

2015 HEALTH CARE SERVICES-DETENTION BID OPENING 9-30-14	ADVANCED CORRECTIONAL HEALTHCARE INC
	3922 W BARING TRACE PEORIA IL 61615
Program Cost (Two Year Fixed Rate):	\$90,739.19
NOTARIZED WORK AFFIDAVIT COMPLETED	YES
COPY OF INSURANCE PROVIDED	YES
TAX RECEIPTS OR NOTARIZED LETTER STATING NO REAL OR PERSONAL PROPERTY OWNED IN JEFFERSON COUNTY	YES
COOPERATIVE BID FORM (Y/N)	NO
COOPERATIVE CONTACT INFO:	NO
COMPANY INFORMATION AND SIGNATURE	YES
BID DEPOSIT REQUIRED	N/A
COMMENTS:	See Attachment Sheet for Proposal Details.



**JEFFERSON COUNTY
DEPARTMENT OF ADMINISTRATIVE SERVICES
729 MAPLE ST / PO BOX 100
HILLSBORO MO 63050
WWW.JEFFCOMO.ORG**

Request for Proposal: 2015 HEALTH CARE SERVICES-DETENTION

Date Issued: 8-29-14

PROPOSALS SHALL BE ACCEPTED UNTIL: TUESDAY, SEPTEMBER 30, 2014, AT 2:00 P.M. LOCAL TIME.

**Specification
Contact:**

**GREG ROTH
Juvenile Office
636-797-5509
Greg.Roth@courst.mo.gov**

**Contract
Contact:**

**VICKIE PRATT
Department of Administrative Services
636-797-5380**

**Mail (3) Three
Complete Copies
With Vendor And
Proposal
Information As
Shown In Sample:**

**Contract Term:
upon approval by
the County Council
and County
Executive**

**Vendor
Information:**

SAMPLE ENVELOPE

VENDOR NAME	
VENDOR ADDRESS	
CONTACT NUMBER	DEPARTMENT OF THE COUNTY CLERK
	JEFFERSON COUNTY MISSOURI
	729 MAPLE ST / PO BOX 100
	HILLSBORO MO 63050-0100

SEALED PROPOSAL: (PROPOSAL NAME)

The undersigned certifies that he/she has the authority to bind this company in an agreement/contract to supply the commodity or service in accordance with all terms, conditions, and pricing specified. This Proposal, if accepted, will constitute an Agreement and Contract with Jefferson County, Missouri, upon approval of the County Council and County Executive. Prices are firm during this agreement term, unless agreed upon in writing by the County. The County has the option to renew this agreement at the same terms and conditions as the original agreement for one additional one-year term with the written consent of the successful bidder. Price increases for renewals are not authorized unless approved in writing by the County.

Advanced Correctional Healthcare, Inc. Dr. Norman Johnson

Company Name

Authorized Agent (Print)

3922 W. Baring Trace

Signature

Address

Peoria, Illinois 61615

CEO

Title

City/State/Zip Code

9/15/2014

364495255

Telephone #

Date

Tax ID #

jkolberg@advancedch.com

(309) 692-8106

Fax #

E-mail

Program Overview

Jefferson County Juvenile, MO

County ADP 11 County Health 501 Non-County ADP 00 Non-County Health 501B	Program Cost (Two year fixed rate): \$107,624.00
Physician/PA Services	Physician on site weekly. 24/7 on-call phone assistance with two additional providers.
Nursing Staffing	RN: 25 hours weekly. Recruiting, hiring, training and malpractice coverage.
Dental Services	Screening, hygiene instruction, medication management, coordination of services and referral for off-site. The cost is included up to the financial limit.
Mental Health Services	Screening, medication management, coordination of services and referral for off-site care.
All pharmaceuticals and Prescribed Over the Counter Medications	Includes policies on proper storage of medications, pharmacy ordering, usage, returns, and destruction. The cost is included up to the financial limit.
Radiology and Laboratory	On-site laboratory to include dipstick UA and glucose monitoring. The cost of mobile and off-site services is included up to the financial limit.
Off-site and Specialty Services	Coordination of services, and referrals for off-site and specialty services. The cost of specialty and off-site services is included up to the financial limit.
Medical Records	HIPAA compliance; Maintained in the standard SOAP format.
Disposable Medical and Office Supplies	Disposable office and medical supplies including gloves for the medical unit, glucose strips, bandages and syringes are included in the program.
Medical Waste	Compliance with all applicable state laws and OSHA-regulated standards. The cost is the responsibility of the county.
Repricing of Invoices	Verification of incarceration date, applied discount and payer included in the program.



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<p>County ADP: 41 County Per Diem: \$ 0.19 Non County ADP: 0 Non County Per Diem: \$ 0.19</p>	<p><u>Program Cost (Two year fixed rate):</u> <u>\$90,739.19</u></p>
<p>Hep B / TB Screening</p>	<p>Management of tuberculosis screening administration for the inmates is included in the ACH program.</p>
<p>Financial Limit 90% payback of unused funds</p>	<p>\$10,000 financial limit to include all pharmacy, hospital in/out patient, specialty services, radiology, dental, laboratory, x-ray, ambulance, dental/housekeeping /commissary/office supplies, durable equipment, and optical/hearing.</p>
<p>Cost Containment Program and Advanced Purchase Program</p>	<p>All county entities will have access to group buying contracts with a potential APP savings of \$11,000.</p>
<p>Advanced Training Program</p>	<p>Orientation and in-service included in the program.</p>
<p>Risk Management Program</p>	<p>Hold Harmless and indemnification; Additional Insured for County and Sheriff.</p>

This proposal is valid for 60 days from 9/30/214

For additional information or to accept this program overview please contact:

Art Rose
ACH Program Consultant
Phone: 417.773.7525
Email: aerose@advancedch.com