounter
- Signature and title of each documenter



CCS Care Management system. The Regional Medical Director reviews each request and either approves or recommends an alternative treatment plan.

19. In clinic labs

CCS provides on-site laboratory services through our national contract with Laboratory Corporation of America (LabCorp). With more than 35 years of experience serving physicians and their patients, LabCorp operates a sophisticated laboratory network, performing more than one million tests on more than 370,000 specimens each day.



The laboratory program for the MCP includes necessary supplies and a dedicated printer, timely pickup and delivery, and accurate reporting within 24 hours on most labs. All health care personnel are trained in the collection and preparation of laboratory specimens.

The majority of all phlebotomy and lab services are processed on-site, including but not limited to:

- Dipstick urinalysis
- Finger-stick blood glucose
- Stool blood testing

A medical provider reviews and signs off on all lab results. If test results indicate a critical value, the provider also receives a telephonic alert. Laboratory results are reviewed within 24-48 hours (72 hours for weekends and holidays). The provider reviews all STAT lab reports and any abnormal test results. Preliminary results, when available, undergo medical review.

The laboratory program for the MCP complies with all standards set forth by the American College of Pathology and all State of Georgia requirements for medical pathology, specimen handling, testing, and reporting. We perform on-site services in accordance with the Clinical Laboratories Inspection Act (CLIA) and comply with the Clinical Laboratory Improvement Amendments of 1988.

CCS trains all on-site staff on our laboratory policies and provides a diagnostic procedure manual that includes reporting on STAT and critical values. We document all diagnostic laboratory reports and resulting follow-up care in the patient's medical record.

20. In clinic x-ray services

CCS identifies the most cost-effective and comprehensive radiology program in consultation with the City. We have a national contract with MobilexUSA to provide on-site radiology services. Mobilex is the country's leading provider of mobile X-ray and ultrasound services, serving more than 6,000 facilities nationwide. CCS works with Mobilex and City to establish a routine schedule for on-site radiology services, including:



- Mobile X-ray services
- Ultrasounds
- Sonograms
- Doppler studies
- Mammograms



EMERGENT	URGENT
<ul style="list-style-type: none"> • Tooth avulsion • Suspected fractured jaw • Difficulty breathing or swallowing due to swelling from tooth abscess • Uncontrollable bleeding • Acute cellulites compromising the airway 	<ul style="list-style-type: none"> • Pericoronitis • Heavy calculus accumulation with inflammation • Visual evidence of decay • Visual evidence of missing filling(s) • Swelling surrounding affected tooth/teeth • Redness of gingival surrounding affected tooth/teeth • Drainage from affected tooth/teeth • Generalized facial/cheek/jaw swelling without compromise to airway

Quality Improvement

CCS completes regular dental audits to ensure the provision of appropriate services at the MCP.

Dental audits ensure, at a minimum:

- Proper PPE is worn when treating patients
- Patients are wearing protective eyewear when receiving treatment
- Instruments are properly sterilized
- Instrument counts are logged properly
- Weekly spore counts are conducted
- All nursing staff have completed dental screening training and competency assessment
- Proper maintenance of equipment logs
- Current certifications for anyone taking dental X-rays
- Sharps counts are conducted and logged properly
- Peer reviews are current on the dentist

22. Hazardous Waste Management and Disposal

CCS has a national contract with Stericycle for bio-hazardous and infectious waste disposal. Through the services of Stericycle, a leader in the medical waste industry, CCS collects, stores, and removes all infectious waste and sharps containers in accordance with state and federal regulations. The City approves scheduling and removal frequency.



Policies and Procedures govern biomedical waste disposal, which includes the proper containment, housing, and disposal of waste. Stericycle provides red biohazard bags and boxes for bundling and disposal. We control the proper disposal of sharps by using sharps disposal containers. Waste volume and storage space are considered when establishing pick-up frequency. The site coordinator maintains pick-up manifest tracking forms on-site. Health care staff follows standard precautions to minimize the risk of exposure to blood and body fluids of potentially infected patients.



1. Formulary and Non-Formulary Oversight

CCS uses a formulary to manage pharmaceutical costs for the City. In a correctional facility, formulary usage with strict compliance significantly decreases total monthly pharmacy invoices. Diamond's formulary experts combine decades of correctional pharmacy experience with clinical expertise unique in the industry.

We constantly review the CCS formulary and modify it as needed through addenda and memoranda to reflect any changes to the paper copy or electronic format. Immediate changes, with the approval of the CCS Medical Director and the City will be incorporated with the release of new medications, when clinical information identifies previously unknown safety concerns, and/or when generic products become available.

Utilization is important for formulary management and development, but other ideals are just as important. Diamond reviews and provides evidence-based literature review articles specific to areas that may affect utilization and the cost-effectiveness of medications. They monitor daily pricing fluctuations. To assist in this effort, Diamond's pharmacists receive daily price-change reports for review, as well as weekly information from Diamond's wholesaler when new medications are expected to receive generic approval and pricing. They provide this information to the CCS Medical Director for review when assessing a medication's formulary status.

Diamond's clinical pharmacists screen for interactions, allergies, and other potential issues such as non-formulary medications that may need to be addressed with on-site staff before dispensing the order. Diamond maintains a current version of the Medi-Span® database as a consultative resource. This database is the most authoritative, comprehensive, and up-to-date drug interaction and drug allergy screening reference tool available. It equips Diamond pharmacists and technicians with timely and clinically relevant information on both prescription and OTC medications, enabling them to measurably improve patient outcomes through effective drug therapy hazard monitoring.

To ensure safe and therapeutic medication administration, Diamond clinical pharmacists thoroughly screen each patient's complete computerized medication profile before filling any order. Diamond also contacts CCS before filling prescriptions for expensive medications so on-site medical staff can consider alternatives or request a smaller supply if a patient is scheduled for release.

Before dispensing, Diamond's pharmacists check orders for the following:

- Duplicate therapy from medications in the same therapeutic class
- Medication interactions and incompatibilities (including drug-drug, drug-order, and drug-age interactions)
- Excessive/sub-therapeutic dosages
- Appropriateness of medication therapy
- Medications refilled too soon, based on facility-specific established parameters
- Medications ordered past the designated stop date
- Clinical abuse or misuse
- Medications that are to be administered as DOT only
- Medications that are to be administered from stock only



charts and 400 figures depicting yearly trends. Diamond can customize and create reports to meet the MCP's specific needs. Data fields include patient name, detainee/patient number, correctional facility, provider name, date of service, prescription number, medication name, medication class, medication strength, quantity dispensed, days' supply, and drug cost.

Basic, ad hoc, requested, and customized reports all are provided at no additional cost, either in hard copy or electronically in Microsoft Excel. In addition to standard monthly, quarterly, and annual reports, Diamond provides ad hoc reports upon request. Most ad hoc reports are provided within 1-2 business days, depending on complexity. Reports requested by security to locate diverted medications are usually available in less than an hour.

5. Reports shall be delivered in a mutually agreed upon HIPAA-compliant format.

CCS will continue to provide all requested reports in an HIPAA-compliant format. CCS is diligent in the protection of all Personal Health Information (PHI) for our patients.

6. Medication Security and Proper Storage

Medications and pharmaceutical supplies are stored in a secure, locked area in the medical unit of the MCP. Bulk supplies are maintained separately and inventoried weekly and when accessed. Records ensure adequate control.

The medication room and all cabinets are locked at all times when health care staff are not present. CCS staff is responsible for ensuring that all medications are secure. No inmate has access to medication other than those administered to them by a qualified staff member.

7. Contracted vendor shall invoice (monthly) the Muscogee County Prison for amounts paid by the contracted vendor, on behalf of the Muscogee County Prison for pharmacy services, and cost details for the same, plus the management fee (percentage).

CCS will invoice the MCP at cost plus a 3% fee.



geographical areas, and building up relationships with schools, associations, employment centers, and other recruitment assets. This dedicated team of Physician Recruiters, Nurse Recruiters, and Coordinators assist site leadership by identifying candidates, screening applications, conducting interviews, and providing insight on hiring decisions CCS only recruits and interviews candidates who are currently licensed or certified in the State of Georgia.

CCS uses the iCIMS Applicant Tracking System (ATS) to maximize our talent recruiting processes. Hiring Managers work with their recruitment team to post open positions in the ATS. The iCIMS Talent Acquisition Software Suite helps CCS leverage mobile, social, and video technologies to manage our talent acquisition lifecycle.

iCIMS helps CCS build talent pools, in addition to automating our recruitment marketing, applicant screening, and onboarding processes. The talent acquisition process is illustrated in the following figure.



The CCS Recruiting Process

We are implementing new programs to reach a greater number of potential candidates. Those programs include TextRecruit, which is a program that allows CCS to target and text health care professionals in specific zip and area codes. Since implementing this program, our recruiters have seen a 38% increase in response rate, and an average response time of two hours.

CCS is also piloting a new recruiting campaign using “target marketing” through Geofence technology to specifically target areas that employ health care professionals and send recruitment ads directly to their smart phone anytime they are in the area. This program began recently in Massachusetts and is scheduled for rollout in other regions throughout 2018. For more information on how Geofencing helps recruiting, please see this report from NBC Nightly News: <https://www.nbcnews.com/nightly-news/video/how-companies-are-usually-geofence-technology-to-find-new-hires-1048299587626>.

Equal Employment Opportunities

CCS is an Equal Employment Opportunity (EEO) employer. We have a thorough diversity policy that guides our recruiting and hiring processes. We comply with all provisions of federal, state, and local regulations to ensure that we never discriminate against an employee or applicant for employment because of race, religion, color, gender, sexual preference, marital status, age, disability, or national origin.



Commitment to People Development

CCS created its People Development program to invest in our employees' long-term professional satisfaction and well-being. Our dedication to development lowers employee turnover, reduces costs due to replacement and training, and strengthens team spirit through mutual respect and recognition of each employee's contributions.

Our successful operation begins with motivated employees who are well equipped to satisfy your needs. We identify, validate, and the very best people, then orient them to our culture and operations through an established onboarding process. CCS offers employees a full range of professional development opportunities that include training programs, continuing education, clinical exposure, promotion preparation, succession planning, and peer reviews.

Nurse Outreach and Support

CCS has adopted several outreach techniques for our valued nursing professionals, including advanced training opportunities and open communication through the Nurse Channel, an online resource for CCS nursing professionals. In addition to providing useful information, the Nurse Channel also recognizes CCS nurses that have done an outstanding job upholding our high standards for patient care.

Professional Development/Tuition Assistance

CCS encourages employees to take advantage of opportunities for advancement and professional growth. The CCS education and training program facilitates professional development and provides tuition assistance to employees as an opportunity to advance their skills and their career. Each year, CCS employees and their children who have graduated high school are encouraged to apply for CCS-sponsored college scholarships. In 2017, CCS awarded four \$2,500 scholarships to children of CCS employees who had graduated high school.

Employee Recognition

CCS has a formal Employee Recognition Program based on our company slogan: "The *Right* People Doing the *Right* Things *Right*." The program, known as "R³ Recognition," rewards employees for outstanding performance and exemplary service. The purpose of the program is to motivate positive job behavior and build a sense of pride in each employee.

Each CCS location incorporates "R³ Recognition" into its local operations. The primary program is the 5H Award, which represents the values by which CCS strives to exist: **Hunger, Honesty, Hard Work, Humility, and Humor**. CCS encourages the use of the 5H Program to recognize employees whose contributions echo these values. Each CCS location or territory is responsible for recognizing a particular staff member by creating an R³ Recognition Committee and celebrating recognized employees each month and quarter.



*"The Right People Doing
the Right Things Right."*

CCS presents recognition awards each month and quarter based on attendance, customer service, teamwork, and overall performance. The leadership team of each CCS business unit will chose one individual from each of the quarterly 5H Award Winners for nomination to the annual President's Award. All nominees for the quarterly award, Quarterly Award Winners, and President's Award Winners are recognized in the company newsletter and are eligible to receive a monetary award, certificate of recognition, and a gift.



Dare to Care

CCS established our Dare to Care Employee Assistance Fund to support our valued team members when they need it most. CCS employees and their eligible dependents can apply for economic assistance to help meet their needs in the event of unexpected economic hardship. Employees may be eligible for assistance if they experience extreme or catastrophic circumstances beyond their control, including loss of property due to natural disaster; life-threatening illness or injury; or the loss of a family member.

CCS started Dare to Care in 2010 in response to the flooding that devastated the City of Nashville. Since then, the program has provided nearly \$700,000 in financial assistance to more than 350 employees and their families across 36 states when they needed it most. Most recently, we assisted our fellow employees impacted by hurricanes in Texas and Florida by donating tens of thousands of dollars to Dare to Care. To date, Dare to Care has given over \$47,000 in assistance to employees in Georgia.



CCS partners with the Community Foundation of Middle Tennessee to manage all funds and award gifts, which keeps the application process private and ensures that requests for assistance are reviewed by an impartial and experienced third party. Dare to Care is funded through employee donations and matching contributions from CCS.



Shelby County Sheriff's Office

Shelby County Sheriff's Office

Address	201 Poplar Ave. Memphis, TN 38103
Period of Performance	7/1/06 – Present
Accreditation	NCCCHC, ACA, CALEA (Triple Crown)
ADP	2,500 adults; 50 juveniles
Transitioned from	Corizon

Summary of Services Provided

CCS is responsible for the comprehensive health care needs of adult and juvenile offenders housed in the Shelby County Jail, the Shelby County East Women's Facility, and the Juvenile Court of Memphis & Shelby County. We provide 24-hour coverage inclusive of medical, dental, mental health, and psychiatry services. CCS is responsible for all utilization management functions and we continually strive to find cost savings for our client by maximizing on-site services. The County uses our full ERMA solution, which interfaces with their Jail Management System and replaced the paper records system that was previously in use.



Section 7: Cost Proposal

As your incumbent provider for inmate healthcare, our experience has given us great insight into the specific needs of the MCP. Our staffing plan, which follows the guidelines laid out in RFP No. 18-0022, totals 7.625 FTEs (305 hours) and is comprised of: clinic management, medical providers, dental coverage, and licensed practical nurses.

- Our proposal includes a change to the management of the health operations at MCP. The RN on-site will now act as a 1.0 FTE Health Service Administrator (40 hours) and will report directly to CCS Regional Management; therefore, we will no longer be utilizing the HSA from the Muscogee County Jail in any capacity at the MCP. The MCP HSA will serve as a direct link to MCP leadership staff and will perform other duties that were previously handled by the MCJ HSA.
- We will provide 0.2 FTE (8 hours) Medical Director and an addition 0.2 FTE (8 hours) Nurse Practitioner for a total of 0.4 FTE for the medical provider.
- The CCS proposed dental coverage includes 0.1 FTE (4 hours) for a Dentist.
- CCS will provide LPNs 7 days a week at the MCP. Our nursing staff will consist of staff LPNs 5.0 FTEs (200 hours) to cover duties including but not limited to intake screenings, sick call, medication pass, chronic care management, and emergency response.
- Our proposal also includes the addition of 1.0 FTE (40 hours) for the Administrative Assistant. This addition will take the administrative task away from the clinical staff so they can focus on clinical duties.



Section 8: Contract Signature Page
FORM 6

CONTRACT SIGNATURE PAGE

**Inmate Medical and Pharmacy Services for Muscogee County Prison (Annual Contract)
RFP No. 18-0022**

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Patrick Cummiskey
Witness as to the signing of the contract

Angela Davis
Witness as to the signing of the contract

(Corporate seal, if applicable)

By: *ARCS* 5/16/2018
Signature of Authorized Representative Date

Patrick Cummiskey, President & Chief Strategy Officer
Print Name and Title of Signatory

Company: Correct Care Solutions

Company Ordering Address

1283 Murfreesboro Road, Suite 5000
Nashville, Tennessee 37217

Contact: Patrick Cummiskey

Contact Email Patrick@CorrectCareSolutions.com

Telephone 615-324-5777 Fax _____

Company Payment Address

P.O. Box 842750
Dallas, Texas 75284-2750

Contact: Andrea Renegar

Contact Email ARenegar@CorrectCareSolutions.com

Telephone: 615-844-5530 Fax _____

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this _____ day of _____, 20__

Isaiah Hugley, City Manager

APPROVED AS TO LEGAL FORM:

Clifton C. Fay, City Attorney

ATTEST:

Tiny B. Washington, Clerk of Council

****COMPLETE AND RETURN THIS PAGE WITH SEALED PROPOSAL****



Section 9: Agreement/Contract Form

AGREEMENT FOR INMATE HEALTH CARE SERVICES
AT MUSCOGEE COUNTY JAIL, COLUMBUS, GEORGIA
Effective September 1, 2018 through August 31, 2020

This Agreement for Inmate Health Care Services (hereinafter, the "Agreement") entered into by and between the Columbus Consolidated Government, a political subdivision in the State of Georgia (hereinafter, the "City"), acting by and through its duly City Council (hereinafter, the "Council") and Correct Care Solutions, LLC (hereinafter, "CCS"), a Kansas Limited Liability Company.

RECITALS

WHEREAS, the City and the Muscogee County Sheriff (hereinafter the "Sheriff") are charged by law with the responsibility for administering, managing, and supervising the health care delivery system of the Muscogee County Jail located at 700 10th Street, Columbus, Georgia (hereinafter, "Jail"); and

WHEREAS, the objective of the City is to provide for the delivery of quality health care to the Inmates and Detainees of the Jail (hereinafter, "Jail Population"), in accordance with applicable law; and

WHEREAS, CCS is in the business of administering correctional health care services and desires to administer such services on behalf of the City to the Jail Population under the terms and conditions hereof.

NOW, THEREFORE, in consideration of the covenants and promises hereinafter made, the Parties hereto agree as follows:

DEFINITIONS

Contract Year – The initial, and any successive, twelve (12) month period beginning with the effective date of the Agreement.

County Inmates/Detainees – An Inmate/Detainee held under the jurisdiction of the County or Sheriff. County Inmates/Detainees may be housed in the Jail or in another jurisdiction's correctional facility. However, County Inmates/Detainees housed in another jurisdiction are not covered by the provisions of this Agreement unless CCS administers health care services at the other jurisdiction's facility and is specifically set forth below.

Covered Persons – An Inmate/Detainee of the Jail who is: (1) part of the Jail's MADP; and (2) Fit for Confinement; and (3)(a) incarcerated in the Jail; or (b) on work release status. NOTE: Covered Persons include Other County Inmates/Detainees for purposes of delivery of basic health care services, however, the cost of certain services provided to Other County Inmates/Detainees are borne by the County as set forth in Section 5.0.

Detainee – An adult or juvenile individual whose sentence has not yet been adjudicated and is held as a pre-trial detainee or other individual held in lawful custody.

Fit for Confinement – A determination made by a CCS authorized physician that an Inmate/Detainee is medically stable and has been medically cleared for acceptance into the Jail. Such determination shall only be made after resolution of any injury or illness requiring immediate transportation and treatment at a hospital or similar facility.

Health Care Staff – Medical, mental health and support staff provided or administered by CCS.



- 1.3 **BODY CAVITY SEARCHES/COLLECTION OF PHYSICAL EVIDENCE.** CCS Health Care Staff will not perform body cavity searches, nor collect physical evidence (blood, hair, semen, saliva, etc.) except in accordance with NCCHC standards.
- 1.4 **DENTAL – TO BE COMPLETED BASED ON AWARD.**
- 1.5 **ELECTIVE MEDICAL CARE - NOT COVERED.** CCS shall not be responsible for the provision or cost of any elective care. In the event a member of the Jail Population requires elective care, the Inmate/Detainee or City shall be responsible for all costs. Elective medical care shall be defined as care which, if not provided, would not, in the sole opinion of CCS's Chief Clinical Officer or designee, cause the Inmate/Detainee's health to deteriorate or cause harm to the Inmate/Detainee's wellbeing. Decisions concerning elective medical care shall be consistent with the applicable American Medical Association (AMA) Standards.
- 1.6 **HOSPITALIZATION – TO BE COMPLETED BASED ON AWARD.**
- 1.7 **LONG TERM CARE - NOT COVERED.** CCS shall not be responsible for the provision or cost of any long term care facility services. In the event that a member of the Jail Population requires skilled care, custodial care or other services of a long term care facility, the City shall bear the cost.
- 1.8 **MENTAL HEALTH CARE – TO BE COMPLETED BASED ON AWARD.**
- 1.9 **PATHOLOGY/RADIOLOGY SERVICES – TO BE COMPLETED BASED ON AWARD.**
- 1.10 **PREGNANT COVERED PERSONS.** CCS shall arrange and bear the cost of on-site health care services for any pregnant Covered Person in accordance with NCCHC standards and this Agreement, but CCS shall not arrange or bear the cost of any health care services for infants. To the extent off-site health care services are required for any pregnant Covered Person, CCS shall make appropriate arrangements for rendering such care, but the cost of such off- site services shall be borne by the City.
- 1.11 **SPECIALTY SERVICES – TO BE COMPLETED BASED ON AWARD.**
- 1.12 **VISION CARE – TO BE COMPLETED BASED ON AWARD.**
- 1.13 **OFFICE EQUIPMENT – TO BE COMPLETED BASED ON AWARD.**
- 1.14 **OFFICE SUPPLIES – TO BE COMPLETED BASED ON AWARD.**
- 1.15 **MEDICAL SUPPLIES/EQUIPMENT – TO BE COMPLETED BASED ON AWARD.**
- 1.16 **MEDICAL WASTE – TO BE COMPLETED BASED ON AWARD.**
- 1.17 **PHARMACY SERVICES – TO BE COMPLETED BASED ON AWARD.**
- 1.18 **FINANCIAL LIMITATIONS – TO BE COMPLETED BASED ON AWARD.**

ARTICLE II
HEALTH CARE STAFF



- 3.2 **QUARTERLY REPORTS.** As requested by the Sheriff, CCS shall submit quarterly health care reports concerning the overall operation of the health care services program rendered pursuant to this Agreement and the general health of the Jail Population.
- 3.3 **QUARTERLY MEETINGS.** As requested by the Sheriff, CCS shall meet quarterly, or as soon thereafter as possible, with the Sheriff, or designee, concerning health care services within the Jail and any proposed changes in health-related procedures or other matters, which both Parties deem necessary.
- 3.4 **MEDICAL RECORDS MANAGEMENT.** CCS shall provide the following medical records management services:
- 3.4.1 **MEDICAL RECORDS.** CCS Health Care Staff shall maintain, cause or require the maintenance of complete and accurate medical records for Covered Persons who have received health care services. Medical records shall be kept separate from Covered Person's confinement records. A complete copy of the individual medical record shall be available to accompany each Covered Person who is transferred from the Jail to another location for off-site services or transferred to another institution. CCS will keep medical records confidential and shall not release any information contained in any medical record except as required by published Jail policies, by a court order or by applicable law. Upon termination of this Agreement, all medical records shall be delivered to and remain with the Sheriff, as property of the Sheriff's office.
- 3.4.2 **COMPLIANCE WITH LAWS.** Each medical record shall be maintained in accordance with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and any other applicable state or federal privacy statute or regulation.
- 3.4.3 **RECORDS AVAILABILITY.** As needed to administer the terms of this Agreement, CCS shall make available to the Sheriff or City, unless otherwise specifically prohibited, at the Sheriff's or City's request, all records, documents and other papers relating to the direct delivery of health care services to the Jail Population hereunder.

ARTICLE IV
PERSONS COVERED UNDER THIS AGREEMENT

- 4.0 **GENERAL.** Except as otherwise provided in this Agreement, CCS shall only be required to arrange for health care services under this Agreement to be provided to Covered Persons.
- 4.1 **EMERGENCY MEDICAL CARE FOR JAIL EMPLOYEES AND VISITORS.** CCS shall arrange for on-site first response emergency medical care as required for Jail employees, contractors and visitors to the Jail. The medical treatment shall be limited to the extent reasonably necessary to stabilize and facilitate the individual's referral to a medical facility or personal physician.
- 4.2 **RELEASE FROM CUSTODY.** The County acknowledges and agrees that CCS is responsible for the payment of costs associated with services rendered to Covered Persons as set forth in this Agreement only when such persons remain in the custody of, or under the jurisdiction of, the Jail. In no event shall CCS be responsible for payment of any costs associated with any services rendered to any individual when said individual is released from the custody of, or no longer under the jurisdiction of, the Jail including, but not limited to, releasees, parolees and escapees. Furthermore, in no event shall CCS be responsible for payment of costs associated with any medical services



of the medical judgment of a physician or CCS authorized personnel, CCS shall not be responsible for arranging such services and the cost of such services shall be billed directly to the City.

- 6.1 **SERVICES BEYOND THE SCOPE OF THIS AGREEMENT.** Both Parties understand and agree that there are certain occurrences, both beyond the control and within the control of the Parties, that may result in health care expenses which are outside the scope of the normal operation of a correctional facility and, therefore, outside the contemplated scope of services under this Agreement. While both Parties will act in good faith and endeavor to reduce the possibility of such occurrences, in the unlikely event of an occurrence such as an Act of God, riot, explosion, fire, food poisoning, epidemic illness outbreak or any other catastrophic event, or an event caused by the action or inaction of the City or Sheriff or their employees, agents or contractors, which results in medical care for the Jail Population, Jail staff, visitors, or contractors, CCS shall not be responsible for costs attributable to such catastrophic event and all such costs shall be borne by the City. Notwithstanding the above, CCS shall be responsible for medical costs under this Agreement associated with such an event only if such an event was caused solely by CCS.

ARTICLE VII CITY'S DUTIES AND OBLIGATIONS

- 7.0 **COMPLIANCE WITH HIPAA/STATE HEALTH INFORMATION PRIVACY LAWS.** The City, Jail, and Sheriff and their employees, agents and subcontractors shall comply with the Health Insurance Portability and Accountability Act of 1996 (hereinafter "HIPAA") and any State health information privacy laws, to the extent they are applicable. The City and the Sheriff shall implement policies and/or procedures in compliance with such laws.
- 7.1 **COMPREHENSIVE MEDICAL/MENTAL HEALTH CARE.** CCS shall identify to the Sheriff those members of the Jail Population with medical or mental health conditions which may be worsened as a result of being incarcerated at the Jail or which may require extensive care while incarcerated. After review of the circumstances, and when security risks permit, the Sheriff shall make every effort to have such an Inmate/Detainee released, transferred or otherwise removed from the correctional setting.
- 7.2 **RECORD ACCESS.** During the term of this Agreement, and for a reasonable time following the termination of this Agreement, the Sheriff shall provide CCS, at CCS's request, the City, Jail and/or Sheriff's records (including medical records) relating to the provision of health care services to the Jail Population, including records maintained by hospitals, and other outside health care providers involved in the care or treatment of the Jail Population (to the extent the City, Jail or Sheriff has control of, or access to, such records). CCS may request such records in connection with the investigation of, or defense of, any claim by a third party related to CCS's conduct or to prosecute a claim against a third party. Any such information provided by the Sheriff to CCS that the Sheriff considers confidential shall be kept confidential by CCS and shall not, except as may be required by law, be distributed to any third party without prior written approval by the Sheriff.
- 7.3 **USE OF INMATES/DETAINEES IN THE PROVISION OF HEALTH CARE SERVICES.** Inmates/Detainees of the Jail shall not be employed or otherwise engaged or utilized by either CCS or the Sheriff in rendering any health care services to the Jail Population, provided however, that Inmates/Detainees may be used in positions not involving the rendering of health care services directly to the Jail Population and not involving access to Jail Population records in accordance with NCCHC standards.



- office equipment. At such time, the office equipment shall be in good working order, reasonable wear and tear excepted.
- 7.9 **NON-MEDICAL CARE OF JAIL POPULATION.** It is understood that the Sheriff shall provide for all the non-medical personal needs and services of the Jail Population as required by law. CCS shall not be responsible for providing, or liable for failing to provide, non-medical services to the Jail Population including, but not limited to, daily housekeeping services, dietary services, building maintenance services, personal hygiene supplies and services and linen supplies.
- 7.10 **JAIL POPULATION INFORMATION.** In order to assist CCS in providing the best possible health care services to Covered Persons, the Sheriff shall provide, as needed, information pertaining to the Covered Person that CCS and the Sheriff mutually identify as reasonable and necessary for CCS to adequately perform its obligations under this Agreement.

**ARTICLE VIII
COMPENSATION AND ADJUSTMENTS**

- 8.0 **ANNUAL AMOUNT/MONTHLY PAYMENTS.** The base amount to be paid by the County to CCS is \$ _____ for a period of 12 months, payable in equal monthly installments. Each monthly installment shall be at \$ _____, pro-rated for any partial months and subject to any reconciliations as set forth below. The first monthly amount is to be paid to CCS on _____, _____ for services administered in the month of _____, 2018. Each monthly payment thereafter is to be paid by the City to CCS before or on the 1st day of the month of the month of service.
- 8.1 **QUARTERLY RECONCILIATION PROCESS.** CCS will provide a quarterly reconciliation with the City for any amounts owed by either Party pursuant to the terms of this Agreement, including, but not limited to:
- 8.1.1 **ADJUSTMENT FOR MADP.** For each month reconciled, if the Jail's MADP is greater than _____ Inmates/Detainees, the compensation payable to CCS by the City shall be increased by the number of Inmates/Detainees over _____ at the per diem rate of \$ _____.
 - 8.1.2 **ADJUSTMENTS FOR COSTS IN EXCESS OF CAP AMOUNTS – TO BE COMPLETED BASED ON AWARD.**
 - 8.1.3 **ADJUSTMENTS FOR PHARMACY PASS-THROUGH COSTS – TO BE COMPLETED BASED ON AWARD.**
 - 8.1.4 **ADJUSTMENTS FOR OFF-SITE SERVICES PASS-THROUGH COSTS – TO BE COMPLETED BASED ON AWARD.**

**ARTICLE IX
TERM AND TERMINATION**

- 9.0 **TERM.** The term of this Agreement shall be one year from July 1, 2018 at 12:01 a.m. through June 30, 2020 at 11:59 p.m. This Agreement shall automatically renew for an additional two one (1) year periods on July 1st following the initial term. Annual renewals after the initial term shall



City, the One Hundred Twenty (120) day notice shall become null and void and this contract will remain in full force and effect. Termination under this provision shall be without penalty to the County.

- 9.4 **TERMINATION WITHOUT CAUSE.** Notwithstanding anything to the contrary contained in this Agreement, the City or CCS may, without prejudice to any other rights it may have, terminate this Agreement for their convenience and without cause by giving ninety (90) days advance written notice to the other Party.
- 9.5 **COMPENSATION UPON TERMINATION.** If any of the above termination clauses are exercised by any of the Parties to this Agreement, the City shall pay CCS for all services rendered by CCS up to the date of termination of the Agreement regardless of the City's failure to appropriate funds.
- 9.6 **PROPERTY DISPOSITION UPON TERMINATION.** Upon termination of this Agreement, CCS shall be allowed to remove from the Jail any stock medications or supplies purchased by CCS that have not been used at the time of termination. CCS shall also be allowed to remove its property from the Jail including its proprietary Policies and Procedures, Manuals, Training Material, and Forms.

**ARTICLE X
LIABILITY AND RISK MANAGEMENT**

- 10.0 **INSURANCE COVERAGE.** CCS shall, at its sole cost and expense, procure and maintain during the term of this Agreement, the following coverage and limits of insurance:
 - 10.0.1 **MEDICAL MALPRACTICE/PROFESSIONAL LIABILITY.** Medical Malpractice/ Professional Liability insurance in an amount not less than \$5,000,000 per occurrence and \$5,000,000 in the aggregate. If coverage is on "claims made" basis, CCS will maintain comparable coverage and limits for a minimum of four (4) years following the expiration date of this Agreement.
 - 10.0.2 **COMPREHENSIVE GENERAL LIABILITY.** Comprehensive General Liability insurance in an amount not less than \$5,000,000 per occurrence and \$5,000,000 in the aggregate. In addition to Personal and Adv. Injury \$1,000,000 and Products-Completed Operations Aggregate \$2,000,000.
 - 10.0.3 **WORKER'S COMPENSATION.** Worker's Compensation coverage as required by applicable state law.
- 10.1 **PROOF OF INSURANCE.** CCS shall provide the City proof of professional liability or medical malpractice coverage for CCS's Health Care Staff, employees, agents and subcontractors, for the term services are provided under this Agreement. CCS shall promptly notify the City, in writing, of each change in coverage, reduction in policy amounts or cancellation of insurance coverage. If CCS fails to provide proof of adequate insurance within a reasonable time under the circumstances, then the City shall be entitled to terminate this Agreement without penalty to the City pursuant to the terms of Article IX.
- 10.2 **INDEMNIFICATION.** CCS agrees to indemnify and hold harmless the City, its officials, agents, and employees from and against any and all claims, actions, lawsuits, damages, judgments or liabilities of any kind whatsoever caused by, based upon or arising out of any act, conduct, misconduct or omission of CCS, its agents, employees, or independent contractors in connection



- 11.2 **AGENCY.** For purposes of asserting any statutory rights afforded to the City to pay providers for medical services at certain reduced rates, City designates CCS as their agent to assert such rights and privileges.
- 11.3 **EQUAL EMPLOYMENT OPPORTUNITY.** CCS will not discriminate against any employee or applicant for employment because of race, color, religion, sex, ancestry, national origin, place of birth, marital status, sexual orientation, age or handicap unrelated to a bona fide occupational qualification of the position or because of status as a disabled veteran or Vietnam-Era veteran. CCS will distribute copies of its commitment not to discriminate to all persons who participate in recruitment, screening, referral and selection of job applicants, and to prospective job applicants.
- 11.4 **WAIVER OF BREACH.** The waiver of either Party of a breach or violation of any provision of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent breach of the same or other provision hereof.
- 11.5 **OTHER CONTRACTS AND THIRD-PARTY BENEFICIARIES.** The Parties acknowledge that CCS is neither bound by or aware of any other existing contracts to which the City is a party and which relate to the providing of health care to Inmates/Detainees at the Jail. The Parties agree that they have not entered into this Agreement for the benefit of any third person or persons, and it is their express intention that this Agreement is for their respective benefits only and not for the benefits of others who might otherwise be deemed to constitute third-party beneficiaries thereof.
- 11.6 **FORCE MAJEURE.** In case performance of any terms or provisions hereof shall be delayed or prevented because of compliance with any law, decree or order of any governmental agency or authority of local, State or Federal governments or because of riots, war, terrorism, explosions, acts of civil or military authority, acts of public enemy, public disturbances, lack of adequate security escorts, strikes, lockouts, differences with workers, earthquakes, fires, floods, Acts of God or any other reason whatsoever which is not reasonably within the control of the Party whose performance is interfered with and which, by the exercise of reasonable diligence, said Party is unable to prevent; the Party so suffering may, at its option, suspend, without liability, the performance of its obligations hereunder during the period such cause continues.
- 11.7 **CHANGES IN SCOPE.** If at any time during the Term of this Agreement (as amended), there is a material change in the scope of services provided by CCS as a result of new, amended, and/or a repealed law or laws (including statutes, codes, and/or case law), related legislation, and/or applicable regulations, the Parties hereby agree to re-negotiate the affected terms of this Agreement in good faith, and within a reasonable time not to exceed 30 days from the effective date of the material change. In the event the Parties are not able to re-negotiate the affected terms of this Agreement, either Party may terminate the Agreement without cause upon providing 60 days advance written notice.
- 11.8 **ASSIGNMENT.** Except as otherwise provided herein, no Party to this Agreement may assign any of its rights or delegate any of its duties under this Agreement without the prior written consent of the other Parties; provided however, that CCS may assign its rights or delegate its duties to an affiliate of CCS, or in connection with the sale of all or substantially all of the stock assets or business of CCS, without the prior written consent of the other Parties. Any unauthorized attempted assignment shall be null and void and of no force or effect.
- 11.9 **NOTICES.** Any notice of termination, requests, demands or other communications under this Agreement shall be in writing and shall be deemed delivered: (a) when delivered in person to a



AGREED TO AND ACCEPTED AS STATED ABOVE

**COLUMBUS CONSOLIDATED
GOVERNMENT**

CORRECT CARE SOLUTIONS, LLC

Name: _____

Name: Chris Bove

Title: _____

Title: Chief Operating Officer

Date: _____

Date: _____

SAMPLE



Part B: Business Requirements

Please see sections 1-4 (Form 3, Form 4, and a recent copy of our Business License) as required by the RFP in the separate envelope in the Original Proposal, back pocket.

Karen Pridgen

4833 FREEMAN COURT, COLUMBUS, GA 31907 – (706-536-7611) – pridgen65@gmail.com

Professional Summary

Dedicated Registered Nurse with 20 years of nursing experience, seeking position in a facility that diagnoses and manages both common and complex medical conditions in patients of all ages. Self-directed with astute judgment skills. High level of personal accountability.

Skills

- Qualified critical care nurse
- Qualified post anesthesia care unit
- Qualified correctional medicine
- Thorough physical assessments
- Strong clinical judgment

Work history

LEAD RN

CORRECT CARE SOLUTIONS (MUSCOGEE COUNTY PRISON) 7175 Sacerdote Lane- Columbus, GA

Oct 2013 – Present

- Liaison between patients and physicians to ensure patient comprehension of treatment plans.
- Liaison between Client and CCS Health Services Administrator.
- Responsible for ensuring all new hires complete State and County Mandated training to work at the Muscogee County Prison.
- Conducts mandated health screenings physicals and special education assessments. Ensured external follow-up where required.
- Supervise nursing staff to include scheduling, training, evaluations, and disciplinary.
- Monthly reports and meetings for Client to include Medical Transfers, Offender Incident Reports and Workman's Comp, Offender Staff, Safety & Sanitation, and CQI.
- Coordinate Offsite Mental Health appointments
- CCS Monthly Reports
- Inventory medical supplies for ordering

REGISTERED NURSE - POST ANESTHESIA CARE UNIT / OUTPATIENT SERVICES MANAGER

JACK HUGHSTON MEMORIAL HOSPITAL 4401 RIVER CHASE DRIVE PHENIX CITY, AL Nov 2010 – May 2013

- Manage patient's pain relief and sedation by providing pharmacologic and non-pharmacologic interventions, monitoring patient's response and changing care plans accordingly.

MEDIC, LICENSED PARCTICAL NURSE, REGISTERED NURSE

Mar 1991 – Mar 2003

UNITED STATES ARMY RESERVE

FT. BENNING, GA

Education

Associate of Science: Nursing

1996

CHATTAHOOCHEE VALLEY COMMUNITY COLLEGE

Phenix City, AL

Nursing

1994

COLUMBUS TECHNICAL INSTITUTE

Columbus, GA

Associate of Science: Nursing

1985

MORRISTOWN

Morristown, TN

High School Diploma: General Studies

1983

HARDAWAY HIGH SCHOOL

Columbus, GA

Certifications

- Registered Nursing Georgia, RN 132833, exp: 1/31/2019
- BLS – Basic Life Support, exp. 03/2019