



FULTON COUNTY

August 8, 2016

Re: 17RFP07012016B-BR Inmate Medical Services

Dear Proposers:

Attached is one (1) copy of Addendum #5, hereby made a part of the above-referenced Request for Proposal (RFP).

Except as provided herein, all terms and conditions in the RFP referenced above remain unchanged and in full force and effect.

Sincerely,

A handwritten signature in black ink that reads "Brian Richmond". The signature is written in a cursive style with a large, sweeping initial "B".

Brian Richmond
Assistant Purchasing Agent

This Addendum forms a part of the contract documents and **modifies** the original RFP documents as noted below:

1. **Question:** Is there an incumbent?

Answer: Yes, Corizon

2. **Question:** Who is the incumbent vendor if there is one?

Answer: There is only one.

3. **Question:** Are there incumbent staff in place?

Answer: Yes

Question: What was the last year annual spend?

Answer: The Inmate Health Services Contract for 2016 is \$16.2 million.

4. **Question:** We realize this was covered in the **Pre-Bid Conference** on Tuesday, July 19, 2016, but is the bid ADP 2,800 or 3,000?

Answer: 2800 to 3000 ADP

5. **Question:** With regard to lawsuits pertaining to inmate health care at the FCJ, frivolous or otherwise:

How many have been filed against Fulton County, Georgia ("County") and/or the incumbent health care provider in the last three years?

How many have been settled in that timeframe?

Answer: This information is not available at this time.

6. **Question:** With regard to the list of specialty clinics to be held onsite as per **RFP § 3.3.G.8.a**, on pg. 3-12, please identify whether:

These clinics are currently being conducted onsite

If “yes,” please provide the name and contact information for the physician providing the clinic encounters.

If “yes,” please indicate the (a) frequency and (b) number of inmates enrolled in each clinic.

If “yes,” please indicate how many hours per week each clinic is held.

Answer: HIV Clinic-M-F 8 hours a day

Dialysis Clinic- 7 days a week. Hours determined by patient need.

OB/GYN- M-F 8 hours a day

Answer: Staff is included in the staffing FTEs

7. **Question:** Please provide copies of the laboratory formulary currently in use at the FCJ.

Answer: All laboratory tests are expected to be available.

8. In **RFP § 1.5.1**, pg. 1-3, and **RFP § 3.4 (under Section 4—Relevant Project Experience**, first paragraph, pg. 3-33), there appears to be a conflict. Please confirm that the first paragraph in Section 4 should read the same as **RFP § 1.5.1** as reiterated below:

“The proposer shall have at least a minimum of two (2) years of experience providing medical services administration in correctional facilities with an average daily inmate population of 2,000 or more or five (5) years of experience in a medical teaching hospital or five (5) years of experience in the provision of medical services in a Public County medical hospital, the last two of which must be an operating entity of a Georgia Public Hospital Authority.”

Answer:

Section 4 – Relevant Project Experience

Identify three (3) projects where the Proposer has provided comprehensive correctional health services that includes; physical health, mental health and dental care in a correctional setting with entities comparable to Fulton County within the past three (3) years. Such entities include cities and/or counties which have jail facilities with 2000 inmates or more. Limit your response to one (1) page per project; please provide the following information for each project:

- The name of the facility, years performed and the facility location.
- A description of the services provided.

A reference, including a contact name, addresses and phone number. This reference should be the facility staff member who was in charge of the project for the city or county.

Answer: Section 1.5 describes the requirements to submit a proposal for consideration. Section 4 requests proof of experience in the provision of care in a facility in like size and complexity of the Fulton County Jail.

9. **Question:** Page 3-6, 3 (b) Management Information Systems-Please provide a list of the existing Telemedicine equipment in use by the county, when it was replaced, and the equipment locations and all included peripherals if applicable.

Answer: Corizon provided the original telemedicine equipment. It is the existing equipment. The hardware is STS Telemedicine Cart – Model ENOVATE made by SKC (Smart Communications). Software Application is Agnes 3.0 made by Global Telemedicine.

10. **Question:** In Appendix #4: *The Harper Federal Consent Order*, there is a random misnumbered page inserted between pages 1 and 2. This appears to be the end of a “revised” Checklist from Section 9. It notes Exhibit H, which does not appear in either the RFP or Addendum 1, only this reference to it. Please clarify for bidders that there is an Exhibit H and if so, provide Exhibit H Forms 1 and 2 for completion.

Answer: In Appendix 4 of Addendum #1, please disregard the second page of the document that begins with the heading

“EXHIBIT 1 Required Proposal Submittal Check List for Request to Proposal (RFP)”

11. **Question:** Are the values to be added to Tables 1-A (pg. 3-39), 1-C (pg. 3-42), 1-D (pg. 3-43), and 1-E (pg. 3-44) of **RFP § 3.5: Cost Proposal Format and Content** to be a reflection of the breakdown of the first year price, or the five-year total cost?

Answer: The language that we proposed on page 3-38 stated, “ The total Cost of Years 1, 2, 3, 4 and 5 added together will be used as the total cost bid by the proposer; and used in the cost point computation”. Therefore, it would be the five-year total cost.

RFP# 17RFP07012016B-BR Inmate Medical Services
Addendum #5
August 8, 2016

**ACKNOWLEDGEMENT OF ADDENDUM NO. 5,
17RFP07012016B-BR Inmate Medical Services.**

The undersigned Proposer acknowledges receipt of this Addendum by returning one (1) copy of this form with the proposal submittal package to the Department of Purchasing & Contract Compliance, Fulton County Public Safety Building, 130 Peachtree Street, S.W., Suite 1168, Atlanta, Georgia 30303 by the RFP due date and time of Wednesday, August 10, 2016 11:00 AM.

This is to acknowledge receipt of Addendum No. 5, _____ day of _____, 2016.

Legal Name of Bidder

Signature of Authorized Representative

Title