BOARD OF COMMISSIONERS
Agenda Item Summary

<table>
<thead>
<tr>
<th>Agenda Category: Agreements</th>
<th>Item No:</th>
</tr>
</thead>
</table>

**Date:** October 20\(^{th}\), 2020

**Originating Department:** Klamath County Sheriff’s Office – Corrections

**Issue:** The Klamath County Sheriff is requesting approval to enter into a contract with Wellpath LLC for Jail Medical Services.

**Background:** The Sheriff’s Office – Corrections Division would request to award a contract to Wellpath LLC who provided the most cost effective proposal after a request for proposal. Services will provide quality health care services to corrections inmates. Their contract includes providing a cost-effective, professional and accountable health care program which includes medical, dental and pharmaceutical services, records management, reporting requirements and billing activities for a period of 5 years. The fiscal impact may be reduced with some potential cost savings.

**Fiscal Impact:** As proposed $3,585,540.00 with annual expense of $717,108 from General Fund Sheriff’s Office Corrections.

**Recommended Motion:** To approve the Sheriff’s Office – Corrections Division request to enter into and sign a contract with Wellpath LLC for a period of 5 years to provide health care and dental services to correction inmates. As proposed $3,585,540.00 with annual expense of $717,108 from General Fund Sheriff’s Office Corrections.

DONE AND DATED this ________ day of ___________________, 20___.

_______________________  _______________________  ___________________
Chair                  Vice-Chair            Commissioner
Approved              Approved            Approved
Denied                 Denied              Denied
This Client Services Contract (Contract) is between the Klamath County ("County") acting by and through the Klamath County Board of Commissioners on behalf of the Klamath County Sheriff's Office ("Department"). and Wellpath LLC ("Contractor"). This Contract is effective on the date it has been signed by all parties and expires on five years from the date of signature. Upon mutual consent the parties may extend the term of this Contract for one (1) additional five (5) year term.

The Department's Contract Administrator for this Contract is: Lieutenant Brian Bryson  
Phone Number: 541-851-3768  
Address: 305 Main Street, Klamath Falls, OR 97601

The Contractor's Contract Administrator for this Contract is: Andrew Small, RVP Corporate Operations  
Phone Number: 570-419-9733  
Address: 1283 Murfreesboro Rd Ste. 500 Nashville, TN 37217

1. Services to be Provided.

   a. Required Services. Deliverables and Delivery Schedule. Contractor shall provide, or cause to be provided, as an independent contractor and not as an agent of the County, jail medical services, as specified in "Exhibits A and B", attached to and hereby made a part of this contract. These Exhibits are the (A) Contractor’s Price Proposal and (B) the pertinent parts of Contractor Technical Proposal, respectively.

   b. Special Requirements.

      i. Confidentiality of Information. The use or disclosure by any party of any information concerning a recipient of Services purchased under this Contract, for any purpose not directly connected with the administration of the Department’s or the Contractor’s responsibilities with respect to such purchased Services, is prohibited, except on written consent of the Department.

      ii. Client Records. Contractor shall appropriately secure all records and files to prevent access by unauthorized persons. The Contractor shall, and shall require its employees and subcontractors to comply with all appropriate federal and state laws, rules and regulations regarding confidentiality of client records.

      iii. Media Disclosure. The Contractor shall not provide information to the media regarding Services purchased under this Contract without first consulting the Department. The Contractor will make immediate contact with the Department’s office when media contact occurs. The Department will assist the Contractor with an appropriate follow-up response for the media.

2. Compensation.

   i. Base Compensation. For services provided under this Contract, the Contractor shall be compensated in an amount not to exceed $717,108.00 for a period of 12 months, payable in equal monthly installments. Each monthly installment shall be at $59,759.00, pro-rated for any partial months and subject to any reconciliations as set forth below.

   ii. Quarterly Pharmacy Cap Reconciliation and Adjustment. The quarterly reconciliation shall include any amounts paid by Wellpath in excess of the financial limits listed in this Agreement. The compensation payable to Wellpath by the County shall be increased by any costs paid by Wellpath in excess of the Pharmacy Cap financial limits ($35,000) listed and as further defined in Exhibit B or Contractor’s Price Proposal dated July 17, 2020. Following the Fourth Quarter reconciliation if the Pharmacy Cap financial limit was not met or exceeded, the difference will be refunded back to County.

   iii. Base Compensation Annual Increases. Upon each annual anniversary of the Agreement a Consumer Price Increase (CPI) increase shall be calculated by multiplying the annual amount of the previous year by a fraction, the numerator of which is the Price Index for a defined month prior to the renewal date, and the denominator of which is the Price Index for the same month for the year immediately preceding the Agreement renewal date. However, the annual amount due for any year will not be less than the annual amount for the prior year.
The “Price Index” is defined as the Consumer Price Index – All Urban Consumers, U.S. City Average, Medical Care Services (1982-84=100), published by the Bureau of Labor Statistics of the U.S. Department of Labor.

iv. In the event the Board of Commissioners of Klamath County reduces, changes, eliminates, or otherwise modifies the funding for this contract, or if funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for the purchase of the indicated quantity of services, the County may terminate this contract, in whole or in part, effective upon delivery of written notice to the Contractor, or at such later date as may be established by the County, and Contractor agrees to abide by any such decision.

3. **Subcontracts, Assignment, Successors.** Contractor shall not enter into any subcontracts for any of Services required under this Contract without Department’s prior written consent. In addition to any other provisions Department may require, Contractor shall include in any permitted subcontract provisions to ensure that Department will receive the benefit of subcontractor’s performance as if the subcontractor were Contractor. Department’s consent to any subcontract shall not relieve Contractor of any of its duties or obligations under this Contract.

4. **Assignments.** Contractor shall not assign, delegate or transfer any of its rights or obligations under this Contract without Department’s prior written consent. Department’s written consent does not relieve Contractor of any obligations under this Contract, and any assignee, transferee, or delegate is considered Contractor’s agent.

5. **Successors.** The provisions of this Contract are binding upon, and inure to the benefit the parties and their respective successors and permitted assigns, if any.

6. **Ownership of Work Product.** All work product of the Contractor that results from this Contract (the “Work Product”) is the exclusive property of the County with the exception of any such work product that is proprietary to Contractor. The County and the Contractor agree that such Work Product be deemed “work made for hire” of which the Department be deemed the author. If for any reason the Work Product is not deemed “work made for hire,” the Contractor hereby irrevocably assigns to the County all of its right, title, and interest in and to any and all of the Work Product, whether arising from copyright, patent, trademark, trade secret, or any other state or federal intellectual property law or doctrine. The Contractor shall execute such further documents and instruments as the Department, or both, may reasonably request in order to fully vest such rights in the County. The Contractor forever waives any and all rights related to the Work Product, including without limitation, any and all rights arising under 17 USC § 106A or any other rights of identification or authorship or rights of approval, restriction or limitation on use or subsequent modifications.

7. **Termination.**

a. This Contract may be terminated by either party by giving written notice to the other party at least thirty (30) days prior to the termination date.

b. The County reserves the right to terminate this Contract upon ten (10) days’ notice should the Contractor fail to comply with the provisions of the Insurance section of this Contract.

c. The County reserves the right to immediately terminate this Contract upon loss of licensure of Contractor.

d. The County reserves the right to terminate this Contract with twenty-four (24) hours’ notice should the County find the Contractor has failed to provide the agreed upon services in keeping with the conditions of this contract, or relevant law, rule or regulation or has performed in a manner determined to have violated the civil rights of, or otherwise caused harm to, any individual serviced under this contract.

8. **Amendments.** This Contract may be amended to the extent permitted by applicable statutes and administrative rules. No waiver, consent, or amendment of terms of this Contract shall bind either party unless in writing and signed by County and Contractor, and all necessary approvals have been obtained. Waivers and consents shall be effective only
in the specific instance and for the specific purpose given. The failure of County to enforce any provision of this Contract shall not constitute a waiver by County of that or any other provision.

9. **Access to Records.** Klamath County, Department, and their duly authorized representatives shall have access to the Contractor’s books, documents, papers and records pertinent to this Contract for the purpose of making audit, examination, excerpts and transcripts.

10. **Compliance with Applicable Laws and Standards.**

   a. The Contractor, throughout the duration of this Contract and any extensions, shall comply with all federal, state and local laws, regulations, and ordinances applicable to this Contract or to the Contractor’s obligations under this Contract, as those laws, regulations and ordinances may be adopted or amended from time to time.

   b. The Department’s performance under this Contract is conditioned upon the Contractor’s compliance with ORS 279B.220, 279B.225, 279B.230 and 279B.235. The Contractor shall, to the maximum extent economically feasible in the performance of this Contract, use recycled paper (as defined in ORS 279A.010 (1) (ee)), recycled PETE products (as defined in ORS 279A.010 (1) (ff)), and other recycled plastic resin products and recycled products (as “recycled product” is defined in ORS 279A.010 (1) (gg)).

   c. Any violation of subsection (a.) of this section shall constitute a material breach of this Contract following the notice procedures in Section 17 (a)(iii). Further, any violation of this Contract, shall constitute a material breach of this Contract following the notice procedures in Section 17 (a)(iii). Upon Contractor’ s failure to cure any violation within the agreed upon time shall entitle the County to terminate this Contract, to pursue and recover any and all damages that arise from the breach and the termination of this Contract, and to pursue any or all of the remedies available under this Contract, at law, or in equity, including but not limited to:

   - Termination of this Contract, in whole or in part;
   - Exercise of the right of setoff, and withholding of amounts otherwise due and owing to Contractor, in an amount equal to State’s setoff right, without penalty; and
   - Initiation of an action or proceeding for damages, specific performance, declaratory or injunctive relief. The County shall be entitled to recover any and all damages suffered as the result of Contractor’s breach of this Contract, including but not limited to direct, indirect, incidental and consequential damages, costs of cure, and costs incurred in securing the replacement Services/replacement Goods/ a replacement contractor.

These remedies are cumulative to the extent the remedies are not inconsistent, and the County may pursue any remedy or remedies singly, collectively, successively, or in any order whatsoever.

11. **Independent Contractor; Responsibility for Taxes and Withholding.** The Contractor shall perform all required Services as an independent contractor. Although the Department may (a) determine and modify the delivery schedule for Services to be performed and (b) evaluate the quality of the completed performance. The Contractor is responsible for determining the appropriate means and manner of performing any Services required under this Contract. The Contractor certifies, represents and warrants that the Contractor is an independent contractor of the County under all applicable state and federal law. The Contractor is not an “officer,” “employee,” or “agent” of the County as those terms are used in ORS 30.265.

12. **Indemnification.** Contractor agrees to defend, indemnify and save County, its agents, officers and employees harmless from any and all losses, claims, actions, costs, expenses, judgments, subrogation or other damages resulting from injury to any person (including injury resulting in death), or damage (including loss or destruction) to property, arising or resulting from the fault, negligence, wrongful act or wrongful omission of Contractor or its agents or employees.
13. **Insurance.** Contractor shall procure and maintain in force, for the entire duration of this Contract, insurance providing coverage for bodily injury and property damage which may arise out of the operations of the Contractor or his subcontractors, employees, agents, assigns or for anyone whose acts any of them may be liable. Such insurance shall have coverage limits equal to or greater than the minimum limits set forth herein.

   a. Contractor shall furnish to Klamath County an Acord 25 certificate of insurance evidencing the existence of all insurance coverage(s) required by this contract prior to the commencement of any work. The certificate holder shall be:
      
      Klamath County  
      305 Main Street  
      Klamath Falls, OR 97601  

   b. Contractor shall endorse the Contractor General Liability (CGL) to include Klamath County as an “additional insured”, including coverage for products and completed operations, and a copy of this endorsement shall accompany each certificate. The additional insurance endorsement may be in the form of a blanket endorsement.

   c. **NOTICE OF CANCELLATION OR CHANGE.** There shall be no cancellation, material change, reduction of limits or intent not to renew the insurance coverage(s) without 30 days’ written notice from the Contractor or its insurer(s) to the County.

   d. Contractor’s insurance shall be primary and not excess to, or contributory with any insurance coverage provided by Klamath County.

   e. CGL coverage, including products and completed operations coverage, shall be maintained from the date work commences until two years after the work has been completed.

   f. If the work required by this contract or the location of the work specified in this contract constitutes an exposure to the employees of the contractor or his subcontractors under the U.S. Longshoremen and harbor Workers Act, The Jones Act, or under any laws, regulations or statutes that apply to maritime workers, the contractor shall ensure that proper coverage is purchased and maintained.

   g. Contractor and all Subcontractors shall endorse the Worker’s Compensation coverage to provide a “waiver of subrogation” in favor of Klamath County when available.

   h. Klamath County will waive the required Worker’s Compensation (WC) coverage if the Contractor submits a letter, on official letter head, stating they agree that they will obtain WC coverage immediately upon utilizing volunteers or hiring any employees during the period of the contract.

   i. Klamath County will waive the required Auto Liability coverage if the Contractor submits a letter, on official letter head, stating absolutely no driving will be done related to the contract and that they will obtain Auto Liability coverage in advance if they travel in any way in support of the contract, i.e. training our staff, meetings to implement, etc.

   j. Contractor shall ensure that the County is provided with a renewal certificate prior to the expiration date of the coverage to validate no lapse in coverage.

   ❖ **Professional Services Contracts:**
      
      a. Contracts should have the following:
         
         - General Liability
            
            - Each Occurrence $2,000,000
            - Aggregate $4,000,000
Professional Services Contract
Klamath County Jail Medical

- Operations $2,000,000
  o Products and Completed
- Personal/Advertising Injury $2,000,000
- Auto Liability
  o Combined Single $2,000,000
- Workers’ Compensation
  o Statutory Limits
  o Employers Liability
    o $1,000,000

Professional/Malpractice Liability Coverage. Contractor shall obtain, at Contractor's expense, and keep in effect during the term of this contract, Professional Liability Insurance covering any damages caused by an error, omission or any negligent acts related to the services to be provided under this contract. Per claim (for all claimants for claims arising out of a single accident or occurrence) in the amount of $2,000,000 and $4,000,000 Professional Aggregate.

14. No Third-Party Beneficiaries. The County and the Contractor are the only parties to this Contract and are the only parties entitled to enforce its terms. Nothing in this Contract gives, is intended to give, or shall be construed to give or provide any benefit or right, whether directly, indirectly or otherwise, to third persons unless such third persons are individually identified by name herein and expressly described as intended beneficiaries of the terms of this Contract.

15. Merger. This Contract constitutes the entire agreement between the parties, and there are no understandings, agreements, or representations, oral or written, not specified herein regarding this Contract.

16. Health Insurance Portability and Accountability Act. If the Services funded in whole or in part with financial assistance provided under this Contract are covered by the Health Insurance Portability and Accountability Act or the federal regulations implementing the Act (collectively referred to as HIPAA), Contractor agrees to deliver the Services in compliance with HIPAA. Without limiting the generality of the foregoing, Services funded in whole or in part with financial assistance provided under this Contract are covered by HIPAA. Contractor shall comply and cause all Providers to comply with the following:

a. Privacy and Security of Individually Identifiable Health Information. Individually Identifiable Health Information about specific individuals is confidential. Individually Identifiable Health Information relating to specific individuals may be exchanged between Contractor and County for purposes directly related to the provision of services to Contractor’s clients, which are funded in whole or in part under this Contract. However, Contractor shall not use or disclose any Individually Identifiable Health Information about specific individuals in a manner that would violate the Oregon Privacy Rules, OAR 410-014-0000 et. Seq., or County policy, Section 900. "HIPAA Policy” of the Klamath County Human Resources Policy & Procedures Manual, if done by County. A copy of the most recent Klamath County Human Resources Policy & Procedures Manual is available through the Human Resources Department at 305 Main Street, Klamath Falls, Oregon 97601.

17. Events of Breach.

a. Breach by Contractor. Contractor breaches this Contract if:

i. Contractor institutes or has instituted against it insolvency, receivership or bankruptcy proceedings, makes an assignment for the benefit of creditors, or ceases doing business on a regular basis;

ii. Contractor no longer holds a license or certificate that is required for Contractor to perform its obligations under this Contract and Contractor has not obtained the license or certificate within fourteen (14) calendar days after being required to do so.
days after Department delivers notice of breach to Contractor or a longer period as Department may specify in the notice; or

iii. Contractor commits any material breach of any covenant, warranty, obligation or certification under this Contract, fails to perform its obligations under this Contract within the time specified or any extension of that time, and Contractor fails to cure the breach within fourteen (14) calendar days after Department delivers notice of breach to Contractor or a longer period as Department may specify in the notice.

b. **Breach by County.** County breaches this Contract if:
   i. County fails to pay Contractor any amount pursuant to the terms of this Contract, and County fails to cure its failure to pay within fourteen (14) calendar days after Contractor delivers notice of breach to County or a longer period as Contractor may specify in the notice; or
   ii. County commits any material breach of any covenant, warranty, or obligation under this Contract, fails to perform its obligations hereunder within the time specified or any extension thereof, and County fails to cure the breach within fourteen (14) calendar days after Contractor delivers notice of breach to County or a longer period as Contractor may specify in the notice.

18. Remedies.

   a. **County’s Remedies.** If Contractor is in breach, then in addition to the remedies afforded elsewhere in this Contract, County shall be entitled to recover any and all damages suffered as the result of Contractor’s breach of this Contract, including but not limited to direct, indirect, incidental and consequential damages. County may, at Department’s option, pursue any or all of the remedies available under this Contract and at law or in equity, including, but not limited to:
      i. **Termination of this Contract;**
         (1) Withholding payment of all amounts in Contractor’s invoices for Services that Contractor is obligated to but has failed to deliver or perform within any scheduled completion dates or has performed inadequately or defectively;
         (2) Initiation of an action or proceeding for damages, specific performance, declaratory or injunctive relief; or
         (3) Exercise of the right of setoff, and withholding of amounts otherwise due and owing to Contractor in an amount equal to County’s setoff right, without penalty.

         (4) These remedies are cumulative to the extent the remedies are not inconsistent, and County may pursue any remedy or remedies singly, collectively, successively or in any order whatsoever. If it is determined for any reason that Contractor was not in breach, the rights and obligations of the parties shall be the same as if this Contract was terminated pursuant to section 7.
      ii. **Contractor’s Remedies.** If County is in breach of contract, Contractor’s sole remedy is one of the following, as applicable:
         (1) For Services compensable on an hourly basis, a claim against County for unpaid invoices, hours worked but not yet invoiced, and authorized expenses for Services completed and accepted by Department less any claims County has against Contractor.
         (2) For deliverable-based Services, a claim against County for the sum designated for completing the deliverable multiplied by the percentage of Services completed and accepted by Department, less previous amounts paid and any claims County has against Contractor.
b. If previous amounts paid to Contractor for Services and Goods exceed the amount due to Contractor, Contractor shall pay the excess amount to County immediately upon written demand.

19. **Severability.** The parties agree that if any term or provision of this Contract is declared by a court or competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and provisions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the particular term or provision held to be invalid.

20. **Attorney Fees.** In the event suit or action is instituted to enforce any of the terms of this Contract, each party shall be responsible for its own attorney fees costs and related expenses.

21. **Notices.** Any notice required to be given pursuant to this Contract shall be in writing and may be given by personal delivery by registered or certified mail, or by a nationally recognized carrier (such as: UPS and FedEx) addressed to County or Contractor at the address provided in this contract, or to either party in any other manner prescribed by law.

   If to Contractor: Wellpath LLC 1283 Attn: Chief Legal Officer, 1283 Murfreesboro Rd Ste. 500, Nashville, TN 37217

   If to County: Klamath County Sheriff’s Office Attn: Brian Bryson, Lieutenant, 305 Main Street, Klamath Falls, OR 97601

22. **Governing Law.** This agreement shall be construed in accordance with the laws of the State of Oregon, without reference to its conflict of law provisions, and the obligations, rights and remedies of the parties hereunder shall be determined in accordance with such laws.

23. **Conflict of interest.**

   a. Klamath County desires to have the Contractor refrain from activities which could be interpreted as creating an organizational conflict of interest.

   b. The Contractor agrees to avoid any activities which may influence the decisions of Klamath County or which directly or indirectly affect the interest of the County where the Contractor has a personal interest in the matter which may be incompatible with the interest of Klamath County Government, and to promptly notify County regarding any change in Contractor’s private interests or the Services under this Agreement which may result or appear to result in a conflict of interest.

24. **Authorization**

   The undersigned certifies under penalty of perjury both individually and on behalf of Contractor that: The undersigned is a duly authorized representative of Contractor, has been authorized by Contractor to make all representations, attestations, and certifications contained in this Contract and to execute this Contract on behalf of Contractor.

*Signature Page Follows*
Professional Services Contract
Klamath County Jail Medical

CONTRACTOR:
Wellpath LLC
1283 Murfreesboro Rd Ste. 500
Nashville, TN 37217

Signature:  
Printed or Typed Name: Cindy Watson, President Local Govt. Health Div.
Federal I.D. # 32-0092573
Date: 9/30/2020

KLAMATH COUNTY BOARD of COMMISSIONERS:
305 Main Street
Klamath Falls, OR 97601
(541) 883-5100

Approved this ___ day of _____________, 20__.

______________________________
Chair

______________________________
Commissioner

______________________________
Commissioner

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY:

______________________________
Klamath County Counsel
Klamath County Sheriff’s Office  
Klamath Falls, Oregon

Request for Proposal  
Klamath County Jail Medical Services

Price Proposal

July 17, 2020  
2:00 P.M. PST

Respectfully Submitted to:
Leslie Barlow-Hunter, Contracting and Risk Manager  
305 Main Street, Suite 216  
Klamath Falls, OR 97601  
541-851-3693

Submitted by:
WELLPATH®  
1283 Murfreesboro Road, Suite 500  
Nashville, TN 37217  
800-592-2974  
Tax ID# 32-0092573

Points of Contact:
Melissa Moberly  
Director of Partnership Development  
303-501-5160  
mmoberly@wellpath.us

Kip Hallman  
President  
858-283-8619  
kip.hallman@wellpath.us

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Pricing

Wellpath is enthusiastic about the opportunity to partner with the Klamath County Sheriff’s Office (KCSO) to provide comprehensive healthcare services for the Klamath County Jail’s (KCJ) inmate population. Wellpath has worked diligently to deliver a meaningful proposal that illustrates the best value for Klamath County, with transparency and accountability to create a strong partnership and goal alignment between Wellpath and the KCSO.

We realize the importance of cost within this RFP process and our proposal has been developed to deliver a quality medical care program at a reasonable and cost-effective price. Our proposal offers programs and solutions customized to meet the KCSO’s specific needs, as well as justification for the associated costs. We look forward to discussing our proposal with you in further detail and hope to form a partnership to best meet the needs of the patients in your facility.

Wellpath has developed our price proposal based on the services required by the RFP, salary surveys for professionals in the geographic area surrounding Klamath County, the need to appropriately compensate qualified staff in a manner to ensure effective recruiting and retention, and our experience providing the required services in similarly sized facilities and other facilities with similar scope of services. We are pleased to share our vision for the KCSO medical program, which will include:

- Complete access to the entire portfolio of Wellpath health care program elements
- Our Care Management system with real-time reports available to the KCSO for tracking off-site patients and their care; Wellpath will also ensure proper communication with other agencies as it relates to off-site pre-approvals so that no additional or inappropriate financial liability will be incurred by the KCSO
- Wellpath Home Office management services, with Home Office and Executive Team support to provide direction, training, and assistance for all staff members
- Effective employee recruitment and retention initiatives through the Wellpath Human Resources department, who will assist on-site personnel with all HR needs, including professional training and benefits
- Complete access to Wellpath-negotiated contracts, including pharmacy, medical supplies, dental supplies, lab services, and mobile X-ray; our ongoing partnership and national buying power with these providers allows us to receive cost-effective and competitive pricing, and we will pass these savings on to Klamath County
- Regular reports and financial information to assist with the management of current and future costs; reports will include both budgeted and actual costs, as well as accrual logs for claims incurred but not yet processed, and Wellpath will provide benchmarking of other similar correctional populations, as needed, to assist the KCSO in comparing program costs with other facilities

The Wellpath proposal includes the services identified in the following chart.
### Staffing and Services Overview for Klamath County

<table>
<thead>
<tr>
<th>Professional Staffing</th>
<th>FTEs</th>
<th>On Call</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Services Administrator</td>
<td>1.00</td>
<td>✓</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>0.15</td>
<td>✓</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>0.40</td>
<td></td>
</tr>
<tr>
<td>Certified Medication Aide/CMA</td>
<td>2.80</td>
<td></td>
</tr>
<tr>
<td>Medical Records Clerk</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td><strong>Total Equivalent Full-Time Employees (FTEs)</strong></td>
<td><strong>5.35</strong></td>
<td></td>
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#### Professional On-site Services

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<th>Service</th>
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<tbody>
<tr>
<td>Medical Services</td>
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</tr>
<tr>
<td>On-Call 24/7—HSA</td>
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</tr>
<tr>
<td>Policies and Procedures</td>
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</tr>
<tr>
<td>Laboratory Services</td>
<td>✓</td>
</tr>
<tr>
<td>Disposable Medical Supplies</td>
<td>✓</td>
</tr>
<tr>
<td>Medical Waste Disposal</td>
<td>✓</td>
</tr>
<tr>
<td>Basic Medical Training - Jail Staff</td>
<td>✓</td>
</tr>
<tr>
<td>Comprehensive Medical Malpractice Insurance</td>
<td>✓</td>
</tr>
<tr>
<td>Corporate Management and Oversight</td>
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#### Medical Records and Care Management

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<tr>
<th>Service</th>
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</thead>
<tbody>
<tr>
<td>CorEMR</td>
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#### Pharmacy Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Cap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete Pharmaceutical Management</td>
<td>✓</td>
</tr>
<tr>
<td>Pharmaceuticals: Over-the-Counter</td>
<td>✓</td>
</tr>
<tr>
<td>Pharmaceuticals: Prescriptions</td>
<td>✓</td>
</tr>
<tr>
<td>Pharmaceuticals: Mental Health/Psychotropic</td>
<td>✓</td>
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</tbody>
</table>

#### Caps

<table>
<thead>
<tr>
<th>Service</th>
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<tbody>
<tr>
<td>(1) Annual Pharmacy Aggregate Cap</td>
<td>$35,000</td>
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**Annual Cost**

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<table>
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<tbody>
<tr>
<td></td>
<td>$717,108</td>
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</tbody>
</table>

*Wellpath understands per Addenda #1, Klamath County accepts the following list as being excluded from the pharmacy costs. High-cost drugs for HIV, hemophilia, cancer, hepatitis C, transplant anti-rejection, and biologicals.*
Changes in Scope of Work

The Wellpath proposed pricing reflects the scope of care as outlined in our proposal, the RFP requirements, and the current community standards of care with regard to correctional health care services. Should there be any change in or modification of the local, national, or community standards of care or scope of services, court rulings or interpretation, state or federal law or statute, or interpretation thereof, or sustained and demonstrated change in patient acuity in the Klamath County Jail that results in sustained and material changes in costs, coverage of costs related to such changes are not included in this proposal and would need to be immediately negotiated with Klamath County to ensure both parties’ interests are properly aligned. Changes, such as the opening of additional areas in the facility or new construction of additional space, not already outlined in the RFP would all be considered a change in the scope of service and require immediate renegotiation.

Exceptions

Per Section 3.11.2 of the RFP, Wellpath understands that conditions and terms may be modified at the time of contract negotiations.

Conclusion

Wellpath will operate the Klamath County health care program as a true partnership. The program will be compliant with all applicable standards, and we will provide quality patient care, efficient operations, and real time reporting. We look forward to discussing the details of our proposed program with you and we would be honored to begin a successful partnership with Klamath County.
Klamath County Sheriff’s Office
Klamath Falls, Oregon

Request for Proposal
Klamath County Jail Medical Services

Technical Proposal

July 17, 2020
2:00 P.M. PST

Respectfully Submitted to:
Leslie Barlow-Hunter, Contracting and Risk Manager
305 Main Street, Suite 216
Klamath Falls, OR 97601
541-851-3693

Submitted by:
WELLPATH®
1283 Murfreesboro Road, Suite 500
Nashville, TN 37217
800-592-2974
Tax ID# 32-0092573

Points of Contact:
Melissa Moberly
Director of Partnership Development
303-501-5160
mmoberly@wellpath.us

Kip Hallman
President
858-283-8619
kip.hallman@wellpath.us

This submission includes the following required copies:
Technical and Cost Proposal – 1 signed original, 1 electronic copy.

*WELLPATH is a registered trademark of Wellpath Holdings Inc. All Rights Reserved.*
Dear Leslie Barlow-Hunter and other members of the evaluation committee:

Thank you for the opportunity to submit our response for Klamath County Jail Medical. Outsourcing your healthcare program is a significant consideration for Klamath County, and Wellpath LLC has had tremendous success in working with current clients that have moved from a county-run program to privatization. Out of our 277 existing clients, 119 have made this same transition. Partnering with Wellpath will give the Klamath County Sheriff’s Office the ability to oversee the delivery of your jail’s healthcare program without having to manage the day-to-day operations or shoulder the risk. Our program offers tremendous advantages to privatization, which include:

- Collaborative Partnership
- Transparency
- Healthcare Correctional Industry Expertise
- Innovative Solutions
- Regional Leadership and Support
- NCCHC Standards of Care – 200 Nationally Accredited Facilities
- NCCHC Accreditation
- Reduced Liability
- Risk Reduction
- Established Policies and Procedures
- Employment Opportunities for Valued Current Staff
- Talent Acquisition Team with a Dedicated Recruiter
- Enhanced Clinical Education
- Leadership Development
- Cost Savings Realized from National Contract Pricing
- Specialty Telemedicine Network
- eConsult Network
- Reduced Transports for Off-site Appointments
- Continuous Quality Improvement Program
- Experience in Medication Assisted Treatment Program Implementation and Delivery
- Training for Correctional Staff
- Ongoing Training for Nursing Staff
- 24/7 IT & Network Development Support
- Experience in Medicaid Expansion and Affordable Care Act
- Proactive Medicare Enrollment
- Claims Management

This proposal outlines our plan to enhance your medical staffing and provide services following National Commission on Correctional Health Care (NCCHC) guidelines.

Wellpath is very familiar with the standards of care in Oregon as we provide healthcare services to several county jails in the State and our pool of nursing resources will benefit Klamath County as your healthcare provider. Collaborating with Wellpath provides the Klamath County Sheriff’s Office the ability to oversee the delivery of the program in your jail system without managing the day-to-day operations, all while still having transparency and collaboration in the program. We offer tremendous advantages to privatization.
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.

You will also encounter the green icon to the right of this paragraph, which clearly identifies areas within our proposal where cost savings advantages are to be gained by partnering with Wellpath.

This proposal demonstrates our capabilities and culture. We are passionate about what we do, and we value the clients we serve. Wellpath will commit the necessary resources for a successful healthcare program. We look forward to discussing the details of our program with you and developing a long-term partnership. Your primary point of contact for this proposal is Melissa Moberly, Director of Partnership Development: 303-501-5160 or via email at mmoberly@wellpath.us.

Sincerely,

Melissa Moberly  
Director of Partnership Development  
303-501-5160  
mmoberly@wellpath.us

Kip Hallman  
President  
858-283-8619  
kip.hallman@wellpath.us
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*CONFIDENTIAL AND PROPRIETARY ATTACHMENTS

This document contains “trade secrets” as defined by ORS 192.345(2). In accordance with ORS 192.345, it is exempt from disclosure pursuant to any request made under the Oregon Public Records Law. Wellpath respectfully requests that this document be withheld from any disclosure of records pursuant to the Oregon Public Records Law, and that it not be copied, distributed, or otherwise disclosed for any other purpose.
I. Company Experience and Qualifications

“Wellpath is the premier provider of localized, high-quality, compassionate care to vulnerable patients in challenging clinical environments. In October 2018, affiliates of Correct Care Solutions, LLC (CCS) and Correctional Medical Group Companies, Inc. (CMGC) combined to create one family of public and correctional healthcare companies now known as Wellpath. Our new name was created to encompass both companies as one with a clear new path to express our vision and care we provide to our partners, people and patients. While our name is new our experience is not with over 35 years of industry experience in correctional healthcare. The Klamath County Sheriff’s Office (KCSO) will benefit from the combined resources and experience of these leading public health companies.

Wellpath is specifically organized to provide comprehensive correctional healthcare services to facilities similar to the Klamath County Jail (KCJ), where we provide medical, dental, and mental health programs for individuals in custody. With each of our successful contracts and satisfied clients, we have demonstrated the necessary capabilities and resources that make us a qualified and willing partner for the KCSO. You will receive the same excellent level of service that our clients across the country have come to expect from us.

Today, nearly 16,000 Wellpath employees care for nearly 300,000 patients in 33 states, with more than 60,000,000 patient encounters each year. The knowledge we gain from the patients we treat throughout our client base leads to improved care for our patients at each individual site.
Our Mission
Our mission is to provide quality care to every patient with compassion, collaboration, and innovation.

We are committed to being a true solutions provider in the healthcare industry and in the communities we serve. With a constant focus on patient care, we offer innovative solutions and execute our operational plans in accordance with each client’s program objectives, as well as 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 out of the joining of two great companies that recognized 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 the dignity and compassion they deserve, 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.

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 among the Wellpath family as The Five Hs.

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 like to call The Five Ps.
Klamath County Jail Medical Services

Our values
THE FIVE Hs

HUMILITY
A mindset that ensures we never lose sight of our identity and our loyalty to those we serve and support.

HONESTY
A commitment to the highest level of personal and professional integrity with our partners and our patients.

HUNGER
A desire for all personnel to learn, teach and grow in a team-supported environment.

HARD WORK
A fundamental willingness to work harder and smarter in the interest of providing better service to our partners and patients.

HUMOR
A stress reliever that is essential for maintaining a positive, passionate attitude and a superior quality of life at work.

Our focus
THE FIVE Ps

PATIENTS
We consider patients’ needs and outcomes FIRST in all decisions we make.

PEOPLE
We value our patients, patients’ families, staff and all stakeholders.

PARTNERS
We strive to meet all deliverables as contracted and provide our partners with the best services.

PROCESSES
We believe that constant adherence to best practices leads to successful outcomes.

PERFORMANCE
We strive to perform above expectations in all areas of our business.

Services Provided
Wellpath provides a wide range of healthcare services, ancillary services, and products for our clients, including but not limited to:

- Medical care
- Dental care
- Optical care
- Mental health care
- On-site care
- Network development
- Infection control
- Disaster planning
- Medical intake/receiving screenings
- Comprehensive health assessments
- Triage and sick call
- Suicide prevention/intervention
- Withdrawal management and substance use disorder programs
- Radiology and laboratory services
- Medically necessary diet programs
- Special needs and chronic care
- Patient health education and awareness programs
- Facility/custody/law enforcement staff training programs
- Emergency and hospitalization arrangements
- Utilization management
- Reporting and consultation services
- Pharmaceutical supply and medication management
- Third-party reimbursement follow-up and processing
- Co-pay programs
- Cost recovery programs
- Catastrophic re-insurance coverage
- Continuous Quality Improvement (CQI) program
- Electronic Record Management Application (ERMA®)
• Continuity of care and discharge planning
• Telemedicine services
• Collaboration with community agencies
• Hiring/staffing
• Recruitment/retention plans

• National accreditation – NCCHC/ACA/CALEA
• Medication Assisted Treatment (MAT)
• Jail Based Competency Treatment (JBCT)

**Core Competencies and Strengths**
Wellpath is committed to maintaining a mutually beneficial partnership with KCSO based on continued communication that will create cost savings while helping you meet your program objectives.

**Hands-on Approach**
The Wellpath executive team is closely involved with the implementation and operation of services for our clients. Continuous communication helps minimize surprises and ensures a mutual understanding of decisions and protocols. To ease the transition of services, we prefer to meet with new clients and valued medical personnel within 48-72 hours of notice of contract award; the members of our proposed Regional Management Team will become familiar faces as they provide guidance and insight to members of the on-site medical team at the KCJ.

**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.

Upon notification of award, Wellpath will work closely with the KCSO to retain valued members of the current healthcare team. We will personally meet with current staff to answer questions and address concerns. This respect and consideration helps build a foundation for lasting trust and productivity.

**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 an economy of scale that creates savings we are able to pass on to our clients. Because we provide healthcare for nearly 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.

**Advanced Utilization Management**
The Wellpath Care Management system is a browser-based web application that allows us to track off-site care, ensure timely return to the facility, manage claims, and provide reports to assist with cost containment and budget preparation. Our Care Management system, which will be operational on Day One, will function 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.
Proven Success Managing Chronic Care
Wellpath has established many on-site programs and specialty care clinics for our current clients. 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.

Community Connection
A successful medical program has a positive community impact, and Wellpath is dedicated to establishing relationships within the communities we serve. We partner with local organizations to maximize continuity of care for each patient; we work with local agencies to develop training programs for nursing students and new security staff; and we seek out local charities 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. As we perform due diligence for the KCSO medical program, we will continue to communicate with area providers to form partnerships and enhance the continuity of care for your inmate population.

I.a. Experience
Wellpath has over 35 years of correctional healthcare experience. We also have several former Sheriffs and Jail Administrators in consulting roles who have nearly 175 years of combined law enforcement experience. Our entire team works together and will fully engage in the successful operation of programs and services at your facility.

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

Following is a sampling of Wellpath local detention clients with Average Daily Populations (ADPs) similar to the KCJ.

- Allegany County, MD (ADP: 140)
- Caroline County, MD (ADP: 100)
- Clare County, MI (ADP: 175)
- Dodge County, WI (ADP: 100)
- Kerr County, TX (ADP: 180)
- Barron County, WI (ADP: 142)
- Chippewa County, MI (ADP: 165)
- Columbia County, OR (ADP: 150)
- Glenn County, CA (ADP: 110)
- San Benito County, CA (ADP: 129)
Local Experience

Wellpath services clients in 33 states, and understanding the regional differences from state to state gives our company a competitive edge. As the current medical provider for nearby Jackson, Douglas, Lane, and Coos Counties, Wellpath already has staff in place in the surrounding counties who are ready to support our operations at the KCJ. We have a strong PRN pool of providers who are prepared and trained to fill positions in Klamath County if needed. With employees actively serving our Oregon clients, company knowledge, best practices, and local resources are readily available to support the success of the KCSO medical program.

I.b. Accreditation Experience

The Wellpath program for KCSO will meet or exceed community standards of care as well as standards established by the National Commission on Correctional Health Care (NCCHC). Should the KCSO choose to pursue accreditation in the future, the KCJ will be ready. Wellpath can ensure that the KCJ achieves and maintains full compliance with NCCHC standards. We have extensive experience achieving and maintaining NCCHC and ACA accreditation and can ensure that the KCSO medical program follows NCCHC standards.

Our accreditation history is well documented: We have never failed to obtain nor lost medical accreditation at any of our client sites. We conduct mock accreditation surveys at each facility 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 that 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, Jail Administrator
Waukesha County Sheriff’s Dept., WI
I.c. Substantiation

Current Clients

Wellpath is dedicated to continuously improving our services and program offerings for each client we serve. To illustrate our extensive experience in the field of correctional healthcare, and to give the KCSO the opportunity to review and validate our credentials, we have provided our comprehensive Client List with detailed contract information in Tabbed Attachment C. Please note that this information is confidential and proprietary.

Client Accreditation Status

Wellpath currently provides healthcare services for 201 facilities accredited by the NCCHC and/or ACA. The following table summarizes our current accreditation status. We have provided a detailed list of these accredited facilities in Tabbed Attachment D. Please note that this information is confidential and proprietary.

<table>
<thead>
<tr>
<th>Accrediting Agency</th>
<th>Number of Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCCHC, ACA &amp; CALEA (Triple Crown)</td>
<td>20</td>
</tr>
<tr>
<td>NCCHC &amp; ACA</td>
<td>21</td>
</tr>
<tr>
<td>NCCHC Only</td>
<td>46</td>
</tr>
<tr>
<td>ACA Only</td>
<td>114</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>201</strong></td>
</tr>
</tbody>
</table>

References

Client references along with major supplier references speaking to Wellpath's financial capability to carry out the requirements of the RFP have been included in Section X – References.
This page has intentionally been left blank.
II. Key Personnel

“Please provide a list of personnel and a general description of their duties, experience and certifications”

Wellpath will provide a full range of professional management services—from executive to site level—to support your medical program and to ensure the quality of our services. We take pride in being a large company that can offer volume-based buying power and resources to our partners, while still keeping our homegrown, family culture and hands-on approach to client service. Our clients feel supported and are always able to access our corporate management team.

Our program for the KCSO will be directly supported by our Regional Management Team and our Home Office in Nashville, Tennessee. Andrew Small, Regional Vice President, and/or Crystal Knoch, Regional Director of Operations, will visit the KCJ regularly to evaluate medical processes and meet with the administration. Melissa Moberly, Director of Partnership Development, will serve as the Wellpath liaison to KCSO for all aspects of the contract to ensure your continued satisfaction with our service. This is our corporate pledge to you.

Leadership Team

Our experienced Regional Management Team will strengthen communication and operational workflows in the Wellpath program. This team is familiar with state-specific requirements and will ensure a compliant program that meets or exceeds your needs and expectations.

Our leadership team will ensure that our programming follows the tenets of the contract between KCSO and Wellpath, as well as Wellpath protocols and industry standards. Clinical oversight will be provided by the site Medical Director, who will report directly to Vivek Shah M.D., Regional Medical Director. Operational oversight will be the responsibility of Crystal Knoch, Regional Director of Operations, and Andrew Small, Regional Vice President, who reports directly to Justin Searle, Executive Vice President of Local Government Healthcare.

Following is an overview of the qualifications of key leadership staff who will be involved with the implementation of Wellpath services in Klamath County and the subsequent management of operations. These are more than just names in a proposal, but rather faces you will see walking the hallways of the KCJ, supporting our program. To demonstrate the qualifications of our staff, we have provided detailed resumes for key personnel, including the Wellpath Executive Team and Regional Management Team, in Tabbed Attachment E.
Jorge Dominicis – Chief Executive Officer
Mr. Dominicis serves as the Chief Executive Officer for Wellpath. His role is to ensure operational excellence and to drive the organization’s strategic focus. Before joining Wellpath, Mr. Dominicis served for 10 years as President of GEO Care, during which time GEO Care increased revenue six-fold. Before that, he served 14 years as Vice President of Corporate Affairs at Florida Crystals Corporation, where he was responsible for all governmental and public affairs activity at the local, state, and federal level, as well as for the coordination of community outreach and charitable involvement. Mr. Dominicis also served in various public and government policy positions in Florida, including the St. Mary’s Medical Center Governing Board and the Criminal Justice Commission. He has a bachelor’s degree in business administration, finance, and international business from Florida International University.

Kip Hallman – President
Mr. Hallman became President of Wellpath in October 2018, following the combination of CCS and CMGC, where he served as CEO. He brings more than 30 years of diverse experience, including co-founding and growing a large national healthcare services company and leading the successful turnaround of a leading national diagnostic imaging company. As President, he is responsible for ensuring we exceed the expectations of our customers. Mr. Hallman has a passion for leading our team to achieve great results for our people, our patients, and our client partners.

Cindy Watson – President of Local Government Healthcare Division
Ms. Watson brings more than 25 years of healthcare experience to her role as President of the Local Government Healthcare Division. Her background includes a diverse blend of leadership operations, client services, technology, marketing, product management, sales, and business development. Ms. Watson has provided start-up direction, turn-around management, strategic business development, integration of acquisitions, and has driven organic growth. She combines exceptional communication skills at the executive and board level with team building, problem-solving, and the successfully balancing of strategic vision and tactical execution to achieve outcomes.

Thomas Pangburn, MD – Chief Clinical Officer
Dr. Pangburn joined Wellpath as Chief Clinical Officer in 2019. His primary responsibility is ensuring that we provide our patients with quality healthcare. He also works as a liaison between medical staff and administration to support positive channels of communication while ensuring appropriate care to all patients. Before joining Wellpath, Dr. Pangburn served as Chief Medical and Innovation Officer for MedExpress. A board-certified emergency medicine physician, he previously served as Director of Emergency Services at Heritage Valley Health Systems. Dr. Pangburn has also led clinical initiatives for UnitedHealth Group and Optum that addressed quality and total cost of care. His work tackled some of the toughest challenges facing healthcare, including chronic disease management, value-based payment innovation for providers and hospital systems, and community-based programs that focused on the consumer-centric experience,
affordability, and valued based medicine. Dr. Pangburn received his MD, Summa Cum Laude, from the University of Pittsburgh School of Medicine in Pennsylvania.

Andrew Small, RN, CCHP – Regional Vice President
Mr. Small began his career in correctional healthcare in 2008. Over the past decade, he has held and succeeded in multiple positions such as Nurse Supervisor, Director of Nursing, Health Services Administrator, Regional Manager, and now Regional Vice President. Mr. Small has provided fiscal and operational oversight for multi-million-dollar healthcare delivery systems by providing training, mentoring, and direction to site managers in the areas of budget, personnel, client relations, and leadership skills to develop team work and synergy to enhance overall operational performance. He also ensures patient care standards are maintained in compliance with accreditation regulations by leading site management teams in the development, evaluation, implementation, and monitoring of appropriate delivery systems.

Vivek Shah, MD – Regional Medical Director
Dr. Shah joined Wellpath in 2006 as a Regional Medical Director and provides clinical management and oversight to our contracted facilities in the Northwest region. Prior to joining Wellpath, he spent six years in group internal medicine practices in the states of Washington and Kentucky. Dr. Shah is affiliated with the American Medical Associating, the American College of Physicians, and the Society of Correctional Physicians. After completing his medical education in India, he completed his primary care internal medicine residency at Mt. Sinai School of Medicine in New York.

Wanda Streeter, RN, CCHP – Vice President of Operational Support, Local Government Healthcare Division
Ms. Streeter has more than two decades of experience in corrections. She began her career in correctional healthcare as an LPN and before long, she was an RN working as the Health Services Administrator for the Norfolk City Jail in Virginia. Ms. Streeter was so adept at running her facilities that she was asked to provide on-site support for the start-up team in DeKalb County, Georgia in 2011. Her proficiency in total patient care and operational management helped propel her to the position of Regional Manager for the State of Georgia, and later Regional Vice President for Georgia and South Carolina. Ms. Streeter has also served Wellpath as a Regional Director of Clinical Services. In 2018, she was promoted again to her current role as Vice President of Operational Support for the Local Government Healthcare Division. Ms. Streeter and her team support new site transitions, the Wellpath operations team and travel nurse program, and quality improvement monitoring.
Melissa Moberly – Director of Partnership Development & Transition Coordinator

Ms. Moberly has more than seven years of experience in the correctional industry. She is well respected throughout the industry for her integrity, professionalism, and knowledge, and for delivering on her commitments and developing mutually beneficial partnerships with her customers. As an active member of the Colorado Jail Association, she has earned the respect of her peers and often serves as a resource for information impacting the correctional Industry. Ms. Moberly is responsible for business development and coordinating the transition of new clients to Wellpath services. She will provide client support throughout the life of the contract.

Home Office Support

The Wellpath Home Office in Nashville, Tennessee, directly support our on-site medical and administrative staff. 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 retained staff members. Our Finance and Accounting teams provide regular and thorough reporting, and our IT department ensures that our technology meets the facility’s needs and requires minimal resources.

In addition to the proposed on-site staff, and the Wellpath Executive and Regional Teams, the KCSO medical program will be supported by the following Home Office personnel:

<table>
<thead>
<tr>
<th>Wellpath Home Office Resources for Klamath County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HR Manager</strong></td>
</tr>
<tr>
<td>Stephanie Popp</td>
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<tr>
<td>24/7 HR Support Line</td>
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<tr>
<td><strong>Employee Benefits</strong></td>
</tr>
<tr>
<td>Tanya Blake</td>
</tr>
<tr>
<td></td>
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<tr>
<td><strong>Employee Relations</strong></td>
</tr>
<tr>
<td>Joy Arsenault</td>
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<tr>
<td></td>
</tr>
<tr>
<td><strong>Healthcare Recruiter</strong></td>
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<tr>
<td>Nathan Suhaysik</td>
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<td><strong>TA Project Manager</strong></td>
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<tr>
<td>Ashley Martin</td>
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<td><strong>IT &amp; Network Development Support</strong></td>
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<tr>
<td>Richard Lee</td>
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<td>24/7 IT Support Line</td>
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<td><strong>Legal Counsel</strong></td>
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<td>Lori Schwartzmiller</td>
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<td><strong>Accounts Payable Manager</strong></td>
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<td>Rebecca Farris</td>
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<td><strong>Designated Payroll Coordinator</strong></td>
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<td>Sheila Simpson</td>
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<td><strong>Designated Care Manager</strong></td>
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<td>Lacey Meason</td>
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**Health Services Administrator**
Wellpath will assign a Health Services Administrator (HSA) who will be the designated Responsible Health Authority for the KCJ and will manage the KCSO healthcare program based on defined goals, objectives, policies, and procedures. The HSA is responsible for the successful delivery of healthcare pursuant to the contract.

The HSA oversees the administrative requirements of the medical program, including recruitment, staffing, contracts, data gathering and review, monthly reports as required, medical record keeping, and other contract services management. The HSA provides administrative supervision for the site Medical Director and all other medical staff, and performs the following essential job functions:

- Monitor the implementation and effectiveness of procedures and programs
- Evaluate financial/statistical data and program needs/problems, and make recommendations for improvements
- Develop, utilize, revise, interpret, and ensure compliance with Wellpath and facility policies and procedures
- Monitor subcontracted services, including pharmacy, lab, X-ray, and specialty providers
- Maintain communication and a good working relationship with facility administration, security staff, Wellpath employees, contracted providers, and outside agencies

The HSA is the single point of accountability in all matters related to the healthcare program, and has the authority and responsibility to resolve problems and ensure your continued satisfaction. The HSA coordinates contract requirements with facility administrators and works with them to address and resolve any issues in the performance of services.

**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.

**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 chose this profession to help others and give back to society. We provide them with one of the most meaningful ways to do that.

Our skilled and responsive Human Resources professionals facilitate the recruitment, development, and retention of healthcare professionals for our clients. Our dedicated Talent Acquisition team of physician recruiters, nurse recruiters, managers, and coordinators attract high-potential candidates, screen applicants, and conduct interviews.

We use competency-based behavioral interview questions and collaborate with our clinical and operational specialists to make informed hiring decisions. We verify credentials and licensure during the interviewing and screening process and select the best candidates based on qualifications, credentials, experience, references, interview results, and other key information.
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. Following are the results of our recruiting efforts in 2019:

- Total Hires – 7,039 (positions filled from internal and external applicants)
- Average Candidate Recruiting Cycle (Application to Offer) – 1 week

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 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. We give 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 conduct internal candidate interviews. We also welcome input from our clients during the interview process for key positions.

**College and University On-Site Recruiting**
Our proactive recruitment model is based on building relationships with resources in the communities we serve. We strive to hire locally, since hiring individuals with a vested interest in our healthcare mission better serves our patients.

A key part of our recruitment plan includes working with local nursing schools and residency programs to attract healthcare professionals to a career in corrections. We have developed programs for nursing students in many of our client facilities, and we have been expanding our outreach to residency programs. We have found that by increasing community interest and education regarding corrections, we are able to attract and recruit healthcare professionals who may have otherwise overlooked a career in correctional healthcare.

**Equal Employment Opportunities**
Wellpath is an Equal Employment Opportunity (EEO) employer with a thorough diversity policy to guide our 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 preference, marital status, age, disability, or national origin.

**Background Screening**
Wellpath cooperates fully with investigations conducted by our clients. We provide the name, date of birth, local address, social security number, and copy of driver’s license for all employment applicants. Wellpath also conducts a background investigation as a part of the application process. All proposed Wellpath staff, including any subcontractors, are subject to a criminal records check, fingerprinting, and a forensic panel drug screen before employment. All screened applicants must visit the facility before a formal decision of employment.
III. Specific Qualifications

“Please provide all the information; which Proposer consider pertinent to its qualifications for this project”

III.a. Organization

Wellpath is focused on a strategic plan that allows us to work efficiently and promotes 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, understands accountability and responsibility for all actions. As such, the full extent of our company resources are available to you. Please see the company organizational chart on the following page.
III.b. Penalties and Fines

Wellpath has not experienced and federal, state, and/or local government investigations conducted which resulted in fines, penalties. Wellpath has never been the subject of a federal, state, or local government investigation that resulted in loss of accreditation.

III.c. Terminated Contracts

Wellpath has responsibly completed all projects under which we have been contracted. In any instance 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.

In Tabbed Attachment F, we have provided a list of inactive contracts with explanations as to why each contract ended within the past 10 years. Please note that this information is confidential and proprietary. Some contracts that terminated early were acquired with the purchase of other companies. The reasons for terminations typically and historically have revolved around contracts that we elected to discontinue due to unacceptable risk. In every case, we exited in accordance with the contract terms.

III.d. Litigation

Wellpath’s litigation history is modest in light of the 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. Utilizing a collaborative and cross-functional team approach, we proactively identify areas of risk before they develop into serious problems, then work 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.

Litigation in the governmental healthcare industry is common, as it is in non-governmental healthcare businesses. As one of the nation’s largest providers of correctional healthcare (caring for nearly 300,000 patients daily and more than 2,000,000 patients annually), we believe our litigation history compares favorably and is indicative of the high quality of our services. A 2015 article published in the UC Irvine Law Review reported that an average of ten federal civil rights lawsuits are filed each year per 1,000 inmates; Wellpath’s litigation frequency falls well below this average.

Wellpath has strong relationships with experienced defense counsel in the jurisdictions where we operate, as well as an in-house team of experienced claims managers, who partner to defend claims related to the provision of healthcare services. 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 of time than those who are incarcerated in jails and detention centers. Nearly all of these cases are ultimately dismissed with no finding of liability against Wellpath.

Wellpath’s dedicated healthcare providers focus daily on quickly assessing and treating patients under incredibly difficult circumstances. Our robust Continuous Quality Improvement program and our membership in a national patient safety organization support our efforts to 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. According to a study of malpractice lawsuits against traditional hospital emergency departments, nearly one-third (32%) involved a payment by the provider, more than triple the rate of settlement payments in lawsuits against Wellpath.

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

We have provided the requested litigation history in Tabbed Attachment G. Please note that this information is confidential and proprietary.

**Protocols**
Per Addenda #1, Wellpath has provided descriptions of our services and will provide policies and procedures upon contract start.

**III.e. Financial Strength**
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.

In 2020, Wellpath expects to generate approximately $1.8 billion in annualized revenue while generating positive operating cash flows. Wellpath has access to a $65M revolving credit facility to provide for ongoing liquidity needs, if necessary.
IV. Standards of Care

“Ability to operate and provide the outlined health care program in a humane manner with respect to the inmates’ right to basic health care services to provide quality health care services at full staffing with only licensed, certified and professionally trained personnel”

Wellpath performs its obligations in compliance with all applicable local, state, or federal laws, rules, regulations, and orders. Our program for the KCSO will meet or exceed community standards of care, as well as standards established by the National Commission on Correctional Health Care (NCCHC), should the KCSO choose to pursue accreditation. We operate all of our programs at an appropriate level of care consistent with national standards for correctional healthcare. Our internal quality improvement programs guarantee that all Wellpath clients meet or exceed these standards.

U.S. Department of Justice Semiannual Report on the Orleans Parish Sheriff’s Office
The monitoring team, in a 154-page report, wrote that inmate medical care, which Gusman has outsourced to a third-party company called Correct Care Solutions (now Wellpath), appears to be “as close to constitutional requirements as in any recent years.”

“More work needs to be done, but the level of care has improved dramatically since Correct Care Solutions Inc. began providing services to perhaps the most physically and mentally ill population in Orleans Parish,” the report said.

The Advocate (September 9, 2015)

Humane Treatment
Wellpath provides inmates with healthcare services consistent with care available in the community. Our focus is operating a humane, legally defensible healthcare program for the KCSO. While acknowledging our responsibility to avoid unnecessary costs, we also ensure that patients receive the most appropriate care. We believe each decision related to a patient’s care should include asking ourselves, “What if this were my family member?”

Wellpath strives to provide care consistent with an inmate patient’s rights under the U.S. Constitution and KCSO’s philosophy related to the care, specifically that incarcerated individuals have a right to:

- Access healthcare services
- Professional medical judgment
- Care that has been ordered

We stress humane and respectful patient treatment in everything we do. Our employee handbook describes our company values, including “treating our people with respect and dignity.” Wellpath provides ethics training that teaches nursing personnel how to uphold that respect and dignity. Additionally, our Nursing Documentation Pathways (discussed in Section IV) demonstrate that Wellpath nurses care for patients in an ethical and humane way.

Licensing and Certification
Health services are provided by professionals who are fully qualified and appropriately licensed, certified, or registered in the state of Oregon. Wellpath ensures that all employees and contractors are
properly licensed or certified for their positions. We also maintain proof of malpractice insurance for all applicable employees.

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

**Credentialing and Privileging**

Wellpath’s credentialing process ensures that all 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 determine we will be making 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 Health Care Practitioner (HCP) must submit required forms, including:

- 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 the verifications are completed and files have been submitted, a Review Committee reviews the HCP’s credentialing file and denies or grants the HCP interim privileges. Final initial approval is given after references and other required documentation have been submitted and verified. Wellpath requires HCPs to be re-credentialed every three years on the anniversary date of the original fast track credentialing.

### Credentialing Criteria and Verification

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Verification Method</th>
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<tr>
<td>Valid, current, and unrestricted state professional license</td>
<td>Primary source verification through issuing state</td>
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<tr>
<td>No recorded revocation or limitation of professional license</td>
<td>Primary source verification and National Practitioner Data Bank</td>
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<tr>
<td>Current DEA privileges with no involuntary restrictions</td>
<td>Primary Source verification with Federal DEA</td>
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<tr>
<td>Current state Controlled Substance Registration with no involuntary restrictions</td>
<td>Primary Source verification with the appropriate state agency</td>
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<tr>
<td>Acceptable malpractice claims history</td>
<td>National Practitioner Data Bank</td>
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<tr>
<td>Graduation from accredited medical school (or other professional program for non-physician professionals)</td>
<td>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</td>
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<tr>
<td>Acceptable completion of accredited residency program</td>
<td>American Medical Association (AMA) report</td>
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<tr>
<td>Never been subject to any medical staff monitoring or special review activity of public record (or reasonably discoverable upon proper inquiry)</td>
<td>National Practitioner Data Bank</td>
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<tr>
<td>No recorded expulsion or suspension from receiving payment under Medicare or Medicaid programs</td>
<td>National Practitioner Data Bank and verification of no reports from the Office of Inspector General (OIG)</td>
</tr>
<tr>
<td>No recorded conviction or charge of a criminal offense</td>
<td>National Practitioner Data Bank</td>
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<tr>
<td>No record of disciplinary actions in prior states in which provider practiced</td>
<td>National Practitioner Data Bank</td>
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<tr>
<td>Board certification in listed specialty (where certification is applicable)</td>
<td>American Medical Association (AMA) report</td>
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### Personnel Files

Once on-site personnel are selected, Wellpath provides facility administration with applicable certification and licensing information. Before employment, Wellpath provides copies of all 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.

Personnel files of Wellpath and contract employees assigned to the facility are maintained at the Home Office and on site, and are readily available to facility administration. Personnel files include copies of current registration or verification certificates for licensed practitioners. We provide updated data and other relevant information upon request.
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V. Operation of Statement of Work

“Clearly states how operation will run in a cost-effective manner with full reporting and accountability to the Klamath County Sheriff’s Office”

Wellpath will provide a healthcare delivery system specifically tailored to KCSO’s requirements. Our managed care system promotes efficiency and reduces cost by eliminating unnecessary services and encouraging preventive health measures. 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. Wellpath operates with complete transparency and accountability to our client partners.

V.a. Medical Health Services

V.a.1. Intake Health Receiving Screening

Wellpath staff screen arrestees on their arrival at the facility for emergent or urgent health needs. Our receiving screenings also emphasize the identification, referral, and treatment of individuals with acute and chronic healthcare conditions. We screen for behavioral health disorders, suicide risk, withdrawal risk, and dental issues, and assess the need for medication, isolation, or close observation. The receiving screening sets the course for the patient’s medical care throughout their 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 provide adequate staffing to ensure timely evaluation of intake orders and to stabilize patients with medical and mental health issues as quickly as possible and initiate any needed medications. We allocate properly trained and authorized healthcare staff to conduct receiving screenings, 7 days a week, including holidays.

Wellpath receiving screenings meet NCCHC standards and minimally include:

**Direct visual observation:**

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

**Clinical screening into current illnesses, health problems, and conditions:**

- Illnesses and special health needs, including allergies
- Current medications
- History of hospitalization
- Dental conditions or complaints
• History of tuberculosis or other infectious diseases (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
• Any current pain
• Notation of personal physician and known medical risks

Testing and initial assessments:
• Recording 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 the individual’s right to healthcare
• Information on how to access medical, dental, and mental health services, provided both verbally and in writing in a language the individual understands
• Oral health and hygiene education
• PREA screening and education regarding sexual assault
• Information on the grievance process
• Documentation of informed consent

Verification and referrals:
• Examination of medications brought into the facility
• Verification of 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
• Verification of medically necessary special diets
• Current health insurance coverage, if any
• Referral for mental health evaluation as indicated
• Referral for emergency, specialty, or dental care as indicated
• Referral for placement/housing (e.g., general population, medical observation, mental health observation, suicide watch, etc.)
• Referral of disabled individuals to the physician to determine the need for medical treatment

Wellpath staff notify security staff of patients needing special oversight, treatment, or management and 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**

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 instruction on how to complete the receiving screening form and when to contact medical staff to determine disposition.
CorEMR Intake Screen Form

Admission Deferrals

Admission requires clearance for serious, urgent, or emergent injuries or medical problems. Intake staff may identify arrestees whose clinical status suggests a need for urgent or emergent health services beyond the scope of care immediately 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 is based on 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

Access to Care

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 make provisions to ensure that arrestees who do not speak English understand how to obtain healthcare.
**Medication Verification**

Intake staff ask arrestees whether they were undergoing medical, dental, or mental health treatment prior to arrest. They also obtain information regarding the arrestee’s medical provider(s) in the community. Intake staff contact the providers to ask about current treatment and verify any prescribed medications to facilitate continuity of care.

We 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 expedite medications for life-threatening or serious chronic diseases by obtaining them from a local backup pharmacy.

Wellpath bridges non-formulary medications for up to 30 days to prevent a break in care while allowing time for a clinician 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 beyond the initial bridge order, the prescribing clinician requests continuation of the medication using the Wellpath Non-Formulary Medication Request process described in section **V. Pharmaceuticals**. Continuation requires clinical rationale for the medication.

**Health Assessments**

Wellpath staff conduct a comprehensive health assessment, including a complete medical history and physical examination, for all patients within their first 14 calendar days in custody. We typically target day 10 for health assessments to ensure completion within 14 days as required by NCCHC standards. This also allows us to identify medical needs or conditions not disclosed by the patient during intake and initiate timely and appropriate treatment. Wellpath staff 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 in accordance with local regulations. Before performing health assessments, RNs must complete physical exam training provided or approved by the responsible physician or designee. The RN must pass a written test and successfully demonstrate an exam for the physician, who signs 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. Abnormal health assessment results are reviewed by a physician or mid-level provider for disposition.
The comprehensive health assessment minimally includes the following:

- 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 is included in the patient’s permanent medical record.
**Medical Health Care Services**

Wellpath ensures appropriate and timely access to specialty care and schedules 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 schedules 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, we authorize, schedule, and coordinate the provision of services with local providers.

**Wellpath Care Management System**

Wellpath will implement our web-based Care Management system at the KCJ to be operational on Day One of the contract at no additional cost. Our Care Management 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 our clients with cost containment and budget preparation.

The Care Management system will function alongside your Jail Management System (JMS), EIS, to ensure accurate reporting. Appropriate county staff will have 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 can offer a level of automation and accuracy in reporting.

**Advanced 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 together with Regional Medical Director, Dr. Shaw, and on-site medical personnel to ensure that patients receive medically necessary healthcare services in the most appropriate setting.

Wellpath coordinates, validates, and tracks off-site care and invoicing through the Care Management system. Our established review process ensures that off-site referrals are medically necessary and that 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:
   - Authorizes a specific diagnostic or therapeutic modality
   - Recommends an alternative treatment plan
   - Requests 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, we can 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 are able to review every invoice to ensure that the KCSO is only billed for the approved services.

5. If a patient is released from custody before a scheduled appointment, Wellpath notifies the community provider that KCSO is no longer financially responsible and removes the pending appointment from the system.

6. The site Medical Director reviews and addresses discharge summaries and medical recommendations that the community provider makes.
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 our clients. 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 telemedicine 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.

**On-Site Specialty Services**

Wellpath provides as many on-site medical services as possible to limit the number of patients who need 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 we are dedicated to reducing unnecessary costs and community risk associated with off-site care when it makes sense to do so.

We have successfully established many on-site programs and specialty care clinics across the country. Upon contract award, we will evaluate statistics regarding off-site specialist consultations and 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 will continuously evaluate the potential benefits of the following on-site clinics and implement them as appropriate:
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 (described in section V. Operation of Statement of Work) creates more clinical control and cost efficiencies for both on- and off-site healthcare services.

**Off-site Services**

Wellpath arranges 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 initiate referrals for off-site treatment through our Care Management system 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 screen shots 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**
Submitted Requests View – Care Management System

Appointment Scheduling

Once the referral is approved, Wellpath staff schedule an appointment through the Care Management system. Appointment scheduling through the Care Management system is a valuable tool for medical staff as they prioritize 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 screen shots show various views of the appointment process in the Care Management system.
Appointment Scheduling – Care Management System

Sample Scheduled Appointments List (On Site)
Sample Scheduled Appointments List (Off Site)

Transportation and Security
Wellpath coordinates transportation and security with security staff for all off-site services. Healthcare staff work cooperatively with security staff to ensure that transportation services are provided in a timely and safe manner. Patients are not informed of scheduled appointment dates, times, or the location of outside providers.

Wellpath staff provide security staff with advanced written notice of scheduled appointments. We attempt to consolidate the scheduling of off-site appointments with hospitals and other healthcare providers to minimize the impact on transportation personnel and available vehicles.

Transfer of Medical Information
Pertinent medical information accompanies patients traveling off site to a specialty appointment, hospital, another detention/correctional facility. Upon transfer to another facility, the patient travels with a medical transfer form containing all necessary information required for the continuation of treatment.

Documentation and Follow-up
Wellpath keeps an active log of off-site care. 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.

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 an inpatient hospitalization.
Sick Call and Triage

A responsible triage and sick call program is one of several critical operating systems for adequately and expeditiously caring for 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 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.

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 make provisions to ensure that arrestees who do not speak English understand how to obtain healthcare.

Patients have access to sick call request forms that meet all standards and guidelines. Security staff can also make referrals if they have concerns for an individual’s health status. All medical complaints are recorded, along with a recommended intervention and referral to appropriate healthcare staff.

Wellpath ensures that 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. We understand the importance of decentralized services for minimizing inmate movement, so we conduct sick call services and nursing encounters in housing units to the fullest extent possible.

Nurse Triage and Follow-up

Qualified nurses 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. Following the triage of 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.

The sick call nurse assigns each sick call request a disposition of Urgent, Priority, or Routine, and each patient is addressed within the appropriate timeframe. Requests that are triaged as emergent receive immediate attention. Urgent requests are scheduled for the next provider sick call clinic. Should the need arise outside the scheduled sick call, patients requiring urgent or emergent medical attention are seen the same day.
During triage, the nurse initiates referrals for patients needing consultation with the medical provider. If the patient needs to see more than one provider (i.e., medical, dental, and/or mental health), we make additional referrals. The nurse documents the referral on the request form.

**Nursing Documentation Pathways**

Wellpath nurses conduct sick call using Nursing Documentation Pathways (NDPs), which our physicians developed to assist nurses with treatment recommendations and promote consistent caregiving. The NDPs provide a **consistent structure for patient care, justification for actions, and a set of interventions specific to the patient’s presenting condition.** Their purpose is to 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 Nursing Documentation Pathway is a decision-tree process for nurses to follow, which also improves ease of training and maximizes practitioners’ time. All Wellpath nurses are trained to use the NDPs, which cover topics such as:

- Abdominal Pain
- Allergic Reaction – Emergent
- Altered Mental Status
- Behavioral Health Complaint
- Chest Pain
- Cold/Allergy Symptoms
- Conditions Not Requiring Medical Treatment
- Dental Complaints/Pain
- Ear Complaints
- Eye Complaints
- Female-specific Complaints
- Fever
- Gastrointestinal Complaints
- Headache
- Heat-related Illness
- Hyperglycemia
- Hypertension
- Hypoglycemia
- Male-specific Complaints
- Musculoskeletal Complaints
- Neurological Impairment
- Nosebleeds
- Pregnancy, 20 Weeks or More
- Pregnancy Less Than 20 Weeks
- Respiratory Complaints
- Self-injurious Behavior
- Skin Problems
- Trauma
- Urinary Complaints
- Use of Force
- Withdrawal, Alcohol and Benzodiazepine
- Withdrawal, Opiate
- Wounds

The NDPs manual for each facility is subject to approval by facility administration. The site Medical Director reviews the manual annually and the Wellpath Nursing Department makes the necessary updates. The site HSA and/or DON instructs the nursing staff on revisions, as applicable.
**Medical Health Care Plans**
Wellpath provides multidisciplinary treatment plans and customized treatment and case management programs for patients in need of special accommodation to help ensure proper placement, necessary care, and continuity of care throughout incarceration. We will provide a case review of any patient upon KCSO’s request.

Perhaps the most important factor related to successful re-entry is the stabilization of mental health issues before release from custody. It is very difficult for an individual to successfully navigate free world expectations when he or she is actively experiencing symptoms of a serious mental illness. Therefore, Wellpath offers a variety of mental health services designed to achieve stability as quickly as possible. These services, along with a proactive discharge planning program that identifies needs and arranges for community services to address them, are designed to build as much structure as possible around the individual to prepare for their release.

**Continuity of Care**
Wellpath ensures complete care coordination of our patients’ medical and mental health needs, from intake to release. We view ourselves as part of the community health continuum and are dedicated to working with community providers when their clients are admitted to a detention setting.

Wellpath establishes and maintains relationships with community organizations to obtain previous treatment information, including medical and mental health records, to ensure continuity of care. We are committed to actively connecting our programs with community efforts, which allows us to obtain information regarding community treatment regimens and refer patients before release to appropriate community programming.

During the receiving screening, Wellpath staff ask each arrestee about current providers and medical, dental, or mental health treatment in progress. When it is determined that an arrestee was receiving medical or mental health care in the community, nursing staff ask the arrestee to complete a Release of Information (ROI) so they can request and obtain treatment information from community providers to facilitate continuity of care. The ROI also allows our staff to begin the medication verification process. The ROI form complies with HIPAA and will be submitted to KCSO for approval.

**Health Promotion and Access to Care**
Much of the incarcerated population suffers from poverty, homelessness, lack of health insurance, mental health issues, and ongoing substance abuse. These same groups are often the ones most in need of care. Budget cuts to health and human services in many communities have made accessing healthcare even harder for many of the underserved patients who need it most. We understand that we may be the only chance some patients have to access quality medical and mental health services, and we take that responsibility seriously.

Most offenders are under our care for a limited time, so we focus on health education and discharge planning from Day One. Beginning at intake, Wellpath helps patients manage their conditions and informs them of resources in the community to help them after release. Our goal is to educate patients about all resources available to them to help meet the challenges faced in sustaining a healthy and crime-free lifestyle long after they have been released from custody. That is why we work hard to provide as many community resources as possible to enable discharged patients to continue their
treatment plans, with the goal of enhancing their physical and mental health and reducing the likelihood of recidivism.

V.a.2. Laboratory and Other Testing Services

Wellpath authorizes, schedules, and coordinates 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 the necessary follow-up care for health problems identified by any health screenings or diagnostic tests.

Consistent with the Wellpath care philosophy, diagnostic services are provided on site to the extent possible. We provide the necessary staff and supplies for on-site care and treatment of our patients, including medical, radiology, laboratory, dental, and other supplies. Our Periodic Automatic Replenishment (PAR) level inventory system ensures we have the supplies needed for the continuation of proper care.

Laboratory Services

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

Our laboratory program includes supplies and a dedicated printer, timely pickup and delivery, and accurate reporting within 24 hours on most labs. We ensure that all qualified healthcare personnel are trained to collect and prepare laboratory specimens. The majority of phlebotomy and lab services can be processed on site, including:

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

A medical provider reviews and signs off on all laboratory results, which are reported via a dedicated printer. If test results indicate a critical value, the provider receives a telephonic alert. Laboratory results are reviewed within 24-48 hours (72 hours for weekends and holidays); the provider is notified immediately to review all STAT lab reports and any abnormal test results. Where preliminary results are available, they are also presented for medical review.

We train on-site staff on our laboratory policies and provide a diagnostic procedure manual that includes reporting on STAT and critical values. All diagnostic laboratory reports and resulting plans for follow-up care are documented in the patient’s medical record.

On-site services are performed in accordance with the Clinical Laboratories Inspection Act (CLIA) and in compliance with the Clinical Laboratory Improvement Amendments of 1988. The laboratory program for the KCJ will comply with all standards set forth by the American College of Pathology and all state requirements for medical pathology, specimen handling, testing, and reporting.
Blood Borne Pathogen Exposure
Wellpath has policy in place to ensure any staff who have been exposed to a blood borne pathogen are safely and quickly tested. Wellpath comply with the process established in OAR 333-022-0300 and will work to ensure a source person is tested. Should the source person refuse testing or has failed to obtain a test within the time period established in that rule, the exposed staff person may petition the circuit court for the county in which the exposure occurred and seek a court order for mandatory testing in accordance with ORS 433.080.

Lab Formulary
Wellpath and LabCorp use a lab formulary to manage laboratory costs. We receive discounted pricing for lab tests that we renegotiate on a regular basis to ensure savings for our clients. The lab formulary includes the most commonly required tests, which allows Wellpath staff to expedite the ordering process by easily selecting the appropriate tests.

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

X-ray Services
Wellpath will identify the most cost-effective and comprehensive radiology program in consultation with KCSO. We propose on-site radiology services through our national contract with MobilexUSA. 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 KCSO to establish a routine schedule for on-site radiology services, including:

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

Results can be provided electronically, via fax, or on paper. Wellpath logs the type and number of X-rays completed and the results received. Medical personnel review the log daily for any outstanding test results 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 institution if a report necessitates immediate intervention. The site Medical Director or physician/mid-level designee is notified of abnormal radiology results and reviews, initials, and dates all X-ray reports within five working days.

Wellpath staff document and store digital images and radiology reports in the patient’s electronic medical record. The site Medical Director or physician/mid-level designee meets with the patient to discuss results and establish a plan of care. Patient follow-up is noted in the medical record.
V.a.3. Chronic Care
Wellpath has provided information on our Chronic Care program in Section VI – Specialty Needs.

V.a.4. Best Practices
Wellpath will coordinate with KCSO to facilitate monthly administrative meetings to evaluate statistics, program needs, problems, and coordination between security, medical, and mental health staff. We will continually communicate with KCSO administration regarding all contract matters, including but not limited to project coordination, status meetings, and status reports.

Active, open, and honest communication is essential to sustaining a successful healthcare program. The HSA is responsible for maintaining open communication and effective working relationships with facility administrators, Wellpath employees, security staff, contracted providers, and outside agencies. The HSA acts as a liaison between healthcare and security staff and holds multidisciplinary meetings to promote continued communication and cooperation between custody and care providers.

Collaboration with Security Staff
Wellpath will maintain a collaborative and open relationship with KCSO in the provision of services and operations, day-to-day activities, future planning, and evaluation of services. We will ensure ongoing communication between healthcare and security staff to ensure that all parties are fully aware of special needs or concerns among patients.

Wellpath staff provide appropriate facility staff with information needed for the classification, security, and control of individuals in custody. We notify security staff if patients have a significant illness that may impact housing or program assignments, disciplinary sanctions, or transfer to another facility. This includes sharing special needs treatment plans with facility staff to ensure appropriate housing and proper treatment for patients with long-term and individualized healthcare needs.

The Wellpath Whiteboard Method
Wellpath will implement a “whiteboard method” for managing healthcare services at the KCJ. The Wellpath whiteboard method creates a real-time HSA Command Center that provides an interactive communication system for all stakeholders in the facility.

Wellpath staff are charged with advocating for our patients, executing policy and procedure, and representing our clients’ needs, while simultaneously weighing potential liability and risk to all involved. The whiteboard enhances organization and streamlines information-sharing, with excellent patient care as the driving force.

The whiteboard method promotes the philosophy that every facet of our complex system is a known entity. The whiteboard is a reporting tool that demonstrates a global awareness of overall facility operations. It provides an accurate snapshot of the site’s responsibilities for that day, that month, and that year, from high-priority medical cases and infection control statistics to site expenditures and upcoming events.
The whiteboard is divided into categories that serve as the foundation of operational and clinical discussions that take place during daily morning briefings at our sites, which facility administrators are invited and encouraged to attend. This visual map serves as an outline that provides shape and structure to the focused review of salient topics.

Whiteboard categories are site-specific and may include pregnant patients, inpatient status, appointments, medical housing, special needs housing, mental health housing, screening exceptions, withdrawal protocols, and/or high-acuity patients.

All teams are aware of the whiteboard’s importance in guiding daily activities at the facility, and every staff member participates in daily whiteboard meetings. Key information from daily briefings is translated onto the board by leaders who are assigned to update specific areas. Every employee is empowered to “own the board,” since its contents should include pertinent items communicated via email, in-person conversation, or reported in a log. No information sharing is considered too small or insignificant.

**Collaborative Clinical Innovations**

Wellpath has had proven success collaborating with our clients in the development of innovative solutions for their healthcare programs. Following are examples of these collaborations.

- The Maryland Board of Nursing (MBON) issued a directive that Certified Medication Technicians (CMTs) practicing in correctional facilities in the State of Maryland must also be trained as Certified Nursing Assistants (CNAs). In cooperation with the MBON, we initiated a training program to address this directive and developed an *Orientation and Training Program for Certified Nursing Assistants (CNAs)* for staff at our Maryland facilities. Our training manual became the model for the MBON’s training program within the State of Maryland.
• The Mental Health Scoring Classification System we designed and developed with the Westchester County Department of Correction (WCDOC) in Valhalla, New York, was modeled after the New York State correctional system’s scoring criteria, making WCDOC the first jail to mirror the state system with a common language about psychiatric functioning. This system places the WCDOC at the forefront of correctional mental health care.

V.a.5. Medication Management
Wellpath has outlined our Medication Management best practices in Section V.f. – Pharmaceuticals.

V.a.6. Continuous Quality Improvement Program
Wellpath is dedicated to continuously improving our services and program offerings for our clients. Our policies and procedures, which are based on NCCHC and ACA standards, ensure that our patients receive quality, compliant healthcare. We use proven performance monitoring techniques like our Continuous Quality Improvement (CQI) program, Medical Audit Committee (MAC), and peer reviews to evaluate our healthcare programs at each site we serve.

Continuous Quality Improvement Program
Wellpath’s data-driven CQI program includes audit and medical chart review procedures to ensure compliance with contract requirements and established performance measures. The goal of the CQI program, which operates under the authority of our Chief Clinical Officer, is to maintain systems and programs that ensure our patients receive quality care. The CQI program will ensure that clinical care delivery at the KCJ meets or exceeds our high expectations, as well as NCCHC and ACA standards.

Within 90 days of contract implementation, Wellpath will develop a site-specific CQI plan for the KCJ based on the scope of care provided. The CQI plan will assess on-site and off-site healthcare services for quality, appropriateness, and continuity. We will use the CQI plan to review and define the scope of care provided within the system, as well as the CQI review process and meeting format. We will coordinate with KCSO to integrate our program with any quality assurance initiatives currently in place.

Upon transitioning a new contract, our Home Office CQI team conducts a series of one-hour onboarding calls for on-site team members. The onboarding calls take place monthly for the first four months of the contract. After that, on-site staff follow the Wellpath CQI calendar for program auditing and review. The CQI team is available at any time to help on-site staff implement and coordinate the CQI plan.

Scope of CQI Program
Wellpath conducts CQI studies to ensure services at each facility meet established minimum thresholds. We 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.
Please see the following sample CQI Calendar, with monthly CQI screens broken out by responsible party.

<table>
<thead>
<tr>
<th>Month</th>
<th>Nursing</th>
<th>Site Medical Director</th>
<th>Mental Health</th>
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</thead>
<tbody>
<tr>
<td>Jan.</td>
<td>• Chronic Care Services</td>
<td></td>
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<tr>
<td>Feb.</td>
<td>• Site-specific Study</td>
<td>• Scheduled &amp; Unscheduled Off-site Care</td>
<td>• Suicide Prevention</td>
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<td></td>
<td>• CQI Meeting</td>
<td></td>
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<tr>
<td>March</td>
<td>• Alcohol/Benzodiazepine Withdrawal</td>
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<td></td>
<td>• Opiate Withdrawal</td>
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<tr>
<td>April</td>
<td>• Medication Administration</td>
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<td>• Segregation</td>
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<td></td>
<td>• Pregnancy Care</td>
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<tr>
<td>May</td>
<td>• CQI Meeting</td>
<td>• Physician Chart Review</td>
<td>• Suicide Prevention</td>
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<td></td>
<td>• Initial Health Assessment</td>
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<td></td>
<td>• MAT</td>
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<tr>
<td>June</td>
<td>• Dental Care</td>
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<td></td>
<td>• Dietary Services</td>
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<tr>
<td>July</td>
<td>• Receiving Screen &amp; Med Verification</td>
<td>• HIV</td>
<td>• Psychiatric Services – HEDIS</td>
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<tr>
<td>Aug.</td>
<td>• Site-specific Study</td>
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<tr>
<td></td>
<td>• CQI Meeting</td>
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<tr>
<td>Sept.</td>
<td>• Ancillary Services</td>
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<td>• Suicide Prevention</td>
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<td></td>
<td>• Emergency Services</td>
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<tr>
<td></td>
<td>• Diabetes – HEDIS</td>
<td></td>
<td></td>
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<tr>
<td>Oct.</td>
<td>• Alcohol/Benzodiazepine Withdrawal</td>
<td></td>
<td>• MH Special Needs &amp; Treatment Planning</td>
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<td></td>
<td>• Sick Call</td>
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<tr>
<td>Nov.</td>
<td>• CQI Meeting</td>
<td></td>
<td>• Infirmary Level Care</td>
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<td></td>
<td>• Patient Safety (review YTD)</td>
<td></td>
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<tr>
<td>Dec.</td>
<td>• Annual Review of CQI Program</td>
<td></td>
<td>• Suicide Prevention</td>
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<tr>
<td></td>
<td>• MAT</td>
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</table>
Site-specific Studies
Wellpath completes monthly CQI screens outlined in the CQI Calendar, plus at least one ad hoc screen per quarter to evaluate a site-specific issue presenting challenges. Examples of ad hoc screens include:

- Missed Medication (investigative study)
- TB Screening
- Health Assessment – Periodic
- Grievances
- Communication with Custody
- Initiating Essential Medications – Return from Hospital
- Prenatal and Postpartum Care – HEDIS and Outcome Study
- Asthma Outcome Study

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

- 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 into DTW)

If a site requires more frequent CQI meetings, or additional studies, the requirements are adjusted.

Quality Improvement Committee
A multidisciplinary Quality Improvement (QI) Committee will direct all CQI activities at the KCJ. The site Medical Director will lead the QI Committee, which will also include the HSA, site Safety Coordinator, designated mental health representative, and appropriate KCSO representative(s). The QI Committee will be 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. Wellpath marks all CQI activity records as 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.
**High-risk Items**

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

- **Critical Clinical Event (CCE) Reviews** – The QI Committee will monitor, review, and report on the healthcare staff’s response to critical clinical events. The QI Committee will use the root cause analysis problem solving methodology to review the CCE.

- **Emergency Drill Reviews** – The QI Committee will monitor, review, and report on the healthcare staff’s response to emergency drills.

- **Environmental Inspection Reports** – Wellpath will participate 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 will track deficiencies identified during routine environmental inspections through resolution.

- **Utilization Management** – Wellpath will monitor 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 will review and categorize grievances to identify potential issues and determine if patterns exist or develop. Patient satisfaction surveys will be administered on topics relevant to the patient population.

- **Pharmacy** – Wellpath will ensure quality pharmacy programming through regularly scheduled on-site inspections performed by a consulting state-licensed pharmacist. We will document inspection reports and maintain them on file, and the consulting pharmacist will provide a summary of these discussions and actions to the QI Committee.

**Pharmacy Reports** – Wellpath will use pharmacy reports to identify outliers and trends, then evaluate and address all outliers. The Regional Medical Director will review pharmacy utilization data regularly.

**Medical Audit Committee**

Wellpath will establish a Medical Audit Committee (MAC) to oversee all healthcare functions at the KCJ. 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 KCSO administration to coordinate MAC meetings, which will typically include:

- Health Services Administrator (HSA)
- Medical Director
- Designated KCSO representative(s)

Discussions will include monthly health services statistics by category of care, current status of the healthcare program, costs of services, coordination between security and health services, and identified issues and program needs. The MAC will also review and categorize grievances to identify potential issues and to determine whether patterns exist or are developing. Meeting minutes will be documented, distributed to attendees and KCSO administration, and maintained for reference.
Wellpath will provide KCSO with monthly and quarterly reports regarding the clinical operation of the healthcare program, in accordance with NCCHC and ACA standards. We will regularly confer with KCSO on issues deemed appropriate, such as existing procedures and proposed procedural changes.

**Review of Processes, Systems, and Care**

Wellpath will work collaboratively with KCSO to review the quality of our program and ensure compliance with the requirements of the contract. We will cooperate with any studies and audits conducted by KCSO and will provide any required information for review. We will also participate in the preparation of responses to critiques, and will develop and implement plans to address/correct identified deficiencies. We will use the audit findings to address areas needing improvement during staff meetings and trainings.

Wellpath also conducts our own periodic site audits, reviews, and evaluations to identify operational barriers. We relay any issues to the appropriate regional and corporate staff members for immediate action. Through these audits and reviews, as well as utilization reviews and CQI meetings, our dedicated team members evaluate operational procedures and implement changes to remove any compliance obstacles.

We continually evaluate performance and assess training requirements to ensure that our program is responsive to changing operational and regulatory requirements, as well as trends in the provision of care. If we find performance issues or areas in need of improvement, we implement appropriate corrective action to address them and avoid them in the future. Our on-site managers and Regional Management Team work with facility administrators on areas requiring correction or adaptation to ensure optimal patient care.

**Example of Results from Patient Impact Studies**

Several participants in the Louisville (Kentucky) Metro Detention Facility’s Home Incarceration Program died in 2016. Although Wellpath is not required to review deaths that occur out of custody, we believe that reviewing deaths proximate to care can be just as helpful as reviewing in-custody deaths in identifying opportunities for improvement.

Wellpath reviewed these out-of-custody deaths and found that many were related to opioid overdose. Although the finding did not have bearing on the care we provided while these individuals were in custody, we took the initiative to launch a new educational harm reduction program at the Detention Facility. As part of the intake screening, every arrestee receives an educational brochure on ways to reduce the risk of overdose. The brochure covers the effects of returning to using the previous dose of opiates after detoxification, how to access Narcan, and what do if the individual or someone else is in a suspected overdose situation.

Deaths among Home Incarceration Program participants have decreased since we introduced the educational harm reduction program. Although we cannot contribute all of these positive results to the educational program, we believe it has had a significant impact.

**V.a.7. Medical/ Special Diets**

The special needs screening performed at intake includes verification of medically necessary special diets. Wellpath staff can also make recommendations regarding special dietary needs based on the patient’s medical history and physical evaluation. Wellpath only prescribes therapeutic diets, not preferential diets, and ensures that any documented food allergies are medically indicated.
Wellpath staff will work closely with the KCJ’s Food Services Supervisor to communicate special dietary needs and share suggestions for recommended diets. We will review patients with special dietary needs every 90 days and notify the patient and the Food Services Supervisor if a special diet is no longer required.

Patients can refuse this aspect of care, consistent with their options for participation in care within the community. If a patient refuses a special diet, Wellpath staff document the refusal in the patient’s medical record.

**V.a.8. Acute Care Needs**
Acute Care needs and Emergency Services are addressed in *Section V.a.15 – Hospital Care.*

**V.a.9. Dental Services**
Wellpath provides dental services to satisfy the dental care needs of patients in accordance with NCCHC and ACA standards. We take the dental needs of our patients very 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 cost of treatment.

*Oral Screening*
During the receiving screening, nursing staff conduct an initial oral screening to identify any complaints needing referral. Patients receive a more in-depth oral screening within 14 days of admission during the comprehensive health assessment to identify additional dental needs or required referrals. A qualified healthcare professional performs the screening and educates the patient on proper oral hygiene.

Nursing staff receive documented training, provided 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

**Dental Treatment Priority**
Patients can request dental services through the sick call process. If non-treatment would compromise the patient’s health, the appropriate dental services are referred offsite and provided as soon as possible.

The Classification and Priority Treatment program 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

Emergency dental services are available as needed. Medical staff evaluate the emergency in accordance with dental emergency protocols and refer the patient to an off-site emergency or dental provider if clinically appropriate. Wellpath staff coordinate with facility staff to arrange transportation to an off-site facility when necessary.

A medical practitioner evaluates patients needing emergency dental care and provides appropriate intervention until the patient can be seen by a dental practitioner or transferred for emergency care as indicated. Dental needs are categorized as Emergent or Urgent: Emergent intervention is provided within 4 hours; Urgent intervention is provided within 48 hours by a medical practitioner. Emergent and Urgent dental needs are addressed by a medical practitioner until a dentist is available.

<table>
<thead>
<tr>
<th>EMERGENT dental conditions include:</th>
<th>URGENT dental conditions include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Tooth avulsion</td>
<td>• Pericoronitis</td>
</tr>
<tr>
<td>• Suspected fractured jaw</td>
<td>• Heavy calculus accumulation with inflammation</td>
</tr>
<tr>
<td>• Difficulty breathing or swallowing due to swelling from tooth abscess</td>
<td>• Visual evidence of decay</td>
</tr>
<tr>
<td>• Uncontrollable bleeding</td>
<td>• Visual evidence of missing filling(s)</td>
</tr>
<tr>
<td>• Acute cellulites compromising the airway</td>
<td>• Swelling surrounding affected tooth/teeth</td>
</tr>
<tr>
<td></td>
<td>• Redness of gingival surrounding affected tooth/teeth</td>
</tr>
<tr>
<td></td>
<td>• Drainage from affected tooth/teeth</td>
</tr>
<tr>
<td></td>
<td>• Generalized mild facial/cheek/jaw swelling without compromise to airway</td>
</tr>
</tbody>
</table>

V.a.10. Continuity of Operations Plan

Wellpath is a solutions-oriented company that considers all aspects of our clients’ needs, including during a crisis. Our team members are trained and prepared to take meaningful action before, during, and after a disaster.

Emergency Preparedness

Wellpath has an effective emergency plan with detailed procedures that 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 described in the following graphic.
The Wellpath Emergency Preparedness Plan, which complies with NCCHC and ACA standards, is outlined in the Wellpath Policies and Procedures manual for each site. We will work collaboratively with the County to define the roles of healthcare staff in a disaster and to incorporate our Emergency Preparedness Plan into the overall emergency plan for the KCJ. The Emergency Preparedness Plan will be approved by the County and will minimally include:

- 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 all 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 all 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. Wellpath participates in disaster drill planning programs as requested and performs an annual critique of the drills.

Wellpath Staff’s Commitment During Disaster

“Your staff during Hurricane Harvey was stellar during the challenging circumstances they faced during this event. Your staff had to work under very uncomfortable conditions, mostly related to the loss of electrical power and even the loss of generator power. Your staff under the very competent leadership of [your HSA] is to be commended for providing the best medical care to the inmates of the Nueces County Jail.”

Asst. Chief Deputy Abel B. Carreon
Nueces County Sheriff’s Office, TX

Wellpath trains healthcare personnel to respond to emergencies within four minutes. We also conduct periodic proficiency training on emergency response and other integral components of our program using established Core Competency Checklists. Core competency is assessed annually, or more frequently depending on an individual’s needs or responsibilities. We also train healthcare staff on implementing an Incident Command System (ICS).

Wellpath uses the START (Simple Triage and Rapid Treatment) system, developed by Hoag Hospital and the Newport Beach Fire Department in California, to train Wellpath staff on the process for handling multi-casualty events.

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 assigning each patient to one of four categories—Minor, Deceased, Immediate, or Delayed—so first responders can be directed to those with the best chance of surviving.
V.a.11. Detoxification from Drug and Alcohol Program

Wellpath provides medically supervised on-site withdrawal management services in accordance with all applicable standards of treatment. When medically indicated, patients undergo medical stabilization for withdrawal management, minimizing 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 the proper next steps to safely manage them.

We also provide security staff with Quick Facts for Intoxication and Withdrawal to help them identify whether individuals need medical intervention.

The Wellpath Withdrawal Management Program and Policies incorporate the following:

- **Receiving Screening** – Proactive identification of those at risk
- **Observation and Monitoring** – Monitoring and assessment tools to ensure patients receive treatment as indicated and do not progress to a critical state
- **Treatment** – Using American Society of Addiction Medicine (ASAM) national practice guidelines

**Receiving Screening**

Many individuals arrive in the correctional setting under the influence of drugs or alcohol. Significant histories of substance use increase the possibility for some degree of withdrawal. The Wellpath receiving screening includes questions regarding types of substances used, time of last usage, frequency and amount of usage, length of time using, and side effects experienced during previous withdrawals. Wellpath staff uses a standardized form to detect 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 who are identified as being at risk for withdrawal receive a more in-depth assessment. Wellpath staff completes this assessment using the Addiction Research Foundation Clinical Institute Withdrawal Assessment – Alcohol (CIWA-Ar) and/or the Clinical Opioid Withdrawal Scale (COWS).

These tools are viable methods for assessing the severity of withdrawal symptoms based on observation of the individual’s behavior or response to questioning. Wellpath medical personnel also use the CIWA-Ar/COWS tools to determine how patients respond to stabilization medications.

**Observation and Monitoring**

Individuals at risk for alcohol or drug withdrawal undergo withdrawal monitoring as part of the medical stabilization process. When a patient is identified as high risk for withdrawal, nursing staff contacts the physician/mid-level provider on duty or on call. Based on the patient’s clinical presentation, the provider may recommend observation.

We monitor patients experiencing withdrawal from alcohol, opiates, or benzodiazepines at least five days, or longer on the provider’s orders. Medical personnel monitor patients during withdrawal three times daily and anytime requested by facility staff. Assessments include CIWA/COWS checks to determine the patient’s level of withdrawal.

We complete a short mental health screen to assess thoughts of suicidality, hopelessness, or recent bad news. A positive answer to any of these questions result in the patient being placed on suicide watch and the mental health provider being called. Withdrawal can be uncomfortable and is a risk factor for suicide and suicide attempts.

**Treatment**

Wellpath has established a best practice for determining the medications to be used, the frequency of use, and the starting dose. This best practice has been translated into an order set used by practitioners to manage and treat the symptoms of withdrawal. This document establishes the minimum amount of medication needed to treat patients going through withdrawal, real-time use for most patients. The provider develops an individual treatment plan for those who do not respond as expected.
V.a.12. Aftercare/Release Planning/Program

Discharge planning must start on Day One to be effective, and Wellpath has effective policies regarding discharge planning for released patients. During initial contact with the clinical provider, patients learn about available re-entry services, community resources available upon discharge, and the role of Wellpath team members in developing release plans.

Wellpath works with local providers to develop processes to ensure continuity of care for discharged patients, especially those with dual diagnoses of mental illnesses and substance use disorder and those with a chronic care condition. We strive to enhance these patients’ state of health and reduce the likelihood of recidivism by giving them as many resources as possible to continue their treatment plans.

When a patient is being discharged, Wellpath assists in creating a discharge plan that details the needed post-release care. A Wellpath licensed nurse completes a discharge medical summary that includes:

- Patient’s diagnoses
- Status of control for each medical or behavioral health condition
- Active medications and doses
- Inactive medications discontinued in the past month
- Allergies
- Date of last medical or behavioral health visit
- Pertinent labs from the last month
- Surgical procedures done while in custody
- Any other known pertinent surgical history
- Hospitalizations while in custody
- Pertinent healthcare needs such as use of medical devices, dialysis (including schedule)

A similar process occurs for patients involved in mental health care, with a discharge summary developed that includes:

- Patient’s diagnoses
- Status of control for each behavioral health condition
- Active medications and doses
- Inactive medications discontinued in the past month
- Summary of program involvement and goals achieved
- Recommendations for continued success
- List of referrals made
Wellpath staff medically clear patients for discharge and secure a medical necessity form signed by the practitioner for any discharge medications. Within 48 hours of notification of a patient’s pending release into the community, our staff perform a discharge screening to determine the need for post-release medications and medical assistance.

Wellpath will make post-release referrals as necessary for continuing care. If immediate post-release care is needed, we will coordinate with KCSO to secure post-release placement. We will also assess the need for medical support and assist with the completion of necessary paperwork.

**Access to Healthcare**

During incarceration, Wellpath works diligently to provide each patient with the medical care needed to live a healthy life. Outside of a detention setting, obtaining quality healthcare services can be daunting for many offenders. Therefore, we work with our patients to ensure that continuity of care from custody to community is intact and that each patient’s medical needs are addressed. Through collaboration with public or private healthcare services, Wellpath helps each patient build a plan and provides them with the tools to obtain healthcare benefits, including Medicaid enrollment as applicable. Wellpath will coordinate services with Facility staff in order to evaluate eligibility for and access to programs and resources under the direction of KCSO.

**Discharge Medications**

Wellpath ensures that patients 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 educate them on how to obtain and maintain their medications, and provide links to community resources for prescription services.

Wellpath has developed a method for providing discharge medications by working in conjunction with an agency called InMedRx. When we are given enough notice of release, we can provide prescriptions for patients requiring discharge medications, including psychotropic medications. If desired by KCSO, Wellpath can implement this program in Klamath County within 90 days of contract start.

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)

V.a.13. Special Needs of Pregnant and Postpartum Women

Wellpath understands the special healthcare needs of female patients and has established a program that addresses these needs in accordance with NCCHC standards. All medical staff working with the female population are trained on the specialized aspects of care required. The Wellpath female health program includes:

- 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 significant frequency in the population
- Pap smear testing in accordance with the recommendations of major medical societies, modified to reflect individual patient medical needs
- Breast cancer screening in accordance with 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

When we plan services for a facility, we take these issues into account as we consider overall system needs.

Prenatal Care

Pregnancies among women in custody are often unplanned and high-risk, and compromised by poor nutrition, domestic violence, mental illness, drug and alcohol use, and inadequate prenatal care (which increases risk of low birth weight and neonatal death). Wellpath ensures pregnant patients receive adequate prenatal care, effective education, and discharge planning that emphasizes continued care upon release and where to access it.
Wellpath offers voluntary pregnancy testing at intake for female arrestees of childbearing age. Those testing positive are referred for care and seen by medical staff within 48 hours (72 hours on weekends). Pregnant patients are seen according to American Congress of Obstetricians and Gynecologists (ACOG) guidelines.

Wellpath provides pregnant patients with family planning counseling and discussion of options regarding the outcome of the pregnancy. We assist the patient based on her expressed desires, whether planning to keep the child, considering adoption, or seeking to end the pregnancy. We ensure each patient fully understands her options so she can make the most informed decisions possible.

Pregnant patients receive timely and appropriate prenatal care, specialized obstetrical services, and postpartum care when indicated. The Wellpath physician serves as the patient’s primary provider, coordinating care with an obstetrical specialist as appropriate. These services are provided through a scheduled on-site clinic whenever possible (typically through the first 24 weeks of an uncomplicated pregnancy and after delivery).

Care of pregnant patients includes but is not limited to:

- Routine and high-risk care, including monitoring fetal growth and heart tones
- Appropriate counseling and assistance
- Identification and management of chemically dependent pregnant female patients, including education and counseling
- Appropriate housing
- Counseling on appropriate levels of activity and safety precautions
- Pre-natal vitamins
- Nutritional counseling and diet plan (diet and vitamins are planned in accordance with recommendations from the American Congress of Obstetricians and Gynecologists and Registered Dieticians)
- Laboratory and diagnostic tests, including testing for gestational diabetes, HIV, and other testing as recommended by the American College of Obstetricians and Gynecologists
- Observation for signs of toxemia, including urine testing for proteins and ketones
- Coordination of counseling and assistance to pregnant patients planning to keep their child, considering adoption, or seeking termination services
- On-site obstetrical care when it can reasonably be provided
- Postpartum care, including but not limited to lactation, monitoring for postpartum depression, contraception, and education
• Education on infant care
• Counseling regarding future pregnancies
• Family planning services before release

When a pregnant patient requires the services of an off-site OB provider, Wellpath staff coordinate with security staff for transport to off-site scheduled appointments. Wellpath provides designated security staff with an up-to-date listing of pregnant patients, anticipated delivery dates, and high-risk pregnancies so they can plan for required off-site travel.

**High-risk Pregnancies**

An obstetrical specialist manages high-risk pregnancies and pregnancies past 24 weeks. Wellpath facilitates testing that can be performed on site, monitors patients with high-risk pregnancies, and refers patients for hospitalization when needed. A pregnancy is considered high risk if the patient:

- Has diabetes, cancer, high blood pressure, kidney disease, or epilepsy
- Has a history of tobacco, alcohol, or drug use
- Is younger than 17 or older than 35
- Is pregnant with more than one baby
- Has had three or more miscarriages
- Had pre-term labor, preeclampsia, or seizures (eclampsia), or gave birth to a baby with a genetic condition (such as Down Syndrome) during a past pregnancy
- Has an infection such as HIV, hepatitis C, cytomegalovirus (CMV), chicken pox, rubella, toxoplasmosis, or syphilis
- Is taking certain medications such as lithium, phenytoin (e.g., Dilantin), valproic acid (e.g., Depakene), or carbamazepine (e.g., Tegretol)

**Perinatal Care**

Perinatal care (before, during, and after delivery) takes place in a hospital, in accordance with the obstetrical specialist’s recommendations and the Emergency Medical Treatment and Labor Act (EMTALA). Wellpath provides appropriate postpartum care, including accommodation for lactation. When a patient returns to the facility, she is seen by healthcare staff and placed under medical observation for a minimum of 23 hours. Mental health staff also evaluate the patient’s emotional status, as separation from a child can trigger self-harming behavior. Wellpath staff monitor patients for perinatal mood and anxiety disorders and refer patients to licensed mental health staff as indicated.

**Opioid-dependent Pregnant Patients**

Wellpath coordinates assessment and enrollment of pregnant, opioid-addicted patients for medication assisted treatment (MAT). If a pregnant patient reports active drug or alcohol use during the receiving screening, intake staff contact the physician or mid-level provider for orders. When a medical provider is on site, the provider evaluates the pregnant patient immediately; otherwise, the patient is seen during the next scheduled provider sick call clinic. The pregnant patient is also referred to an obstetrical specialist for a high-risk obstetrical evaluation. Because opioid withdrawal during pregnancy may be associated with adverse impact on the fetus, pregnant patients should continue any MAT treatment already in progress.
Prevention of opioid withdrawal during pregnancy can be accomplished by using specific opioid substitution medications, such as methadone or buprenorphine preparations. Buprenorphine is a partial opioid agonist: it both activates and blocks opioid receptors in the brain, reducing or eliminating opioid withdrawal symptoms (including drug cravings) without producing the “high” or dangerous side effects of heroin and other opioids. Buprenorphine is available for sublingual (under the tongue) administration, both in a stand-alone formulation (called Subutex) and in combination with another agent called naloxone. The naloxone in the combined formulation (marketed as Suboxone) deters abuse of the medication by causing a withdrawal reaction if it is intravenously injected.

Physicians with special certification may provide office-based buprenorphine treatment for medical stabilization for withdrawal from substance use disorder and/or maintenance therapy. The Wellpath Clinical Department is undergoing a company-wide effort to staff physicians with DEA X-numbers, which gives them the ability to prescribe buprenorphine and Suboxone. Wellpath currently has nearly 160 DEA X-licensed somatic physicians, psychiatrists, and mid-level providers throughout the country.

Methadone also has a long history of use in the treatment of opioid dependence in adults. It is a full opioid agonist: it activates opioid receptors in the brain to prevent withdrawal symptoms and reduce cravings. Methadone is available through specially licensed opioid treatment programs (OTPs). If a pregnant patient is opiate-dependent and reports using methadone, Wellpath staff attempt to verify the treatment being received in the community. If the treatment cannot be verified, or the opiate-dependent pregnant patient is not currently receiving methadone, she may be treated on site or referred to a local provider for evaluation and recommendations for treatment. In addition to regular dosing, the patient is evaluated monthly (or as required by state regulations) for potential dose adjustments throughout the pregnancy.

If a pregnant patient declines to participate in an OTP, the Wellpath physician initiates an appropriate treatment plan for opiate withdrawal syndrome. The physician also initiates a treatment plan for postpartum patients with opioid dependency. Wellpath coordinates with community providers for follow-up care as part of our discharge planning process.

V.a.14. Consulting Services and Medical Equipment
Wellpath provides medical orthoses, prostheses, glasses and other aids to impairment. Patients requiring these devices may be identified during the receiving screening or at any time while they are in custody. Healthcare staff refer patients to a medical provider for evaluation. The provider documents the evaluation, develops a plan of care, and sends the recommendations to the HSA for follow-up.

Wellpath ensures the timely provision of special services, supplies, and prosthetic devices for patients with a medical necessity. We expedite orders for devices needed to maintain daily living activities to avoid further impairment. Assistive devices, such as crutches and wheelchairs, are supplied when approved by KCSO as not posing danger to others.

V.a.15. Hospital Care
Wellpath authorizes, schedules, and coordinates inpatient services when a patient requires hospitalization. We work with local hospitals when an acute care setting is required, communicating frequently with hospital administrations. Healthcare staff make referrals for inpatient care through our Care Management system. The Medical Director must authorize hospitalizations.
Wellpath will provide a daily inpatient report, which can also be accessed directly through the Care Management system. We will communicate frequently with KCSO to provide the most complete evaluation and treatment of the patient population.

**Prospective Review (Prior Authorization)**

Wellpath requires prior review and authorization of all non-urgent or non-emergent care. Our clinicians follow NCCHC standards and correctional guidelines to review and approve services. The Regional 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 (Authorization)
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 assigns a Regional Care Manager to manage all off-site, inpatient care through daily contact with the hospital. Our Care Management team is notified of inpatient admissions at the time of admission. Wellpath Regional Care Managers and Regional Medical Directors follow NCCHC standards, InterQual Criteria, and correctional guidelines to review inpatient services daily.

Concurrent Review
Our 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 Wellpath Mid-level Provider, Regional Medical Director, and Regional Care Manager attend the clinical rounds discussions. This multidisciplinary approach ensures that inpatient stays are well managed and appropriate transitions of care are completed with improved accuracy.

Retrospective Review
The Wellpath Care Management department and site leadership 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, which 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
Medical staff see patients returning from a hospital stay for follow-up during the next provider sick call clinic, and will document the follow-up in the patient’s medical record. All information and documentation returned with the patient become part of the medical record. This includes a detailed discharge summary, along with a disposition and instruction sheet describing actions taken, orders written, and treatments performed.

Emergency Services
Wellpath provides emergency medical services 24 hours a day for individuals in custody pursuant to state law. Correctional healthcare personnel are trained to respond to emergencies within four minutes. A Wellpath staff member responds to all emergencies upon notification by reporting 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, if necessary, transfer the patient to an appropriate medical facility. We coordinate with local hospitals in emergencies and communicate 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 the situation allows. 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**

Wellpath customizes monthly reports of emergency room visits, with data including each patient’s name and identification number, the date of emergency service, the patient’s disposition, and the emergency treatment received.
**Emergency Transportation**

Wellpath staff coordinates with security staff to arrange emergency transport and ambulance services when needed. Healthcare staff works cooperatively with security staff to ensure that transportation services are provided in a safe and timely manner.

**Emergency Treatment for Visitors and Staff**

Wellpath provides 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, we refer the patient to a personal physician or local hospital as appropriate. Wellpath staff document any services provided.

**V.a.16. AIDS**

Wellpath provides Human Immunodeficiency Virus (HIV) testing and counseling on a confidential, case-by-case basis to patients who request it. We report all confirmed cases of HIV to the local Health Department.

Medical staff evaluate patients identified as having HIV and ensure they have access to practitioners trained in the care of HIV disease and HIV medications. Housing for HIV-positive patients is determined by the physician’s evaluation of acuity of symptoms, the patient’s behavior to prevent risk of transmission, or the risk of physical harm to the patient by others.
Dr. William Ruby, Associate Chief Clinical Officer for Wellpath, has specialized experience in preventing the transmission of infectious disease and is a Diplomate of the American Academy of HIV Medicine.

V.a.17. On-site Dialysis Services

Dialysis services shall be coordinated by Wellpath, as needed or required by KCSO. Per the Q/A the historical patient population would not support the financial cost incurred for operating on-site dialysis services. If, however, on-site dialysis becomes cost effective for the county Wellpath will collaborate with the KCSO to bring services on-site.

V.b. Clinic/Office Space, Furniture, and Equipment

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

At the end of the agreement, or upon termination, KCSO can purchase the medical equipment and supplies in the KCJ, based upon a mutually agreed depreciation cost. KCSO will retain ownership of equipment owned before contract start.

Supplies

Wellpath provides all supplies necessary to provide on-site care and treatment, including laboratory, radiology, medical, and dental supplies. Our Periodic Automatic Replenishment (PAR) level inventory system sets the quantity of supplies needed on site at all times and automatically replenishes them when inventory falls below the set PAR level.

V.c. County Sheriff’s Office Staff Services

Wellpath provides 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, we refer the patient to a personal physician or local hospital as appropriate. Wellpath staff document any services provided.

V.d. Staffing

Wellpath has developed a comprehensive staffing plan for the Klamath County Jail based on the requirements of the RFP, a review of the current staffing levels, and our expertise in facilities of similar size and scope, an understanding of the programs of importance in Klamath County, and our desire to uncover cost savings and efficiencies for Klamath County.

Our proposed staffing also takes into consideration the minimum staffing requirements, specific needs of the patient population, details of the physical plant, state scope of practice for healthcare professionals, and a recommended level of providers to efficiently and cost effectively perform all necessary duties and functions in accordance with accepted standards.

Professionals who are fully qualified and appropriately licensed, certified, or registered in the State of Oregon will provide medical services. All positions in our staffing plan will work within their scope of
practice, directed by job descriptions that include qualifications and specific duties and responsibilities. The following chart indicates the duties to be performed by our medical (nursing and clinical) staff:

<table>
<thead>
<tr>
<th>Service</th>
<th>RN</th>
<th>NP/PA</th>
<th>Certified Medication Aide</th>
</tr>
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<td>Intake Assessments</td>
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<td></td>
</tr>
<tr>
<td>Medication Administration</td>
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<tr>
<td>History and Physical</td>
<td>X</td>
<td>X</td>
<td>Provides support</td>
</tr>
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<td>Sick Call</td>
<td>X</td>
<td>X</td>
<td>Provides Support</td>
</tr>
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<td>Detox Protocol</td>
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</tr>
<tr>
<td>Chronic Care</td>
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</tr>
<tr>
<td>Infirmary Care</td>
<td>X</td>
<td>X</td>
<td>Provides support</td>
</tr>
</tbody>
</table>

Our healthcare team for the Klamath County Jail will consist of the following:

**Administrative Services**

The Wellpath program will have full operational and clinical oversight. The program will be managed administratively by the Health Services Administrator (HSA) and clinically by the Nurse Practitioner/Mid-level Provider. As the designated Responsible Health Authority, the HSA will have general responsibility for the successful delivery of healthcare for the KCJ.

**Support Services**

Wellpath has allotted sufficient support staff to manage all clerical and medical records needs. Our program will be supported by a Medical Records Clerk, who will:

- Communicate with on-site providers, correctional staff, and off-site clinics in scheduling patients for appointments
- Receive and direct inbound medical unit calls
- Communicate with local emergency personnel (911 system)
- Schedule in-house provider-patient encounters
- Assist in the utilization management process
- Provide administrative support with completing time-sensitive unit tasks
- Maintain multiple computerized logs for quality of care monitoring purposes
- Perform administrative duties for recruiting, hiring, and onboarding
- Perform payroll duties

With the implementation and use of our EMR system, CorEMR, we believe our proposed staffing plan includes sufficient Medical Records Clerk hours to adequately support the healthcare program. Our Home Office in Nashville will perform some functions related to database management and automated reporting.
Clinical Practitioner Services

Our staffing plan includes clinical practitioner coverage 6 hours per week at the KCJ by the Mid-level Provider (Nurse Practitioner). The Regional Medical Director will be on site as needed. Additionally, a clinical practitioner will be on call 24/7/365. Our clinical practitioner will:

- Provide direct patient care
- Assess and manage acute and chronic illnesses
- Prescribe medication
- Assess the need for off-site services and referrals
- Manage overall medical services and supervise delivery of medical care
- Clinically guide our on-site services

Regional Medical Director

The Regional Medical Director provides clinical oversight to the medical program in accordance with NCCHC and ACA standards. The Regional Medical Director consults with medical specialists as needed for expertise in their respective areas and serves as a liaison with healthcare providers in the community. The Regional Medical Director also partners with the HSA in supervising the CQI program, grievance process, sanitation inspections, infection control, utilization management, Pharmacy and Therapeutics Committee, and in developing appropriate criteria for off-site care.

Nursing Services

Nurses are critical in the continuum of care for detained populations, as nurses are typically the arrestee’s first point of contact with the medical team. Correctional nurses perform receiving screenings, administer medications, and assess when a patient may need to see a physician for further assessment. Given the responsibility of a correctional nurse, paired with the range of health issues they encounter, it is important to have a broad skill set that includes dealing with chronic medical conditions, mental health concerns, substance use, infectious disease, and injuries. Our nurses are responsible for the following:

HSA / Registered Nurses

- Manage sick call
- Provide daily nursing leadership
- Conduct receiving screenings
- Conduct health assessments
- Operate our detox program

The RN is responsible and accountable for direct supervision of the total healthcare delivery system in an assigned nursing unit, in conjunction with the delivery of patient care through the process of collecting health status data, nursing diagnosis, goal setting, planning, implementation, and evaluation. The RN directs and guides patient teaching and ensures that ancillary personnel only provide services they are prepared or qualified to perform. Under the direction of and including the HSA, the Wellpath staffing plan includes 56 hours per week of RN coverage.
Intake
To ensure timely processing, the Wellpath staffing plan provides coverage 8 hours a day 7 days a week for pre-booking and intake. Additionally, during times of increased volume, Wellpath can dispatch additional staff to intake to assist. Wellpath has an automated process to track timeliness of receiving screenings daily and ensure that urgent medical and mental health needs are proactively identified and addressed.

Sick Calls, Transfers, and Clinic Services
The Wellpath staffing plan ensures sufficient staff to manage sick calls, transfers, and clinic services. Registered Nurses (RNs) with CMA assistance will support the medical clinic, intake, and medical observation areas.

Medication Administration
A combination of CMA’s and RNs conduct medication administration. The Wellpath staffing plan includes sufficient coverage to ensure that all medications are prepared and administered efficiently.

On-Call Services
Wellpath understands the need for on-site staff to be supported by providers and administrative personnel during off hours. A combination of the following positions will be on call 24/7/365 for the KCJ:

- HSA
- Mid-level Provider

Staffing Coverage
Wellpath will maintain a PRN (per diem) pool to ensure backfill and relief coverage is available when needed. PRN pool employees are staff members who commit to several shifts per month and are open to working when full-time staff members are absent. Our PRN staff completes orientation and ongoing training consistent with our full-time team members to ensure continuity of services. We require PRNs to work a sufficient number of shifts to become familiar with the current policies and procedures.

Wellpath’s strong presence in the State of Oregon (7 counties with 119 Oregon-based employees) allows us to staff a nurse or provider position absence with qualified personnel with corrections experience and licensed in the State of Oregon.

Our proposed staffing plan for the KCJ is provided here. 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.
Wellpath Proposed Staffing for Klamath County

### Day Shift

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<tr>
<th>Position</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
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### Evening Shift

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<th>Thu</th>
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**NOTE:** May substitute one hour of physician time for two hours of mid-level provider time, or two hours of mid-level provider time for one hour of physician time, as necessary and with client approval.

### V.e. County Jail Staff Training

Wellpath will train jail staff in medical issues as requested by KCSO. We routinely educate Jail Staff on the importance of recognizing and responding to specific medical and mental health concerns.

Jail staff play a vital role in healthcare delivery, especially since they are often the first to respond to problems. Wellpath offers training for Jail Staff on responding to potential emergency situations, handling life-threatening situations, and their responsibility for the early detection of illness and injury.

Wellpath has developed a Health Training for Correctional Officers manual that complies with the requirements of NCCHC Standard J-C-04. The manual can be offered as a supplement to facility-provided education. It comprises 16 training modules addressing the essential information that jail staff must understand when presented with potentially urgent or emergent situations.

Each training module includes a topic-specific slideshow presentation, a curriculum outline for the presenter/trainer, and handouts for participants. Wellpath staff present training topics, which are based on our 7 Minutes to Save Rapid Response Series and designed to be presented in an average of 7 to 15 minutes.

Training topics for jail staff include:

- Alcohol & Benzodiazepine Withdrawal
- Altered Mental Status
- Basic First Aid
- Chest Pain
- Diabetes
- Ingestions
- Opioid Withdrawal
- Recognizing Signs of Mental Illness
- Respiratory Distress
- Rhabdomyolysis
Wellpath can collaborate with KCSO to develop additional training topics specific to the KCJ as needed. The frequency of training is typically based on accreditation standards and/or facility policy; however, we recommend a minimum of monthly training. We will schedule training sessions in coordination with KCSO, and the HSA or designee will maintain documentation of completed training sessions.

V.f. Pharmaceuticals

Wellpath provides 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; DEA management; and the secure and proper storage of all medications.

Pharmacy Provider

Wellpath proposes to subcontract KCSO’s pharmaceutical services to Correct Rx Pharmacy Services, Inc. (Correct Rx). Correct Rx is a full-service pharmacy, available 24/7, that provides accurate and timely dispensing and delivery. We have a national contract with Correct Rx, which allows us to receive competitive pricing.

The owners of Correct Rx have 100 years of combined experience in institutional pharmacy services and correctional healthcare, serving more than 200,000 lives in 195 correctional facilities across the U.S. Wellpath and Correct Rx share a commitment to provide the best value and quality by offering safe, efficient, evidence-based pharmacy services that are also cost effective.
As our pharmacy vendor, Correct Rx maintains all necessary pharmaceutical licenses in accordance with state and federal regulations. They also provide:

- On-time delivery with accessible local backup pharmacy to ensure 24/7 availability
- Computerized systems for provider ordering through medication administration
- Inventory management and medication reordering
- Safe medication administration practices
- Simplified processes for emergency medication ordering and formulary exceptions
- Accurate medication order delivery
- Knowledgeable and accessible customer service available 24/7

**Delivery Schedule**
Wellpath provides 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. We document all prescription orders in the patient’s medical record.

**Emergency Medications**
Wellpath does not delay medications for life-threatening, mental, 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. If there is an immediate need to initiate medication, we obtain it from the backup pharmacy as quickly as possible. We use local pharmacies to supply emergency prescription medications and as a backup for pharmacy services.

**Formulary Management**
Wellpath will customize a formulary to meet your needs and optimize your pharmaceutical costs. In a correctional facility, formulary usage with strict compliance significantly lowers monthly pharmacy invoices. We review the formulary regularly for needed updates. Immediate formulary changes, with the approval of the Regional 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. Correct Rx reviews and provides evidence-based literature review articles specific to areas that may affect utilization and the cost-effectiveness of medications. Correct Rx also monitors pricing increases and decreases daily. To assist in this effort, Correct Rx 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 reviews this information when assessing a medication’s formulary status.

Wellpath can provide a monthly Formulary Management Report (FMR) that illustrates monthly expenditures, usage, prescribing habits, and trends. We can also provide a formulary exception report listing all non-formulary medications prescribed over a period and sorted by prescriber, medication
name, and patient. The report includes the medication’s name and strength, dispense date, inmate name and number, prescriber, cost per prescription, order stop date, primary therapeutic class, secondary therapeutic class, formulary status indicator, and total cost per medication dispensed.

**Pharmacy and Therapeutics (P&T) Committee**

A Pharmacy and Therapeutics (P&T) Committee oversees pharmaceutical processes and utilization practices at each site. The P&T Committee manages the formulary and balances efficacy, safety, and cost by requiring prior approval of certain medications. The Regional Medical Director chairs the multidisciplinary P&T Committee, which meets quarterly. We provide facility administrators with copies of P&T Committee meeting minutes and related reports.

**Formulary Exceptions**

Intake staff ask arrestees whether they were undergoing medical, dental, or mental health treatment prior to arrest. They also obtain information regarding the arrestee’s medical provider(s) in the community. Intake staff contact the providers to ask about current treatment and verify any prescribed medications to facilitate continuity of care.

We 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 expedite medications for life-threatening or serious chronic diseases by obtaining them from a local backup pharmacy.

Wellpath bridges non-formulary medications for up to 30 days to prevent a break in care while allowing time for a clinician 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.

**Generics, Narcotics, and Off-Label Use**

Wellpath prescribes generic medications whenever possible, unless the clinician justifies a brand name request. We track the percentage of generic versus non-generic use and provide statistical reports on all areas of pharmaceutical management.

We only administer non-narcotic medications 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 are instructed to use sleep and pain medications only when clinically indicated.

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

Wellpath will establish 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.

**Medication Renewals**

Wellpath has a system for renewals that ensures continuous availability of medications for patients who require them. A clinician evaluates the need for continued medication, documenting the evaluation and re-order in the patient’s health record. A psychiatric provider should evaluate patients needing psychotropic medications before renewal.

**Inventory Control**

**Storage and Security**

Wellpath stores medications and pharmaceutical supplies in a secure, locked area approved by facility administration. We store bulk supplies separately and take inventory weekly and when they are accessed. We maintain inventory records to ensure adequate control. Patients only have access to medication when administered by a qualified staff member.

**Controlled Substances**

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 receiving them at the time they are administered. As an additional level of control, we treat certain medications that are not controlled, but have the potential for misuse or abuse, as controlled substances.

The Wellpath staff are trained 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 emphasizes maintaining a clear “paper trail” to comply with DEA guidelines for accountability and record keeping. Counts are tracked in a blue spiral-bound Controlled Substance Log Book with an index and numbered pages to ensure a perpetual inventory and usage record. Controlled Substance Log Books remain on site for five years.

**Sharps and Supplies**

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 must
not 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**

<table>
<thead>
<tr>
<th>Date</th>
<th>Patient Name</th>
<th>Nurse Signature</th>
<th>Time</th>
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</thead>
<tbody>
<tr>
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</table>

**Consulting Pharmacist Services**

A consulting pharmacist reviews 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 reviews 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

During the first on-site visit, the consulting pharmacist reviews the facility’s medication room to obtain an overview of current processes and offer insights on optimal medication management. The pharmacist also looks for issues that may present a problem during a pharmacy inspection. This initial visit typically takes half a day, depending on availability of personnel, questions, facility size, etc.

**Electronic Ordering System**

Healthcare staff can order medications electronically or by phone. Wellpath’s pharmacy provider contacts the backup pharmacy and arranges for the emergency prescription.

**Prescription Review**

Pharmacists screen for interactions, allergies, and other potential issues (such as non-formulary medications) that may need to be addressed with on-site staff before dispensing an order. Pharmacists also screen each patient’s medication profile to ensure safe and therapeutic medication administration. The pharmacist contacts 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 checks 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 alerts 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.

**Pharmacy Reports**

Wellpath offers the most dynamic and complete reporting capabilities in the correctional industry, including customized pharmaceutical reports for each 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.

**Disposal**

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 makes every reasonable accommodation to minimize the quantity of pharmaceuticals destroyed. We dispose of pharmaceutical waste in compliance with federal, state, and local laws and regulations.

Wellpath conducts regular audits to remove discontinued or expired medications. The pharmacy can provide a daily report of medications approaching expiration. They can also set a trigger to alert staff when there are “X” number of days (e.g., 1 week, 10 days, 2 weeks, etc.) prior to a medication expiring.

Wellpath staff place pharmaceutical waste in approved collection containers as soon as possible and complete the appropriate disposal form. We ensure the availability of RX Destroyer containers, which remain locked in the medication room cabinet.
Wellpath staff ensure that pharmaceutical waste is kept in a secure location and, if controlled, 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. This is tracked in the Controlled Substances Log Book. The HSA ensures compliance with the pharmaceutical waste disposal policy.

**V.f.1. Medication Administration**

Wellpath provides written systems and processes for the delivery and administration of medications based on the facility layout and procedures. We tailor medication pass for each facility to ensure the timeliness and accuracy of the process, coordinating with security staffing and meal times to ensure accurate and effective medication administration.

Personnel with appropriate state licensure and certification administer medications, including over-the-counter medications. Our proposed staffing plan provides coverage for medication pass at least twice a day 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 the responsible clinician ordering the pharmacotherapy. 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 pre-pouring of medications and we monitor the medication delivery process to ensure it does not occur.

Wellpath staff observe patients taking medications, especially when Direct Observation Therapy is required by physician’s order. Wellpath staff are also trained to provide Direct Observation Therapy for medications subject to abuse, psychotropic medications, and those related to the treatment of communicable and infectious diseases.

**Medication Administration Record**

Healthcare staff 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, Wellpath staff document the refusal and refer the patient to the clinician.

**V.g. Transportation**

Wellpath staff coordinates with jail staff to arrange emergency transport and ambulance services when needed. Healthcare staff works cooperatively with security staff to ensure that transportation services are provided in a safe and timely manner.

**V.h. Maintenance of Accreditations**

The Wellpath program for KCSO will meet or exceed community standards of care as well as standards established by the National Commission on Correctional Health Care (NCCHC). Should the KCSO choose
to pursue accreditation in the future, the KCJ will be ready. Per Addenda #1, Wellpath agrees to work through and complete the accreditation process with the KCSO should they choose to do so.

V.i. Compliance with Legal Requirements
Wellpath will comply with all relevant legal requirements, including the following.

ADA Compliance
Wellpath will comply with and abide by federal state laws as they relate to patients, including the Americans with Disabilities Act, patients determined to have a mental health issue, and matters involving transgender patients. Wellpath staff are trained to work with patients entering the system who present as naïve to the correctional environment or particularly vulnerable based on stature, mental illness, or developmental disability.

Prison Rape Elimination Act
Wellpath provides care that complies with federal law, including the Prison Rape Elimination Act of 2003 (PREA). Our employees receive initial and annual training on the purpose and requirements of PREA. The training explains the issues surrounding prison sexual assault, the importance of reporting incidents, and the level of involvement from other government agencies. Following the training, employees are tested on their knowledge of PREA and certified based on demonstrated competency.

Wellpath maintains a “zero tolerance” policy regarding rape or sexual abuse of detained individuals, and we have an established policy for responding to allegations of such acts. This policy requires prompt and appropriate mental health intervention in the event of a sexual assault to minimize medical and psychological trauma.

Dr. John Newby, Wellpath Regional Vice President for the Maine Department of Corrections, is a PREA Certified Auditor for the Bureau of Justice Assistance, giving us unique insight into PREA standards.

V.j. Quality Assurance / Oversight / Reporting
Wellpath has outlined in detail our quality assurance and reporting processes in Sections V.a.6 Continuous Quality Improvement and V.r Reporting of this proposal.

V.k. Hazardous Waste Management
Wellpath has a national contract with Stericycle for the disposal of all 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 makes provisions for the collection, storage, and removal of all infectious waste and sharps containers in accordance with 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 obtain approval of pickup scheduling and frequency from KCSO. Pickup frequency is typically based on volume and storage space availability. The HSA maintains pickup tracking forms on site. Healthcare staff follow standard precautions to minimize the risk of exposure to blood and body fluids of potentially infected patients.

V.I. Grievance Procedure

Our first responsibility is to provide access to care and treatment sufficient to meet the medical needs of our patients. We train and expect our staff to operate efficiently and appropriately while respecting those needs. All Wellpath personnel receive grievance resolution training to learn how to address concerns at the point of contact before the patient initiates a grievance. Our record of reduced grievances and our excellent litigation history illustrate the exemplary care our team members provide.

The Wellpath grievance process is consistent with national standards and will comply with KCJ policy. We will coordinate with KCSO to integrate our grievance process with the current grievance system. We will provide standardized data reporting with full transparency of written grievances or complaints received from patients or concerned third parties (e.g., family members, advocates, lawyers).

Resolution and Review

Wellpath staff respond to grievances, complaints, and inquiries as soon as is practical, generally within 72 hours of receipt. All members of the healthcare team can attend to medical grievances, which include complaints such as not being seen in a timely manner for a sick call request, medications not being started in a timely manner, and healthcare staff conduct. The site HSA or designee resolves urgent grievances that involve an immediate need for healthcare services.

The HSA or appropriate designee works with the facility administrators in the investigation, follow-up, and resolution of complaints and implements their recommendations. The HSA or designee coordinates with mental health, dental, pharmacy, or other appropriate service providers as needed to resolve complaints. When necessary, Wellpath staff conduct a face-to-face interview with the patient and participate on the grievance committee.

If the grievance is substantiated, the HSA or designee develops and implements a corrective action plan. The QI Committee and MAC review and categorize grievances to identify potential issues and patterns that exist or are developing.

Grievance Reporting

Wellpath maintains a daily log of all grievances that includes the name of the person filing the grievance, the date and nature of the grievance, staff named in grievance if any, whether the grievance is founded or unfounded, staff responding, and date and nature of response.
Wellpath submits a monthly report of patient grievances, which includes copies of medical grievance requests and their resolutions, to facility administration. We categorize all grievances received and provide grievance statistics as a part of the monthly health services statistical report. Grievance data includes, but is not limited to:

- Number of patients with grievances
- Number dissatisfied with staff conduct
- Number dissatisfied with medical care
- Number dissatisfied with dental care
- Number dissatisfied with mental health care
- Number dissatisfied with delay in healthcare
- Problems with medications
- Requests to be seen

**V.m. Access**

Wellpath acknowledges security staff shall accompany health care staff in providing health care services in secure areas. Wellpath understands KCSO policies and procedures are to be followed at all times.

**V.n. Claims and Legal Actions**

Wellpath will cooperate, to the best of our ability, with County Legal Counsel and Risk Management staff in the investigation, defense or and other health care program claim or legal action against or on behalf of the County, including any of its departments, employees, volunteers or agents.
V.o. Transfers, Releases, and Continuity of Care

Public Health Notification

Wellpath can help Klamath County Public Health (KCPH) 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 the Health Department. We work closely with the local Health Department on any significant emerging public health events impacting the community.

Wellpath immediately reports highly infectious communicable diseases to the Health Department, in accordance with local regulations. We collaborate on communicable disease screening, continuing medical surveillance, case management, reporting, and patient referral in the community. The HSA is responsible for reporting incidents to public health officials; however, all Wellpath staff are trained on the notification process to ensure timely reporting if the HSA is not on site.

Our on-site healthcare team closely monitors and promptly communicates with facility administration, the Health Department, 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 Wellpath Infection Control Coordinator, in conjunction with the HSA, manages, reports, and records these incidents and implements appropriate educational programs to prevent future occurrences.

Transfer of Health Records

Pertinent medical information accompanies patients traveling off site to a specialty appointment, hospital, another detention/correctional facility. Upon transfer to another facility, the patient travels with a medical transfer form containing all necessary information required for the continuation of treatment.

Tuberculosis

Intake staff ask arrestees tuberculosis symptom screening questions and whether they have a history of tuberculosis. We typically administer a Tuberculin Skin Test (TST) during the 14-day health assessment. If documentation of a positive test is in the record or if the patient indicates such, we follow CDC guidelines for annual symptom screening and perform a chest X-ray if symptoms indicate the clinical necessity. The results of TSTs are read and documented within 48-72 hours.

V.p. Contract Administrator

The Wellpath Health Services Administrator, with support from our Regional Director of Operation, Crystal Knoch, will be the Contract Administrator and the liaison for the county. The HSA will ensure contract compliance and ensure the development and delivery of process, polices, and procedures.

V.q. Medical Records

Wellpath maintains up-to-date medical records at all times, 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 initiate a comprehensive medical record, which becomes the single source of medical, dental, and mental health information for each patient. Each
record provides an accurate account of the patient’s health status at the time of admission, patient-provider encounters, and services provided both on site and off site. Medical records minimally contain:

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

Confidentiality of Medical Records
Wellpath adheres to laws regarding confidentiality of medical information. We secure medical records as required by law and other applicable state or federal statutes and regulations. We 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
Wellpath manages the security and accessibility of patient medical records in compliance with state and federal privacy regulations. The site Medical Director approves medical record policies and procedures and defines the format and handling of medical records. The HSA controls access to medical records to ensure patient confidentiality. Each patient’s medical record is maintained separate from the confinement record. We give facility administrators access to information needed to determine a patient’s security rating, housing assignment, job suitability, etc.

Ownership of Records
Wellpath maintains medical records for the length of a patient’s stay in accordance with HIPAA rules and regulations. Although Wellpath serves as custodian of medical records, they belong to the KCSO. Upon conclusion of the contract, medical records will remain the property of KCSO, and we will support a smooth transition of records.
Electronic Medical Record Solution

Wellpath is prepared to implement the CorEMR platform at the KCJ. We have considerable experience with CorEMR and will fully support its implementation and use at the KCJ. Most Wellpath forms are available in CorEMR, and we can customize them for your site.

CorEMR is currently used by more than 70 Wellpath clients across the country, including:

- Alexandria, VA
- Bell County, TX
- Berrien County, MI
- Chesapeake, VA
- Clinton County, PA
- Dorchester County, MD
- Fort Bend County, TX
- Frederick County, MD
- Howard County, MD
- Jefferson County, CO
- Loudoun County, VA
- Montgomery County Mental Health Treatment Facility, TX
- Newport News, VA
- Roanoke, VA
- Western Virginia Regional Jail, VA
- Worcester County, MD
- Yuma County, AZ

CorEMR offers the Electronic Health Record (EHR) software product and Electronic Medication Administration Record (eMAR) as a SaaS (Software as a Service, hosted off site) or as a core model (hosted on site). As part of the CorEMR implementation, Wellpath provides online training with access to a training site, followed by optional on-site training.

CorEMR will interface with your Jail Management System (JMS), EIS. Wellpath and CorEMR’s experience with JMS integrations, pharmacy integrations, networking, and hardware makes the transition from paper to electronic record keeping as easy as possible.

Wellpath uses CorEMR to collect and analyze health statistics on a regular basis. We have developed specific protocols, templates, and reports 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 EMR system are fully realized.

The Wellpath IT team is in the process of converting all of our CorEMR sites to our “Golden Copy,” a standardized version of CorEMR developed exclusively for Wellpath. The Golden Copy of CorEMR is customized with Wellpath’s forms and templates for sick call, chronic care, transfers, reports, electronic pharmaceutical ordering, and electronic sign-off for providers. Maximizing CorEMR’s benefits helps improve clinical results, create operational efficiencies, and enhance transparent accountability.
<table>
<thead>
<tr>
<th>Feature</th>
<th>Benefit</th>
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</thead>
<tbody>
<tr>
<td>Certification</td>
<td>• CorEMR v5.0 received ONC Staging 1 meaningful use certification in December 2012</td>
</tr>
<tr>
<td>JMS, Pharmacy and Lab</td>
<td>• Imports patient data from JMS to create an automatic electronic chart with patient’s photo and basic demographic information</td>
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<tr>
<td>Integrations</td>
<td>• Sends medication orders to your pharmacy provider for shipment or delivery</td>
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<td></td>
<td>• Receives lab results as an optional integration</td>
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<tr>
<td></td>
<td>• Receives radiology reports as an optional integration</td>
</tr>
<tr>
<td></td>
<td>• Messages sent using HL7 platform and others</td>
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<tr>
<td>Technology</td>
<td>• Simultaneous access by multiple terminals and users within the facility</td>
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<td></td>
<td>• Web-based structure runs on the facility’s local network or by a server running at one central location for facilities with multiple locations</td>
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<tr>
<td></td>
<td>• Built on an SQL back end and is compatible with SQL Server 2005, 2008, and MySQL 5.0+</td>
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<tr>
<td></td>
<td>• Optional SaaS (Software as a Service) model with an off-site server location for small facilities or larger facilities that prefer to outsource the management of their server</td>
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<tr>
<td>Medical Forms</td>
<td>• Recreates current applicable medical, mental health, and dental forms to an electronic format</td>
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<td></td>
<td>• Forms can be configured with “triggers” that automatically create actions, such as creating an active problem for a diabetic or scheduling a task for the nurse on duty to review a patient’s intake form</td>
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<td></td>
<td>• Configurable transfer and release forms with triggers that automatically retrieve information from the patient’s medical chart, such as active problem list, current medications, and most recent PPD test results</td>
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<td></td>
<td>• Allows facilities to easily create and modify their own forms using a form creation tool</td>
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<tr>
<td>Sick Call (SOAPe Notes)</td>
<td>• Uses the standard SOAPe note format for sick call examination</td>
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<td>• Displays patient summary information such as current medical problems and current medication compliance on the sick call module</td>
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<td>• Gives users access to the Subjective, Objective, Assessment, Plan, and Education sections directly from the sick call module, allowing doctors to record orders for later sign off or to complete the actions themselves</td>
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<td>• Available actions include completing interview or exam forms, scheduling future appointments, and ordering lab work and medications</td>
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<td></td>
<td>• Receive and store scanned documents and electronic files directly into sick calls</td>
</tr>
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<td></td>
<td>• Allows users to note if sick calls (clinic) or medications are billable</td>
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</table>
## CorEMR Features and Benefits

<table>
<thead>
<tr>
<th>Feature</th>
<th>Benefit</th>
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</table>
| **MedPass / Pill Call** | - 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** | - 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  
- Record progress and chart notes for each patient; also allows end-users to create custom flow sheets  
- Create “Patient Alerts,” such as suicide watch or recreation restriction, on the patient chart, which also displays on the dashboard for high visibility to other users; alerts are fully configurable |
| **Reports** | - 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  
- Prescription order report shows all medications ordered on a given day  
- Captures a large amount of information on each patient to generate Management Reports and other patient demographic information  
- Includes a User Definable Report Builder that allows facilities to retrieve information for unlimited customized reports from defined data elements |
| **Pharmacy Module** | - Send orders to and receive confirmations from the pharmacy provider  
- Includes a pharmacy module for ordering, making med pass assignments, and scheduling refills  
- Imports the facility’s drug list and identifies formulary medication  
- Allows filtering of the drug list by name, analgesic category, form, and other criteria  
- Inventory check-in screen when meds are received from the pharmacy  
- Medication Set feature allows users to order a predetermined group of medications rather than individually, such as an alcohol detox protocol |
### CorEMR Features and Benefits

<table>
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<tr>
<th>Feature</th>
<th>Benefit</th>
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<tbody>
<tr>
<td><strong>Scheduler</strong></td>
<td>• Includes a robust appointment scheduler that can be filtered by task category (doctor, dentist, nurse, social worker, etc.), priority, and housing location</td>
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<td>• Tasks and appointments can be viewed by day, week, or month</td>
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<td></td>
<td>• Tasks can be created to recur with a variety of schedules</td>
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<td><strong>Administration</strong></td>
<td>• Permissions Grid restricts access by user type</td>
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<td>• Ability to manage and edit all forms and form triggers; option to create event triggers, such as automatically creating a specific task when a question on a form is answered a certain way</td>
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<td></td>
<td>• Ability to create Medication Sets: multiple medications configured to be ordered as a group for situations like alcohol withdrawal protocols</td>
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<tr>
<td></td>
<td>• Configure alerts, task categories, and problem lists</td>
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<td></td>
<td>• Manage user names and passwords</td>
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<td></td>
<td>• Multi-facility feature allows patients to be sorted and viewed by different facilities and gives users access only to the specific facilities where they work</td>
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<td></td>
<td>• Internal messaging system allows users to send messages back and forth within the system</td>
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<td></td>
<td>• Ability to block charts from access, such as in the case of a high-profile inmate or a death</td>
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<tr>
<td><strong>Infirmary</strong></td>
<td>• CorEMR offers an infirmary feature that is really a chart within a chart to meet accreditation standards</td>
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<td></td>
<td>• Separate orders and forms for use during an inpatient hospital stay</td>
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<tr>
<td><strong>Message Center</strong></td>
<td>• Internal message system lets users communicate with each other through the application</td>
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<tr>
<td></td>
<td>• Text messages can be sent to online users</td>
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<td></td>
<td>• While offline, messages wait in a queue for viewing when logged back in</td>
</tr>
<tr>
<td><strong>Permissions</strong></td>
<td>• Allows facility administrators to restrict access to various portions and features of the application based on user type</td>
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</table>

Patient charts can be accessed using the patient’s name, booking number, social security number, and other identifiers. Chart summaries include current medical problems, medications, task summary, intake form summary, and recent medical history, with links to each detailed section. CorEMR maintains an active medical problem list for all patients.

Scanning and file upload capabilities make CorEMR an entirely paperless system. All non-system documents can be scanned and stored in the patient's chart. Flow sheets for vital signs and blood sugar levels can be recorded and logged. CorEMR logs and stores a complete historical summary of every action recorded for each patient, as well as an audit log reporting who made the changes.

CorEMR’s form creation tool allows for easy creation and modification of forms, including customized intake, outgoing, and more. The ability to access and edit forms can be restricted to specific users. Forms can be configured with triggers that automatically create actions in other parts of the system, such as nurse tasks or active problems for a patient. Triggers can also automatically pull a patient’s medical chart for transfer and release forms. Forms can also capture non-examination information, such as administration and patient authorization forms.
**Vendor Interfaces**

CorEMR can interface with our contracted vendors, including LabCorp and CorrectRX. This allows medication orders and test results to be reviewed and managed quickly and efficiently by healthcare practitioners. LabCorp can automatically upload test results into CorEMR. If the results indicate a critical situation, LabCorp alerts the provider. Staff are notified when results are loaded into the patient’s record, with notation of critical values. All results imported into CorEMR are placed on the action list for the on-site provider, who reviews and electronically signs off on all results.

**Compliance Reports**

Wellpath uses CorEMR to track the timely completion of screenings and other services to maintain contract compliance. CorEMR features a task calendar that can be filtered by task category (e.g., medical, dentist, mental health, etc.), priority, or housing location. Tasks and appointments can be viewed by day, week, or month. Task status is easily managed to keep updated records of current and overdue tasks.

CorEMR easily generates management reports, which can be emailed to specific users monthly. Examples of management report items include:

- Medication pass compliance/non-compliance
- Active patients who have not had health assessments
- Demographic distributions of patient population
- Current patients with specific medical problems

**Electronic Pharmaceutical Management**

CorEMR includes a pharmacy module for ordering, making med pass assignments, and scheduling refills. CorEMR can send orders to and receive confirmations from the pharmacy provider. The system imports the facility’s drug list and identifies formulary medications. It also allows the filtering of the drug list by name, analgesic category, form, and other criteria. CorEMR can also integrate with patient wristband identifiers as well as medication identifiers.

CorEMR has an electronic Medication Administration Record (eMAR) customized for correctional settings. It configures med pass times by day and generates med pass prep lists accordingly. These lists can be grouped by housing unit, alphabetically by last name, or by percentage of completion. Each patient’s acceptance or refusal of each dose is recorded in the eMAR. Graphical and detailed MAR reports can be viewed at any time. Reports include percentage of acceptance for each current medication, as well as the initials for the administering user.

The eMAR automatically highlights medication expiration dates and refill notifications. Medications received from the pharmacy are shown on an inventory check-in screen. CorEMR can also generate reports showing all prescriptions by drug name or by patient; prescriptions ordered by date range; medication compliance, refusal, and dosing summary reports; missed doses, and more. The eMAR includes the option to view several months’ reports simultaneously.

**V.r. Reporting**

Wellpath seeks to provide the best on-site care possible while being fully accountable to our clients. 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 will 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 your specific needs. We will deliver detailed monthly statistical reports and daily operational reports for your review. We will also use these 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 KCSO, we will be 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 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 and infirmaries
- Staffing roster changes
- Completed medical incident report copies
- Completed medical grievance report copies
- Receiving screenings performed
- Health assessment status report

**Monthly Reports**

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 KCSO with future budgeting efforts. Monthly reports delineate the status of the healthcare program, including potential problems and suggested resolutions. We can also provide reports on monthly paid and projected costs, as well as monthly aggregate and projected aggregate costs.

Wellpath will submit a customized report package to the county 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 physician
• Patients seen by dentist
• Patients seen by psychiatrist/psychologist
• 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 designated KCSO authority

We have provided samples of statistical reports, which will be customized for KCSO, in Tabbed Attachment H. Please note that this information is confidential and proprietary.

Quarterly Reports
Wellpath will provide a quarterly summary of health services utilization data to the county. Quarterly reports include summaries related to progress toward agreed-upon objectives for the healthcare program and the status of personnel-related activities.

Annual Reports
Wellpath provides an annual report based on the contract year, giving a comprehensive review of the monthly statistical and program reports and examining significant trends and issues. We will submit the annual report to the county no later than 60 days after the end of each contract year. Annual reports include utilization statistics and a narrative summary of our accomplishments for the year, as well as recommendations for desirable changes in medical procedures and/or protocols.

V.s. Inmate Co-Payment and Other Procedures
Wellpath assists with tracking inmate co-pays, which are for the facility’s use. We do not collect or handle inmate funds, and we do not refuse healthcare services due to indigent status or inability to pay.

Third Party Billing
Wellpath provides medically necessary healthcare services while also being proper stewards of limited taxpayer resources. We assist in deferring eligible inpatient hospitalization expenses by:

• Accounting for adjustments and reimbursements from applicable sources
• Ensuring that hospitals are aware of third party payer options
• Obtaining prior authorizations and making co-pay arrangements with hospitals and providers
Intake staff ask arrestees about insurance coverage and document the response. Private insurance carriers have financial responsibility when a patient leaves the correctional facility for outpatient or inpatient services, provided the patient’s insurance premium is paid and current. Coverage typically includes services provided by physicians, hospitals, or other freestanding facilities.

When an insured patient requires off-site services, Wellpath notifies the service provider of the appropriate agency to invoice. Providers that obtain authorization from the insurer are responsible for billing the insurance carrier. The patient is responsible for co-pays or deductibles.

When directed by KCSO, Wellpath will assist in the completion of inmate co-pay arrangements with service providers. If a patient is uninsured, we will work with KCSO to identify a willing service provider and negotiate rates.

The Wellpath Care Management system contains information on payment responsibility for off-site services. The system interfaces with our claims system, so if a service provider inadvertently sends us an invoice, we advise them of the appropriate location to resubmit their invoice for payment. This is increasingly important as changes to the Affordable Care Act are realized. We can also leverage the Care Management system to facilitate the exchange of patient medical information encouraged by the Affordable Care Act.

### Pricing

In all programs we design and operate, our objective is to uncover all possible areas of economy without sacrificing quality. We demonstrate value through our cost saving initiatives, timely reporting, and overall improved quality of people, programs, and processes. By applying our **Savings through Value-Added Efficiency (SAVE)** initiative, we continually review best practices at our sites to share success with our clients.

Three areas of significant cost in any program are goods and services, staffing, and off-site trips for care. Wellpath generates efficiencies and savings in these areas through contract negotiations with providers, staffing level management, and utilization management. We are highly confident that we can work with KCSO to reduce and contain costs for both on- and off-site services, based on our record of cost savings success for our clients.

As your partner, Wellpath will negotiate contracts for goods and services to benefit your healthcare program. Our vendor contracts commonly offer an economy of scale to generate savings that we pass on to our clients. Because we care for nearly 300,000 patients nationwide, we have significant buying power and can secure the best possible rates with all on-site and off-site providers.
Our passion for doing things the right way has led to phenomenal success not only in the quality of our care programs, but also in cost containment for our clients. By reviewing the specifics of each client’s inmate healthcare needs and maximizing facility and staff capabilities, we create efficiencies and cost savings. We form successful partnerships that help our clients contain costs and improve the quality of healthcare in correctional facilities throughout the country. We have provided just a few examples of our proven success for your consideration.

V.u. Transition

Wellpath is prepared to implement a comprehensive turnkey program for KCSO. We have the necessary experience, capabilities, and resources for a successful partnership with KCSO and know our business plan will deliver a smooth transition and meet or exceed your program objectives and requirements.

Our detailed transition plan ensures proper delegation of responsibility and that our program meets all tenets of the contract. This transition plan communicates responsibilities and ensures required tasks are completed. Continuous communication helps minimize surprises and promotes a mutual understanding of decisions and protocols.

Wellpath works with on-site staff, KCSO-contracted providers, and KCSO administration to encourage a fully integrated program that is seen as a success throughout the State of Oregon. We do not make changes for the sake of change, nor do we accept the status quo where improvements can be made that will benefit patient care or provide cost savings for KCSO.

Transition Team

Accomplishing a successful transition and implementation means looking beyond the tasks themselves and placing experienced Wellpath team members on site, working hand-in-hand with our new staff. The members of our Regional Management Team become familiar faces as they provide guidance and insight to the KCJ’s medical teams. The Wellpath Executive Team will also be closely involved with the implementation and operation of services for KCSO.

Wellpath has assembled a strong leadership team to manage the start-up and implementation process at the KCJ. The following individuals will support the transition and operation of the KCSO medical program.

- **Regional Vice President** – Andrew Small
- **Regional Director of Operations** – Crystal Knoch
- **Regional Medical Director** – Vivek Shah, MD
- **Chief Clinical Officer** – Thomas Pangburn, MD
- **President of Local Government Healthcare** – Cindy Watson
- **Vice President of Operational Support** – Wanda Streeter, RN, CCHP
- **Director of Partnership Development** – Melissa Moberly

“I, my Chief Deputy and my Jail Commander all feel fully justified in our trust and confidence in [Wellpath]. That trust and confidence is based upon a working partnership that prioritizes quality care, and keen attention to financial detail.”

Sheriff John R. Layton
Marion County (Indianapolis), IN
Each of these team members ensure programming follows the tenets of the contract between Wellpath and KCSO, as well as Wellpath protocols and industry standards. Wellpath also has nearly 500 additional Home Office team members prepared to support the KCSO medical program.

**Wellpath Warriors**

The new Wellpath Warriors program prepares select employees to serve as Wellpath culture ambassadors and assists with contract start-ups across the country. Members help facilitate the implementation of crucial systems and processes for the transition of new Wellpath contracts. If the need arises for existing Wellpath clients, Wellpath Warriors can be sent in to help there as well. The Wellpath Warrior Training curriculum covers:

- Administration
- Policies and procedures
- Receiving screening
- Health assessment
- CIWA/COWs
- Safety Cell/Sobering
- Restraints
- Pregnancy
- Suicide prevention
- Emergency response
- Medication administration and bridging
- Sick call
- CorEMR
- Diabetic protocols
- Accreditation
- Professional nursing documents
- Skills labs: Learn, Teach, and Do

Wellpath Warriors must have at least six months of experience in corrections, a clear background check, and the ability to work flexible shifts during the transition. They must also pass competency exams at the end of the training course to become part of the Wellpath Warriors team. Each training session, held at our Home Office in Nashville, ends with a graduation and awards ceremony to recognize the new team members. The entire Home Office is invited to join in the celebration, and Wellpath CEO, Jorge Dominicis, routinely attends the ceremony to recognize the hard work and dedication of these outstanding team members.

**Immediate Steps**

Immediately on receiving notification of intent to award the contract, we begin the transition process. To ease the transition of services, we prefer to meet with new clients and valued healthcare personnel within 48-72 hours of notice of contract award. We conduct meetings with KCSO command staff to identify valued healthcare personnel and ensure a clear understanding of expectations and channels of communication.

**Transition Plan**

A comprehensive Contract Implementation Plan (CIP) describes our approach for transitioning the KCSO medical program. The plan includes specifications for the recruitment of current and new staff; on-site medical services; pharmaceutical, laboratory, radiology, and medical supplies; equipment and inventory; and medical records management.

The CIP lists the tasks, the individuals responsible, and the projected dates for completion. CIP meetings include various members of the Nashville-based regional support departments to ensure all transition
planning activities are efficient and effective. The final site-specific CIP will be revised to meet the specific needs of KCSO and updated weekly.

**Recruitment of Current and New Staff**

Staff recruitment begins immediately after notice of award. Recruitment and hiring efforts are directed by the Wellpath Recruiting Manager, with the support of our corporate HR department. We hold discussions with KCSO leadership to identify current high-performers on the existing medical team, so that we may focus our recruitment efforts. We will extend an offer to candidates and begin the credentialing process.

**Hospitals, Subcontractors, and Ancillary Services**

At your direction, the Wellpath Network Development team contacts on-site and off-site subcontractors and specialists to develop and finalize agreements on your behalf. Throughout the transition, we reach out to these providers and others recommended to establish a strong provider network and the best possible on-site programs.

**Pharmaceutical, Laboratory, Radiology, and Medical Supplies**

We work with our contracted vendors and KCSO to ensure necessary pharmaceutical, laboratory, radiology, and other medical supplies are available at start-up.

**Identification and Assuming of Current Medical Care Cases**

Wellpath communicates throughout the transition process with the KCJ’s medical and mental health teams. We will identify hospitalized patients, those in need of specialized chronic care, those with off-site appointments scheduled for the next 30 days, and those on suicide watch. We will communicate with KCSO and the current medical and mental health teams throughout the transition process to identify and care for patients requiring medical attention.

**Equipment and Inventory**

Wellpath works with you to obtain necessary equipment and supplies for start-up and determine a secure place within the KCJ where packages can be delivered and secured until the transition of services occurs.

**Orientation of New Staff**

All new employees participate in training that includes an introduction to Wellpath, security parameters at the KCJ, and information regarding NCCHC and ACA standards and certification. Each employee hired by Wellpath during the transition period undergoes specific training on expectations for our program, as well as their specific role in that program. Training is conducted outside of regular working hours and is paid on the first Wellpath paycheck. KCSO team members are welcome to join in these training sessions.

**On-Site Shadowing and Onboarding**

Before go-live, a Clinical Excellence (ACE) Team specialist and our Wellpath Warriors team will be on-site three to four days to shadow existing staff to validate the standard operating procedures created for go-live. We will also conduct in-depth orientation training for incumbent and external staff. Off-site sessions will present information in three categories: **Journey, Readiness, and Experience.**
**Journey**
The Journey session will be held in a classroom and will review the following information specifically for RNs, and medical assistants:

- Receiving Screening
- Emergency Response
- Sick Call/Documentation
- Medication Administration
- Detox Withdrawal Protocol

**Readiness**
This one-hour session will take place at table stations to review RN, and medical assistant skills in the following areas:

- Point of Care (blood sugar, urine analysis, pregnancy test, strep testing)
- Emergency Medication (Narcan, EPI, Glucagon)
- PPD (administration and reading)
- Oxygen
- Review of N-95 testing
- Electrocardiogram (EKG)
- Otoscope and ophthalmoscope
- Vital Signs

**Experience**
This four-hour session is delivered to RNs by a physician and/or nurse practitioner to review health assessments.

**Go-Live**
ACE Team and Warriors will be on-site at midnight if not allowed to come sooner. The following Wellpath individuals will lead the Transition Team in conjunction with the Regional Vice President and Regional Director of Operations:

- ACE Team Lead – LaTyris Pugh, Client Support Team Director
- Warriors Manager – Caroline Woodard, Client Support Team Specialist

The teams will work one on-one-with jail healthcare staff and provide hands-on training to help facilitate crucial systems and processes (CorEMR and various additional systems and practices). This is designed to support the on-site healthcare staff transition.

The ACE Team will conduct the initial onboarding during the Journey trainings with the jail medical staff and develop the standard operating procedures for the site.

The Wellpath Warriors will ensure the trainings provided during the initial orientation is implemented along with the standard operating procedures during the day and night shifts with the jail medical staff.
Wellpath Warriors remain on-site for 30-days to assist the medical staff. The ACE Team follows-up with Site Leadership 30, 60 and 90 days after the transition to ensure system and processes identified during the initial transition continues as planned.

**Transition Timeline**

We have transitioned many of our clients within 30 days of contract award, and we work to ensure a successful and smooth transition for the KCJ. With that in mind, we present the following sample transition timeline.

<table>
<thead>
<tr>
<th>Sample Transition Timeline (30 days)</th>
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<tbody>
<tr>
<td><strong>Date</strong></td>
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<tr>
<td><strong>Day 1</strong></td>
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</table>
| **Days 4-5** | On-site meeting with facility administration and current healthcare staff  
Begin recruiting current healthcare staff |
| **Day 8** | Issue first implementation plan with all 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** | 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, including medical waste, mobile X-ray, lab services, etc.  
IT ensures connectivity; orders time clocks, computers, printers, and copiers  
Deliver offer letters  
Deliver declination letters in person and in private; this list will have been discussed with facility staff to ensure no issues |
| **Week 3** | 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** | Complete work schedule and identify any potential openings  
In-person benefit enrollment sessions (BENEFITS BEGIN DAY ONE)  
Clinical team reviews all patients with scheduled off-site appointments and all scheduled chronic care clinics  
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 all 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** | Assume operations at 12 a.m.  
Computers, copiers, lab equipment, pharmacy carts, etc. delivered and inventoried |
Sample Transition Timeline (30 days)

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
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</thead>
<tbody>
<tr>
<td>Month 1 of Contract</td>
<td>• Begin monthly reporting&lt;br&gt;• Identify process improvements</td>
</tr>
<tr>
<td>Month 2 of Contract</td>
<td>• Implement process improvements&lt;br&gt;• Begin CQIP meetings&lt;br&gt;• Begin monthly Infection Control meetings&lt;br&gt;• Submit site-specific Policies and Procedures for approval</td>
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</table>

**Transition Experience**

Wellpath is well-equipped to implement comprehensive healthcare services for the number of inmates in your custody, based on our experience and success in similarly sized jails. With our unmatched experience, we stand ready to complete a successful and smooth transition in Klamath County.

Wellpath has significant experience transitioning contracts. We have provided the following client testimonials for your review and we encourage you to contact our client references. Ask them why they chose Wellpath and how our operations are different from their previous provider.

**Client Testimonials – The Wellpath Difference**

- **Reducing Offsite Transports**
  “Prior to bringing on [Wellpath], our jail staff had to transport the majority of x-ray and triage patients to a local medical facility or to the hospital. Managing medical services the old way was a strain on our transportation unit and created inherent safety and security issues. Contracting with [Wellpath] truly has been a win for Santa Cruz County. I am happy to recommend [Wellpath] and have no doubts you will be exceptionally pleased should you choose to contract with them.”
  Sheriff Phil Wowack<br>Santa Cruz Sheriff’s Office

- **Customer Service**
  “Oftentimes smaller accounts will receive less attention from service providers, but this is not the case when it comes to your company. You, your associates and staff address issues that arise timely and efficiently and are always available to answer questions and provide solutions.”
  Sheriff Martin Ryan<br>Amador County Sheriff’s Office

- **Transition Process**
  “I am extremely impressed and satisfied with [Wellpath’s] commitment to assuring an effective, efficient, and seamless transition process. In addition to the contractual staffing model, [Wellpath] deployed resources and subject matters experts from across the country in order to assure that our transition process was a success.”
  Lieutenant Colonel James Reyes<br>Broward Sheriff’s Office, FL
<table>
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<tr>
<th><strong>Client Testimonials – The Wellpath Difference</strong></th>
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| **Customer Service** | “I made the decision to switch our corrections medical provider to [Wellpath, formerly CCS] after extensive research and evaluation. This decision was one of the best decisions that I have made as Sheriff. The level of service provided by [Wellpath] is second to none! This organization gets it, they go above and beyond every day. We have constant interaction with corporate representatives up to and including the CEO himself. They have increased the level of care to our inmates and reduced our outside medical costs. [Wellpath] is focused on customer service and customer satisfaction. Thank you for the partnership.”  
Sheriff Rick Ramsay  
Monroe County Sheriff’s Office, FL |
| **Positive Changes** | “While the partnership between the DeKalb County Sheriff’s Office and [Wellpath, formerly CCS] is new, the transition has been smooth and consistent with the goals and objectives set forth in their proposal. [Wellpath] immediately hired additional nursing, mid-level clinicians and doctors to meet the growing population of inmates with chronic and acute illnesses. To facilitate a smooth transition, [Wellpath] identified and dedicated two members of the corporate office to acclimate on-site staff with [Wellpath] systems, processes, and policies and procedures.”  
Xernia L. Fortson, Esq.  
Director of Administration & Legal Affairs (retired)  
DeKalb County Sheriff’s Office, GA |
| **Measurable Results** | “Since switching to [Wellpath, formerly CCS], every single objective measure of our medical services has improved, and in some cases, dramatically…Now when I’m in the housing units, fewer inmates by far are approaching me to complain about their medical concerns, which means [Wellpath] is taking care of business…The response of [Wellpath’s] regional and corporate representatives to any question I may have is immediate and sustained—they don’t go away until I’m satisfied.”  
Randy Demory, Jail Director  
Berkeley County, SC |
| **Overall Quality** | “Santa Rosa County Sheriff’s Office received Excelsior Re-Accreditation status in September 2019 by the Florida Corrections Accreditation Commission. This would not have been possible without the professionalism and hard work of the Wellpath staff. It should be noted this audit occurred only 8 months after Wellpath took over our medical contract. We continue to be impressed by Wellpath, your on-site staff, regional and corporate team, and the partnership you provide to Santa Rosa County.”  
Col. Randy Tifft, Detention Director  
Santa Rosa County Sheriff’s Office, FL |
| **Communication** | “As advertised, your organization has been extremely responsive to our needs and the proactive manner in which you operate is in stark contrast to our previous provider.”  
Sheriff Daron Hall  
Davidson County, TN |
| **Creativity** | “[Wellpath, formerly CCS] was able to creatively structure a contract that managed skyrocketing inmate healthcare costs in a manner that was consistent with our philosophy of care. This was an amazing feat….I recommend [Wellpath] as a service provider without reservations.”  
Gayle Harris, Director (retired)  
Durham County Health Department, NC |
V.v. Cost Effective Innovation Programs

**Virtual Clinical Hub**

Wellpath is preparing to implement an innovative program for regionally centralized sites that allows regional nursing support through our nearby sites that have a larger healthcare staff pool and resources available in the communities served. We envision using this program once implemented to expand the program offered at the Klamath County Jail through our sites in Lane County, Douglas County, and Jackson County. This is an innovative program that is cost effective for our partner sites.

Through this program Wellpath plans to deploy clinical hub/remote nursing for intake, sick call, tele-mental health, tele-psych, and tele-med for certain somatic providers when our local staff are not on-site. This program provides appropriate staffing and night and evening healthcare responses for smaller sites that might be unable to financially support a 24-hour staffing plan.

This program has been in development for years at Wellpath and our expectation is to deploy this program within the first quarter of 2021. With the current focus on infection control through social distancing and the need to limit patient movement, this is the appropriate time to offer this program for Klamath County. The clinical hub/remote nursing model provides access to nursing and clinical staff who already understand the scope of practice and have achieved licensure in the state of Oregon. This significantly impacts recruiting, onboarding, and training time for Klamath County.

This proposed nursing and clinical model will supplement the staffing plan by providing emergent triage and health services virtually when health care staff are not physically in the facility through telehealth, which is widely used in many of our sites. This practice has increased significantly in response to the COVID-19 pandemic which has helped control infection at many of our sites.

**Wellpath eConsult System**

Wellpath recently introduced an electronic consultation system, called eConsult, that gives our on-site providers 24-hour access to a panel of medical specialists from around the country for additional consultation on a patient’s need for off-site referral. The consulting specialist either affirms the need for off-site referral or recommends on-site management of the patient’s condition. The Wellpath provider then decides whether or not to send the patient off-site. This reduces unnecessary off-site referrals while ensuring optimal clinical care. The result is better and safer care by bringing the expertise of medical specialists to the patient without ever leaving the facility.

Wellpath staff document all eConsults in the patient’s medical record. The system also includes robust analytics and dashboards that allow our clinical team to analyze referral data and identify opportunities to optimize the delivery of on-site care and further reduce unnecessary off-site trips. We have seen a significant reduction in off-site trips where we have piloted the eConsult system.

The eConsult system provides access to 140 medical and mental health specialists in approximately 70 specialties, many of whom are affiliated with academic and major health systems. All specialists are licensed, board certified, and fully insured practicing physicians with training and experience in telemedicine, technology, and corrections. They must undergo rigorous background checks and participate in ongoing quality monitoring. Specialties available through eConsult include:
Teledermatology
Wellpath delivers quality healthcare services to incarcerated patients, similar to those provided in your community. We deliver these services reliably and cost-efficiently using the best people, technology, and practices available. The Wellpath Telemedicine Program is an important tool that allows us to deliver healthcare by highly qualified medical treatment for medical and mental health patients at a fraction of the cost and with reduced transportation and security risks – regardless of location.

Wellpath has developed a Telemedicine Program to customize and optimize telemedicine services for our clients. The program removes barriers from accessing necessary healthcare services based on time and location constraints. Telemedicine not a replacement from our other healthcare programs; instead, it complements our total program by addressing the needs of our patients, especially where staffing may be a challenge. We now use Telemedicine as a routine method for delivering medical and behavioral health services in jails, prisons, and forensic hospitals to State, County, FBOP, ICE, and USMS detainees.

Wellpath excels in the use of telemedicine at correctional facilities and has an established infrastructure to support this type of healthcare delivery. We work in partnership with a network of telemedicine providers to provide specialty care that includes:

- Wound care
- Infectious disease
- Dermatology
- Internal medicine
- Family practice
- Emergency services
- Cardiology
- Endocrinology
- Pulmonology
- Orthopedics

In fact, we conduct more than 6,900 synchronous audio-video telemedicine encounters each month in 205 facilities across 32 states. We performed more than 104,000 telemedicine encounters in 2019.

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<tr>
<th>Wellpath Telemedicine by the Numbers</th>
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<tbody>
<tr>
<td><strong>Description</strong></td>
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<tr>
<td>Wellpath telemedicine providers</td>
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<tr>
<td>Telemedicine contracts</td>
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<tr>
<td>Facilities using telemedicine</td>
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<tr>
<td>States where Wellpath uses telemedicine</td>
</tr>
<tr>
<td>Monthly synchronous audio-video telemedicine encounters</td>
</tr>
<tr>
<td>2019 telemedicine encounters</td>
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</tbody>
</table>
William Ruby, DO, Wellpath State and Federal Medical Director, created the Correctional Medicine Telemedicine Project at the Johns Hopkins School of Medicine. We developed telemedicine clinics for local detention facilities in Orleans Parish, LA, and Macomb County, MI, as well as State Departments of Corrections in Arkansas, Kentucky, Maine, and Pennsylvania. The Wellpath Telemedicine Program has been well received by clients, clinicians, and patients alike.

Implementation includes an analysis of unique needs at the KCJ, including patient volume, technological accessibility, and facility workflow. We submit a detailed, customized plan for implementing telemedicine and telepsychiatry services that meet those requirements.

Benefits of Telemedicine
Telemedicine services are an excellent complement to a traditional on-site healthcare program. This is particularly true where recruiting providers can be challenging, or during off-hours for consultation purposes to prevent off-site transportation. Telemedicine, when considered in total (actual medical services provided, transportations costs, and public safety issues), is a cost-effective, appropriate level of care that meets or exceeds community standards. The following chart provides key features of telemedicine and how they benefit you.

<table>
<thead>
<tr>
<th>Feature</th>
<th>Benefit to [Client] County</th>
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<tbody>
<tr>
<td>No patient movement required</td>
<td>• Eliminates the need for off-site transport</td>
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<td></td>
<td>• Reduces associated travel costs</td>
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<tr>
<td>Provider can be located anywhere</td>
<td>• Facilitates seamless prescribing provider coverage during absences</td>
</tr>
<tr>
<td></td>
<td>• Reduces staffing vacancy and absence related costs</td>
</tr>
<tr>
<td>Available during off hours</td>
<td>• Shortens service delivery times</td>
</tr>
<tr>
<td></td>
<td>• Increases access to care during urgent situations</td>
</tr>
<tr>
<td>Connects national specialty service groups to enhance best practice of care for complex cases</td>
<td>• Provides timely, impactful specialist coverage</td>
</tr>
<tr>
<td></td>
<td>• Promotes synchronized staff education on current clinical issues</td>
</tr>
<tr>
<td>Supports prompt and accurate diagnoses</td>
<td>• Maintains equivalent diagnostic and therapeutic outcomes compared to in-person consultations</td>
</tr>
<tr>
<td>More than 100 Wellpath Providers</td>
<td>• Shortens service delivery times</td>
</tr>
<tr>
<td></td>
<td>• Reduces time to fill telemedicine positions</td>
</tr>
<tr>
<td></td>
<td>• Reduces employee burnout</td>
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</tbody>
</table>
Wellpath Telemedicine Policy

Appropriate use of telemedicine requires a thorough understanding of relevant laws, requirements, and guidelines that govern topics, including but not limited to:

- Telemedicine provision
- Confidentiality
- Protected health information
- Appropriate technology services to support a telemedicine platform
- Selection and onboarding of healthcare providers
- Obtaining informed consent that addresses issues specific to telemedicine

Wellpath policy is to conduct telemedicine encounters in a manner that complies with all state and federal laws, including those relating to the licensing of healthcare providers and the privacy of patient information. Wellpath tracks the evolving telemedicine regulatory landscape and works with sites to establish and maintain compliance. We also enforce corporate telemedicine policies that establish expectations for the quality of telemedicine care delivery, technology performance, and the patient experience.

For a decade, the NCCHC has held that using telemedicine services offers jails and prisons “the ability to provide medical expertise to remote areas that might otherwise go without...enhanced access to the expertise of specialists; improved quality of care; reduced professional isolation for rural healthcare professionals; and in many cases, a reduction in overall costs.”
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VI. Specialty Needs

“Provide information on your company provides a clear plan for inmates with specialty needs”

Many patients have special healthcare needs requiring ongoing medical supervision and/or multidisciplinary care. The Wellpath 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 our patients’ 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 a high risk for clinical decompensation. Our goal is to provide these patients with services that promote health maintenance and health improvement. The Wellpath 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

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

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

Patients with special needs may also be identified through self-report, during a provider encounter, or by security staff. Self-reported conditions are entered in the patient’s medical record and verified by the medical provider. Referrals from security staff are managed the same way as reports made by the patient directly to medical or mental health staff.

Individualized Treatment Plans

The Mid-level Provider develops 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 the 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 mental health special needs treatment plan based on the results of the assessment. 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 to be used in pursuing them.

Wellpath special needs treatment plans 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 indicated. 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 KCSO as needed to facilitate housing in the appropriate area of the KCJ and to ensure proper treatment of patients with long-term and individualized healthcare needs.

Medical special needs patients are typically reviewed by the Mid-level Provider every 90 days, or at other intervals when medically indicated. This consultation is documented in the patient’s medical record and includes the date and time of the consultation, the provider’s name and title, and any 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.
We suggest that 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, if applicable.

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.

**VI.a. Chronic Care**

Wellpath provides a complete chronic disease management program in accordance with 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 clinical monographs, disease-specific guidelines, clinical decision support tools, and a clinical informatics platform to guide population-based interventions that are 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 Care of Chronic Disease, based on recommendations from professional organizations, to guide their treatment decisions.

Wellpath has developed Clinical Monographs that represent best practices our practitioners should use when treating specific medical conditions. The purpose of the Clinical Monographs is to reduce variability in the care provided to groups of patients with similar healthcare needs. Topics include:
Klamath County Jail Medical Services

- 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

**Chronic Care Tracking**

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

**Chronic Care List by Problem**

![Patient Profile - Chronic Care by Problem](image-url)
VII. Written Healthcare Plan

“Provide information on how your companies will implemented written health care plans with clear objectives and policies that a line with Klamath county standards”

Wellpath will implement a written healthcare plan with clear objectives and site-specific policies and procedures for the KCJ. Our goal will be to reduce risk for KCSO, avoid unnecessary transportation and security costs for off-site care, and lower litigation claims and grievances while improving patient care. Our significant experience in these areas will help us achieve these benchmarks in Klamath County.

Policies and Procedures
Within 60 days of start-up and following a discovery period, Wellpath will develop a Policies and Procedures manual tailored to healthcare services provided at the KCJ. Content will meet or exceed NCCHC and ACA standards. We anticipate that certain policies will require revision within the first 120 days of the contract. The manual will be subject to KCSO’s approval and will be reviewed and revised as Wellpath and/or KCSO policies are modified, and at least once a year.

For your reference, we have provided a sample Table of Contents from our standard Wellpath Policies and Procedures manual in Tabbed Attachment I. Please note that this information is confidential and proprietary.
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VIII. Fee Proposal

“Fee Proposal & Estimated annual costs for inmate services”

Wellpath has provided our Fee Proposal and estimated annual costs for inmate services in a separate sealed document per the RFP requirements.
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IX. Healthcare Records and Analytics

“Provide information on how your company will maintain complete and accurate records of care and analyze health statistics on a regular basis”

Wellpath is confident the various processes, policies, programs, and technologies proposed allow us to properly maintain complete and accurate records of care. The use of these best practices and software ensures efficient delivery of services and the ability to analyze health statistics in order to provide efficient care and cost savings for the KCSO and KCJ. The following programs have been outlined throughout Section V – Operation of Statement of Work of this proposal:

- CorEMR Electronic Health Records
- The Wellpath Care Management System
- Reporting Capabilities
- Continuous Quality Improvement Program
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X. References

“Corporate Experience/References”

We have selected the following client references that we believe can best communicate our strengths and our ability to meet and exceed the requirements and expectations for the program you have defined in your RFP. If desired, we can arrange a tour to show you our programming in action.

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<th>Coos County</th>
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<tr>
<td>Contact Name</td>
<td>Capt. Darius Mede</td>
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<tr>
<td>Phone</td>
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<tr>
<td>Contact Name</td>
<td>Capt. Clint Riley</td>
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Business/Financial References
Wellpath has provided the reference letters from major suppliers who can speak to our financial capability on the following pages.
March 26, 2020

Wellpath
1283 Murfreesboro Road, Suite 500
Nashville, Tennessee 37217

Re: Letter of Reference

To Whom It May Concern,

As the President and CEO of Correct Rx Pharmacy Services, Inc. (Correct Rx) I am providing a reference letter for Wellpath.

Correct Rx has a long history of working with both CCS and CMGC. Since their merger and the formation of Wellpath this relationship has continued and grown. Correct Rx currently provides pharmacy services to 138 Wellpath facilities including prisons and jails throughout the country. We are intimately familiar with their skills and capabilities. They are always professional and approach every project with the earnest intent of providing the highest level of care to their patient population.

It is with this understanding that I am confident in their capability to provide exceptional healthcare services.

Please feel free to contact me if you have any questions or require additional information regarding this correspondence.

Sincerely,

[Signature]

Ellen H. Yankellow, PharmD
President and CEO

www.correctrxpharmacy.com
July 26, 2019

RE: Letter of support for Wellpath

To whom it may concern:

This letter is to confirm TridentUSA Health Services’ support of Wellpath in their bid for the current RFP. TridentUSA submitted a Letter of Intent showing our commitment to partnering with Wellpath to provide on-site imaging services as required at your facility should they be awarded the contract.

TridentUSA partners with Wellpath in many contracts to provide a variety of on-site radiology services. We have a strong relationship that allows for smooth start-up and quick resolution to any issue that may arise along the way.

Please feel free to reach out to me with any questions.

Sincerely,

[Signature]

Greg Ward, R.T. (R)(ARRT)
Executive Vice President of Business Development
greg.ward@tridentusahealth.com
M: (615) 714-4561
O: (866) 373-9729, 241

13773 Icot Boulevard, Suite 502, Clearwater, FL 33750
INSTITUTIONAL EYE CARE
Sharing your Vision for Excellence in On Site Health Care since 1983

August 1, 2019

RE: Letter of Support for:
Wellpath
1283 Murfreesboro Road
Suite 500
Nashville, TN 37217

To Whom It May Concern,

Please consider this a Letter of Support for Wellpath.

Institutional Eye Care LLC and I personally have worked with Wellpath since its inception and, prior to that, with the various companies that now comprise it - some for over 20 years.

Wellpath is an excellent business partner. They are focused on providing quality care to their clients working in cost effective collaboration with vendors like us. Communication is a hallmark of theirs.

They have a truly dedicate staff and excellent system in place. Wellpath always pays their claims on time and never runs past due.

It is a pleasure to recommend Wellpath. I am available at anyone’s convenience to discuss in more detail this exceptional company.

Thank You.

Jeffrey R Lose, OD
President and Founder – Institutional Eye Care LLC

PO Box 366550
Bonita Springs FL 34135
Phone 570.523.3493
Fax 570.524.2817

www.institutionalEyeCare.com
23 July 2019

RE: Letter of support for Wellpath

I am writing this letter of support for Wellpath, located at 1283 Murfreesboro Road, Suite 500, Nashville, TN 37217.

I have worked closely with the Wellpath team for the past 3 years and the relationship with McKesson goes back almost 10 years. Wellpath very customer focused and easy to work with. Their focus on cost effective care is very clinical and data driven.

They have a strong commitment to effective communication. They ensure success in good and bad situations whether it is starting up new customers to navigating product shortage issues by inclusively communicating with all stakeholders and setting very clear expectations.

Their dedicated and knowledgeable staff is a genuine pleasure to work with.

Please feel free to contact me if there are any questions.

Regards,

John Campbell
Vice President, Government Sales
804-986-7733
john.campbell@mckesson.com
July 30th, 2019

RE: Letter of Recommendation for Wellpath

To Whom it May Concern:

This is a letter of recommendation for Wellpath, located in Nashville, Tennessee.

Regency and Wellpath have had a fantastic partnership for over 11 years. Wellpath is very focused on the care they give to their clients, the way they treat their own people, and how they treat their vendors. I have been fortunate enough to grow along with them throughout their ventures for more than a decade.

I work and have worked with almost every department in the corporate office. I have also visited and worked with each individual site throughout the country. I can honestly say that each individual I have ever met or done specific jobs for, have been the utmost professional and courteous. In today’s working environment this can be hard to achieve. Wellpath is a special company and I would be happy to recommend them as a business partner for any company that they see fit.

As a vendor, it is important that the client feels as though you are a partner or an extension of their business. I have always felt that Wellpath valued Regency as part of their family. That is how I have always been treated. They communicate with me constantly and pay their bills in a timely fashion.

Please accept my recommendation for Wellpath and please call or email me with any questions that you may have.

Sincerely,

Jeff Young
CEO Regency Office Products – Nashville
Cell: 312-399-7238
Email: jyoung@regancyop.com