



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF CORRECTIONS  
DIVISION OF ADMINISTRATION

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## QUESTIONS & ANSWERS

RFP Title: NHDOC 12-07-GFMED Health Services Professional Services

RFP Deadline: April 6, 2012, no later than 2:00 EST

Question # 1:

In relation somewhat to the current RFP; can you tell me which of the following services are currently contracted out and to whom? Then I will need some guidance on how to obtain contracts for these components:

Nursing Services  
Physician Services  
Pharmacy  
Mental Health Services  
Dental Services  
Medical Records Services

**Answer #1:**

**Nursing Services:** Nursing staff at all sites are currently state employees. The NHDOC currently has a contract with Maxim Healthcare Services, Inc. d/b/a Maxim Staffing Solutions for temporary nursing services to cover FMLA, vacancies, etc.

**Physician Services:** Physicians at all sites are employees of MHM Solutions, Inc.

**Pharmacy Services:** Pharmacy staffs are currently state employees.

**Mental Health Services:** Psychiatrists, Psychiatric APRNs, NGRI Clinical Coordinator, Chief Forensic Examiner and Staff Psychologists specializing in competency evaluations are employees of MHM Solutions, Inc. The remainders of Mental Health Services staff are state employees.

**Dental Services:** Dentists, Hygienists and two dental assistants are employees of MHM Solutions, Inc. One dentist, two dental assistants and the Dental Office Manager are currently state employees.

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**Medical Record Services:** Medical Record staffs at all sites are currently state employees.

To obtain copies of the current contracts, submit a written request to Jeffrey Lyons, NHDOC Public Information Officer, PO Box 1806, Concord, NH 03302. He will process your request and notify you of the total number of pages of the contracts requested. A pre-paid fee of \$.50 per page is required. Upon receipt of the required amount, the contract copies will be mailed to you.

**Question # 2:** Who is NHDOC's current provider(s) of the following services?

- Medical Care Services
- Dental Services
- Medical Record Services
- Nursing Services

**Answer # 2:** See Answer # 1, above.

**Question# 3:** Throughout the RFP, there are references to the NHDOC's policies, procedures, and directives (PPDs). Are we able to obtain an electronic copy of these PPDs.

**Answer # 3:** Go to <http://www.nh.gov/nhdoc/ppd.html>, our website. Go to the bottom of the PPD page and there is a link to Section 6 which has all the health related PPDs.

**Question # 4:** Terms and Conditions, Section 10.2.5 (Page 5 of 72). The State requests a list of all current and former clients using similar products and systems. Would the State like this list prioritized in any way?

**Answer # 4:** The State requests a response to 10.2.5 that includes all the information listed. You may list this response in any order you choose.

**Question # 5:** Exhibit A, Section 8.23 (Page 24 of 72). Please provide a copy of the current MFSS indicating the number and types of personnel as well as the day and shift they worked.

**Answer # 5:** See sample MFSS posted on the website.

**Question # 6:** Exhibit A, Section 8.29 (Page 25 of 72) Are any of the current employees of the NHDOC that are affected by this RFP, covered by a Union and/or other Bargaining Agreement? If so can a copy of said agreement be provided? Please include wage and benefit scale as well as number of years of service for each employee.

**Answer # 6:** All current state employees are covered under bargaining agreements. Please go to [nh.gov](http://nh.gov) and select the State Employees link on the left side of the [nh.gov](http://nh.gov)'s home page. You will find all aspects of bargaining agreements, wage and benefit information, job descriptions, etc. on this website. The wage scales, benefits, etc. are accessed through <http://admin.state.nh.us/hr/comp.html>.

**Question # 7:** Exhibit A, Section 8.29 (Page 25 of 72) The Vendor is being asked to give first right of opportunity for consideration to staff affected by this RFP. In Section 10 (page 28 of 72) and Section 25 (page 44 of 72), should the Vendor assume that other Nursing Staff are Licensed Practical Nurses? If not, please provide levels of licensure. This will help the Vendor determine the opportunity to take these individuals into consideration when providing projected staffing plans.

**Answer # 7:** There is currently only one LPN employed within nursing services. All other current employees are Registered Nurses.

**Question # 8:** Exhibit A, Section 9.1.2 (Page 26 of 72) Does the Department want the Vendor to bridge current medications for a new inmate/patient until seen by a provider (Physician/Psychiatrist/Dentist/Nurse Practitioner) and an evaluation of this patient is complete to determine the need of said medication(s) or does the Department believe these medication(s) should be continued throughout the duration of this patient's stay/incarceration?

**Answer # 8:** The Department expects medications to be provided to new inmate/patients until an evaluation by a provider is completed. Once such evaluation is completed medications ordered will depend on the practitioner's assessment, treatment plan and NHDOC formulary. The Department does not expect medications the inmate/patient is on at the time of admission to be continued through out incarceration.

**Question # 9:** Exhibit A, Section 9.1.10 (Page 26/27 of 72) Is the Contractor/Vendor or the Department responsible for arranging and cost associated with any and all on-site specialty clinics?

**Answer # 9:** The Department is responsible for payment of charges from on-site specialty clinics. Health Service staff do the scheduling of these clinics.

**Question # 10:** Exhibit A, Section 9.1.10 (page 26/27 of 72) Is the Contractor/Vendor or the Department responsible for the cost associated with prosthetics, braces, special shoes, glasses, hearing aids, orthopedic devices, wheel chairs, etc? If the Contractor/Vendor is responsible, can the Department provide numbers of each device purchased for the past three (3) years, as well as the cost associated for each?

**Answer # 10:** The Department is responsible for those costs.

**Question # 11:** Exhibit A, Section 9.2.15 (Page 27 of 72) Does the Department currently utilize Infectious Disease Specialist as an on-site clinic for the various patients with Infectious Disease mechanisms? If yes who is responsible for such cost?

**Answer # 11: No.**

**Question # 12:** Exhibit A, Section 9.1.19 (page 27 of 72) states, "the Contractor shall prescribe medications as medically necessary and appropriate and shall utilize the Department's Division of Medical & Forensic Services Pharmacy formulary." Are we able to obtain an electronic copy of this formulary?

**Answer # 12:**

See formulary posted on the website.

**Question # 13:** Exhibit A, Section 9.1.20 (page 27 of 72) states, “the Contractor shall provide comprehensive inmate/patient health education to all inmates/patients.”

- a. Does the Department expect formal health education classes to be provided to inmates/patients or should health education be provided through daily medical interactions (i.e. assessment, exams, clinics, etc.)
- b. Is the Department currently provided health education classes to inmates/patients? If so, what are they are how often are they held?

**Answer # 13:** Health education is to be provided through daily medical interactions (i.e. assessment, exams, clinics, etc) and as requested through formal health education classes.

**Question # 14:** Please provide a list of all dental equipment available on-site at each facility.

**Answer # 14:** Each facility is equipped with fixed equipment, i.e. chairs, compressors, etc. as well as dental instruments, autoclaves, x-ray processors, etc. to provide the list of services expected and outlined in Exhibit A concerning the provision of Dental Services.

**Question # 15:** Exhibit A, Section 9.1.22 (page 27 of 72). On average how many females are pregnant while incarcerated? Is OB/GYN services provided to the females as an on-site clinic or do they currently go off-site for said services?

**Answer # 15:** The department averages 1-5 pregnant females a year while incarcerated. Services are provided off-site.

**Question # 16:** Exhibit A, Section 14.1.2 (page 30 of 72) Can you please identify the ten (10) holidays which are referenced in this section?

**Answer # 16:** See answer # 6, above.

**Question # 17:** Throughout Section 15, Dental Services Program, there are references to the Department’s Division of Medical & Forensic Services Dental PPDs. Are we able to obtain an electronic copy of the Dental PPDs?

**Answer # 17:** See answer # 3, above.

**Question # 18:** Do all Units for Medication Administration already have medication carts, or is this something the Department would like the Vendor to provide?

**Answer # 18:** Not at this time.

**Question # 19:** Exhibit A, Section 24.1.1.11 (page 38/39 of 72) Does the Department require pre-employment drug testing for the Vendor/Contract employees? If yes, is this at the Vendor/Contract's own expense? Would the current employees which in accordance to Section 8.29 are to be first right of opportunity for consideration for employment, be required to undergo such testing as well?

**Answer # 19:** Yes, pre-employment drug testing is required at the Vendor's expense for their employees. For current department employees, drug testing would not be necessary.

**Question # 20:** Exhibit A, Section 24.6 (page 40 of 72) Who is the current pharmacy provider? Are the Medication Administration Records (MAR) computer generated and is the medication administration process electronically recorded? (scanner, barcode, etc)

**Answer # 20:** The pharmacy is currently a state run part of the Division with state employees. The MAR is generated through our KALOS system but is paper-based. We do not have an electronic MAR.

**Question # 21:** Exhibit A, Section 24.6.5 (page 42 of 72) Are suicide precautionary watches within the infirmary areas at the various facilities monitored or watched by medical staff and/or security staff?

**Answer # 21:** Yes.

**Question # 22:** Exhibit A, Section 24.6.13 (page 43 of 72) Pertaining to NHDOC contracts with other service providers, can the Department please provide the following information:

- a. Who are the contracts with which we will need to facilitate services onsite and what services do they provide?
- b. How often is each contractor onsite at each facility?
- c. Should these contracts come up for renewal; will the Department continue the relationship or expect the Vendor to take over the contract?
- d. Is the Department interested in seeing lower rates that the Vendor can provide through national contracts?

**Answer # 22:**

- a. We currently have contracts with on-site laboratory services contract, on-site x-ray services contract, on-site temporary nursing services contract, on-site temporary medical equipment (O2 concentrators, CPAP/BIPAP), and on-site eye care contract.
- b. Laboratory services are provided at Goffstown one day a week, Concord three days a week and Berlin facilities two days a week, x-ray services are provided as needed/requested in Goffstown and daily M-F in Concord.

The Berlin facility utilizes the contract hospital for x-ray services at their facility. Temporary nursing services are provided as needed, medical equipment services are provided as needed and the optometry services are provided 2-3 times a month in Concord, once every 3-4 months in Goffstown and once every 2- 3 months in Berlin.

- c. The Department will continue the relationship with these contracts upon renewal.
- d. Yes.

**Question # 23:** Exhibit A, Section 26.1 (page 45 of 72) states “the Contractor will be provided with the equipment necessary as deemed necessary by the NHDOC, Director of Medical & Forensic Services to provide the requested services.” Please describe what tools and equipment will be made available to the Contractor. Does this include medical and office supplies?

**Answer # 23:** The Vendor will be supplied with the equipment that currently exists at each site. Medical and office supplies are included within the rules and regulations of the State of NH and their purchasing agreements. The Vendor will have to work with the Division’s budget.

**Question 24:** Assuming that the current staff will not be reduced (in compliance with Exhibit A, RFP requirement 27.3 on page 48), is the Department interested in the implementation of an Electronic Medical Records system in conjunction with or different from the CORIS system already in place?

**Answer # 24:** CORIS is not an Electronic Medical Record it is the NHDOC’s inmate management system for the entire prison system.

We are not requesting an RFP response based on a proposed EMR.

**Question 25:** Do the NHDOC facilities described in this RFP currently hold any accreditations? If so, please provide the name of facility and accreditation status.

**Answer # 25:** No.

**Question # 26:** Will the contractor be responsible for medical waste removal/disposal?

**Answer # 26:** No, the Department has a contract for medical waste removal/disposal.

**Question # 27:** Why do all of the budget total sections say to exclude the on-call costs? Are these costs going to be added to the annual cost by the state at a later time?

**Answer # 27:** Please see page 55 of 72 2.6. We are asking for on-call services to be budgeted separately.

**Question # 28:** Are the aggregate charges associated with call backs (per call back rate multiplied by estimated number of call backs) supposed to be included in the on-call estimate or is the on-call estimate only supposed to include the daily/weekend call charge and the call backs will be paid separately?

**Answer # 28:** The cost proposal is an aggregate charge.

**Question # 29:** The RFP mentions in several places that a vendor provided detailed worksheet is to be attached. What is this sheet and what should be included?

**Answer # 29:** The worksheets are provided within Exhibit B for all service areas.

**Question # 30:** What is the purpose of the % blank in the expense breakout for benefits? Is this what percentage of salaries are benefits or is this the annual percentage increase like is requested for the salaries?

**Answer # 30:** The % blank represents the % of benefits in compensation proposed.

**Question # 31:** Page 16, Proposal Check Sheet: The RFP lists the Program Structure/Plan of Operation Narrative as a subsection of the Cover letter. However, later in the list, the RFP lists that a **Program Narrative** is also required to be returned in the proposal but a program narrative is not mentioned throughout the RFP other than the Program Structure/Plan of Operation Narrative. Please clarify what is expected to be returned within the **Program Narrative** section.

**Answer # 31:** The Vendor shall provide a Program Narrative for each service section that the Vendor will bid on to compliment the Budget Narrative of each service/treatment section.

**Question # 32:** Page 16, Proposal Check Sheet: The RFP asks vendors to describe services as related to Exhibit A within the Agency Capacity and Program Structure/Plan Narrative proposal section. The check list requires a section titled Exhibit A to be part of the documentation to be included with the proposal. Please confirm or clarify if the Department is expecting a replicated version of Exhibit A from the RFP with no vendor comments to satisfy the required documentation section Exhibit A, since the RFP items will already be discussed within Agency Capacity and Program Structure/Plan Narrative.

**Answer # 32:** The Department expects the Vendors to provide a program narrative for each service section they are bidding on to have the depth and breadth in their response to allow the Department to evaluate compliance with the Scope of Services listed within each service section and to evaluate their response against all other bidder responses.

**Question # 33:** Page 17, Proposal Check Sheet: The RFP lists “Copies of entity and/or professional licensures and certifications providing the requested services” to be returned with the proposal. Can we assume you are referring to licensure/certification of proposed staff?

**Answer # 33:** No. You are required to provide both licensure/certifications for any proposed staff and any licenses/certification, .i.e. The Joint Commission your organization holds/maintains.

**Question # 34:** Page 18, Proposal Check Sheet, Other Necessary Forms, paragraph. 3: Page 18 specifies that the vendor must procure professional liability insurance and provide a certificate of insurance with the bid. However the RFP does not specify the level of such insurance.

a. What is the required level for professional liability insurance for this contract?

b. Will the DOC require a performance bond? If so, what is the amount of the performance bond?

**Answer # 34:**

- a. \$2,000,000.00
- b. No.

**Question # 35:** Page 22, 8. Provision of General Health Services, Professional Services, General: Are any of the positions within the RFP currently part of a union? If so please identify the positions and provide a copy of the current union collective bargaining agreements.

**Answer # 35:** Please see Answer # 6, above.

**Question # 36:** Page 22, 8. Provision of General Health Services, Professional Services, 8.2: Does the NHDOC require any health record information to be documented electronically or in the offender management system? If yes, please describe the requirement to enter health record information into any electronic system.

**Answer # 36:** The NHDOC currently requires mental health staff to utilize CHOICES, the electronic behavioral health record.

**Question # 37:** Page 22, 8. Provision of General Health Services, Professional Services, 8.4: Is the cost of forms a responsibility of the vendor?

**Answer # 37:** No.

**Question # 38:** Page 25, 8. Provision of General Health Services, Professional Services, 8.26: The staffing plan in the RFP does not include a position to manage the InterQual system. Is the Department prepared to fund an additional position to manage the InterQual System?

**Answer # 38:** No.

**Question # 39:** Page 26, 9. Medical Services Program, 9.1.7: How many certified respiratory isolation rooms are available? Please provide the locations.

**Answer # 39:** Concord Prison-6, SPU-3, NCF-4 and Goffstown-0.

**Question # 40:** Page 28, 10. Current NHDOC Medical Services Staffing, Table: Is the Department including the Director of Rehab Services and the Registered Dietician position in this procurement? If yes, please provide the scope of services expected for these positions.

**Answer # 40:** No.

**Question # 41:** Page 32, 15. Dental Service Program, 15.2.4: Does the Department have specific guidelines for offering dental prophylaxis?

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**Answer # 41:** The current Dental PPD and treatment guidelines are currently under review and development. Final documents are not currently available.

**Question # 42:** Page 32, 15. Dental Service Program, 15.2.9: Please provide the Department criteria/guidelines required for use in provision of prosthodontics?

**Answer # 42:** See Answer # 41, above.

**Question # 43:** Page 39, 24. Proposed Nursing Staffing Services, 21.1.11.d: Will physical exams be required for current NHDOC employees who accept positions with the contractor?

**Answer # 43:** No but any employee hired will have to meet the physical demands of the job.

**Question # 44:** Page 39, 24. Proposed Nursing Staff Services, 24.2.1: Director of Nursing-Given the scarcity of RN's with ANA certification in Administration, will the Department consider applicants not meeting this requirement?

**Answer # 44:** The Department prefers a DON with ANA certification but will consider candidates with significant amounts of experience.

**Question # 45:** Page 39, 24. Proposed Nursing Staff Services, 24.2.3: Nurse Manager-Given the scarcity of RN's with ANA certification in Administration will the department consider applicants not meeting this requirement?

**Answer # 45:** The Department prefers nurse managers with ANA certification but will consider candidates with significant amounts of experience.

**Question # 46:** Page 40, 24. Proposed Nursing Staff Services, 24.5.2: Regarding the vendor being required to provide replacement personnel within three hours, are we to assume that the replacement is only necessary if service cannot be provided by remaining staff?

**Answer # 46:** Yes.

**Question # 47:** Page 42, 24. Proposed Nursing Staffing Services, 24.6.3: Will the Department be responsible for obtaining and maintaining all equipment necessary for medication administration?

**Answer # 47:** Yes.

**Question # 48:** Page 44, 25. Proposed Nursing Services Schedule, Table: The Department has provided the current NH nurse staffing on page 28 of the RFP and a proposed Nursing services schedule on page 44. The current NHDOC nurse staffing significantly exceeds the proposed Nursing service schedule on page 44. We recognize that some parts of the scope of service of this RFP are not being completed by the current NHDOC staffing on page 28. Can we assume the department realizes that FTE's proposed in responses to this RFP will likely exceed the current nurse staffing on Page 28 to the meet the requirements of the RFP?

**Answer # 48:** See page 44 of 72, 25.3.

**Question # 49:** Page 45, 26. General Service Provisions, 26.1: Will the Department be responsible for providing all computer equipment for the staff requested in this RFP?

**Answer # 49:** The Vendor will have to function with the Department's OIT capacity unless otherwise budgeted for in the Vendor's support line.

**Question # 50:** General: Are there any rules or provisions that would prevent a state employee who retires from state service from working for the contractor in the same or similar position?

**Answer # 50:** No.

**Question # 51:** RFP Section B.26.1 Paragraph 1 p. 45: The RFP states the Vendor will be provided equipment necessary to provide care. Please provide the list of equipment available including but not limited to: x-ray equipment, EKG machines, minor surgical instruments (light instruments, autoclave, punch biopsies), ultrasound devices, respiratory therapy equipment (oxygen concentrators, nebs, portable pulse ox device), necessary on-site lab devices (portable INR machines, microscope, glucose meters).

**Answer # 51:** See Answers # 10, 14, 18, 22 and 23 above. This RFP is requesting a staffing response.

**Question # 52:** RFP Section B.26.1 Paragraph 1 p.45: If a vendor needs additional equipment or equipment wears out, what is the process to requisition new and probability that requests that are reasonable will be funded in an appropriate time period?

**Answer # 52:** The vendor will work with the Department's equipment procurement process as outlined by the State of New Hampshire's rules and regulations pertaining to equipment acquisition. Requests for funding are dependant on the capital equipment budget, available funds and approvals per the state's procedures.

**Question # 53:** RFP Section B.9.9.10 Paragraph 1 p. 26: Please provide the type, location and frequency of specialty clinics provided on-site currently by NHDOC.

**Answer # 53:** See Answer # 22, above.

**Question # 54:** RFP Section B.6 Paragraph 1 p. 21. Regarding the Average Daily Population (ADP) are any significant changes anticipated by NHDOC over the duration of the proposed contract?

**Answer # 54:** Not at this time.

**Question # 55:** RFP Section B.7.1-7.4 Paragraph 1 p. 21. Who is the current dental services provider? Please provide a copy of the contract for dental services.

**Answer # 55:** See Answer # 1, above.

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**Question # 56:** RFP Section B.19.2.1 Paragraph 3 p. 35: Please describe the data feeds that will be available to the Vendor for census management within our systems.

**Answer # 56:** Your question does not relate to the paragraph cited. However, the Vendor will have access to CORIS to full-fill the required scope of service cited in p. 35 19.2.1 Paragraph 3.

**Question # 57:** RFP Section B.26.1 Paragraph 1 p. 45: Does the NHDOC have computers (PCs) installed in all patient care areas including exam rooms in all facilities. Please describe.

**Answer # 57:** There are computers in the facility health services centers assigned to specific individuals or provided for a group. They are not in all areas.

**Question # 58:** RFP Section B.26 1 Paragraph 1 p. 45: Is Internet access available in the medical units/medical offices?

**Answer # 58:** Internet access is available.

**Question # 59:** RFP Section B.26.1 Paragraph 1 p.45: Is wireless access available in the correctional facilities to support use of an electronic medical record and/or electronic medication administration records system?

**Answer # 59:** No. See Answer # 20 and 24, above.

**Question # 60:** RFP Section B.3 Paragraph 3 p. 19: What specific dental equipment/instruments will remain on-site for the Vendor to utilize? Is there a dental x-ray?

**Answer # 60:** See Answer # 14, 23, 24, 51 above. The Department owns dental x-ray equipment.

**Question # 61:** RFP Section B.8.26 Paragraph 1 p. 25. Does the NHDOC contract with or refer directly to community medical providers or through a PPO network? If so which PPO network?

**Answer # 61:** The Department has contracts with two hospitals, one each in the respective geographic locations. We have community medical providers as part of those contracts but also utilize community medical providers outside those contracts.

**Question # 62:** RFP Section B.3 Paragraph 3 p. 19 General background information: Please provide the following statistics for the last three years by year (January 2009- December 2011):

- a. Average Daily Population (ADP)
- b. Number of intakes
- c. Average LOS in the Correctional Facility
- d. Inpatient medical hospital days
- e. Inpatient mental health days (including SPU)
- f. ER visits
- g. Off-site specialty physician visits

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- h. Outpatient surgeries
- i. X-rays (on and off-site)
- j. Average number of dialysis patients
- k. Mental health visits (on or off-site)
- l. Number of inmates on prescription medication
- m. Number of inmates on psychotropic medication
- n. Number of inmates on HIV medications
- o. Number of inmates on Hepatitis C medication
- p. Number of prescriptions written

**Answer # 62:**

- a. See [www.nh.gov/nhdoc/divisions/publicinformation/index.html](http://www.nh.gov/nhdoc/divisions/publicinformation/index.html) for annual reports from 2001 to 2011 and other documents available for review.
- b. Average intakes per year are: Concord-1075, NCF-1, Goffstown-107
- c. See [www.nh.gov/nhdoc/divisions/publicinformation/index.html](http://www.nh.gov/nhdoc/divisions/publicinformation/index.html).
- d. Average inpatient hospital days per year are: Concord-493, NCF-114, Goffstown- 49 based on Fiscal Year Ending (FYE) June 30, 2011.
- e. SPU IP Days: 2011-14,443, 2010-14,012, 2009-13,154
- f. Based on FYE11 ambulance runs-207 for all facilities.
- g. Based on FYE11-494 visits for all facilities.
- h. Based on FYE11-1710 outpatient procedures/visits for all facilities.
- i. Based on FYE11 Annual x-rays: Concord-867, NCF-310, Goffstown-71
- j. Average number of dialysis patients is one.
- k. There are no off-site mental health visits. For CYE11 Behavioral Health Services completed 40,124 encounters.
- l. FYE11-173,978 prescriptions processed.
- m. Cannot provide this data in this format as requested.
- n. Number inmates on HIV meds: 2009-6, 2010-9, 2011-9
- o. Number of inmates on HCV meds: 2009-5, 2010-12, 2011-10
- p. New Rx filled: 2009-36,502, 2010-32,925, 2011-32,347

**Question # 63:** RFP Section B.3 Paragraph 3 p.19: What is the frequency of sick call in the various NHDOC facilities? What is the average number of visits per day at each facility?

**Answer # 63:** Sick call is available 5 days a week M-F, excluding holidays. Average daily visits are: Concord-27, NCF-13 and Goffstown-7.

**Question # 64:** RFP Section B.10 Paragraph 1 p. 28. Please provide the current hourly pay rate and length of service for each NHDOC employee filling a health services position as listed above.

**Answer # 64:** See Answer # 6, above.

**Question # 65:** RFP Section B.10 Paragraph 1 p. 28: What is the current cost of benefits as a percentage of salaries, for NHDOC employed health service positions? Please be sure to include any pension, PTO offerings and/or holiday/overtime pay into this calculation.

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**Answer # 65:** See Answer # 6, above. Benefits are estimated to be 50-51% of salary.

**Question: # 66:** RFP Section B8.26 Paragraph 1 p. 25: Does the NHDOC receive discounted rates for services provided outside the facility through a preferred provider network, through negotiated contracts with community providers (hospitals, ambulance service, specialists, et), or by any other special arrangement? If yes, please describe.

**Answer # 66:** Yes, the Department has negotiated contracts with two hospitals, one in the Southern Region and one in the Northern Region. Within the contracts is language to assist the Department in negotiating discount rates for the physician groups on staff at each facility. In addition RSA 623-C:2 provides that no hospital shall charge more than 110 percent of the Medicare allowable rate for inpatient, outpatient or emergency room care for prisoners in state correctional facilities. This also includes ambulatory and specialty-medical services centers licensed under RSA 151 and shall include but is not limited to surgical, rehabilitation, long term, oncology and dialysis centers but does not include physician practices and community health care clinics.

**Question # 67:** RFP Section B.8.26 Paragraph 1 p.25: Does the NHDOC have any type of Utilization Review Program in place to manage off-site referrals? If yes please describe.

**Answer # 67:** Yes. The Chief Medical Officer and the Operations Administer meet twice a week to review all referrals for health care provided by the contract hospitals and other specialty providers.

**Question # 68:** RFP Section B.8.27 Paragraph 1 p.25: Please share last two years of: any quality indicators/statistics (including critical incidents), chronic care data, statistics regarding medical problems such as infection control statistics, # of inmates with medical conditions requiring acute hospitalization in the last three years, top 10 most prevalent medical conditions and frequency in past three years.

**Answer # 68:** QI data will not be posted in response to this RFP.

**Question # 69:** RFP Section B.8.29 Paragraph 1 p.25: Does the NHDOC currently operate under a Collective Bargaining Agreement on behalf of its employees? If so, who is their representative? Will the Vendor be expected to assume this contract? Please share any documents relevant to this inquiry including the CBA, pay rates, work rules, benefit commitments, etc.

**Answer # 69:** Yes. The SEA under the SEIU represents state employees that are applicable to this contract. The Vendor is not expected to assume this contract. See also response to #6 which outlines where to find the CBA and employee data, benefits, etc.

**Question # 70:** RFP Section B8.29 Paragraph 1 p.25. The RFP indicates that current NHDOC employees have first right of opportunity for consideration to transition into the new Vendor. What process exists if the Vendor and former NHDOC employee is found unacceptable or the parties cannot agree on salaries?

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**Answer # 70:** Employment is at the discretion of the vendor while meeting the intent and scope of services of the RFP.

**Question # 71:** RFP Section B.8.29 Paragraph 1 p. 25: Will personnel files for NHDOC employees be available to the Vendor for review when employment is considered?

**Answer # 71:** The employee would have to sign a release of information to review his/her personnel file.

**Question # 72:** RFP Section B.3 Paragraph 3 p. 19: What is your current methodology for paying claims for outside care? Does the NHDOC negotiate and hold provider contracts? Is there claims payment software currently used to pay medical claims?

**Answer # 72:** We current manage all claims within the Department. The Fiscal Department processes all claims which are required to be submitted in CMS1500 or UB-04 format. There is an approval and review process within the Department. See #66 regarding contracts with outside providers. The Department does not have a claims payment software system for claims payment and management.

**Question # 73:** RFP Section B Paragraph 3 p. 20: Will the Vendor have the ability to evaluate and contract with needed specialists both for inside and outside facilities?

**Answer # 73:** No, but the Vendor may be asked to provide input.

**Question # 74:** RFP Section B.9.1.10 Paragraph 1 p.26: What community based programs and services does the NHDOC currently utilize such as: mental health, sex offender counseling, drug/alcohol abuse counseling or other community resources such as mental health providers? Please share the names of current Vendors providing those services.

**Answer # 74:** See Answer # 1, above, regarding breakdown of contract employees and state employees and current Vendor. The Department provides mental health services, SOT, drug/alcohol abuse, etc in all facilities. Community Corrections provides transition into community care.

**Question # 75:** RFP Section B.9.1.17 Paragraph 1 p.27: How does the NHDOC provide dialysis to inmates? Could you describe how NHDOC works with other systems to transfer inmates to other providers for care?

**Answer # 75:** The Department has a contract with a dialysis provider to provide dialysis services at their facility. The Department's Transportation Department schedules and manages all appointments and transports to designated hospitals, physicians, etc.

**Question # 76:** RFP Section B.3 Paragraph 3. p.19: Does the NHDOC presently utilize telemedicine and/or tele-psychiatry methods? What telemedicine equipment does NHDOC have onsite?

**Answer # 76:** The Department does not currently utilize telemedicine and does not have telemedicine equipment. The Department does have tele-psychiatry access.

**Question # 77:** RFP Section B Paragraph 27.3 p. 48 and Section B Paragraph 36.7 p. 50: Is NHDOC considering adoptions of an EMR? If a vendor was to propose installing an EMR as part of their services, should it be priced separately or included in the bid?

**Answer # 77:** The Department is not currently seeking adoption of an EMR. See 27.3 page 48 of 72 which states “The Contractor shall not reduce the current requested staffing patterns based on a proposed implementation of an Electronic Record System.” Do not include installing EMR as part of your bid.

**Question # 78:** RFP Section B.3 Paragraph 3 p.19: Does the NHDOC currently seek insurance coverage payment for inmate medical expenses when possible, including Medicaid or VA benefits?

**Answer # 78:** The Department bills Medicaid as provided by state law, rules and regulations for certain inpatient stays. The federal government does not permit the VA to provide care for inmates while incarcerated or payment for care.

**Question # 79:** Multiple pages, Section B: With regard to NHDOC policies and procedures, please provide copies of or access to the current policies and procedures recognized and utilized by NHDOC specific to total medical services delivery.

**Answer # 79:** See Answer # 3, above.

**Question # 80:** RFP Section B, Paragraph 24.6.12 p. 43: Please provide a copy of the current contract that NHDOC currently has in place for laboratory and imaging services.

**Answer # 80:** See Answer # 1, above, for process to obtain copies of contracts.

**Question # 81:** RFP Section B, Paragraph 8.6 p.22 and Section B Paragraph 26.11.1 p. 47: With regard to accreditation standards, does the NHDOC currently operate per ACA (American Correction Association) or NCCHC (National Commission on Correctional Healthcare) standards? If not, does NHDOC plan to pursue either accreditation as such applies to health services and if so when?

**Answer # 81:** The Department is not currently accredited by either body. The Department will pursue accreditation when budget permits.

**Question # 82:** RFP Section B Paragraph 36.2 p 50: Can the responding Vendor include in its bid, pricing related to Third Party Administration, as part of an integrated offering of services? Would NHDOC prefer a Vendor propose such services as an optional offering? Is there currently a third party administrator in place?

**Answer # 82:** The Vendor may not include bid pricing related to Third Party Administration as this was not requested in the scope of services. The Department may choose to work with the selected vendor regarding TPA. The Department does not currently have a TPA in place.

**Question # 83:** RFP Section A, Paragraph 23 p.8: Regarding the Disclosure of Sealed Proposals clause, if a Vendor is submitting a joint proposal with another vendor who has previously bid on earlier RFPs for services now included in the present RFP, is it permissible for those Vendors to share prior proposals with each other in order to provide a stronger integrated offering to NHDOC? We would designate one member of this partnership as the prime vendor responsible for performance of all responsibilities under this RFP.

**Answer # 83:** No. Please refer to Section 22 and 27 of the Terms and Conditions.

**Question # 84:** RFP Section A Paragraph 37. p. 12 and Section B Paragraph 36.4 p. 50: Regarding the NHDOC adding or removing facilities for which the Vendor is responsible, would such a change involve a negotiation with the Vendor for an increase or decrease in contract price?

**Answer # 84:** This would be given consideration.

**Question # 85:** RFP Section B Paragraph 8.6 p.22: Regarding the reference to consent decrees and Court orders, please state the terms or effects of any consent decrees or Court orders that will impact the Vendor in performance of the contract.

**Answer # 85:** The Vendor will be expected to conform to all requirements of the consent decrees and court orders. These documents will be placed on the NHDOC website.

**Question # 86:** RFP Section B Paragraph 24.6.12 p. 43: Will the Vendor be responsible for paying for the provision of the on-site lab and imaging services, or are they paid by the NHDOC? If the Vendor, please specify each type of on-site service currently provided and their annual costs.

**Answer # 86:** The NHDOC is responsible for payment of services provided by our laboratory and x-ray vendors. However, the Vendor is expected to practice appropriate Utilization Management in the use of these services.

**Question # 87:** RFP Section B Paragraph 26.11.1.f, p. 47: Please describe the nature of the financial administration reports.

**Answer # 87:** The financial administration reports are in reference to clarifications between the Department and the Vendor regarding financing associated with the contract.

**Question # 88:** RFP Section C, Paragraph 6.4, p. 69: Please describe the nature of the “adjustments” that NHDOC may make to the contractor’s invoices. What are the criteria by which these adjustments would be justified? Is this the criteria specified in paragraph 6.9?

**Answer # 88:** Adjustments will be made if the Department discusses and confirms deviations on the invoice with the Vendor.

**Question # 89:** RFP 34.1, p. 11: We are looking for the formula (or other methodology) that the State will use to evaluate, rank and assign scoring points to bidders' prices. For example, a formula commonly used in other correctional health care bid evaluations is as follows:

Lowest price of all proposals

\_\_\_\_\_ x # points possible for Price component = Price Score

Price of proposal being evaluated

How will the state assign scores and/or relative ranking to bidders' submitted prices?

**Answer # 89:** See Section 33 page 10 of 72 for the proposals review process and evaluation procedures.

**Question # 90:** RFP § B.3, p. 19: Please provide a copy of the NHDOC policies, procedures, and directives (PPDs) as the vendor will have to comply with these standards.

**Answer # 90:** Please see Answer # 3, above.

**Question # 91:** RFP §.6 p. 21: Please confirm that bidders are to provide staffing and pricing based on the ADP numbers in this table.

**Response # 91:** No, the ADP is there to provide guidance.

**Question # 92:** RFP §.8.14 p. 23 and RFP B.24.1.5 p. 38: Please clarify the statement in the RFP that "the NHDOC shall determine the shifts to be worked and shall not have any obligation to the Contractor for any minimum number of shifts requested."

- a. Does this mean the DOC is only looking for PRN or "as needed" staffing, not permanent full-time clinicians?
- b. Does this mean that the DOC, not the vendor, will set the health care staff schedules at the facilities?

**Answer # 92:**

- a. No.
- b. The Vendor will propose the staffing required including shifts necessary to meet the scope of services. The Department will have final authority to approve the Vendor's proposal.

**Question # 93:** RFP §.8.18 p. 24: Please confirm that the time health services staff members spend in orientation, in-service training, and continuing education classes will count towards the hours required by the contract.

**Answer # 93:** Yes.

**Question # 94:** RFP §.8.19 p. 24: Who will be financially responsible for providing health unit staff with Internet access: the State or the Vendor?

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**Answer # 94:** The State.

**Question # 95:** RFP §.8.26 on page 25: Please clarify what the DOC means by the statement “The program shall ensure that a provider does **not** review/approve his/her referrals. **Should** this read “The program shall ensure that a provider does **not** review/approve his/her own referrals.”?

**Answer # 95:** Yes that is the intent of that sentence.

**Question # 96:** RFP §.8.29 p.25: Are any members of the current health service workforce unionized? If yes, please provide the following:

- a. A copy of each union contract
- b. Complete contact information for a designated contact person at each union.
- c. The number of union grievances that resulted in arbitration cases over the last twelve months.
- d. Seniority (step) information for each current employee.

**Answer # 96:** See Answer 1 and 6, above.

**Question # 97:** RFP B.8.29 p.25: Please provide current wage/pay/reimbursement rates for incumbent NHDOC health service staff.

**Answer # 97:** See Answer # 6, above.

**Question # 98:** RFP §.9.1.14 p. 27: Please identify the hospitals currently being utilized by each NHDOC facility.

**Answer # 98:** The Department has contracts with two hospitals, one in each geographic region; Catholic Medical Center and Androscoggin Valley Hospital. Other, non-contract hospitals may be utilized depending on the nature of the inmate/patient presenting problem/diagnosis.

**Question # 99:** RFP §.9.1.14 p. 27 What are the designated emergency or “911” hospitals for each NHDOC facility?

**Answer # 99:** The Department utilizes AVH for the Northern Region and Concord Hospital for the Concord Facilities and Catholic Medical Center for the Goffstown facility.

**Question # 100:** RFP §.9.1.17 p. 27: Please identify any specialty clinics currently conducted onsite and indicate how many hours per week each clinic is held.

**Answer # 100:** See Answer # 22 above. On-site Podiatry clinic is scheduled in Concord and NCF as needed by Nursing Services, On-site Oral Surgery clinic is scheduled in Concord twice a month. On-site Ortho clinic for all sites is scheduled in Concord once a month.

**Question # 101:** RFP §.9.1.17 p. 27: What is the average number of inmates receiving pharmaceutical treatment each month for the following conditions?

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- a. Hepatitis C
- b. HIV/AIDS
- c. Hemophilia

**Answer # 101:** See Answer # 62, above. The Department has not treated hemophilia in the past several years.

**Question # 102:** RFP §B.9.1.19 p. 27: Please provide copies of the following documents:

- a. The formulary currently in use at DOC facilities
- b. A current formulary management report.

**Answer # 102:** See Answer # 12, above. The Department is unclear what you mean by “formulary management report.”

**Question # 103:** RFP §.9.1.19 p. 27: On average, what percentage of NHDOC inmates are prescribed psychotropic drugs each month.

**Answer # 103:** See Answer # 62, above.

**Question # 104:** RFP §.10 p. 28: Thank you for the staffing data in this table. Can you please also provide current staffing schedules by facility, shift and day of week?

**Answer # 104:** See the Division’s Staffing Allocation posted on the website.

**Question # 105:** RFP §.24.1.1 p. 38: Please provide details on the dental suites and other resources available at each NHDOC facility.

**Answer # 105:** See Answer # 14, above.

**Question # 106:** RFP §.24.1.1. p. 38: Please clarify the statement that “Services shall be provided upon request of the Director of Medical & Forensic Services (Division Director) or designee who must be a state employee.” Does this mean that the DOC is only looking for “as needed” staffing, upon the request of the State Medical Director, and not permanent full-time clinicians?

**Answer # 106:** No. This statement clarifies the relationship between the Department and the Vendor. The Department via the Director of Medical & Forensic Services is requesting this RFP and the professional and administrative responsibility for services provided are retained by the Department as required by applicable statutes and regulations as well as the Vendor.

**Question # 107:** RFP B.24.1.11.a p. 38: With regard to the RFP requirement that “any staff placed at a NHDOC facility/location must have a valid license as an APRN, LPN.” Please confirm that this list should also include RNs.

**Answer # 107:** Yes.

**Question # 108:** RFP§.24.6. p. 40: How long does it take to perform the average medication distribution process?

**Answer # 108:** Concord-average is 1 1/2 hours for current nurse administered meds (outpatient-partial nurse med administered facility), Goffstown-average 45 minutes four times a day (outpatient nurse med administered facility), NCF-average of 2 hours four times a day (outpatient nurse med administered facility), SPU/RTU-1-1 ½ hours four times a day (inpatient and outpatient nurse med administered facility).

**Question # 109:** RFP §.26.1 p.45: Please provide an inventory of office equipment (e.g., PCs, printers, fax machines, copiers) currently in use at each NHDOC facility and confirm that all of this equipment will be available for use by the selected provider.

**Answer # 109:** See Answers # 's 14, 23, 49, 51, 52, 57 and 60 above. Equipment will be available for use by the selected Vendor.

**Question # 110:** RFP §.26.1 p. 45: Please provide and inventory of medical equipment (e.g., blood pressure cuffs, ultrasound, x-ray machines, etc.) currently in use at each NHDOC facility, and confirm that all of this equipment will be available for use by the selected provider.

**Answer # 110:** See Answer #'s 10, 14, 23, 47, 51, 52, and 60 above. Equipment will be available for use by the selected Vendor. The Vendor will be expected to follow the Department's tool & inventory policy to ensure ongoing maintenance during transition.

**Question # 111:** RFP §.26.1 p. 45: Who is responsible for the cost of any additional equipment required to provide health services to the NHDOC inmate population?

**Answer # 111:** The Department.

**Question # 112:** RFP §.36.2 p. 50: Please clarify if the NHDOC wishes the Vendor to adjudicate all claims for services provided to inmates, as this is the typical model for a state correctional health services contract.

**Answer # 112:** This question is not clear to the Department.

**Question # 113:** RFP §.36.2 p.50. Does State or County law mandate any special rates (e.g. Public Aid, Medicare, Worker's Compensation or other discounted rates, etc) for the offsite treatment of NHDOC inmates? If "yes", please provide a copy of the statute, law, regulation, contract, or other legal documents that requires community providers to accept such rates.

**Answer # 113:** See Answer # 66, above.

**Question # 114:** RFP §.6.9 p. 69: Please clarify if the staffing reimbursements start on Day 31: or if they are retroactive to Day 1 of the vacancy?

**Answer # 114:** Day one of the vacancy.

**Question # 115:** Please confirm that the RFP is simply for staffing services, and that under the resulting contract, the Vendor will **NOT** be financially responsible for any of the following costs:

- a. Inpatient hospitalization
- b. Outpatient surgeries
- c. Other outpatient referrals
- d. ER visits
- e. Offsite dialysis
- f. Offsite diagnostics (lab/x-ray)
- g. Pharmaceuticals

**Answer # 115:** The RFP is a request for staffing services only. The Vendor is responsible for the Utilization Management of the above services and operating within the Department's budget.

**Question # 116:** Do bidders need to seal Budget Narratives/Pricing separately from their Technical Proposals?

**Answer # 116:** Yes.

**Question # 117:** Please indicate the order of precedence among the solicitation documents (e.g. the RFP, **initial** responses to questions, **subsequent** responses to questions, exhibits and attachments, etc) so that in case of contradictory information among these materials, bidders know which of the conflicting data sets to use to create their narratives and calculate their prices.

**Answer # 117:** Refer to p. 16-18 of 72, Proposal Check Sheet.

**Question # 118:** In order to provide the most accurate, cost-effective pricing bidders will need to actually see the physical locations where they will be expected to provide services. It is in the best interest of the State to offer site tours. Will the DOC please allow bidders the opportunity to visit the facilities covered by the RFP? If convenient for the State, this could be done in conjunction with the March 16 bidder's conference.

**Answer # 18:** See page 2 of 72, #5. Facility tours will not be made available at this time.

**Question # 119:** Are any of the NHDOC facilities currently accredited by the NCCHC? If "yes", please provide the most recent accreditation date for the facility. If "no", does the DOC have any plans for such accreditation? In what time frame?

**Answer # 119:** See Answer # 81, above.

**Question # 120:** Other than the Laaman consent decree, are the NHDOC facilities currently subject to any other court orders or legal directives? Please provide copies of all such orders/directives, including Laaman.

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**Answer # 120:** Yes, the Holliday court order. These will be posted on the website.

**Question # 121:** With regard to lawsuits (frivolous or otherwise) pertaining to DOC inmate health care:

- a. How many have been filed against the State in the last three years?
- b. How many have been settled in that timeframe?

**Answer # 121:** This data is not available.

**Question # 122:** Please identify which, if any, of the following ancillary services the Vendor will be financially responsible for:

- a. Laboratory services (onsite and offsite)
- b. Radiology services (onsite and offsite)
- c. Optometry services (onsite and offsite)
- d. Dialysis services (onsite and offsite)

**Answer # 122:** The Department is responsible for all of these services. See Answer # 115, above.

**Question # 123:** If the Vendor will be financially responsible for any of the ancillary services listed above, please indicate how they are currently being provided: (a) onsite, with permanent State owned equipment; (b) onsite, by a mobile vendor (PLEASE IDENTIFY VENDOR); or (c) offsite.

**Answer # 123:** The Vendor will be responsible for any misused equipment.

**Question # 124:** Please confirm that under the contract, the Vendor will **not** be financially responsible for any of the following services:

- a. Neonatal or newborn care after actual delivery
- b. Cosmetic surgery, including breast reduction
- c. Sex change surgery (including treatment or related cosmetic procedures)
- d. Contraceptive care including elective vasectomy (or reversal of such) and tubal ligation (or reversal of such)
- e. Extraordinary and/or experimental care
- f. Elective care (care which if not provided would not, in the opinion of the Medical Director, cause the inmate's health to deteriorate or cause definite and/or irreparable harm to the inmate's physical status)
- g. Autopsies
- h. Any organ (or other) transplant or related costs, including but not limited to labs, testing, pharmaceuticals, pre- or post-op care, or ongoing care related to a transplant, etc.

**Answer # 124:** See Answer # 115, above.

**Question # 125:** Please outline the current/required scope of services at the community corrections centers.

**Answer # 125:** The scope of services for community corrections is the same for any facility within the NHDOC. Please see page 14-15 of 72 to show where community corrections fits in the service areas to be bid on.

**Question # 126:** Are any of the current service providers members of a collective bargaining unit?

**Answer 126:** See Answer # 6, above.

**Question # 127:** Are any of the facilities ACA and/or NCCHC certified?

**Answer # 127:** No.

**Question # 128:** Is the NHDOC currently under the direction of any court orders or consent decrees? If yes can you please provide access to the applicable documents?

**Answer # 128:** Yes. See Answer # 85 above. These documents will be posted on the Department's web site.

**Question # 129:** Does the NHDOC currently utilize an electronic medical record or electronic medication administration record?

**Answer # 129:** No.

**Question # 130:** What components of the current services are contracted with outside providers, with whom and can the contracts be provided?

**Answer # 130:** See Answer # 1, above.

**Question # 131:** RFP p. 14 and 15; Budget Proposal Cover Sheet:

- a. For the Treatment services outlined please explain the differentiation between inpatient and outpatient services?
- b. What do inpatient services consist of for each of the Treatment Services categories (Primary Care Medical/Dental/Medical Record/Nursing)?
- c. What do outpatient services consist of for each of the Treatment Service categories?
- d.. Does outpatient refer to any services provided outside of the facilities?
- e. Please confirm that no Primary Care Medical Services or Dental services are required for the TWC.

**Answer # 131:**

- a. Inpatient services are those services provided to inmates housed in the infirmaries in the Concord and Berlin facilities. Patients in the SPU are considered inpatients. Outpatient services for all facilities are those services provided to inmates/patients not housed in an infirmary setting.
- b. The Scope of Services from pages 19-50 in Exhibit A provide a detailed list of requirements for the purposes of determining the staffing needs and patterns within each service area.
- c. See (b.) in this response.
- d. Yes.
- e. Please review the information provided on pages 14-15. It details the HSC facilities where the services for the TWC are provided.

**Question # 132:** RFP p. 19; Section B.3.:

- a.. Paragraph 1; As it pertains to the title of Chief Administrator, is the NHDOC referring to the responsible Medical Director?
- b. Paragraph 3; please clarify to what extent the contractor has any financial responsibility for off-site emergency treatment, outpatient specialty treatment and inpatient hospitalizations.
- c. Paragraph 3; “Medical Record Services are provided at all three primary prison sites and SPU/RTU”; please clarify that services are not required at the Transitional Housing Units and the TWC? (Which conflicts with Budget Proposal Cover Sheet).
- d. Paragraph 4; Please provide volume regarding number of intakes on average per day/per year, days of the week and times of day that intake can occur by facility.

**Answer # 132:**

- a. This is the determination of the Vendor.
- b. See Answer # 115 above.
- c. These services are not required at the THU and TWC.
- d. See # 62 b. above. Intakes are scheduled at Concord and Goffstown based on the provider schedule which changes periodically usually on average twice a week.

**Question # 133:** RFP p. 20; Section B.5. Location of facilities: Please clarify why the TWC is not listed.

**Answer # 133:** It was omitted, it is located at the Concord Facility for men and at Shea Farm in Concord for women.

**Question # 134:** RFP p.24; Section B.8.19. Will the NHDOC provide the contractor with internet service?

**Answer # 134:** Yes. See PPDs 11.01 and 11.03 relative to use of the Department’s equipment, use of email, internet use, etc. that will be posted on the website.

**Question # 135:** RFP p. 26; 9.1.1. What level of provider conducts the intake?

**Answer # 135:** APRNs are the primary providers for intakes; physicians may perform them if needed.

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**Question # 136:** RFP p. 26; 9.1.4. What level of provider conducts the Physical Exams?

**Answer # 136:** APRNs are the primary providers for periodic physical exams; physicians may perform them if needed.

**Question # 137:** RFP p. 28; Current Staffing

- a.. Are the Nurse Coordinators listed RNs or LPNs? If both please provide the current breakdown.
- b. What duties do the Nurse Coordinators currently perform?
- c. Are the Staff Nurses listed RNs or LPNs? If both provide the current breakdown.
- d. What duties do the Staff Nurses currently perform?
- e. What duties do the APRNs currently perform?
- f. Does the current staff work 8 or 12 hour shifts?

**Answer # 137:**

- a. They are RNs.
- b. See pages 37-44 of 72.
- c. They are RNs with one LPN currently employed.
- d. See pages 37-44 of 72.
- e. See pages 37-44 of 72.
- f. Current staff work 8 hour shifts.

**Question # 138:** The Chief Administrator referenced on page 19; B.3. is not listed on this or any of the other current staffing plans. Is this part of the proposed staffing?

**Answer # 138:** It is up to the Vendor to determine how to include this function.

**Question # 139:** Please provide the current qualifications of the Director of Rehab Services.

**Answer # 139:** This position is not part of the RFP.

**Question # 140:** Please provide the statistical data (daily/monthly/annual) regarding all medical services to include but not necessarily limited to:

- a. Intakes
- b. PPD's planted/PPD's read
- c. Inmate Physicals
- d. Types of on-site specialty clinics and volumes of inmates seen.
- e. Chronic Disease clinics and volumes of inmates seen
- f. Midlevel sick call
- g. Physician sick call
- h. Numbers of emergency responses
- i. Numbers of emergency transfers
- j. Numbers of inmates with infectious diseases by type
  - i. Active TB

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- ii. Number of inmates tested for HIV
- iii. Number of positive HIV inmates
- iv. Number of inmates with Hepatitis A/B/C

**Answer # 140:**

- a. See Answer #62 (b.), above.
- b. PPDs are planted the same time as intakes.
- c. Repeat physicals in Concord average 243 per year and in NCF 72 per year.
- d. See #22 above, numbers depend on need.
- e. Chronic Disease clinics and volumes of inmates seen.
- f. Nursing staff perform sick call
- g. Nursing staff perform sick call
- h. Number of emergency responses
- i. Number of emergency transfers.
- j. Number of inmates with infectious diseases by type
  - i. Active TB
  - ii. Number of inmates tested for HIV
  - iii. Number of positive HIV inmates
  - iv. Number of inmates with Hepatitis A/B/C

**Question # 141:** Page 32; Dental Services Program

- 1. Is the contractor responsible for oral surgery that cannot be performed by the primary dentist?
- 2. Is there an oral surgery specialty clinic?
- 3. Please provide statistical data (daily/monthly/annual) regarding all dental services to include but not necessarily limited to:
  - a. Number of dental evaluations
  - b. Number of dental sick call
  - c. Number of extractions

**Answer # 141:**

- 1. The contractor is requested to provide an oral surgery provider for 8 hours a week in the Concord facility.
- 2. Yes, we currently have an oral surgery clinic twice a month done on-site by an outside provider.
- 3. The Department is currently tracking this data but does not currently have a cohesive data set to respond.

**Question # 142:** Page 36; 20. Medical Records Services Staffing. Is the Medical Record Supervisor listed in the current staffing plan in addition to the Medical Records Supervisor listed in the Medical Services current staffing plan on page 28?

**Answer # 142:** No.

**Question # 143:** Page 37; 24 Nursing Services

Please provide statistical data (daily/monthly/annual) regarding all nursing services to include but not necessarily limited to:

- a. Nursing sick call
  - b. Total inmates on meds by facility
  - c. Total number of med carts utilized for med pass by facility
  - d. Number of inmates on average in the NHSP and NCF infirmaries
  - e. Breakdown of number of inmates in the NHSP and NCF infirmaries for medical vs suicide precaution
  - f. Labs drawn
  - g. EKG's conducted
  - h. Number of treatments
2. Who conducts the suicide watch rounds on the patients in the infirmary?
  3. Does the current staff work 8 or 12 hour shifts?

**Answer # 143:**

1.
  - a. See #62 above.
  - b. Pharmacy not able to provide
  - c. Goffstown-1, SPU?TRU-1, NHSP-M-2 and NCF-6
  - d. NCF-average 18, NHSP-M-average 15 (on a daily basis both are close to capacity)
  - e. 2010=529 total inpatient admission, 170 were for suicide observation.
  - f. Lab data is by number of labs performed not by draw. Lab draws performed by phlebotomists under Lab contract. Nursing services are required to draw labs on an as needed basis.
  - g. EKG's performed by contract mobile x-ray provider, not nursing staff
  - h. Unable to respond, no definition of "treatments"
2. See PPD 6.10 posted on the Department's website.
3. Staff currently work 8 hour shifts.

**Question # 144:** Page 39; 24.3. Attire- Does the State currently cover the cost of the employee uniforms?

**Answer # 144:** The Department currently provides uniforms per the CBA but will not continue post-contract.

**Question # 145:** Page 43; 24.6.11-13

1. Does the State's MH Services contractor provide any nursing staff for services to the SPU and RTU?
2. Please clarify the responsibilities of the Medical Services and Nursing Services Provider and that of the Mental Health Services Provider for the SPU and RTU.
3. Other than ancillary services vendors, what State staff provides additional medical services?

**Answer # 145:**

1. Yes. The current Vendor provides two psychiatric APRNs for SPU/RTU.
2. Question is unclear.
3. The State employees 3 APRNs, two in Concord and one in Berlin.