

# REQUEST FOR PROPOSAL

#6789

## Inmate Medical Services

2201 Hogback Road  
Ann Arbor, Mich. 48105

FOR

## Washtenaw County Sheriff's Office

Issued By:

Washtenaw County Purchasing  
Administration Building  
220 N. Main Street  
Ann Arbor, MI 48104

Beth A. Duffy, CPPB  
Senior Buyer  
(734) 222-6761



**Proposal Submitted by:**

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*Please type Bidder's Company Name & include as proposal cover*

RFP 6789 Inmate Medical Services for Washtenaw County  
Sheriff

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**WASHTENAW COUNTY**

Finance Department

**Purchasing Division**

220 N. Main, Ann Arbor, MI 48104  
Phone (734) 222-6760, Fax (734) 222-6764  
[www.purchasing.ewashtenaw.org](http://www.purchasing.ewashtenaw.org)

**RFP #6789**

July 10, 2014

Washtenaw County Purchasing Division on behalf of Washtenaw County Sheriff's Office with a rated capacity for 402 inmates, is issuing a sealed RFP #6789 for Inmate Medical Services.

**Sealed Proposals:** Vendor will deliver one (1) **unbound original** and six (6) **bound copies each with the pricing page flagged** to the County location specified below. In addition, vendor will also deliver an electronic copy on a USB drive, CD-RW, or DVD in pdf format to the location specified below:

**Washtenaw County  
Administration Building Purchasing Division  
220 N. Main St. Basement  
Ann Arbor, MI 48104**

**Thursday, August 28, 2014 at 2pm EST**

A **Non-Mandatory Pre Bid meeting** will be held at the Washtenaw County Sheriff's Office, 2201 Hogback Rd., Ann Arbor, MI 48105 on **Wednesday, July 23, 2014 at 1pm EST**. Equal opportunity will be provided for all respondents to ask questions with a Jail tour to follow.

**Proposals received after the above cited time will be considered a late bid and are not acceptable unless waived by the Purchasing Manager.**

- Your proposal submission envelope must be clearly marked *including FedEx & UPS package labels* "**SEALED RFP#6789**"
- Please direct purchasing and procedural questions regarding this RFP to Beth Duffy **via e-mail only** to [duffy@ewashtenaw.org](mailto:duffy@ewashtenaw.org)
- Please direct technical questions regarding this RFP to Sherry Woods, Corrections Commander contact **via e-mail only** to [woodss@ewashtenaw.org](mailto:woodss@ewashtenaw.org)

Thank you for your interest.

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## PROPOSAL INFORMATION

### I. PROPOSAL DEFINITIONS [TOC](#)

#### Definitions

“Bidder”	An individual or business submitting a bid to Washtenaw County
“Contractor/Vendor”	One who contracts to perform services in accordance with a contract
“County”	Washtenaw County in Michigan
“Department”	Washtenaw County Sheriff’s Office

### II. TERMS [TOC](#)

A. Washtenaw County reserves the right to reject any and all proposals received as a result of this RFP. If a proposal is selected, it will be the most advantageous regarding price, quality of service, the CONTRACTORS qualifications and capabilities to provide the specified service, and other factors that the County may consider. The County does not intend to award a contract fully on the basis of any response made to the proposal; the County reserves the right to consider proposals for modifications at any time before a contract would be awarded and negotiations would be undertaken with that CONTRACTOR whose proposal is deemed to best meet the County’s specifications and needs.

B. The County reserves the right to reject any or all bids, to waive or not waive informalities or irregularities in bids or bidding procedures, and to accept or further negotiate cost, terms, or conditions of any bid determined by the County to be in the best interests of the County even though not the lowest bid.

C. Proposals must be signed by an official authorized to bind the CONTRACTOR to its provisions for at least a period of 90 days. Failure of the successful bidder to accept the obligation of the contract may result in the cancellation of any award.

D. In the event it becomes necessary to revise any part of the RFP, addenda will be provided. Deadlines for submission of RFP's may be adjusted to allow for revisions. To be considered, **one (1) original and six (6) copies** (one copy unbound) and an electronic version in pdf format, submitted on CD-RW, DVD or USB drive must be at the County as indicated on or before the date specified.

E. Proposals should be prepared simply and economically providing a straight-forward, concise description of the CONTRACTOR'S ability to meet the requirements of the RFP. Proposals must be typed. No erasures are permitted. Mistakes may be crossed out and corrected and must be initialed in ink by the person signing the proposal. *CONTRACTOR shall ensure that proposals are submitted using both sides of recycled paper whenever practicable.*

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F. In the event, the County receives two or more bids from responsive, responsible bidders, one or more of whom are Washtenaw County Contractors and the bids are substantially equal in price, quality and service, the County shall award the contract to the most responsive, responsible Washtenaw County Contractor. For purposes of this section, Washtenaw County Contractor means a company which has maintained its principal office in Washtenaw County for at least six (6) months. Maintaining a Washtenaw County P.O. Box, is not, in and of itself, sufficient to establish a company as a Washtenaw County Contractor. The County shall have sole discretion under this section to determine if a company qualifies as a Washtenaw County Contractor and if two or more bids are substantially equal.

G. The initial award of this contract shall be for a period of five (5) year(s), with an option to renew an additional two (2) year extensions, pending agreement by both parties.

H. CONFLICT OF INTEREST. Contractor warrants that to the best of contractor's knowledge, there exists no actual or potential conflict between contractor and the County, and its Services under this request, and in the event of change in either contractor's private interests or Services under this request, contractor will inform the County regarding possible conflict of interest which may arise as a result of the change. Contractor also affirms that, to the best of contractor's knowledge, there exists no actual or potential conflict between a County employee and Contractor.

I. The bidder shall be responsible for all costs incurred in the development and submission of this response. Washtenaw County assumes no contractual obligation as a result of the issuance of this RFP, the preparation or submission of a response by a bidder, the evaluation of an accepted response, or the selection of finalists. All proposals, including attachments, supplementary materials, addenda, etc. shall become the property of Washtenaw County and will not be returned to the bidder.

J. Any responses, materials, correspondence, or documents provided to Washtenaw County under this solicitation are subject to the State of Michigan Freedom of Information Act and may be released to third parties in compliance with that Act.

## III. **VENDOR SPECIFICATIONS**TOC

The proposal shall include **all** of the following information. Failure to include all of the required information may result in disqualification of a Bidder.

- A) **Business Organization:** State the full name and address of the organization and, if applicable, the parent company, branch office or other subordinate element(s) that will perform or assist in performing the work. Indicate whether operating as an individual, partnership or corporation; if as a corporation, include the state in which incorporated. Provide an overview of the company's size, corporate staffing organizational structure; include a table of organization/organizational chart.
- B) **Corporate Stability and Financial Strength/Depth:** Proposals will be evaluated on the basis of the proposer's financial stability and capacity to undertake and sufficiently support the project. Each proposal must include a copy of the most recent independent financial audit and accompanying financial statements of the vendor to establish sound financial condition and sufficient backing for depth of support to a contract of this size and complexity. If financial issues exist for the corporation, whether publicly traded or privately held, they must be clearly identified and a plan of corrective action submitted as well to demonstrate appropriate initiatives to address the financial concerns. An unsatisfactory standing with regard to financial issues may be grounds for Washtenaw County to reject the proposal and eliminate it from further consideration.
- C) **Staff Qualifications and Prior Experience:** The proposal must include, a brief statement concerning the recent experience of the persons from your firm who will be actively engaged in the proposed effort.
- D) **Key Personnel:** Specific resume or curriculum vitae (CV) information on key individuals who are potentially identified to be assigned to the on-site management team must be included. The background information on these individuals should emphasize their experience relative to project requirements. Key people are defined as those people whose qualifications and experience are essential to providing quality services. Include the resumes of all key project personnel, including subcontractors. Substituting of staff will not be allowed without prior written approval.
- E) **Authorized Negotiators:** Each company must designate one central contact person for the duration of the proposal process and additionally for the start-up transition and term of the contract. It is expected that the central contact person will remain intact throughout the proposal and evaluation process including contract negotiation and then overlap with the contact identified for implementation and operation of the contract. Include the names and telephone numbers of your organization's personnel authorized to negotiate the proposed contract with the County and the Washtenaw County Sheriff Department. In the event that this proposal, and the subsequent negotiations lead to a contract you will be asked to provide a written verification that the person signing the contract is authorized to do so. If this will require a meeting of the Board of Directors or the Partners of your firm, you should begin arrangements so that the contract will not be delayed.

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- F) The Proposer must be organized or predecessor organization for the purpose of providing health care services and must have a minimum of **five (5) years** experience with proven effectiveness in Correctional (or related institutional) Health Care Services.
- G) The Proposer must have a proven ability for a contract start-up within six weeks of contract award.
- H) The Proposer must have qualified and trained staff with sufficient back-up personnel.
- I) The Proposer must have Central Office capability to supervise and monitor the program ensuring satisfactory provision of services.
- J) The Proposer shall submit a list of five (5) references, including name of institution, address, contact person and telephone number. A minimum of three (3) of these references must be correctional in nature.
- K) Review contract provisions and insurance requirements. Note any limitations on any of the articles or providing insurance requirements as outlined in the contract provisions contained in Sample Contract.

### IV. AWARD TOC

Washtenaw County, at its sole discretion, reserves the right to award to the contractor whose response is deemed most advantageous to Washtenaw County. Washtenaw County, at its sole discretion, shall select the most responsive and responsible contractor and evaluate all responsive responses based on the requirements and criterion set forth in this solicitation. Washtenaw County reserves the right to reject any and all submissions as a result of this solicitation.

#### A. Evaluation Criteria TOC

It is the intent of Washtenaw County to conduct a comprehensive, fair and impartial evaluation of proposals received. Award shall be made to the responsible proposer whose proposal is determined to be the most advantageous to Washtenaw County. Evaluation criteria listed in order of importance are as follows:

- Demonstrated understanding of the services to provide and the ability to meet the requirements of this RFP
- How effectively the proposal addresses the proposed Scope of Services
- Directly related experience of the firm and proposed staff
- Cost considerations
- Corporate Stability and Financial Strength/Depth
- System Support of the firm to the onsite staff
- References and Client list
- Past experience with Washtenaw County
- Responsiveness of proposal

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<b>V. SCOPE OF WORK</b> <u><a href="#">TOC</a></u>
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## 1. OBJECTIVES [TOC](#)

Each respondent to the RFP will be evaluated as to its achievements and compliance with the following stated objectives:

- a) To deliver high quality health care services that can be audited against established guidelines.
- b) To operate the health care program in a cost-effective manner with full reporting and accountability to the Sheriff and or his designee.
- c) To operate the health care program at full staffing and use only licensed, certified, and professionally trained personnel.
- d) To implement a written health care plan with clear objectives, policies, and procedures for annual evaluation.
- e) To operate the health care program with Healthcare Policies and Procedures mutually agreed upon between Sheriff and or his designee and Contractor. Healthcare Policies and Procedures shall be maintained in the event WCSO wishes to become accredited by the National Commission on Correctional Health Care (NCCHC) or American Correction Association (ACA) so that minimal procedural changes and costs would be needed.
- f) To maintain an open and cooperative relationship with the administration and staff of the Washtenaw County Sheriff's Office (WCSO).
- g) To maintain a collaborative working relationship with Community Support and Treatment Services (CSTS). (CSTS is WCSO provider of mental health services for inmates).
- h) To maintain complete and accurate records of care and to collect and analyze health statistics on a regular periodic basis.
- i) To operate the health care program in a humane manner with respect to the inmate's right to basic health care services.
- j) To provide for a fair and objective proposal that will result in a mutually satisfactory contract between the successful proposer and the Washtenaw County Sheriff's Office.



## 2. SCOPE OF SERVICES [TOC](#)

This section describes the Health Care Delivery System and the Program of Services that will be required by the Washtenaw County Sheriff's Office under a contract for inmate medical services.

### A. Receiving Screening (Prior to Booking) [TOC](#)

Inquiry into all of the following in accordance with the Michigan Department of Corrections: Administrative Rules for Jails and Lockups:

- Current illness and health problems, including venereal diseases and other infectious diseases.
- Dental problems.
- Mental health problems.
- Use of alcohol and other drugs, including all of the following information:
- The type of types of drugs used.
  - Mode of use.
  - Amounts used.
  - Frequency used.
  - Date or time of last use.
- History of any problems that may have occurred after ceasing use, for example, convulsions.
- Past and present treatment or hospitalization for mental disturbance or suicide.
- Possibility of pregnancy.
- Other health problems designated by the responsible physician.
- Observation of all of the following:
- Behavior
  - State of consciousness.
  - Mental status.
  - Appearance.
  - Conduct.
- Tremor.
- Sweating.
- Body deformities and ease of movement.
- Condition of skin, including any of the following:
  - Trauma markings.
  - Bruises.
  - Lesions.
  - Jaundice.
  - Rashes and infestations.
  - Needle marks or other indications of drug abuse.
- The medical disposition of inmate shall be to 1 of the following:
  - General population.
  - General population with prompt referral to appropriate health care service.
  - Referral to appropriate health care service for emergency treatment.

### **B. Detoxification [TOC](#)**

- In connection with the receiving screening process, it is frequently determined that a new inmate is suffering from drug and/or alcohol abuse. If this is determined and treatment is needed, a medically approved and supervised detoxification plan, will be initiated.
- Inmates reporting the use of alcohol, opiates, stimulates, sedative hypnotic drugs or other legal or illegal substances shall be evaluated for their degree of reliance on and potential for withdrawal from these substances.
- The contractor will establish formal detoxification procedures for their staff to follow.

### **C. Health Assessment [TOC](#)**

In accordance with Michigan Department of Corrections: Administrative Rules for Jails and Lockups: a health appraisal for each inmate must be completed by a trained health care person within 14 days after arrival at the facility. If there is documented evidence of a health appraisal within the previous 90 days, then a new health appraisal is not required, except as determined by the designated health authority. A health appraisal includes at least all of the following:

- Review screening performed prior to booking.
- Collection of additional data to complete the medical, dental, mental health, and immunization histories.
- Laboratory or diagnostic tests, or both, to detect communicable disease, including venereal disease and tuberculosis.
- Recording of all of the following:
  - Height.
  - Weight.
  - Pulse.
  - Blood pressure.
  - Temperature.
- Other tests and examinations, as appropriate.
- Medical examination, including review of mental and dental status.
- Screening for visual and hearing problems.
- Review of the results of the medical examination and tests and identification of problems by a physician or other qualified health care personnel.
- Initiation of therapy when appropriate.
- Development and implementation of a treatment plan, including recommendations concerning housing, job assignment, and program participation.
- An inmate diagnosed as being contagious shall be removed from the facility or quarantined in well-ventilated quarters and separate from other inmates. In a case of suspected contagion, the Health Services Administrator shall consult with the Sheriff and or his designee, health authority or the local health department.
- Inmates incarcerated for over a year will be given an annual health assessment.

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If the health assessment establishes that an inmate has a chronic health problem, such as HIV, Diabetes, Hypertension, Epilepsy, etc., a Specialized Treatment Plan for the inmate will be initialized.

### **D. Daily Triaging of Complaints [TOC](#)**

In order to assure that inmate health problems and complaints are handled promptly and to assure that the appropriate level of medical services is provided in the most efficient manner, the contractor will operate the Health Care Delivery System in a structured triage modality.

- The responsible physician will implement the triage system, which will be followed by all health care personnel. This will assure that inmates receive the appropriate level of care and that their complaints are properly processed and resolved.
- Inmate health complaints (written and oral) will be received daily by the nursing staff. As the first step in the triage system, the inmate will be seen by a nurse and receive appropriate treatment within the scope of the Nurse Practice Act. Those inmates requiring a higher level of services will be referred to the physician or dentist or to the appropriate mental health professional.
- If the physician, dentist or psychiatrist determines that the inmate's condition requires specialized treatment or medical resources beyond those available at the jail, then an appropriate referral to outside medical services will be made.

### **E. Sick Call [TOC](#)**

- Sick Call will be conducted daily by a nurse. As noted previously, the majority of inmates to be seen by the physician will have been screened as part of the formal triage system.
- The total hours of sick call will be at the discretion of the Medical Department.
- An inmate's custody status can preclude his or her attendance at sick call, and arrangements will be made to provide sick call services to segregated inmates.
- The Segregated Housing Areas are to be visited a minimum of three (3) times a week.
- Of necessity, appropriate documentation will be recorded and maintained for all inmates seen at Sick Call. This information will be incorporated into the inmate's permanent medical record.

An inmate's medical record will contain appropriate entries documenting each sick call encounter (i.e., an inmate's specific health complaints, the assessment of the health care professional who saw the inmate, the prescribed treatment plan, and any follow-up encounters up to the point of medical resolution of the problem). This will assure that all inmates' health complaints are promptly and properly handled, documented and followed through to a satisfactory resolution.

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### F. Medical Department Staff Requirements [TOC](#)

The following staff services shall be provided:

- a) A physician on site at a minimum of two days per week for no less than 8 hours per week.
- b) Physician on-call twenty-four (24) hours per day
- c) A dentist on site at a minimum of two days per week for no less than 8 hours per week.
- d) A full time on site Health Services Administrator (RN)
- e) RN on site 8 hours per day, 6 days per week
- f) Nurses on site 24 hours per day, 7 days per week, 365 days per year.
- g) Dental assistant 2 days per week for total of 8 hours (hours to coordinate with Dentist)
- h) Pharmacy Tech on site 8 hours per day, 7 days per week.
- i) Clerical staff a minimum of 32 hours per week.
- j) Medical Director Review 2 hours per week or as needed
- k) On call Clinical Administrator 24 hours per day, 7 days per week, 365 days per yr
- l) On call Medical Director 24 hours per day, 7 days per week, 365 days per year
- m) On occasion, a need may arise for additional medical staff to care for and meet the needs of an individual inmate. Contractor shall include in proposal their plan to meet this need and any additional costs associated with this plan. Fees for this service, if needed, would be contracted for in an addendum to the original contract.

### G. Hospital Care [TOC](#)

- a) When it is medically necessary to transfer an inmate to an acute care hospital for treatment, the contractor will utilize facilities and services of an accredited local hospital(s) acceptable to the Sheriff.
- b) The contractor will arrange for, monitor and review all inpatient hospitalizations.
- c) Throughout any inpatient confinement, the contractor will continually monitor the medical necessity for the confinement and will seek to have the inmate discharged as soon as conditions permit.
- d) To provide continuity of care, a Discharge Summary will be obtained from the hospital upon the inmate's release.
- e) Currently, the County utilizes Blue Cross/Blue Shield for inmate off-site services, if the inmate does not have other insurance and is not eligible for Medicaid. Contractor will submit inmate's data to BC/BS when off-site services are needed. Contractor will also be responsible for removing inmate out of BC/BS after service has been received.
- f) For all hospitalized inmates, contractor will check to see if inmate has health insurance. If inmate does not have health insurance and would be eligible for Medicaid, contractor shall assist with the application process. Hospital will be notified of insurance status. Contractor **shall not** enter the inmate into the County BC/BS system if the inmate has other health insurance or his eligible for Medicaid.

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- g) Respondent MUST specifically address how it will adjust to the Affordable Health Care Act and the expansion of Medicaid eligibility and healthcare exchange coverage for inmates both at State of Michigan and Federal levels.

### H. Specialty Services [TOC](#)

- If an inmate has a condition, which can only be treated by a medical specialist or in a clinic, the contractor will make arrangements with outside specialists for the provision of specialty care.
- The contractor will schedule, and coordinate with the Transport Supervisor or his/her designee.
- Out-patient procedures will be scheduled during normal business hours Monday through Friday excluding Washtenaw County Holidays. If necessary, services shall be available 24 hours per day, 7 days per week, 365 days per year and will be coordinated in emergency situations.

### I. Emergency Services [TOC](#)

- Certain members of the professional health care staff, including the Health Services Administrator and physician, will have twenty-four (24) hour on-call responsibility for any emergency that may arise. Twenty four hour (24) per day staff nursing coverage will be provided.
- In the event of an emergency, the on-site medical staff will immediately respond to the scene to assess and stabilize the inmate. If necessary, other medical personnel will be notified and will respond. The inmate will be stabilized and, if warranted, transferred to a hospital Emergency Room for further treatment. The staff nurse on duty will contact the emergency facility and verbally describe the symptoms and provide details regarding the inmate's condition. A written report will accompany the inmate.
- When emergency transportation is required, the nurse will decide whether an ambulance or security van is required and then notify the Shift Sergeant.
- The Shift Sergeant shall have the authority to order any inmate transported to the emergency room for evaluation regardless of objections by the medical department.

### J. Ancillary Services [TOC](#)

- The contractor will perform any routine laboratory tests at their discretion, which can appropriately be conducted inside the jail.
- When it is necessary to use outside laboratory services, the on-site health care personnel will be expected to draw all specimens and prepare them for transport to the appropriate laboratory.
- All specimens will be collected in accordance with accepted laboratory standards. They will be properly stored and labeled prior to being sent out for processing.
- The contractor will use laboratory testing facilities and services of a nationally known and accredited laboratory.

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- All results, when returned, will be checked by the nurse on duty. The results will first be forwarded to the staff physician for reading and then filed as part of the inmate's medical record. The physician will be notified immediately by the nurse if any grossly abnormal lab value is detected.
- To minimize security risks and transportation costs associated with sending inmates to outside facilities for x-rays. Routine x-rays can be performed within the jail by a certified x-ray technician using County's on site x-ray equipment or a mobile x-ray company.

### **K. Dental Care [TOC](#)**

- Basic dental care will be provided to each inmate under the direction and supervision of a licensed dentist.
- Each new inmate will receive a dental screening as part of the health assessment. Dental symptoms or conditions will be recorded.
- The inmate will receive immediate dental treatment if an emergency condition exists.
- Dental services will be provided as clinically indicated including:
  - Basic dental services including, examinations and extractions.
  - Dental x-ray services for diagnostic and treatment purposes.
  - Oral surgery as may be clinically indicated either on-site or off-site, as the case may dictate.

### **L. Mental Health Services [TOC](#)**

- a) Mental health services are primarily provided by Washtenaw County's Community Support and Treatment Services (CSTS).
- b) The contractor will be responsible for collaboratively working with CSTS.
- c) Contractor is responsible for all psychotropic medication costs.
- d) Contractor will be responsible for reviewing Psychiatrist orders and ordering prescribed medications or tests.
- e) Contractor will be responsible for distributing medications to inmates as prescribed by psychiatrist.

### **M. Medical Records [TOC](#)**

- a) All inmates must have a medical record which is kept up-to-date, and which complies with problem oriented medical record format and standards. All procedures concerning the confidentiality of the medical record including HIPAA compliance and applicable standards, rules shall be followed. All inmate medical records are the property of the Washtenaw County Sheriff's Office.
- b) Inmates will not have access to medical records unless proper procedure for review are followed.
- c) Medical records will be maintained separately from an inmate's legal/confinement records.
- d) The physician must sign off on every x-ray, lab or specialty consult report, before it is placed in the chart. This will assure continuity of care.
- e) In any case where medical care is at issue, or in any criminal or civil litigation, where the physical or mental condition of an inmate is at issue, the contractor

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shall make all records accessible to the Sheriff, Jail Commander, Contract Administrator, Prosecutor, or County Attorney. The contractor additionally acknowledges compliance with and understanding of all applicable HIPAA requirements.

- f) A Medical Flow Sheet will be transferred with an inmate when the inmate is transferred to another institution unless otherwise requested by Administration.
- g) Upon written authorization of an inmate, medical record information will be released. The file folder and other equipment costs needed to provide medical records shall be the responsibility of the contractor.
- h) The Washtenaw County Sheriff's Office shall be the absolute and unqualified owner of all inmate medical records. Respondent shall ensure that inmate health information is available to meet the needs of continued patient care, legal requirements, research, education, and other legitimate uses.
- i) Contractors shall include in proposal, their plan for transition of current electronic medical record.

### **N. Pharmaceutical [TOC](#)**

Contractor will provide written policy and defined procedures and actual practice evidences, that pharmaceutical services are sufficient to meet the needs of the Washtenaw County Sheriff's Office and are in accordance with all legal requirements.

- a) Compliance with all applicable state and federal regulations regarding prescribing, dispensing, administering, and procuring pharmaceuticals.
- b) Where there is no staff pharmacist, a consulting pharmacist is used for visits and consultation on a regular basis, and not less than quarterly.
- c) All drugs are stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Antiseptics, other drugs for external use, and disinfectants are stored separately from internal and injectable medications. Drugs requiring special storage for stability - for example, drugs that need refrigeration - are so stored.
- d) An adequate and proper supply of antidotes and other emergency drugs, and related information (including posting of the poison control telephone number in areas where overdoses or toxicological emergencies are likely), are readily available to the staff to meet the needs of the jail.
- e) Policies and procedures that govern pharmaceutical services should include but are not necessarily limited to the following:
  - 1. Development and subsequent updating of a facility formulary or drug list for pharmaceuticals stocked by the contractor.
  - 2. Procurement, dispensing, distribution, accounting, administration, and disposal of pharmaceuticals.
  - 3. Maintenance of records as necessary to ensure adequate control of and accountability for all drugs.
  - 4. Maximum security storage of and accountability by use for Drug Enforcement Agency (DEA)-controlled substances, needles, syringes, and other abusable items.

5. Automatic drug stop orders or required periodic review of all orders for DEA-controlled substances, psychotropic drugs, or any other drug that should be restricted because it lends itself to abuse or for any other reason dictating that patient compliance be monitored.
6. A method for notifying the responsible practitioner of the impending expiration of a drug order so that the practitioner can determine whether the drug administration is to be continued or altered.
7. Administration of drugs only upon the order of a physician, dentist, or other authorized individual with designated privileges.
8. Maintaining all medications under the control of appropriate staff members. Except for self-medication programs approved by the Sheriff and or his designee and the responsible physician (e.g., “keep-on-person” program), inmates do not prepare, dispense, or administer medication.
9. Maintenance of drug storage and medication areas devoid of drugs that are outdated, discontinued, or recalled.

**O. Special Needs Treatment Planning [TOC](#)**

- The contractor will provide all special health care services required including, but not limited to, chronic and convalescent care, pregnancy and special diets in coordination with the kitchen.
- Individual treatment plans will be developed for all chronically ill and convalescing inmates. Examples of chronic illness include diabetes, hypertension, asthma, and epilepsy, etc.
- Convalescing inmates include those recovering from fractures, inpatient surgical procedures, and communicable diseases.
- The type of treatment would be determined by the needs of the individual inmate, but would include such things as medications, special diets, physical therapy, laboratory tests or dressing changes.

**P. Health Education [TOC](#)**

The contractor shall provide inmate health education when appropriate.

**Q. Coordination with the Administration and Staff [TOC](#)**

The contractor shall provide a written plan to assure that appropriate coordination with correctional administration and staff is maintained.

- The Health Services Administrator shall meet with the Sheriff’s designee who is responsible for the medical program and/or other members of the WCSO Administration at least once a week.
- The contractor shall regularly confer with the facility administration at these meetings regarding any existing health related procedures at the WCSO and any proposed changes in health related procedures, as well as any other matter which either party deems appropriate



### **R. Policies and Procedures [TOC](#)**

- The contractor shall provide, develop, comprehensive written healthcare policies and procedures that detail how their program objectives will meet the needs of WCSO.
- All policies of the successful contractor, which are in effect written or otherwise at WCSO, and involve any responsibility of the security personnel shall be specifically discussed before implementation and on an annual basis with the Sheriff and or his designee

### **S. Management Reports [TOC](#)**

- The contractor shall collaborate with Sheriff and or his designee(s) to develop individualized monthly, quarterly, and annual management reports.
- Reports provide information for the monitoring and evaluation of health services including trend identification and cost containment opportunities.
- Contractor to include sample of a proposed monthly, quarterly and annual report.

### **T. Quality Assurance [TOC](#)**

The contractor shall provide a written plan of quality assurance procedures/program with the proposal.

### **U. Staffing [TOC](#)**

- Each member of the health care staff must be properly licensed, pass a criminal record check, through the WCSO and must receive appropriate orientation and training before assuming responsibilities within the WCSO.
- The staff will follow the security procedures established by the Sheriff.
- The Sheriff's Office, in its sole discretion, reserves the right to have any contractor-employee removed/terminated from working at the facility.
- The contractor shall make provisions for WCSO participation in the interviewing and hiring of the on site Health Services Administrator. With proper cause, other provisions shall be made as requested.
- No format or matrix for staffing is provided. Each respondent must determine the appropriate mix of staff they feel will adequately allow for the provision of health care delivery within the jail. Staffing must be thoroughly justified and explained. It is not appropriate to contact the incumbent provider or their staff for information.

### **V. Grievance Procedure [TOC](#)**

The contractor agrees to develop a grievance procedure in cooperation with WCSO administration. The procedure shall include review of all complaints by the Health Services Administrator, a regularly scheduled forum to address inmate concerns, participation in a regularly scheduled multidisciplinary team case

## RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

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management meeting to strategize treatments, address concerns, and written responses to all complaints and grievances.

### **W. Other [TOC](#)**

- a) Contractor shall collect on site physical evidence (blood draws) within guidelines established by the NCCHC for Washtenaw County arrests only. The county will be responsible for arranging any testing and bear the cost of collection and testing the collected evidence. After collecting evidence contractor's healthcare staff shall turn the specimen over to the Sheriff or a court designated representative for completion of chain-of-custody evidence.
- b) Contractor shall provide in proposal their expected compensation for each physical evidence blood draw. Contractor shall also provide expected compensation for healthcare staff subpoenaed to provide court ordered testimony for physical evidence blood draws.
- c) Contractor shall provide separate costs for each of Hepatitis-B vaccines, Flu vaccines and TB testing for WCOS employees. County would notify contractor of need and a mutually agreed upon plan would be implemented. Fees for these services, if contracted for, would be contracted for in an addendum to the original contract.
- d) Contractor will specify a detailed plan for the implementation and operation of a cost containment and incentives based programs. Addressed in this section shall be the mechanism by which the contractor plans to control healthcare costs, areas in which cost savings will be achieved, and evidence of the success of such a program at other contract sites.
- e) In addition to the requested services proposal, alternative cost saving pricing proposals will be accepted. Contractor must maintain 24 hour on site nursing coverage

**VI. SAMPLE STANDARD PROVISIONS FOR CONTRACTS [TOC](#)**

**PROFESSIONAL SERVICE CONTRACT**

CR \_\_\_\_\_

AGREEMENT is made this \_\_\_\_\_ day of \_\_\_\_\_, 2014, by the COUNTY OF WASHTENAW, a municipal corporation, with offices located in the County Administration Building, 220 North Main Street, Ann Arbor, Michigan ("County") and (**Name of Contractor**) located at (**Address**) ("Contractor").

In consideration of the promises below, the parties mutually agree as follows:

ARTICLE I - SCOPE OF SERVICES

The Contractor will (**SPELL OUT SCOPE OF SERVICE**)

ARTICLE II - COMPENSATION

Upon completion of the above services and submission of invoices the County will pay the Contractor an amount not to exceed (**SPELL OUT DOLLAR AMOUNT**).

ARTICLE III - REPORTING OF CONTRACTOR

Section 1 - The Contractor is to report to **OFFICE OF THE SHERIFF** and will cooperate and confer with him/her as necessary to insure satisfactory work progress.

Section 2 - All reports, estimates, memoranda and documents submitted by the Contractor must be dated and bear the Contractor's name.

Section 3 - All reports made in connection with these services are subject to review and final approval by the County Administrator.

Section 4 - The County may review and inspect the Contractor's activities during the term of this contract.

Section 5 - When applicable, the Contractor will submit a final, written report to the County Administrator.

Section 6 - After reasonable notice to the Contractor, the County may review any of the Contractor's internal records, reports, or insurance policies.

ARTICLE IV - TERM

This contract is for a five (5) year term which begins on **January 1, 2015** and ends on **December 31, 2019** with a mutual option to extend for two (2) additional (2) year periods. Options shall be exercised in writing by the parties prior to expiration to the original or extended contract term.

ARTICLE V- PERSONNEL

Section 1 - The Contractor will provide the required services and will not subcontract or assign the services without the County's written approval.

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

Section 2 - The Contractor will not hire any County employee for any of the required services without the County's written approval.

Section 3 - The parties agree that the Contractor is neither an employee nor an agent of the County for any purpose. Section 4 - The parties agree that all work done under this contract shall be completed in the United States and that none of the work will be partially or fully completed by either an offshore subcontractor or offshore business interest either owned or affiliated with the contractor. For purposes of this contract, the term, "offshore" refers to any area outside the contiguous United States, Alaska or Hawaii.

## ARTICLE VI - INDEMNIFICATION

The Contractor will protect, defend and indemnify Washtenaw County, the Washtenaw County Sheriff and their officers, agents, servants, employees and volunteers from and against all claims of personal injury, including death, and/or property damage, including all costs of defense, arising from Contractor's (or agents, its subcontractor(s) or other contractual partners, if applicable) negligence, gross negligence, malpractice, intentional acts or non-actions arising from the duties contained within this Contract.

## ARTICLE VII- INSURANCE REQUIREMENTS

The Contractor will maintain at its own expense during the term of this Contract, the following insurance:

1. Workers' Compensation Insurance with Michigan statutory limits and Employers Liability Insurance with a minimum limit of \$100,000 each accident for any employee.
2. Commercial General Liability Insurance with a combined single limit of \$1,000,000 each occurrence for bodily injury and property damage. The County shall be added as "additional insured" on general liability policy with respect to the services provided under this contract.
3. Automobile Liability Insurance covering all owned, hired and non-owned vehicles with Personal Protection Insurance and Property Protection Insurance to comply with the provisions of the Michigan No Fault Insurance Law, including residual liability insurance with a minimum combined single limit of \$1,000,000 each accident for bodily injury and property damage.
4. Professional Liability coverage with a minimum limit of \$1,000,000 each occurrence. The County shall be added as "additional insured" on Professional liability policy with respect to the services provided under this contract. The additional insured provision does not apply to contracts with Architects, Architectural firms, Engineers or Engineering firms.

Insurance companies, named insureds and policy forms may be subject to the approval of the Washtenaw County Administrator, if requested by the County Administrator. Such approval shall not be unreasonably withheld. Insurance policies shall not contain endorsements or policy conditions which reduce coverage provided to Washtenaw County. Contractor shall be responsible to Washtenaw County or

## RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

insurance companies insuring Washtenaw County for all costs resulting from both financially unsound insurance companies selected by Contractor and their inadequate insurance coverage. Contractor shall furnish the Washtenaw County Administrator with satisfactory certificates of insurance or a certified copy of the policy, if requested by the County Administrator.

No payments will be made to the Contractor until the current certificates of insurance have been received and approved by the Administrator. If the insurance as evidenced by the certificates furnished by the Contractor expires or is canceled during the term of the contract, services and related payments will be suspended. Contractor shall furnish the County Administrator's Office with certification of insurance evidencing such coverage and endorsements at least ten (10) working days prior to commencement of services under this contract. Certificates shall be addressed to the Washtenaw County c/o: **Office of The Sheriff & CR#** \_\_\_\_\_, P. O. Box 8645, Ann Arbor, MI, 48107, and shall provide for written notice to the Certificate holder of cancellation of coverage.

### ARTICLE VIII - COMPLIANCE WITH LAWS AND REGULATIONS

The Contractor will comply with all federal, state and local regulations, including but not limited to all applicable OSHA/MIOSHA requirements and the Americans with Disabilities Act.

### ARTICLE IX - INTEREST OF CONTRACTOR AND COUNTY

The Contractor promises that it has no interest which would conflict with the performance of services required by this contract. The Contractor also promises that, in the performance of this contract, no officer, agent, employee of the County of Washtenaw, or member of its governing bodies, may participate in any decision relating to this contract which affects his/her personal interest or the interest of any corporation, partnership or association in which he/she is directly or indirectly interested or has any personal or pecuniary interest. However, this paragraph does not apply if there has been compliance with the provisions of Section 3 of Act No. 317 of the Public Acts of 1968 and/or Section 30 of Act No. 156 of Public Acts of 1851, as amended by Act No. 51 of the Public Acts of 1978, whichever is applicable.

### ARTICLE X - CONTINGENT FEES

The Contractor promises that it has not employed or retained any company or person, other than bona fide employees working solely for the Contractor, to solicit or secure this contract, and that it has not paid or agreed to pay any company or person, other than bona fide employees working solely for the Contractor, any fee, commission, percentage, brokerage fee, gifts or any other consideration contingent upon or resulting from the award or making of this contract. For breach of this promise, the County may cancel this contract without liability or, at its discretion, deduct the full amount of the fee, commission, percentage, brokerage fee, gift or contingent fee from the compensation due the Contractor.

### ARTICLE XI - EQUAL EMPLOYMENT OPPORTUNITY

The Contractor will not discriminate against any employee or applicant for employment because of race, creed, color, sex, sexual orientation, national origin, physical handicap, age, height, weight, marital status, veteran status, religion and

## RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

political belief (except as it relates to a bona fide occupational qualification reasonably necessary to the normal operation of the business).

The Contractor will take affirmative action to eliminate discrimination based on sex, race, or a handicap in the hiring of applicant and the treatment of employees. Affirmative action will include, but not be limited to: Employment; upgrading, demotion or transfer; recruitment advertisement; layoff or termination; rates of pay or other forms of compensation; selection for training, including apprenticeship.

The Contractor agrees to post notices containing this policy against discrimination in conspicuous places available to applicants for employment and employees. All solicitations or advertisements for employees, placed by or on the behalf of the Contractor, will state that all qualified applicants will receive consideration for employment without regard to race, creed, color, sex, sexual orientation, national origin, physical handicap, age, height, weight, marital status, veteran status, religion and political belief.

### ARTICLE XII - LIVING WAGE

The parties understand that the County has enacted a Living Wage Ordinance that requires covered vendors who execute a service or professional service contract with the County to pay their employees under that contract, a minimum of either \$11.81 per hour with benefits or \$13.85 per hour without benefits. Contractor agrees to comply with this Ordinance in paying its employees. Contractor understands and agrees that an adjustment of the living wage amounts, based upon the Health and Human Services poverty guidelines, will be made on or before April 30, 2015 and annually thereafter which amount shall be automatically incorporated into this contract. County agrees to give Contractor thirty (30) days written notice of such change. Contractor agrees to post a notice containing the County's Living Wage requirements at a location at its place of business accessed by its employees.

### ARTICLE XIII - ASSIGNS AND SUCCESSORS

This contract is binding on the County and the Contractor, their successors and assigns. Neither the County nor the Contractor will assign or transfer its interest in this contract without the written consent of the other.

### ARTICLE XIV - TERMINATION OF CONTRACT

Section 1 - Termination without cause. Either party may terminate the contract by giving thirty (30) days written notice to the other party.

### ARTICLE XV - EQUAL ACCESS

The Contractor shall provide the services set forth in paragraph 1 without discrimination on the basis of race, color, religion, national origin, sex, sexual orientation, marital status, physical handicap, or age.

### ARTICLE XVI - OWNERSHIP OF DOCUMENTS AND PUBLICATION

All documents developed as a result of this contract are subject to the Freedom of Information Act and may be released pursuant to that Act.. None may be copyrighted by the Contractor. During the performance of the services, the Contractor will be responsible for any loss of or damage to the documents while they are in its possession and must restore the loss or damage at its expense. Any use of the information and

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

results of this contract by the Contractor must reference the project sponsorship by the County. Any publication of the information or results must be co-authored by the County.

## ARTICLE XVII - PAYROLL TAXES

The Contractor is responsible for all applicable state and federal social security benefits and unemployment taxes and agrees to indemnify and protect the County against such liability.

## ARTICLE XVIII - PRACTICE AND ETHICS

The parties will conform to the code of ethics of their respective national professional associations.

## ARTICLE XIX - CHANGES IN SCOPE OR SCHEDULE OR SERVICES

Changes mutually agreed upon by the County and the Contractor, will be incorporated into this contract by written amendments signed by both parties.

## ARTICLE XX - CHOICE OF LAW AND FORUM

This contract is to be interpreted by the laws of Michigan. The parties agree that the proper forum for litigation arising out of this contract is in Washtenaw County, Michigan.

## ARTICLE XXI - EXTENT OF CONTRACT

This contract represents the entire agreement between the parties and supersedes all prior representations, negotiations or agreements whether written or oral.

## ARTICLE XXII – ELECTRONIC SIGNATURES

All parties to this contract agree that either electronic or handwritten signatures are acceptable to execute this agreement.

ATTESTED TO:

WASHTENAW COUNTY

By: \_\_\_\_\_  
Lawrence Kestenbaum (DATE)  
County Clerk/Register

By: \_\_\_\_\_ (DATE)  
Verna J. McDaniel  
County Administrator

APPROVED AS TO CONTENT:

CONTRACTOR

By: \_\_\_\_\_ (DATE)  
**Jerry L. Clayton**  
County Sheriff

By: \_\_\_\_\_ (DATE)  
**( Name of Contractor )**

APPROVED AS TO FORM:

By: \_\_\_\_\_ (DATE)  
Curtis N. Hedger  
Office of Corporation Counsel

**SIGNATURE PAGE [TOC](#)**  
**MEDICAL SERVICES FOR THE Washtenaw County Sheriff's Office**  
**RFP 6789**

The undersigned represents that he or she:

1. is duly authorized to make binding offers on behalf of the company,
2. has read and understands all information, terms, and conditions in the RFP,
3. has not engaged in any collusive actions with any other potential proposers for this RFP,
4. hereby offers to enter into a binding contract with Washtenaw County for the products and services herein offered, if selected by Washtenaw County within 90 days from proposal due date:
5. acknowledges the following addenda \_\_\_\_\_ issued as part of the RFP.
6. By signing this bid submission, I certify that I and/or my corporation, company, limited liability company, business association, partnership, society, trust or any other non-governmental entity, organization or group is not an "Iran linked business" as defined by P.A. 517 of 2012 (MCLA 129.311 et seq)("Act").

I understand that under the Act, an "Iran linked business means an individual or one of the above-listed groups who engages in investment activities in the energy sector of Iran, including, but not limited to, providing oil or liquefied natural gas tankers or products used to construct or maintain pipelines used to transport oil or liquefied gas for Iran's energy sector or a financial institution extending credit to another person to engage in investment activities in Iran's energy sector.

I further understand that "investment activity" is defined by the Act as an individual or one of the above listed groups that invests \$20,000,000.00 or more in Iran's energy sector or a financial institution that extends credit to another person, if that person uses the credit to engage in "investment activity" in Iran's energy sector.

Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_



# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

## **Contact Person**

Please indicate name, telephone number, fax number, mailing address, and e-mail address of company representative for matters regarding this RFP.

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Contact Name    Position

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Phone Number    Fax Number

---

E-Mail

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Address

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

## Provider Application [TOC](#)

Page One of Three

### Washtenaw COUNTY SHERIFF's Office PROPOSAL FOR Inmate Medical Services

Name of Agency

Address

Telephone Number

Federal Tax I.D. Number

Check	_____	Partnership
One:	_____	Non Profit Corporation
	_____	Profit Corporation
	_____	Other, Specify: _____

Signature of Authorized Signatory

Title and Name of Applicant Agency

Name of Authorized Signatory (please print)

Date

The above individual is authorized to sign on behalf of company submitting proposal. Proposals must be signed by an official authorized to bind the provider to its provisions for at least a period of 90 days.

#### BOARD OF DIRECTORS INFORMATION – Please list Board Members

Attach an additional sheet if more space is needed.

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

## Provider Application– Page Two

Is your agency accredited or licensed by an outside or state organization?	No	Yes
If yes, list below. Include date of last review, <b><u>status of current accreditation or license</u></b> , and approximate date of next review.		

Indicate the agency's experience over the past four years in reference to the following items:		
• Were grievances or complaints filed against the organization (not including discrimination)?	No	Yes
• Were lawsuits or judgments filed?	No	Yes
• Were there investigations of fraud, abuse, conflict of interest, Political activities, nepotism, or any criminal activities?	No	Yes
• Was there a default or breach of contract?	No	Yes
• Did this organization or a parent organization declare bankruptcy or go into receivership?	No	Yes
• Were there any discrimination complaints or rulings against the agency?	No	Yes
If any one of the above items is checked yes, the following supplemental information must be provided:		
<ul style="list-style-type: none"> <li>• Date item checked was initiated</li> <li>• Party or parties involved with specific references to public funding</li> <li>• Brief description of the circumstances</li> <li>• Final disposition and date, if applicable</li> <li>• Brief description if action is still pending</li> </ul>		
The supplemental information above must be included as an addendum, and may be submitted as a table, if desired. Failure to include the above information, to provide false information, or to omit relevant information may be grounds for not awarding a contract or canceling a contract if awarded.		

**Provider Application– Page Three**

**Attestation – Authorization to Disclose Information**

I hereby certify on behalf of \_\_\_\_\_  
(Name of Organization) that all information in this application and the copies of state license(s), certificates of insurance, and accreditation are true and accurate.

I fully understand that any significant misstatements in or omissions from this application will void this application and any subsequent agreement with Washtenaw County regarding this agency's participation in its provider network panel.

I also release from liability all individuals and organizations which provide information in good faith and without malice at the request of Washtenaw County concerning this application.

I understand that agency participation as a provider for Washtenaw County is dependent upon review of this application and completion of the applicable credentialing process.

\_\_\_\_\_  
**Authorized Signatory**

\_\_\_\_\_  
**Name of Authorized Signatory (please print)**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

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## REFERENCES TOC

Five (5) References with a minimum of three (3) from Correctional Facilities

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**1. Company**

Contact Name

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Address

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Phone Number / E-mail

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**2. Company**

Contact Name

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Address

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Phone Number / E-mail

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**3. Company**

Contact Name

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Address

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Phone Number / E-mail

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**4. Company**

Contact Name

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Address

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Phone Number / E-mail

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**5. Company**

Contact Name

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Address

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Phone Number / E-mail

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

## BUDGET SUMMARY [WORKSHEETS TOC](#)

### BUDGET SUMMARY WORKSHEET I

<b>BUDGET 2015</b>	
Revenue:	
Total County RFP Request	
Other Revenue (If any)	
Total Revenue	
Expenditures:	
Salaries	
Fringe Benefits	
Consultants/Contractual	
Supplies	
Pharmaceuticals	
Equipment	
Other	
Total Expenditures	

### BUDGET WORKSHEET

<b>BUDGET 2016</b>	
Revenue:	
Total County RFP Request	
Other Revenue (If any)	
Total Revenue	
Expenditures:	
Salaries	
Fringe Benefits	
Consultants/Contractual	
Supplies	
Pharmaceuticals	
Equipment	
Other	
Total Expenditures	

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

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## BUDGET SUMMARY WORKSHEETS

### BUDGET SUMMARY WORKSHEET

<b>BUDGET 2017</b>	
Revenue:	
Total County RFP Request	
Other Revenue (If any)	
Total Revenue	
Expenditures:	
Salaries	
Fringe Benefits	
Consultants/Contractual	
Supplies	
Pharmaceuticals	
Equipment	
Other	
Total Expenditures	

### BUDGET WORKSHEET

<b>BUDGET 2018</b>	
Revenue:	
Total County RFP Request	
Other Revenue (If any)	
Total Revenue	
Expenditures:	
Salaries	
Fringe Benefits	
Consultants/Contractual	
Supplies	
Pharmaceuticals	
Equipment	
Other	
Total Expenditures	

# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

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## BUDGET WORKSHEET

<b>BUDGET 2019</b>	
Revenue:	
Total County RFP Request	
Other Revenue (If any)	
Total Revenue	
Expenditures:	
Salaries	
Fringe Benefits	
Consultants/Contractual	
Supplies	
Pharmaceuticals	
Equipment	
Other	
Total Expenditures	



# RFP 6789 Inmate Medical Services for Washtenaw County Sheriff

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## Proposal Format [TOC](#)

RFP #6789 as Proposal Cover

- I) Introduction of Vendor (no more than one page)
- II) Scope of Services A through W
- III) Vendor Specifications
  - A) Business Organization
  - B) Corporate Stability and Financial Strength (include requested Financial Audit/Statement as Attachment - IV)
  - C) Staff qualifications and prior experience
  - D) Key Personnel Information as Attachment - V
  - E) Authorized negotiators

IV) Budget Narrative

Signature Page (RFP Attachment-A) as Attachment – I

Provider Application (RFP Attachment-B) as Attachment – II

References (RFP Attachment-C) as Attachment – III

Budget Summary Worksheets (RFP Attachment-D) as Attachment VI