



WINNEBAGO COUNTY

— ILLINOIS —

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July 19, 2024

ADDENDUM TWO

INMATE HEALTH CARE SERVICES- JAIL & JDC REQUEST FOR PROPOSAL #24P-2349

Bidders are required to indicate on their Proposer Signature Form that they have received and acknowledged Addendum Two.

The following questions were submitted followed by the answers;

1. Pg. 25 – A1. Section 8.

Is the topic of suicide education intended to be the responsibility of the medical proposer or is this the responsibility of the mental health company?

Mental Health

2. Pg. 32 – A6. Sections 4, 5, and 6

These sections are pertaining to mental health services currently being provided under the mental health contract.

As stated at the Pre-Proposal meeting, mental health services were taken out of the proposal.

3. Pg. 41 – A25. Section g. “Co-pay for health care services”

Is this referencing co-pays for outside appointments, procedures, etc. or is this pertaining to the proposer’s responsibility of submitting billing related to the inmate’s co-pays for medical visits as outlined in A17 Co-pay for Inmate Services, Pg. 38?

The current vendor charges for nurse visits, NP, Dr visits, and dental.

1. Why is the County going out to RFP/RFQ/ITB at the current time?
The county requires us go out to bid on any contract after 5 years

2. What are some of the current pain points with your current provider?
Lack of some services that require inmates being sent to hospital

What needs to be improved from the current provider?
See above

3. Under 12g, it states “the Proposer shall provide the Project Manager with a copy of the accreditation certificate for the JDC. What accreditation is this referred to?
The JDC requires that medical providers be Illinois licensed health care providers. Additionally, all providers must meet the requirements as outlined in the Standards from Administrative Office of Illinois Courts (AOIC), Illinois Department of Juvenile Justice (IDJJ) and Prison Rape Elimination Act (PREA).

4. Under General and Facility Information, the RFP indicates to use an ADP of 720 for the jail, but under A3 Staffing Requirements, on the Current Staffing for Jail, and the Proposer’s Fee Schedule for Jail states to submit a staffing plan of 850. Please confirm which is the correct number.
The numbers fluctuate and would prefer to stay at 850, with the PFA it is hard to determine what our population will be

5. Under A12 Pharmaceutical Services, it states the Proposer shall be responsible for contacting the appropriate parties (....) to obtain a minor’s. Please indicate what is to be obtained.
JDC-Parents/legal guardians may bring in medication(s) from home; medications are also ordered through Genoa Pharmacy and delivered to JDC

6. On June 13, the County posted a revised RFP that removed mental health requirements. Is this considered an Addendum?
No, it was just sent as a revision, not an Addendum.

Does this need to be acknowledged on the Proposal Form and Signature Page?
No

7. Do you wish to retain any of the current medical staff?
Yes

8. Is the health services provider responsible for the cost of all drug screenings for employees at the facility?
No

9. Who is/are your current physician(s)?
Mitch King

10. Would you like the vendor to work with this physician if possible?

Yes

11. Please provide the following information about medication administration.

a. Who administers medications, e.g., RNs, LPNs, medical assistants?

JAIL- RN's and LPN's

JDC-Medical staff

b. How many medication passes per day do you currently have and at what times?

JAIL- Diabetic med pass, 5am, 8am, 1300, diabetic, 1600, 2000

JDC-Multiple

c. Are medications passed out in the housing unit and by whom?

JAIL- Yes, nursing staff

JDC-Yes, medications are passed out by Medical in pods/rooms

d. Are any medications sent with inmates/detainees upon discharge?

JAIL- If they have their own when released. Sometimes they will be given a bridge script.

JDC-Yes, medications are returned to person when released

e. Are the medication carts owned by the county?

JAIL- No

JDC-No, carts are owned by current provider

12. Are any medications allowed to be brought in from home?

JAIL- Yes

JDC-Yes, medications are brought in from home

13. Are any medications allowed to be "kept on person" within the jail?

a. If so, which are allowed?

Inhalers and creams, over the counter meds bought on commissary

14. Are there over-the-counter medications on commissary?

Yes

a. If so, are the inmates/detainees allowed to keep commissary medications on person?

Yes

15. What time(s) and location(s) are sick call currently conducted?

In medical clinic rooms, NP AM/PM nurses to inmate requested sick calls in pods

16. Is a security officer currently present for every sick call?

Yes

17. What on-site specialty clinics are conducted?

Dental, Physical Therapy, Eye Dr

18. Do you currently do TB screening by asking questions and/or TB skin test?

TB skin test

If you do TB screening, when do you complete the screening or skin tests?

Skin tests

How many TB tests did you perform in last year?

1900

19. Are there any special business license fees or taxes that are to be paid to the city or county?

Unknown

20. Do you currently have a financial limit (pool) with the current contract?

No

a. If so, what does it cover and how much is it?

N/A

21. Have you gone over the financial limit (pool)?

No

a. If so, how many months into the contract was it before you went over the limit?

N/A

b. If so, how much over the financial limit (pool) did you go over every year?

N/A

22. Can you please provide a copy of the current medical services contract?

Attached in the email with this Addendum.

23. Do you have a state statute that you reprice to?

Unknown

24. What is the 3-year average spending on the following: ambulance, in/outpatient, pharmacy, medical supplies, durable medical supplies, mobile x-ray and laboratory?

Unknown

25. Would the county prefer the vendor to review/verify the inmate/detainee medical bills, apply any discounts and pay the invoice for the county (act as a third-party administrator)?

No, because we already have a 3rd party

26. Is there a dedicated fax line to medical?

JAIL- Yes

JDC- Fax available in Administration area in the front office area of the building

a. If not, is a fax line available?

27. Do you have an existing EMR system?

JAIL- Cor EMR

JDC-not currently

If yes, who is the current provider?

Cor EMR

28. Is there internet connection already in the medical unit?

JAIL-Yes

JDC-No

a. Is this provided by the county or the current contractor?

JAIL- County

JDC-Contractor

b. If the current contractor is providing, do you know the cost?

JAIL- No

c. What kind of network gear is needed or currently in place for internet at your facility if contractor must supply?

Nothing, we have all of the gear.

29. How many simultaneous med passes occur?

They all go out at once.

Please clarify

N/A

30. Who is your JMS provider?

Currently Offendertrak, soon to be Black Creek

31. Will the County provide an internal email for the medical staff?

Currently only the schedulers have county emails

If not, how many accounts will be needed?

None

32. How many desktop computers do the medical staff currently use?

JAIL- 11

JDC- 0

a. How many are county owned vs. contractor owned?

All county

33. How many laptops do the medical staff currently use?

JAIL- 3 for med pass

JDC- 1

a. How many are county owned vs. contractor owned?

JAIL-County owned

JDC- Contractor owned

34. Are there internet capabilities where the medical staff will be seeing patients? Exam rooms?

Booking areas? Hardwire? Wireless?

JAIL- Yes

35. How many scanners do the medical staff currently use?

JAIL- 2

a. How many are county owned vs. contractor owned?

JAIL- County

36. How many printers do the medical staff currently use?

3

a. Are they county owned, or contractor owned?

JAIL- County

37. Are any members of the jail's current health service workforce unionized?

JAIL- No

If yes, please provide the following:

a. A copy of each union contract

N/A

b. Complete contact information for a designated contact person at each union

N/A

c. The number of union grievances that resulted in arbitration cases over the last 12 months.

N/A

38. Is the jail currently subject to any court orders or legal directives?

No

If yes, please provide copies of the order/directive.

39. Of the total population, how many are:

County- **641**

ICE- **JAIL- 0**

US Marshal- **JAIL- 93**

Juveniles-**JAIL- 0 JDC- all under the age of 21; hold for both Boone and Winnebago County as we are in the same circuit**

Native American- **0**

Federal- **JAIL- 93**

DOC- **JAIL 33**

Work Release- **0**

Indigent- **59**

Other- **N/A**

40. Indicate the level of screening for inmates/detainees at your jail. (Check all that apply)

Yes, Basic intake health screening, generally done at booking for medical and mental health issues by correctional officer.

Yes, Separate screening tool specific to mental health/suicide prevention issues completed by correctional officer.

Yes, Separate screening tool specific to mental health/suicide prevention issues completed by RN or mental health professional.

_____ Other (please explain) _____ Menta Health Competes

41. Is there a secondary review of screening reports for accuracy, completeness, legibility, and the referral process? (e.g., by first line supervisor, jail nurse, etc.)

Yes, by whom? _____ **PREA compliance Officer**

42. Is staff required to use a prescribed form when making mental health referrals?

Yes

43. Are arresting/transporting officers and probation agents, etc. required to complete a pre-incarceration form identifying mental health risk issues?

Yes, just suicidal questions

44. Please list the programs offered to inmates/detainees in your jail, such as education, religious, recreation, life skills, substance abuse, etc.

AA, NA, CNC, GED, Religious Services, Educational programs loaded on tablets

1. We have saved our IL counties over 80% on their medical bills last year. Would you please send 3 off-site invoices so we can see how much ACH may be able to save Winnebago County?

JAIL- We currently have a contract with an outside source for bill pay

2. In Section A7, it asks for screening for tuberculosis. Is this for screening and testing of the inmates or screening only?

JAIL- Currently both are being done

3. In Section A8, #8, it asks for screening tests for tuberculosis, venereal disease and other tests, as well as urinalysis will be performed, as clinically indicated, or as directed by applicable local, State or Federal Statutes. Does this include screening and testing for inmates?

JAIL- Screening done here, testing sent out and done at local hospital

4. In Section A17, it states the Proposer shall arrange, provide and pay for infectious and communicable disease training, testing, immunizations and counseling, to include Hepatitis B and Tuberculosis testing for their health care staff providing services under a resulting contract. Do you require testing and screening or just testing for health care staff?

JAIL-Medical does their staff

5. May a vendor propose an electronic medical records system for both the jail and the JDC? This requirement is only listed under the JDC. If Winnebago chooses to use our system, we can save the County on start-up fees if we can utilize our system at both facilities.

JAIL- Already have one

JDC does not have EMR

Accreditation

1. Please indicate whether the County wishes to seek NCCHC accreditation for the adult facility during the life of this contract.

Yes

2. Please indicate whether the County wishes to seek NCCHC accreditation for the juvenile facility during the life of this contract.

TBD

3. If the County elects to seek NCCHC accreditation, who will be responsible for costs associated with seeking accreditation?

County

Medication-Assisted Treatment: **THIS IS A PART OF THE MENTAL HEALTH PROGRAM**

4. In light of the DOJ report regarding medication-assisted treatment (MAT) programs, is the County seeking a MAT program for this proposal/contract?

Already have one

5. Do you currently continue MAT medication (e.g., methadone, buprenorphine, naltrexone/Vivitrol) when a patient entering the facility was receiving the medication in the community? Or do you require these patients to detox?

We only currently continue meds

- If you continue MAT medication, which medication(s) do you provide?

Suboxone, Methadone

- How many patients are you treating on average per month by medication?

Approximately 190-200 patients receive mental health medications each month.

6. What medication (e.g., methadone, buprenorphine, etc.) do you currently use for opioid-dependent pregnant patients?

Methadone, buprenorphine

7. Do you currently induct new patients into MAT at the facility prior to discharge?

No

If so, what medication(s) do you provide?

N/A

- How many patients are you inducting on average per month by medication?

N/A

If you are not currently inducting new patients into MAT, are you interested in providing induction services going forward?

At some point

8. Please provide the percentage of intakes who enter the facility on a verified MAT program in the community.

Average of 6 patients entering jail on verified MAT meds each month.

9. Please provide the percentage of intakes diagnosed with opioid use disorder (OUD).

We do not have the stats on everyone entering jail with an opioid use disorder.

10. Do you work with a community provider/local clinic to provide methadone?

Remedies 215 Easton Parkway location in Rockford.

If so, please provide their name and contact information.

See above

11. Do you have grant funding for MAT?

Yes

If so, please provide details.

A grant through the mental health board

General

12. Who are the members of the proposal evaluation committee?

Superintendent Odgen, Tami Goral, Captain Egler, Sheriff Caruana, Chief Rick Ciganek

13. Please provide the total liquidated damages for failure to meet service requirements for the calendar years: 2021, 2022 and 2023.

0

- Please also provide a listing of the most common services not met.

N/A

On-Site Care

14. Please confirm if dialysis is treated onsite or offsite. If it is provided onsite, please provide:

Offsite

- The current vendor providing this service.

Davita

- The per treatment per patient utilization for the calendar years: 2021, 2022 and 2023.

Data not available

15. Please provide the pharmaceutical patient utilization by category (HIV, Hep C, Biologicals, Psychiatric, Chemo, MAT, LAIs and Other) for the calendar years: 2021, 2022 and 2023.

Data not available

16. Please provide the pharmaceutical annual spend by category (HIV, Hep C, Biologicals, Psychiatric, Chemo, MAT, LAIs and Other) for the calendar years: 2021, 2022 and 2023.

Data not available

17. Of inmates receiving Hepatitis C treatment, what is the nature of the treatment?

The care of a Hep C patient would be coordinated between the provider and outside provider

18. Please provide a copy of the current Cora Physical Therapy contract.

Sent as attachment

Please provide the total annual spend to Cora Physical Therapy for the calendar year: 2021, 2022 and 2023.

2021: \$56,576.04

2022: \$56,576.04

2023: \$56,576.04

Please provide the average number of PT patients seen for the calendar years: 2021, 2022, and 2023.

We average 55-65 visits a month, so the annual number of visits is 660-780

Off-Site Care

19. Please provide the off-site patient utilization by category (Ambulance, Air Ambulance, Inpatient Hospitalization, ER, Observation, Office Visits, One-Day Surgeries, Chemotherapy, Radiation) for the calendar years: 2021, 2022 and 2023.

Data not available

20. Please provide the off-site spend by category (Ambulance, Air Ambulance, Inpatient Hospitalization, ER, Observation, Office Visits, One-Day Surgeries, Chemotherapy, Radiation) for the calendar years: 2021, 2022 and 2023.

Data not available

21. Please confirm if the County or Proposer will be liable for the Medicaid State Share charges.

a. Which party will be responsible for the reporting/ invoice tracking/ and disputes with the Medicaid Department?

County has outside service to track and pay bills- Heritage Health

b. Please provide the total annual spend for the calendar years: 2021, 2022 and 2023.

We were only able to obtain the billed amounts from June, 2023 through January, 2024. The billing amount in total was \$1,554,632 and the actual paid amount was \$91,618. Winnebago County currently has a contract with a third-party provider to manage and pay the off-site bills and we intend to continue that contractual relationship as they will pay all the off-site medical bills for us.

Mental Health Services

22. Will psychiatric services at the jail remain the responsibility of the current mental health vendor?

Yes

23. Will the mental health vendor be responsible for the cost of psychotropic medications? If no, please indicate, on a monthly basis for the past 12 months, how many patients have been on psychotropic medications. Please indicate this for both adult and juvenile facilities.

JAIL- Yes

JDC- Medication costs are the responsibility of the parent/legal guardian.

24. Will the mental health or somatic vendor be responsible for the development and implementation of the suicide prevention program and training at the adult facility?

Yes

25. Please provide a copy of the current Advance Correctional Healthcare mental health contract.

Previously provided

- a. Please provide the total annual spend to ACH for the calendar years: 2021, 2022 and 2023.

Data not available

26. Please provide a copy of the current Rosecrance mental health contract.

Rosecrance isn't our current Mental Health provider

- a. Please provide the total annual spend to Rosecrance for the calendar years: 2021, 2022 and 2023.

N/A

Staffing:

27. Page 5 of the RFP states: "Proposals should be based on an ADP of 720 for the first year of the new contract." Page 28, under General of the RFP states: "The staffing plan shall be in table format and based upon an average monthly inmate population of 850." An 850 ADP is also listed on Attachment F (Fee Schedule for the Jail). The latter (850) aligns with the per diem requirement. Please confirm the ADP under which the proposal should be based.

850

28. Please provide the current vacancies by position that are not filled and the length of time each has been vacant.

No current vacancies

29. Please provide the total annual staffing reimbursements (actual compensation + benefits cost) the County has received for calendar years: 2021, 2022 and 2023.

\$0

30. Please provide the total annual staffing penalty (\$500 for each shift) the County has received for calendar years: 2021, 2022 and 2023.

\$0

31. Please provide the current average salary rate per position.

N/A

32. Please provide, by shift (Evening, Night and Weekend), the current shift differentials paid to the staff.

N/A

33. Please confirm if any staff are unionized. If so, please provide the union arrangement.

No

Legal:

34. Will the County agree that Contractor will retain ownership interest in its Patient Safety Organization agreement, Trademark and Proprietary documents, reports, and data?

Yes, unless the Contractor consents to such disclosure or it's required by law.

35. Page 5 notes that detainees and arrestees are considered an inmate in this contract and 11s on p11 (and 12j on p13) requires the Proposer to be responsible for all facets of health care services for inmates. However, Page 32(A7) (4) states that the arresting agency is responsible for medical care for arrestees who are not admitted into the facility. Can you clarify who will be responsible for the health care of an arrestee/detainee?

Before and inmate is accepted and booked into the facility they are the responsibility of the arresting agency, once accepted they are the county's.

a. When does the responsibility shift to the healthcare provider?

Once accepted by medical staff at booking

36. On Page 14, the RFP states: "The Proposer shall make available to the JDC, or their designee or the County unless specifically prohibited, at their request all records, documents or other papers relating to the direct delivery of health care services at the JDC." There are certain records protected by federal law that prohibit disclosure as the records are classified as patient safety work product. Please confirm that these types of records will not be required to be made available at JDC's request.

JDC will need all records available that are required by IDJJ, AOIC and PREA Standards. Additionally, staff will need to know information related to precautions that would be required during the care of the individual (i.e. – history of allergies, seizures, sickle cell for precautions, etc.)

37. Page 31, Item 4 states: "In addition to twenty-four (24) hours a day emergency service coverage, the hours for routine nurse sick call shall be at levels which allow for all inmates needing medical services to be seen, including to be seen outside the scheduled sick call rounds done in the housing units if the need arises as determined by the selected Proposer and in accordance with WCSO policies and procedures." If the number of requests exceeds the scheduled sick call rounds, this will require more staffing hours. Will this be considered a change in scope where compensation can be renegotiated?

This has not occurred in the past

38. Page 41, A25(g) indicates that the Proposer shall be responsible for "Co-Pay for health care services." Is the Proposer responsible for co-pay for health care services on site or off site?

Vendor is responsible to submit them to the county

39. Page 47, under On-Call Staff, the RFP states: "The Proposer shall guarantee that coverage will be provided according to the schedules agreed to by the County. Failure to provide coverage will result in a penalty of \$500 for each shift which is not covered. The penalty will be deducted from the monthly billing for services." Does the \$500 penalty for a missed shift apply to any and all shifts with JDC or just on-call shifts?

JDC must comply with the standards of IDJJ, AOIC and PREA, which includes medical care being available. Therefore, we would need this penalty to apply to any and all missed shifts. We do not currently utilize on-call shifts at JDC.

40. Page 81, C50(2) states: "If, at any time during the term of a resulting contract, or at any time after the expiration or termination of a resulting contract, the County or the County's designated representative(s) finds the dollar liability is less than payments rendered by the County to the selected Proposer, the selected Proposer agrees that the difference shall be either repaid immediately or credited against any future billings due the selected Proposer." Does this read that if the Proposer spends less money than it is paid by the County that the County can then request an immediate refund (essentially, that the Proposer cannot make a profit from this contract)?

All shifts. The current vendor has not experienced deficits in this service.

41. Is the County or the facility currently under any consent decree or other governmental investigation?

No

Technology:

42. Who owns the CorEMR system?

JAIL- County

JDC does not have an EMR

43. What version of CorEMR is currently being used?

1.0

44. Please provide the vendor/agency for the following services, and indicate "yes" or "no" on whether CorEMR interfaces with this service?

- **JMS-Offendertrak**
- **Lab-UIC -No**
- **Pharmacy-Correct RX yes**
- **Electronic prescription Interface-no**
- **Health Information Exchange-no**
- **Other**

45. Please provide the name of the Case Management System used to track housing, status of youth at the Juvenile facility.

Offendertrack

RFP Requirements:

46. Attachment C is "Proposer's References for Jail" and Attachment D is "Past Performance And References" for JDC. Please confirm the reference requirements for both the Jail and JDC.

Provide 3 References for both the JAIL and JDC. "List three references of customers who can verify the quality of service your company provide. The County prefers customers of similar size and scope of work to this proposal. Please provide your information using the following form. Note: Provide three each for both the Jail and JDC."

Question #1 - Rx/month

What is the average number of prescriptions filled per month for the past 12 months at the Winnebago County Adult Jail?

N/A

Question #2 - Patient Specific vs. Stock

What percentage of medications are dispensed as patient specific vs. stock?

Majority of patient specific

Question #3 - Packaging

What type of medication packaging (blister cards, vials, strips, other) do you currently use, and do you wish to keep the same packaging system?

Blister Cards

Question #4 - Quantities

How many days' worth of medication (7, 14, 30 days) is typically dispensed for routine medication orders, and do you wish to keep it the same?

30

Question #5 - 340B

Who is the 340B covered entity that your current medical or pharmacy vendor has negotiated with on behalf of Winnebago County to obtain cost savings on HIV and other costly medications?

Don't currently have one

Question #6 - Inspections

How often does your current pharmacy vendor provide, or coordinate, inspections of the medication areas at your facility?

Quarterly

Question #7 - Utilization Data

Knowledge of accurate medication utilization data is extremely important for medical bidders in determining a final and educated bid rate in response to your solicitation. Not providing actual medication utilization (dispensing) data to all bidders will result in a competitive advantage to your incumbent medical vendor who already has this information and knows those costs.

Because public money is used to pay for pharmacy services and medications under the current contract, and being that medication utilization is unique per jail, our understanding is that medication utilization and cost information would not be considered proprietary and can be readily separated by your current medical vendor or their subcontracted pharmacy.

- To ensure a transparent and fair procurement process, can Winnebago County please provide a two-month report for April 2024 and May 2024 with actual pharmacy dispensing data detailed by line item reflecting the fill date, medication name and strength, quantity dispensed, and medication price (with patient names redacted) as an addendum to the RFP?
- **N/A UICOMR agrees to this but will be provided by Correct Rx.**

CAUTION: these results are specific to prescribing patterns of the provider

- Example: date filled | medication name and strength | quantity | price

Question #8 - Electronic prescription order entry and eMAR

Many correctional institutions within the industry are utilizing electronic order entry and eMAR software to decrease their reliance on time consuming paper processes. Electronic med pass will decrease the time required for med pass by up to 50%, eliminate the need and overtime for end of month changeovers, eliminate transcription errors from faxed orders that are profiled for MAR purposes, and saves time that can be used by your medical staff to provide other health care services?

We are currently using Electronic Med Pass

- What is the name of your current electronic prescription order entry and eMAR system that is provided by your current medical or pharmacy vendor?

Correct RX/Coremr

- If a software is provided, is the system Electronic Prescribing of Controlled Substances (EPCS) compliant?

Yes

- Would you find value in adding a requirement to your current solicitation for bidders to provide a no cost solution for electronic prescription order entry and eMAR if a solution is not currently in place?

We are currently using it

Question #9 - Electronic Reconciliation

Many correctional institutions within the industry are using electronic check-in and return programs for inventory management. Manual daily order check-in and return processing time can be decreased by up to 75%, medication diversion potential is virtually eliminated, and Winnebago County will have full accountability of all medications received by, and returned from, your facility for accounting purposes.

We have a system currently in place

- What is the name of your current barcode electronic order reconciliation (check-in) and medication return management system that is provided by your current medical or pharmacy vendor?

Coremr

- Would you find value in adding this requirement to your current solicitation for bidders to provide a free solution for electronic inventory management if a solution is not currently in place?

We are currently using it

Question #10 - Online Reporting Access

Many correctional institutions within the industry have fingertip access to meaningful and actionable electronic reporting available to County administrative personnel monitoring contract expenses. Analyzing prescriber ordering trends and expenditures to better manage facility operations is critical to your County administrative team and dependent upon reliable and accurate pharmacy reporting.

- What is the name of the current online reporting dashboard used by facility and county administrative staff to access meaningful and accurate reporting?

Coremr

- Would you find value in adding this requirement to your current solicitation for bidders to provide a no cost solution for online reporting so your facility-level staff and administrators can access online reports 24/7/365 if a solution is not currently in place?

Yes

Question #11 - Current Pharmacy Vendor

RFP Page 10, Section 11.L states, "Health care services shall consist of...and shall include, but are not limited to the provision of...medical records management, pharmacy services..." RFP Page 25, Appendix A states, "This responsibility provides for...pharmacy care..." Page 35, Section A12 states, "The selected Proposer shall be responsible for furnishing complete pharmaceutical needs."

What company is your current pharmacy services provider?

Correct RX

- Is the current pharmacy vendor subcontracted by the current medical vendor or are they operating under an independent contract?

Subcontracted

- What, if any, are the current struggles in the provision of pharmacy services at Winnebago County to your level of expectation and needs?

N/A

- If there are no struggles or issues, what are the top three areas in which you wish to see improvement or enhanced services provided?

N/A

- Are Offerors permitted to subcontract with a pharmacy partner of their choice regarding medication dispensing and pharmacy program management services?

Yes

Question #12 - Current Pharmacy Pricing Structure

Is the current medical provider responsible for all pharmacy costs; or is there a cost pool regarding pharmaceuticals with an annual contract cap before those expenses become the responsibility of the County?

No, no cost pool, there is a cost sharing program in place

- If there is a cost pool, what is the annual cap and how many months into the contract year is the cap typically reached?

N/A

- If there is a cost pool and the cap is reached, are medications billed at cost plus a dispensing fee to the County, discount to AWP, discount to WAC, NADAC, or full retail pricing for the remainder of that contract year?

N/A

- If not, what is the pricing formula used to bill the County for these medications?

N/A

- Are there any high-cost medications or medication categories that are always the responsibility of the County?

No split 50/50 with current vendor

Question #13 – Attachment F

RFP Attachment F for the WCJ is requesting the proposer's fee schedule; yet there is not an individual line item regarding a proposer's fee for medications and pharmacy services.

- To properly benchmark a proposer's pharmacy costs, would Winnebago County consider updating Attachment F to include pharmacy costs as a line item so they are completely transparent and documented for the evaluation committee?

Will consider

- For calendar or contract years 2022 and 2023 what is the annual spend for medications at the Winnebago County Adult Jail?

2022 = \$150,416

2023 = \$210,486

- If this information is unknown or not provided by your medical vendor, what metric(s) is the county using to assess best value regarding your pharmacy program management and medications costs?

TBD

Question #14 - Cooperative Procurement

Cooperative procurement contracts create value and enhance cost containment for jails by providing access to an already competitively solicited pharmacy agreement that is accessible to Winnebago County.

- **Is Winnebago County familiar with, and open to considering cooperative procurement contracts (which have already been competitively solicited and are compliant procurement mechanisms available to Winnebago County) to acquire cost-effective independent correctional pharmacy services?**

Yes

- **If not, what concern or reservation does Winnebago County have in utilizing cooperative procurement contracts (membership is completely free to most COOPs) to access independent pharmacy outside the scope of the current RFP for Health and Mental Health service**

Any questions should be directed to the Purchasing Department, 404 Elm Street, Room 202, Rockford, IL 61101 or by phone 815-319-4380, or email purchasing@purchasing.wincoil.gov

END OF ADDENDUM ONE