

AGREEMENT FOR INTERIM INMATE HEALTH CARE SERVICES
AT FORT BEND COUNTY, TEXAS
EFFECTIVE THROUGH SEPTEMBER 30, 2023

06/29/2023 Original (e) received from Samantha Gulley, County Judge
06/29/2023 Original (e) sent to Cheryl Krejci / Olivia Rios, Purchasing
06/29/2023 Original (e) sent to Olga Payero / Samantha Gulley, County Judge

AGREEMENT**Section 1. Scope of Services**

- A. For purposes for this Agreement the following have been designated as Contract Administrators:

Fort Bend County	Captain T. Chesser or (alternately Major J. Webb)
Wellpath	Justin Searle, President, Local Government

- B. Upon execution of this Agreement, WELLPATH shall assemble a dedicated Transition Team to begin work identifying all tasks required to successfully execute a seamless changeover of services from a prior provider; while this obligation will predate the Effective Date, Wellpath believes it to be necessary and shall use its best efforts as such preparatory initiatives shall enhance the probability of a well-ordered start on the Effective Date. WELLPATH shall work within the time frame and in accordance with the County Time Frame Schedule, attached hereto and incorporated herein as Exhibit A. Wellpath shall keep the Sheriff's Designated Representative(s) updated on the progress of any transition through and beyond the Effective Date until the transition is completed to ensure that contract requirements are met.
- C. Wellpath shall render Services outlined in Exhibit B, attached hereto and incorporated herein, that meet or exceed the requirements of the TEXAS COMMISSION ON JAIL STANDARDS ("TCJS") and in accordance with the attached and incorporated Exhibit B, Interim Inmate Medical Services Technical and Price Proposal dated March 30, 2023. Wellpath's responsibility for medical care for each inmate commences once the individual has been physically booked into the Fort Bend County Jail for housing and is under the care, custody, and control of the Sheriff, such individual(s) being hereinafter referred to in this Agreement as "inmate(s)". In the event an inmate is not physically in custody at the Facility when booked, the Sheriff must provide effective notification to Wellpath's staff for Wellpath to commence appropriate services for such an inmate. Wellpath shall provide first responder health care services for all persons upon arrival at the Facility. As more specifically enumerated in Exhibit B, Wellpath shall provide all professional medical, dental, treatment for optical injuries (within Wellpath's on-site capabilities and scope of practice) and/or diseases, arrange and coordinate off-site vision care and perform related health care and administrative services for the inmates in custody of the Sheriff at the Facility in accordance with the standards established by the Texas Commission on Jail Standards, The National Commission on Correctional Health Care (NCCHC), and American Correctional Association (ACA). Wellpath's treatment responsibility regarding an inmate's medical care ends with the discharge of the inmate.

- D. Medical Clearance & Inmate Workers. Wellpath will examine and provide medical clearance for all inmate workers, as requested by the Jail Commander. The medical clearance process will be completed within 24 hours of receiving the list of inmates to be cleared unless laboratory testing necessarily increases the time required to be cleared. Notwithstanding the foregoing, Wellpath's healthcare services for inmates shall take precedence over this obligation.
- E. Mental Health Services. In addition to the mental health services specified in Exhibit B, Wellpath shall provide services for the completion of secondary evaluations for Court Ordered Medications pursuant to Texas Health and Safety Code § 574.106, Texas Code of Criminal Procedure Article 46B.086, and/or as required by law. Wellpath shall also provide civil commitment certifications. However, Wellpath's compensation for services is no way dependent on whether Wellpath or their personnel determines that the individual being evaluated should or should not be considered for court-ordered medication or mental health services. Wellpath agrees to comply with each of the obligations within this subsection so long as such services do not interfere with the integrity of Wellpath's therapeutic partnership with its patients. In other words, Wellpath shall not be obligated under any circumstances to collect forensic information. Further, Wellpath, in its sole and reasonable discretion, shall determine whether a requested service has the potential to jeopardize the integrity of the therapeutic relationship.
- F. Medical Waste. Wellpath shall arrange for the removal and proper disposal of all medical waste generated under this Agreement in accordance with applicable state laws and OSHA standards. However, the County shall bear the cost of the proper removal and disposal of said waste through a specific budget allotment.
- G. Inmate and Staff Education. Wellpath shall conduct an ongoing health education program for inmates at the Facility with the objective of raising the level of inmate health and health care. Wellpath staff will provide relevant training to County staff as required by accrediting bodies, including but not limited to mental health, behavioral change treatment curriculum and suicide prevention, as approved by the Sheriff's Office. Wellpath will also work with the Sheriff to provide correctional staff with health care training as desired by the Sheriff and as Wellpath is able to accommodate without jeopardizing the quality of inmate care.
- H. Telehealth. Some of the Routine On-Site Services to be rendered by Wellpath may be supplied remotely using telehealth. The appropriateness of the use of telehealth for any given patient/service and the conditions under which it may be used shall be based upon the professional judgment of Wellpath in conjunction with Staffing Matrix constraints. Professional liability insurance coverage procured by Wellpath shall provide coverage for treatment and consultations of inmates and detainees when supplied in a telehealth setting. The County shall not attempt to access, without authorization, any audio or visual recordings of any sessions with patients that take place in a telehealth session; additionally, the County shall ensure that no other persons are present during, or have access to any information from, any such sessions or make any similar recordings. County shall not access the sessions from any computer or internet connection. In furtherance of this provision's stated objectives, Wellpath shall fully comply with all laws, rules, and regulations specific to the provision of telehealth services. Such compliance shall be in

addition to Wellpath's adherence to its ancillary policies and procedures, NCCHC Standards, and nursing protocols.

1. Off-site Medical Care. County has contracted with WELLPATH to provide necessary and appropriate health care to meet the serious medical and mental needs of inmates at the Facility. WELLPATH shall monitor all inmates sent off-site for medical care and shall ensure that appropriate care is rendered in a timely manner.
2. Off-site costs are defined to mean all medical, mental, and dental services performed away from the Facility, including but not limited to hospitalization, emergency room visits (to address an emergency medical condition(s)), ambulance transportation expenses (including Life Flight type transportation) outpatient surgeries, outpatient physician consultations, specialist fees, dialysis and diagnostic services performed offsite for County inmates.
3. The County or its designated representative(s) shall provide security (at the County's cost) as necessary and appropriate in connection with the transportation of any inmate between the Facility and any other location for off-site services.
4. WELLPATH is not financially responsible for off-site care. However, costs for off-site care shall be billed to WELLPATH who shall review billing for accuracy and reasonableness. WELLPATH shall remit payment on behalf of County to be reimbursed for same in accordance with Section 4 of this Agreement.

K. Routine On-Site Services shall not include:

1. BODY CAVITY SEARCHES/COLLECTION OF PHYSICAL EVIDENCE. WELLPATH health care staff will not perform body cavity searches, nor collect physical evidence (blood, hair, semen, saliva, etc.).
2. WELLPATH shall not be responsible for any medical testing or obtaining samples which are forensic in nature. Inmates assigned to any work release program who are not housed at the Facility are personally responsible for the costs of any medical services provided.
3. Elective Medical Care. WELLPATH shall not be responsible for providing or the costs associated with elective care to inmates at the Facility. For purposes of this Agreement, "elective medical care" includes medical care which, if not provided, would not, in the opinion of WELLPATH's medical director, cause the inmate's health to deteriorate or cause definite harm to the inmates wellbeing. Such decisions concerning medical care shall be consistent with general NCCHC and ACA standards. In the event of a dispute between WELLPATH and the County, the decision of WELLPATH's medical director shall be final. The County will be responsible for elective medical care that they deem necessary.
4. All inmates shall be medically cleared for booking into the Facility when medically stabilized and the inmate's medical condition no longer requires

- immediate emergency medical care or outside hospitalization so that the inmate can be reasonably housed at the Facility.
5. WELLPATH shall not be financially responsible for the cost of any medical treatment or health care services provided to any inmate prior to the inmate's commitment into the Sheriff's custody. In the event County refuses an inmate at booking and requires the arresting agency to obtain a "fit-for-jail" release from a local hospital, County shall be responsible for costs incurred for the "fit-for-jail" and WELLPATH shall be responsible for processing payment of the "fit-for-jail." However, if a "fit-for-jail" is obtained prior to presentment at booking, the arresting agency shall be responsible for payment of the "fit-for-jail." WELLPATH shall safeguard against payment of any invoices for "fit-for-jails" that are not authorized by County.
 6. WELLPATH shall not be responsible for the provision or cost of any offsite mental health services. In the event any inmate requires inpatient mental health services, County shall bear the cost.
 7. WELLPATH shall not be responsible for medical costs associated with the medical care of any infants born to inmates. WELLPATH shall provide health care services to pregnant inmates; however, health care services provided to an infant following birth will not be the responsibility of WELLPATH.
 8. Transportation Services. To the extent any inmate requires off-site health care treatment, the Sheriff/Designated Representative(s), shall, upon prior request from WELLPATH, its agents, employees or contractors, provide transportation as reasonably available, provided that such transportation is scheduled in advance. County shall be financially responsible for all transportation costs.
- L. WELLPATH agrees to use best efforts to avoid any interruptions in service and ensure day-to-day operational requirements continue to be met with any previous or future provider of inmate health services to County. Upon execution of this Agreement, WELLPATH shall assemble a dedicated Transition Team to begin work identifying all tasks required to successfully execute a seamless changeover of services from a prior provider; while this obligation will predate the Effective Date, Wellpath believes it to be necessary and shall use its best efforts as such preparatory initiatives shall enhance the probability of a well ordered start on the Effective Date. WELLPATH shall work within the time frame and in accordance with the attached and incorporated **Exhibit A** to this Agreement, keeping the Sheriff's Designated Representative(s) updated on the progress of any transition through and beyond the Effective Date until the transition is completed to ensure that contract requirements are met.
- M. Included in the inmate population are inmates incarcerated on behalf of jurisdictions other than the Fort Bend County. Wellpath shall promptly comply with County's Contract Administrator's requests for documentation of treatment provided to these inmates to assist County in seeking reimbursement for the medical expenses and costs of pharmaceuticals incurred on behalf of such inmates.
- N. Comprehensive Quality Improvement & Wellpath's PSO Program. WELLPATH shall develop a comprehensive quality improvement program of regularly scheduled audits

of all inmate health care services provided under this Agreement, documentation of deficiencies, and plans for correction of deficiencies. The quality improvement plan shall include a provision for peer review in accordance with the Wellpath Peer Review Program on an annual basis. The results of the peer review shall be provided to the Sheriff and available for any accreditation. Additionally, the parties agree to participate in monthly Medical Audit Committee ("MAC") meetings to evaluate the Facility healthcare program on an ongoing basis across all disciplines of services provided. Designated Representatives of both Wellpath and County, and any other appropriate personnel or designees will confer and discuss in accordance with a set agenda, health services statistics regarding the Facility by category of care, costs of services, coordination between security and health services and identified issues and program needs. Notwithstanding the foregoing, at Wellpath's election/preference (and within its sole and absolute discretion), the foregoing discussed Comprehensive Quality Improvement program shall be separate and apart from Wellpath's PSO Program established pursuant to and governed by the Patient Safety and Quality Improvement Act of 2005 and its companion regulations.

Section 2. Personnel

- A. Wellpath represents that it presently has, or is able to obtain, adequate qualified personnel in its employment for the timely performance of the Scope of Services required under this Agreement and that Wellpath shall furnish and maintain, adequate and sufficient personnel, in the opinion of County, to perform the Scope of Services when and as required and without delay. All persons (whether WELLPATH employees or WELLPATH contractors) providing services under this Agreement shall submit to a background investigation as directed by the Sheriff.
- B. All employees of Wellpath shall have such knowledge and experience as will enable them to perform the duties assigned to them. Any employee of Wellpath who, in the reasonable opinion of County, is incompetent or by his conduct becomes detrimental to the project shall, upon request of County, be immediately removed from association with the project.
- C. Wellpath shall recruit, interview, hire, train and administratively supervise all medical, technical and support personnel as necessary for providing health care services to inmates at the Facility, in accordance with the Staffing Matrix, included in the attached Exhibit B (beginning Section 3.1). Wellpath represents, such representation being essential to this Agreement, that this agreed upon Staffing Matrix is sufficient to provide appropriate and necessary health care services that complies with the requirements of the TEXAS COMMISSION ON JAIL STANDARDS for an inmate population with an Average Daily Population of 765. Wellpath agrees to fill any staffing vacancies that may occur promptly.
- D. All WELLPATH employees and contractors will wear Identification badges at all times in a visible manner. WELLPATH shall return all identification badges and/or visitor passes immediately after an employee, contractor, or any agent or representative of WELLPATH's resignation, removal, termination, or re-assignment.

- E. All personnel provided or made available by WELLPATH to provide services hereunder shall be licensed, certified or registered, as appropriate, in their respective areas of expertise as required by all applicable law.

Section 3. Medical Records and Reports

- A. Wellpath shall maintain complete and accurate electronic medical records (hereinafter "EMR") for every inmate regarding medical, dental, or mental health services received as a result of the inmate screening process and for services rendered following the inmate's assignment to a housing area. For purposes of this Agreement, an EMR is a real-time transaction processing database of medical information. Records will be kept in a professional and legally compliant manner consistent with the accepted practices of the professional medical community. These records shall be kept separate from the jail confinement records of the inmate. Records retention, expunction, and destruction will be coordinated with the County in accordance to all records retention laws.
- B. Wellpath shall utilize the EMR software chosen by the Sheriff, which is currently, CorEMR. The cost to integrate Wellpath's system with CorEMR and any applicable usage fees shall be Wellpath's initial responsibility. However, the County acknowledges and agrees that any WELLPATH costs, expenses, and usage fees associated with CorEMR/Wellpath system integration shall be budgeted, reconciled, and reimbursed to Wellpath as further detailed in this Agreement. Wellpath shall manage the system beginning on the Effective Date of this Agreement and shall ensure that the most updated software for system is installed,
- C. Wellpath acknowledges compliance with and understanding of all applicable HIPAA and state law medical privacy requirements. Wellpath shall develop and implement policies, standards and procedure to protect the confidentiality and security of all records and ensure that all employees are trained to adhere to security requirements. The retention of all records shall comply with applicable State and Federal laws and it is the responsibility of Wellpath to ensure compliance. Any penalty incurred by County, which is attributable to the negligent conduct of Wellpath, for a violation of HIPAA, shall be reimbursed by Wellpath in accordance with this Agreement.
- D. 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, Wellpath shall make all records accessible to the Sheriff, Jail Commander, Contract Administrator, District Attorney, or County Attorney; such disclosure being authorized by 45 C.F.R. §164.512(k)(5) including but not limited to: the administration and maintenance of the safety, security, and good order of the Fort Bend County Jail.
- E. Wellpath shall prepare health summaries to be sent with inmates transferred to the Texas Department of Corrections. Wellpath will ensure that inmates and health summaries are appropriately prepared for transfer within 24 hours of receiving the list of inmates being transferred, or as necessary.
- F. If an inmate medical record cannot be located within twenty-four (24) hours of a discovered loss, the Contract Administrator shall be immediately notified.
- G. Fort Bend County shall be the absolute and unqualified owner of all inmate medical records. Wellpath shall ensure that inmate health information is available to meet the

needs of continued patient care, legal requirements, research, education, and other legitimate uses. For purposes of subpoenas, Wellpath shall be the custodian of records.

Section 4. Compensation, Payment, and Periodic Reconciliation of Actual Costs and Expenses.

- A. For services provided in the Agreement beginning August 1st, 2023 through September 30, 2023, County shall pay Wellpath \$721,182 per month (the "**Monthly Base Rate**") with **Exhibit D**. Wellpath shall invoice the County for the Monthly Base Rate on the first day of the month in advance of the month in which services are to be furnished, e.g., August 1 (or a later date subject to the convenience of Wellpath) for services to be furnished in August. County agrees to remit payment by the fifteenth (15th) day of the month in which services are actually provided, e.g., by August 15. In addition to the Monthly Base Rate, Wellpath shall invoice the County for any one-time sign-on and retention bonuses that are used to ensure the program is fully staffed not to exceed a total amount of One Hundred and Eighty-Six Thousand Dollars (\$186,000); notwithstanding the prior sentence, Wellpath and County shall negotiate in good faith should it be determined that the estimate of \$186,000 is not sufficient. These bonuses will only apply to nursing and mental health positions. Additionally, the County understands, acknowledges, and agrees that this arrangement also requires that it compensate Wellpath for budgeted start-up costs by August 15, 2023; the substantive explanation for and total amount of said start-up costs are One Hundred and Thirty-Two Thousand Eight Hundred and Ninety-Three Dollars (\$132,893) as outlined in **Exhibit B** (beginning in Section 1). Periodic reconciliation of actual costs and expenses¹ will occur comparing actual costs to budgeted costs (by **Cost Category**) as detailed in **Exhibit D**. Wellpath shall issue a credit to the County (at the next periodic reconciliation) for aggregate costs below the operating budget. Alternatively, Wellpath shall issue an invoice to the County (due at the next billing cycle) for aggregate costs and expenses exceeding the operating budget. Wellpath will provide monthly financials which summarize all expenditures and provide a comparison to budgeted amounts.
- B. County shall also reimburse Wellpath for its agreed upon and approved actual costs and expenses associated with providing services in accordance with the operational budget shown in **Exhibit D with no additional fee, cost fee or expense to be added,**. Should Wellpath's actual costs and expenses exceed the budgeted amounts set forth in **Exhibit D**, the County shall reimburse Wellpath for those additional actual costs and expenses with no penalty, fee, or cost imposed to reduce said reimbursement, but subject to the County's right to retrospectively audit. Wellpath shall provide notice to the County as soon as reasonably practical when such additional costs and expenses (for budgeted amounts) are reasonably anticipated to, or are known to, have exceeded the amount set forth in budget in **Exhibit D**. Alternatively, Wellpath must receive confirmation that the

¹ Cost reconciliations shall occur quarterly and be provided to the client within sixty days of the quarter end. Shall actual costs exceed the budget Wellpath will invoice the county. Conversely, shall actual costs be under the budget, Wellpath will provide a credit memo to the County.

County Auditor has certified additional funds before incurring amounts (a) in excess of the maximum sum identified in Section 5 or (b) amounts that are outside the scope of this Agreement.

- C. Exhibit B is predicated upon an average monthly population of **765**. The budgeted amounts set forth in Exhibit D are intended to be utilized for purposes of the periodic expense reconciliation and are not intended to limit the amount of compensation/reimbursement to Wellpath or to commit County to an actual amount unless the amount is actually expended.
- D. At the end of the Term, Wellpath will allow an independent audit firm selected and paid for solely by County to audit Wellpath's County related books and records (in whatever form kept) to verify the utilization of agreed-upon procedures and fees for medical billings. Wellpath shall maintain such records in accordance with recognized accounting practices. This audit right will survive for the one (1) year period following expiration or termination of this or any renewal agreement. Prompt adjustments shall be made by Wellpath to compensate for any substantiated errors or omissions disclosed by such review or examination.

Section 5. Limit of Appropriation

- A. Wellpath clearly understands and agrees, such understanding and agreement being of the absolute essence of this Agreement, that County shall have available the total maximum sum of Five Million Dollars (\$5,000,000) certified as available by the County Auditor specifically allocated to fully discharge any and all liabilities County may incur.
- B. It is expressly understood and agreed that County has available Five Million Dollars (\$5,000,000) which represents the total maximum sum of certified as available by the County Auditor for the purpose of satisfying County's obligations under the terms and provisions of this Agreement; that notwithstanding anything to the contrary, or that may be construed to the contrary, the liability of County as to payment under the terms and provisions of this Agreement is limited to this sum, plus additional amounts of funds from time to time certified available pursuant to Sections 111.061 through 111.073 of the Local Government Code, as amended, for the purpose of satisfying County's obligations under the terms and provisions of this Agreement; and that when and if all the funds so certified are expended for the purpose of satisfying County's obligations under the terms and provisions of this Agreement, the sole and exclusive remedy of Wellpath is to terminate this Agreement.
- C. Wellpath does further understand and agree, said understanding and agreement also being of the absolute essence of this Agreement, that the total maximum compensation that Wellpath may become entitled to and the total maximum sum that County may become liable to pay to Wellpath shall not under any conditions, circumstances, or interpretations thereof exceed Five Million Dollars (\$5,000,000), the maximum sum certified as available by the County Auditor.

Section 6. Term

This Agreement shall commence on at 12:00 a.m. on August 1st, 2023, and end at 11:59:59 p.m. on September 30, 2023 (the "Term"). Fort Bend County may request to renew/extend this original Agreement. Each renewal/extension, if any, shall be subject to the mutual written concurrence of the Parties.

Section 7. Termination

- A. Termination for Convenience: Because this is an interim Agreement, Wellpath and County agree that neither party shall have the right to terminate for convenience during the Term. However, if this Agreement is extended then either party shall have the right to terminate for convenience, at any time, upon ninety (90) days prior written notice to the other.
- B. Termination for Default
 - 1. County may terminate the whole or any part of this Agreement for cause in the following circumstances:
 - a. If Wellpath materially breaches any of the covenants or terms and conditions set forth in this Agreement or fails to perform any of the other provisions of this Agreement or so fails to make progress as to endanger performance of this Agreement in accordance with its terms, and in any of these circumstances does not cure such breach or failure to County's reasonable satisfaction within a period of thirty (30) calendar days after receipt of notice from County specifying such breach or failure.
 - 2. If, after termination, it is determined by County that for any reason whatsoever that Wellpath was not in default, or that the default was excusable, services may continue in accordance with the terms and conditions of this Agreement or the rights and obligations of the parties shall be the same as if the termination had been issued for the convenience of the County in accordance with Section 7A above.
- C. Upon termination of this Agreement, County shall compensate Wellpath in accordance with Section 4, above, for those services which were provided under this Agreement prior to its termination, and which have not been previously invoiced to County. Wellpath's final invoice for said services will be presented to and paid by County in the same manner set forth in Section 4 above.
- D. If County terminates this Agreement as provided in this Section, no fees of any type, other than fees which have been earned and costs/expenses appropriate for reimbursement following reconciliation shall be paid to Wellpath in the ordinary course, notwithstanding the fact that such payments would occur after termination.

Section 8. Modifications and Waivers

- A. The parties may not amend or waive this Agreement, except by a written agreement executed by both parties.

- B. No failure or delay in exercising any right or remedy or requiring the satisfaction of any condition under this Agreement, and no course of dealing between the parties, operates as a waiver or estoppel of any right, remedy, or condition.
- C. The rights and remedies of the parties set forth in this Agreement are not exclusive of, but are cumulative to, any rights or remedies now or subsequently existing at law, in equity, or by statute.

Section 9. Property Disposition Upon Termination

Wellpath shall be allowed to remove its property from the Facility including its proprietary Policies and Procedures, Manuals, Training Material, and Forms. Nothing herein shall be construed to require Wellpath to provide copies of policies, procedures, manuals, training materials and/or forms to County or any successor provider, it being understood that such materials are proprietary to Wellpath. Additionally, because the County is obligated to pay for all medications and medical supplies, upon termination said items shall remain on-site as title vests with the County.

Section 10. Inspection of Books and Records

Wellpath will permit County, or any duly authorized agent of County, to inspect and examine the books and records of Wellpath (relative to the County) for the purpose of verifying the amount of work performed under the Scope of Services. County's right to inspect survives the termination of this Agreement for a period of one (1) year.

Section 11. Insurance

- A. Prior to commencement of the Services, Wellpath shall furnish County with properly executed certificates of insurance which shall evidence all insurance required. Insurance shall not be canceled, except on 30 days' prior written notice from Wellpath to County. Wellpath shall provide blanket insurance endorsements if requested by County. Wellpath shall maintain such insurance coverage from the time Services commence until Services are completed and provide replacement certificates, and endorsements for any such insurance expiring prior to completion of Services. Wellpath shall obtain such insurance written on an Occurrence or Claims Made form from such companies having Bests rating of A-/VIII or better, licensed or approved to transact business in the State of Texas, and shall obtain such insurance of the following types and minimum limits:
 - 1. Workers' Compensation insurance. Substitutes to genuine Workers' Compensation Insurance will not be allowed.
 - 2. Employers' Liability insurance with limits of not less than \$1,000,000 per injury by accident, \$1,000,000 per injury by disease, and \$1,000,000 per bodily injury by disease.

3. Commercial general liability insurance with a limit of not less than \$1,000,000 each occurrence and \$2,000,000 in the annual aggregate. Policy shall cover liability for bodily injury, personal injury, and property damage and products/completed operations arising out of the business operations of the policyholder. The Commercial General Liability Blanket Additional Insured endorsement including on-going and completed operations coverage will be submitted with the Certificates of Insurance. For Commercial General Liability, the County shall be named as an Additional Insured on a Primary & Non-Contributory basis for legal liability from the negligence of Wellpath. In the event of a claim alleging legal liability caused by the negligence or wrongful conduct of both Contractor and County, County shall look to its own insurance as "primary" and shall defend itself through its own insurance.
 4. Business Automobile Liability coverage with a combined Bodily Injury/Property Damage limit of not less than \$1,000,000 each accident. The policy shall cover liability arising from the operation of licensed vehicles by policyholder.
 5. Professional Liability (Medical Malpractice) Insurance with limits of not less than \$1,000,000 each occurrence, \$3,000,000 aggregate. Such insurance will cover all professional services rendered by or on behalf of Contractor and its subcontractors under this Agreement. Renewal policies written on a claims-made basis will maintain the same retroactive date as in effect at the inception of this Agreement. If coverage is written on a claims made basis, Contractor agrees to purchase an Extended Reporting Period Endorsement, effective for three (3) full years after the expiration or cancellation of the policy or renew a policy with the original retroactive date. No professional liability policy written on an occurrence form will include a sunset or similar clause that limits coverage unless such clause provides coverage for at least three (3) years after the expiration or cancellation of this Agreement.
- B. County and the members of Commissioners Court shall be named as additional insured to all required coverage except for Workers' Compensation and Professional Liability (if required). All Liability policies written on behalf of Wellpath shall contain a waiver of subrogation in favor of County and members of Commissioners Court. For Commercial General Liability and Medical Professional Liability, the County shall be named as an Additional Insured on a Primary & Non-Contributory basis for legal liability caused by the negligence of Wellpath.
- C. If required coverage is written on a claims-made basis, Wellpath warrants that any retroactive date applicable to coverage under the policy precedes the effective date of

the Contract and that continuous coverage will be maintained or an extended discovery period will be exercised for a period of 3 years beginning from the time the work under this Contract is completed.

- D. Wellpath shall not commence any portion of the work under this Contract until it has obtained the insurance required herein and certificates of such insurance have been filed with and approved by Fort Bend County.
- E. No cancellation of the policies, may be made without thirty (30) days prior, written notification to Fort Bend County by Wellpath.
- F. Approval of the insurance by Fort Bend County shall not relieve or decrease the liability of Wellpath.

Section 12. Indemnity

WELLPATH SHALL DEFEND AND INDEMNIFY COUNTY AGAINST ALL LOSSES, LIABILITIES, CLAIMS, CAUSES OF ACTION, AND OTHER EXPENSES, INCLUDING REASONABLE ATTORNEYS FEES, ARISING FROM ACTIVITIES THAT RESULT FROM THE NEGLIGENT ACT, ERROR OR OMISSIONS IN WHOLE OR IN PART OF WELLPATH, ITS AGENTS, SERVANTS OR EMPLOYEES, PERFORMED UNDER THIS AGREEMENT EXCEPT THAT NEITHER WELLPATH NOR ANY OF ITS SUBCONTRACTORS, EMPLOYEES, AGENTS, OR SERVANTS SHALL BE LIABLE FOR ANY INJURY OR DAMAGE CAUSED BY OR RESULTING FROM THE NEGLIGENT ACT, ERROR, OR OMISSIONS OF COUNTY, OR THEIR OFFICERS, AGENTS, AND EMPLOYEES. THE PARTIES AGREE THAT THIS INDEMNIFICATION PROVISION SHALL APPLY DURING THE PERFORMANCE OF SERVICES AS WELL AS DURING THE PERFORMANCE OF ANY CONTINUING OBLIGATIONS THAT MAY EXIST (IF ANY) AFTER THE EXPIRATION OF THIS AGREEMENT. WHERE WELLPATH HAS A DUTY TO DEFEND AND INDEMNIFY, WELLPATH SHALL OBTAIN A GLOBAL RELEASE OF LIABILITY FOR THE COUNTY TO INCLUDE ITS' ELECTED/APPOINTED OFFICIALS AND ITS' EMPLOYEES/VOLUNTEERS.

Section 13. Confidential and Proprietary Information

- A. Wellpath acknowledges that it and its employees or agents may, in the course of performing their responsibilities under this Agreement, be exposed to or acquire information that is confidential to County. Any and all information of any form obtained by Wellpath or its employees or agents from County in the performance of this Agreement shall be deemed to be confidential information of County ("Confidential Information"). Any reports or other documents or items (including software) that result from the use of the Confidential Information by Wellpath shall be treated with respect to confidentiality in the same manner as the Confidential Information. Confidential Information shall be deemed not to include information that (a) is or becomes (other than by disclosure by Wellpath) publicly known or is contained in a publicly available document; (b) is rightfully in Wellpath's possession without the obligation of nondisclosure prior to the time of its disclosure under this Agreement; or (c) is independently developed by employees or agents of Wellpath who can be shown to have had no access to the Confidential Information.

- B. Wellpath agrees to hold Confidential Information in strict confidence, using at least the same degree of care that Wellpath uses in maintaining the confidentiality of its own confidential information, and not to copy, reproduce, sell, assign, license, market, transfer or otherwise dispose of, give, or disclose Confidential Information to third parties or use Confidential Information for any purposes whatsoever other than the provision of Services to County hereunder, and to advise each of its employees and agents of their obligations to keep Confidential Information confidential. Wellpath shall use its best efforts to assist County in identifying and preventing any unauthorized use or disclosure of any Confidential Information. Without limitation of the foregoing, Wellpath shall advise County immediately in the event Wellpath learns or has reason to believe that any person who has had access to Confidential Information has violated or intends to violate the terms of this Agreement and Wellpath will at its expense cooperate with County in seeking injunctive or other equitable relief in the name of County or Wellpath against any such person. Wellpath agrees that, except as directed by County, Wellpath will not at any time during or after the term of this Agreement disclose, directly or indirectly, any Confidential Information to any person, and that upon termination of this Agreement or at County's request, Wellpath will promptly turn over to County all documents, papers, and other matter in Wellpath's possession which embody Confidential Information.
- C. Wellpath acknowledges that a breach of this Section, including disclosure of any Confidential Information, or disclosure of other information that, at law or in equity, ought to remain confidential, will give rise to irreparable injury to County that is inadequately compensable in damages. Accordingly, County may seek and obtain injunctive relief against the breach or threatened breach of the foregoing undertakings, in addition to any other legal remedies that may be available. Wellpath acknowledges and agrees that the covenants contained herein are necessary for the protection of the legitimate business interest of County and are reasonable in scope and content.
- D. Wellpath in providing all services hereunder agrees to abide by the provisions of any applicable Federal or State Data Privacy Act.
- E. Wellpath expressly acknowledges that County is subject to the Texas Public Information Act, TEX. GOV'T CODE ANN. §§ 552.001 et seq., as amended, and notwithstanding any provision in the Agreement to the contrary, County will make any information related to the Agreement, or otherwise, available to third parties in accordance with the Texas Public Information Act. Any proprietary or confidential information marked as such provided to County by Wellpath shall not be disclosed to any third party, except as directed by the Texas Attorney General in response to a request for such under the Texas Public Information Act, which provides for notice to the owner of such marked information and the opportunity for the owner of such information to notify the Attorney General of the reasons why such information should not be disclosed. The terms and conditions of this Agreement are not proprietary or confidential information.

Section 14. Independent Contractor

- A. In the performance of work or services hereunder, Wellpath shall be deemed an independent contractor, and any of its agents, employees, officers, or volunteers

performing work required hereunder shall be deemed solely as employees of Wellpath or, where permitted, of its subcontractor.

- B. Wellpath and its agents, employees, officers, or volunteers shall not, by performing work pursuant to this Agreement, be deemed to be employees, agents, or servants of County and shall not be entitled to any of the privileges or benefits of County employment.
- C. Wellpath may engage certain healthcare professionals as independent contractors rather than as employees. The County or its designated representative(s) shall conduct a background investigation and reasonably approve such professionals. Wellpath shall exercise administrative supervision over such professionals necessary to ensure the strict fulfillment of the obligations contained in this Agreement.

Section 15. Notices

- A. Each party giving any notice or making any request, demand, or other communication (each, a "Notice") pursuant to this Agreement shall do so in writing and shall use one of the following methods of delivery, each of which, for purposes of this Agreement, is a writing: personal delivery, registered or certified mail (in each case, return receipt requested and postage prepaid), or nationally recognized overnight courier (with all fees prepaid).
- B. Each party giving a Notice shall address the Notice to the receiving party at the address listed below or to another address designated by a party in a Notice pursuant to this Section:

County: Fort Bend County Judge
401 Jackson,
Richmond, Texas 77469

With a copy to:
Fort Bend County
Attn: Sheriff
1840 Richmond Pkwy
Richmond, TX 77469

Fort Bend County
Attn: Purchasing Agent
301 Jackson, Ste. 201
Richmond, Texas 77469

Provider: Attn: Division President – Local Government
3340 Perimeter Hill Drive
Nashville, TN 37211

With a copy to:
Legal Department
Attn: Chief Legal Officer
3340 Perimeter Hill Drive
Nashville, TN 37211

- C. Notice is effective only if the party giving or making the Notice has complied with subsections 15(A) and 15(B) and if the addressee has received the Notice. A Notice is deemed received as follows:
1. If the Notice is delivered in person or sent by registered or certified mail or a nationally recognized overnight courier, upon receipt as indicated by the date on the signed receipt.
 2. If the addressee rejects or otherwise refuses to accept the Notice, or if the Notice cannot be delivered because of a change in address for which no Notice was given, then upon the rejection, refusal, or inability to deliver.

Section 16. Compliance with Laws

Wellpath shall comply with all federal, state, and local laws, statutes, ordinances, rules and regulations, and the orders and decrees of any courts or administrative bodies or tribunals in any matter affecting the performance of this Agreement, including, without limitation, Worker's Compensation laws, minimum and maximum salary and wage statutes and regulations, licensing laws and regulations. When required by County, Wellpath shall furnish County with certification of compliance with said laws, statutes, ordinances, rules, regulations, orders, and decrees above specified.

Section 17. Performance Warranty

Wellpath warrants to County that Wellpath has the skill and knowledge ordinarily possessed by well-informed members of its trade or profession practicing in the greater Houston metropolitan area and Wellpath will apply that skill and knowledge with care and diligence to ensure that the Services provided hereunder will be performed and delivered in accordance with the highest professional standards.

Section 18. Assignment and Delegation

- A. Neither party may assign any of its rights under this Agreement, except with the prior written consent of the other party. That party shall not unreasonably withhold its consent. All assignments of rights by Wellpath are prohibited under this subsection, whether they are voluntarily or involuntarily, without first obtaining written consent from County.
- B. Neither party may delegate any performance under this Agreement.

- C. Any purported assignment of rights or delegation of performance in violation of this Section is void.

Section 19. Applicable Law

The laws of the State of Texas govern all disputes arising out of or relating to this Agreement. The parties hereto acknowledge that venue is proper in Fort Bend County, Texas, for all legal actions or proceedings arising out of or relating to this Agreement and waive the right to sue or be sued elsewhere. Nothing in the Agreement shall be construed to waive the County's sovereign immunity.

Section 20. Successors and Assigns

County and Wellpath bind themselves and their successors, executors, administrators and assigns to the other party of this Agreement and to the successors, executors, administrators and assigns of the other party, in respect to all covenants of this Agreement.

Section 21. Third Party Beneficiaries

This Agreement does not confer any enforceable rights or remedies upon any person other than the parties.

Section 22. Severability

If any provision of this Agreement is determined to be invalid, illegal, or unenforceable, the remaining provisions remain in full force, if the essential terms and conditions of this Agreement for each party remain valid, binding, and enforceable.

Section 23. Publicity

Contact with citizens of Fort Bend County, media outlets, or governmental agencies shall be the sole responsibility of County. Under no circumstances whatsoever, shall Wellpath release any material or information developed or received in the performance of the Services hereunder without the express written permission of County, except where required to do so by law.

Section 24. Captions

The section captions used in this Agreement are for convenience of reference only and do not affect the interpretation or construction of this Agreement.

Section 25. Conflict

In the event of a conflict between the body of the Agreement and any of its exhibits, the parties shall work cooperatively and expeditiously to resolve the matter. It is the intent of the

parties that the Agreement and its exhibits shall be read as one harmonious document. However, the only exceptions to the latter rule shall be to give deference first to pricing and then to the scope and nature of Wellpath's services enumerated within Exhibit B if there is a conflict between those documents and any other document.

Section 26. Certain State Law Requirements for Contracts

For purposes of section 2252.152, 2271.002, and 2274.002, Texas Government Code, as amended, Wellpath hereby verifies that Wellpath and any parent company, wholly owned subsidiary, majority-owned subsidiary, and affiliate:

- A. Unless affirmatively declared by the United States government to be excluded from its federal sanctions regime relating to Sudan or Iran or any federal sanctions regime relating to a foreign terrorist organization, is not identified on a list prepared and maintained by the Texas Comptroller of Public Accounts under Section 806.051, 807.051, or 2252.153 of the Texas Government Code.
- B. If employing ten (10) or more full-time employees and this Agreement has a value of \$100,000.00 or more, Wellpath does not boycott Israel and is authorized to agree in such contracts not to boycott Israel during the term of such contracts. "Boycott Israel" has the meaning provided in section 808.001 of the Texas Government Code.
- C. If employing ten (10) or more full-time employees and this Agreement has a value of \$100,000.00 or more, Wellpath does not boycott energy companies and is authorized to agree in such contracts not to boycott energy companies during the term of such contracts. "Boycott energy company" has the meaning provided in section 809.001 of the Texas Government Code.
- D. If employing ten (10) or more full-time employees and this Agreement has a value of \$100,000.00 or more, Wellpath does not have a practice, policy, guidance, or directive that discriminates against a firearm entity or firearm trade association and is authorized to agree in such contracts not to discriminate against a firearm entity or firearm trade association during the term of such contracts. "Discriminate against a firearm entity or firearm trade association" has the meaning provided in section 2274.001(3) of the Texas Government Code. "Firearm entity" and "firearm trade association" have the meanings provided in section 2274.001(6) and (7) of the Texas Government Code.

Section 26. Human Trafficking

BY ACCEPTANCE OF CONTRACT, WELLPATH ACKNOWLEDGES THAT FORT BEND COUNTY IS OPPOSED TO HUMAN TRAFFICKING AND THAT NO COUNTY FUNDS WILL BE USED IN SUPPORT OF SERVICES OR ACTIVITIES THAT VIOLATE HUMAN TRAFFICKING LAWS

Section 27. Entire Agreement

This executed instrument is understood and intended to be the final expression of the parties' agreement and is a complete and exclusive statement of the terms and conditions with

respect thereto, superseding all prior agreements or representations, oral or written, and all other communication between the parties relating to the subject matter of this agreement. Any oral representations or modifications concerning this instrument shall be of no force or effect excepting a subsequent modification in writing signed by all the parties hereto.

Section 28. Material Changes in Scope or Circumstances, or Emergency Circumstances.

- A. If at any time during the Term of this Agreement, County requests a change in the scope, volume or quality/degree to be provided by Wellpath, or the scope of services set out herein must materially be changed as a result of any of the following, any of which would result in an increase to the cost of providing the services or which Wellpath notifies the County affects Wellpath's ability to provide the requested scope of services under the circumstances (a "Material Change Circumstance"), including, but not limited to any of the following:
1. There is or are new, amended, and/or repealed law(s) or regulation(s) (including statutes, codes, Agency orders/memoranda and/or case law), or changes to the County's policies, procedures, practices, or circumstances, any or all of which render performance under the Agreement partially or completely impracticable or impossible under the Agreement's existing terms;
 2. The United States Food and Drug Administration ("FDA") or another regulatory body approves (or issues an emergency use authorization for) a new therapy/ies or treatment modality/ies, there are changes to legal/regulatory requirements concerning the treatment of County's patients, and/or changes to the applicable standard of care that materially impact Wellpath's ability to provide services and/or costs under the Agreement;
 3. Wellpath's performance hereunder is impacted by any event related to a Public Health Emergency (PHE) declared pursuant to Section 319 of the Public Health Service Act, a Disaster declaration pursuant to the Stafford Act (2 U.S.C. §§ 5121-5207), or any similar announcement or proclamation made by the Federal Government or any Federal Agency, any Federally recognized Native American Tribe, or any State, County/Parish or Local Government pursuant to an analogous provision of Federal or non-Federal law or rule (each, an "Emergency Circumstance").
- B. The parties shall follow the procedures outlined below:
- In the event of the occurrence any **Material Change Circumstance**, upon notice from a Party, the Parties shall meet and in good faith re-negotiate the terms of this Agreement. Neither Party shall unreasonably delay or withhold consent to such negotiations, or the proposed modifications resulting from such negotiations. In the event the Parties are not able to reach mutually acceptable changes to the Agreement after thirty (30) days, either Party may thereafter terminate the Agreement without cause upon providing ninety (90) days' notice thereafter.

Section 29. Exhibits List.

Exhibit A: Transition Plan

Exhibit B: Wellpath's Technical and Price Proposal for Interim Inmate Medical Services, dated March 30, 2023 (hereinafter referred to as the "Proposal").
Exhibit C: Staffing Matrix
Exhibit D: Wellpath's Operating Budget and Management Fee
Exhibit E: Wellpath's Start-Up Costs

IN WITNESS WHEREOF, the parties hereto have signed or have caused their respective names to be signed to multiple counterparts to be effective as of the date executed by County.

FORT BEND COUNTY

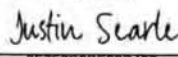


County Judge KP George

KP George County Judge

WELLPATH LLC

DocuSigned by:



3F7F2B2BE966489

Authorized Agent- Signature

Justin Searle

Authorized Agent- Printed Name

President, Local Government Division

Title

6/29/2023

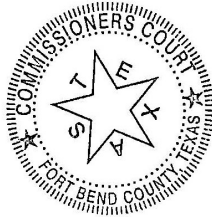
Date

ATTEST:

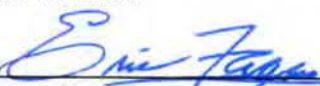


Laura Richard, County Clerk

Laura Richard, County Clerk



APPROVED:

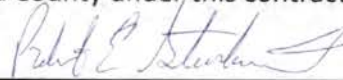


Sheriff Eric Fagan

Sheriff Eric Fagan

AUDITOR'S CERTIFICATE

I hereby certify that funds are available in the amount of Five Million Dollars (\$5,000,000) to accomplish and pay the obligation of Fort Bend County under this contract.



Robert Ed Sturdivant, County Auditor

Robert Ed Sturdivant, County Auditor

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EXHIBIT A**TRANSITION PLAN**

Transition Timeline (30 days)	
Date	Activity
Day 1	<ul style="list-style-type: none"> Wellpath notified of contract award intent/executed agreement
Days 4-5	<ul style="list-style-type: none"> On-site meeting with facility administration and current healthcare staff Begin recruiting current healthcare staff – once incumbent vendor is notified of termination
Day 7	<ul style="list-style-type: none"> Issue first implementation plan with items to be completed, expected due dates, and person(s) responsible; this plan is a working document and is provided weekly to appropriate facility staff Begin developing site-specific policies and procedures manual Human Resources processes staff paperwork
Week 2	<ul style="list-style-type: none"> Operations team finalizes travel schedules and begins creating binders and training materials Begin recruiting process for any new positions or expected openings Network Development solidifies agreements with vendors and outside providers IT ensures connectivity and equipment ordering process with County IT; orders time clocks, computers, printers, and copiers Deliver offer letters
Week 3	<ul style="list-style-type: none"> Orientation schedule posted; sign-up begins Provide updated implementation plan to facility staff, with many items marked as complete; provide travel schedule for Wellpath senior management team
Week 4	<ul style="list-style-type: none"> Complete work schedule and identify any potential openings In-person benefit enrollment sessions (BENEFITS BEGIN DAY ONE) Clinical team reviews scheduled chronic care clinics and patients with scheduled off-site appointments Review pharmacy orders to ensure continuity at start-up and accuracy of MARs Multiple people on site to ensure a smooth start-up and begin laying out specific responsibilities for all employees on all shifts; Wellpath start-up team mobilizes Orientation for all employees, covering Wellpath policies, culture, and expectations; occurs outside of work schedule and staff are paid for these hours on first Wellpath paycheck; conducted by members of senior management team; facility staff are welcome to attend Vendor orientation occurs just before or during the first few days for pharmacy, lab, etc.
Contract Start (August 1)	<ul style="list-style-type: none"> Assume operations at 12 a.m. Any required IT equipment delivered and setup
Month 1 of Contract	<ul style="list-style-type: none"> Begin monthly reporting Identify process improvements Implement process improvements
Month 2 of Contract	<ul style="list-style-type: none"> Begin CQI meetings Begin monthly Infection Control meetings Submit site-specific policies and procedures for approval

EXHIBIT B
WELLPATH'S TECHNICAL AND PRICE PROPOSAL
FOR INTERIM INMATE MEDICAL SERVICES, DATED JUNE 14, 2023

Fort Bend County

Richmond, Texas

Interim Contract for Inmate Medical Services

Revised Technical and Price Proposal

June 14, 2023

2:00 PM (Central)



Respectfully Submitted to:

Cheryl Krejci, CPPB
Fort Bend County Purchasing Department
Travis Annex
301 Jackson Street, Suite 201
Richmond, Texas 77469
281-341-8640

Submitted by:

WELLPATH®
3340 Perimeter Hill Drive
Nashville, TN 37211
800-592-2974
Tax ID# 32-0092573

Points of Contact:

C.J. Whitfield
Director of Partnership Development
731-441-8203
cjwhitfield@wellpath.us

Ben Slocum
CEO & President
805-796-5775
BSlocum@wellpath.us

This submission includes the following:
Technical and Price Proposal



Title Page

Contract for Inmate Medical Services

Company Information	
Legal Company Name	Wellpath LLC
Federal ID Number	32-0092573
Telephone Number	800-592-2974
Fax Number	615-324-5798
Mailing Address	3340 Perimeter Hill Drive Nashville, TN 37211
Authorized Representative and Title	Kip Hallman, Chairman of the Board
Authorized Representative's Email Address	Kip.hallman@wellpath.us

The undersigned hereby acknowledges and has read and understands all requirements and specifications of the Interim Contract for Inmate Medical Services including all attachments and amendments. This proposal is submitted in response to the above-mentioned Interim Contract. Kip Hallman is the designated official contact for Fort Bend County.

Authorized Signature: _____

Kip Hallman
Co-Chair of the Board
Phone: 858-283-8619
Kip.hallman@wellpath.us



Transmittal Letter

Dear Sheriff Fagan, Chief Deputy Provost, and Captain Chesser:

Wellpath appreciates this opportunity to respond to an interim contract request for the Fort Bend County Sheriff's Office and Fort Bend County Jail. As requested by Captain Chesser and the Purchasing Department, we have designed a program and budget for a contract term of August 1, 2023 – September 30, 2023. We are committed to providing a tailored solution for your healthcare services program at the jail, and we will use our experience and knowledge of your facility to build a culture of collaboration and transparency with Fort Bend County and your staff.

We previously provided care at your facility, and we're excited for the opportunity to partner with you again. Upon exiting your facility in October 2022, members of our regional management team met with you to understand how we can improve moving forward. Additionally, we have since spoken with members of your staff and identified opportunities to improve the dental services, psychiatry services, on-site training, and invoicing process. We commit to improving in these areas and collaborating with you to ensure we are bringing the best care and value to Fort Bend County and patients at the jail.

Finding solutions through flexibility, integrity, and innovation with accountability, commitment, and teamwork is the Wellpath difference. Thank you for the opportunity to serve Fort Bend County. We encourage you to call us with any questions you have regarding the information in our proposal and how we might serve you.

Throughout this proposal, you will notice the blue icon to the right of this paragraph. This icon is a way for us to highlight innovative solutions and other differentiators that are unique to a partnership with Wellpath.



The green icon to the right of this paragraph identifies areas where cost savings advantages are to be gained by partnering with Wellpath.



We truly appreciate the ability to serve Fort Bend County, the Sheriff's Office, and the Detention Facility. If you have any questions regarding this proposal, please contact C.J. Whitfield at your convenience. We look forward to partnering with you.

Sincerely,

Ben Slocum
CEO & President
805-796-5775
BSlocum@wellpath.us

CJ Whitfield
Director of Partnership Development
731-441-8203
cjwhitfield@wellpath.us



Table of Contents

1 Price	6
2 Technical.....	14
2.1 Company Overview	14
2.2 Scope of Work.....	18
2.2.1 Access to Care.....	18
2.2.2 Receiving Screening.....	19
2.2.3 Initial Health Assessment	23
2.2.4 Nonemergency Healthcare Requests and Services.....	25
2.2.5 Triage and Sick Call.....	25
2.2.6 Nursing Assessment Protocols and Procedures.....	26
2.2.7 Hospital Care	28
2.2.8 Emergency Services	31
2.2.9 Emergency Response Plan.....	33
2.2.10 Specialty Care	35
2.2.11 Utilization Management	41
2.2.12 On-Site Diagnostic Services	48
2.2.13 Laboratory Services	48
2.2.14 Dental Care.....	50
2.2.15 Pharmaceutical Operations.....	52
2.2.16 Medication Services.....	58
2.2.17 Medication Administration Record	59
2.2.18 Special Needs and Services.....	62
2.2.19 Female Health Needs.....	67
2.2.20 Mental Health Services.....	67
2.2.21 Suicide Prevention	73
2.2.22 Medically Supervised Withdrawal and Treatment.....	76
2.2.23 Infectious Disease Prevention and Control.....	79
2.2.24 Health Records	83
2.2.25 Wellpath Healthcare Cloud / Telehealth.....	87
2.2.26 Clinic Space, Equipment, and Supplies	90
3 Staffing	91
3.1 Proposed Staffing.....	96
3.2 Credentials / Licenses	98
3.3 Recruitment and Retention	100
3.4 Orientation for Health Staff	107
4 Continuous Quality Improvement and Administrative Oversight Plan	110
4.1 Medical Administration Committee.....	114
4.2 Reporting and Accountability.....	114
4.3 Policies and Procedures	117
5 Qualifications/References	118



5.1 Litigation History and Financial Stability 121

5.2 References 122

6 Required Forms..... 125

(Electronic Video Links)

Welcome to Wellpath

https://youtu.be/zALS_U4fsAo

*Password for Vimeo videos below is **Wellpath2020**.*

Wellpath Suicide Prevention (adult)

<https://vimeo.com/360929453>

***CONFIDENTIAL AND PROPRIETARY ATTACHMENTS**

In accordance with State of Texas Uniform Trade Secrets Act (Tex. Civ. Prac. & Rem. Code § 134A et seq.) and the United States Defend Trade Secrets Act (18 U.S.C. § 1836 et seq.) concerning trade secret protection and confidential commercial information protection, Wellpath respectfully requests that any information labeled CONFIDENTIAL be redacted them from any distribution of this proposal pursuant to requests under the Public Information Act, statutes, or for any other reason.



1 Price

Wellpath acknowledges the information and directives provided by Fort Bend during the interim contract and the previous solicitation regarding the County's preference for a Management Fee Contract. Under this model Wellpath will track and report on all healthcare program costs, which will then be reimbursed by the County. Wellpath is the industry leader in promoting and using the Management Fee contract model for our clients. Wellpath understands the true advantages of this model, and we have successfully used it to help our clients provide better care at a lower cost.

Staffing and Services Overview

Staffing and Services Overview for Fort Bend County	
Professional Staffing	FTE
Total Full-Time Equivalent Employees (FTEs)	45.80
Professional On-site Services	Included
Medical/ Mental Health / Dental Services Management	✓
On-Call 24/7	✓
Policies and Procedures	✓
Laboratory Services Management	✓
X-Ray Services Management	✓
Disposable Medical Supplies	✓
Medical Waste Disposal	✓
Basic Medical Training - Jail Staff	✓
Comprehensive Medical Malpractice Insurance	✓
Corporate Management and Oversight	✓
Wellpath NOW	✓
Wellpath Connect	✓
CorEMR Management	✓
Professional Off-site Services	
Ambulance Services Management	✓
Hospitalization Management	✓
Laboratory Services Management	✓
X-Ray Services Management	✓
Dental Services Management	✓
Specialty Services Management	✓
Pharmacy Services	
Complete Pharmaceutical Management	✓
Pharmaceuticals: Over-the-Counter	✓
Pharmaceuticals: Prescriptions	✓
Pharmaceuticals: Mental Health/Psychotropic	✓
Pharmaceuticals: HIV/Aids, Hepatitis, Biologicals	✓



Direct Expense (Pass-through) Budget

Direct expense items in our budget include all costs for personnel, off-site and on-site contracted services, pharmacy, medical supplies, professional and legal fees, laboratory, insurance, on-site administrative supplies, office furniture, new employee orientation costs, payroll fees, and travel expenses for required site visits. Our budget's three largest direct cost components are Staffing, Off-Site Services, and Pharmacy. Unlike other medical vendors, we have historical actual expenses from our time at Fort Bend and used that information to budget appropriately. With a direct expense model, we will reconcile and compare actual costs to budgeted costs. Wellpath shall issue a credit to the County for aggregate costs below the operating budget and will issue an invoice to the County for aggregate costs exceeding the operating budget.

You will receive a monthly invoice and attachments summarizing costs incurred for the care of Fort Bend's patients and the monthly Wellpath management fee.

Your detailed reconciliation will include:

- Adjudicated invoice reports from off-site and specialty provider expenditures
- Staffing wages and benefits and any recruiting bonuses that were used
- Costs of the pharmaceuticals prescribed at the jail (which are obtained at Wellpath cost, using the negotiating power of Wellpath's industry footprint)
- Professional fees, insurances, and civil commitment fees
- On-site medical costs
- Medical, administrative, and equipment costs

This option provides Fort Bend County with *actual cost information* for all aspects of the healthcare program while allowing the County to receive all savings realized by having Wellpath manage the program. This includes staffing cost savings and any savings derived from Wellpath-negotiated vendor contracts. This model also offers transparent cost reporting that keeps us operationally accountable and fiscally responsible while allowing the County to easily justify operational expense decisions with informed confidence.



Fort Bend County Jail, TX		
Estimated Budget for Initial Period (FY23 - 8/1/23-9/30/23) at 765 ADP		
	Monthly	8/1/23-9/30/23
Salaries/ Wages/ Benefits	\$ 461,254	\$ 922,508
Professional Fees	\$ 2,544	\$ 5,088
Pharmaceuticals	\$ 52,263	\$ 104,526
Off-Site	\$ 67,265	\$ 134,530
Laboratory/ Other On-Site	\$ 21,508	\$ 43,016
Medical Supplies	\$ 4,700	\$ 9,400
Insurances	\$ 2,483	\$ 4,966
Administrative Supplies and Cost	\$ 4,623	\$ 9,246
Equipment/ Other Facility	\$ 3,883	\$ 7,766
Travel/ Site Visits	\$ 273	\$ 546
Civil Commitment Center Fees	\$ 3,632	\$ 7,264
Direct Expense	\$ 624,428	\$ 1,248,856
Management Fee	\$ 96,754	\$ 193,508
Total Expense	\$ 721,182	\$ 1,442,364

Excludes start-up cost of \$132,893.



The Wellpath management team will be accountable for the on-site health care program and provide direction, training, and guidance for all staff members. These services will include the time and availability of our entire executive staff, corporate office, and operational management team. The management fee considers the following:

1. The services of our Regional Management team are included in the Wellpath Management Fee, and you will never be charged for their time while Wellpath is contracted with Fort Bend County.
2. Health Care employees working on-site will be employed by Wellpath. The Wellpath Talent Acquisition Team will be accountable for recruitment efforts and assisting on-site personnel with all recruitment and retention needs.
3. Wellpath's Network Development team has significant negotiating leverage with our vendors, which creates cost savings for Fort Bend County. Fort Bend County will have complete access to all services through Wellpath's negotiated contracts, including pharmacy, medical supplies, dialysis services, dental supplies, and lab services.
4. Fort Bend County will be able to take advantage of the strong Wellpath malpractice history, which will help limit malpractice expenses on a go-forward basis.
5. Wellpath will provide appropriate reports, including detailed invoices, and financial information to assist Fort Bend County in managing of current and future costs. These reports will include both budgeted and actual costs as well as accrual logs for claims incurred but not yet processed. Wellpath will provide benchmarking of other similar correctional populations, as needed, to assist the County in comparing program costs with other facilities. **We commit to operating your program with transparency and accountability.**
6. Wellpath will maintain a cost-effective network of outside providers to handle patient services that cannot be provided on-site.
7. Wellpath will aggressively manage all care provided on-site (i.e., formulary control) and will provide utilization management for all off-site care. With our Care Management system, real time reports will be available to Fort Bend County for tracking off-site patients and their care. Wellpath will also ensure proper communication with other agencies as it relates to off-site approvals so no additional financial liability will be incurred by Fort Bend County.
8. Finally, the Wellpath management fee is designed to help cover the overhead expenses associated with providing all contracted health services while also providing Wellpath a modest profit.

Start-Up Costs

Wellpath understands Fort Bend County needs an interim contract for the provision of comprehensive health care services at the Jail. Typically, we transition facilities with a 90-day timeline, but no less than 30 days. We are excited and willing to take on the proposed transition timeline with a start date of August 1, 2023, and as your previous vendor, we are well prepared to do so successfully.



We have estimated one-time start-up cost. The estimated start-up cost covers timeclocks and other required start up equipment, go-live training, and travel for trainers and staff coverage during the transition. Additionally, the start-up budget includes the costs of reestablishing network development, procurement, and pharmacy contracts that were terminated after exiting last year. **We respectfully request that start-up costs (\$132,893) are paid by the County by August 13, 2023.** Items included in our start up budget include IT costs, recruiting, training, initial site visit expenses, manuals, policy and procedures development. As discussed, we are happy to meet with the County and show the details of our start-up budget.

Staffing and Wages

The Wellpath proposed staffing takes into consideration the current staffing pattern, specific needs of the detainee population, layout details of the jail, and a recommended level of providers to efficiently and cost-effectively perform all necessary duties and functions.

The Wellpath staffing plan remains consistent in administration and oversight through the Health Services Administrator (HSA), Director of Nursing (DON), Medical Director, and Mental Health Coordinator. The staffing plan has been adjusted from our previous proposal to maximize resources and to best meet the needs of the Facility. We have reviewed our staffing plan with the County and have increased FTEs above what is being provided by your current vendor. We have added the following FTEs to our matrix:

- **1.0 FTE (40 hours per week)** of Mental Health Professional
- **0.75 FTE (30 hours per week)** of Dentist
- **0.75 FTE (30 hours per week)** of Dental Assistant
- **0.45 FTE (18 hours per week)** of Psychiatrist

Wellpath offers competitive salaries and benefits to attract and retain qualified staff. We have performed a market analysis for the Fort Bend area and adjusted our wages appropriately to ensure we can retain your incumbent staff and quickly fill open positions. In addition to competitive salaries and benefits, we have budgeted up to \$186,000 to pay one-time sign-on and retention bonuses, if needed, to ensure the program is well-staffed to meet the needs of your patient population. **As discussed, we have removed this cost from our estimated budget but will use these as necessary to staff the Facility. The County will be invoiced only for the bonus dollars that we use.** We acknowledge that our wages are higher than your current medical vendors, however, we believe this is necessary to recruit and retain staff in Fort Bend County and the surrounding area. We have included our proposed hourly rates with this submission.

The following chart shows the proposed pass-through, one-time sign-on and retention bonuses Wellpath is prepared to pay to recruit qualified staff.

Position	Proposed Bonus
Health Services Administrator	\$5,000
Director of Nursing (DON)	\$5,000
Registered Nurse	\$5,000
Licensed Vocational Nurse	\$5,000
Mental Health Coordinator	\$5,000



Mental Health Professional	\$5,000
Discharge Planner / Case Manager	\$5,000
Psych Tech	\$5,000

We look forward to discussing our staffing matrix in detail and are willing to make any needed adjustments as the program, and any changes to the services available, as your inmate population evolves.

Proposed Hourly Rates

We have included the proposed hourly rates for each position.

Proposed Hourly Rates by Position	
Position Title	Hourly Range
Health Services Administrator	\$54.00 - \$66.00
Administrative Assistant	\$22.50 - \$27.50
Director of Nursing	\$49.50 - \$60.50
Medical Records Clerk	\$18.00 - \$22.00
Medical Director	\$143.10 - \$174.90
Dental Assistant	\$21.60 - \$26.40
Mental Health Professional	\$36.00 - \$44.00
Psych Tech	\$21.60 - \$26.40
Discharge Planner/Case Manager	\$31.50 - \$38.50
Mental Health Coordinator	\$41.40 - \$50.60
Licensed Vocational Nurse	\$31.50 - \$38.50
Registered Nurse	\$42.30 - \$51.70
Nurse Practitioner/Physician's Assistant	\$63.00 - \$77.00
Dentist	\$102.60 - \$125.40
Psychiatrist	\$180.00 - \$220.00

Off-Site Services

Wellpath will arrange with local providers and hospitals to treat patients with healthcare needs beyond the scope of care provided on-site. We will authorize, schedule, and coordinate off-site services, such as outpatient surgery, diagnostic testing, and ER ambulance services. We designed our estimated off-site budget using historical actual off-site expenses for your patient population, which excluding 2020 (COVID-19), has averaged \$845,000 annually. The County will only pay for actual expenses based on the direct expense model.



We will strive for ways to reduce off-site trips and associated custody costs while providing the best care to your patients. In our services we are proposing to fully implement Wellpath NOW and Wellpath Connect:

- **Wellpath NOW** is a tele-med solution that allows patients to be seen by an emergency room physician in less time than seeking off-site emergency care in the community. It includes **emergent and urgent care, and on-demand telehealth services for patients and providers**. Wellpath NOW providers include primary care physicians and advanced practice providers (APPs), as well as specialty consultations by emergency medicine-trained providers for non-life-threatening consults regarding need for emergency evaluation. The benefits are:
 - Significantly reduced time to see a provider
 - Reduced ER trips and less officer time off-site
 - Savings in off-site provider and custody costs
- **Wellpath Connect** provides **care management and off-site consults** offering enhanced healthcare triage and treatment decisions. Wellpath Connect gives on-site providers timely access to specialty care through enhanced remote care coordination, while additionally supporting on-site providers with **expert clinical consultations via eConsults**. The benefits are:
 - Specialty consultation while staying on-site
 - Typical file review by outside specialist is less than one day
 - Reduce off-site trips = reduced costs



Pharmacy

Wellpath will work diligently to manage pharmacy costs on behalf of the County. As the largest customer for national provider Diamond Pharmacy, we furnish great buying power and savings. We also manage to our formulary within clinical guidelines, with review of any non-formulary prescription requests being processed through our Care Management system (providers may utilize bridge orders to ensure there is no lapse during the approval process). We designed our estimated pharmacy budget using the 3-year average (2019, 2020, 2021) of actual pharmacy expenses for your patient population, which was approximately \$552,000. The additional estimated costs reflect an inflationary increase for pharmaceuticals and the 765 ADP that our estimate is based on. The County will only pay for actual expenses under the direct expense model. We will seek ways to keep appropriate pharmacy costs low, both to maintain our responsibility to the County and Sheriff's Office and to encourage a treatment regimen that patients can maintain when they are released from the Facility.

Pricing Summary

Wellpath commits to operating your healthcare program as a true partnership. We will take full responsibility for maintaining high-quality patient care, the efficiency of operations, and accurate reporting and invoicing. Choosing Wellpath guarantees a Texas Commission on Jail Standards (TCJS) and National Commission on Correctional Health Care standards-compliant program and the best possible care for detainees in your custody. Wellpath has proposed staffing and programming based on necessary services for an average daily population of 765 and in alignment with TCJS.

We know you want to provide the best healthcare program for the individuals in your care, and cutting corners is not an option. Wellpath is the right partner to provide Fort Bend County with quality healthcare program to ensure quality care for your patients, while producing the desired operational and financial outcomes for the County. We are confident we offer an appropriately budgeted program that will meet your needs and exceed your expectations. We look forward to discussing our budget and program with you.

2 Technical

A partnership with Wellpath ensures the following objectives and requirements from your RFP are met:

- Quality health services for inmates in custody and control of the Sheriff
- A health care plan with clear objectives, policies and procedures, and with a process of documenting ongoing achievement of contract obligations
- Operation of a health services program, 24 hours a day, 7 days a week, at full staffing, using only licensed, certified, and professionally trained personnel
- Administrative leadership that provides for both cost accountability and responsiveness to the contract administrator
- Assurance that required federal, state, and local requirements and standards of care are met
- Continuing education for staff
- A health care system that is respectful of inmate rights to basic health care
- Compliance with the standards established by the National Commission on Correctional Health Care for health care services in jails as well as the American Correctional Association standards for medical services.

2.1 Company Overview

Wellpath is the premier provider of localized, high-quality, compassionate care to vulnerable patients in challenging clinical environments. Our resources and experience as a leading public health company provide Fort Bend County with the best and most cost-effective services available.

Wellpath is specifically organized to provide comprehensive correctional healthcare services to facilities similar to the Fort Bend County Jail (Facility).

Wellpath at a Glance

- 38 years in the industry
- Privately owned—We answer to our clients, not shareholders
- Nearly 15,000 Wellpath employees provide health care services for more than 300,000 patients in 34 states
- More than 8,000,000 patient encounters each year
- Clients include state and federal prison systems, county/regional jails, detention centers, and juvenile facilities
- Annual sales = \$1.8 billion
- Financially strong and stable
- Impeccable litigation record
- 100% success in our accreditation efforts



Today, nearly 15,000 Wellpath employees care for more than 300,000 patients in 34 states, with more than 8,000,000 patient encounters each year. The knowledge we gain from the patients we treat throughout our client base leads to improved care at each site.



Home Office*

1283 Murfreesboro Rd., Ste. 500
Nashville, TN 37217

Arkansas Regional Office

Pine Bluff, Arkansas

Kentucky Regional Office

Louisville, Kentucky

Pennsylvania Regional Office

Lemoyne, Pennsylvania

Massachusetts Regional Office

Foxboro, Massachusetts

Georgia Regional Office

Atlanta, Georgia

Michigan Regional Office

Lansing, Michigan

*The Wellpath Home Office will support this contract.

Our Mission

Our mission is to provide quality care to every patient with compassion, collaboration, and innovation. We are a true solutions provider in the healthcare industry and in the communities we serve. Our constant focus on patient care delivers innovative solutions to meet your program objectives and local, state, and national standards of care.

Our Vision

Our vision is to transform healthcare by delivering hope and healing through public health partnerships. Wellpath was born from the joining of two great companies that shared the importance of putting patients first and providing high-quality care to an often-overlooked population. We believe in transforming public health by delivering hope and healing to those who need it most. We treat our patients with dignity and compassion because we care about them as human beings. We are the right people, striving to do the right thing while creating healthier communities—one patient at a time.

"When you think about our patients, they tend to be the most underserved, and I think there is no greater calling than to work with and to care for those people who have historically been left out and received the least healthcare."

Jorge Dominicus,
Wellpath Co-Chairman of the Board

Our Focus

Our philosophy is simple: we listen to our clients, we assess the situation, and we offer targeted implementable solutions. Wellpath concentrates on establishing partnerships with county, state, and federal agencies experiencing challenges meeting their healthcare delivery needs in a fiscally responsible way. We focus on creating and maintaining successful partnerships with our clients and we create value in our partnerships through long-term cost savings and improved patient care. Our focus is best summarized by what we call *The Five Ps: Patients, People, Partners, Processes, and Performance.*

Our Values

Wellpath recruits and retains only the best personnel in the industry. We strive to hire individuals who possess the qualities that we value most in ourselves, our employees, and in others. These attributes are known by the Wellpath family as *The Five Hs: Humility, Honesty, Hunger, Hard Work, and Humor*.

<p>Our focus THE FIVE Ps</p> <div style="margin-top: 20px;">  PATIENTS We consider patients' needs and outcomes FIRST in all decisions we make. </div> <div style="margin-top: 20px;">  PEOPLE We value our patients, patients' families, staff and all stakeholders. </div> <div style="margin-top: 20px;">  PARTNERS We strive to meet all deliverables as contracted and provide our partners with the best services. </div> <div style="margin-top: 20px;">  PROCESSES We believe that constant adherence to best practices leads to successful outcomes. </div> <div style="margin-top: 20px;">  PERFORMANCE We strive to perform above expectations in all areas of our business. </div>	<p>Our values THE FIVE Hs</p> <div style="margin-top: 20px;">  HUMILITY A mindset that ensures we never lose sight of our identity and our loyalty to those we serve and support. </div> <div style="margin-top: 20px;">  HONESTY A commitment to the highest level of personal and professional integrity with our partners and our patients. </div> <div style="margin-top: 20px;">  HUNGER A desire for all personnel to learn, teach and grow in a team-supported environment. </div> <div style="margin-top: 20px;">  HARD WORK A fundamental willingness to work harder and smarter in the interest of providing better service to our partners and patients. </div> <div style="margin-top: 20px;">  HUMOR A stress reliever that is essential for maintaining a positive, passionate attitude and a superior quality of life at work. </div>
<p>Always Do the Right Thing!</p> 	<p>Always Do the Right Thing!</p> 

Our Services

Wellpath provides a wide range of healthcare services and ancillary services for our clients, including:

 Comprehensive Medical Services <ul style="list-style-type: none"> Assessments & Appraisals <i>Receiving screenings; health assessments</i> Access to Care <i>Triage & sick call; on-site clinics; telehealth; eConsults</i> Off-site Coordination <i>Emergency & hospitalization arrangements; case management</i> Education <i>Patient health education programs; correctional staff training programs</i> National Contracts <i>Pharmacy; laboratory; radiology</i> Substance Use Disorder Treatment <i>Medically supervised withdrawal management; Medication-assisted treatment (MAT)</i> Medically Necessary Diet Programs Dental Care Optical Care 	 Mental & Behavioral Health Services <ul style="list-style-type: none"> Screening, Assessment & Evaluation Treatment Planning Consultation & Education Multidisciplinary Treatment Teams Group & Individual Therapy Clinical Supervision Telepsychiatry Suicide Prevention & Intervention Jail-Based Competency Treatment Re-entry and Discharge Planning Community Outreach <i>Continuity of care & discharge planning; collaboration with community agencies</i> 	 Administrative & Operational Services <ul style="list-style-type: none"> Claims Management <i>Third-party billing; cost recovery programs; catastrophic insurance coverage</i> Utilization Management <i>Web-based Care Management system</i> Electronic Record Management Application (ERMA[®]) <i>EMR & eMAR technology built for corrections</i> Network Development <i>Established networks of specialty providers & hospitals; negotiating agreements for clients</i> Accreditation <i>NCCHC, ACA, CALEA, state-specific</i> Clinical Quality Assurance <i>Continuous Quality Improvement (CQI) & Medical Administration Committee (MAC) programs</i> Reporting & Accountability <i>Automated reports; compliance tracking</i>
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Our Core Competencies

Wellpath will maintain a mutually beneficial partnership with the County based on continued communication that creates cost savings and helps you meet your program objectives.

Hands-on Approach

The Wellpath Executive Team is closely involved with the delivery of services for our clients. Continuous communication helps minimize surprises and ensures a mutual understanding of decisions and protocols.

"I have found that EVERYONE at Wellpath has been amazing to work with, and as a company Wellpath is second to none. The last 22+ months has been challenging for all of us; however, the Napa Wellpath Team...has stood strong and has been a great partner and advocate for patient care. I have heard the term 'we'll get through this together' on more than one occasion. But it was more than just words uttered; it was the actions taken by everyone that gave the term actual meaning to get us through these last months. I'm grateful for the collaboration, and I look forward to the future of working with the organization."

Dina Jose, Director
Napa County Department of Corrections, CA

Employee Advocates

Our employees are our most valued assets, and we equip them with the tools to succeed. We provide our site leaders with management training to foster the proper culture for working and succeeding in a challenging environment.

*To be the company that clients want to work with,
we must be the company that employees want to work for.*

The Wellpath Healthcare Cloud

The Wellpath Healthcare Cloud is a revolutionary and proprietary telehealth platform specifically designed to provide patients specialized clinical expertise in the shortest amount of time possible. Available across the country in a variety of challenging environments, including jails, prisons, hospitals, and residential treatment facilities, the Wellpath Healthcare Cloud provides real-time emergent and specialty care through a technologically sophisticated telehealth platform.



Proven Success Managing Chronic Care

Wellpath has established many on-site programs and specialty care clinics for the County. Our continued focus on the identification, referral, and treatment of patients with chronic conditions allows us to manage patient needs before they can escalate and require off-site consultation or result in grievances or litigation.

Advanced Utilization Management

The Wellpath Care Management system is a browser-based web application that allows us to track off-site care, ensure a timely return to the facility, manage claims, and provide reports to assist with cost containment and budget preparation. Our Care Management system will be **operational on Day One**, functioning alongside your Jail Management System (JMS) to create added clinical control and cost efficiencies for on-site and off-site medical, dental, and mental health activities.



Cost Containment

Our objective is to uncover all areas of savings for our clients without sacrificing quality. Wellpath negotiates contracts for goods and services and seeks efficiencies in staffing, pharmacy, and off-site costs. Our national vendor contracts offer economies of scale that create savings we can pass on to our clients. Because we provide healthcare for more than 300,000 patients nationwide, we have significant buying and negotiating power, which allows us to secure the best possible rates with on-site and off-site providers.



Community Connection

A successful medical program has a positive community impact, and Wellpath's established relationships benefit Fort Bend County in many ways. We have partnered with local organizations to maximize continuity of care for each patient and work with local agencies to develop training programs for nursing students and new correctional staff. We work with local charities, such as Behind the Badge, to identify opportunities that allow us to give back to the community. Wellpath extends continuity of care by helping connect patients with community resources, which can help reduce recidivism.

The non-profit Wellpath Cares Foundation, an affiliate of Wellpath, was established in 2021 with the mission to provide support to organizations that actively work to reduce the impacts of Social Determinants of Health (SDH) on justice-served patients, with the goals of improving patients' lives and reducing recidivism. In 2021, the Foundation made commitments to contribute nearly \$1 million to non-profit organizations performing this important work. We are excited about the improvements to patients' lives and health that Foundation's charitable mission will help bring about.

2.2 Scope of Work

2.2.1 Access to Care

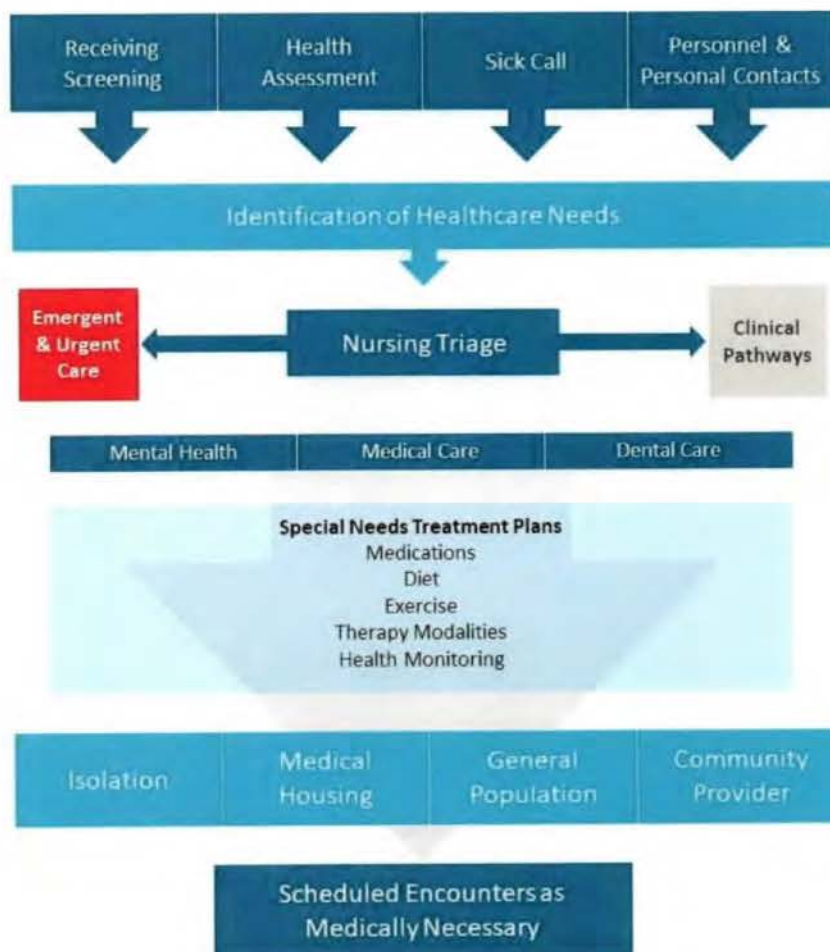
NCCHC Standard J-A-01

Wellpath will ensure that patients have timely access to care to meet their serious medical, dental, and mental health needs. The Health Services Administrator (HSA), Durelle Cardiff, will be responsible for identifying and eliminating any unreasonable barriers, intentional or unintentional, to patients receiving care. Patients will have unimpeded access to routine and emergency care at all times regardless of their location, custody level, or status. If a patient is unable to visit the clinic due to custody status (e.g., restricted housing) or as a result of physical condition, Wellpath staff conduct cell-side services.

Intake staff advise arrestees of their right to access care and the process for requesting healthcare services. We communicate this information verbally and in writing in a language the arrestee understands. We ensure that arrestees who do not speak English understand how to obtain healthcare.

Wellpath staff are responsible for identifying patient healthcare needs and scheduling appropriate treatment, as well as coordinating emergency and nonemergency on-site and off-site medical services. We will provide a healthcare delivery system specifically tailored to the County's requirements. Our managed care system promotes efficiency and reduce costs by eliminating unnecessary services and **encouraging preventive health measures.**

The Wellpath Healthcare Delivery Process



2.2.2 Receiving Screening

NCCHC Standards J-B-07, J-E-02

Wellpath staff screen arrestees on their arrival at the Facility for emergent or urgent health needs. The Wellpath receiving screening emphasizes the identification, referral, and treatment of individuals with acute and chronic healthcare conditions, behavioral health disorders, suicide risk, withdrawal risk, and dental issues. We also assess the need for medication, isolation, or close observation. The receiving screening sets the course for the patient's medical care throughout confinement. Early identification of problems using a systematic intake evaluation prevents more serious and costly problems from developing later.



Wellpath understands the importance of a timely and proper booking and admission screening process to promote individual and facility well-being. We will provide staffing to ensure timely evaluation of intake orders and stabilize patients with health issues as quickly as possible and initiate needed medications. We will allocate properly trained and authorized healthcare staff to conduct receiving screenings 24 hours a day, 7 days a week, including holidays.

Wellpath receiving screenings meet NCCHC and ACA standards and minimally include:

Direct visual observation:

- Abnormal appearance (e.g., sweating, tremors, anxiety, disheveled, signs of trauma or abuse)
- Restricted or compromised movement (e.g., body deformities, physical abnormality, unsteady gait, cast or splint)
- Abnormal breathing or persistent cough
- Skin conditions, including obvious lesions or wounds, lice, jaundice, rash, bruises, edema, scars, tattoos, and needle marks
- Characteristics of being at risk for victimization (e.g., age, small build, femininity, first-time offender, passive or timid appearance)

Clinical screening for current illnesses, health problems, and conditions:

- Illnesses and special health needs, including allergies
- Current medications
- History of hospitalization
- Dental conditions or complaints
- History of tuberculosis or other infectious diseases (or symptoms such as persistent cough, shortness of breath, loss of appetite, fatigue, coughing up blood, night sweats, or unexplained weight loss)
- Medical dietary needs
- Drug and alcohol use, including types, methods, date and time of last use, problems associated with ceasing use, and history of treatment for substance use
- Tobacco use
- For women, current or recent pregnancy, birth control use, date of last menstrual cycle, current gynecological problems, and methadone use
- Current pain
- Notation of personal physician and known medical risks

Testing and initial assessments:

- Record of vital signs
- Oral screening
- Initial mental health screening
- STD testing for syphilis, gonorrhea, chlamydia, and HIV as indicated
- Pregnancy testing as indicated

Mental health screening:

- History of or present suicidal and/or self-destructive behavior or thoughts
- Mental health problems, including suicidal ideation and psychosis
- Current psychotropic medications
- History of hospitalization and/or outpatient mental health treatment
- Current mental health status

Information sharing and education:

- Explain right to healthcare
- How to access medical, dental, and mental health services verbally and in writing in a language the individual understands
- Oral health and hygiene education
- PREA screening and education regarding sexual assault
- Explain grievance process
- Document informed consent

Verification and referrals:

- Examine medications brought into the facility
- Verify current medications; a clinician may be notified to assess the need for non-formulary medications, which may be provided for up to 30 days until an expedited physical exam can be completed
- Verify medically necessary special diets
- Ask about current health insurance
- Refer for mental health evaluation as indicated
- Refer for emergency, specialty, or dental care as indicated
- Refer for placement/housing (e.g., general population, medical observation, mental health observation, suicide watch, etc.)
- Refer disabled individuals to the physician to determine treatment

Wellpath staff will notify security staff of patients needing special oversight, treatment, or management of those with critical conditions, including but not limited to:

- Need of emergency room referral
- Urgent need for medication
- Suicidal thoughts or behavior
- Potential for withdrawal
- Diabetes
- Heart condition
- Seizures
- New or recent injuries
- Mental conditions or personality disorders (potential for violence)
- Contagious illness or disease considered an immediate threat to the patient population or security staff
- Any other urgent or emergent concerns



Receiving Screening Tool

NCCHC Standard J-E-02

Wellpath's standardized, physician-approved receiving screening form guides the assessment, treatment, and referral of individuals admitted with healthcare needs. Wellpath nurses use the screening results to determine the appropriate intervention. Healthcare staff are trained by the responsible physician or designee in the early recognition of medical or mental health conditions requiring clinical attention. Training includes how to complete the receiving screening form and when to contact medical staff to determine disposition.

CorEMR Intake Screen Form

[illegible]

Admission Deferrals

NCCHC Standard J-E-02

Admission to the Facility requires clearance for serious, urgent, or emergent injuries or medical problems. Intake staff may identify arrestees whose clinical status requires urgent or emergent health services not available on site. In this case, the intake nurse refers the arrestee to a local emergency room or approved hospital for care. The arrestee's subsequent admission to the Facility requires written medical clearance from the hospital.

Reasons for admission deferrals include:

- Trauma/injury upon arrest
- Excessive bleeding
- Chest pain
- Unconscious, semiconscious, or severe confusion
- Active convulsions
- Respiratory distress
- Active labor

Patient Medical Clearance Request		Patient Name (Last, First, MI)	
Date of Birth	DOB	DOB	DOB
<p>Attention Hospital Staff:</p> <p>This individual has an injury or illness and is in need of emergency medical care and/or medical clearance before being accepted for commitment into the correctional facility. Upon receipt of medical clearance and documentation reflecting that this individual is stabilized, they will be accepted/committed to the correctional facility.</p> <p>The individual noted below was not medically appropriate for intake / booking for the following reasons:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Intake Nurse: _____</p> <p>In order for our medical staff to provide continuity of care, we need ALL Emergency Department forms to be returned with the Law Enforcement Officer. This includes the Nurse Triage Sheet, ED Order Sheet, Patient History Sheet, Labs, Test Results, ED Medication Sheet, Discharge Summary, All Labs, and Diagnostic Test.</p> <p>Please check one of the following:</p> <p><input type="checkbox"/> Patient is medically cleared to return for booking / intake processing.</p> <p><input type="checkbox"/> Patient is NOT medically cleared to return for booking / intake processing.</p> <p>Treating Physician Signature: _____ Date/Time: _____</p> <p>All cost associated with treatment are the responsibility of:</p> <p>Patient Arresting Agency Wellpath Other</p>			

2.2.3 Initial Health Assessment

NCCHC Standard J-E-04

Wellpath staff will conduct a comprehensive health assessment, including a complete medical history and physical examination, for patients within their first 14 calendar days in custody. We typically target day 10 for health assessments to ensure compliance with NCCHC standards. This also allows us to identify medical needs or conditions not disclosed by the patient during intake, and to initiate timely and appropriate treatment in an effort to avoid a later need for emergent treatment or hospitalization. Wellpath staff will document patients who refuse physicals and their reasons for refusal.

A physician, a mid-level provider, or a properly trained registered nurse (RN) conducts the health assessment following local regulations. Before performing health assessments, RNs must complete physical exam training provided or approved by the responsible physician or designee. The RN also must pass a written test and successfully demonstrate an exam for the physician, who will sign off on the RN's competency to complete assessments. The training is documented in the RN's training record and repeated annually.

A Wellpath physician reviews, signs, and dates assessments completed by an RN and abnormal assessments completed by a mid-level provider. A physician or mid-level provider reviews abnormal health assessment results for disposition.

The comprehensive health assessment minimally includes:



- Review receiving/intake screening
- Record vital signs, height, and weight
- Review immunization history; initiate needed immunizations and therapy
- PPD test for tuberculosis (if not previously administered)
- Laboratory and/or diagnostic tests as required
- Vision and hearing screenings
- Physical examination (including breast, rectal, and testicular exams based on patient gender, age, and risk factors)
- Pap testing for female patients as medically indicated
- Oral screening and hygiene education
- Mental health assessment, including suicide potential and psychiatric screenings
- Review health history; gather additional data needed to complete the medical, dental, and mental health histories
- Document allergies
- Other tests and examinations as appropriate (e.g., diagnostic panel, urinalysis, EKG, etc.)

The healthcare professional conducting the assessment records findings on an approved form, which also includes the individual's title and signature, as well as the date and time of the assessment. The health assessment becomes part of the patient's permanent medical record.

[illegible]



2.2.4 Nonemergency Healthcare Requests and Services

NCCHC Standard J-E-07

Intake staff advise arrestees of their right to access care and the process for requesting healthcare services. We communicate this information verbally and in writing in a language the arrestee understands. We ensure that arrestees who do not speak English understand how to obtain healthcare.

Patients have immediate access to electronic sick call request forms that meet all standards and guidelines. Security staff can also refer patients if they have concerns for their health status. We record all medical complaints, along with a recommended intervention and referral as appropriate.

Patients have unimpeded access to routine and emergency care at all times regardless of their location, custody level, or status. If a patient is unable to attend a sick call session due to custody status (e.g., restricted housing) or as a result of physical condition, we conduct sick call services at the patient's cell.

Healthcare services comply with state and federal privacy mandates.

2.2.5 Triage and Sick Call

NCCHC Standard J-E-07

A responsible triage and sick call program is one of several critical operating systems for ensuring appropriate and timely care of patients with onset of acute or semi-chronic symptoms, other than those requiring emergency care. The Wellpath sick call process ensures that patients have access to medically necessary healthcare services. A combination of nurses, mid-level providers, and physicians provide sick call services as defined within their scope of practice. We will allocate sufficient healthcare staff for the sick call process to allow patients to be seen in a timely manner according to NCCHC and ACA standards.

Nurse Triage and Follow-up

Qualified nurses will conduct sick call triage seven days a week, including holidays. Following the collection of healthcare request forms each day, a nurse reviews and prioritizes sick call requests. Patients receive a face-to-face consultation at the next scheduled nurse sick call, which also takes place seven days a week per NCCHC standards.

The sick call nurse will assign each sick call request a disposition of emergent, urgent, or routine. Patients are seen within the appropriate timeframe. Those with emergent requests receive immediate attention. Those with urgent requests are scheduled for the next provider sick call clinic. Should the

need arise outside the scheduled sick call clinic, Wellpath will arrange for patients requiring urgent or emergent medical attention to be seen the same day.

During triage, the nurse will initiate referrals for patients needing consultation with the medical provider. If the patient needs to see more than one provider, the nurse initiates multiple referrals. The nurse documents the referral(s) on the request form.

Provider Clinics

A physician or mid-level provider will see referred patients during the next scheduled provider clinic. Wellpath schedules provider clinics with a frequency and duration sufficient to meet the health needs of the Facility's patient population. A physician or mid-level provider is also on-call 24/7 for emergencies.

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

CorEMR allows providers to begin sick call directly from the schedule view. CorEMR uses the standard SOAPE (subjective, objective, assessment, plan, education) format to guide the examiner. Scanned documents and electronic files can be stored directly into SOAPE notes. During sick call, CorEMR displays summary information, such as the patient's current medical problems and medication compliance.

CorEMR's sick call module allows users access to all parts of SOAPE notes, meaning that doctors can record actions for later note off, or complete the planning actions themselves. Actions available in the module include completing interview or exam forms, scheduling future appointments, ordering lab work, ordering medications, and more.

2.2.6 Nursing Assessment Protocols and Procedures

NCCHC Standards J-E-08, J-F-01

Wellpath nurses conduct sick call using Professional Nursing Protocols. Our physicians developed the PNPs to assist nurses with treatment recommendations and promote consistent caregiving. These protocols provide a **consistent structure for patient care, justification for actions, and a set of interventions specific to the patient's presenting condition**. Their purpose is to give nurses information regarding specific health conditions or complaints so they can reach logical conclusions from their observations, then provide appropriate intervention and follow-up.

In its simplest form, a Professional Nursing Protocol is a decision-tree process for nurses to follow, which also improves ease of training and **optimizes practitioners' time**. All Wellpath nurses are trained to use the protocols, which cover topics such as:

- | | |
|--|--|
| • Abdominal pain | • Hypoglycemia |
| • Allergic reaction (emergent) | • Male-specific complaints |
| • Altered mental status | • Musculoskeletal complaints |
| • Behavioral health complaint | • Neurological impairment |
| • Chest pain | • Nosebleeds |
| • Cold/allergy symptoms | • Pregnancy, 20 weeks or more |
| • Conditions not requiring medical treatment | • Pregnancy less than 20 weeks |
| • Dental complaints/pain | • Respiratory complaints |
| • Ear complaints | • Self-injurious behavior |
| • Eye complaints | • Skin problems |
| • Female-specific complaints | • Trauma |
| • Fever | • Urinary complaints |
| • Gastrointestinal complaints | • Use of force |
| • Headache | • Withdrawal, alcohol and benzodiazepine |
| • Heat-related illness | • Withdrawal, opiate |
| • Hyperglycemia | • Wounds |
| • Hypertension | |

The PNP manual is subject to the continued approval of the Jail Administrator or designee. The site Medical Director reviews the manual annually and the Wellpath Nursing Department makes any necessary updates. The HSA and/or the DON instructs the nursing staff on revisions, as applicable.

Nurses access electronic versions of the protocols through CorEMR and document findings directly in the patient's medical record. The electronic PNPs include a health education component; the nurse is prompted to educate the patient on symptoms to look for and when to notify medical staff about their symptoms. For example, a nurse seeing a patient for a headache might tell the patient to notify staff if the pain persists for more than four hours, if the patient experiences auras or visual changes, or if the patient has changes in balance/equilibrium. The education is provided verbally and the nurse can print a handout for the patient to keep. The electronic PNPs have a checkbox for the nurse to indicate that education has been provided; [this documentation is a compliance measure for NCCHC](#).

Nursing Support Tools

Wellpath is dedicated to supporting our nursing teammates by enabling them to deliver excellent patient care and support improved patient outcomes. We invest in resources that are evidence-based, immediately accessible to each staff member, and support clinical decision-making.

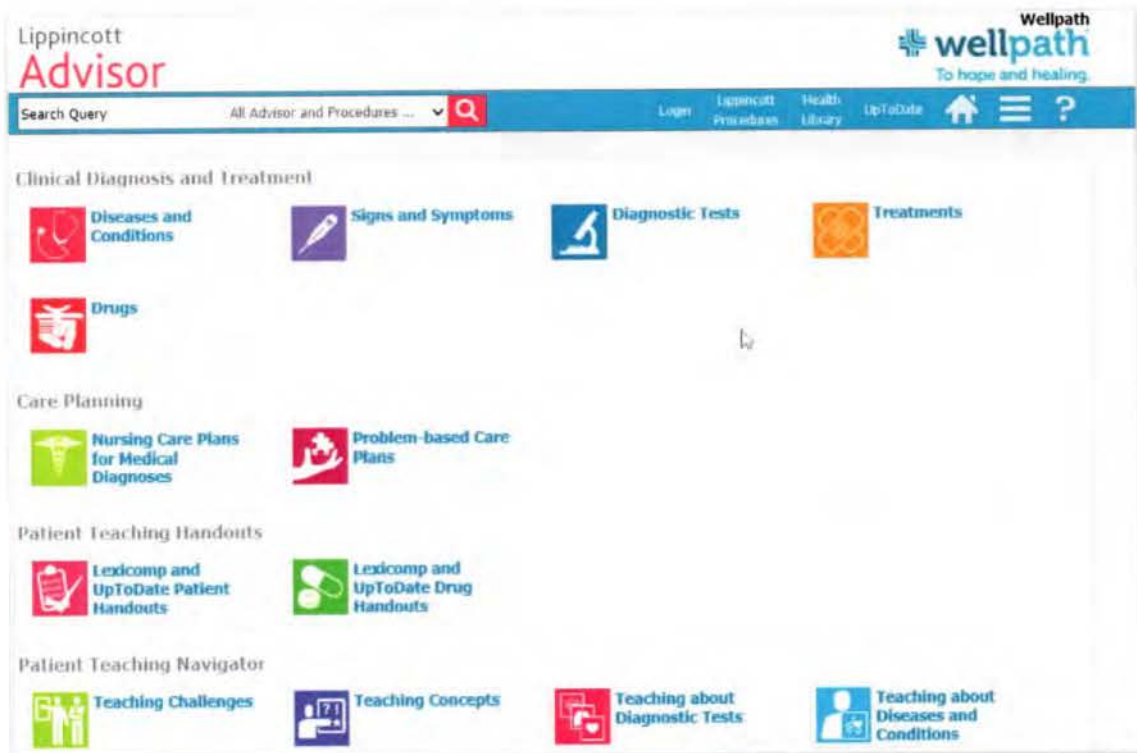
Wellpath partners with Wolters Kluwer to provide our staff with evidence-based resources, including Lippincott Procedures and Lippincott Advisor. Lippincott Procedures is an online source for instant, evidence-based procedure guidance at the point of care. With more than 1,800 procedures and skills from novice to expert and covering a wide variety of nursing specialties, it combines the most trusted clinical content with powerful online workflow functionality that saves time, standardizes care, and delivers improved patient outcomes. We encourage ancillary and support staff to access Lippincott Procedures and Lippincott Advisor to support their scope of practice.

Lippincott®
Procedures
Always Current.
Always Evidence-Based.

Nurses can make informed clinical decisions and perform quality skills. Procedures include step-by-step guides, simplified quick lists, information about special considerations, complications, documentation, and visual references, like full-color images and video clips.

Lippincott®
Advisor
The Right Answers.
Right Now.

Staff can quickly and easily consult "Nurse Lippincott" for clinical decision support regarding Signs & Symptoms, Diagnostic Tests, Diseases & Conditions, Hospital-Acquired Conditions, Treatments, Care Plans, and more. Nurses can use the Health Library to access more than 30 evidence-based eBooks on a variety of medical topics.



2.2.7 Hospital Care

NCCHC Standard J-D-08

Wellpath will authorize, schedule, and coordinate inpatient services when a patient requires hospitalization. We will work with Oak Bend Medical Center and Methodist Sugar Land Hospital when an acute care setting is required, communicating frequently with hospital administrations. Healthcare staff will make referrals for inpatient care through our Care Management system. The site Medical Director must authorize hospitalizations.





Emergency Room and Inpatient Referral Form – Care Management System

Referrals	Patient Eligibility
Send Referral	Requesting Provider:
<input type="checkbox"/> Off Site Services	<input checked="" type="radio"/> Pre-Sentenced <input type="radio"/> Sentenced
<input type="checkbox"/> DT/Local Admit	<input type="checkbox"/> Pre-Booking <input type="checkbox"/> Pre-Detaining <input type="checkbox"/> Trial/Pay
<input checked="" type="checkbox"/> 11/27/2015 43008798	<input type="checkbox"/> Probable Intimate Violence <input type="checkbox"/> Confirmed Intimate Violence <input type="checkbox"/> Other Incidents
<input type="checkbox"/> Transport Only	<input type="checkbox"/> Workers Compensation <input type="checkbox"/> Post Financial Failure
	Safesender: Medicaid
	Bed Type: <input type="checkbox"/> Inpatient Stay <input type="checkbox"/> Observation
	Referral Type:
	Select Referral Type: <input type="text" value="EM - Direct Admit"/>
	Service Details
	Treatment Type: <input checked="" type="radio"/> EMERGENCY ROOM <input type="radio"/> DIRECT ADMIT
	Means of Transportation: <input checked="" type="radio"/> Custody Car <input type="radio"/> Ambulance <input type="radio"/> Air Ambulance
	Hospital Name:
	EF Admit Date: <input type="text" value="11/27/2015"/> <input type="button" value="Calendar"/> 12:00 AM
	Discharge Date: <input type="text" value="11/27/2015"/> <input type="button" value="Calendar"/> 12:00 AM
Preventing Problems:	
Ligature <input type="button" value="Add"/>	
<input type="text" value="No records to display."/>	
Reason for visit:	
<input type="button" value="Find"/>	<input type="button" value="Submit"/> <input type="button" value="Cancel"/>
<input type="button" value="View Chart"/>	

Wellpath will communicate frequently with the County to provide the most complete evaluation and treatment of the patient population. When inmates are hospitalized, we will provide the Captain or designee with a daily inpatient census information, which can also be accessed directly through the Care Management system.

Inpatient Census Report – Care Management System

Inpatient Census Report													
Patient Types: N None, S State, FED Federal, CMP Interstate Compact, ICE ICE/INS, SMCP, USMS													
Report Description: This report displays all Inpatients between the Start Date and End Date and reflects the inpatient days for the date range chosen.													
Site Name	Site Department	Patient Name	Patient Type	Patient Number	Booking Number	DOB	Adm Code	Stay Create Date	Continuity Date	Days From Continuity	Admit Date	Disch Date	Diagnosis
							0064163	3/22/20	3/26/2020	3	3/25/2020	3/26/2020	F 13.10 Unlabeled medication with history of abuse without cause from 3/17/20 a history of abuse unexplained from F 10 271 Abused dependence with unlabeled delirium from F 10, 121 Other observed abuse with intoxication delirium from
								12/11/17	3/18/2020	11	3/17/2020	3/18/2020	R40.11 Unlabeled ingested from: info about or diagnosis occurred from
								12/17/277	3/18/2020	2	3/17/2020	3/22/2020	.J60 Physical effects not otherwise classified from
								12/17/293	3/18/2020	295	3/17/2020	4/12/2020	T81.4x0 Infection following a procedure subsequent occurred from, I82.8 TSA Headphaxed non-infectious fracture of left patella, left from



Prospective Review (Prior Authorization)

Wellpath requires prior review and authorization of non-urgent or non-emergent care. Our clinicians follow NCCHC standards and correctional guidelines to review and approve services. The site Medical Director initiates a second review if standards are not clearly met. Alternative treatment is at the discretion and direction of a physician.

Emergency Services

Wellpath does not require prior authorization for emergent services. Medical personnel may make emergency off-site referrals based on established guidelines and their professional interpretation of a patient's need. Off-site medical services exceeding the scope of the initial emergent episode are not covered. Unrelated, non-emergent diagnostic services or treatment initiated in conjunction with an emergent event require prior authorization.

Length of Stay Management

Wellpath's Regional Care Manager will manage all off-site, inpatient care on a daily basis through contact with the hospital. Our Care Management team is notified of inpatient admissions at the time of admission. The Regional Care Manager and Regional Medical Director review inpatient services daily based on InterQual Criteria, correctional guidelines, and NCCHC standards.

Concurrent Review

Wellpath's Medical Director of Care Management conducts telephonic clinical rounds twice weekly to ensure inpatient stays are appropriate and meet national guidelines, such as InterQual Criteria, for continued inpatient stay. InterQual Criteria are evidence-based clinical decision support guidelines used to determine the appropriate care setting based on severity of illness and level of care required.

The site Medical Director, Regional Medical Director, and Regional Care Manager will attend clinical rounds discussions. This multidisciplinary approach ensures inpatient stays are well-managed, and appropriate transitions of care are completed with improved accuracy.

Retrospective Review

The Wellpath Care Management Department and site leaders will retrospectively review emergency care to resolve claims issues, determine appropriateness of care post-delivery, and perform focused reviews. The Care Management Department can also perform focused reviews at the request of the provider.

Discharge Planning

Wellpath manages a robust hospital discharge planning process that begins at inpatient admission. Our Regional Care Manager works collaboratively with our on-site staff and hospital staff to ensure appropriate transitions of care. This partnership helps us ensure that excellent care continues from hospital discharge through return to the facility.

Documentation and Follow-up

NCCHC Standards J-D-08, J-E-09

Medical staff see patients returning from a hospital stay for follow-up during the next provider sick call clinic and document the follow-up in the patient's medical record. Detailed information and documentation returned with the patient, such as discharge summary, disposition and instruction sheet describing actions taken, orders written, and treatments performed, become part of the patient's medical record.

2.2.8 Emergency Services

NCCHC Standard J-D-07

Wellpath will provide emergency medical services 24 hours a day for individuals in custody of the County. Correctional healthcare personnel are trained to respond to emergencies within four minutes. A Wellpath staff member reports to the area of the emergency with necessary equipment and supplies. By training our nurses in emergency response and offering on-call physician services, we can often reduce off-site/ER trips and hospital stays.

Healthcare staff determine if a patient needs to be transported to a local emergency room for treatment. They stabilize the patient on site, then transfer the patient to an appropriate medical facility if necessary. Wellpath coordinates with local hospitals (Oak Bend Medical Center, Methodist Sugar Land, Memorial Hermann Sugar Land and Baylor Scott & White) in emergencies and communicates with security staff for emergency transport and ambulance services.

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



Retrospective Review Form for Emergency Services – Care Management System

Search

Current inmate record

☐ Inmate History
☐ Not Financially Liable
☐ Other Insurance
☐ Inpatient Stay
☐ Preexisting Event

☐ Workers Comp
☐ Confirmed Inmate Violence
☐ Probable Inmate Violence

Name: Bruce Wayne
 Inmate #: 951
 SSN: 547859320
 DOB: 2/12/1958
 Site: Oz Correctional...
 Sex: M
 Custody: 4/1/2010
 Housing: N/A
 Type: None

Discharge Date:
 Requesting Provider:

Referrals:

Referrals:

Category of Service: ☐ Emergency Room ☒ Direct Admit Patient
 Means of Transportation: ☒ Custody Car ☐ Ambulance ☐ Air Ambulance
 Hospital Name:
 Date of Service / Admission:
 Diagnosis:
 Reason for ER Visit:

Wellpath will provide monthly reports of emergency room visits. Data includes the patient's name and identification number, the date of emergency service, the patient's disposition, and the emergency treatment received.

ER Trips Report – Care Management System

wellpath

Event Detail Report

Page 1 of 2

Date of Service	Discharge	Provider	Dept	Facility	Patient Number	Patient Last Name	Patient First Name	Pre-Book	Pre-Exist	No Chrg	Liability Description
AMBULANCE	# EVENT(S)										
Jails											
10/03/2019	10/04/2019	VALLEY CARE	F6001					Y		Y	Medicaid
10/03/2019	10/03/2019	HIGHLAND HOSPITAL	F6001							Y	Not Financially Liable
10/18/2019	12/09/2019	VALLEY CARE	F6001							Y	Medicaid
10/18/2019	10/18/2019	VALLEY CARE	F6001								
10/18/2019	10/18/2019	HOSPITAL	F6001							Y	Not Financially Liable
10/19/2019	10/20/2019	HIGHLAND	F6001								
10/20/2019	11/03/2019	EDEN HOSPITAL	F6001							Y	Medicaid
10/21/2019	10/25/2019	VALLEY CARE ROOM 2902	F6001								Medicaid
10/21/2019	11/03/2019	JOHN GEORGE	F6001							Y	Not Financially Liable
10/22/2019	10/23/2019	HIGHLAND HOSPITAL	F6001								
10/23/2019	10/23/2019	VALLEY CARE ER	F6001								
10/23/2019	10/23/2019	VALLEY	F6001					Y		Y	Not Financially Liable

Emergency Transportation

Wellpath staff will coordinate emergency transport and ambulance services with security staff. Healthcare staff will work cooperatively with security staff to ensure that transportation services are provided in a safe and timely manner.



Emergency Treatment for Visitors and Staff

Wellpath will provide emergency medical treatment and first aid to stabilize staff, visitors, employees, or subcontractors who become ill or injured and require emergency care while on the premises. Once the individual's condition is stabilized, healthcare staff will direct the patient to a personal physician or local hospital as appropriate and document the services provided.

Emergency Equipment

Wellpath will maintain adequate emergency equipment and mass disaster supplies on site. The Wellpath Emergency Preparedness Plan ensures the presence and proper use of emergency equipment and supplies, including crash cart equipment and disaster bag/mobile equipment, as well as a disaster kit for needs encompassing the entire facility. We train all healthcare staff on the proper use of emergency equipment and supplies.

Wellpath staff use an Emergency Response Bag Contents List and Verification Log to ensure the constant availability of emergency response bag supplies. If unopened, the tags/locks on the emergency response bag are checked daily. The bag is also checked and restocked when opened. The emergency response bag contains doses of Narcan for known or suspected opioid overdose.

2.2.9 Emergency Response Plan

NCCHC Standard J-D-07

Wellpath has an effective emergency plan with detailed procedures to ensure continuity of care during unexpected events, disruptions, and natural or man-made disasters. Our emergency preparedness plan ensures proper staff recall and allocation, patient movement to designated safe areas, and availability of emergency equipment and supplies. Our plan covers the four major phases of emergency preparedness management—**Mitigation, Preparedness, Response, and Recovery**—as illustrated below.



The Wellpath emergency preparedness plan for Facility follows NCCHC and ACA standards. It is outlined in our Policies and Procedures manual, which has been reviewed and approved by the County. We will work collaboratively with the Jail Administrator or designee to define the roles of healthcare staff in a disaster and to incorporate our plan into the overall emergency procedures for the Facility. The emergency preparedness plan has been approved by the County and includes:

- Establishment of a command post
- Healthcare staff's responsibilities during an emergency
- Triage procedures
- Use of emergency equipment and supplies
- Establishment of primary and secondary triage areas and sites for care
- Continuity of care and safety of patients
- Prevention of interruption in medication
- Pharmacy and medical supplies contingency plan
- Protection and accessibility of patient care data at predetermined locations
- Training modules
- Disaster bag/mobile equipment contents, breakaway seal system
- Crash cart equipment
- Contact list for recall of key healthcare staff and community emergency response system
- Evacuation procedures in coordination with security personnel
- Evacuation routes and means of transport out of the institution for injured, ill, disabled, or restrained individuals
- Emergency treatment documentation
- Medical staff participation in facility emergency procedure drills
- Procedure for conducting man-down and emergency drills
- Backup assignments for each contingency element



Wellpath trains healthcare staff on the emergency preparedness plan, which includes “man down” incidents, fires, and hostage situations. We train new employees on the health aspects of the plan during orientation, and we require healthcare staff to review the plan annually. A health emergency “man down” drill is practiced annually on each shift where healthcare staff are regularly assigned. We participate in disaster drill planning programs as requested and perform an annual critique of the drills.

Wellpath trains healthcare personnel to respond to emergencies within four minutes. We conduct periodic proficiency training on emergency response and other integral components of our program using established core competency checklists. We assess core competency annually or more frequently depending on an individual’s needs or responsibilities.

We also train healthcare staff on implementing an incident command system (ICS).

We train healthcare staff on managing multi-casualties using the **Simple Triage and Rapid Treatment (START)** system, developed by Hoag Hospital and the Newport Beach Fire Department in California. The triage portion of START, which is the focus of our training program, allows for rapid assessment of every patient, identifying those who have life-threatening injuries, and assigns each patient to one of four categories: minor, deceased, immediate, or delayed. This allows first responders to focus on those with the best chance of surviving.

START Triage	
Assess, Treat, (use bystanders)	
When you have a color, STOP - TAG - MOVE ON	
MINOR GREEN	-- Move Walking Wounded
	-- No RESPIRATIONS after head tilt
	-- Breathing but UNCONSCIOUS
	-- Respirations - over 30
IMMEDIATE RED	-- Perfusion Capillary refill > 2 or NO RADIAL PULSE
	Control bleeding
DECEASED BLACK	-- Mental Status Unable to follow simple commands
	-- Otherwise
DELAYED YELLOW	

REMEMBER:
 Respirations - 30
 Perfusion - 2
 Mental Status - Can Do

2.2.10 Specialty Care

NCCHC Standard J-D-08

Wellpath will ensure appropriate and timely access to specialty care and will schedule referrals for specialty care providers according to clinical priority. We provide specialty services with urgent priorities as quickly as possible within 7 days of referral, and routine specialty services as soon as possible within 30 days of referral. If services do not occur within these timeframes, the medical practitioner re-evaluates the patient to determine and document the level of need.

Wellpath staff will schedule appointments for specialty services through our powerful **Care Management system**, which allows staff to prioritize and track specialty appointments to ensure they take place within the required timeframe. If a patient needs specialty services that are not available on-site, Wellpath staff will authorize, schedule, and coordinate the provision of services with local providers.



On-Site Specialty Services

NCCHC Standard J-D-08

Wellpath will provide as many on-site medical services as possible to limit the number of patients requiring off-site transport, while ensuring that patients receive medically necessary healthcare services in the most appropriate setting. We understand our role as a steward of the taxpayers' dollars and continually work to reduce unnecessary costs and community risk associated with off-site care when appropriate.

Wellpath has successfully established many on-site programs and specialty care clinics across the country and at the Facility. We will evaluate statistics regarding off-site specialist consultations to determine what services could be more cost-effectively provided on site. Services brought on-site typically result in cost savings as a result of clinic (rather than per patient) rates and decreased officer transportation expenditures.

Wellpath continuously evaluates the potential benefits of establishing the following on-site clinics and will implement them as appropriate:

- Dialysis
- OB/GYN
- Orthopedics
- Optometry/Ophthalmology
- Oral Surgery
- Physical Therapy
- Podiatry
- General Surgery
- Other services as needed

In addition to maximizing on-site medical services, Wellpath also prevents the unnecessary use of outpatient/off-site care and inpatient hospitalizations by using our advanced utilization management techniques. Our Care Management system creates more clinical control and cost efficiencies for both on- and off-site healthcare services.

Off-site Specialty Services

NCCHC Standards J-D-06, J-D-08

Wellpath will arrange with local providers and hospitals to treat patients with healthcare needs beyond the scope of care provided on site. We authorize, schedule, and coordinate off-site services, such as outpatient surgery, diagnostic testing (e.g., MRI, CT scan, etc.), and ER ambulance services.

Wellpath staff will initiate referrals for off-site treatment through our Care Management system. Referrals are limited to the chief complaint(s) indicated through a referral form and/or medical consultation. Approvals are based on appropriateness and necessity. The following screenshots show the form used to refer patients for off-site treatment and a view of submitted requests.

Off-site Service Referral Form – Care Management System

Patient Eligibility			
Requesting Provider			
<input checked="" type="radio"/> Pre-Sentinel <input type="radio"/> Sentinel			
<input type="checkbox"/> One Booking <input type="checkbox"/> One-Visit <input type="checkbox"/> Other Insurance	<input type="checkbox"/> Possible Intake Violence <input type="checkbox"/> Confirmed Intake Violence	<input type="checkbox"/> Worker's Compensation <input type="checkbox"/> Not Financially Liable	<input type="checkbox"/> Safeknow <input type="checkbox"/> Medical
Referral Type		Reviewer Type	
Select Referral Type OM Site Services ▼		Select Reviewer Type ▼	
Service Details			
Treatment Type ▼	Specialty Type ▼	Place of Service Hospital ▼	Transport To
Related Diagnosis			
Diagnosis + No records to display			
Previous Treatment and Response (Include Meds)		History of Illness/Injury with Date of Onset	
Results of Complaint Directed Physical Exam with Findings		Type of Procedure Requested	
Current Functional Ability / ADLs		Other	
<input type="button" value="Print"/> <input type="button" value="Submit"/> <input type="button" value="Cancel"/>		<input type="button" value="Show Chart"/>	

Submitted Requests View – Care Management System

Work Queue		Submitter Requests (176)						
Work Queue		Service Date	Service Type	Specialty	Referring	Name	Status	Age
Asynchronous Consults								
Addition								
Sub								
Submitted Requests (176)								
Information Requested (2)								
Pending Requests (9)								
Approved Requests (132)								
Alternate Treatment (3)								
Scheduled Requests (145)								
My Requested (3)								
Forwarded to Me (3)								
Scheduled Appts (7 Days) (4)								
Canceled (0-11)								
Scheduled Appointments (1475)								
Fax Update Appointments (220)								
Requests (Last 30 Days) (15)								
Over Age Reminders (133)								
ER Requests (7 Days) (3)								
Walter Reed Requests (154)								
Non-Emergency Referrals - Federal (1)								
4EDOC Appointments (14 Days) (3)								
Pharmacy Refill Requests (20)								



Preferred Provider Steerage

When a user creates an off-site referral in the Care Management system for an office visit or office visit with a procedure and selects a specialty, the user is prompted to click a link to select a provider from a list of preferred providers. This enables Wellpath to **contain off-site costs** and ensure that patients are seen by specialists who are established within our preferred provider network.



Wellpath's tiered provider system ensures that appointments are secured with the most appropriate specialist:

- Tier 1 = Preferred
- Tier 2 = In-network
- Tier 3 = Out of network

The screenshot shows the ERM (Electronic Referral Management) system interface. At the top, there's a navigation bar with tabs like 'Patient', 'Documents', 'Views', 'Reporting', 'Tools', and 'Admin'. Below this, a patient profile is displayed for 'John Doe' with fields for Name, DOB, Address, and a 'View Profile' link. The main section is titled 'Patient Referral' and contains a form for creating a referral. Key fields include 'Referral Type' (set to 'Office Visit'), 'Specialty' (set to 'Internal Medicine'), and 'Referral Date'. A 'Check for Availability' button is highlighted with a blue circle. A 'See this link to select a provider' link is also highlighted with a blue circle. The form includes a 'Referral Description' field and a 'Referral Status' dropdown. At the bottom, there are buttons for 'Save', 'Cancel', and 'Print'.



Provider Details

Search

115 Providers Found. Page 1 of 1

Tier	Name	Phone	Address	City	State	Specialty	Zip	Fax	Mileage
1 - Preferred	Dr. David M. ...	303-455-2015	1872 South ...	Denver	Colorado	Cardiology	80222		11
1 - Preferred	Dr. David M. ...	303-455-2050	1872 S. ...	Denver	Colorado	Cardiology	80222		11
1 - Preferred	Dr. David M. ...	720-344-0910	12025 E 10th ...	Aurora	Colorado	Cardiology	80045		16
1 - Preferred	Dr. David M. ...	720-344-0000	12120 E ...	Aurora	Colorado	Cardiology	80045		16
1 - Preferred	Dr. David M. ...	720-344-0000	1625 Aurora ...	Aurora	Colorado	Cardiology	80015		16
1 - Preferred	Dr. David M. ...	720-344-0000	12025 E 10th ...	Aurora	Colorado	Cardiology	80045		16
1 - Preferred	Dr. David M. ...	720-344-0100	15125 E 15th ...	Aurora	Colorado	Cardiology	80045	720-344-0100	16

Appointment Scheduling

Once the referral is approved, Wellpath staff will schedule an appointment through the Care Management system. The Care Management system is a valuable tool for healthcare staff when prioritizing specialty appointments. This powerful scheduling function makes our Care Management system an integral tool in the provision of care. Features include:

- Recurring appointments (ideal for chronic care patients)
- Cancellation of appointments for patients who have been released
- Rescheduling of pending appointments for patients who are re-admitted to the facility
- Easy-to-view daily/weekly/monthly calendars for staff review
- Shows missed appointments (due to security, court appearances, etc.) and allow for rescheduling

The following screenshots show various views of the appointment process in the Care Management system.



Appointment Scheduling – Care Management System

Scheduling For Referral: Click Here to watch the scheduling training video.

Create Appointments Referral #: 0000040

Site Department: Open Therapy Caps / Correctional Facility Existent's Scheduled Appointments

Patient: ... This patient has no scheduled appointments.

Date: 01/01/2018 Time: 08:00 AM + Appointment Service: Off Site Services Treatment: OFFICE VISITS Assign To: ...

Scheduled Appointments on this date/time: 0

Associated Problem / Diagnosis: This patient has no active problems.

Medical Notes: Added Date Added By Name

Click the "+" button to add a new note.

Add To Summary

Appointment Summary

Date/Time	Encounter	Service	Treatment	Assigned To
<div> Cancel </div>				

Sample Scheduled Appointments List (Off-Site)

Multiple Sites Selected

Work Queue

Outlets

- Intakes (Not 3 days) (129)
- Med Pass Schedule (2725)
- Health Requiring Records (176)
- Not Screened Past 7 Days (151)
- PPD High Reads (20)
- Reprint PPDs (33)
- Unread PPDs (11)
- LMI
- Alternate Treatment (13)
- Approved Requests (576)
- Current IP (0)
- ER Requests (7 days) (7)
- Open Non-Formalities (267)
- Pending Requests (21)
- Requests (Last 30 Days) (888)
- Scheduled Appointments (372)
- Scheduled Appts (7 days) (24)**
- Scheduled Requests (86)
- Submitted Requests (0)
- Labs
- Labs Received (10)
- Sick Calls
- Sick Call Referrals (2720)
- Sick Calls (New) (0)

Scheduled Appts (7 days) (24)

Service Date	Type	Patient #	Inmate Name	Site Code	Site Name	Days	T
01/18/2018 08:15	OFFICE VISITS	EM				-3	
01/17/2018 02:30	OFFICE VISITS	EM				-2	
01/17/2018 02:15	OFFICE VISITS	EM				-2	
01/12/2018 05:30	ONE DAY SURGERY	EM				3	
01/09/2018 12:00	OFFICE VISITS	EM				4	
01/09/2018 08:50	OFFICE VISITS	EM				4	
01/09/2018 08:30	OFFICE VISITS	EM				4	
01/05/2018 02:00	OFFICE VISITS	EM				6	
01/05/2018 11:30	OFFICE VISITS WITH PHOTOCOAGULATIONS	EM				6	
01/03/2018 11:30	OFFICE VISITS	EM				8	
01/03/2018 08:30	OFFICE VISITS WITH PHOTOCOAGULATIONS	EM				8	

Page 1 of 20

Transportation and Security

Wellpath will coordinate transportation and security with security staff for all off-site services. Healthcare staff will work cooperatively with security staff to ensure safe and timely transportation. Patients are not informed of scheduled appointment dates, times, or the location of outside providers.

Wellpath staff will provide security staff with advanced written notice of scheduled appointments. We try to consolidate the scheduling of off-site appointments with hospitals and other healthcare providers to minimize the impact on transportation personnel and available vehicles. An electronic appointment calendar will be maintained and shared with appropriate security staff.

Transfer of Medical Information

[NCCHC Standard J-A-08](#)

Wellpath staff will prepare medical information to accompany patients traveling to an off-site specialty appointment, hospital or emergency room, or another detention facility. Patients traveling to another facility travel with a medical transfer containing all necessary information required for the continuation of treatment.

Medical records being sent to the receiving treatment provider are placed in a sealed envelope labeled "Confidential." Additionally, another envelope marked "Confidential" is placed inside the first envelope to ensure that returning medical information remains confidential to the patient. Confidential patient information is given to custody and returned immediately to the medical unit upon completion of the off-site medical appointment.

Documentation and Follow-up

[NCCHC Standard J-E-09](#)

All information and documentation returned with the patient from an outside provider becomes part of the patient's medical record. This typically includes a disposition and instruction sheet that describes actions taken, orders written, findings from consults, treatments performed, and a detailed discharge summary for those returning from inpatient hospitalization.

Patients returning from off-site appointments are seen by the on-site provider in a timely manner. When patients return from an off-site appointment or hospital stay, a medical provider sees them during the next provider sick call clinic and documents the follow-up in the patient's medical record. Wellpath maintains an active log of off-site care to facilitate this process.

2.2.11 Utilization Management

Wellpath has the [strongest utilization management program](#) in the industry for managing patient care. Our Care Management program uses evidence-based guidelines to determine medical necessity as part of our approval process.

The Wellpath Care Management program is clinically overseen by Medical Director of Care Management Donald Rhodes, MD, and is operationally managed by Vice President of Care Management Pablo Viteri, MS, MHP. Dr. Rhodes and the Care Management team will work with the Regional Medical Director and

on-site medical personnel to ensure patients receive medically necessary healthcare services in the most appropriate setting.

Wellpath Care Management System

Wellpath's web-based Care Management system will be implemented at your facility on Day 1. This system enhances clinical control and cost efficiencies for off-site care by allowing us to track off-site services, ensure timely return from off-site visits, manage claims, and provide reports that assist the County with cost containment and budget preparation.



The Care Management system will function alongside the Facility's Jail Management System (JMS), Tiburon, to ensure accurate reporting. The healthcare staff has access to the Care Management system to view management information and monitor off-site scheduling and inpatient status. With our robust Care Management system, **Wellpath offers a level of automation and accuracy in reporting that no competitor can match.**

Wellpath will coordinate, validate, and track off-site care and invoicing through the Care Management system. Our established review process ensures that off-site referrals are medically necessary and payments are appropriate. Following is a summary of the Wellpath Care Management process:



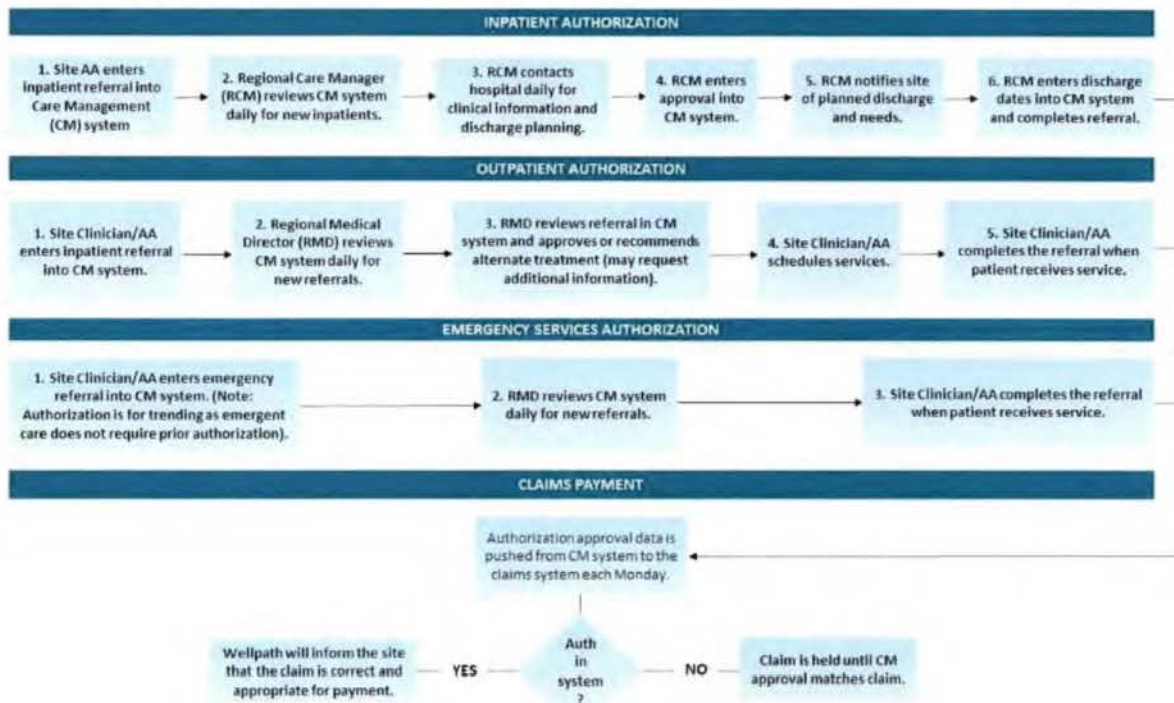
1. When an on-site provider determines that a patient may need community-based services, the provider uses the Care Management system to document and communicate the Consultation Request.
2. Our Chief Clinical Officer and/or Regional Medical Director accesses the Care Management system daily to review requests and take one of the following actions:
 - Authorize a specific diagnostic or therapeutic modality
 - Recommend an alternative treatment plan
 - Request additional information
3. If the requested service is medically necessary, it is approved. An authorization number is established in the Care Management system, which automatically sends the authorization number to the site and the Wellpath Claims Department.
4. Once the site receives an authorization number, Wellpath staff schedule an appointment within the system. Authorization numbers are only valid for a specific period. Wellpath communicates service approval to the community provider and requires pre-approval to assume financial responsibility for services rendered. We also verify that all invoiced charges are appropriate. Since the system sends the authorization number to our Claims Department, they can review every invoice to ensure that the County is billed only for the approved services.
5. If a patient is released from custody before a scheduled appointment, Wellpath notifies the community provider that the County is no longer financially responsible and removes the pending appointment from the system.

Wellpath provides clients with complete access to our easy-to-use Care Management system, including real-time utilization reporting. We are fully transparent in our Care Management process, assuring our clients that **only necessary off-site trips are made.**



6. The site Medical Director reviews and addresses discharge summaries and medical recommendations made by the community provider.

The Wellpath Review Process




Utilization Review

The Wellpath Care Management system generates reports that allow us to analyze the utilization of off-site services on behalf of the County. We use this data to assess the need for additional on-site and off-site services, as well as the potential impact that systems such as telehealth may have. We continuously evaluate the number of cases and the costs associated with transporting patients to determine which clinics are held on site. Constant evaluation of specialty services ensures the most cost-effective solution for clinics.

Following is an example of Wellpath's Event Detail Report, which provides a snapshot of off-site visits.



Sample Event Detail Report



Event Detail Report

Page 1 of 2

489 Day(s)		INPATIENT HOSPITALIZATION Totals															
489 Day(s)		INPATIENT HOSPITALIZATION Totals															
OBSERVATION 4 EVENT(S)																	
Jails																	
10/03/2019	10/04/2019		6001				Y	Y	Medicaid								
11/30/2019	12/02/2019		6001														
11/30/2019	12/02/2019		6001														
12/05/2019	12/06/2019		6001														
4		OBSERVATION Totals															
4		OBSERVATION Totals															
OFFICE VISITS 32 EVENT(S)																	
Jails																	
10/08/2019			6001														
10/09/2019		CARDIOLOGY	6001														
10/09/2019		ORAL AND MAXILLOFACIAL SURGERY	6001														
10/10/2019		ORAL AND MAXILLOFACIAL SURGERY	6001														
10/21/2019			6001														
11/15/2019		OPHTHALMOLOGY	6001														
11/15/2019		UROLOGY	6001						Y Not Financially Liable								
11/18/2019		ORAL AND MAXILLOFACIAL SURGERY	6001				Y		Pre-Existing								
11/20/2019		OBSTETRICS	6001						Y Not Financially Liable								

Wellpath offers numerous reports to help clients track and manage off-site services. The most important is the Event and Expense Detail Report, which itemizes each off-site referral entered into the Care Management system and tracks important cost data. Each Wellpath site is required to review the Event and Expense Detail Report at least monthly and confirm the report is correct by the third business day of each month. This report is used to establish the monthly off-site cost accrual in the facility's financial statements. Wellpath staff are trained to review this report for accuracy on a weekly basis to identify:

- Events are showing up on the report (compare the events on the report to any internal tracking process)
- Dates of service are accurate, especially ER dates
- All provider information is showing up on the report
- No duplicate records
- All referrals are in the correct category (e.g., ambulance, off-site, dialysis, radiology)



- Inmate type is correct (e.g., State, Federal, ICE)
- All dialysis appointment dates are listed
- Discharge dates are entered and accurate
- Custody release dates are entered when appropriate

Following is a sample Event and Expense Detail Report, which can be exported to Excel and sorted by hospital, service, or patient, offering full transparency into off-site costs.

Sample Monthly Event & Expense Detail Report

Event & Expense Detail Report

Regions: Jails

AMBULANCE 22 EVENT(S)

Jails

REDACTED

REDACTED County Detention Facility

Date of Service	Discharge	Day	Provider	Dept	Patient Number	Patient Last Name	Patient First Name	DOB	Type	Pre-Book	Pre-Exist	No Chrg	Referral #	Auto/Appt ID	Standard Cost	Paid To Date	Expense	Default Claim
03/05/2020	03/05/2020			7860					S				12174200	17667662	\$85.50	\$208.17	\$208.17	0
03/05/2020	03/05/2020			7860					S				12064700	17500012	\$85.50	\$0.00	\$85.50	0
03/05/2020	03/05/2020			7860					S				12171277	17664214	\$85.50	\$0.00	\$85.50	0
03/05/2020	03/05/2020			7860					S				12196025	17703880	\$85.50	\$0.00	\$85.50	0
03/05/2020	03/05/2020			7860					S				12196030	17703881	\$85.50	\$0.00	\$85.50	0
03/05/2020	03/05/2020			7860					S				12196030	17703881	\$85.50	\$0.00	\$85.50	0
AMBULANCE Totals															\$1,882.86	\$1,585.86	\$2,794.22	
AMBULANCE Totals															\$1,882.86	\$1,585.86	\$2,794.22	
AMBULANCE Totals															\$1,882.86	\$1,585.86	\$2,794.22	
AMBULANCE Totals															\$1,882.86	\$1,585.86	\$2,794.22	

EMERGENCY ROOM 122 EVENT(S)

Jails

REDACTED

REDACTED County Detention Facility

Date of Service	Discharge	Day	Provider	Dept	Patient Number	Patient Last Name	Patient First Name	DOB	Type	Pre-Book	Pre-Exist	No Chrg	Referral #	Auto/Appt ID	Standard Cost	Paid To Date	Expense	Default Claim
03/05/2020	03/05/2020			7860					S	Y	Y	12077000	17522000		\$0.00	\$0.00	\$0.00	0
03/05/2020	03/05/2020			7860					S	Y	Y	12166041	17050914		\$0.00	\$0.00	\$0.00	0
03/05/2020	03/05/2020			7860					S	Y	Y	12250035	17778745		\$0.00	\$0.00	\$0.00	0
03/05/2020	03/05/2020			7860					S	Y	Y	12250047	17778769		\$0.00	\$0.00	\$0.00	0
03/05/2020	03/05/2020			7860					S	Y	Y	12250067	17778791		\$0.00	\$0.00	\$0.00	0
EMERGENCY ROOM Totals															\$18,693.50	\$7,262.86	\$21,594.13	
EMERGENCY ROOM Totals															\$18,693.50	\$7,262.86	\$21,594.13	
EMERGENCY ROOM Totals															\$18,693.50	\$7,262.86	\$21,594.13	
EMERGENCY ROOM Totals															\$18,693.50	\$7,262.86	\$21,594.13	

OBSERVATION 1 EVENT(S)

Jails

REDACTED

REDACTED County Detention Facility

Date of Service	Discharge	Day	Provider	Dept	Patient Number	Patient Last Name	Patient First Name	DOB	Type	Pre-Book	Pre-Exist	No Chrg	Referral #	Auto/Appt ID	Standard Cost	Paid To Date	Expense	Default Claim
03/05/2020	03/05/2020			7860					S			Y	12064700	17500012	\$0.00	\$0.00	\$0.00	0
OBSERVATION Totals															\$0.00	\$0.00	\$0.00	
OBSERVATION Totals															\$0.00	\$0.00	\$0.00	
OBSERVATION Totals															\$0.00	\$0.00	\$0.00	
OBSERVATION Totals															\$0.00	\$0.00	\$0.00	

INPATIENT HOSPITALIZATION 9 EVENT(S)

Jails

REDACTED

REDACTED County Detention Facility

Date of Service	Discharge	Day	Provider	Dept	Patient Number	Patient Last Name	Patient First Name	DOB	Type	Pre-Book	Pre-Exist	No Chrg	Referral #	Auto/Appt ID	Standard Cost	Paid To Date	Expense	Default Claim
03/05/2020	03/05/2020	5		7860					S			Y	12064700	17500012	\$0.00	\$0.00	\$0.00	0
03/05/2020	03/12/2020	7		7860					S			Y	12065750	17545228	\$0.00	\$0.00	\$0.00	0
03/17/2020	03/23/2020	8		7860					S			Y	12171277	17664214	\$0.00	\$0.00	\$0.00	0
03/17/2020	04/01/2020	15		7860					S			Y	12171203	17664229	\$0.00	\$0.00	\$0.00	0
65 Days(s) INPATIENT HOSPITALIZATION Totals															\$900.00	\$0.00	\$900.00	
45 Days(s) INPATIENT HOSPITALIZATION Totals															\$900.00	\$0.00	\$900.00	
45 Days(s) INPATIENT HOSPITALIZATION Totals															\$900.00	\$0.00	\$900.00	
45 Days(s) INPATIENT HOSPITALIZATION Totals															\$900.00	\$0.00	\$900.00	

OFFICE VISITS 14 EVENT(S)

Jails



Utilization Statistics

Our Care Management system produces reports for the County containing detailed data for cost analysis and containment. These reports include information on all medical, dental, and mental health services and associated costs, including laboratory, radiology, and other ancillary services; specialty services; pharmaceuticals; and medical supplies. We analyze utilization statistics and continuously evaluate the potential benefits of establishing on-site clinics.

Wellpath will successfully reduce off-site medical and security costs for the County by providing cost-effective, medically necessary healthcare services at the Facility. The Care Management system is a powerful tool for tracking and analyzing utilization data. The system's visual dashboards allow for the comparison of historical data and patient care trends. Operational and outcome trending can be provided on:

- Admits per 100/1000
- Admits by diagnosis
- Re-admission rates
- ER visits per 100/1000
- ER visits by diagnosis
- ER conversion rates
- Infection rates
- Non-formulary utilization trends
- Non-formulary lab trends
- Prior authorization turnaround times
- Prior authorization outcome rates
- Standard vs. expedited authorization requests

Sample Care Management Dashboards – Off-site Referrals & Inpatient Events





2.2.12 On-Site Diagnostic Services

NCCHC Standard J-D-04

Wellpath will authorize, schedule, and coordinate necessary diagnostic services, including phlebotomy, X-ray, EKG, and ultrasound services. Healthcare staff make referrals for diagnostic services and prioritize tasks for appointment scheduling through our Care Management system. Wellpath provides follow-up care for health problems identified by any health screenings or diagnostic tests.

Consistent with the Wellpath care philosophy, we provide diagnostic services on site when possible. We will provide the necessary staff and supplies for on-site care and treatment of our patients, including medical, radiology, laboratory, dental, and other supplies.

2.2.13 Laboratory Services



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



Our laboratory program includes necessary supplies and a dedicated printer, timely pickup and delivery, and accurate reporting within 24 hours on most labs, including STAT labs upon request. We ensure that qualified healthcare personnel are trained to collect and prepare laboratory specimens. All point-of-care lab services are processed on site, including but not limited to:

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



A medical provider reviews and signs off on laboratory results, which we receive via fax. If test results indicate a critical value, LabCorp alerts the provider by telephone. The provider reviews laboratory results within 24-48 hours (72 hours for weekends and holidays), or immediately for STAT lab reports and any abnormal test results. Preliminary results, when available, receive a medical review.

We train on-site staff on laboratory policies and provide them with a diagnostic procedure manual that includes reporting on STAT and critical values. Staff document diagnostic laboratory reports and follow-up care in the patient's medical record.

Wellpath performs on-site services per the Clinical Laboratories Inspection Act (CLIA) and in compliance with the Clinical Laboratory Improvement Amendments of 1988. The laboratory program for the Facility also complies with standards set forth by the American College of Pathology and state requirements for medical pathology, specimen handling, testing, and reporting.

Lab Formulary

Wellpath has established a lab formulary to manage laboratory costs at the Facility. The lab formulary includes the most commonly required tests, which allows us to expedite the ordering process by easily selecting the appropriate tests. We receive discounted pricing for lab tests that we renegotiate regularly to ensure savings for our clients.



Non-formulary requests require pre-approval through our Care Management system. The Regional Medical Director reviews non-formulary requests and approves them or suggests an alternative plan.

X-Ray Services



Wellpath will implement the most cost-effective and comprehensive radiology program available for the Facility. We deliver on-site radiology services through our national contract with MobilexUSA (a division of TridentCare). Mobilex is the country's leading provider of mobile X-ray and ultrasound services, serving more than 6,000 facilities nationwide. We will work with Mobilex and the County to maintain a routine schedule for on-site radiology services, including:



- Mobile X-ray services
- Ultrasounds
- Sonograms
- Doppler studies
- Holter monitor studies

Results can be received electronically, via fax, or on paper. Wellpath staff log the type and number of X-rays completed and the results received. Medical personnel review the log daily to ensure timely reporting.

A board-certified radiologist reads X-rays and radiology special studies and provides a typed and/or automated report within 24 hours. The radiologist calls the Facility for immediate intervention if needed. If notified of abnormal results, the site Medical Director or physician/mid-level designee reviews, initials, and dates X-ray reports within five working days.

Wellpath staff will document and store digital images and radiology reports in the patient's electronic medical record. The site Medical Director or physician/mid-level designee will meet with the patient to discuss results and establish a plan of care, documenting this follow up in the patient's medical record.

2.2.14 Dental Care

NCCHC Standards J-E-04, J-E-06, J-E-07

Wellpath will provide dental care to patients following NCCHC and ACA standards. We take the dental needs of our patients seriously, as dental health can have a serious impact on the overall physical health of a patient. Neglect of dental needs can lead to serious infection, affecting both the health of the patient and the cost of treatment.

Consistent with the Wellpath care philosophy, we will provide services on site to the extent possible. Dental services, including but not limited to exams and treatment (e.g., emergency fillings and extractions), are provided by dental personnel licensed to practice in Texas. The Wellpath proposed staffing plan includes a Dental Assistant to assist the Dentist, manage the treatment schedule and care requests, and properly maintain and sterilize equipment.

Oral Screening

NCCHC Standards J-E-04, J-E-06

Nursing staff will conduct an initial oral screening at intake to identify complaints needing a referral. A more in-depth oral screening takes place during the comprehensive health assessment within 14 days to identify additional dental needs or required referrals. A qualified healthcare professional will perform the screening and educate the patient on proper oral hygiene.

Nursing staff will receive documented training from or approved by a Dentist on performing oral screenings, including questions to ask and what to look for. The oral screening includes:

- Taking dental history
- Documenting evidence of visible cavities/decay, missing restoration, or tissue abnormalities
- Providing oral hygiene instruction and preventive education
- Initiating dental specialist referrals, if needed

Unless an emergent need is identified during the oral screening, a Dentist will perform an oral examination within 12 months. The examination includes a dental treatment plan and X-rays.

Dental Treatment Priority

NCCHC Standard J-E-06

Patients can request dental services through the sick call process. The Dentist will evaluate the patient's initial oral screening, assesses the severity of the complaint, and schedule a dental exam. The Dentist will prioritize and schedule treatment as needed. If non-treatment would compromise the patient's health, the appropriate dental services are provided as soon as possible.

Wellpath's treatment priority and classification system gives priority scheduling to:

- Patients needing emergency dental treatment, including but not limited to those with abscessed teeth, trauma, and severe facial swelling
- Patients with chronic medical conditions such as diabetes, heart conditions, or any condition that compromises their immune system

Emergency Dental Care

NCCHC Standard J-E-06

Emergency dental services will be available as needed. Medical staff will evaluate the emergency following dental emergency protocols and refer the patient to an off-site emergency or dental provider if clinically appropriate. Wellpath staff will coordinate transportation and security with facility staff.

A medical practitioner will evaluate patients needing emergency dental care and provide appropriate intervention until the patient can be seen by a dental practitioner or transferred for emergency care. Dental needs are categorized as emergent or urgent: emergent intervention is provided within 4 hours and urgent intervention is provided within 48 hours. Emergent and urgent dental needs are addressed by a medical practitioner until a Dentist is available.

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

Quality Assurance

Wellpath will complete regular dental audits to ensure the provision of appropriate services at the Facility. Dental audits are designed to ensure, at a minimum:

- Proper PPE is worn when treating patients
- Patients are wearing protective eyewear when receiving treatment
- Instruments are properly sterilized
- Instrument counts are logged properly
- Weekly spore counts are conducted regularly
- Completed dental screening training and competency assessment for nursing staff
- Proper maintenance of equipment logs
- Current certifications for anyone taking dental X-rays

- Sharps counts are conducted and logged properly
- Peer reviews are current on the dentist

2.2.15 Pharmaceutical Operations

NCCHC Standards J-D-01, J-D-02

Wellpath will provide pharmaceutical services in accordance with all applicable laws, guidelines, policies and procedures, and accepted community standards. Our pharmaceutical management program includes formulary and non-formulary oversight; prescribing, filling, and administering of medications; record keeping; appropriate licensure; Drug Enforcement Agency (DEA) management; and the secure and proper storage of all medications.

Pharmacy Provider

Wellpath will partner with Diamond Pharmacy Services to provide pharmaceutical services at the Facility. As our pharmacy vendor, Diamond maintains all necessary pharmaceutical licenses in accordance with state and federal regulations.



Diamond is the nation's largest correctional pharmacy provider, efficiently and accurately filling prescriptions for approximately 700,000 inmates (or 38% of U.S. inmates). With 47 years of experience, Diamond currently provides services in more than 1,700 correctional facilities in 47 states, giving them a comprehensive understanding of federal, state, and local laws and statutes, as well as state Board of Pharmacy rules and regulations.

Diamond offers professional comprehensive pharmaceutical services for all prescription, non-prescription, and intravenous solutions as ordered by all prescribers, as well as clinical management and technology solutions. They offer reliable delivery to ensure continuity of patient care, and their technicians and support personnel establish working relationships with on-site staff.

Pharmacy Savings

Wellpath and Diamond work together to deliver medication to tens of thousands of patients in jails, prisons, and detention facilities nationwide. **As Diamond's largest client, Wellpath receives the industry's most cost-effective and competitive pricing** for pharmaceutical services. Other bidders may propose using Diamond Pharmacy Services; however, our national buying power allows us to receive the deepest discounts in the industry from Diamond—savings we will pass on to the County.



Formulary Management

NCCHC Standards J-D-01, J-D-02

Wellpath has a customized formulary for the Facility to optimize efficacy and total cost of care. We will review the formulary regularly for updates. Immediate formulary changes, with the approval of the site Medical Director and facility administration, are incorporated with the release of new medications, when clinical information identifies new safety concerns, and when generic products become available.



Utilization is important for formulary management and development. Diamond reviews and provides evidence-based literature review articles specific to areas that may affect utilization and the cost-effectiveness of medications. Diamond also monitors pricing fluctuations daily. Diamond pharmacists receive daily price change reports for review, as well as weekly information from their wholesaler when new medications are expected to receive generic approval and pricing. The site Medical Director will review this information when assessing a medication's formulary status.

Formulary Exceptions

NCCHC Standard J-D-02

Intake staff will ask arrestees whether they were undergoing medical, dental, or mental health treatment before arrest. If so, Wellpath staff ask for the names of the arrestee's current medical providers and contact them to obtain information about current treatment and medications to facilitate continuity of care.

Wellpath staff will ask individuals who report medication use at intake to complete a Release of Information (ROI) form, allowing the medication verification process to begin. A prescribing clinician (physician or mid-level provider) reviews verified medications and continues them as clinically indicated. We will expedite medications for life-threatening or serious chronic diseases by obtaining them from a local backup pharmacy, Deliver It Pharmacy.

Wellpath bridges non-formulary medications for up to 30 days to prevent a break in care and allow the clinician time to review the necessity of the medication. Given the nature of jails as short-stay facilities, we typically continue verified medications (formulary or not) throughout the duration of a patient's stay, unless the patient reports side effects, poor response to the regimen, or a different medication is deemed more clinically appropriate.

To continue a non-formulary medication after the initial bridge order, the prescribing clinician requests continuation of the medication (to include a brief clinical rationale for the medication) through the Wellpath non-formulary medication request process. The Regional Medical Director reviews non-formulary requests daily. The HSA is notified if a non-formulary medication is ordered without the non-formulary request form.

Non-Formulary Reviews

NCCHC Standard J-D-02

Diamond will enforce Wellpath formulary compliance by providing pharmacist reviews of non-formulary medication requests. They will screen orders for formulary compliance daily and provide consultation on formulary alternatives that best meet our clinical and cost containment goals. The program works as follows:



The form is titled "Formulary Exception Request". It contains several sections for data entry, including fields for patient information, medication details, and a section for the prescriber's request and justification. The form is designed to be filled out by a healthcare provider to request an exception for a non-formulary medication.

- The pharmacy receives an electronic order for a non-formulary medication.
- A clinical formulary specialist reviews the patient's profile and determines if formulary alternatives can be substituted without compromising patient care.
- The pharmacist's review is sent to the Wellpath clinician with a recommendation for a formulary alternative, a request for additional information, or a recommendation to submit the non-formulary request in accordance with our policy.

Generics, Narcotics, and Off-Label Use

Wellpath clinicians will prescribe generic medications whenever possible, unless they provide justification for a brand name request. We will track the percentage of generic versus non-generic use and provide statistical reports on all areas of pharmaceutical management.

Wellpath only administers non-narcotic medications to patients in general population. Patients requiring narcotic medications are housed in the appropriate non-general population for the period the medications are prescribed for appropriate medical oversight. In keeping with Wellpath policy, providers use sleep and pain medications only when clinically indicated.

Wellpath policy discourages the dispensing of medication (prescription or OTC) for any off-label use.

Pharmacy Reports

NCCHC Standard J-D-01

Wellpath offers the most dynamic and complete reporting capabilities in the correctional industry, including customized pharmaceutical reports for the Facility. Analysis of monthly utilization data, formulary management data, expenditures, clinical metrics, poly-pharmacy prescribing data, and overall prescribing habits of clinicians is crucial for properly managing budgetary dollars, ensuring proper care, and optimizing patient outcomes. Statistical data is accompanied by graphs illustrating usage and trends.

Wellpath offers statistical reports for pharmaceutical management that simplify analysis of monthly usage, expenditures, prescribing habits, and trends. Basic, ad hoc, requested, and customized reports are available if requested.

Ordering of Medications

NCCHC Standard J-D-02

Wellpath documents all prescription orders in the patient's medical record. Healthcare staff can order medications electronically or by phone. Emergency prescriptions can be submitted through Diamond's STAT line, which is staffed and available 24/7/365. Diamond's contacts the backup pharmacy and arranges for the emergency prescription.

Dispensing of Medications

NCCHC Standard J-D-02

A licensed/registered pharmacist (L/R P) oversees dispensing in accordance with state regulations. Wellpath will use a local backup pharmacy, Deliver It Pharmacy, for dispensing medications during evening and weekend hours, with a local L/R P as needed.

The pharmacist will screen for interactions, allergies, and other potential issues (such as non-formulary medications) that may need to be addressed with on-site staff before dispensing an order. The pharmacist will also screen each patient's medication profile to ensure safe and therapeutic medication administration. The pharmacist will contact the facility before filling expensive prescriptions so on-site staff can consider alternatives or request a smaller supply if a patient is scheduled for release.

Before dispensing an order, the pharmacist will check for the following:

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

The pharmacist will alert healthcare providers before dispensing an order for a prescription with an inappropriate strength, duplicate orders with existing medications on a patient profile, potential drug-drug interactions deemed to be clinically significant and medically justifiable, and any medication that triggers a documented allergy in their pharmacy system.

Packaging and Labeling

Medications are labeled, packaged, and dispensed in compliance with all current local, state, federal and department laws, rules, regulations, and provisions, or in their absence, the best practices of the trade and industry standards. Medications are dispensed in blister card packaging in the quantity ordered. Blister cards provide a specialized filling system for safe, efficient, and cost-effective medication distribution and allow credit for returns of many medications.

Receipt and Availability of Medications

NCCHC Standard J-D-02

Wellpath will provide pharmacy services seven days a week, with scheduled shipment of medications six days a week and local backup pharmacy services available on Sundays, holidays, and in urgent or emergent situations.

Emergency Medications

NCCHC Standard J-D-02

Wellpath does not delay medications for life-threatening conditions, mental illness, or serious chronic conditions. Our list of “no-miss” medications facilitates this process following intake. We make every effort to verify and administer these medications before the next scheduled dose. We obtain and administer other medications within 24 hours.

Wellpath expedites orders for emergency medications. We will use a local pharmacy, Deliver It Pharmacy, to supply emergency prescription medications and as a backup for pharmacy services. Diamond has national contracts with most chain pharmacies and negotiates with pharmacies outside their network. If there is an immediate need to initiate medication, we obtain it from the backup pharmacy as quickly as possible.

Over-the-Counter Medications

NCCHC Standard J-D-02

Wellpath has established a protocol to provide over-the-counter (OTC) medications to patients upon consultation with the site Medical Director and facility administration, who jointly approve patient access to non-prescription medications. Approved OTC medications are reviewed annually.

KOP Medications

NCCHC Standard J-D-02

The Keep on Person (KOP) program at the Facility gives patients immediate access to medications for an urgent medical need. It also helps reduce the amount of time healthcare staff spend administering medications. The KOP program includes educating patients about their medications and promote their responsibility for maintaining their state of health.

KOP medications are limited to those that may be safely self-administered with the proper education, such as inhalers, eye drops, ear drops, ointments and creams. The list of allowable KOP medications requires approval by facility administration. We only give KOP medications to patients who need immediate access to them, based on their chronic care treatment plan (e.g., inhalers for those with severe COPD or severe, persistent asthma).

Healthcare staff will instruct patients on the proper use of KOP medications. Patients must sign an informed consent statement acknowledging that the medication is only to be used as clinically directed, must be kept on person at all times, and must be presented for inspection to any officer or healthcare

employee who requests to see it. Patients found to be using KOP medications improperly or abusing the privilege may have their KOP privileges limited or rescinded, based on a physician's review.

Storage and Security of Medications

NCCHC Standards J-D-02, J-D-03

Wellpath will store medications and pharmaceutical supplies in a secure, locked area approved by facility administration. The medication room and all cabinets are locked at all times when healthcare staff are not present. Patients do not have access to any medication other than those administered by a qualified staff member.

Wellpath stores bulk supplies separately, taking inventory weekly and when they are accessed. We maintain inventory records to ensure adequate control.

Consulting Pharmacist Review

NCCHC Standards J-D-01, J-D-03

A consulting pharmacist will review the on-site pharmaceutical program regularly according to state regulations. The pharmacist's review is documented and a report is provided to facility administration. The Quality Improvement Committee will review the report and establishes corrective action plans for any problem areas.

The consulting pharmacist provides the following services:

- On-site audits consistent with NCCHC guidelines
- Quality assurance reviews
- Written reports identifying any areas of concern and/or recommendations for improving pharmacy services
- Inspections of stock medication storage areas
- Assurance that all medications are stored under proper conditions
- Removal and replacement of all compromised or expired medications
- Participate in meetings of the Pharmacy and Therapeutics Committee

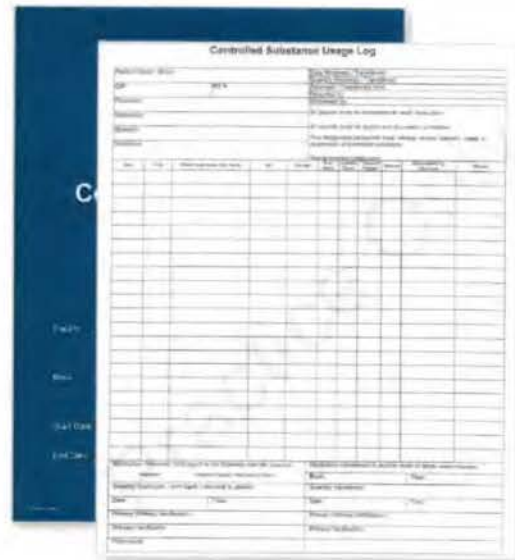
Controlled Substances Accountability

NCCHC Standards J-D-01, J-D-02

Wellpath stores a limited supply of controlled drugs on site under the control of the responsible physician. The HSA or designee monitors and accounts for these medications. Controlled substances must be signed out to the patient at the time they are administered. As an additional level of control, Wellpath treats certain medications that are not controlled, but have the potential for misuse or abuse, as controlled substances.

Wellpath trains nursing staff on the proper procedures for administering, storing, counting, and logging controlled substances. Class II, III, and IV drugs are counted at the end of each shift by one staff member going off duty and one coming on duty. Any count discrepancies must be reported immediately and resolved before the outgoing staff member leaves.

Wellpath maintains a clear “paper trail” to comply with DEA guidelines for accountability and record-keeping. Counts are tracked in a Controlled Substance Log Book with an index and numbered pages to ensure a perpetual inventory and usage record. Controlled Substance Log Books must be retained on site for five years.



The image shows a 'Controlled Substance Usage Log' form. It includes fields for Patient Name, DOB, Sex, Race, and Ethnicity. There are checkboxes for 'Is Patient on Medication?' and 'Is Patient on Controlled Substance?'. Below these are sections for 'Medication' and 'Controlled Substance' with columns for Date, Time, Dose, and Route. The form is designed for tracking medication usage over time.

Disposal of Pharmaceutical Waste

NCCHC Standard J-D-01

Medications that cannot be returned to the pharmacy (e.g., non-unit-dose medications, medications refused by the patient, and/or medications left by discharged patients) are destroyed. Wellpath disposes of pharmaceutical waste in compliance with federal, state, and local laws and regulations.

Wellpath makes every reasonable accommodation to minimize the quantity of pharmaceuticals destroyed. The HSA is responsible for overseeing, monitoring, and ensuring compliance with the pharmaceutical waste disposal policy.

Wellpath staff place pharmaceutical waste in approved collection containers as soon as possible and complete the appropriate disposal form. We provide RX Destroyer containers, which remain locked in the medication room cabinet.

Wellpath staff ensure that pharmaceutical waste is kept in a secure location. Controlled waste is counted until disposal. All controlled substances are stored in a double-locked area with restricted access and continued counts at each shift until they can be destroyed by authorized individuals.



2.2.16 Medication Services

NCCHC Standard J-D-02

Wellpath has established written systems and processes for the delivery and administration of medications based on the Facility's layout and procedures. Medication passes are tailored to ensure the timeliness and accuracy of the process, including coordination with security staffing and mealtimes to ensure accurate and effective medication administration.

Appropriately state-licensed personnel administer medications, including over-the-counter medications. Our proposed staffing plan provides nursing coverage for medication pass three times daily in general population and more frequently as needed for patients in medical housing or observation, per physician's orders.

Trained healthcare personnel administer medications within 24 hours of physician's order, with urgent medication provided as required and ordered. Wellpath staff educate patients on prescribed pharmacotherapy when it is ordered and document the education in the patient's medical record.

Wellpath provides orientation training and mandatory continuing education regarding medication administration and preventing medication errors. We do not permit the pre-pouring of medications and we monitor the medication delivery process to ensure it does not occur.

Nursing staff observe patients taking medications, especially when Direct Observation Therapy (DOT) is required by physician's order. We also train staff to provide DOT for medications subject to abuse, psychotropic medications, and those related to the treatment of communicable and infectious diseases.

2.2.17 Medication Administration Record

NCCHC Standards J-D-02, J-G-05

Healthcare staff will document medication administration and missed doses in a patient-specific Medication Administration Record (MAR). These records become a permanent part of the patient's medical record. All information relative to a patient's prescription is recorded in the MAR, which includes instructions, injection site codes, result codes, and non-administered medication reason codes. If a patient misses or refuses doses on three consecutive days, or if a pattern is noted, healthcare staff document the refusal and refer the patient to the clinician.

Point of Care Companion

When administering medications, Wellpath nurses use an off-network laptop—the Point of Care Companion (POCC) system—with their medication cart, marking and electronically signing off on the administration of medications.

During medication pass, nurses note in the system if a patient does not receive needed medication for any reason. Once the nurse returns to the medical unit, the laptop is docked and the information from the medication pass is synchronized within CorEMR, so administration records are immediately up to date.

This ability to synchronize data provides increased flexibility for nursing staff by allowing them to use the system in facilities where Wi-Fi or mobile internet connectivity is unavailable. This also allows medication passes to continue even if the facility loses internet connectivity. Since the laptop is battery-powered, loss of power does not affect its use.



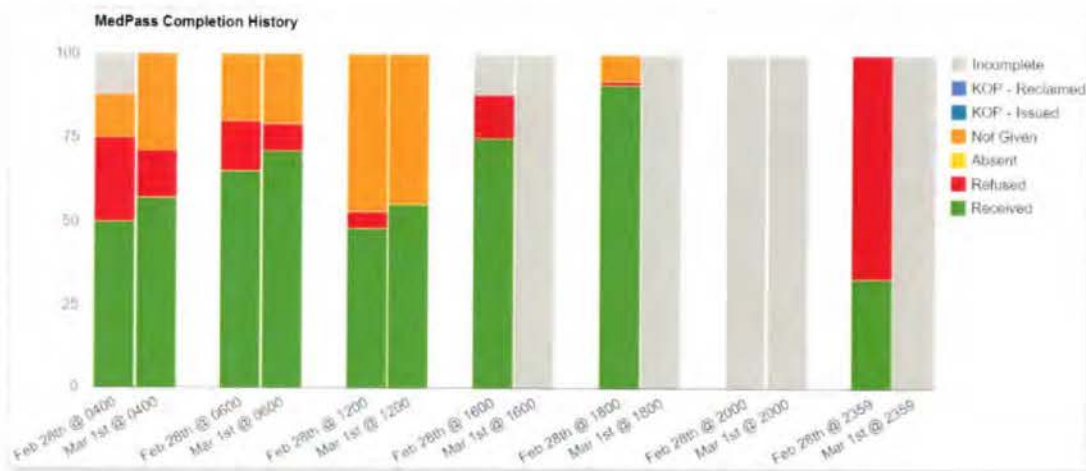
Point of Care Companion

The features and benefits of ordering through this user-friendly software include:

- The ability to order (or reorder) prescriptions or stock orders quickly, through the use of drop-down screens or order refill buttons
- Increased accuracy by reducing transcribing errors and clarity issues that may result from faxed order sheets
- Improved formulary compliance; if a medication is not on the approved list, a non-formulary alert is automatically sent to the prescribing clinician's queue, where the clinician can easily complete the non-formulary request process online; once the non-formulary request is approved, the order is automatically forwarded to the pharmaceutical provider to facilitate expedited ordering
- Over the counter (OTC), stock, and emergency medications are easily initiated and documented as profile medications on the electronic medication administration record
- Time savings through the elimination of paper physician's order sheets, which are no longer needed
- The ability to view patient profiles and determine when a medication was last filled before transmitting the order
- Password-protected access for approved staff to patient profiles, medication orders, and history from any web-based computer located on-site or off-site
- Tracking and documentation of patient allergies and drug interactions
- Immediate notation of exceptions in the patient's medical record, including missed doses, refusals, and complications

Electronic Medication Administration Record

CorEMR has an electronic Medication Administration Record (eMAR) customized for correctional settings. Med pass times are configured by day and generate medication pass prep lists accordingly. Medications may be marked as Received, Refused, Absent, or Not Given within the eMAR. Graphical and detailed MAR reports may be viewed at any time.





Elsa Frost
#zzz

Sex: Female
DOB: 11/15/1900 (Age 220)
Height: 5ft 7in
Weight: 180
Agency: County
Location: Booking

Allergies: PCN, Peanuts

Suicide History: Pregnant: Active Withdrawal

[View Chart](#)

NOW EARLIER ANYTIME

Rec	Ref	Abs	NG	Medication	Doses	Time	End Date
				ACETAMINOPHEN (TYLENOL) 500MG 1 TAB By Mouth BID	1	0700	
				LISINOPRIL (PRINIVIL-ZESTRIL) 10MG 1 TAB By Mouth QD	1	0700	03/19/2021

Rec	Flow	Time
	Blood Sugar	

Discharge Medications

NCCHC Standard J-E-10

Wellpath will ensure that patients leaving the Facility have an adequate supply (up to 30 days) of required medications to accommodate the transition of care to a community provider and ensure no lapse in care. Many patients are coping with chronic and/or mental illnesses that require daily medication administration. Before these patients are discharged, Wellpath staff will educate them on how to obtain and maintain their medications. We will also provide links to community resources for prescription services.



Wellpath utilizes a method for providing discharge medications by working with an agency called InMedRx. When given sufficient notice of release, we provide prescriptions for patients requiring discharge medications, including psychotropic medications.



Prescriptions are sent to a local pharmacy in InMedRx's network. Wellpath completes a Patient Prescription Eligibility Form, which has the information needed by the pharmacy to bill electronically. The patient provides proof of identity at the pharmacy to obtain their medication.

An InMedRx coverage card is provided with the discharge paperwork for the patient to present at the pharmacy. **Using InMedRx increases the number of patients able to obtain discharge medications and improves continuity of care.**

Sample InMedRx Prescription Benefits Card (front and back)

 	<p>Pharmacist: The patient listed below is eligible for free prescription benefits. Please call the _____ County Sheriff's office at _____ for prescription eligibility information or if the prescription order has not been received.</p> <p>Patient Name: _____</p> <p>Patient DOB: _____</p> <p>Pharmacy: _____</p> <p><i>Reminder: Medications MUST be picked up by:</i> _____</p> <p>For claims processing purposes, contact InMedRx at 202-944-1200</p>
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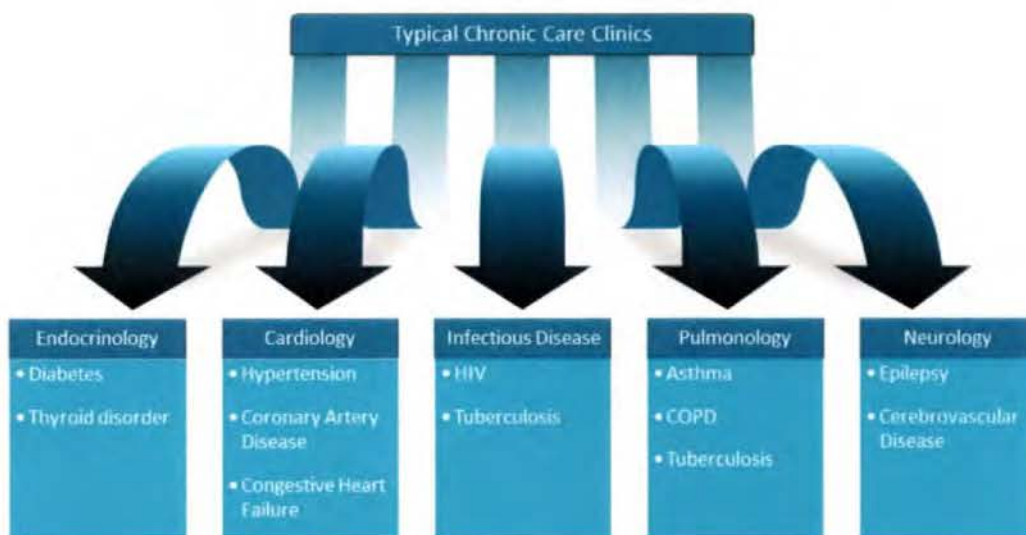
2.2.18 Special Needs and Services

NCCCHC Standard J-F-01

Many patients have special healthcare needs requiring ongoing medical supervision and/or multidisciplinary care. Wellpath's Special Needs Program focuses on the identification, referral, and treatment of patients with special needs, including chronic conditions (e.g., diabetes, hypertension, asthma, seizures, etc.) and communicable diseases (e.g., HIV, tuberculosis, etc.). This focus allows us to manage patient needs before they escalate and require off-site consultation, or result in grievances and litigation.

Wellpath considers individuals with long-term healthcare needs related to chronic conditions or acute medical and/or mental health problems to be special needs patients. This includes patients who are mentally ill, developmentally disabled, and/or at high risk for clinical decompensation. We provide these patients with services that promote health maintenance and health improvement. Wellpath's Special Needs Program also emphasizes patient education to encourage adherence with treatment plans, both during and after incarceration.

Wellpath on-site specialty services and control of off-site costs start with an effective Special Needs/Chronic Care Program





Special Needs Screening

NCCHC Standard J-F-01

Wellpath staff will perform a special needs screening during the intake process and again during the comprehensive health assessment. This screening addresses housing, monitoring, and follow-up for special needs patients. Results are documented on a Chronic Care Referral form in the patient's medical record.

Wellpath staff receive focused training and guidance on interventions based on the results of the special needs screening. If a patient requires ongoing care, we recommend specialty healthcare services, appropriate housing, work assignments, and program participation.

Patients with special needs are identified through self-report, during provider encounters, or by security staff. Self-reported conditions and referrals are entered into the patient's medical record and verified by the medical provider. Referrals from security staff are managed the same as reports made by the patient directly to medical or mental health staff.

The form is titled "Chronic Care Referral Form" and includes the Wellpath logo. It contains several sections for data entry:

- Demographics:** Includes checkboxes for Address, COG/Physician, Contact, Sex, Age, Race, Ethnicity, and Other (specify).
- Medication Verification:** Includes checkboxes for Medication, Last Date Taken, Date Last Taken, and How often (frequency).
- Disposing Agency Name and Phone Number:** Includes checkboxes for Agency, Doctor's Office, Family, and Other (specify).
- Form Completed By:** Includes checkboxes for Patient, Provider, and Other (specify).

Individualized Treatment Plans

NCCHC Standard J-F-01

The physician or mid-level designee will develop a written individualized treatment plan for patients with special medical conditions requiring close medical supervision, including chronic and convalescent care. The plan is based on medical history and physical examination findings. Patients with a mental health special need condition are seen by a mental health clinician who performs an initial mental health special needs assessment and develops an individualized treatment plan. Special needs treatment plans act as a reference for healthcare personnel involved in the patient's care by providing instructions regarding diagnostic and therapeutic interventions, pharmaceutical therapy, special diets, and patient education.

Treatment plans also include short-term and long-term goals and the methods of pursuing them. They include information regarding the patient's disposition, scheduled appointments, housing assignment, ability to function in general population, impact on programming, and frequency of follow-up. They also include medical or mental health instructions to healthcare providers and others involved in the care and supervision of the patient. We will share these plans with the County, as needed, to facilitate housing in the appropriate area of the Facility and ensure proper treatment of patients with long-term and individualized healthcare needs.

Medical special needs patients are typically seen by a physician or mid-level provider every 90 days, or at other intervals when medically indicated. We document this consultation in the patient's medical record and include the date and time of the consultation, the provider's name and title, and new orders for the patient's treatment. Wellpath clinicians determine the frequency of chronic care visits based on

the patient's condition(s) and recommendations from the Wellpath Minimum Standards for Care of Chronic Disease.

Mental health special needs patients are seen a minimum of every 30 days for the first 90 days of placement into the Mental Health Special Needs Program. After 90 days, the mental health clinician may reduce the frequency of each mental health special needs follow-up visit to no more than 45 days. Additionally, the mental health special needs treatment plan is updated at least every 180 days until the patient is removed from the Special Needs Program.

When feasible, treatment plans maintain connections between patients and the community agencies that have been or will be serving them. Wellpath has a long history of establishing connections with local resources to ensure they are ready and willing to accept patients from incarcerated settings.

Chronic Care Management

NCCHC Standard J-F-01

Wellpath will provide a complete chronic disease management program at the Facility that meets NCCHC standards. Our chronic disease management program is designed to reduce the frequency and severity of symptoms, prevent disease progression and complication, and foster improved function. Our multifaceted program includes disease-specific guidelines, clinical decision support tools, and a clinical informatics platform to guide population-based interventions consistent with national clinical practice guidelines for common chronic diseases such as:

- Hypertension
- Diabetes
- Asthma/COPD
- Seizure disorders
- Sickle Cell Anemia
- Substance use disorder
- Mental illness
- Coronary artery disease
- Chronic (non-cancer) pain
- Tuberculosis
- HIV
- Hepatitis
- Renal disease and dialysis

Chronic Care Guidelines

Wellpath practitioners follow disease-specific, evidence-based clinical decision support protocols to ensure continuity of disease management at the initial and follow-up patient encounters. Practitioners also use a set of established minimum standards for the care of chronic disease to guide their treatment decisions.

Wellpath has developed clinical monographs that represent the best practices our practitioners use when treating specific medical conditions. The purpose of the monographs is to reduce variability in the care provided to groups of patients with similar healthcare needs.



Topics include:

- Asthma
- Benzodiazepine Use
- Cataracts
- Cirrhosis
- COPD
- Diabetes
- Emergency Contraception
- GERD
- HIV
- Hyperlipidemia
- Hypertension
- Kidney Disease
- Measles
- Seizures
- Sickle Cell Anemia
- Thyroid Disease
- Tuberculosis
- URI
- Withdrawal from Alcohol and Benzodiazepines
- Wound Closure

Adherence to Chronic Care Guidelines

The Wellpath CQI program includes screens such as Continuity of Care – Chronic Disease, Patients with Special Health Needs, and Special Needs Treatment Planning to ensure adherence to appropriate chronic care guidelines.

To ensure we provide optimal patient care, our clinical staff and leadership stay abreast of peer-reviewed research and developments, including emerging therapies, with a focus on their potential use in correctional medicine. We will assess new and emerging therapies and proposed care innovations for feasibility and appropriateness in the correctional setting throughout the term of the contract and in collaboration with the County. All such proposed therapies will be based on recommendations from the Centers for Disease Control and Prevention and/or other recognized authorities on the management of chronic diseases.

Additionally, our staff have access to UpToDate® Clinical Knowledgebase and Support Tools, an online medical resource for evidence-based clinical reference and patient education materials. UpToDate provides valuable medical references and client-specific patient education materials on multiple topics. UpToDate helps improve patient care by allowing providers to print educational materials for discussion during patient encounters.



UpToDate covers more than 10,000 topics in 22 medical specialties and includes more than 9,000 graded recommendations; 27,000 graphics; and 380,000 Medline abstracts, as well as references and a drug database. Content is updated every weekday. This instant availability of continuously updated, evidence-based healthcare information helps medical staff provide the highest quality care.

Topics available within medical specialties in UpToDate include:

- Medical Calculators
- Adult Primary Care
- Allergy & Immunology
- Cardiology
- Critical Care
- Drug Information
- Emergency Medicine
- Endocrinology
- Gastroenterology
- Nephrology
- Neurology
- Hematology
- Hepatology
- Infectious Diseases
- Oncology
- Pulmonology
- Rheumatology
- Surgery
- Internal Medicine
- Geriatrics
- Psychiatry
- Dermatology
- Palliative Care



Chronic Care Tracking

Wellpath will track patients with chronic illnesses on a chronic care roster and report these patients to the County each month. We will maintain a list of chronic care patients that includes the date of intake, the date referred to the chronic care program, date of most recent visit, and date of next scheduled visit. We discuss statistics, such as the number of patients by chronic care diagnosis and number of chronic care patients seen in the clinic by the providers, at monthly Medical Administration Committee (MAC) meetings.

Chronic Care List by Problem



Patient Profile - Chronic Care by Problem

Operational View - Currently Incarcerated Patients Only

Report Description: A list of patients who have chronic care issues. The Operational View shows currently

E - Patients: 56 Problems: 77

REDACTED Jail - Patients: 56 Problems: 77

Patient Name	Age	Patient Number	Booking Number	Housing	County Date	Observed Date	Status	Initial Visit Scheduled	Initial Visit Attended	Last F/O Attended	Next F/O Scheduled
Circulatory - Patients: 10											
I10 Essential (primary) hypertension - Patients: 2											
				83 E 82		11/29/2019	Hide Out				
				21 C 89		9/13/2019	Hide Out				
I11.8 Hypertensive heart disease with heart failure - Patients: 2											
				84 F 82		5/24/2019	Hide Out				
				37 C LOWER		9/24/2019	Hide Out				
I42.2 Cardiac arrest due to underlying cardiac condition - Patients: 1											
				84 C 81		5/1/2019	Hide Out				
I42.9 Cardiac arrest, cause unspecified - Patients: 1											
				84 C 81		12/1/2020	Hide Out				
I47.2 Ventricular tachycardia - Patients: 1											
				84 C 81		12/1/2020	Hide Out				
I48.3 Typical atrial flutter - Patients: 1											
				37 C LOWER		10/11/2019	Hide Out				
I50.23 Acute on chronic systolic (congestive) heart failure - Patients: 1											
				83 D 86		8/12/2019	Hide Out				
I50.9 Heart failure, unspecified - Patients: 1											
				89 E 84		11/25/2019	Hide Out				
I67.1 Cerebral aneurysm, nonruptured - Patients: 1											
				28 A LOWER		11/26/2019	Hide Out				
I69.30 Unspecified sequelae of cerebral infection - Patients: 2											
				89 E 84		3/3/2020	Hide Out				
				34 F LOWER		9/13/2020	Hide Out				
Dental - Patients: 1											
K05.32 Chronic periodontitis, generalized - Patients: 1											
				83 F 86		2/1/2020	Hide Out				
Ear - Patients: 1											
H60.91 Unspecified otitis externa, right ear - Patients: 1											

2.2.19 Female Health Needs

NCCHC Standards J-D-08, J-E-09

Wellpath understands the special healthcare needs of female patients and has established a program that addresses these needs following NCCHC and ACA standards. We train medical staff on the specialized aspects of care required. The Wellpath female health program at the Facility will include:

- Determining menstrual and gynecological problems at intake
- Determining pregnancy status by history and/or pregnancy testing, as appropriate
- Identifying activity capabilities for pregnant and non-pregnant female patients (medical clearance for work as appropriate)
- Screening for sexually transmitted diseases found at a significant frequency in the population
- Pap smear testing following the recommendations of major medical societies, modified to reflect individual patient medical needs
- Breast cancer screening following recommendations of major medical societies, modified to reflect individual patient medical needs (and with consideration to anticipated duration of confinement)
- Providing health education on issues specific to the female population
- Providing contraceptive counseling and/or medication as medically necessary
- Access to obstetrical and gynecological specialists

2.2.20 Mental Health Services

NCCHC Standards J-F-03, MH-E-05, MH-E-06, MH-F-01, MH-F-02, MH-G-01, MH-G-03, MH-G-06

Mental health issues are a growing concern for all correctional facilities and a key focus for Wellpath. We take a proactive approach to the mental health needs of our patients. Our evidence-based mental health programming targets specific presenting issues and addresses recidivism risk factors.

The Wellpath Mental Health Program emphasizes identification, referral, and treatment. Our program is based on established policies, procedures, and protocols that provide consistency of care for each patient. These policies and procedures address the provision of mental health services, including patient assessment and evaluation, suicide prevention, special needs treatment plans, referrals for care, ongoing care, and discharge planning.

We begin by seeking out community records, verifying psychotropic medication regimens, and securing continuity of care from intake to release. We initiate referrals for psychiatry services, Special Needs Program enrollment, placement in identified mental health units, and group programming, including substance abuse treatment services when needed. If mental health issues cannot be safely addressed in the correctional setting, we recommend referral to a more intensive mental health program.



"Wellpath continues to demonstrate they share our vision of setting the standard for the American Jail. With Wellpath's leadership, we are now an NCCHC mental health accredited jail... Finding a medical service partner interested in exploring non-traditional ways to expand operational effectiveness, improve officer safety and facility security as well as ensure the highest regard for the well-being of inmates is critical."

Capt. William Teel
Las Vegas Metropolitan Police Department, NV

Goals of the Wellpath Mental Health Program

Wellpath's Mental Health Program has several important goals. First is the safety of the incarcerated population. We assess all individuals for risk of self-harm at intake and monitor them throughout incarceration. The risk of self-harm is higher during intake and episodes of substance withdrawal, which tend to coincide in a correctional environment, but can also relate to fluctuating internal and external factors throughout incarceration. Therefore, proactive approaches to training, referral, intervention, treatment services, and CQI studies reinforce our mental health and suicide prevention programs.

Another important goal is to identify individuals with mental health issues that may interfere with their functioning, the operation of the facility, or both. We work to quickly stabilize individuals who present with chronic mental health conditions and emphasize continued stability throughout incarceration. Our intake process quickly identifies actively symptomatic conditions, allowing rapid referral for a more in-depth evaluation of mental health needs.

Program Oversight

Wellpath uses a collegial communication structure when caring for mental health patients. Chief Psychiatric Officer, Cassandra Newkirk, MD; Chief Psychiatrist for Corrections, Johannes Dalmasy, MD; Vice President of Mental Health for Local Government (West) Nicole Taylor, PhD, CCHP, will oversee our mental health program for the County. They will work directly with the on-site mental health and psychiatric staff and coordinate with local providers to deliver standards-adherent mental health programming tailored to the Facility's specific needs.

The Wellpath mental health team will meet regularly to discuss common issues and problems and develop joint solutions to provide the best possible care. Our Mental Health Program for the County will include on-site visits and structured conference calls to discuss and improve established policies. We have clearly defined what is required to trigger a cross-team communication event and hold our team accountable for ensuring this happens whenever necessary.

Mental Health Staffing

NCCHC Standard J-C-07

Wellpath will provide a sufficient number of mental health care providers to deliver mental health care and supervision. Qualified Mental Health Professionals (QMHPs) provide on-site assessment and treatment of patients with clinical symptoms. A licensed psychiatric provider will deliver psychiatric care, including crisis evaluations, psychiatric assessments and referrals, medication and side effects



monitoring, and any required follow-up or discharge planning. A licensed psychiatric provider will be on call 24/7.

The Vice President of Mental Health, Nicole Taylor, serves as clinical liaison to Wellpath's corporate Mental Health Program. Ms. Taylor ensures that our mental health staff follow current policies and procedures and adhere to applicable standards. Ms. Taylor will visit the Facility regularly to assist with chart reviews, follow-up for corrective action plans (CAPs), training, and performance monitoring.

Mental Health Screening and Evaluation

NCCHC Standards J-E-04, J-E-05, MH-E-02, MH-E-04, MH-E-09, MH-E-10

Everyone benefits when a proactive plan of care begins as soon as possible after admission to a correctional facility. This can be an overwhelming and distressing time for incoming patients. Establishing contact and rapport with a mental health provider quickly can help ease concerns and fears by letting the patient know help is available and to establish and/or maintain stability throughout incarceration.

The early identification process begins at intake to meet emergent, urgent, and routine mental health needs. The Wellpath receiving screening includes specific and structured questions to determine the patient's:

- Risk of suicide
- History of or current psychotropic medication use
- History of psychiatric hospitalization
- History of outpatient mental health treatment
- Current mental status

The mental health component of the receiving screening takes place as individuals enter the facility. Intake staff refer patients who are mentally unstable, suicidal, or urgently need clinical attention to mental health staff for further evaluation, or to an outside facility for acute care when indicated. We refer patients with non-emergent mental health needs to mental health staff within the appropriate timeframe.

Individuals who screen positive for mental health concerns are referred to a Qualified Mental Health Professional (QMHP) for an initial mental health assessment, which takes place as soon as possible, but no later than 14 calendar days after admission. We prioritize mental health assessments for patients reporting current mental health treatment in the community at intake, as well as those experiencing mental health distress. We quickly refer individuals displaying acute symptoms (e.g., appearing psychotic or suicidal) for emergency assessment by a QMHP and ensure their safety pending assessment.

Wellpath mental health assessments comply with NCCHC standards and include a structured interview with inquiries into:

- A history of:
 - Psychiatric hospitalization and outpatient treatment
 - Substance abuse hospitalization
 - Withdrawal seizures
 - Medical stabilization for withdrawal from Substance Use Disorder and outpatient treatment
 - Suicidal behavior
 - Violent behavior
 - Victimization
 - Special education placement
 - Traumatic Brain Injury (TBI)
 - Sexual abuse
 - Sex offenses
- The status of:
 - Psychotropic medications
 - Suicidal ideation
 - Drug or alcohol use
 - Drug or alcohol withdrawal or intoxication
 - Orientation to person, place, and time
- Emotional response to incarceration
- Screening for intellectual functioning

The mental health assessment includes a risk assessment and a formal mental status examination. If ongoing evaluation and treatment are required, the QMHP establishes a treatment plan, schedules the patient's next session, and makes the appropriate referral to a medical and/or psychiatric provider. The QMHP completes a Suicide Watch Initial Assessment and starts suicide watch for patients at high risk of self-harm. We transfer those with acute mental illness requiring mental health services beyond the facility's scope to an appropriate healthcare facility.



Sample Mental Health Initial Assessment Form

The image displays five sample pages of the 'Mental Health Initial Assessment' form. The pages are arranged in two rows: three on top and two on the bottom. Each page features the Wellpath logo and title at the top. The forms contain various sections for data entry, including patient demographics, history of present illness, past psychiatric history, medical history, and clinical findings. Some pages include checkboxes for specific symptoms or conditions, while others have open text areas for detailed notes. The forms are designed to be comprehensive and structured for mental health professionals to use during an initial assessment.

Crisis Management

NCCHC Standard J-B-05

Wellpath places individuals demonstrating self-injurious behaviors and increased suicide risk on constant observation until mental health staff can evaluate the patient and determine an appropriate disposition. We assign patients requiring close monitoring to designated spaces, such as padded safety cells, as a protective measure.

Mental health staff will perform scheduled rounds and evaluations for patients in observation or isolation. They visit patients in crisis regularly to provide support and evaluate their risk, collaborating with the psychiatrist if a patient's medications need to be adjusted or reassessed. These visits also help Wellpath effectively manage medical services utilization, since individuals in crisis often seek medical attention when they need psychological help.

Mental health staff will collaborate with security staff daily to review the status of patients on constant and staggered observation. A QMHP determines whether the patient needs to stay in observation or return to general population and documents the decision in the patient's health record. Only a QMHP can step down patients from close observation to a staggered suicide watch and subsequently to other housing.

Mental Health Care Requests

NCCHC Standard J-E-07

Patients can request mental health care at any time. Wellpath staff will triage all mental health care requests and provide mental health services that meet or exceed NCCHC standards. We will document all requests and review them for urgency and intervention required. The triage nurse will initiate referrals for patients needing consultation with a mental health provider. A QMHP will respond to mental health care requests and conducts patient encounters in accordance with policy.

Wellpath staff will review and triage referrals daily and respond to them according to clinical judgment and NCCHC standards. We will provide adequate staffing to allow for timely mental health evaluations to stabilize individuals with mental health issues as quickly as possible and initiate medication. Mental health staff will manage urgent referrals without delay and the psychiatrist follows up as needed. Medical staff will address urgent referrals received after hours and contact the on-call psychiatrist, as needed.

Treatment Planning

NCCHC Standard J-F-01

Once safety and stability issues are addressed, the focus shifts to treatment planning and programming designed to move beyond maintenance and address risk factors for recidivism. Key elements to address include cognitive thinking patterns that support criminal behavior, trauma histories, and lack of adequate community support (e.g., housing and other resources).

Our individualized approach to treatment planning addresses each patient's needs throughout their incarceration. Treatment plans include the care to be provided, the roles of the members of the treatment team, and discharge planning.

Wellpath understands the importance of proactive treatment planning and has learned that the delivery of proactive patient care in the correctional setting produces several long-term benefits, including:

- **Fostering patient trust** – Our patients feel important and heard. We provide care with respect and understanding. We familiarize ourselves with each patient's specific situation and needs, including communication with previous care providers to ensure continuity of care while fostering patient trust.
- **Reducing patient emergencies** – We understand our patients and do not wait for an emergency to occur. Instead, we provide active treatment that ensures we understand and meet each patient's needs. Proactive treatment planning and care reduces emergencies that can result from a reactive approach to patient care.

- **Identifying relevant trends** – We conduct CQI audits to evaluate our programs and to help us anticipate issues before they occur. We systematically review the quality of our mental health services throughout the year and take actions to improve processes and outcomes based on these reviews.
- **Improving the level of services being offered** – We work closely with facility administration to develop site-specific improvements where possible.

2.2.21 Suicide Prevention

NCCHC Standards J-B-05, MH-G-04

Suicide is a leading cause of death in jails, and Wellpath takes suicide awareness and prevention very seriously. Our Suicide Prevention Program is based on policies and procedures that address education, screening, intervention, special needs treatment plans, and ongoing care. The program includes enhanced staff training, assessment using the Columbia-Suicide Severity Rating Scale (C-SSRS), and monitoring of individuals at increased risk for suicide. Mental health staff will support patients who have been affected by suicide and help them adjust to the situation.

Enhanced Staff Training

NCCHC Standards J-B-05, J-C-04, J-C-09

Wellpath training for healthcare staff includes an intense focus on suicide prevention and emphasizes communication and teamwork between healthcare and security staff. We train both healthcare and security staff to recognize when a patient needs emergency mental health care, based on questions asked at intake, identified risk factors, and warning signs of self-harming behavior. **We have included Wellpath Suicide Prevention Campaign videos for both adults and juveniles on each submitted USB drive. Please note that these videos are confidential and proprietary.**

Ongoing and frequent staff training on suicide prevention is central to the Wellpath Suicide Prevention Program. Suicide prevention training is mandatory during new employee orientation and also is reinforced at least twice a year for all Wellpath employees and subcontractors. We use best practices and continuously review the available literature to maximize the effectiveness of the training we provide, treatment resources we use, policy requirements, and associated procedures.

As part of our continual focus on suicide prevention and awareness, Wellpath's Regional Directors of Mental Health distribute monthly suicide prevention bulletins to the company.

Suicide Risk Factors

Previous attempt(s)
(self, family member, friend)
Impulsivity
Substance abuse/withdrawal
Negative interactions/bad news
Mental illness
Mood/behavior changes
Hopelessness/helplessness
Recent or upcoming court date

Suicide Prevention is Everyone's Responsibility

Be intentionally aware
Encourage communication
Ask questions
Make the patient your priority

Sample Monthly Suicide Prevention Bulletin

Mental health professionals (MHPs) have an extremely important and sometimes very difficult and daunting responsibility to assess and assist patients to prevent suicide. There are a number of risk and protective factors that must be considered when determining risk. Risk factors are characteristics of a person or his or her environment that increase the likelihood that he or she will die by suicide, whereas protective factors are personal or environmental characteristics that help protect people from suicide.

Example risk factors:

- Prior suicide attempt
- Family history of suicide
- Feelings of hopelessness
- First incarceration
- Intoxicated or detoxing
- Mental health history

Example protective factors:

- Family/social supports
- Reasons for living
- Future oriented/goals
- Self-esteem
- Coping skills
- Problem solving skills

MHPs assist potentially suicidal patients to identify risk and protective factors while working collaboratively with them to identify coping skills, reasons for living, and a plan for when he or she may be feeling suicidal. Being able to document successful collaborative safety planning may benefit the employee and company with regards to liability, and provides the patient with an individualized plan aimed to prevent suicide.

Identification of Risk

NCCHC Standard J-B-05

Wellpath uses an integrated approach to mental and behavioral health care that prioritizes suicide risk identification, management, and reduction. Certain times during incarceration pose a higher risk of suicide, such as within the first 48 hours of incarceration, after major sentencing, during detoxification and the week following detoxification, and after learning of a significant loss or bad news. Although all suicides cannot be predicted or prevented, we believe that the risk and the prevalence of suicide can be reduced through proper screening, training, management, follow-up, and treatment.

Effective mental health screening at intake is a critical component of the Wellpath Suicide Prevention Program. Because it is crucial to identify this risk immediately, the Wellpath receiving screening tool contains an enhanced suicide potential screening. Positive screens, which reflect acute symptoms of mental illness or ideation of danger to self or others, trigger an immediate referral to Wellpath mental health staff. Individuals having suicidal ideation or appearing to be in crisis receive an urgent referral to mental health staff. Patients with a history of mental illness and/or mental health treatment also trigger a referral to mental health staff.

Upon referral, mental health staff will complete a mental status exam and assess the patient's risk level. When a patient is determined to be at risk of self-harm, mental health staff complete a Suicide Watch Initial Assessment and start a suicide watch. The Wellpath Suicide Watch Initial Assessment uses the C-SSRS to aid in determining whether a patient is at risk for suicide, assess the severity and immediacy of the risk, and gauge the level of support needed.

Patients may report suicidal ideation to medical, mental health, or security staff. Security staff and family members also may express concerns. Regardless of the source, Wellpath staff will promptly follow up on and document these concerns. Wellpath staff take all self-harm behavior and comments



seriously and act upon them immediately. We place patients believed to be a suicide risk on suicide watch until they can be evaluated by mental health staff and ultimately cleared by a qualified mental health professional.

Sample Suicide Watch Initial Assessment

The image shows three sample forms for a Suicide Watch Initial Assessment for Mental Health (MH). The forms are organized into sections for patient information, assessment questions, and clinical notes. The first form is a 'Sample' form, the second is a 'Suicide Watch Initial Assessment for MH' form, and the third is a 'Suicide Watch Initial Assessment for MH' form with a different layout. The forms include sections for patient information, assessment questions, and clinical notes.

Referrals and Monitoring

NCCHC Standard J-B-05

Patients demonstrating self-harming behaviors, those identified as suicide risks, and those who appear to be in crisis receive an urgent referral to mental health staff for immediate evaluation. Wellpath recommends placing these patients on constant observation until mental health staff can complete the evaluation and determine an appropriate disposition. We increase monitoring appropriate to the level of risk. Wellpath suggests the following options for those at risk for self-harm:

- **Continuous Watch** – Constant observation of the patient
- **Staggered Watch** – Direct observation of the patient at staggered intervals not to exceed 15 minutes

Mental health staff will monitor patients on suicide watch daily and create a treatment plan for follow-up care. When a patient is released from suicide watch by a licensed mental health professional, mental health staff follow up based on a clinical algorithm, starting within one-to-three days post-suicide watch and consisting of two-to-three follow-up visits. Mental health staff will administer the C-SSRS to assist in supporting the clinical decision to discontinue the watch. They will also develop a treatment plan addressing suicidal ideation and its re-occurrence and provide additional follow-up care, as needed.



Sample Suicide Watch Daily Assessment/Discharge Assessment for Mental Health

The image shows three overlapping sample forms for 'Suicide Watch Daily Assessment/Discharge for MH'. The forms are from Wellpath and include sections for patient information, assessment questions, and discharge instructions. The forms are titled 'Suicide Watch Daily Assessment/Discharge for MH' and 'Columbia Suicide Severity Rating Scale'.

2.2.22 Medically Supervised Withdrawal and Treatment

NCCHC Standard J-F-04

Wellpath will provide medically supervised withdrawal management services on site in accordance with applicable standards of treatment. Patients undergo medical stabilization for withdrawal management to minimize the risk of adverse symptoms and the need for off-site treatment.

Wellpath trains healthcare and security staff to recognize the signs and symptoms of withdrawal and safely manage patients experiencing them.

We will also provide security staff with Quick Facts for Intoxication and Withdrawal to help them quickly decide if medical intervention is needed.

The image shows two overlapping 'QUICK FACTS' and 'INTOXICATION AND WITHDRAWAL' forms. The forms provide information on symptoms of intoxication and withdrawal, and quick facts for medical intervention. The forms are titled 'QUICK FACTS' and 'INTOXICATION AND WITHDRAWAL'.

Wellpath's Withdrawal Management Program and Policies incorporate the following:

- **Receiving screening** – Identifying of those at risk
- **Observation and monitoring** – Monitoring and assessment tools to ensure the necessary treatment as quickly as possible
- **Treatment** – Following American Society of Addiction Medicine (ASAM) national practice guidelines

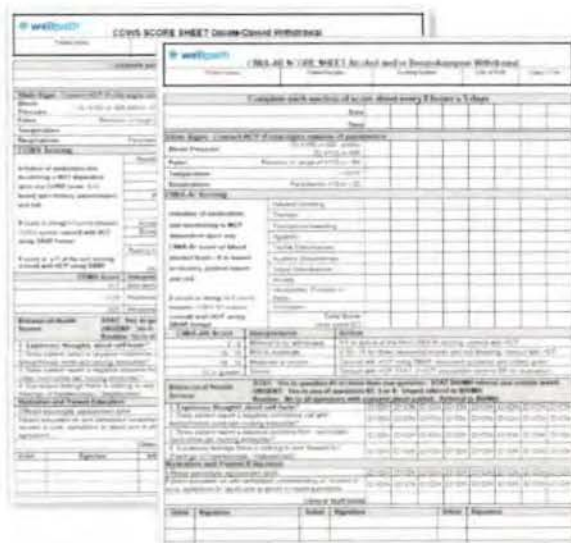
Receiving Screening

Many individuals arrive at intake under the influence of drugs or alcohol requiring some degree of withdrawal. Intake staff ask all arrestees about types of substances used, time of last usage, frequency and amount of usage, length of time using, and side effects experienced during past withdrawals. Our standardized receiving screening form evaluates all arrestees for signs and symptoms of withdrawal or serious intoxication, including:

- Anxiety and agitation
- Disorientation
- Visual and auditory disturbances
- Nausea and headache
- Tremors
- Paroxysmal sweats
- Elevated pulse, respiratory rate, and blood pressure

Individuals who report alcohol and/or drug dependence or identified as being at risk for withdrawal receive a more in-depth assessment. Wellpath staff complete this assessment using the Addiction Research Foundation Clinical Institute Withdrawal Assessment for Alcohol – Revised (CIWA-Ar) and/or the Clinical Opioid Withdrawal Scale (COWS).

These evidence-based tools help nursing staff assess the severity of withdrawal symptoms based on the patient's behavior or responses to questions. Medical providers also use the CIWA-Ar/COWS tools to gauge how patients respond to medications administered to stabilize withdrawal symptoms.



The image shows two overlapping forms used for assessing withdrawal symptoms. The top form is the 'COWS SCORE SHEET Opioid-Dependent Individuals' and the bottom form is the 'CIWA-Ar Score Sheet Alcohol-Dependent Individuals'. Both forms contain sections for patient information, assessment questions, and a scoring table.

Arrestees who have the potential of withdrawal from alcohol based on frequency, duration of drinking and history, or current experience of symptoms are started on CIWA protocol and receive their first dose of Librium within four hours. If an individual is receiving medication-assisted treatment (MAT) in

the community, healthcare staff verify treatment and contact the MAT provider for orders. Arrestees who show signs of opioid withdrawal are started on COWS protocol.

Observation and Monitoring

NCCHC Standard J-F-04

When a patient is considered a high risk for withdrawal, intake staff contact the physician/mid-level provider on duty or on call to determine whether placement in observation is indicated. Healthcare staff will monitor patients at risk for withdrawal throughout the medical stabilization process.

Healthcare staff will monitor patients experiencing withdrawal from alcohol, opiates, or benzodiazepines for at least five days, or longer if deemed necessary by the provider. They assess patients undergoing withdrawal monitoring three times daily and when requested by facility staff. Assessments include CIWA/COWS checks to determine the level of withdrawal. Scores are calculated at each assessment to determine appropriate patient intervention, as well as the success of treatment provided.



The form is titled "Substance Withdrawal - Exam Form". It contains several sections for patient information, including name, date of birth, and medical history. There are checkboxes for various symptoms and signs of withdrawal, such as "Nausea", "Vomiting", "Diarrhea", "Sweating", "Tremor", "Anxiety", "Insomnia", "Headache", "Fever", "Chills", "Pupils", "Heart rate", "Blood pressure", "Respiratory rate", and "Oxygen saturation". There are also sections for "Assessment" and "Treatment" with checkboxes for "CIWA/COWS", "Nursing", "Physician", and "Mental health". The form includes a table for "Vital Signs" with columns for "Date", "Time", "Temp", "Pulse", "BP", "RR", and "SpO2". There is also a section for "Mental Health" with checkboxes for "Suicidal thoughts", "Homicidal thoughts", "Paranoia", "Hallucinations", "Delusions", and "Mood swings". The form ends with a section for "Signature" and "Date".

The assessment also includes a short mental health screen for thoughts of suicidality, hopelessness, or recent bad news. If a patient gives positive answers to any of these questions, healthcare staff will immediately notify mental health staff and place the patient on suicide watch. Wellpath takes this proactive approach since withdrawal is a risk factor for suicide and suicide attempts.

Electronic CIWA/COWS Checks

Wellpath staff will complete and document CIWA/COWS checks in CorEMR using the Wellpath Point of Care Companion (POCC). The POCC allows healthcare staff to complete and document medication passes and "treatment passes" at the point of care.



Wellpath staff will add an order for CIWA or COWS protocol in the patient profile in CorEMR, automatically adding the required assessment schedule to the patient's orders. It also creates a Treatment Administration Record (TAR) for documenting each ordered check or treatment.

During medication pass with the POCC, nursing staff administer an initial CIWA/COWS assessment or a subsequent CIWA/COWS check. A screen with a med pass summary and treatment pass summary shows medications and protocols that must be administered at a specified date and time.

The nurse completes and documents ordered protocol assessments at the point of care and administration of required medications during the treatment pass. The POCC automatically calculates the patient's CIWA/COWS score and identifies further actions needed.

After the nurse returns to the medical unit, the medication pass data automatically synchronizes with CorEMR and the completed protocol is added to the patient's TAR. CorEMR also shows the patient's score trend from all CIWA/COWS checks.

Treatment

NCCHC Standard J-F-04

Wellpath has developed an order set for clinicians to use when managing and treating withdrawal symptoms. The order set is based on best practices for determining the medication to be used, starting dose, and dosing frequency. It establishes the minimum amount of medication needed to treat patients going through withdrawal, allowing for real-time use for most patients. If a patient does not respond as expected to the medication, the clinician will develop an individualized treatment plan.

Discharge Planning Services

As requested by the County, the Wellpath staffing plan includes two FTEs of Discharge Planner time to assist in assessment for re-entry services to connect discharged patients with community providers, as needed, for medical, mental health, and substance use follow-up. Typical duties include:

- Coordination with the appropriate contact regarding referrals to community-based providers, including HIV, housing, vocational, education, and other re-entry support service providers.
- Communication with the Salvation Army, Probation and Parole, etc.
- Initiating (when appropriate) and attending community-based case management meetings, which may include representatives of mental health, family support, or other specialized service agencies.
- Assisting patients with the completion of discharge paperwork and applications for Medicaid, social security, and veteran's benefits when applicable.

2.2.23 Infectious Disease Prevention and Control

NCCHC Standards J-A-06, J-B-02

Wellpath has a written infection control policy to ensure a safe and healthy environment for patients, staff, and visitors at the Facility. The policy includes recommendations from the Centers for Disease Control (CDC) for infectious disease diagnosis and treatment. Oversight includes medical care, monitoring, and case management of patients with HIV/AIDS, hepatitis C (HCV), and other infectious diseases.

The primary drivers of effective infection control policies, procedures, and guidelines are **Identification**, **Prevention**, **Diagnosis**, and **Treatment**. The Wellpath infection control program aims to effectively control the occurrence and spread of communicable diseases by maintaining compliance with universal precaution procedures. We ensure employees have access to appropriate cleaning and personal protective equipment and we train them on general sanitation issues and preventing the transmission of bloodborne pathogens.

The goals of the Wellpath infection control program are to:

- Identify individuals at risk for infectious diseases
- Monitor and report infectious diseases among patients and staff
- Promote a safe and healthy environment through regular inspections, education, communication, and role modeling
- Survey patients from their entry into the facility
- Provide timely, effective treatment when an infectious disease is identified
- Administer vaccinations to minimize the spread of infectious diseases
- Protect the health and safety of patients and staff through appropriate isolation precautions
- Establish effective decontamination techniques for cleaning of medical equipment and contaminated reusable items
- Provide safe means of disposal for biohazardous waste and used needles and sharps
- Implement standard precautions to minimize the risk of exposure to blood and bodily fluids
- File required reports in a manner consistent with local, state, and federal laws and regulations
- Establish and maintain a good working relationship with the local health department, the community, and the facility in matters related to preventing infectious diseases
- Train staff on all facets of the infection control program
- Monitor the effectiveness of the infection control program through ongoing quality improvement data collection and statistical reporting

We expect to reach these goals through our commitment to early identification from surveillance of potential and actual occurrences of infectious disease. Intake staff ask arrestees about their history related to infectious or communicable diseases and ensure complete clearance before their assignment to general population. Those at risk for spreading a communicable disease are segregated from the general population.

The Wellpath clinical team addresses the control of all infectious diseases. For specific diseases, Wellpath staff consult the UpToDate® clinical knowledge base and CDC guidelines for the latest protocols and coordinate with Fort Bend Health and Human Services as needed. Wellpath provides training and education to healthcare and security staff on the latest precautions for handling patients with communicable diseases.

Wellpath uses our Care Management system to customize a monthly report of patients diagnosed with an infectious disease. The report includes the patient's name and identification number, the date of service, the patient's disposition, and the infectious disease diagnosis. Clinic logs and statistical data are maintained by the HSA, who also schedules and completes appointments using the Care Management system.

Collaboration and Reporting

Wellpath helps local health departments meet their goals of promoting health and well-being in the community while preventing the spread of disease. As part of our infection control program, we educate patients, identify and treat those infected with or exposed to contagious diseases, and maintain a collaborative relationship with health departments. We work closely with local health departments on significant emerging public health events impacting the community.

Wellpath will collaborate with the Fort Bend Health and Human Services on communicable disease screening, continuing medical surveillance, case management, reporting, and patient referral in the community. We will immediately report highly infectious communicable diseases to the Fort Bend Health and Human Services, per local regulations. As HSA, Durelle Cardiff is primarily responsible for reporting incidents to public health officials; however, all Wellpath staff are trained on the notification process to ensure timely reporting if Ms. Cardiff is not on site.

Our on-site healthcare team will closely monitor and promptly communicate with facility administration, the Fort Bend Health and Human Services, and hospitals or other off-site service providers if a patient that was recently treated or will be treated at their location is diagnosed with a communicable disease. The HSA, in conjunction with the HSA, will manage, report, and record these incidents and implement appropriate educational programs to prevent future occurrences.

Public Health Events

Wellpath is vigilant in addressing infectious outbreaks and pandemic events, like the current COVID-19 pandemic. As in any crisis, we proactively prepare for such events by initiating protocols and developing a plan of action to keep pace with any potential situation as it may evolve. Our primary concern is for our patients, staff, and partners in a crisis. We routinely partner with local health departments to stay abreast of developing crises in our communities.

We understand that, unlike other potential catastrophes, a pandemic outbreak may result in dramatically reduced staffing levels. We will work to ensure that key employees are available to carry out essential functions following appropriate procedures. The Wellpath Regional Medical Director, in consultation with facility administration, will determine guidelines for prioritizing the delivery of healthcare based on the severity of an outbreak and rates of absence.

Coronavirus/COVID-19

NCCHC Standard J-B-02

Wellpath will work diligently to prepare the Facility for the arrival of patients and others with coronavirus disease 2019 (COVID-19). We are following recommendations from the Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO). We will also work closely with public health authorities across the country. Where vaccines are available, we are offering them to our staff and patients.

Wellpath's primary goals during the COVID-19 pandemic include:

- Preventing the spread of COVID-19 through supplemental screening at intake
- Prompt testing, identification, and isolation of patients with possible COVID-19
- Care for patients with confirmed or suspected COVID-19
- Initiation of COVID-19 emergency procedures in the event of an escalating outbreak, such as requiring the use of masks, practicing safe distancing, and postponing outside contact, as possible
- Monitoring and managing potential staff exposures
- Effective communication and collaboration within the facility, with the client agency, and with local public health authorities

To this end, Wellpath has taken the following key actions:

- **Wellpath COVID-19 Executive Task Force** – We have in place an executive-led, multi-disciplinary COVID-19 Task Force—a team of operations, clinical, and other leaders from our organization. The Task Force meets regularly and works to ensure our sites have the information and resources they need to manage the situation.
- **COVID-19 Emergency Preparedness Checklist** – This has been implemented at all Wellpath sites. It includes staffing contingency plans; ongoing monitoring, reporting, and tracking of potential and confirmed cases; medical supply management; and supplemental intake screening procedures.
- **Wellpath Clinical Leader Huddles** – Wellpath clinicians lead conference calls with our Home Office and field-based clinical and operations leaders to share information, provide guidance, and field questions. Key participants include Clinical, Nursing, Procurement, and Human Resources.
- **Partner Webinars** – These periodic Zoom sessions provide our clients with a COVID-19 update from Wellpath executive, clinical, operational, and procurement leadership, as well as our correctional partners or other guest speakers, who share information on best practices, clinical updates, and status of supplies and personal protective equipment.

Wellpath has also developed a comprehensive, publicly accessible COVID-19 resource portal (<https://wellpathcare.com/covid-19-resources>) to share important information and updates. Topics covered in the portal include but are not limited to:

- Preventing the spread of COVID-19
- Promptly identifying and isolating patients with possible COVID-19
- Infection control practices
- Sample staffing plans to address various situations
- Guidance for healthcare workers exposed to COVID-19
- Interim risk assessment and public health management
- COVID-19 management procedures
- Testing information
- Isolation guidance
- Pharmacy updates
- Pandemic plans
- Screening forms

Sharps and Supplies

NCCHC Standard J-B-09

Wellpath instructs new employees on handling sharp instruments, utensils, and supplies. Needles, syringes, and other high-risk items are secured in locked areas and signed out when used. Sharps are inventoried at each change of shift. Each employee is responsible for ensuring count accuracy and cannot take a coworker's word when conducting sharps counts. Used sharps are considered biomedical waste and are discarded in a leak-proof, puncture resistant container designed for this purpose.

Example of a Sharps Inventory Sheet

Date	Patient Name	Nurse Signature	Time	Insulin Syringe	TB Syringe	21g Butterfly	22g Butterfly	21g Vacutainer	22g Vacutainer	18g Intracath	20g Intracath	22g Intracath	24g Intracath	Huber Needle	3cc syringe 25g X 5/8"	3cc syringe 22g X 1-1/2"	18g 1" Needle	20g 1" Needle	22g 1" Needle	Razors	#10 Scalpel	#11 Scalpel	#12 Scalpel	Suture Removal Kit	Staple Removal Kit

Biohazardous Waste Removal



Wellpath has a national contract with Stericycle for the disposal of biohazardous and infectious waste. Stericycle is a leader in the medical waste industry and specializes in

biohazardous waste disposal. Through the services of Stericycle, Wellpath collects, stores, and removes infectious waste and sharps containers following state and federal regulations.



Biohazardous waste disposal is governed by policy and procedure and includes proper containment, housing, and disposal. Stericycle provides red biohazard bags for waste disposal and biohazard boxes for bundling and disposal. Wellpath controls the proper disposal of sharps using disposal containers.

Wellpath will work with Stericycle and the County to maintain a regular pickup schedule. Pickup frequency is based on volume and storage space availability. The HSA will maintain pickup tracking forms on site. Wellpath staff will follow standard precautions to minimize the risk of exposure to blood and body fluids of potentially infected patients.

2.2.24 Health Records

NCCHC Standard J-A-08

Wellpath will maintain up-to-date medical records consistent with NCCHC and ACA standards, facility policies and procedures, community standards of practice, and federal, state, and local law. Healthcare staff are responsible for entering patient information in the individual medical record.

Following the receiving screening, Wellpath staff will initiate a comprehensive medical record that becomes the single source of medical, dental, and mental health information for the patient. Each record provides an accurate account of the patient's health status from admission to discharge, including on-site and off-site care. Medical records minimally contain:



- Patient demographic information (name, number, date of birth, sex, etc.)
- A problem list containing medical and mental health diagnoses
- Patient allergies
- Immunization records, if applicable
- Referral queues to track patient referrals
- Action items to ensure provider orders and documents requiring additional sign-off are addressed
- Date and time of each clinical encounter
- Signature and title of each documenter

Confidentiality of Medical Records

NCCHC Standards J-A-08, J-B-07

Wellpath adheres to laws regarding confidentiality of medical information. We will secure medical records as required by law and other applicable state or federal statutes and regulations. We will maintain records in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health (HITECH) amendment to HIPAA. We train all employees on HIPAA and HITECH during orientation and each year thereafter.

Access to Medical Records

NCCHC Standard J-A-08

Wellpath will manage the security and accessibility of patient medical records in compliance with state and federal privacy regulations. As site Medical Director, Dr. James Davis will approve medical record policies and procedures and defines the format and handling of medical records. As HSA, Durelle Cardiff will control access to medical records to ensure patient confidentiality. Wellpath will maintain each patient's medical record separate from the confinement record and give facility administration access to information needed to determine a patient's security rating, housing assignment, job suitability, etc.

Electronic Medical Records (CorEMR)

Wellpath will use our vendor supported EMR system, CorEMR, at the Facility. CorEMR is a web-based application specifically designed to operate as part of the healthcare delivery system inside correctional facilities. In addition to Fort Bend County, more than 70 Wellpath clients use CorEMR as their complete electronic medical record solution, including:



- | | |
|----------------------|--------------------------------------|
| • Alameda County, CA | • Lane County, OR |
| • Alexandria, VA | • Loudoun County, VA |
| • Berrien County, MI | • Montgomery County, TX |
| • Chesapeake, VA | • Santa Rosa County, FL |
| • El Paso County, CO | • Stanislaus County, CA |
| • Fresno County, CA | • Western Virginia Regional Jail, VA |
| • Howard County, MD | • Worcester County, MD |



CorEMR will interface with the Facility's Jail Management System (JMS), Tiburon, to give medical, mental health, instant access to important healthcare information for each patient. Our advanced technology has created operational efficiencies by giving you the information needed to better manage care.

Wellpath will use CorEMR to collect and analyze health statistics on a regular basis. We have specific protocols, templates, and reports that have been developed for the CorEMR system. These unique features customize CorEMR to obtain additional operational efficiencies. Having this resource on site ensures that the benefits of the CorEMR system are fully realized at the Facility.

The Wellpath IT team has configured CorEMR with accreditation standards in mind. We pride ourselves on enabling standardized configurations in each facility that have been vetted by our internal Steering Committee for best practice. Any additions or changes to the system are presented to the committee, which is comprised of clinicians, HSAs, IT personnel, and Wellpath executives, to ensure continued best practice in all sites companywide. In the event of contractual or county-specific obligations, CorEMR may be further customized at the discretion of the committee.

The following table contains product highlights for CorEMR.

CorEMR Features and Benefits	
Feature	Benefit
JMS, Pharmacy and Lab Integrations	<ul style="list-style-type: none"> Imports patient data from JMS to create an automatic electronic chart with patient's photo and basic demographic information Sends medication orders to your pharmacy provider for shipment or delivery Receives lab results as an optional integration
Technology	<ul style="list-style-type: none"> Simultaneous access by multiple terminals and users within the facility Web-based structure runs on the facility's local network or by a server running at one central location for facilities with multiple locations Wellpath server hosted application within our database
Medical Forms	<ul style="list-style-type: none"> Recreates current applicable medical, mental health, and dental forms to an electronic format Forms can be configured with "triggers" that automatically create actions, such as scheduling a task for the provider with a chronic care condition
Sick Call	<ul style="list-style-type: none"> Uses the standard SOAPE note format for sick call examination Displays patient summary information such as current medical problems and current medication compliance on the sick call module Available actions include completing interview or exam forms, scheduling future appointments, and ordering lab work and medications Receive and store scanned documents and electronic files directly into sick calls

CorEMR Features and Benefits	
Feature	Benefit
Med Pass	<ul style="list-style-type: none"> CorEMR's eMAR was developed entirely in house and specifically for the correctional market Med pass times are configured by day, and a MedPass Prep List is generated accordingly Patient's acceptance or refusal of each dose is recorded; graphical and detailed MAR reports can be viewed at any time System easily accommodates KOP, PRN, injections, and STAT dosing Optional bar code reader integration finds each patient's chart, record med pass compliance, and synchronize data with the CorEMR server Automatically highlights medication expiration dates and refill notifications Body image shows on MedPass to indicate injection sites MedPass Prep List shows meds scheduled for the day in an easy-to-read view Vital signs and blood sugar results can be entered while on MedPass, even when disconnected from the network
Patient Charts	<ul style="list-style-type: none"> Search for a patient's chart by booking number, last name, social security number, or other identifiers Scan and upload patient requests, outside provider visits, or any other non-system documents to the patient's chart Includes a complete historical summary of every action recorded for each patient Flow sheets for vital signs and blood sugar levels can be recorded and logged; other flow sheets include neuro checks, Coumadin log, nebulizer treatments, and more Create "Patient Alerts," such as Suicide Watch or Mental Health Patient
Reports	<ul style="list-style-type: none"> Reports include task reports, prescription (drug by name and patient), prescriptions ordered by date range, medication compliance, refusal, and dosing summary reports, missed doses, infirmary reports, and more
Pharmacy Module	<ul style="list-style-type: none"> Send orders to and receive confirmations from the pharmacy provider Imports the facility's drug list and identifies formulary medication Allows filtering of the drug list by name, analgesic category, form, and other criteria Med Set feature allows users to order a predetermined group of medications rather than individually, such as an alcohol detox protocol
Tasks	<ul style="list-style-type: none"> Includes a robust appointment scheduler that can be filtered by task category (Nurse Sick Call, NP/PA Chart Review, Treatment, etc.), priority, and housing location Tasks and appointments can be viewed by day, week, or month Tasks can be created to recur with a variety of schedules

2.2.25 Wellpath Healthcare Cloud / Telehealth

Telehealth

Wellpath delivers high-quality telehealth services in correctional facilities that maintain the community standard of care. We deliver reliable and cost-effective services using the best people, technology, and practices available. The Wellpath telehealth program offers customized, optimized medical and mental health services on-site regardless of location. Telehealth reduces the expense and risk of transporting patients to off-site specialists.



Wellpath has implemented telehealth clinics for local detention facilities in Orleans Parish, Louisiana, and Macomb County, Michigan, as well as state departments of corrections in Massachusetts, Arkansas, Kentucky, Maine, and Pennsylvania. We routinely deliver medical and mental health services to state, county, FBOP, ICE, and USMS detainees in jails, prisons, and forensic hospitals. Our telehealth services have been well-received by clients, clinicians, and patients alike.

In 2019, Wellpath conducted over 100,000 synchronous audio-video telehealth encounters. In 2020, Wellpath performed more than 165,000 telehealth encounters, providing high-quality remote care to over 250 facilities across 32 states. In 2021, we held more than 180,000 telehealth encounters – even though the Average Daily Population (ADP) for our accounts remained the same.

Wellpath Telehealth by the Numbers	
Description	Number
Wellpath telehealth providers	200+
Telehealth contracts	100+
Facilities using telehealth	250+
States where Wellpath uses telehealth	33
Monthly synchronous audio-video telehealth encounters	10,000+
2021 telehealth encounters	180,000+

The Wellpath Healthcare Cloud – Telehealth and Digital Healthcare Solutions

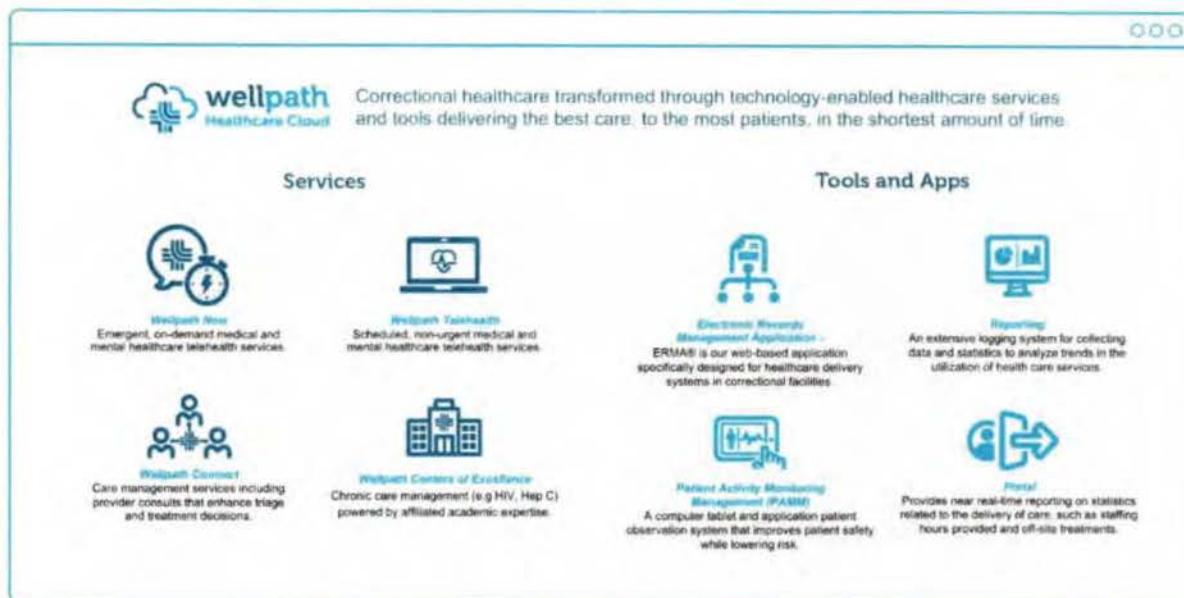
Wellpath has been delivering reliable, cost-effective, high-quality telehealth services in correctional facilities for many years, meeting community standards of care by using the best people, technology, and practices available. In 2020, we revolutionized correctional healthcare with the launch of the [Wellpath Healthcare Cloud](#), a suite of technology-enabled, remote healthcare services and tools designed to enable the delivery of the best care, to the most patients, in the shortest amount of time.



The Wellpath Healthcare Cloud, leveraging the use of telehealth and digital health applications, is a [suite of cloud-based clinical delivery models](#) that is driving quality and care efficiency improvements across the country through an innovative redesign of correctional healthcare. Our proprietary, technologically enabled remote healthcare ecosystem is specifically designed to [optimize on-site care by providing patients specialized clinical expertise as quickly and efficiently as possible](#).



The Wellpath Healthcare Cloud combines videoconferencing with dynamic workflows to deliver real-time emergent care, scheduled care, care management, eConsults, and specialty chronic care through a secure platform. With a simple click of a button, on-site staff have access to expert resources for treatment planning, decision-making, referrals, and long-term care.



Wellpath Healthcare Cloud Services

The Wellpath Healthcare Cloud includes these key services:



Wellpath Now – Emergent and Urgent, On-Demand Telehealth Services for Patients & Providers

Wellpath Now brings on-demand clinical expertise directly to the on-site caregiver and patient at the touch of a button. Wellpath Now is staffed by primary care physicians and advanced practice providers (APPs) as well as specialty consultations by emergency medicine-trained providers for non-life-threatening consults regarding need for emergency evaluation. These acute care consultations for patients in need of emergency evaluation are provided **in an average of just six minutes**. With immediate video-enabled access to seasoned providers, on-site nurses, custody staff, and providers can reduce their reliance on the hospital emergency department and provide better care on site. **Our client partners have experienced a significant reduction in emergency room transfers by using Wellpath Now, and we expect to see this pattern continue in Fort Bend County.**



Wellpath Telehealth – Scheduled, Non-Emergent Telehealth for Patients and Providers

Our proprietary correctional telehealth platform is easy to use and supercharged with Wellpath clinical expertise. It coordinates scheduled patient visits with a broad variety of primary care and specialty providers, including psychiatry, mental health, and APPs to remote rural sites or for after-hour on-call services. Wellpath Telehealth is a force multiplier that provides a drastic increase in healthcare options, experience, and efficiencies to patients, partners, and providers. In 2020, Wellpath conducted more than 165,000 telehealth encounters, providing high-quality remote care to more than 250 facilities across 32 states.

Our multi-specialty telehealth solution can deliver the following care through an established infrastructure of licensed providers:

- Wound care
- Infectious disease
- Dermatology
- Internal medicine
- Family practice
- Psychiatry
- Rheumatology
- Oncology
- Emergency services
- Cardiology
- Endocrinology
- Pulmonology
- Orthopedics
- Nephrology
- Urology
- Gastroenterology



Wellpath Connect – Care Management and Off-site Consults for On-site Providers & Staff

Wellpath Connect offers centralized care management and off-site management services that enhance healthcare triage and treatment decisions. Wellpath Connect gives on-site providers timely access to specialty care through enhanced remote care coordination, while additionally supporting on-site providers with expert clinical consultations via eConsults. **At sites using Wellpath Connect, the percentage of potential off-site specialty referrals able to be managed on site more than doubled, resulting in the near elimination of unnecessary off-site specialty consults and reduced use of agency transport staff.** Simultaneously, our centralized Wellpath Connect care management service is maintaining, or exceeding, quality metrics compared to the traditional model.

Telepsychiatry

Wellpath supplements the on-site behavioral health coverage by using telepsychiatry for assessments and consultations. Telepsychiatry allows patients access to remote specialists and removes potential barriers to accessing psychiatric services. It can also be used during off-hours for consultation purposes to prevent off-site transportation.

The significant and sustained shortage of available qualified psychiatrists continues to drive the demand for telepsychiatry services across the United States. According to *U.S. News and World Report*, the number of total physicians in the United States increased by 45% over the last 19 years, while the number of total psychiatrists has increased only 12%. Meanwhile, during this time, the U.S. population has increased by 37%. A recent survey by the Association of American Medical Colleges revealed that 59% of psychiatrists are age 55 or older and are close to retirement age.

Wellpath uses telepsychiatry as an effective solution to the nationwide shortage of behavioral health professionals. The provision of telepsychiatry does not replace face-to-face patient encounters but acts as an adjunct service to reduce off-site transportation and security costs. Wellpath provides appropriate personnel for telepsychiatry sessions. We offer a broad range of telepsychiatry services and specialties, including but not limited to:

Wellpath facilitated 164,196 telehealth encounters in 2020, more than half of which were for telepsychiatry.

- Intake mental health screenings
- Follow-up mental health assessments
- Medication checks
- Evaluation of suicidal patients
- Referral for commitment
- Off-shift evaluations

2.2.26 Clinic Space, Equipment, and Supplies

NCCHC Standard J-D-03

Equipment

NCCHC Standard J-D-03

Wellpath is responsible for medical, dental, and office equipment required to operate the County healthcare program. We will work with the County to ensure necessary equipment is available and maintain the equipment to perform all contracted services. Materials and equipment comply with American National Standards Institute (ANSI) standards or with the rules of the Food and Drug Administration (FDA) under the Safe Medical Devices Act.

Wellpath will cooperate fully with the County to maintain the equipment requirements for the Facility's medical and dental suites. Additionally, we will provide access to our corresponding national supplier contracts and negotiated volume discounts.

Supplies

NCCHC Standard J-D-03

Wellpath will provide supplies for on-site care and treatment, including laboratory, radiology, medical, and dental supplies. Our supplier, McKesson Medical-Surgical, is the nation's largest distributor of wholesale medical supplies and equipment. **Our purchasing volume gives us the best pricing in the industry for goods and services which benefits Fort Bend County.**



Wellpath has a dedicated Procurement Team working with our vendor partners on a daily basis to ensure we have the right products, at the right time, for the right price available to care for our patients. They also work cross-functionally with the Wellpath Clinical Team to better understand the needs of our patients.

Wellpath uses strict formulary management for medical supplies. We analyze each facility's needs based on acuity and ensure competitive pricing on needed items. For any equipment purchases that are non-formulary, Wellpath uses a "three bids and buy" strategy to competitively price the items.

By leveraging Wellpath's size and scale, the Procurement Team constantly evaluates our vendor contracts based on utilization, SKU rationalization, and supply chain optimization. **Wellpath is the largest customer in the government space of both McKesson and LabCorp, and we analyze our spend by looking at price per patient day and on/off-formulary reporting.** In addition to our strong national contracts, we also leverage group purchasing organization (GPO) relationships specifically for branded medical supplies to ensure competitive pricing.

3 Staffing

Wellpath will provide key staff members who possess the qualifications and experience necessary to effectively manage the County medical program. Our previous experience in your facility gives us a unique understanding of the services required by the contract and the RFP.

The qualifications of our operational and leadership staff responsible for contract oversight, alongside our expertise in providing comprehensive healthcare services for detained populations nationwide, make us uniquely qualified to serve as your medical provider.

The following individuals will support the operation of the County medical program. Each of these team members will ensure that our programming follows the tenets of the emergency contract between Wellpath and the County, as well as Wellpath protocols and industry standards.

- **Regional Director of Operations** – Charles Guffey
- **Regional Vice President** – Cole Casey
- **Vice President of Mental Health Services** – Nicole Taylor
- **Vice President of Partner Services** – Kelly Pribble
- **Director of Partner Services** – John Roth
- **Director of Partnership Development** – C.J. Whitfield

Strengthening communication and operational workflows in the Wellpath program is our experienced Regional Management Team, containing individuals who are already familiar with the County medical program, as well as Texas-specific standards. They will ensure a compliant program that meets or exceeds your needs and expectations.

Following is an overview of the qualifications and experience of key leadership staff who will serve the County and our patients in your custody.

"[Wellpath] leadership is always visiting our facility and auditing their own staff to ensure they provide superior service to the client. Our level and quality of communication with [Wellpath] is extremely high and instills confidence in our partnership... In my opinion, **[Wellpath] is the pinnacle provider available** and we are happy to have them as part of our team."

Dave Adams, Deputy Chief of Support Services
Will County Sheriff's Office, IL

Regional and Local Leadership



Cole Casey – Regional Vice President

Mr. Casey joined Wellpath in 2020 as Regional Director of Operations for Colorado. Prior to joining Wellpath, he spent eight years with DaVita Kidney Care, where he led operations in eight outpatient dialysis clinics serving more than 500 patients with a combined 90 FTEs across Colorado and Nebraska. He also spent two years on DaVita's operation standardization and optimization team, rolling out nationwide company initiatives, streamlining operations standards, and achieving organizational objectives. Mr. Casey is a Certified Professional Coach and a Certified Professional Behavioral Analyst who coaches teams and clients to achieve their maximum potential. He is passionate about learning and applying new leadership theories to help teams succeed while developing leaders to serve those they are entrusted to lead.



Charles Guffey, RN, BS, CCHP – Regional Director of Operations

Mr. Guffey has more than 35 years of experience as a registered nurse working in many specialty areas. He has worked in corrections for 16 years and served as Health Services Administrator (HSA) at the El Paso County Detention Facilities from 2006 through 2015. While still serving as the HSA for El Paso County, Mr. Guffey was promoted to Regional Vice President in 2012, providing operational oversight for adult and juvenile detention facilities in California, Texas, New Mexico, Nevada, and Oregon. As Regional Director of Operations, he has direct multi-facility responsibility for Wellpath client sites in Texas, establishing and maintaining a responsive, consultative working relationship with client administrations.



Nicole Taylor, PhD, JD, CCHP – Vice President of Mental Health

Dr. Nicole Taylor joined Wellpath in 2021 as a Regional Director of Mental Health, bringing nearly 15 years of experience in correctional mental health services. She previously served as a Psychologist, Chief Psychologist, Mental Health Director, and Regional Director of Mental Health for the Arizona Department of Corrections. Since 2015, she has served as an instructor for the National Institute of Corrections in Aurora, Colorado, where she facilitates programs on correctional mental health topics such as crisis intervention teams and managing restrictive housing populations, while providing direction on best practices for correctional systems throughout the United States. Dr. Taylor earned a Bachelor of Arts degree in psychology from Western State College of Colorado, graduating *summa cum laude*. She earned a Doctor of Philosophy degree in clinical psychology from Palo Alto University and a Doctor of Jurisprudence degree from Golden Gate University School of Law.



Kelly Pribble, RN, CCHP, MSM, MOL – Vice President of Partner Services

Ms. Pribble is responsible for the retention of current local government contracts, including overseeing the rebid process and associated contract amendments. She also manages the Partner Services team while working closely with all Home Office departments and local government operations leaders. Ms. Pribble joined Wellpath in 2012 as the HSA in Weld County, Colorado. Since then, she has been a Regional Manager, an Operations Specialist for the Partnership Development team, and most recently the Director of Partnership Operations. Her clinical and operational experience have contributed to her success as she has continued to accept positions of greater responsibility within Wellpath. **In 2013, Ms. Pribble worked with current HSA, Durelle Cardiff, on the Fort Bend contract start up.** Ms. Pribble is an RN and has a Bachelor of Science degree in business and accounting. In 2018, she received a Master of Science degree in management and another in organizational leadership from Colorado State University. Ms. Pribble holds a compact RN license and has been CCHP certified since 2013.



John Roth – Director of Partner Services

Mr. Roth has 20 years of experience in government leadership, public affairs, sales, and business development. Before joining Wellpath in 2013, he was an elected County Commissioner in Texas for eight years. Mr. Roth has worked extensively in state, national, and international government relations, non-profits, community affairs, and sales management. He earned his bachelor's degree in business finance from Texas Lutheran University. **Mr. Roth resides in Texas.**



C.J. Whitfield – Director of Partnership Development

Mr. Whitfield joined Wellpath in 2018. Before taking on his role as Director of Partnership Development, he served as Director of Partner Services and as the Telemedicine Manager for our Clinical Department at the Nashville home office. During his time as Telemedicine Manager, Mr. Whitfield was responsible for telehealth services at 200+ Wellpath facilities in 32 states. While overseeing the Wellpath telemedicine program, Mr. Whitfield collaborated with internal and external partners to drive program growth resulting in 83,000+ synchronous telemedicine patient encounters for 2018. He earned a master's degree in Public Health from the University of Tennessee Knoxville and a bachelor's degree in health and human performance from the University of Tennessee Martin.

Home Office Support

The Wellpath Home Office in Nashville, Tennessee, will directly support our on-site medical and administrative staff at the Facility. Our Home Office support includes a staff of HR professionals to guide all recruiting and hiring, as well as leadership development and clinical education teams to train new and existing staff members. Our finance and accounting teams will provide regular and thorough reporting, and our IT department will ensure that our technology meets the Facility's needs and requires minimal resources.

ROBUST HOME OFFICE SUPPORT



Organizational Structure

Wellpath follows a strategic plan to work efficiently and promote success through enhanced communication. All Wellpath employees function as a team, and every team member expects to be part of the solution. Our corporate organizational structure is simple, effective, and functional by design. It ensures that everyone, from the highest level of management to every member of our line staff, shares accountability and responsibility for our success. As such, the full extent of our company resources will be available to the County.

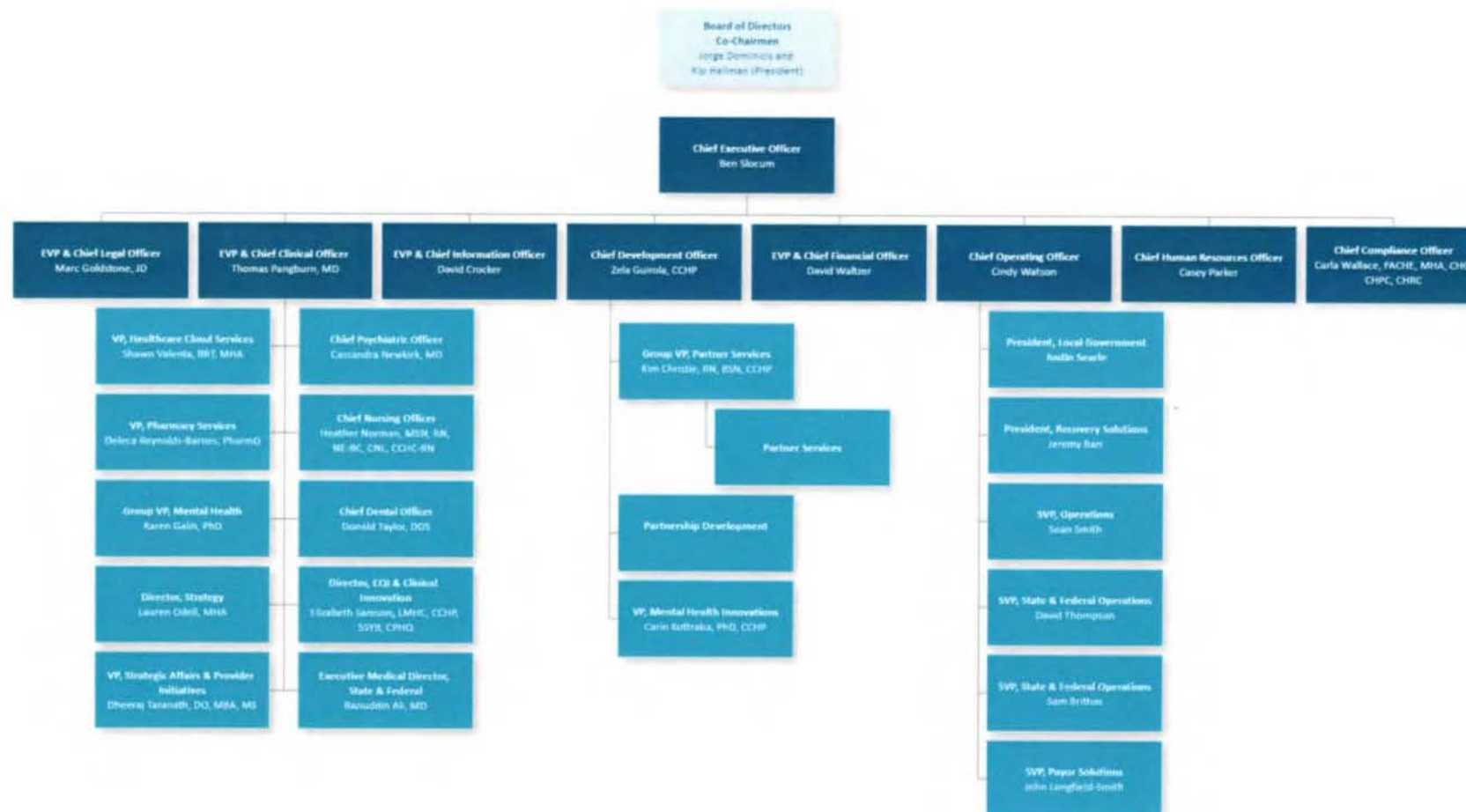
Please see the following company organizational chart.

"I believe that we have built a firm foundation based upon communication, teamwork and trust as it relates to patient care. Wellpath's medical team has always been responsive to issues that we have brought forward concerning operational needs for safety and security."

Ignacio Galindo, Deputy Director
Yuma County Juvenile Court, AZ



Company Organizational Chart



3.1 Proposed Staffing

Wellpath's proposed staffing takes into consideration the staffing pattern specified in the RFP, specific needs of the inmate population, County requests, details of the facility, and a recommended level of providers to efficiently and cost effectively perform all necessary duties and functions.

The Wellpath staffing plan remains consistent in administration and oversight through the Health Services Administrator (HSA), Director of Nursing (DON), Medical Director, and Mental Health Coordinator. The staffing plan has been adjusted from our previous proposal to maximize resources and to best meet the needs of the Facility. We have reviewed our staffing plan with the County and have increased FTEs above what is being provided by your current vendor. We have added the follow FTEs to our matrix:

- **1.0 FTE (40 hours per week)** of Mental Health Professional
- **0.75 FTE (30 hours per week)** of Dentist
- **0.75 FTE (30 hours per week)** of Dental Assistant
- **0.45 FTE (18 hours per week)** of Psychiatrist

We look forward to an opportunity to discuss our plan in detail and make any needed adjustments as the program and our understanding of the services available to your inmate population evolves.



Fort Bend County Texas - 765 ADP									
Day Shift									
POSITION	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hrs/Wk	FTEs
Health Services Administrator	8	8	8	8	8			40	1.00
Administrative Assistant	8	8	8	8	8			40	1.00
Medical Director	2	2	2	2	2			10	0.25
Nurse Practitioner/PA	8	8	8	8	8	8	8	56	1.40
Director of Nursing	8	8	8	8	8			40	1.00
Registered Nurse	36	36	36	36	36	36	36	252	6.30
Licensed Vocational Nurse	34	32	34	32	32	24	24	212	5.30
Licensed Vocational Nurse (Transport)	8	8	8	8	8			40	1.00
Licensed Vocational Nurse (Pharmacy Manager)	8	8	8	8	8			40	1.00
Medical Records Clerk	8	8	8	8	8			40	1.00
Dentist	8	8	8	8	8			40	1.00
Dental Assistant	8	8	8	8	8			40	1.00
Mental Health Professional	32	32	32	32	32	16	16	192	4.80
Mental Health Coordinator	8	8	8	8	8			40	1.00
Discharge Planner/ Case Manager	16	16	16	16	16			80	2.00
Psychiatrist	8	8		6	8			30	0.75
Psych Tech	24	24	24	24	24	24	24	168	4.20
Total Hours/FTE - Day								1360	34.00
Evening Shift									
Mental Health Professional	8	8	8	8	8	6	6	52	1.30
Total Hours/FTE - Evening								52	1.30
Night Shift									
Registered Nurse	24	24	24	24	24	24	24	168	4.20
Licensed Vocational Nurse	36	36	36	36	36	36	36	252	6.30
Total Hours/FTE - Night								420	10.50
Weekly Total									
TOTAL HOURS/FTE - Per Week								1,832	45.80

3.2 Credentials / Licenses

NCCHC Standard J-C-01

Medical and mental health services will be provided by professionals fully qualified and appropriately licensed, certified, or registered in Texas. Wellpath will ensure that employees and contractors are properly licensed or certified for their positions. We also maintain proof of malpractice insurance for applicable employees.

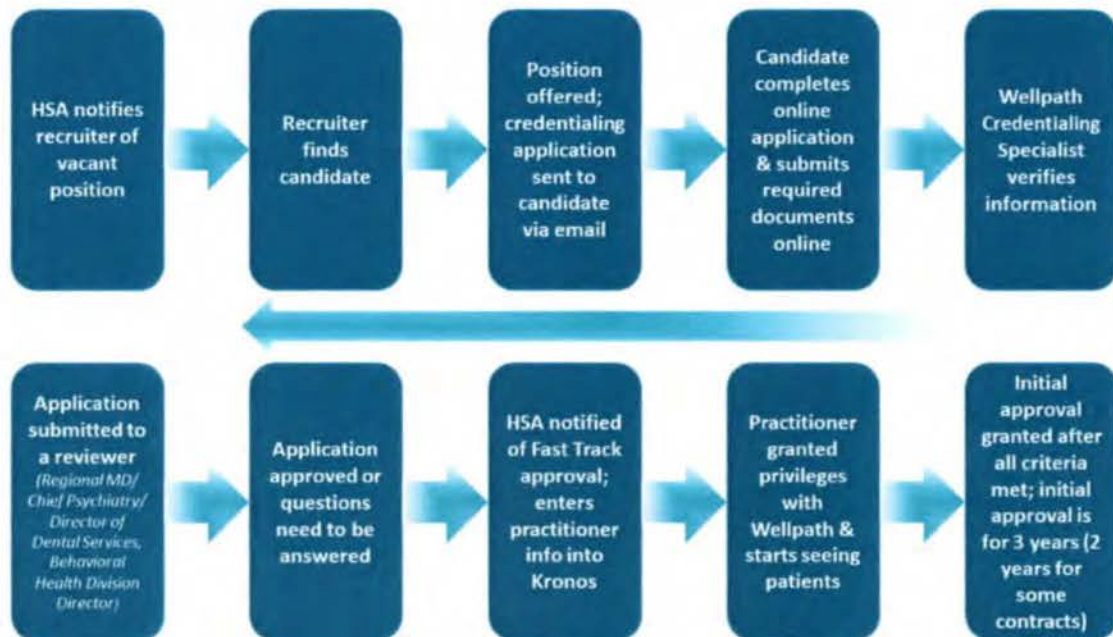
Applicable employees are required to attest to completion of annual training necessary to maintain licenses and/or certifications. Healthcare personnel maintain current first aid and CPR/AED certification and attend appropriate workshops to maintain licensure.

Credentialing and Privileging

NCCHC Standard J-C-01

Wellpath's credentialing process ensures that medical personnel remain current with state licensure requirements. Medical and mental health providers must complete the Wellpath credentialing process before starting work. The credentialing process (described in the following graphic) begins as soon as we have decided to make an offer of employment to the candidate. The Wellpath credentialing department oversees credentialing activities.

The Wellpath Credentialing Process





Interim Privileges (Fast Track)

Wellpath refers to the process of granting interim privileges as “fast tracking.” To initiate fast tracking, the healthcare practitioner (HCP) must submit the following forms:

- Completed credential application
- Copy of current state license (verified)
- Copy of current malpractice certificate of insurance (if not covered by Wellpath)
- Copy of DEA
- Copy of diploma
- Copy of certifications (if applicable)
- Copy of CPR
- Copy of resume

Wellpath credentialing specialists verify the information listed in the following table. Once verifications are completed and files have been submitted, a review committee reviews the HCP’s credentialing file and denies or grants interim privileges. Final initial approval is given after references and other required documentation are submitted and verified. Wellpath requires re-credentialing every three years on the anniversary date of the original fast track credentialing.

Credentialing Criteria and Verification	
Criteria	Verification Method
Valid, current, and unrestricted state professional license	Primary source verification through issuing state
No recorded revocation or limitation of professional license	Primary source verification and National Practitioner Data Bank
Current DEA privileges with no involuntary restrictions	Primary Source verification with Federal DEA
Current state Controlled Substance Registration with no involuntary restrictions (if applicable)	Primary Source verification with the appropriate state agency
Acceptable malpractice claims history	National Practitioner Data Bank
Graduation from accredited medical school (or other professional programs for non-physician professionals)	National Student Clearinghouse (NSC) for Primary Source Verifications or direct verification through the institution if not available through NSC; for Physicians and Physician Associates, a second verification occurs with the American Medical Association (AMA) report
Acceptable completion of an accredited residency program	American Medical Association (AMA) report
Never been subject to medical staff monitoring or special review activity of public record (or reasonably discoverable upon proper inquiry)	National Practitioner Data Bank
No recorded expulsion or suspension from receiving payment under Medicare or Medicaid programs	National Practitioner Data Bank and verification of no reports from the Office of Inspector General (OIG)
No recorded conviction or charge of a criminal offense	National Practitioner Data Bank
No record of disciplinary actions in prior states in which the provider practiced	National Practitioner Data Bank

Credentialing Criteria and Verification	
Criteria	Verification Method
Board certification in a listed specialty (where certification is applicable)	American Medical Association (AMA) report

Personnel Files

Once on-site personnel are selected, Wellpath will provide facility administration with applicable certification and licensing information. Before employment, Wellpath provides copies of background and credentialing information for professional staff, including appropriate licenses, proof of professional certification, Drug Enforcement Administration (DEA) numbers, malpractice insurance coverage, evaluations, position responsibilities, and current resumes.

We will maintain personnel files of Wellpath and contract employees assigned to the Facility at the Home Office and on site. Facility administration have access to these files, which include copies of current registration or verification certificates for licensed practitioners. Wellpath will provide updated data and other relevant information on request.

3.3 Recruitment and Retention

Wellpath uses industry-leading talent acquisition and employee retention techniques to consistently recruit and retain highly qualified employees. Our initiatives include strategic talent acquisition plans, competitive benefits programs, opportunities for professional development, and structured onboarding programs to educate new employees and welcome them to the Wellpath team. Our skilled and responsive Human Resources professionals will facilitate the recruitment, development, and retention of healthcare professionals for the County.

Talent Acquisition

At Wellpath, we have the opportunity every day to improve the health of many of society's most vulnerable and at-risk patient populations. Most healthcare professionals choose this profession to help others and give back to society. We provide them with one of the most meaningful ways to do that.

Wellpath's dedicated Talent Acquisition team of physician recruiters, nurse recruiters, managers, and coordinators source high-potential candidates, screen applicants, and conduct interviews. They use competency-based behavioral interview questions and collaborate with our clinical and operational specialists to make informed hiring decisions.

Wellpath has a dedicated talent acquisition team of Physician Recruiters, Nurse Recruiters, Managers, and Coordinators



Wellpath performs primary source verification of credentials and licensure concurrently during the interviewing and screening process. We then select the best candidates based on qualifications and credentials, experience, references, interview results, and other information.

Recruiting Success Story – Massachusetts DOC

In 2018, Wellpath was awarded the Massachusetts DOC comprehensive medical and mental health contract with 569 FTEs. The previous medical provider had 400+ team members in the Massachusetts market. Following contract award, we learned that they had only about 350 full-time staff who planned to come onboard and of that 350, there were 62.25 FTEs of provider-level vacancies in the previous provider's contract. Prior to the go-live date, we hired five contract recruiters to assist in the recruiting efforts and two full-time recruiters who would stay with the contract once the transition was over. Over the course of six months, we were able to meet the client's expectations of provider vacancies and stabilize the provider staffing.

National Recruiting & Sourcing Tools

Wellpath recruiters are vigilant in their search strategies for talent, especially in a time of low unemployment rates for healthcare professionals. We keep our pipeline full by using effective tools to identify and communicate with candidates. We use strategic media partnerships to evaluate and rotate our posting needs daily. A few of those partnerships include TextRecruit; App Feeder; Indeed; and Connect, a Contact Relationship Management (CRM) program for engaging passive talent.

Wellpath also uses resources that share job postings and information across dozens of recruiting databases and job sites through a single source. Our strategic use of various databases ensures a continuous feed of the newest resumes and candidates into an Applicant Tracking System our recruiters use to find the best candidates in the shortest amount of time.

We invest in technology to promote our open positions and provide industry-leading people analytics. This helps us understand the growing needs in staffing, as well as the outcomes of our efforts. Our Talent Acquisition Team has a full candidate marketing plan using a multitude of resources, including:



- **LinkedIn, Facebook, Instagram** – We use the LinkedIn Employer Page and Career Profile Pages on Facebook and Instagram to organically promote events, hiring incentives, and the benefits of becoming a Wellpath team member. We also run sponsored Custom Audience campaigns via Facebook, which enables us to reach a more refined target audience specific to providers. We are constantly optimizing our social channels to further enhance our online presence.
- **Digital Advertising** – Google and YouTube are the two largest search engines in the world. We advertise with them on a large scale, ensuring that our efforts work together to yield the largest ROI. YouTube ads amplify our Google search performance as shown in this figure.

- Google and YouTube** – We implement search campaigns to drive targeted traffic to our career site and display campaigns to raise branding awareness. Google Remarketing is used to re-engage candidates who visited our site but did not apply. We run YouTube campaigns to take advantage of behavioral learning capabilities. A candidate does not have to search for us or our jobs to see our YouTube ad.
- Indeed Hiring Events and Targeted Ads** – Indeed Hiring Events and Targeted Ads are some of our most powerful tools for start-up facilities as we see great ROI when running for various audiences.
- Text and Radio** – We launch text message campaigns to relevant audience pools to reach candidates on their most used device, their phone. We leverage internet radio via Spotify as opposed to local radio stations, which has proven far more powerful due to machine-learning and tracking capabilities. Spotify has yielded some of our highest performing campaigns.
- Digital Advertising Tools** – We maintain a large and always-growing Talent Community to keep candidates who have expressed interest engaged with our brand, using the leads to deploy email and text blasts. We currently have nearly 200,000 candidates in our Talent Community. We also direct candidates to landing pages to minimize candidate drop-off. Candidates convert at a 3X higher rate when directed to a short form as opposed to a full career site. Finally, we use Bayard Advertising to report on all campaign metrics, allowing us to evaluate successful vs. unsuccessful campaigns, and manipulate those campaigns based on what has proven successful.



Wellpath Candidate Service Level Agreements

Local, regional, and national recruitment campaigns keep a constant flow of qualified candidates within reach to discuss opportunities. In today's market, we know that candidates are best retained if they are contacted and screened in the first 48 hours of their application or contact with Wellpath. We use standardized Service Level Agreements (SLAs) to manage our applicant flow and ensure we process candidates and fill positions quickly.



Wellpath uses the iCIMS Applicant Tracking System (ATS) and Contact Relationship Manager (CRM) to maximize talent acquisition. Hiring managers for the Facility work with a dedicated recruiter to advertise open positions in the ATS. The iCIMS ATS leverages mobile, social, and video technologies to manage the talent acquisition lifecycle. It helps us build CRM talent pools and automates our recruitment marketing, applicant screening, and onboarding processes. The iCIMS CRM contains more than 50,000 pipelined

candidates, with more than 50% in the nursing industry. Our talent acquisition process is illustrated in the following figure.



Internal Recruiting

Wellpath posts job openings internally and externally, giving internal applicants initial consideration for opportunities to help advance their careers. Wellpath employees in good standing can apply for internal opportunities after completing six months in their current role.

If a team member wishes to transfer to another position or location, he or she must validate they have informed their manager of their interest. The hiring manager or regional leadership typically conducts internal candidate interviews. We also welcome input from the County during the interview process for key positions.

Equal Employment Opportunities

Wellpath is an Equal Employment Opportunity (EEO) employer with a thorough diversity policy in place to appropriately guide recruiting and hiring processes. We comply with all provisions of federal, state, and local regulations to ensure that no employee or applicant for employment is discriminated against because of race, religion, color, gender, sexual orientation, genetics, gender identity, marital status, age, disability, veteran status, national origin, or other legally protected status.



Salary and Benefits

Wellpath will offer competitive salaries and benefits to attract and retain qualified staff for the Facility. We conduct local due diligence and salary surveys to ensure that our proposed rates are competitive within the surrounding area and to ensure that staff recruitment and retention efforts are successful. By showing our employees that they are a valued part of our company, we will save the County unnecessary operational expenses and added costs created by turnover.

Our benefits program exceeds market standards and is designed to attract and retain healthcare staff while recognizing the diverse needs and goals of our workforce. Wellpath also promotes retention through:

- Retention bonuses
- Referral bonuses for hard-to-fill positions
- Incremental increases of benefits like vacation and 401k vesting based on length of employment
- Annual salary increases based on performance and qualifications
- Monetary assistance and time off for CMU/CEU programs related to specific skill sets
- Employer tuition reimbursement program, which can be used for licensure renewal
- Malpractice insurance coverage for practitioners
- Company-sponsored gatherings
- Discounted offerings for theme parks, restaurants, movie theaters, and other activities

Salary and Wage Analytics

Wellpath has invested in economic modeling data that allows us to evaluate each market based on real-time salary and market analytics. We rely on a multidisciplinary team of experts across disciplines—including clinical, compensation, and recruiting—to analyze and agree on our wage rates. This team examines market supply, validates compensation data, and reviews the competition from companies advertising for the same positions in the market. These tools give us better insight to know where people live versus where they work, and how many actual jobs are being filled every month.

Employee Benefits Program

Wellpath offers a comprehensive, flexible benefits program that focuses on health and well-being. New hires, transitioning employees, and current staff can sign up for Wellpath benefits through our online and mobile enrollment system, which streamlines communications, education, forms, and all other benefit-related options. They also have the option of calling our Benefits Service Center to speak with someone who can answer questions and help them enroll.

Wellpath offers three medical plan options with a robust pharmacy program, two dental plan options, vision, and company-paid life insurance, as well as additional insurance options for employees, spouses, and children. We also offer short-term and long-term disability plans to offset income loss in case of an emergency, as well as various supplemental insurance programs that pay staff directly for illness or accidental injury. Additionally, we offer a wellness program that encourages employees to take steps toward healthier lifestyles.



Wellpath's medical plans include **AmWell**, a telehealth program offering 24/7 access to a physician via phone, tablet, or computer. Primary care visits are covered by Wellpath at no charge to the employee. Specialty services such as mental health, nutrition, lactation support, and psychiatry are also available with a nominal co-pay.

Affordability is a top priority for all Wellpath benefit programs. We work closely with our vendors to ensure that we provide competitive benefits at affordable rates, and **we subsidize a larger portion of the total cost of healthcare** for staff with lower income. We also offer a health savings account option with an annual employer contribution that allows employees to make pre-tax contributions to pay for doctor's visits, medications, and other health services.

Financial wellness is another important aspect of retention. Wellpath offers a traditional 401k with a discretionary company match, a Roth IRA, and a college tuition reimbursement program.

Employee Retention

Wellpath understands the importance, for continuity of care, of providing full-time staff members. Consistent staffing improves the quality of patient care and minimizes issues that can lead to grievances and lawsuits. We focus on prudent staff deployment to promote high efficiency, fewer mistakes, and improved morale.

Professional Development and Tuition Assistance

Wellpath has a dedicated Organizational Development Department offering a full range of professional development opportunities. We are dedicated to our employees' continued development and long-term professional satisfaction to create lower turnover, reduced costs of replacement and training, and strengthened team spirit through mutual respect and recognition of each individual's contributions.

Wellpath also offers tuition assistance to employees to advance their skills and their career. Additionally, Wellpath employees and their children who have graduated high school can apply for Wellpath-sponsored college scholarships each year. We awarded seven \$2,500 scholarships in 2021.

Employee Survey Responses

"Working for and with [Wellpath] has been a great opportunity for me. I enjoy everything the company does for the sites as a whole as well as on an individual basis. They continue to help us grow and develop as a group through effective communication, patience, and understanding."

"When I started in corrections, I worked for [a competitor]... I know [Wellpath] has a vested interest in my success and personal well-being. I have the tools needed to do my job, and through CORE and startups I have been able to expand my knowledge and believe my opinion and talents are important. **This is the company I want to retire from.**"



Nurse Outreach and Support

Wellpath has adopted several outreach techniques for our nursing professionals, including advanced training opportunities and open communication through the Nurse Channel, an online resource for Wellpath nurses. In addition to providing useful information, the Nurse Channel also recognizes Wellpath nurses with a record of outstanding job performance upholding our high standards for patient care.

Employee Recognition

Wellpath attracts and retains skilled and competent personnel through several employee incentives, but incentives alone do not build loyalty. Friendly company culture also affects the long-term satisfaction of our employees. The primary reason for dissatisfaction in the healthcare field is feeling undervalued. At Wellpath, each person is treated with respect, incentivized and rewarded for dedication and performance, and viewed as a valuable asset of our team.

The Wellpath employee recognition program enhances our ability to retain healthcare professionals throughout the life of a contract. Our program encourages positive behavior and builds a sense of pride in each team member. By recognizing our top-performing employees, we can influence employee morale, which positively impacts the quality of care we provide.

Each Wellpath location incorporates employee recognition into its local operations. The primary program is the 5H Award, which represents the values by which Wellpath strives to exist: **H**unger, **H**onesty, **H**ard Work, **H**umility, and **H**umor. We encourage the recognition of employees whose contributions echo these values. Each Wellpath location or territory creates its committee to recognize employees monthly and quarterly.

Wellpath presents monthly and quarterly recognition awards based on attendance, customer service, teamwork, and overall performance. Each year, the leadership team of each Wellpath business unit chooses one individual from each of the quarterly winners to be nominated for the President's Award. All quarterly award winners and nominees, and President's Award winners, are recognized on the Wellpath website and eligible for a monetary award, certificate of recognition, and a gift.

Flexible Scheduling

When possible, Wellpath allows flexible scheduling to meet employees' needs. We employ part-time and per diem personnel to provide coverage for scheduled absences and to supplement full-time staffing needs.

Wellness Program

Wellpath appreciates the importance of health and well-being for our employees. We encourage our team members to participate in a Wellpath wellness program that includes exercise programs, healthy eating tips, and other initiatives that promote a healthy lifestyle. Various Wellpath sites offer incentives or contests to encourage employee participation in programs that create a healthier staff, including smoking cessation and weight control programs.

Employee Assistance Program

Wellpath offers an Employee Assistance Program (EAP) through Cigna. All Wellpath employees and their household dependents have 24/7 access to a range of free services and educational materials to help with a variety of life/work challenges and crisis management. Assistance is available through a confidential phone call or referral to a specialist for up to three sessions of in-person support. The Cigna EAP also provides discounted services and programs that promote health and wellness.

Dare to Care

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



We started Dare to Care in 2010 in response to the flooding that devastated the City of Nashville. Since its inception, **the Dare to Care fund has provided \$1.3 million in financial assistance** to more than 800 employees and their families in their time of need. In 2020, Wellpath team members contributed \$390,000 to the Dare to Care fund. In 2021, Wellpath team members contributed \$322,000 and Wellpath paid out \$202,000 in grants.



Wellpath partners with the Community Foundation of Middle Tennessee to manage all funds and award gifts. The application process is confidential and requests are reviewed by an impartial and experienced third party. Dare to Care is funded through employee donations and matching contributions from Wellpath.

3.4 Orientation for Health Staff

NCCHC Standard J-C-09

Wellpath will provide appropriate orientation and training for all healthcare personnel. The lives and health of our patients depend on the knowledge, practical skills, and competencies of the professionals who care for them. We will begin with the identification, validation, and recruitment of the very best people, then we orient them to our company culture and operations through an established onboarding process. We will also train correctional staff in medical issues as requested.

Wellpath Orientation

Wellpath will provide a thorough orientation program for all healthcare staff. The program includes comprehensive orientation curricula, schedules, appropriate forms, tracking and recordkeeping, and required documentation to support evidence of orientation of personnel. Each new employee has online access to Wellpath's *New Employee Orientation (NEO) Curriculum*, which outlines required onboarding steps for all healthcare staff, as well as additional required onboarding steps for specific positions.

Wellpath's orientation program is presented in three phases. New staff members complete our onboarding process and then receive ongoing skills/knowledge assessment through our Performance Enhancement and Leadership Development programs. All new employees participate in each of the



three phases. The frequency and focus of each training phase are determined by the position and learning capacity of individual employees.

Phase 1: Onboarding

Critical to the future success of each new employee is his or her initial experience with the organization. To ensure a smooth transition, we will offer a three-part onboarding process: orientation, on-the-job training, and follow-up.

Virtual onboarding is available to all Wellpath nursing staff. Available weekly, modules are completed in the first 30 days of employment. This Zoom training is led by a Regional Director of Nursing (RDON) and allows for extension to on-site orientation shadowing. In addition to specific training topics, RDONs hold office hour calls each week that are open to any nurse. Wellpath advises new employees to join at least one call during their first three months.

The primary goal of virtual onboarding (which does not replace required training for new employees) is to promote consistency, connections, and confidence. New Wellpath nurses are introduced to correctional nursing and common workflows. They also review nursing assessment skills using Wellpath's Professional Nursing Protocols.

Onboarding Step 1: Orientation

Each new hire participates in an eight-hour learning experience, where they are introduced to our company culture and our policies and procedures. Physicians have additional requirements. The program establishes clear expectations and involves new employees in the success of the company. **We have included a Welcome to Wellpath video used during new employee orientation on each USB drive submitted. Please note that this video is confidential and proprietary.**

Onboarding Step 2: On-the-Job Training (OJT)

On-the-job training is guided by standards, detailed checklists, and a qualified preceptor. While there are time schedules with expected milestones, the preceptors work with the new employees to ensure appropriate knowledge transfer. This step is not considered complete until the new employee feels capable of performing the job.

Onboarding Step 3: Follow-up

During this last step of the onboarding process, the new employee can provide feedback about his or her experience with the HSA. The HSA also shares information about his or her leadership style and performance expectations.

Phase 2: Performance Enhancement

Performance enhancement training includes skills labs and webinars. Medical personnel participate in scheduled online training and in-service learning opportunities, such as "lunch and learn" sessions. We also offer webinars with a variety of Subject Matter Experts (SMEs) to staff members as applicable for their roles.



Phase 3: Leadership Development

Leadership development training invests in the continued growth of our employees to develop leaders from within. Each training session varies in delivery and duration and is designed to strengthen the leadership competencies of our employees. Leadership development training is a collaborative effort between Wellpath's Home Office and leaders at the site.

4 Continuous Quality Improvement and Administrative Oversight Plan

NCCHC Standards J-A-04, J-A-06, J-A-10, J-B-02, J-B-08, J-B-09, J-C-02, J-D-07, J-D-08

Wellpath is dedicated to continuously improving our services and program offerings for the County. Our policies and procedures, based on NCCHC and ACA standards, ensure that patients receive quality, compliant healthcare. We use proven performance monitoring techniques like our Continuous Quality Improvement (CQI) program, Medical Administration Committee (MAC), and peer reviews to evaluate our healthcare programs at the Facility.

Wellpath CQI Program

NCCHC Standard J-A-06

The Wellpath CQI program operates under the authority of Chief Clinical Officer, Thomas Pangburn, MD, and Vice President of Quality and Safety, Mashekia Jones-Slack, DNP, RN, MHA. The program ensures systems and programs provide superior healthcare services. The CQI program ensures that clinical care delivery at the Facility meets or exceeds our high expectations and NCCHC and ACA standards.

Wellpath will maintain the site-specific CQI plan based on the scope of care required at the Facility. The CQI plan assesses on-site and off-site healthcare services for quality, appropriateness, and continuity.

Scope of CQI Program

Wellpath's data-driven CQI program includes audits and medical chart reviews to ensure compliance with contract requirements and established performance measures. We will conduct CQI studies to ensure services at the Facility meet established minimum thresholds. We will monitor relevant areas for quality improvement, including accreditations, credentialing, environmental inspections, emergency drills, nursing, intake, medication management, special housing, and ancillary services.

Routine CQI Studies

Routine CQI studies examine areas where overlap or hand-off occurs, as well as other problem-prone, high frequency/volume, and risk management processes, including but not limited to receiving screenings, screening and evaluation at health assessment, special needs, segregation, treatment planning, suicide prevention, medication administration, initiating medication at intake, as well as processes exclusive to the facility.

The following sample CQI Calendar shows monthly CQI screens broken out by the responsible party.



Sample CQI Calendar			
Month	Nursing	Site Medical Director	Mental Health
Jan.	<ul style="list-style-type: none"> Chronic Care Services 		
Feb.	<ul style="list-style-type: none"> Site-specific Study CQI Meeting 	<ul style="list-style-type: none"> Scheduled & Unscheduled Off-site Care 	<ul style="list-style-type: none"> Suicide Prevention
March	<ul style="list-style-type: none"> Alcohol/Benzodiazepine Withdrawal Opiate Withdrawal 		
April	<ul style="list-style-type: none"> Medication Administration Pregnancy Care 		<ul style="list-style-type: none"> Segregation
May	<ul style="list-style-type: none"> CQI Meeting Initial Health Assessment MAT 	<ul style="list-style-type: none"> Physician Chart Review 	<ul style="list-style-type: none"> Suicide Prevention
June	<ul style="list-style-type: none"> Dental Care Dietary Services 		
July	<ul style="list-style-type: none"> Receiving Screen & Med Verification 	<ul style="list-style-type: none"> HIV 	<ul style="list-style-type: none"> Psychiatric Services – HEDIS
Aug.	<ul style="list-style-type: none"> Site-specific Study CQI Meeting 		
Sept.	<ul style="list-style-type: none"> Ancillary Services Emergency Services Diabetes – HEDIS 		<ul style="list-style-type: none"> Suicide Prevention
Oct.	<ul style="list-style-type: none"> Alcohol/Benzodiazepine Withdrawal Sick Call 		<ul style="list-style-type: none"> MH Special Needs & Treatment Planning
Nov.	<ul style="list-style-type: none"> CQI Meeting Patient Safety (review YTD) MAT 	<ul style="list-style-type: none"> Infirmity Level Care 	
Dec.	<ul style="list-style-type: none"> Annual Review of CQI Program 		<ul style="list-style-type: none"> Suicide Prevention

Site-specific Studies

Wellpath will complete monthly CQI screens outlined in the CQI Calendar, plus at least one ad hoc screen each quarter to evaluate a site-specific issue presenting challenges. Examples of ad hoc screens include:

- Missed medication (investigative study)
- TB screening
- Health assessment (periodic)
- Grievances
- Communication with custody
- Initiating essential medications (return from the hospital)
- Prenatal and postpartum care (HEDIS and outcome study)
- Asthma outcome study

Site-specific studies examine a site-specific problem. Examples of how these studies can be accomplished include:

- Completing an existing study in DataTrak Web (DTW) out of order (in a month or quarter when it is not due)
- Modifying the Excel version of a study to meet specific site concerns or issues
- Create a new study to address a novel concern or issue
 - Complete the "Site-Specific Study" in DTW
 - Email or fax the study to your CQI program manager (if the original study is not entered in DTW)

Requirements are adjusted if more frequent CQI meetings or additional studies are required.

Quality Improvement Committee

NCCHC Standard J-A-06

A multidisciplinary Quality Improvement (QI) Committee will direct CQI activities at the Facility. The site Medical Director will lead the QI Committee, which also includes the HSA, DON, Dentist, Mental Health Coordinator, Nurse Practitioner and the Lieutenant over the Medical Department. The QI Committee is responsible for performing monitoring activities, discussing the results, and implementing corrective actions if needed.

The QI Committee will meet quarterly to review significant issues and changes and discuss plans to improve processes or correct deficiencies. CQI activity records are confidential. Discussions, data collection, meeting minutes, problem monitoring, peer review, and information collected as a result of the CQI program are not for duplication or outside review.

Patient Safety Organization

Wellpath became part of a Patient Safety Organization (PSO) in 2016 as part of our commitment to improved patient care and safety. The Patient Safety and Quality Improvement Act of 2005 established PSOs to create a legally secure environment where clinicians and healthcare organizations can voluntarily report, aggregate, and analyze data to reduce the risks and hazards associated with patient care. To support these efforts, Wellpath has implemented a patient safety evaluation system to collect, manage, and analyze information for quality improvement and patient safety.

Due to our legally binding PSO agreement, such analyses are considered patient safety work products and are reported to the PSO to enhance learning and to prevent adverse events in the future through that learning. This also allows both Wellpath and our clients to maintain the confidentiality of these analyses, while also providing some protection from discovery.



High-Risk Items

NCCHC Standards J-A-06, J-A-10, J-B-02, J-B-08, J-B-09, J-D-07, J-D-08

Wellpath's CQI program addresses many forms of risk management, including clinical and environmental risk management tools to identify and reduce variability and liability when adverse events occur. The QI Committee addresses the following risk management items:

- **Critical Clinical Event (CCE) Reviews** – The QI Committee monitors, reviews, and reports on the healthcare staff's response to critical clinical events. The QI Committee uses the root cause analysis problem solving methodology to review the CCE.
- **Emergency Drill Reviews** – The QI Committee monitors, reviews, and reports on the healthcare staff's response to emergency drills.
- **Environmental Inspection Reports** – Wellpath participates in monthly facility environmental inspections to ensure that inmates live, work, recreate, and eat in a safe and healthy environment.
- **Resolution Tracking** – The QI Committee tracks deficiencies identified during routine environmental inspections through resolution.
- **Utilization Management** – Wellpath monitors the provision of care to ensure that medically necessary healthcare services are provided in the most appropriate setting.
- **Grievances** – The Wellpath grievance process is consistent with national standards and internal client policies. The QI Committee reviews and categorizes grievances to identify potential issues and determine if patterns exist or develop. Patient satisfaction surveys are administered on topics relevant to the patient population.
- **Pharmacy** – Wellpath ensures quality pharmacy programming through regularly scheduled on-site inspections performed by a consulting state-licensed pharmacist. We document inspection

reports and maintain them on file, and the consulting pharmacist provides a summary of these discussions and actions to the QI Committee.

- **Pharmacy Reports** – Wellpath uses pharmacy reports to identify outliers and trends, then evaluate and address any outliers. The Regional Medical Director reviews pharmacy utilization data regularly.

4.1 Medical Administration Committee

NCCHC Standard J-A-04

Wellpath will implement a Medical Administration Committee (MAC) to oversee healthcare functions at the Facility. The MAC will meet quarterly to assess the healthcare program, ensuring the continued availability of high-quality medical, dental, and mental health services. Wellpath will work closely with the County administration to coordinate MAC meetings, which will typically include:

- Health Services Administrator (HSA)
- Director of Nursing (DON)
- Mental Health Coordinator
- Regional Director of Operations
- Designated County representative(s)

Discussions include monthly health services statistics by category of care, the current status of the healthcare program, costs of services, coordination between security and health services, and identified issues and program needs. The MAC also reviews and categorizes grievances to identify potential issues and to determine whether patterns exist or are developing. We document meeting minutes, distribute them to attendees and County administration, and maintain a copy for reference.

Wellpath will also provide monthly and quarterly reports on the clinical operation of the healthcare program, following NCCHC and ACA standards. We will communicate frequently with the County on issues deemed appropriate, such as existing procedures and proposed procedural changes.

4.2 Reporting and Accountability

Wellpath seeks to provide the best on-site care possible while being fully accountable to the County. We expect to be measured by our performance, including reduced medical grievances; accountability as evidenced by operational and financial reporting; reduced staff turnover; and fewer off-site referrals. These are our goals and we share the details of our performance by providing regular operational and financial reports on these criteria.

Wellpath typically provides more clinical and operational reports than any other company in the industry. We will provide a full set of operational reports customized to meet the County's specific needs. We will deliver detailed monthly statistical reports and daily operational reports to continually review the effectiveness of our program and improve overall program quality and efficiencies.





Wellpath maintains an extensive logging system for collecting data and statistics to analyze trends in the utilization of healthcare services. Demonstrating accountability through transparent reporting is a Wellpath core competency. In all medical operations, but especially in the corrections environment, it is essential to keep detailed accurate records that are readily available and easily accessed.

As stewards of the County, we are responsible and accountable for the success of your program. Wellpath's clinical and operational leadership teams use powerful business intelligence software, such as Tableau®, to ensure efficient delivery of services. Tableau tracks key indicators such as off-site referrals, inpatient/ER utilization, claim details, pharmacy utilization, labs, filled/vacant FTEs, and overtime. These tools allow us to **identify trends as they emerge.**



Daily Reports

Wellpath will provide a daily narrative report to the Lieutenant or designee covering the previous 24 hours (Saturday and Sunday reports may be submitted Monday morning). Daily reports outline important events of day and night shifts, such as:

- Transfers to off-site hospital emergency departments
- Communicable disease reporting
- Suicide data (i.e., attempts and precautions taken)
- Report of status of inmates in local hospitals
- Staffing roster changes
- Completed medical incident report copies
- Completed medical grievance report copies
- Receiving screenings performed
- Health assessment status report

Monthly Reports

NCCHC Standard J-A-04

Wellpath will provide monthly statistical reports regarding the operation of the healthcare program, staffing fill rates to demonstrate compliance with the contracted staffing plan, and financial reports to aid the County with future budgeting efforts. Monthly reports delineate the status of the healthcare program, including potential problems and suggested resolutions. We also provide reports on monthly paid and projected costs, as well as monthly aggregate and projected aggregate costs.

Wellpath submits a customized report package to all MAC meeting attendees on a mutually agreed-upon day each month. Monthly reports reflect the previous month/term workload, with data such as:

- Patient requests for various services
- Patients seen at sick call
- Patients seen by a physician
- Patients seen by a dentist

- Patients seen by a psychiatrist
- Off-site hospital and emergency room admissions and cost
- Medical specialty consultation referrals and cost
- Intake medical screenings
- 14-day history and physical examinations
- Diagnostic studies
- Report of third-party reimbursement, pursuit, and recovery
- Percentage of inmate population administered medication
- Inmates testing positive for TB, STDs, HIV, or HIV antibodies
- Inmate mortality
- Number of hours worked by entire medical staff and compliance with contract staffing levels
- Other data deemed appropriate by the County

Wellpath Partner Portal

Wellpath continues to innovate and deploy meaningful correctional healthcare technology. One of our more recent innovations, the [Wellpath Partner Portal](#), will give the County near [real-time reporting](#) on statistics related to the delivery of care, such as staffing hours provided and off-site treatments.



The Partner Portal is a secure digital gateway for shared communication and information that can be accessed via web browser by the County, giving you confidential, secure online access to key information, such as:

- Current performance reporting
- Major contract deliverables, such as health services reports and other required data
- Wellpath contact information

The following screenshots illustrate the type of data you can easily access through our Partner Portal.



Partner Portal – FTE Trending



4.3 Policies and Procedures

NCCHC Standard J-A-05

Wellpath has in place a site-specific Policies and Procedures manual with content meeting or exceeding NCCHC and ACA standards. The manual is subject to the County's continued approval and is reviewed and revised as Wellpath and/or County policies are modified, and at least once a year.

5 Qualifications/References

The Wellpath Executive Team has more than 400 years of combined correctional healthcare experience. We also have several former sheriffs and jail administrators in consulting roles with nearly 175 years of combined law enforcement experience. Our team works together and is fully engaged in the successful operation of programs and services at the Facility.

Years in Business

The Wellpath family of companies formed in October 2018 when affiliates of Correct Care Solutions, LLC (CCS) and Correctional Medical Group Companies, Inc. (CMGC) combined to form one company business. CCS (now known as Wellpath LLC) was founded in 2003 and has 18 years of experience administering correctional healthcare programs; CMGC was founded in 1983 and has more than 40 years of experience administering correctional healthcare programs.

Experience with Similar Sites

Wellpath is the industry leader in designing and operating medical programs in facilities similar to the Facility. We have a proven history of success in facilities of all sizes, which has helped us refine best practices that inform our program for the County.

Following is a list of several Wellpath local detention clients with Average Daily Populations (ADPs) ranging from 900 to 1,200. Most of these clients are accredited by the NCCHC and/or ACA, and two of these clients—Arapahoe County, CO and Marion County, IN—hold Triple Crown Accreditation (NCCHC, ACA, and CALEA).

- Adams County, CO (ADP 1050)
- Anne Arundel County, MD (ADP 900)
- Dane County, WI (ADP 950)
- Collin County, TX (ADP 1012)
- Guilford County, NC (ADP 1100)
- Santa Barbara County, CA (ADP 1052)
- Hudson County, NJ (ADP 1200)
- Hampton Roads, VA (ADP 1075)
- Lexington County, SC (ADP 1100)
- Lake County, FL (ADP 1150)
- Montgomery County, TX (ADP 1150)
- Monterey County, CA (ADP 947)

Local Experience

Wellpath serves clients in 34 states; understanding the regional differences from state to state gives us a competitive edge. We currently provide quality care for more than 7,000 patients in 8 counties throughout Texas, including nearby Montgomery County. With 715 employees actively serving our Texas clients, **Wellpath has unmatched local resources** readily available to support the success of your medical program.

Wellpath will have a stable, knowledgeable, local management team in place, along with Texas-licensed staff who are ready to support our operations at the Facility. Wellpath also has local nurses, mental health professionals, and health services administrators available to assist as needed with specific training, mentoring, and resource management in Fort Bend County. We have a strong PRN pool of providers prepared and trained to fill positions in Fort Bend County if needed. Our Texas clients include:



- Ellis County
- Hays County
- Lubbock County
- Collin County
- Kerr County
- Montgomery County

Accreditation Experience

Wellpath's program for Fort Bend County will meet or exceed community standards of care, as well as standards established by the National Commission on Correctional Health Care (NCCHC) and American Correctional Association (ACA). Wellpath will ensure that the Facility maintains full compliance with NCCHC and ACA standards. We have extensive experience achieving and maintaining NCCHC and ACA accreditation and will ensure that the County's medical program maintains NCCHC accreditation for the duration of the contract.

Our accreditation history is well-documented: **Wellpath has neither failed to obtain nor lost medical accreditation at any of our client sites.** We conduct mock accreditation surveys before the actual on-site audit and we discuss our findings and recommendations with the on-site staff. Additionally, our internal quality improvement programs ensure our client facilities meet and maintain the applicable standards.



Praise for Wellpath NCCHC Audit

"I wanted to take the opportunity to let you know what a great job your HSA did in preparing for and handling the recent NCCHC audit! Both during my personal interview and during the exit interview, both of the auditors had nothing but the highest praise for your HSA and her staff and the medical services your company provides. While this facility has maintained that accreditation for over 30 years, **we have never partnered with better company than yours.** It takes me back to the day we interviewed you for the initial RFP and the pledge you made and you stood by ever since. Thank you."

Michael Giese, former Jail Administrator
Waukesha County Sheriff's Dept., WI

Client Accreditation Status

Wellpath currently provides healthcare services for approximately **197 facilities** accredited by the NCCHC and/or ACA. The following table summarizes our current accreditation status.

Wellpath National Accreditations by the Numbers	
Accrediting Agency	Number of Facilities
NCCHC, ACA & CALEA (Triple Crown)	24
NCCHC & ACA	16
NCCHC Only	44
ACA Only	113
TOTAL	197

Wellpath has enjoyed unparalleled success in our accreditation experience. Many Wellpath sites have been found 100% compliant during their accreditation surveys. Furthermore, **we carry the distinction of counting 24 Triple Crown facilities among our clients.** The National Sheriffs' Association (NSA) presents its prestigious Triple Crown Award to correctional facilities that achieve accreditation by the NCCHC, ACA, and CALEA.

According to the NSA, "Achieving these accreditations individually is a daunting task. Acquiring all three at the same time is an extraordinary feat. The Triple Crown distinction is so rare, that since the establishment of the award in 1993, fewer than 100 sheriffs' offices have qualified."



Wellpath manages Triple Crown facilities in:

- Alameda County, CA
- Alexandria, VA
- Arapahoe County, CO
- Augusta-Richmond County, GA
- Broward County, FL (*5 Triple Crown facilities*)
- Charleston County, SC
- Clark County, NV (*2 Triple Crown facilities*)
- DeKalb County, GA
- Durham County, NC
- El Paso County, CO
- Elkhart County, IN
- Lake County, IL
- Marion County, IN
- McHenry County, IL
- Monroe County, FL
- New Hanover County, NC
- Orange County, NY
- Shelby County, TN (*2 Triple Crown facilities*)

Former Clients

Wellpath has responsibly completed all projects under which we have been contracted. Where a contract exit was made before the original concluding date, we have worked diligently to ensure a transition to the new service provider. We recognize our responsibility to patient care in any such transition, and we faithfully perform to meet that commitment.

"Wellpath's professional, administrative and clinical skills come 'packaged' in a sincere, witty and caring manner. Our relationship continues as a direct result of Wellpath's flexibility, humility and their committed reputation as an outstanding correctional healthcare provider."

Thomas C. Havel, Warden (retired)
San Juan County, NM

5.1 Litigation History and Financial Stability

Litigation History

Wellpath's litigation history is modest given today's litigious environment and the size of our business, which is directly reflective of the high standard of care we provide and the emphasis we place on quality care and effective risk management. Our collaborative and cross-functional team approach proactively identifies areas of risk before they can develop into serious problems, then works to eliminate and minimize those risks. This, coupled with stringent quality assurance and patient safety programs, enables Wellpath and our partner clients to mitigate negative outcomes and costly litigation. We view this as a major differentiator between Wellpath and other companies in our industry.

The majority of lawsuits filed against Wellpath are pro se, where the plaintiff is not represented by legal counsel. Most of these suits are filed by inmates in our prison population, who tend to be incarcerated for longer periods than those incarcerated in jails and detention centers. Nearly all of these cases are ultimately dismissed with no finding of liability against Wellpath. More than 90% of all cases filed against Wellpath are dismissed with no payment by Wellpath or our partners.

Bad clinical outcomes unfortunately happen in all healthcare situations and companies. Considering the eight million interactions we have each year with patients who are among the sickest, most fragile in any setting, bad outcomes are rare. Wellpath strives to provide quality care to every patient and invests in hiring, training, planning, and developing processes, policies, and procedures to achieve this important goal. But like any large healthcare system, Wellpath comprises committed, compassionate, well-trained, human beings—nearly 15,000 of them—supported by our systems, processes, policies, and procedures. They do difficult work in challenging settings. In this, Wellpath is not alone.

Wellpath's dedicated healthcare providers focus daily on quickly assessing and treating patients under incredibly difficult circumstances. Our robust Continuous Quality Improvement (CQI) program and our membership in a national Patient Safety Organization (PSO) help us reduce and mitigate adverse patient outcomes. Citing the number of lawsuits filed against our company, without providing context as to our size and scope and the number of cases that actually result in a significant recovery, is a misleading indicator of the quality of our work.

Wellpath has no pending judicial or administrative proceedings material to our business or financial condition or our ability to perform the work requested in the RFP.

Financial Stability

Wellpath retains 99% of our client agencies on a revenue basis year over year. This percentage results in part from our continued investment in infrastructure to meet or exceed our clients' expectations. A strong balance sheet, strong liquidity, and a well-funded ownership group—combined with proven business practices—make Wellpath one of the most financially stable companies in the industry. Our financial strength and leading industry position allow us to provide uninterrupted, consistent, and financially responsible programs for our clients. When Wellpath commits to a project, we can guarantee that we have the financial ability and access to resources to fulfill our contractual obligations.

On October 1, 2018, Correct Care Solutions Group Holdings, LLC (CCS) and Correctional Medical Group Companies, Inc. (CMGC) were combined under common ownership of an investment fund management by H.I.G. Capital, LLC to become Wellpath. In 2023, Wellpath expects to generate approximately \$2.4



billion in annualized revenue while generating positive operating cash flows. Wellpath has access to a \$65 million revolving credit facility to provide for ongoing liquidity needs, if necessary.

5.2 References

Wellpath is dedicated to continuously improving our services and program offerings for the County and for every client we serve. We have selected the following client references that we believe can best communicate our strengths and our ability to continue meeting or exceeding your requirements and expectations for your medical program.

Hays County	
Address	1307 Uhland Rd. San Marcos, TX 78666
Contact Name	Capt. Julie Villalpando
Phone	512-393- 7831
Email	julie@co.hays.tx.us
Period of Performance	2013 – Present
Accreditation	N/A
ADP	350
Transitioned from	Self-operated

Collin County	
Address	4300 Community Ave. McKinney, TX 75071
Contact Name	Asst. Chief Johnny Jaquess
Phone	972-547-5249
Email	jjaquess@co.collin.tx.us
Period of Performance	2008 - Present
Accreditation	NCCHC
ADP	1082
Transitioned from	Self-operated

Ellis County	
Address	300 S. Jackson Waxahachie, TX 75165
Contact Name	Chief Terry Ogden
Phone	972-877-2298
Email	Terry.ogden@co.ellis.tx.us
Period of Performance	2007 – Present
Accreditation	N/A
ADP	590
Transitioned from	Self-operated



MIKE DAVENPORT
Chief Deputy

JULISSA VILLALPANDO
Captain – Corrections

**GARY CUTLER
HAYS COUNTY SHERIFF**

1307 Uhland Road
San Marcos, Texas 78666
512-393-7800

DAVID BURNS
Captain – Law Enforcement

MARK CUMBERLAND
Captain – Support Services

September 19, 2019

To whom it may concern,

My name is Gary Cutler. I have over 45 years of law enforcement experience and currently the Sheriff of Hays County, located in San Marcos, Texas. I manage an over 30 million dollar budget, as well as a 362 bed jail facility which is currently undergoing a large expansion.

Several years ago, with authorization from the Commissioners Court, I realized that as a law enforcement professional, I lacked the medical training and expertise to professionally manage the health care systems for our inmates and decided to out-source this important function for both humane and liability reasons. Several vendors were vetted by a select Hays County panel (which I did not sit on) and at the end of the process, Wellpath, formerly known as Correct Care Solutions, was awarded the contract.

Wellpath has been nothing but a godsend to the Hays County Sheriff's Office throughout the past six years. Our overall medical services from booking intake, to inmate discharge, are beyond reproach.

Frivolous grievances are easily determined baseless when compared to Wellpath's precise and accurate medial record keeping. Doctors with medical, dental and psychiatric expertise, as well as quality registered nurses and paramedics, provide timely and compassionate health care. I rest easy knowing that Wellpath is on the job 24/7/365 and that they have a vested interest in providing humane and comprehensive care to our inmates, and liability insurance, which helps protect Hays County.

Please feel free to contact me for further details at 512-393-7808.

Respectfully,

Gary Cutler, Sheriff

GC/dps



ELLIS COUNTY SHERIFF'S OFFICE
Brad Norman, Sheriff

July 28, 2021

To whom it may concern:

My name is Terry Ogden. I am the Chief Deputy of jail operations and have been assigned to the jail in different capacities for 24 years. We manage an 836-bed jail with a current population of 476 inmates.

During my 24 years we have managed inmate health in different ways, at one point we handled inmate health in house by having one nurse on duty and having Detention Officers pass out medication, knowing that the Detention Officers did not have the training needed to perform this duty and knowing we did not have the training to handle inmate health care issues our Sheriff at the time decided to contract these duties out.

Wellpath was awarded the contract under different names over 15 years ago to handle inmate health, and it has absolutely been a weight taken off the shoulders of the Sheriff, Commissioners Court and Jail Staff and a great relationship.

Not one time has a complaint been made by an inmate to the Jail Commission or to any of the staff here by grievance been founded or has the continuity of care been put into question. All jail inspections have been easily passed as it pertains to medical documentation.

Please feel free to contact me with any questions.
972-825-4935


Terry Ogden
Chief Deputy

ELLIS
ETHICS - LEADERSHIP - LOYALTY - INTEGRITY - SERVICE

300 South Jackson Street Waxahachie, Texas 75165 Phone: 972.825.4901 Fax: 972.825.4941

EXHIBIT C
STAFFING MATRIX

Day Shift									
POSITION	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hrs/Wk	FTEs
Health Services Administrator	8	8	8	8	8			40	1.00
Administrative Assistant	8	8	8	8	8			40	1.00
Medical Director	2	2	2	2	2			10	0.25
Nurse Practitioner/PA	8	8	8	8	8	8	8	56	1.40
Director of Nursing	8	8	8	8	8			40	1.00
Registered Nurse	36	36	36	36	36	36	36	252	6.30
Licensed Vocational Nurse	34	32	34	32	32	24	24	212	5.30
Licensed Vocational Nurse (Transport)	8	8	8	8	8			40	1.00
Licensed Vocational Nurse (Pharmacy Manager)	8	8	8	8	8			40	1.00
Medical Records Clerk	8	8	8	8	8			40	1.00
Dentist	8	8	8	8	8			40	1.00
Dental Assistant	8	8	8	8	8			40	1.00
Mental Health Professional	32	32	32	32	32	16	16	192	4.80
Mental Health Coordinator	8	8	8	8	8			40	1.00
Discharge Planner/ Case Manager	16	16	16	16	16			80	2.00
Psychiatrist	8	8		6	8			30	0.75
Psych Tech	24	24	24	24	24	24	24	168	4.20
Total Hours/FTE - Day								1360	34.00
Evening Shift									
Mental Health Professional	8	8	8	8	8	6	6	52	1.30
Total Hours/FTE - Evening								52	1.30
Night Shift									
Registered Nurse	24	24	24	24	24	24	24	168	4.20
Licensed Vocational Nurse	36	36	36	36	36	36	36	252	6.30
Total Hours/FTE - Night								420	10.50
Weekly Total									
TOTAL HOURS/FTE - Per Week								1,832	45.80

EXHIBIT D**Wellpath's Operating Budget and Management Fee**

Fort Bend County Jail, TX		
Estimated Budget for Initial Period (FY23 - 8/1/23-9/30/23) at 765 ADP		
	Monthly	8/1/23-9/30/23
Salaries/ Wages/ Benefits	\$ 461,254	\$ 922,508
Professional Fees	\$ 2,544	\$ 5,088
Pharmaceuticals	\$ 52,263	\$ 104,526
Off-Site	\$ 67,265	\$ 134,530
Laboratory/ Other On-Site	\$ 21,508	\$ 43,016
Medical Supplies	\$ 4,700	\$ 9,400
Insurances	\$ 2,483	\$ 4,966
Administrative Supplies and Cost	\$ 4,623	\$ 9,246
Equipment/ Other Facility	\$ 3,883	\$ 7,766
Travel/ Site Visits	\$ 273	\$ 546
Civil Commitment Center Fees	\$ 3,632	\$ 7,264
Direct Expense	\$ 624,428	\$ 1,248,856
Management Fee	\$ 96,754	\$ 193,508
Total Expense	\$ 721,182	\$ 1,442,364

Estimated Budget shown above excludes startup costs which will be paid in addition and in accordance with Section 4 Exhibit E.

EXHIBIT E
Wellpath's Start-Up Costs

Non-IT Start Up Costs	\$ 122,143.22
IT Budget	\$ 10,750.00
Start-Up Cost Estimate	\$ 132,893.22

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Wellpath LLC
Nashville, TN United States

Certificate Number:
2023-1037612

Date Filed:
06/22/2023

Date Acknowledged:
06/29/2023

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

23152
Inmate Medical

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)