

September 14, 2018

Alessandro Mazzotta
Director of Purchasing
County of Putnam
Putnam County Office Building
40 Gleneida Avenue, Room 105
Carmel, NY 105512

RE: Proposal for Comprehensive Health Care Services - Putnam County

Dear Mr. Mazzotta,

PrimeCare Medical of New York, Inc., a wholly owned subsidiary of PrimeCare Medical, Inc. (hereinafter, "PrimeCare Medical") is pleased to submit this Technical and Pricing Proposal to the County of Putnam in accordance with the Putnam County's Request For Proposal (RFP) 7-18 for Comprehensive Health Care Services for the Putnam County Correctional Facility.

PrimeCare Medical, Inc. and PrimeCare Medical of New York, Inc. are corporations founded in 1986 and 1998, respectively, by Carl A. Hoffman, Jr., D.O., D.Sc., CCHP. PrimeCare Medical has a senior management team that brings over 200 combined years of correctional health care management experience. PrimeCare Medical is celebrating thirty-two (32) years as a Correctional Medical Corporation, which is corporately located at 3940 Locust Lane, Harrisburg, PA 17109 (www.primecaremedical.com). PrimeCare Medical currently provides complete medical / operational management in five (5) states (Pennsylvania, West Virginia, Maryland, New York, and New Hampshire) and in seventy (70) correctional facilities company wide, servicing over 24,500 inmate/patient lives. It is this footprint that has uniquely positioned PrimeCare Medical to meet the needs of the inmate/patient population of the Putnam County Correctional Facility. A complete list of references is contained in PrimeCare Medical's Technical Proposal.

PrimeCare Medical's proven business model, coupled with its senior leadership, core values, business philosophies, and continuous desire to be the premier provider of correctional health care services in the industry are what makes PrimeCare Medical a true leader in the correctional health care environment today. Due to the unique and diverse composition of its senior corporate leadership, PrimeCare Medical has the unparalleled capability to effectively engage in the type of strategic operational planning, medical / administrative consultation, professional liability / aggressive litigation management, and rapid response to emergent / client issues necessary for the proper delivery of medical services. Because of this experience, PrimeCare Medical fully understands the needs and concerns of the Putnam County Correctional Facility and is committed to custom designing a new medical delivery system, which is based upon nationally accepted standards.

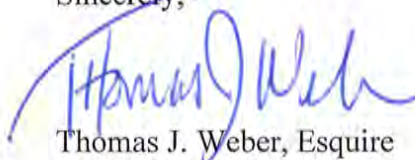
With over thirty-two (32) years of correctional health care experience, PrimeCare Medical has customized this Proposal with various additional health care programs and other incentives, which will further enhance your medical program. A few of these programs / incentives, which are further detailed throughout our Proposal, include the following:

- PrimeCare Medical's assigned Vice President of Operations, Todd W. Haskins, RN, BSN, CCHP; and Junior Vice President of Operations, Kelly Ehrich, RN, BSN, MBA, CCHP, will have direct Corporate oversight for the Putnam County Correctional Facility.
- PrimeCare Medical will maintain accreditation by the National Commission on Correctional Health Care (NCCHC) for the Putnam County Correctional Facility for the life of this medical services contract.
- PrimeCare Medical has also prepared an "Alternative Pricing Proposal Model" which will provide a greater cost savings to Putnam County. PrimeCare Medical stands ready to discuss this "Alternative Pricing Proposal Model" with the County upon request.
- Additional operational and health care support available through our various other local correctional health care contracts, many of which are in very close proximity to the Putnam County Correctional Facility.

PrimeCare Medical will not only meet, but far exceed all levels of services presented in this proposal. The Company is highly qualified to implement this proposal, which is designed specifically to service the health care delivery system for the Putnam County Correctional Facility. The result is the best possible health care package for the inmate/patient and the most cost effective delivery system for Putnam County. We are confident that, following your review of our Technical and Pricing Proposal, you will vote to award the medical services contract with PrimeCare Medical. We are anxiously looking forward to the challenging opportunity of providing quality, comprehensive health care services to the Putnam County Correctional Facility.

If there are questions or concerns related to our Proposal, please do not hesitate to contact Todd W. Haskins, RN, BSN, CCHP, Vice President of Operations; or myself. These are the only two (2) officers that are authorized to speak on behalf of the Corporation or negotiate contractual provisions for this contract. The direct point of contact for PrimeCare Medical relating to this Proposal shall be Todd W. Haskins, who can be reached at the PrimeCare Medical Corporate Office, by telephone at (717) 545-5787 Ext. 1129.

Sincerely,



Thomas J. Weber, Esquire
Chief Executive Officer

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ACCEPTANCE OF TERMS AND CONDITIONS OF RFP

In accordance with the Request for Proposals, PrimeCare Medical of New York, Inc., a wholly owned subsidiary of PrimeCare Medical, Inc. (hereinafter, “PrimeCare Medical”) is respectfully submitting this Technical and Pricing Proposal to provide all services necessary for the provision of comprehensive health care services to all inmates/patients who are under the care and custody of the Putnam County Correctional Facility. PrimeCare Medical shall fully comply with all mandatory terms, requirements, conditions, and specifications contained in the County of Putnam Purchasing Division’s Request for Proposal (RFP), to include any and all Addendums issued thereafter. In the event any content of our Technical and/or Pricing Proposal contradicts any of the specifications contained within the RFP, PrimeCare Medical acknowledges that the requirements of the RFP shall take precedence.

In accordance with the Request for Proposals, all inmate/patient health care services provided under this contract for the Putnam County Correctional Facility shall be in accordance with the standards of the National Commission on Correctional Health Care (NCCHC), New York State Commission of Corrections (NYSCOC), New York State Code Rules and Regulations, the New York State Office of Mental Health (NYSOMH), the New York State Health Department (NYSHD), the Putnam County Correctional Facility’s Policies and Procedures, the Affordable Care Act, the American Medical Association (AMA), Centers for Disease Control Protocols and Guidelines, Federal Prison Rape Elimination Act (PREA), State Licensing Board Laws and Regulations, Federal OSHA Guidelines, and all other applicable Federal, State, and Local laws / regulations. All required permits, registrations, and licenses needed to perform the services detailed within this Proposal shall be the responsibility of PrimeCare Medical to acquire and maintain for the life of the contract.

In accordance with the Request for Proposals, PrimeCare Medical shall coordinate all aspects of its health care delivery systems, policies and procedures, reporting analysis, quality improvement / assurance studies and processes, cost containment programs, and all other requirements of the RFP with the Putnam County Correctional Facility. Additionally, PrimeCare Medical shall be available to confer with the Putnam County Correctional Facility at any time concerning any provisions of this Proposal or any other matters pertaining to the performance of any potential contract.

In accordance with the Request for Proposals, PrimeCare Medical’s Technical and Pricing Proposal outlines our operational plan to provide comprehensive health care services to the Putnam County Correctional Facility. Should Putnam County desire any additional information / documentation to further support and/or clarify PrimeCare Medical’s Proposal, such additional information / documentation will be furnished immediately upon request. PrimeCare Medical understands the fiscal and operational constraints of the Putnam County Correctional Facility and firmly believes that awarding this comprehensive health care services agreement to PrimeCare Medical will prove to be the most logical, efficient, and cost-effective strategy for the County of Putnam.

STATEMENT OF THE PROBLEM

The County of Putnam and the Putnam County Correctional Facility are seeking a highly qualified and experienced correctional health care corporation to serve as their primary provider of comprehensive health care services to their inmate/patient population. The respective correctional health care corporation shall solely be in the business of providing such contracted services to inmates/patients confined to correctional institutions and shall provide levels of service consistent with nationally accepted standards, laws, and regulations. All professional health care services and management of such services shall be under the guidance and direction of appropriately qualified, licensed, and trained individuals who are experienced and specialize in the field of correctional medicine.

The main goals and objectives of the Putnam County Correctional Facility, through this RFP process, are to identify, select, and contract with an established, qualified, and proven correctional health care firm who has the expertise and ability for delivering the following:

- Provide health care services at a standard consistent with nationally accepted and community required standards of care (NCCHC), as well as, all applicable State and local statutes, regulations, and laws.
- Provide health care services in a manner approved by the Putnam County Correctional Facility, which shall be compliant with Putnam County Correctional Facility's policies and procedures.
- Provide health care services in the most cost-effective and operationally efficient manner possible, consistent with all requirements set forth in the RFP, with full reporting and accountability to the Putnam County Correctional Facility.
- Develop and implement strategies to minimize health care cost increases during the life of this correctional health services agreement.
- Operate a comprehensive health care program at full staffing using only appropriately licensed, certified and professionally trained personnel.
- Partner with the Putnam County Correctional Facility in a joint Continuous Quality Improvement Program, focusing on process and outcome strategies to achieve the most appropriate levels of inmate/patient care.
- Provide for the implementation of a comprehensive electronic medical records system for the Putnam County Correctional Facility.
- Develop relationships with community based partners to coordinate for the necessary discharge of inmates/patients from correctional facilities and insure their successful re-entry back into the community.

The Putnam County Correctional Facility is in need of a comprehensive correctional health care firm who not only possesses the operational ability, but also maintains the financial capability of providing this level of service to its inmate/patient population. Such a firm will need to possess the infrastructure and have the necessary resources available to provide for both the administrative and medical management of such a project, as well as, have the proven ability to transition a correctional health care contract of this size.

Following your review of our Proposal, we firmly believe that the Putnam County Correctional Facility will see that PrimeCare Medical not only meets all of the requirements of this RFP, but far exceeds them; thus, making PrimeCare Medical the ideal solution for the Putnam County Correctional Facility.

COMPANY PROFILE



PrimeCare Medical was originally incorporated in the Commonwealth of Pennsylvania as a business corporation in 1986 and was then known as

Pennsylvania Institutional Health Services, Inc. (PIHS). In 1994, its legal status was changed to a professional corporation and, four years later, its name was formally changed to PrimeCare Medical, Inc. That same year, two wholly owned subsidiaries were created, PrimeCare Medical of West Virginia, Inc. and PrimeCare Medical of New York, Inc. PrimeCare Medical is a privately held Pennsylvania correctional health care corporation that is currently celebrating thirty-two (32) years in business. Our founder, Dr. Carl A. Hoffman, Jr., D.O., D.Sc., CCHP, brings over forty (40) years of hands on correctional / health care experience. PrimeCare Medical's Corporate Headquarters is located at 3940 Locust Lane, Harrisburg, Pennsylvania 17109.

PCM Highlights

- 32 years in business – Established 1986
- Privately held and operated
- Corporately located in Harrisburg, PA
- 200 years of Correctional Management Experience
- 69 Correctional Facilities serving over 24,500 inmates/patients
- Largest provider of correctional healthcare to the Counties of Pennsylvania
- Annual revenues in excess of \$120 million

PrimeCare Medical is proud to say that our vision of becoming one of the region's most prestigious correctional health care companies has become a reality, due to the tireless efforts, leadership, and management of our senior Corporate Officers. PrimeCare Medical's Executive Vice President, Theresa Marie Hoffman; our Chief Executive Officer, Thomas J. Weber, Esquire; our Vice President, Todd W. Haskins, RN, BSN, CCHP; and our Strategic Planning Officer, Francis J. Komykoski Sr., MBA, CCHP; possess over 100 years of correctional management, mental health, and administrative experience. The combination of this unparalleled level of experience in the industry permits PrimeCare Medical to possess a unique insight into the challenges and dynamics of the correctional health field today.

PrimeCare Medical currently provides comprehensive health care services to over 24,500 inmates/patients in sixty-nine (69) adult and juvenile correctional facilities throughout the Northeastern United States, totaling in excess of \$120,000,000 in annual revenues for the Corporation.

Of those clients, we are most proud of the fact that (1) PrimeCare Medical is the “*largest*” provider of county correctional health care services in the Commonwealth of Pennsylvania; and (2) PrimeCare Medical of West Virginia, Inc. has been the correctional health care provider to the West Virginia Regional Jail Authority since February 22, 1993 and to the West Virginia Division of Juvenile Services since January 15, 2001. This achievement and our continued successes have been attainable due to the vision and leadership of Dr. Hoffman, our tested and proven business model, and the strong partnerships which we have forged with each and every one of our clients throughout the Corporation. Since our inception, we have strived to be the “*best*” in the correctional health care industry and to differentiate ourselves from our competition through this business philosophy, which was developed to service county jails and state prison systems, such as the Putnam County Correctional Facility. A complete listing of all current contracts and professional references, to include facility names, average daily populations, date original contracts were signed, points of contact and telephone numbers, and accreditation statuses can be found attached to this Proposal. PrimeCare Medical not only welcomes you, but encourages you to contact any one of these clients and inquire as to the level of service we provide.

PrimeCare Medical also supports the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA) accreditation processes. PrimeCare Medical has successfully achieved and maintained NCCHC Accreditation at forty-three (43) of our contracted facilities and has successfully achieved and maintained ACA accreditation at several other facilities throughout our years of service. We are extremely proud of these accreditations and of the fact that not only have we achieved accreditation each and every time that we have applied, but also the fact that we have never lost an accreditation at any of our contracted facilities.

PrimeCare Medical has a proud history and commitment to correctional health care. The Mission and Vision of the Corporation is reflective in our many years of success in a difficult and continuously evolving environment of correctional health care.

The Choice for Quality Correctional Healthcare

PRIMECARE

MEDICAL, INC. +

Mission Statement

PrimeCare Medical, Inc. provides comprehensive healthcare services to county jails, prisons, and juvenile detention centers throughout the Northeastern United States. PrimeCare Medical specializes in correctional healthcare management through the significant contributions and strong moral values of our employees.

Vision Statement

PrimeCare Medical, Inc. is committed to managing and reducing risk in correctional healthcare by providing cost effective quality healthcare management, continuously improving the standards of care, and striving for national accreditation for all facilities. Dedicated to correctional healthcare, PrimeCare Medical prides itself on our strong client relationships, effective and efficient management of healthcare services. These attributes continue to be the hallmark of our success.

PrimeCare Medical currently employs nearly 1,400 health care professionals, as well as, a multitude of additional health care subcontracted providers, who are managed by a team of experienced professionals in health care, corrections, risk management, and business. These health care professionals total over \$76,000,000 in annual payroll expense to PrimeCare Medical. With this wide variety of experience, PrimeCare Medical is capable of providing to all of its contracts a professional health care TEAM to address any and all situations that may arise within a correctional setting.

We realize and respect that each individual institution has its own unique policies, procedures and budgetary constraints. Consequently, at PrimeCare Medical, we are committed to providing our clients with quality health care programs that are customized to meet specific institutional needs and fit into existing administrative structures, to include those of the Putnam County Correctional Facility.

Throughout the years, PrimeCare Medical's TEAM has built both close personal and strong professional relationships with many different members of the correctional industry's management staffs in the states in which we operate. This network has empowered PrimeCare Medical to accomplish otherwise impossible tasks. Diversity of relationships, ownership of challenges, accessibility of personnel, commitment to issue resolutions, and retention of senior

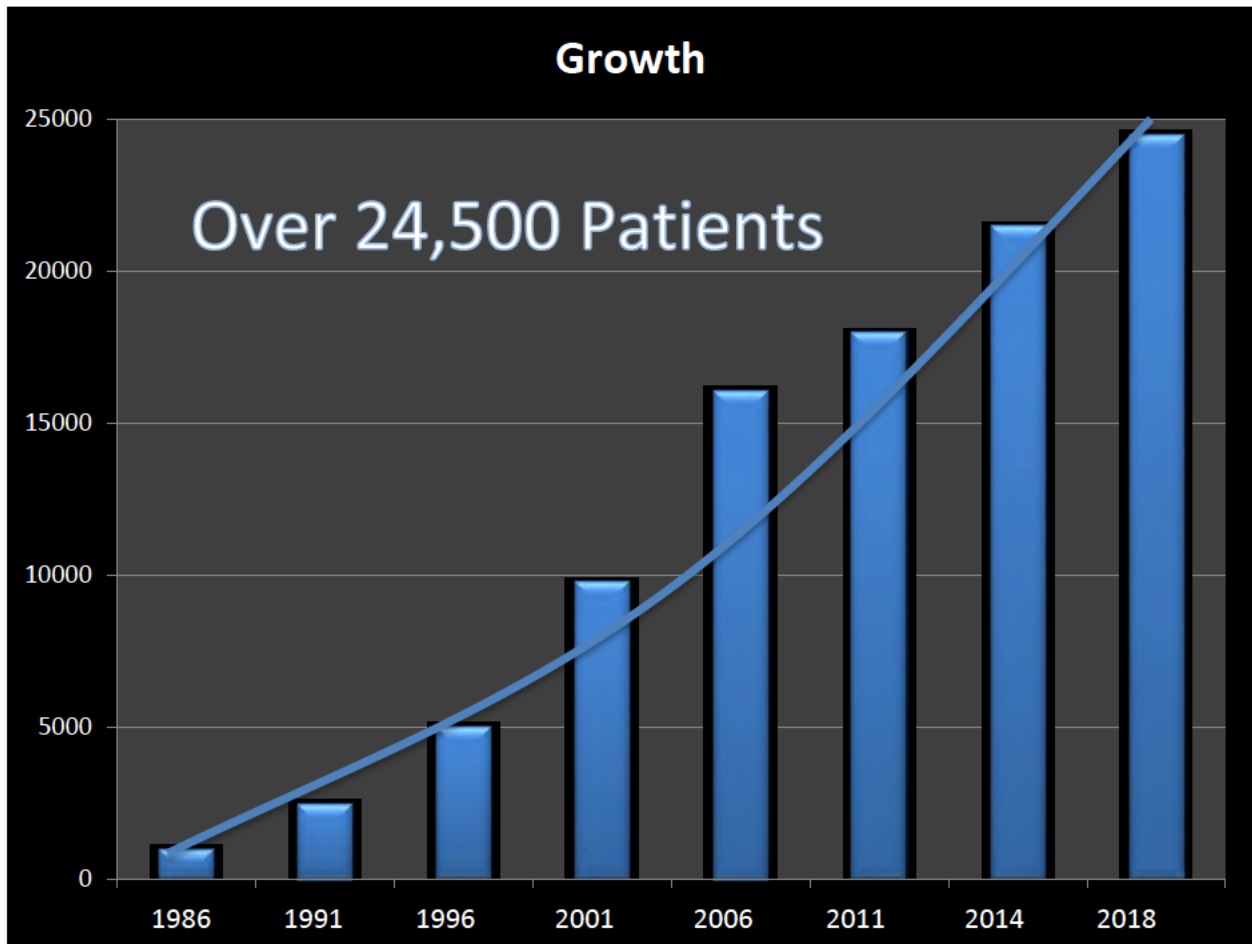
staff makes PrimeCare Medical uniquely suited to deal with the medical issues of the Putnam County Correctional Facility.

“At PrimeCare Medical, we remain committed to developing the strongest client relationships in the industry, striving to continuously customizing our services to satisfy the needs of each of our correctional institutions. Our level of commitment to our clients is absolute.”

**~ Carl A. Hoffman, Jr., D.O., D.Sc., CCHP
Founder – PrimeCare Medical**

PRIOR EXPERIENCE

Over the past thirty-two (32) years, PrimeCare Medical has sustained steady, continual, purposeful growth and has successfully expanded its business operations throughout the Northeastern United States. PrimeCare Medical currently provides medical, mental health, dental, pharmaceutical, radiology, laboratory, chronic disease management, risk management, and contract oversight for sixty-nine (69) correctional institutions across five (5) states, which encompasses over 24,500 inmate/patient lives. It is this footprint that has uniquely positioned PrimeCare Medical to meet the needs of the inmate/patient population of the Putnam County Correctional Facility and to seamlessly transition this Proposal. This provides PrimeCare Medical with the required level of resources and flexibility needed to achieve our mutual success in transitioning the Putnam County Correctional Facility health care system.



PrimeCare Medical is extremely proud of its significant accomplishments in the Commonwealth of Pennsylvania. PrimeCare Medical is the medical vendor with the “*largest*” number of adult county correctional contracts (34) and juvenile detention facilities (9) in Pennsylvania. These forty-three (43) facilities house nearly 18,000 incarcerated individuals, which represent nearly fifty percent (50%) of all Pennsylvania county inmates/patients. Although these Pennsylvania contracted sites are at the county level, many of them house in excess of 1,000 inmates/patients each, proving our ability to successfully manage large facility populations. Complete contact information and contract details for each of these sites can be found within our Business References, which are attached to this Proposal.

Aside from our unmatched experience in servicing the Commonwealth of Pennsylvania, PrimeCare Medical is also extremely proud of its accomplishments in the State of West Virginia. On February 22, 1993, PrimeCare Medical was awarded the medical services contract at the Eastern Regional Jail. Since that time, we have had the privilege to have partnered with the West Virginia Regional Jail Authority and have been there to open each of their other Regional Jail Facilities, with the exception of South Central Regional Jail. South Central Regional Jail had originally contracted with another correctional health care firm, but shortly thereafter transitioned its health care services to PrimeCare Medical. As such, we have been the very first,

and only, health care provider to service to the West Virginia Regional Jail Authority. For over twenty-five (25) years, PrimeCare Medical has successfully provided for the comprehensive health care services to the inmate/patient population of the West Virginia Regional Jail Authority, a single contract consisting of a state-wide correctional system housing over 4,000 inmates/patients. It has been these twenty-five (25) years of service that has made PrimeCare

WV & PCM

- Partnership with the State of West Virginia for over 25 years
- Incorporated in the State of West Virginia
- Very first and only health care provider for the Regional Jail Authority
- State-Wide Electronic Health Record (EHR) in all RJA Facilities
- Contracted provider for all WV Division of Juvenile Services (DJS) Facilities

Medical the longest current standing correctional health care firm to have partnered with the State of West Virginia. The West Virginia Regional Jail Authority is comprised of nine (9) regional jail facilities. We believe it is imperative to highlight that through our contract with the Regional Jail Authority; PrimeCare Medical is already providing care to many other “state inmates” who are currently serving time within the Regional Jail system. This unique blending of inmates/patients has allowed PrimeCare Medical to experience the vast differences and complexities of health related concerns that face those inmates/patients facing both short term and long term sentences.

Also in West Virginia, PrimeCare Medical is extremely proud to say that it has been the contracted health care provider for the entire West Virginia Division of Juvenile Services system since 2001, when we were awarded an emergency services contract at the West Virginia Industrial Home for Youth. The Division of Juvenile Services is another multi-facility system

consisting of nine (9) juvenile detention and confinement facilities and PrimeCare Medical is proud to say that it has again, been the only correctional health care firm to have serviced this unique and diverse multi-facility system. This is just another example of PrimeCare Medical’s ability to effectively operate and manage a state-wide correctional system.

In addition to these facilities, PrimeCare Medical is extremely proud to say that it has been providing comprehensive correctional health care services to the Rockingham County Department of Corrections, located in New Hampshire, since July 1, 1999, representing a business partnership that has stood the test of time for over nineteen (19) years. This proven continuous contract history represents just one (1) example of PrimeCare Medical’s commitment to developing and maintaining long-term professional partnerships with the counties with whom we contract with.

Additionally, PrimeCare Medical is very excited and proud to say that we are currently expanding our business operations throughout the State of Maryland; currently providing correctional health care services to the Baltimore County Detention Center, Carroll County Detention Center, Cecil County Detention Center, Charles County Detention Center, Garrett County Detention Center, and St. Mary’s County Detention Center. Consistent with our proven business philosophy of steady, purposeful growth and staying focused on remaining the region’s

premier correctional health care provider, we are able to maintain our commitment to each of these clients by bringing a “hands-on” and “personal service touch”. **PrimeCare Medical not only welcomes you, but encourages you to contact each of these facilities to inquire as to the vast differences in operational ability and managerial commitment between their previous contracted providers and PrimeCare Medical.**

Likely one of the most significant accomplishments we have made in recent years within our contracted correctional facilities has been the implementation of our completely customized electronic medical records system, CorEMR. We have already implemented this electronic medical record system in forty-six (46) sites – accounting for over 23,000 lives. PrimeCare Medical is currently working towards implementing this system in all contract facilities. The system currently services PrimeCare Medical facilities ranging in size from 2,600 beds (York County) to 49 beds (Lancaster Youth Intervention Center) including a multi-site system (West Virginia Regional Jail Authority). In March of 2011, PrimeCare Medical successfully transitioned CorEMR into each of the Regional Jail Facilities, making West Virginia one of the only state-wide regional jail systems in the country to have achieved this milestone. It is this vast experience that has uniquely positioned PrimeCare Medical to enter into the contract for the Putnam County Correctional Facility. We believe that through our existing partnerships, we possess a strategic advantage over each of our competitors to maintain the highest levels of continuity of patient care for those inmates/patients confined to the Putnam County Correctional Facility.

PrimeCare Medical, as well as numerous members of our Senior Corporate Leadership Team, also has many years of experience in contracting with State Department of Corrections / Division of Corrections facilities. Throughout the years, Pennsylvania and West Virginia have also routinely housed thousands of their DOC Inmates within their County / Regional Facilities. As such, we have successfully provided for the ongoing health needs of this critical DOC population.

It is through these corporate experiences and years of our senior leadership’s personal experiences in working in correctional health care systems, that has again uniquely and strategically positioned PrimeCare Medical to seamlessly transition this health services contract in the most cost effective and efficient manner possible.

Another critical aspect of PrimeCare Medical’s business model is the “longevity” of our health services contracts. At PrimeCare Medical, we remain focused and committed to establishing long term partnerships with our clients. Typically, once we are awarded a correctional health care contract, we are never faced with the need to prepare an exit strategy and transition plan to another health care company. In fact, many of our existing clients elect to simply “renew” our health care agreements without the desire to even obtain proposals from other firms. PrimeCare Medical has actually maintained many of our health care contracts longer than some of our competitors have even been in business. We again encourage you to contact any one of these clients to learn more about the level of services we provide.

12.68 YEARS
AVERAGE LENGTH
OF ALL PCM CONTRACTS

PrimeCare Medical is also a strong supporter of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA), as all of our policies and procedures are based upon their standards. One of the key reasons why we feel so strongly about these agencies and their accreditation processes is that they provide our clients with an unbiased, third party evaluation of the level of service PrimeCare Medical provides. Over the years, PrimeCare Medical has

Successfully achieved accreditation, as well as re-accreditation, from these agencies in **100%** of our audits;

thus, PrimeCare Medical has never failed to achieve and/or maintain continuous accreditation status from either of these agencies. In West Virginia, we have successfully achieved and maintained accreditation from the NCCHC for the entire Regional Jail Authority and for the entire Division of Juvenile Services.

To further illustrate our ability to effectively operate the health services contract for the Putnam County Correctional Facility, we would like to share some statistics detailing the volume of health care services provided by PrimeCare Medical on an annual basis.

Total Average Daily Population (ADP)	24,500+
Total Number of Intake Receiving Screenings Completed	139,809
Total Number of Outside Specialty Consultations	16,282
Total Number of Medical Sick Call Visits Completed (Nursing, PA's, CRNP's, & Physician)	300,137
Total Number of Mental Health Patient Contacts	246,051
Total Number of Dental Patient Contacts	27,948

**Statistics taken from 2017 End of Year Statistical Summary Reports.*

PrimeCare Medical has a long-standing, definitive track record of successfully managing all aspects required for a smooth contract implementation, transition of employees, and continuity of services. Every new contract is launched using a formal Transition Plan that specifies key activities within each major functional area, the person(s) responsible for completing these tasks, and the required dates of completion based on the timeframe available. Implementation activities focus on smooth transitioning of all management functions and the continuity of all clinical services required under the contract. Our expertise is further enhanced by PrimeCare Medical's extensive experience and working knowledge of the correctional system. Important for the Putnam County Correctional Facility, PrimeCare Medical has a thorough understanding of correctional policies and procedures from our years of experience in managing health care services within the local region. Upon a contract award, PrimeCare Medical will utilize our experienced managers to implement and initiate the PrimeCare Medical operations plan as

detailed throughout this Proposal. Drawing upon thirty-two (32) years of experience in successfully managing many other contracts, as well as our in-depth working knowledge and experience specific to local county corrections, PrimeCare Medical can assure the Putnam County Correctional Facility a smooth and effectively coordinated transition that will insure continuity of administrative and clinical functions to the Putnam County Correctional Facility.

MANAGEMENT SUMMARY

PrimeCare Medical, since its inception, has been committed to providing the most efficient and cost effective, quality levels of health care services in the industry. This is accomplished through a commitment to operating the corporation on a daily basis consistent with nationally accepted standards. Our proven business model, coupled with our core values, business philosophies, and continuous desire to be the premier provider of correctional health care services in the Northeastern United States are what makes PrimeCare Medical a true leader in the correctional health care industry today and the ideal health care provider for the Putnam County Correctional Facility.

Due to the unique and diverse composition of our senior corporate leadership, PrimeCare Medical has the unparalleled capacity to effectively engage in the type of strategic operational planning, medical/administrative consultation, and rapid response to emergent / client issues necessary for the proper delivery of medical services to the Putnam County Correctional Facility. As stated previously, Dr. Hoffman's vision for PrimeCare Medical has been spearheaded through the efforts of our Senior Executive Team, who possess over 100 years of experience. These individuals are further supported by our Junior Vice Presidents, who will each play an integral role in the transition of the Putnam County Correctional Facility contract. PrimeCare Medical's Junior Vice Presidents, to include Marcy E. Hoffman, MHRM, CCHP; Brent W. Bavington, MBA, CCHP; Derek G. Hughes, MBA, CCHP; Paul W. Navarro, MSN, NP-C, CCHP; and Kelly A. Ehrich, MBA, BSN, RN, CCHP; possess a combined 100 years' experience in both state and county corrections, health care, information technology, human resources and recruitment, risk management, and correctional medical management. Additional transitional and managerial support of this project will be further supported by our highly skilled and experienced Team of Directors, Regional Coordinators, and Assistant Regional Coordinators. The combination of this level of experience permits the PrimeCare Medical senior leadership to possess an insight into the problems and dynamics of the correctional medical field today. As such, this has again provided for another strategic advantage to PrimeCare Medical in transitioning and managing this contract as we intend to utilize each member of this team at various levels to successfully transition the Putnam County Correctional Facility health services contract.

As previously noted, the goal of providing quality health care services to the inmates/patients at the Putnam County Correctional Facility will continue to be overseen by a multi-disciplinary team of health care and business professionals. The following listed individuals are PrimeCare Medical Representatives who will be directly involved in and responsible for the operational implementation of our business plan for the Putnam County Correctional Facility Contract.

Carl A. Hoffman, Jr., D.O., D.Sc., CCHP - Dr. Hoffman is the President and Corporate Medical Director of PrimeCare Medical and PrimeCare Medical of West Virginia, Inc. With his forty (40) years' experience as a correctional physician, he will provide direction medically and administratively to the Putnam County Correctional Facility. He has been President of PrimeCare Medical and PrimeCare Medical of West Virginia, Inc. since inception and oversees the operation of all facilities. He will aid in the recruitment and supervision of all professional staff for medical operations for the Putnam County Correctional Facility.

Dr. Hoffman is an on-call medical provider for the entire Corporation and is available twenty-four (24) hours per day, seven (7) days per week. He is also available as a resource for all medical personnel should a question arise. Additionally, Dr. Hoffman participates on the Utilization Review Committee (URC) in reviewing and case managing all outside treatment for the Company. He is actively involved in the creation, review and approval of all Policies and Procedures for the Company. His involvement and experience is unmatched in the industry.

Dr. Hoffman received a Bachelor of Arts Degree from Thiel College. Furthering his education at the Indiana University of Pennsylvania, he earned a Master's of Science Degree in Biology. He then went on to graduate from the Philadelphia College of Osteopathic Medicine with a Doctor of Osteopathic Medicine Degree. Additionally, Dr. Hoffman has received an Honorary Doctor of Science Degree from Thiel College. Dr. Hoffman is licensed by the Pennsylvania Osteopathic Medical Board and West Virginia Osteopathic Board of Medicine, and is certified by the National Commission on Correctional Health Care (NCCHC) as a Certified Correctional Health Professional (CCHP).

Theresa Marie Hoffman – Mrs. Hoffman is the Executive Vice President of PrimeCare Medical and PrimeCare Medical of West Virginia, Inc. A 1981 graduate of Bishop McDevitt High School in Harrisburg, Pennsylvania, her work experience has included Balaban and Balaban, a Harrisburg law firm, as well as AMP, Inc., a Fortune 500 Company. She has been in the forefront of the Company's efforts to streamline and make more efficient its financial and staffing operations. Mrs. Hoffman also supervises and directs many of the business operations of the Corporation, providing direct oversight and management to each of the key departments within the PrimeCare Medical Corporate Office. Mrs. Hoffman also plays an active role in supporting various Marketing functions of the Corporation, as well as, being involved in leading numerous employee appreciation and client relations activities. Her unique ability to identify an issue and create a solution makes Mrs. Hoffman a valuable resource to the team.

Thomas J. Weber, Esquire – On June 1, 2016, after a twenty-six year career as a private attorney, Mr. Weber assumed the position of Chief Executive Officer of PrimeCare Medical. As an attorney, Mr. Weber focused a majority of his energies on health care related legal matters. He also is the author of numerous articles on health care related legal topics and served as a frequent lecturer on topics ranging from regulatory compliance, HIPAA and proper record keeping and retention. Mr. Weber also served on the Executive Committee of Goldberg Katzman, P.C., gaining invaluable experience in overseeing company operations. Prior to assuming the position of Chief Executive Officer, Mr. Weber had served as Corporate Counsel for PrimeCare Medical, wherein he coordinated the defense of inmate/patient lawsuits, oversaw

insurance and contractual issues, and supervised the Human Resources Department. Mr. Weber has his Bachelor of Science (B.S.) from The Pennsylvania State University with distinction and earned his Juris Doctor (J.D.) from The Dickinson School of Law in 1990 graduating cum laude. As Chief Executive Officer, Mr. Weber utilizes his legal and managerial experiences to ensure that PrimeCare Medical is positioned to provide the highest quality correctional medicine in the most cost effective manner while maintaining the highest standards of ethical and legal compliance.

Todd W. Haskins, RN, BSN, CCHP – As Vice President of Operations for PrimeCare Medical, Mr. Haskins has clinical and operational responsibilities for Pennsylvania, West Virginia, Maryland, New York, and New Hampshire Facilities. He started with PrimeCare Medical as a Health Services Administrator in 1999 and in May 2006 was promoted to Vice President of Operations.

As Vice President of Operations, Mr. Haskins ensures clinically sound care is provided by medical and mental health personnel within all contracted PrimeCare Medical facilities. Mr. Haskins strives to build and maintain relationships with jail/juvenile administrative members from all levels of the Corporation, as well as serving as the key liaison and negotiator of collective bargaining agreements/units for the Company. Mr. Haskins is an essential part of the Corporate Operations and his cutting edge thinking has enabled PrimeCare Medical to be at the forefront of clinical and operational systems in correctional healthcare. He was a key developer in the inception of the electronic medical records system and works aggressively with nurses and clinicians to continually enhance the features that are offered through CorEMR. He also developed the Continuous Quality Improvement Program and numerous other operational and clinical enhancement systems and techniques. Mr. Haskins is also a member of the PrimeCare Medical Utilization Review Committee.

Mr. Haskins has achieved his Certified Correctional Healthcare Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC). Many areas of clinical experience can be found in Mr. Haskins' professional career, to include: telemetry, trauma, emergency medicine, surgical and medical intensive care, case management, and correctional nursing and healthcare management.

Francis J. Komykoski, Sr., M.B.A., CCHP - As the Strategic Planning Officer, Director of Policies and Procedures, and the Director of National Commission on Correctional Health Care (NCCHC) Accreditations for PrimeCare Medical, Mr. Komykoski oversees the day-to-day operations of the Corporation in Pennsylvania and New Hampshire.

In his prior significant military employment history, Mr. Komykoski was a twenty-three (23) year veteran of the United States Navy retiring at the rank of Commander in 2002 with the designation as a Surface Warfare Officer (SWO). In his final active duty assignment, Mr. Komykoski served as Commanding Officer, Naval Reserve Center, Fort Dix, New Jersey. He managed the training and administration for over one thousand (1,000) Naval Reservists and one hundred (100) active duty Naval Officers and Sailors in the northeastern United States of America and he was responsible for the yearly implementation and execution of over a

\$1,100,000.00 operating budget. A few noteworthy highlights of Mr. Komykoski's naval career include the fact that he was awarded three (3) Meritorious Service Medals, four (4) Navy Commendations Medals, and three (3) Navy Achievements.

Already a distinguished graduate of the Pennsylvania State University with a Bachelor of Science Degree in Industrial Arts Education, upon his retirement Mr. Komykoski furthered his education by earning a Master's Degree in Business Administration (MBA) with an emphasis in Health Services Administration from Eastern University in 2005. He also earned his Certified Correctional Health Professional (CCHP) certification through the National Commission on Correctional Health Care (NCCHC). He served on the Academy of Health Care Professional Board of Trustees from 2006 to 2008.

Additionally, Mr. Komykoski is the Director of National Commission on Correctional Health Care (NCCHC) Accreditation and Director of Policies and Procedures and supervises the NCCHC Accreditation process for the Corporation.

Paul W. Navarro, MSN, NP-C, CCHP - As a Junior Vice President of Clinical Operations for PrimeCare Medical, Mr. Navarro assists the Vice President of Operations with the research, development and implementation of company safety and clinical educational programs. Mr. Navarro is also a member of the Utilization Review Committee and assists in the day-to-day clinical operations of the corporation. He is a 2006 graduate of The Pennsylvania State University with a Bachelor of Science in Nursing Degree. He has been a guest lecturer for students and faculty at The Penn State School of Nursing, Hershey Medical Center on various clinical and correctional healthcare topics. Mr. Navarro also serves on the Pennsylvania State University School of Nursing APG Board of Directors. Mr. Navarro received his Masters of Science in Nursing Degree in 2010 from Widener University, where he was a member of the Sigma Theta Tau, Eta Beta Chapter, International Honor Society of Nursing. Mr. Navarro was first employed by PrimeCare Medical as an EMT in 1999. He has clinical experience in the Pediatric Intensive Care Unit, trauma, emergency medicine, and infectious disease. Mr. Navarro is Nationally Certified as a Family Nurse Practitioner by the American Academy of Nurse Practitioners. He has also achieved his Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Kelly A. Ehrich, M.B.A., B.S.N., R.N., CCHP – As a Junior Vice President of Operations for PrimeCare Medical, Ms. Ehrich oversees several facilities in Southeastern Pennsylvania with populations ranging in size from 400 – 2,300 inmates/patients. Ms. Ehrich began with PrimeCare Medical as the Health Services Administrator at Lehigh County Prison and was promoted to the role of Regional Coordinator for the Company. Ms. Ehrich is a graduate of Wilkes University, where she received a Master's Degree in Business Administration. She is a Registered Nurse and received her Bachelor of Science Degree in Nursing at Cedar Crest College. She has achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Prior to her employment with PrimeCare Medical, Ms. Ehrich was employed by another correctional health care firm at the Lehigh County Prison, Allentown, PA, as the Healthcare

Administrator where she was responsible for the effective delivery of the institutions (1300 bed) overall health care system. In this role she acted as a liaison between health services and institutional administration, department heads and security. She supervised all health care unit budgets including: pharmacy, medical records, nursing, lab, X-ray etc. and actively monitored financial performance of the contract. Ms. Ehrich developed and implemented all institution directives and procedures to comply with NCCHC accreditation and maintained a quality improvement program. She managed all staff related issues including: recruitment and retention, interviewing and hiring of department heads and staff, scheduling, and performance evaluations.

Ms. Ehrich was also employed by a third correctional health care company within the New Jersey Department of Corrections in a multitude of roles, including those of Outside Consultation/Specialty Care Manager, East Area Sr. Financial Analyst, and the New Jersey Financial Manager. As the Statewide Outside Consultation/Specialty Care Manager she directly supervised consult coordinators within the prison facilities across the state and coordinated on-site clinics and outpatient services for New Jersey State inmates. Throughout her career with Correctional Medical Services, she supported the New Jersey contracts in establishing and/or maintaining accreditation status. She then moved into the role of the East Area Sr. Financial Analyst, where she analyzed financial data for the correctional facilities of the Eastern Region of the United States that contracted with Correctional Medical Services. She worked on bid proposals and helped to support the Main Office Financial Operations Department in St. Louis, MO. She additionally was appointed as a Focal Point Trainer responsible for training all new management and administrative employees in various aspects of their contract. She then served as a Financial Manager where she supported the day-to-day financial operations of the \$125 million New Jersey Region and Federal Projects. This position included daily monitoring of labor to review appropriate utilization of staff relative to approved operational levels, troubleshooting claim/invoice issues, Ad Hoc reporting/analysis, monitoring utilization trends in inpatient and outpatient services, quickly identifying the need for corrective action, and to effectively communicate and resolve any issues related to the financial performance of the contract to include operational issues that could potentially lead to penalties.

Marcy E. Hoffman, M.H.R.M., CCHP - As the Junior Vice President of Human Resources - Personnel, Ms. Hoffman oversees Human Resources operations on a daily basis. She reviews all disciplinary action and terminations, in conjunction with the Vice President and Chief Executive Officer of the Company. She maintains all personnel files of each employee in the Company and also maintains all Company benefits, excluding the 401K Plan. Ms. Hoffman has achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC). She holds a Master's Degree in Human Resources Management and Industrial Relations.

Brent W. Bavington, M.B.A., CCHP - Mr. Bavington is the Junior Vice President of Operations, Human Resources (Recruitment and Employment) and Technology. He is a graduate of Slippery Rock University with a Bachelor of Science Degree in Information Technology with a Minor in Marketing. He received a Master's Degree in Business Administration (MBA) from Eastern University in St. David's, PA. Mr. Bavington has achieved his Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health

Care (NCCHC). He oversees the recruitment process of all new hires. Mr. Bavington sees that staffing needs are met at all PrimeCare Medical facilities and has operational supervision of various contracted facilities in Pennsylvania and West Virginia. He also supervises the Corporate Network Administrator in all technological needs of the Corporation.

Derek G. Hughes, M.B.A., CCHP – As the Junior Vice President of Operations for PrimeCare Medical, Mr. Hughes assists the Vice President of Operations in the operational management of the Corporation; primarily having contract oversight for various correctional health contracts in Central and Northeastern Pennsylvania, as well as managing its contractual operations in New Hampshire and Maryland. Mr. Hughes actively coordinates with all Pennsylvania, New Hampshire, and Maryland contracts and assists with the tactical planning and operations with each. Mr. Hughes is also responsible for the technical writing and preparation of all company proposals and subcontracting endeavors, as well as his involvement in the Corporation's marketing and business development initiatives. He is a 2004 Magna Cum-Laude graduate of the Shippensburg University of Pennsylvania with a Bachelor of Science Degree in Business Administration and has earned his Master's Degree in Business Administration (MBA) from Eastern University in St. David's, Pennsylvania. He has achieved his Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Sandra M. Ulerick, M.B.A., CCHP – As the Director of Risk Management and Privacy Officer, Ms. Ulerick monitors all lawsuits and coordinates communications between attorneys and key staff members. Ms. Ulerick reviews all grievances and inmate/patient letters received at the Corporate Office. She is also responsible for reviewing the daily logs and reporting to the Corporate Medical Director and Corporate Counsel any potential high-risk issues. Ms. Ulerick is a graduate of Duquesne University, where she obtained her Bachelors of Science Degree in Criminal Justice and Forensic Science and has earned her Master's Degree in Business Administration (MBA) from Eastern University in St. David's, Pennsylvania. Ms. Ulerick has achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Jennifer Mroz, PA-C, CCHP – Ms. Mroz is a graduate of Kings College and has over 18 years of medical experience. She started with PrimeCare Medical as a Physician Assistant in 2003 and in 2013 was promoted to Director of Clinical Operations for the Corporation. She assists in the day to day clinical operations of the company, is a member of the Utilization Review Committee, and provides physician assistant services at various facilities throughout Northeastern Pennsylvania. Ms. Mroz has achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Pamela Rollings-Mazza, MD – Dr. Rollings-Mazza is a licensed Psychiatrist in the Commonwealth of Pennsylvania and has been employed with PrimeCare Medical as a staff psychiatrist since January, 2008. She has recently been promoted to the Director of Psychiatry for the Corporation. In addition to continuing to provide direct patient care, Dr. Rollings-Mazza assumes various administrative duties to improve the efficiencies of our mental health care delivery model, assists with the development of policies and training to ensure PrimeCare

Medical remains at the forefront of meeting our patients' mental health needs and overseeing the consistent application of the company's procedures. Dr. Rollings-Mazza is available to provide telepsychiatry for any facility based out of the PrimeCare Medical Corporate Office in Harrisburg, PA if required to do so. She received her Doctor of Medicine degree from Memorial University of Newfoundland, Canada in 1996. Dr. Rollings-Mazza is American Board Certified in Psychiatry and Neurology.

Robert M. Nichols, Jr., Psy.D., CCHP – As Director of Mental Health, Dr. Nichols oversees the mental health services for PrimeCare Medical. He has over twenty-five years of correctional experience, including fifteen years as Deputy Warden of Treatment at Berks County Prison. Dr. Nichols graduated from Elizabethtown College with a Bachelor of Arts degree in Political Science and History. He received his Master's Degree in Counseling Psychology from Kutztown University graduating Magna Cum Laude. Recently he received his Doctor of Psychology (Psy.D.) degree in Clinical Psychology from Philadelphia College of Osteopathic Medicine. For nearly two decades, he has practiced as a licensed psychologist in Pennsylvania. Dr. Nichols has been employed with PrimeCare Medical since January, 2006.

Nathan B. Kalteski, D.M.D. – Dr. Kalteski is the Director of Dental Health Services for PrimeCare Medical. He is a graduate of Temple University School of Dentistry. He attended undergraduate school at the University of Scranton. He currently services the Chester County Prison, Northampton County Department of Corrections, Franklin County Prison, Lehigh County Prison, Lancaster County Prison, and the Pike County Correctional Facilities for PrimeCare Medical

Emily M. Scordellis, Psy.D. – As the Regional Mental Health Manager, Dr. Scordellis assists with the implementation of policies and procedures for mental health services at PrimeCare Medical locations across Pennsylvania, Maryland and New York. Dr. Scordellis graduated from Chestnut Hill College with a Bachelor of Arts degree in Psychology and Criminal Justice in 2006 and she earned her Master's Degree in Clinical and Counseling Psychology from Chestnut Hill College in 2008. Dr. Scordellis graduated with her Doctorate in Psychology (Psy.D.) from Immaculata University in 2013. She joined the PrimeCare Medical team upon the completion of her degree and was promoted to Regional Manager in 2016. Dr. Scordellis is currently licensed in the states of Pennsylvania, Maryland, New York and West Virginia.

Victoria A. Gessner, M.D. – Dr. Gessner serves as the Assistant Corporate Medical Director for PrimeCare Medical in the Commonwealth of Pennsylvania. Dr. Gessner is a 1983 graduate of the Temple University School of Medicine and has over 19 years of experience in the correctional health care industry. Dr. Gessner has worked as the Medical Director/Physician at the following facilities: The George W. Hill Correctional Facility, Thornton, PA; Delaware County Prison, Thornton, PA; Montgomery County Correctional Facility, Norristown, PA; and SCI Graterford, Graterford, PA. Dr. Gessner began her employment with PrimeCare Medical in November, 2007. She currently services the Chester County Prison, Berks County Jail System, Northampton County Prison, and Dauphin County Prison for PrimeCare Medical. Prior to corrections, she worked as a hospitalist in various Philadelphia hospitals and later as a physician in a private group practice in Abington, PA. Dr. Gessner speaks fluent English and Spanish.

Denise Gemzik-Jemiola, RN, BSN, CCHP-RN – Ms. Jemiola is a graduate of the Pittston Hospital School of Nursing and has over twenty-five (25) years of nursing experience. She began employment with PrimeCare Medical as a Health Services Administrator in 2005 and has been promoted to Regional Coordinator for Northeastern Pennsylvania and New Hampshire. Ms. Jemiola has achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Kelly Rhoads, LPN, CCHP – Ms. Rhoads started her employment with PrimeCare Medical in 1996 as a staff licensed practical nurse and was later promoted through the ranks to Assistant Regional Coordinator. She currently oversees the operations of multiple adult correctional facilities ranging in size from 1,000 inmates/patients to over 2,300 inmates/patients, as well as several juvenile detention centers. Ms. Rhoads achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Tiffany Morykan, MBA, CCHP – Ms. Morykan began her employment with PrimeCare Medical in 2004 as an Administrative Assistant at the Northampton County Prison. Since that time, she has continued her education and has been promoted through the ranks to Assistant Regional Coordinator. She is responsible for the day-to-day operations for the Eastern Pennsylvania and Maryland contracted facilities. She is a graduate of DeSales University where she received a Master’s Degree in Business Administration. Ms. Morykan achieved her Certified Correctional Health Professional (CCHP) certification from the National Commission on Correctional Health Care (NCCHC).

Susan M. Brennan, RD, LDN – Ms. Brennan is a 1989 graduate of the University of Delaware where she received a BAAS in International Relations. She attended Immaculata University where she received a MA Candidate/AP4 Certification in Nutrition Education. Ms. Brennan served in the US Air Force from 1995 to 2004 where she was nominated for the USAF Dietitian of the Year Award. She has been employed as the Dietitian for PrimeCare Medical since 2011 and is the expert consultant providing comprehensive medical nutrition therapy and menu reviews to PrimeCare Medical’s contracted correctional facilities throughout the Northeastern United States. Ms. Brennan is frequently consulted on various dietary issues within PrimeCare Medical’s contracted facilities.

SUBCONTRACTORS

In addition to PrimeCare Medical’s extensive “in-house” management TEAM, we also provide various service aspects of this Proposal through already established working partnerships with our TEAM of subcontracted providers; each of which being experts in their respective fields as they relate to the correctional health care industry. Subcontractors identified within this Proposal that we intend to utilize include Professional Care Medical Practice P.C., Professional Care Dental Services, P.C., Personal Care Registered Professional Nursing P.C., Bio-Reference Laboratories, Correct Rx Pharmacy Services, Physicians Mobile X-Ray Imaging, Institutional Eye Care, Infinity Search Group, CorEMR, and Stericycle. Qualifications and descriptions of

each of these subcontractors are outlined below. Each of these subcontracted providers' services will be further detailed later in our Proposal.

- [Professional Care Medical Practice P.C., Professional Care Dental Services, P.C., and Personal Care Registered Professional Nursing P.C.](#) are three New York Professional Corporations formed and owned by long time PrimeCare Medical employees licensed by the state of New York to provide medical, dental and nursing care and services respectfully. They were formed and work exclusively in tandem with PrimeCare Medical of New York, Inc. to provide the full range of health care services in correctional settings in the state of New York. The mission of these companies and their employees is to focus on and provide the professional health care services. PrimeCare Medical of New York, Inc. in turn handles the managerial and administrative aspects of the contract and serves as the primary point of contact with the facility and liaison between the facility and the health care providers.



- [Bio-Reference Laboratories, Inc.](#) has been serving the Correctional market for over fifteen (15) years. Bio-Reference is CLIA Certified, CAP accredited, and properly licensed. As the largest independent clinical laboratory in the tri-state area, Bio-Reference seeks to offer the best service possible that is personalized to fit the needs of your facility. Bio-Reference operates a full service clinical laboratory and an andrology laboratory. Currently, Bio-Reference Laboratories services all PrimeCare Medical contracted facilities. The direct point of contact for Bio-Reference Laboratories is Sujaya Swaroop, who may be reached at 481 Edward H. Ross Drive, Elmwood Park, New Jersey 07407; or by phone at 201-218-6530.



- [Correct Rx Pharmacy Services, Inc.](#) was established as a Maryland corporation in 2003 and has experienced steady growth year over year. Correct Rx is headquartered in Maryland, between Baltimore and Washington, and serves more than 200,000 inmates in 42 states in correctional and juvenile facilities, residential treatment programs and senior care facilities. They are a full service pharmacy available 24 hours a day, seven days a week, and take pride in providing accurate and timely dispensing and delivery.

Correct Rx is a leader in institutional pharmacy and offers clients a unique value through their commitment to Clinical Pharmacy. They partner closely with our Healthcare teams to identify ways to reduce overall healthcare costs while improving patient outcomes. Correct Rx's unique business model is based on the practice of clinical pharmacy, collaborating with other parts of a medical team to manage a patient's health rather than strictly filling prescriptions and selling pills. Their goal is to ensure the best possible

health outcome and the most cost-effective treatment rather than simply fill orders with the prescribed number of the cheapest pills. Additionally, Correct Rx has expertise in accreditation and can assist in helping clients get accredited or re-accredited. They created a robust audit tool which ensures that client's medication rooms are in full compliance with all State and Federal regulations including national accrediting bodies (e.g., NCCHC, ACA, and JC) along with facility specific standards, policies and procedures.

Correct Rx has the experience you can count on as a client, from the owners of Correct Rx to our Clinical Pharmacists. Dr. Ellen H. Yankellow is the President and CEO of Correct Rx and a national leader in the advancement of clinical pharmacy for institutions. She has over 30 years of experience in the industry. Jill Molofsky, RPh, CCHP, serves as Vice President and also has over 30 years of operational experience providing pharmacy services for institutions all across the country. James Tristani, RPh is head of Purchasing and has 35 years of direct pharmacy business experience. Correct Rx employs the highest credentialed Clinical Pharmacists to support these clinical initiatives. These Clinical Pharmacists have Pharm D, post-graduate residency training and are board certified.

Correct Rx has the ability to take on large pieces of business in an organized manner with no disruption to clients and the inmates they serve. They have transitioned over 390 facilities in the past 12 years. This includes statewide systems, large municipalities like the Philadelphia Prison System and the Atlanta City Jail and county jails. Correct Rx currently provides pharmacy services to fourteen of the twenty-three Maryland Counties, Maryland DPSCS since 2005, and the Maryland Department of Juvenile Services. Correct Rx is a woman-owned and operated business certified by the Maryland Department of Transportation (MDOT - Certification No. 03-440) as a Women Business Enterprise (WBE). In addition, Correct Rx is certified as a Women's Business Enterprise by the Women's Business Enterprise National Council (WBENC – Certification No. 2005125955), the nation's largest third-party certifier of the businesses owned and operated by women in the United States. Correct Rx is also classified as a certified small business through the federal SBA. Correct Rx has a diverse work force as more than 70% of our employees are classified as minorities. We have contracted with several small local and regional companies on numerous contracts to provide support services that help us to meet the needs of our clients.

The direct point of contact for Correct Rx is Dr. Ellen H. Yankellow, President and CEO, who may be reached at 1352-C Charwood Road, Hanover, MD 21076; or by phone at 800-636-0501.



- [Physicians Mobile X-Ray Imaging, Inc. \(PMX\)](#) was established in 1978 in Western Pennsylvania. We currently service all of Pennsylvania, Maryland, Delaware, Ohio and West Virginia. PMX has been providing service to PrimeCare Medical for over 15 years.

PMX is an industry leader providing digital portable diagnostic x-ray, ultrasound, and cardiac services. Our team of caring professionals uses advanced technology to deliver prompt and efficient service. We bring our personnel and equipment to the facility and perform ordered exams. Images are able to be viewed by the patient's physician at the time of services. Reports are faxed and available for review on the website following interpretation. X-Ray and EKG services are available 24 hours a day, 7 days a week. Ultrasound services are available on a scheduled basis.

The administrative offices of Physician's Mobile X-Ray, Inc. are located at 945 East Park Drive, Suite 102, Harrisburg, PA 17111. For additional information, please contact Todd Gelbaugh, C.E.O., at (717) 561-4940.

Institutional Eye Care

Sharing Your Vision for Excellence
in Correctional Health Care

- [Institutional Eye Care, Inc.](#) is the largest vision service provider in the country devoted solely to inmate eye care. We currently service over 1,000 separate local, county, state and federal facilities in 45 states. We provide on-site vision services in all 50 states and began international service in January 2000. Institutional Eye Care's correctional experience began in 1983.

Institutional Eye Care will provide on-site optometry and prescription eyeglass services to meet all specifications set forth in the Request for Proposal. All prescription eyeglasses will meet or exceed FDA and ANSI Dress Safety standards. Our optical lab currently turns standard eyeglass orders around in about three business days of order receipt. We guarantee standard prescription eyeglass shipment within ten days. All eyeglasses carry a one year warranty against manufacturing defect.

We provide in state licensed and credentialed optometrists. Routine optometric care will meet all current standards of community care. All services will be provided within the state's scope of optometric care and on-site equipment parameters. Services will be provided at a mutually agreed upon schedule with the facility(s) to meet the requirements as specified in the Request for Proposal. Currently, Institutional Eye Care services all PrimeCare Medical contracted facilities. The direct point of contact for Institutional Eye

Care is Jeffrey Lose, who may be reached at PO Box 366550, Bonita Springs, Florida 34136; or by phone at 866-604-2931.



- [Infinity Search Group](#) is comprised of highly successful consultants serving both healthcare hiring clients and professionals. ISG = “Nationwide Healthcare Recruiters.” Infinity Search Group (ISG) has been providing placement services for more than eight (8) years. ISG specializes exclusively in the search and placement of qualified clinical, managerial, supervisory, and staff healthcare professionals, in the fields of pharmacy and allied healthcare. Our specialty is recruiting Nurse Practitioners and Physician Assistants. We’ve recently expanded our platform to include Physician recruiting. We are scalable and can transition into other disciplines.

Hiring clients utilize our comprehensive placement services on a contingency basis; contingency searches enable the clients to view the potential candidates at no cost to themselves. ISG has maintained and developed client relationships with numerous healthcare-related organizations and institutions, on local, regional and national levels. All potential healthcare candidates are thoroughly interviewed to ascertain their motivation, salary expectations, and geographic/location preferences. We desire to work with only ‘serious’ candidates, and will not refer individuals who are unrealistic and/or merely “shopping around”. We do not define our own successes by the number of placements we make, but by the quality of the candidates we help to achieve a rewarding career path. Our secret!? We listen to all the individuals involved. Employers have specific needs which they must meet, while potential candidates have certain personal desires they look to satisfy, in a new position. We listen, understand, and then match candidates with hiring managers that fulfill the needs of both parties. As a result, there are no surprises. Just well informed candidates that are pre-screened and well-qualified to meet the challenges they will face in their new position.

Currently, we service Maryland, Delaware, Pennsylvania, New Jersey, Ohio, Indiana and Illinois. We are scalable and can transition into other states which we do frequently for our clients. At ISG, we are committed to finding the best qualified candidates to be an asset to your team and to building lasting client relationships. Infinity Search Group has the experience and knowledge to locate and deliver well-qualified clients to the positions they desire to obtain. The direct point of contact for Infinity Search Group is Ed Shihadeh, who may be reached at 610-325-9461.



- [CorEMR](#) was founded in 2004 and is the fastest growing Medical Records System on the market today. CorEMR has emerged as the national leader in providing Electronic Medical Records (EMR) to the correctional health care industry. CorEMR has more than 155 correctional facility customers in 30 states throughout the country with more than 88,000 inmate lives currently having their medical records kept within the CorEMR system.

The CorEMR software was designed and developed from the conception as a Correctional Electronic Medical Records package. The software was not ported from a Physician Management or Acute Care software system. The CorEMR software is a true web-based application that does not utilize any middleware to enable it to be accessed via a web-browser or to make it appear as a thin client. CorEMR's MAR is an integrated feature of the EMR, it is not provided by a third-party company.



The CorEMR software is utilized by multiple regional and national Correctional Health Care providers as well as self-operated County facilities. The CorEMR software is certified by the ONC-ACB as a 2014 "Complete EHR".

CorEMR meets the unique needs of correctional medical services by being flexible and configurable:

- Multi-Facility Support allowing different forms and other configured items at each facility if required.
- User Configurable Forms – easy migration from current paper forms to electronic format for Intake forms, Nurse Protocols, Release and Transfers, etc.
- Configurable Security to control user access to support HIPAA requirements
- Scalable to support small and large County Facilities as well as State DOC facilities

CorEMR has extensive experience in Integrations with other systems using HL7, Web Services, File Sharing and File Transfer Protocols that include:

- Offender/Jail Management
 - Demographics
 - Housing Location
 - Release
- Pharmacy
- Laboratory
- Radiology



- State Wide Information Exchanges

The direct point of contact for CorEMR is Jonathan Probst, who may be reached at 1173 S. 800 East, Orem, Utah 84097; or by phone at 888-267-3671.



➤ [Stericycle, Inc.](#) specializes in the proper disposal of medical and/or bio-hazardous waste. Their medical waste management services aid in employee safety, protect the environment, and reduce compliance risks for those businesses that generate bio-hazardous waste. Stericycle is a global business-to-business services company. We provide an array of highly specialized solutions serving healthcare organizations and commercial businesses of every size. Since our founding over 25 years ago, we have grown from a small start-up in medical waste management into a leader across a range of increasingly complex and highly regulated arenas, such as:

- Brand protection solutions
- Environmental and sustainable solutions
- Patient and customer communication solutions
- Regulated waste management and compliance solutions

Every organization today must comply with increasingly strict regulatory guidelines and quality controls in the delivery of their core businesses. Large or small, businesses can't always do it on their own. They seek out Stericycle to help them. We have the expertise and passion to take on many complicated and often behind-the-scenes services our clients don't always know how to do well but that ultimately make their business better.

Our Purpose is to help our customers fulfill their promise by providing solutions that protect people and brands, promote health and safeguard the environment. The direct point of contact for Stericycle is Christine Bleisch, who may be reached at 4357 Ferguson Drive, Suite 100, Cincinnati, Ohio; or by phone at 513-262-9678.

Given the current financial climate across our Country, we are constantly faced with the challenging realization that we must learn to “*do more with less*,” especially in the correctional health care industry. Being an established local health care provider, we have firsthand knowledge and a vested interest in ensuring the Putnam County Correctional Facility successfully accomplishes this task. With the PrimeCare Medical solution, we are ideally suited to assist the Putnam County Correctional Facility in doing just that. Upon a contract award, PrimeCare Medical not only can, but will achieve this goal through our already developed networks of community resources; “*bench*” of qualified, licensed health care professionals; established economies-of-scale; and working knowledge of local county inmates/patients.

Additionally, PrimeCare Medical has devoted significant amounts of resources and has made substantial financial investments into an array of technological based advancements, which have

taken us to the cutting edge of correctional health care. These investments have enabled us to be a significant force in a highly competitive market and remain at the forefront of correctional medicine. Through the successful development and implementation of these critical technological programs, PrimeCare Medical has not only improved the provision of overall care to our inmates/patients, but has also realized substantial increases in operational effectiveness and staffing efficiencies. PrimeCare Medical's most significant stride in the technology-medical industry has been through its complete customization and integration of our electronic medical record system, CorEMR. The operational efficiencies of this system allows for immediate implementation of policy changes, enhanced continuity of care, improved inmate/patient outcomes, and most importantly, prevents inmates/patient from "*slipping through the cracks*". PrimeCare Medical has successfully implemented CorEMR at forty-six (46) correctional facilities since its inception. A more in-depth review of this system and the operational efficiencies it will provide to the Putnam County Correctional Facility can be found in the Electronic Medical Records section of this Proposal.

In addition to our electronic medical records system; PrimeCare Medical has developed its own PCM Portal System, will provides for medical and client staffs' instant electronic retrieval of key information such as policies and procedures, medication formularies, continuing staff / medical education, inmate/patient educational programs, etc. PrimeCare Medical has also made significant enhancements within our internal financial management programs, such as our state-of-the-art inmate/patient manager program, HEALTHsuite by RAM Technologies. This integrated claims processing system tracks all inmate/patients in a step-by-step tracking format from the date of an initial consultation request until payment is made to the treating institution or provider. This program utilizes McKesson and Optum Coding products to assist with claim appropriateness and fiscal management of each inmate's/patient's interaction with all offsite providers. With our vision of continuous improvement, PrimeCare Medical has also developed "eConsults" linking origination of consults within CorEMR with the offsite providers utilizing a more robust and efficient methodology. PrimeCare Medical has created an instant reporting and monitoring system. This system, PCM NOW, responds to business/medical issues by automatically sending alerts or notifications when pre-defined events occur. These alerts can include anything from certain inmate/patient events (i.e., high blood pressure, low blood sugars, etc.) to inmates/patients approaching monetary thresholds on their medical claims. Each of these critical systems will be further addressed in greater detail later in our proposal.

Advancements in Technology

- CorEMR – Corrections based EMR
- PCM Portal
- HEALTHsuite by RAM Technologies – McKesson & Optum Coding
- "eConsults" for offsite care tracking
- PCM NOW

PrimeCare Medical also understands the importance of partnering and collaborating with uniform collective bargaining organizations. Throughout our corporation, we have successfully maintained a very low incidence of union activity. PrimeCare Medical does, however, currently manage one facility, where after assuming the medical services contract from another health care firm, had made the decision to maintain this facility's collective bargaining status. PrimeCare

Medical has formed a true business partnership with this union organization over the years and has successfully managed the union's collective bargaining agreement with no adverse relations. PrimeCare Medical is sensitive to this issue and has made it a priority to collaborate with the unions, rather than making attempts to avoid and/or create adversarial relations.

It is this combination of PrimeCare Medical's proven business philosophy in correctional medicine of over thirty-two (32) years, the vast professional experiences of our multidisciplinary senior management team, our extensive comprehensive presence in local correctional health care systems, proven ability to operate state-wide correctional systems, innovation into various technological advancements, and experience with local unions that makes PrimeCare Medical the ideal health care solution for the Putnam County Correctional Facility.

FINANCIAL CAPABILITY

PrimeCare Medical has experienced steady growth and financial success since its inception. PrimeCare Medical has been on The Central Penn Business Journal's "50 Fastest Growing Companies" list four (4) times in recent years. PrimeCare Medical has consistently maintained compliance with all contract obligations, even while continually expanding. In the thirty-two (32) years PrimeCare Medical has been in business, we have never experienced default or forfeiture on any performance, payments or other bonding requirement. PrimeCare Medical has continued to grow each and every year, even while constrictions have occurred within our market base. The continued financial growth of our Corporation has been achieved through technological advancements and operational system efficiencies which have resulted in improved inmate/patient outcomes. PrimeCare Medical has thirty-two (32) years of proven financial prudence record. This financial awareness allows our company to obtain bonds without issue, maintain multi-million dollar lines of credit with zero (0) balances, and have the ability to complete successful negotiations with our contracted vendors for reductions in their pricing models due to our rapid payment abilities. Currently, PrimeCare Medical only maintains lines of credit through our primary banking institution, PNC; as such line(s) are rarely used due to the sound financial condition of our Corporation.

PrimeCare Medical maintains its financial stability through the routine monitoring and review of all financial accounts. PrimeCare Medical employs a Certified Public Accountant with sixteen (16) years of experience, who prepares and reviews the Balance Sheet, Income Statement, and all other financial documents for PrimeCare Medical on a monthly basis. These Financial Statements are also reviewed periodically throughout the year by an outside accounting firm as well as quarterly by our banking institution. PrimeCare Medical also conducts the following meetings on a regular basis to review the financial stability of the corporation:

- Monthly Review of all Outstanding Accounts Receivables
- Weekly Review of all Outstanding Accounts Payables
- Monthly Review of all Cash and Investment Accounts

- Weekly Financial meetings are held with the PrimeCare Medical Director of Finance (Certified Public Accountant) and the Vice Presidents of the Company
- Monthly conference calls are held with the staff at the contracted facilities where any financial issues and or concerns are addressed
- Annual training is held for the Health Services Administrators where any financial concerns and or issues are discussed

PrimeCare Medical possesses the necessary staff to maintain the financial performance of the Corporation. We employ experienced staff for each of the following departments: Accounts Receivable, Accounts Payable, and Payroll. PrimeCare Medical has open communications on any financial matters with the staff of the various facilities with whom we are contracted.

PrimeCare Medical has Certificates of Good Standing for the following states: Pennsylvania, West Virginia, New Hampshire, Maryland, Virginia, Ohio, New York and New Jersey. PrimeCare Medical will meet all the necessary bonding requirements and/or letter of credit requirement for the contract. PrimeCare Medical possesses the sufficient financial resources (i.e., investments, lines of credit, etc.) required to assure service delivery and responsibility to the Putnam County Correctional Facility.

CLINICAL OPERATIONAL PLAN

SCOPE OF WORK

PrimeCare Medical shall provide comprehensive medical, dental, mental health, and pharmaceutical services to all inmates/patients of the Putnam County Correctional Facility as specified within the RFP and as detailed within this Proposal. PrimeCare Medical, since its inception, has been committed to providing efficient, quality health care. This is accomplished through a commitment to operating the company on a day-to-day basis by nationally accepted standards, by consistently monitoring the health needs of our inmate/patient populations, and by immediately implementing evidence based standards of care when clinically indicated. The following work plan addresses the major aspects of PrimeCare Medical's health care delivery systems and our medical operation, from the initial intake to discharge planning and outlines services such as transition planning, continuity of care, multidisciplinary provider collaboration, infectious disease, continuous quality improvement, cost containment strategies, utilization review, communication / coordination with facility administrative personnel, electronic medical records systems, risk management, staff and inmate/patient education, policy and procedure compliance, and accreditation. Below, PrimeCare Medical will provide a detailed overview and explanation of our proven business model, identifying how our solution will provide for the provision of comprehensive health care services to the Putnam County Correctional Facility. Although these critical functions are described separately within this section, our multidisciplinary management and transition team shall strategically and systematically integrate each of these functions into our overall work plan; thus, creating a model that will ensure the

highest level of health care services are provided to the Putnam County Correctional Facility in the most cost effective and efficient manner possible.

MEDICAL AUTONOMY

It is acknowledged and agreed that, in accordance with NCCHC Standards, decisions and actions regarding health care services provided to inmates/patients are the sole responsibility of qualified health care personnel and cannot be compromised for security reasons; thus, all decisions involving the exercise of medical or other health related judgments are the sole responsibility of PrimeCare Medical and its health care practitioners.

ACCESS TO TREATMENT

Upon admission, each inmate/patient shall be informed of his or her right of access to health care treatment. In addition to verbal instruction, each inmate/patient shall receive an educational sheet which includes information about the Facility's sick call schedule, the procedures for registration for sick call, education on dental hygiene, smoking cessation, MRSA prevention, mental healthcare/suicide precautions, access to health care in the community, and the grievance procedures concerning medical care. All such instruction is documented within CorEMR. The medical information and educational packets shall be approved by the responsible physician. All inmates/patients shall have prompt access to necessary medical, dental and psychiatric care provided in a reasonable manner by licensed personnel in accordance with applicable standards. Additionally, initial health consents are signed by the inmate/patient at this time and scanned into their medical record. Specific consents are also completed during incarceration for certain physical health, dental care, and mental health services as required by Federal and State Law. PrimeCare Medical also has specific policies related to obtaining parental consent for juveniles confined in adult institutions as may be required by law.

INFORMED CONSENT

The informed consent of inmates/patients is necessary for all medical examinations, treatment and procedures except those required by law (i.e., the treatment of infectious diseases when public health law requires such treatment, or in the event of an emergency). Informed consent is the voluntary consent of an inmate/patient to an examination, treatment or procedure after receiving information concerning the material facts regarding the nature, consequences, risks and alternative procedures. In the event a minor is admitted, the consent to medical care must be obtained from a parent, guardian or legal custodian in accordance with state law. Any inmate/patient refusing to consent for medically required treatment shall be required to document their refusal in accordance with NCCHC standards and Putnam County Correctional Facility' policy.

RECEIVING SCREENING

PrimeCare Medical believes that the completion of rapid, effective, comprehensive receiving screenings are paramount to the clinical success of each inmate/patient entering a correctional

institution. Many of our inmates/patients have potentially serious, and many times untreated, health conditions; which if gone untreated, can result in serious medical and/or mental health concerns. The receiving screening also allows our medical staff the opportunity to not only assess the newly committed inmate/patient for injuries, illness or mental health related disorders, but the opportunity to provide education regarding future access to care, even in the community.

Each of the newly received inmates/patients, to include those inmates/patients being transferred from other correctional facilities, will receive a thorough receiving screening immediately upon arrival to the Putnam County Correctional Facility, which shall include obtaining a complete medical, mental health, and dental history and determining the disposition of each newly committed inmate/patient. All inmates/patients who are admitted will also be screened for various infectious diseases. In addition to TST testing, all inmates/patients are screened for diabetes and female patients are screened for pregnancy. Receiving Screenings shall be performed by an appropriately licensed health care professional as permitted by the RFP. In the event that this evaluation identifies any medical conditions that require treatment, an appropriate therapy regimen will be initiated in accordance with accepted protocols.

PrimeCare Medical has developed and implemented specific questions within our receiving screening tools, which dependent upon how an inmate/patient responds, will automatically initiate several critical procedural protocols. These pre-established protocols assist our staffs with safeguarding the inmate/patient and prevent individuals from “*falling through the cracks*”. A few examples of when these pre-programmed safeguards are initiated include detoxification risks, chronic diseases, mental health issues, and PREA related concerns. Additionally, immediate medical referrals shall be arranged to appropriate clinical providers as indicated.

PrimeCare Medical shall also be responsible for medically “clearing” all inmates/patients into the Facility, prior to their formal acceptance and booking by security personnel in accordance with applicable policy. As such, health care personnel shall ensure that inmates/patients who are unconscious, semiconscious, severely bleeding, mentally unstable, severely intoxicated, in alcohol or drug withdrawal, or otherwise urgently in need of medical attention are immediately referred for care and medical clearance at the local community hospital. In such cases, upon the individual’s return, their admission to the correctional facility shall be predicated upon written medical clearance from the respective emergency room physician.

SUICIDE PREVENTION AND AWARENESS

Medical staff will be alert for any symptoms of mental illness during the initial Receiving Screening process, as well as, during all subsequent contacts with the inmate/patient. Medical Staff and Corrections Staff shall be trained by the PrimeCare Medical Psychologist and/or Psychiatrist on what symptoms and issues to look for when screening for mental illness. PrimeCare Medical has worked closely with a National Suicide Prevention Expert, Mr. Lindsay Hayes, M.S., to further develop and enhance its Suicide Prevention Program(s). Mr. Hayes has attended PrimeCare Medical’s Health Services Administrators’ Annual Training Seminars, where he presented an in depth training on updates to suicide prevention policy and protocols. Mr. Hayes has also visited several of PrimeCare Medical’s contracted facilities to make certain

all suicide prevention policies remain on the forefront of recognition by our health care and mental health staffs. One example of this collaborate approach is our usage of the New York Model Screening Tool, which is used to screen all new commitments to the Facility. The system utilizes a scoring system on individual questions; when a specific score (8) is reached, the inmate/patient is placed on suicide precautions and referred to Mental Health staff.

Appropriately trained staff completes the suicide prevention screen questionnaire on all new commitments. Those who score eight or more are placed on suicidal observation and referred to mental health staff. Once the referral is received, mental health staff is tasked to evaluate the inmate/patient as soon as possible. Mental health staff will then conduct an assessment to determine the inmate's/patient's risk for suicide or self-harm and determine the appropriate level of suicide precautions based upon the assessment.

As part of the suicide risk assessment, PrimeCare Medical utilizes the Columbia Suicide Severity Risk Scale (C-SRS). The C-SRSS is used extensively in primary care, clinical practice and institutional settings. It is recommended by the U.S. Food and Drug Administration, World Health Organization, Joint Commission Accreditation of Healthcare (JCACHO), and the National Institute of Mental Health (NIMH). The C-SSRS is the only screening tool that assesses the full range of evidence-based ideation and behavior items, with criteria for next steps (i.e., referral to mental health professionals); thus, the C-SSRS can be exceptionally useful in initial screenings.

PrimeCare Medical has also developed a rating system to classify inmates/patients and their relative mental health needs - the Mental Health Stability Rating Scale (MHSR). The MHSR is a 4-point scale (i.e., A, B, C, D) developed to identify and track patients who receive mental health treatment services. The scale was derived from the Pennsylvania Department of Corrections and has been modified for use at all PrimeCare Medical locations. It also informs medical personnel that the inmate/patient has a history of, or is currently, receiving mental health services at the facility. The rating scales are as follows:

- A – No Mental Health and/or Intellectual Disabilities (MH/ID) classification made. The patient has no identified MH/ID needs and/or history of psychiatric treatment for the past five (5) years.
- B – The patient is placed on the inactive MH/ID roster. This rating scale will include patients who have a history of treatment at the facility and no longer require mental health services.
- C – The patient is placed on the active MH/ID roster. This category is for any patient who is currently active in treatment with the mental health department and includes patients who are utilizing medication management services and/or have a history of suicide attempts/psychiatric hospitalizations in the past two (2) years.
- D – The patient is placed on the active MH/ID roster has been diagnosed with a Serious Mental Illness (SMI) and/or exhibits significant adjustment/behavioral concerns. SMI

diagnoses include Schizophrenia, Schizoaffective Disorder, Major Depressive Disorder, Bipolar Disorder, Unspecified Psychotic Disorder and Borderline Personality Disorder in addition to a significant treatment history in the community. Additionally, patients who are non-compliant with medications for a period of seven (7) days and who have a history of institutional misconducts will be placed on this scale.

The MHSR also determines the level of treatment a patient is to receive, such as the frequency they are seen by psychiatry and mental health staff, housing assignment, etc.

PrimeCare Medical currently utilizes three levels of suicide precaution; Constant Observation, Level 1 Suicide Watch, and Level 2 Suicide Watch. Only licensed mental health professionals can modify or discontinue suicide watch levels.

- Constant Observation - This level is reserved for the inmate/patient who is actively suicidal, either threatening or engaging in self-injurious behavior and would be considered an extreme risk for suicide or serious self-injury. Facility staff shall observe such an inmate/patient on a continuous uninterrupted basis and have a clear unobstructed view of the inmate/patient at all times. Observations shall be documented at ten-minute intervals.
- LEVEL I – Suicide Watch - This level is for inmates/patients who are not actively suicidal but a) express suicidal ideation and have a plan to commit suicide, b) have recently (within 60 days) attempted suicide, c) engaged in serious self-injurious behavior, or d) demonstrates other concerning behavior (through actions, current circumstances or recent history) indicating the potential for self-injury. This level of watch is for actively suicidal individuals, those either threatening or engaging in self-injurious behavior. These inmates/patients would be considered medium to high risk for suicide. This level may be utilized whenever staff (i.e., nursing, custody staff) believes an inmate/patient is at moderate to high risk for suicidal behavior, pending an evaluation by a licensed mental health professional.
- LEVEL II – Suicide Watch - This level is the default level for an inmate/patient who has suicidal ideation, but no plan to commit suicide. This level is for inmates/patients who are not actively suicidal, but express suicidal ideation (i.e., a wish to die without a specific threat or plan) and/or has a prior history of self-destructive behavior. This also applies to inmates/patients that deny suicidal ideation, but demonstrates other concerning behavior (through actions, current circumstances, or recent history) indicating the potential for self-injury. This level is also used for inmates/patients that score an eight or higher on the Suicide Screening Form who are not actively suicidal and have had no recent suicide attempts. Note: inmates/patients charged with any sex offense or those that are high-profile should also be placed on this watch level (unless they meet criteria for Level I) even if they do not score an eight or higher on the screen. Level II is also used as a step-down from Level I suicide watch.

PrimeCare Medical's mental health staff will participate in the administration of the jail's prevention plan as required. All PrimeCare Medical staff receives training in the identification, assessment, monitoring, and interventions utilized in suicide prevention. Further, it is recommended that facility staffs who have direct contact with inmates/patients also receive training in the identification of inmates/patients at risk for suicide and the related policies and procedures on suicide prevention.

- Identification - The Receiving Screening Form and the Suicide Prevention Screening Guidelines (NY Model) contain observation and interview items related to an inmate's/patient's potential suicide risk. If either PrimeCare Medical or facility staff identify someone who is potentially suicidal, the individual is placed on close observation - suicide precautions and is referred immediately to mental health staff. Further, any staff member who believes an inmate/patient is suicidal should immediately refer them to medical staff for evaluation. In such a circumstance, the inmate/patient should be observed while waiting for evaluation or be placed on constant observation.
- Training - All staff members who work with inmates/patients shall be trained to recognize verbal and behavioral clues that indicate a risk of suicide, and how to respond appropriately. Initial training during employee orientation and at least annual training thereafter will be provided. Training is conducted by an appropriately trained qualified mental health professional such as a psychiatrist, psychologist, or psychiatric nurse practitioner. The training will include avoiding negative attitudes to suicide prevention, research on inmate/patient suicide, why correctional environments are conducive to suicidal behavior, potential predisposing factors to suicide, high-risk suicide periods, warning signs and symptoms, identifying suicidal inmates/patients despite denial of risk, the agency's suicide prevention policy, the use of the Suicide Prevention Screening Guidelines – NY Model, and associated liability issues.
- Assessment – A suicide risk assessment will be conducted by a licensed mental health professional on each inmate/patient that a) screens positive for suicide risk based on the Suicide Prevention Screening Guidelines and/or other critical risk indicators, b) is placed on suicide watch by other staff, or c) screens positive for mental illness. The assessment is conducted in a private setting, not by the cell door, in the dayroom, or other non-private locations. The licensed mental health professional will designate the individual's level of suicide risk and level of supervision needed. This may include making a recommendation to petition the court for an involuntary commitment to a state forensic hospital.
 - The suicide risk assessments will include a description of the current behavior(s) and justification for a particular level of observation and/or discharge from suicide precautions. The assessment must include a mental status examination, a listing of both historic and current risk factors, a listing of protective factors, the determined level of suicide risk (i.e. low, medium, high), and a treatment plan.

- Inmates/Patients on suicide watch or identified as at risk of suicide will be evaluated daily by mental health staff to monitor and document changes in suicidal ideation, mood, affect, cognition, behavior, stressors, etc. that affect relative risk for suicidal behavior. Only licensed mental health professionals can modify or discontinue suicide watch levels. There will be written justification for each decision documented in the medical chart.
 - Individual treatment plans are developed for all inmates/patients held on suicide precautions for more than 24 hours, on the business day following the initiation of suicide precautions. The plans describe signs, symptoms, and the circumstances in which the risk for suicide is likely to recur, how recurrence of suicidal thoughts are avoided or managed, and actions the inmate/patient or staff can take if suicidal thoughts do occur.
 - Treatment plans include the provision of follow up evaluations for detainees once they are cleared from suicide precautions. Typically these are within the first 24 hours, then the following 72 hours, the next week, and then periodically (i.e., 30 day, 60 day, 90 day intervals) until the inmate/patient is released from custody.
- Monitoring/Housing – An inmate/patient identified as being at risk for suicide is placed on constant observation until evaluated by a licensed mental health professional. Inmates/Patients who are identified as being at risk for suicide are placed in an area where regularly scheduled observations are made and those observations documented. If possible, an inmate/patient on suicide watch will not be placed in isolation (or single celled), they should be housed with another inmate/patient or in dormitory style housing and checked on an irregular schedule not to exceed 15 minutes. The cell is to be as suicide proof as possible (without protrusions of any kind that would enable a hanging). If the potentially suicidal inmate/patient is deemed to be at high risk, constant observation will occur. Use of other inmates/patients for monitoring will not be permitted.
- All inmates/patients on suicide precautions should be allowed all routine privileges (i.e., visitation, telephone calls, out-of-cell time unless it is contraindicated with written justification in the medical chart by a licensed mental health professional (except in cases where the inmate/patient has lost privileges as the result of a disciplinary sanctions)).
- Referral – PrimeCare Medical staff or facility staff can refer inmates/patients they believe may be suicidal to mental health care providers for evaluation.
- Communication - Communication between PrimeCare Medical health care and facility personnel regarding the status of the inmate/patient will provide clear and up-to-date information. Communication between transferring authorities (i.e., county facility, medical/psychiatric facility) and facility personnel will be in written format. At

minimum, a Doctor's Order to the Jailer (DOJ) will be issued documenting all changes in suicide precautions, suicide watch levels, observation, and housing.

- Intervention – All staff that comes into contact with inmates/patients will be trained in first aid and cardiopulmonary resuscitation (CPR). Any staff member who discovers an inmate/patient attempting suicide shall respond immediately; survey the scene to ensure the emergency is genuine, alert other staff to the emergency, call for medical personnel and begin standard first aid and/or CPR. Staff will never presume that the inmate/patient is dead, but rather initiate life saving measures until relieved by medical personnel. Housing units should have appropriate emergency equipment including first aid kits, rescue tools, and ready access to an automatic external defibrillator (AED) as well as be trained in its use.
- Notification and Reporting - Procedures are in place stating when facility administrators, outside authorities, and family members are notified of attempted or completed suicides. All designated correctional officials will be notified through the chain of command. All staff that came into contact with the victim prior to the incident will be required to submit a statement as to their knowledge of the inmate/patient and the incident. PrimeCare Medical has its own notification procedures that include notification of corporate personnel.
- Review - There are procedures for medical and administrative review if a suicide or a serious suicide attempt occurs. Mortality reviews are required to be completed within thirty (30) days of a completed suicide. As part the mortality review for a completed suicide a psychological review of records is conducted and its findings included in the mortality review.

In addition to the suicide prevention screening, all inmates/patients are screened for potential untreated depression. These depression scales are gender based and if found to be positive, pre-established protocols shall be initiated which assist with the immediate scheduling of referrals to mental health staff and placement recommendations.

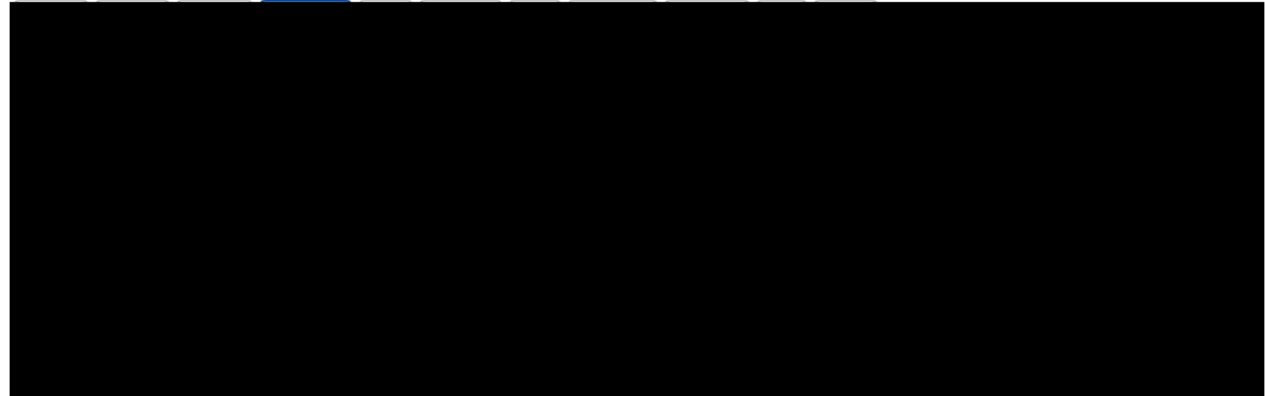
Inmates/Patients processed into the Facility with significant mental health histories and/or currently taking daily prescribed psychotropic medications and/or exhibiting signs of mental illness are immediately referred to mental health staff for evaluation. In addition, mental health records are immediately requested and prescription drug orders are verified through the inmate's/patient's physician or pharmacy. Referrals are also made through appropriate Facility staff such as Administrators, Counselors, Officers, Work Supervisors, and Medical Staff. Annual Suicide Prevention / Awareness Training will be provided by PrimeCare Medical in coordination with the Facility Administration. Education related to access to mental health services, suicide prevention and what to do if a fellow inmate/patient is discussing suicidal thoughts is also shared with all new inmate/patient commitments.

DETOXIFICATION

All inmates/patients incarcerated at the Putnam County Correctional Facility will be screened and evaluated as part of the Receiving Screening process for the use of both prescribed and illegally obtained medications, heroin, methadone, benzodiazepines, synthetic designer drugs, and alcohol. This screening process utilizes questions which are based on substance type, amount and usage patterns. PrimeCare Medical's detoxification protocols go above and beyond the nationally accepted treatment guidelines. A more proactive versus a reactive approach is taken immediately and throughout the process to prevent adverse symptoms from occurring by early education, identification and medication management prescribed by our provider teams. National standards tend to take a "wait, assess and see" approach and only treat based on active symptomology. Similar to Dr. Wilcox and his established WOWS protocol, PrimeCare Medical has chosen to follow protocols that do not wait for a patient to show signs of withdrawal before developing a treatment regimen to assist the inmate/patient undergoing the withdrawal process. Our corporate philosophy believes inmates/patients who are at risk of withdrawal are at very high risk of potential medical and psychological complications. Many of our inmates/patients enter our facilities with multiple diagnosed and many undiagnosed, untreated or undertreated conditions. When subjected to the effects of withdrawal, PrimeCare Medical will not take a "wait and see" approach. Nationally recognized scoring tools such as COWS are based on scores with severity of withdrawal symptoms. Like Wilcox, PrimeCare Medical evaluates and treats our inmates/patients with subjective and objective clinical data. Further, our providers assess our patients based on clinical presentation, which includes various medications to prevent adverse patient outcomes.

Many times, staff is faced with making an independent decision as to whether they should contact a provider for detoxification orders. Our system of questions will automatically implement a warning message to our staff indicating a high degree of risk for withdrawal, based upon the inmate's/patient's responses. This process not only warns our staff of the potential for detoxification, but also refers the inmate/patient to a medical provider for an immediate evaluation. Orders prescribed by the medical providers are based on withdrawal type, known medical conditions, patient's BMI, etc. Orders are given as clinically indicated with various med-sets being available to the prescribing provider. Examples of available "detoxification med-sets", which typically have tapers pre-programmed that can be modified by the prescribing provide, include: Clonidine taper, Vistaril taper, Imodium, Phenergan, Ibuprofen, Klonopin taper, Tylenol #3 taper, Zofran, Librium taper, Methadone, Suboxone, Subutex, etc. Once these individuals are triggered to have our detoxification protocols initiated, specific patient education is provided pertaining to the signs and symptoms of withdrawal, as well as, the effects of long term substance abuse. PrimeCare Medical's protocols will also initiate follow-up checks to be

completed by medical and mental health providers, as well as nursing staff. Throughout the inmate's/patient's withdrawal process, health care staffs are tasked and educated to collect specific subjective and objective withdraw data (see example below). Additionally, PrimeCare Medical has developed specific protocols detailing when health staff must contact providers for orders related to abnormal vital signs or abnormal detoxification warning signs.



PrimeCare Medical will utilize the entire medical staff to provide ambulatory detoxification utilizing appropriate medications via prescriptions issued by the Physician/Physician Assistant/Nurse Practitioner in accordance with established protocols as approved for use at the Facility. When an inmate/patient has been identified as being at high risk for withdrawal, regardless of the substance, our staff is automatically tasked to closely monitor the inmate/patient. This process will place the inmate/patient on a higher level watch for withdrawal signs and symptoms. In such cases, the inmate/patient will receive assessments and evaluations by both nursing staff and providers, with parameters that will provide safety for the inmate/patient. Our protocols include certain medications which will prevent / assist with alleviating the signs and symptoms of withdrawal. Proper documentation and multiple daily interventions with medical staff will be performed and recorded by the PrimeCare Medical team.

PrimeCare Medical currently offers varying degrees of detoxification programs throughout the Corporation. In some jurisdictions, coordination with community Methadone programs have been established to maintain the community Methadone program inmates/patients while incarcerated. This unique program has proven to decrease recidivism rates in the jurisdictions where established. If requested, PrimeCare Medical can bring our community partners to the Putnam County Correctional Facility to assist with the establishment of this program. Methadone maintenance for inmates/patients shall be provided as clinically indicated and as ordered by an appropriately licensed and credentialed physician. This program shall be contingent upon Federal and State regulations. All opiate addicted pregnant females shall be rapidly placed in a community based Methadone program to prevent Fetal Abstinence Syndrome. In all jurisdictions, PrimeCare Medical has collaborated with the Community Methadone programs to provide our pregnant female population with Methadone within the institution. This program has saved our contracted institutions significant transportation expenses since the female is no longer transported daily to the local community program location. Specifically, if a pregnant patient enters the facility on methadone, they are scheduled

with the Methadone Clinic to continue such treatment. A bridge opiate plan (utilizing methadone), as recognized by NCCHC, indicates bridge orders are permitted to prevent potential harm to the patient and/or fetus. In the event such a female inmate/patient is not an established patient of a methadone program, PrimeCare Medical will contact an “X Waivered” provider to evaluate and initiate Subutex if clinically indicated. PrimeCare Medical currently employs multiple providers who are able to prescribe Subutex to prevent withdrawal for this patient group.

Most recently, with the explosive opiate (heroin and other opiate based pain medications) abuse epidemic earning national headlines, PrimeCare Medical has invested countless hours and company resources in ensuring our policies and protocols pertaining to the treatment of these individuals remain consistent with all applicable Federal and State guidelines. As such, PrimeCare Medical has begun implementing three (3) new programs within our correctional facilities to further assist in the prevention of these negative patient outcomes, as further detailed below.

The inherent danger in treating these individuals occurs with the immense risk of potential overdose, as well as, the significant health risks associated with their withdrawal; one of the main concerns within regional and county jails being inmates who are released from custody and overdosing once they return to the streets. In some of our contracted facilities, we have worked with the respective facility administrators to develop protocols for actually providing Nasal Narcan to designated individuals upon their discharge from the facility in an attempt to prevent such overdosing from occurring. PrimeCare Medical has actually maintained an emergency stock supply of Narcan within our emergency medication boxes at all of our contracted facilities for the past two decades. As such, PrimeCare Medical has developed specific training for the administration of both Nasal Narcan and intravenous / intramuscular injected Narcan, which has been shared with all of our health care staff. This training can also be made available to designated correctional staff for use of Nasal Narcan in the event of an emergency situation. In one of our facilities, all community corrections staff have already received this training.

Additionally, for approximately the past one and a half years, PrimeCare Medical has partnered with Alkermes, the manufacturer of Vivitrol, to assist our clients with the implementation of Vivitrol programs upon an inmate’s/patient’s discharge from our institutions. Through this partnership with Alkermes, they have agreed to provide the initial dosing of Vivitrol to qualified inmates/patients free of charge.

In an effort to diminish the rise in the number of individuals becoming addicted to prescribed opiate based medications, the CDC released guidelines for treating patients who are in need of such pain medications. These guidelines were developed by the CDC’s experts to provide an additional resource for the respective treating prescribers; the goal being to decrease the risk of new patients seeking other opiates (such as heroin) once they are no longer prescribed their opiate based pain medications. PrimeCare Medical has since shared these guidelines with all of our contracted facilities and health care professionals, encouraging them to follow the guidelines when rendering care to our incarcerated patients.

PrimeCare Medical is pursuing each of these efforts in our attempts to remain on the forefront of this initiative and in the prevention of potential negative patient outcomes.

INTAKE HISTORY AND PHYSICAL EXAMINATIONS

Within ten (10) to fourteen (14) days of arrival, PrimeCare Medical will perform a comprehensive health assessment (physical) on all inmates/patients in accordance with applicable standards. During this visit, the inmate's/patient's vital signs and weight will be re-assessed, as well as, their medical, surgical and mental health history. PrimeCare Medical also requires several other screenings / testings be completed at this time, such as blood glucose testing on all inmates/patients to identify any undiagnosed diabetic conditions. The health assessment will be conducted by the PrimeCare Medical Physician/Physician Assistant/Nurse Practitioner or Registered Nurse, as permitted by jurisdiction and the RFP. If completed by a registered nurse or mid-level practitioner, the physician shall review, initial and date the health assessment. In the event that this evaluation identifies any medical conditions that require treatment, an appropriate therapy regimen will be initiated in accordance with accepted protocols. Any inmate/patient identified as having a chronic care condition will be immediately referred to the appropriate specialty chronic care clinic. All identified infectious diseases shall be reported to the Public Health Authority in accordance with State and Federal requirements.

Additionally, annual health and mental health assessments shall be conducted on all inmates/patients being incarcerated for a period of one (1) year or greater in accordance with applicable standards. The annual health assessment shall also include testing for tuberculosis and an annual dental examination completed by the contracted dentist.

NURSING SERVICES

Nursing services shall be provided to the Putnam County Correctional Facility as detailed within the enclosed proposed staffing matrix and shall include completing all tasks as outlined within this Proposal as permitted by licensure. Responsibilities of the nursing staff shall include, but are not limited to conducting daily nursing sick call (as permitted by the RFP), dispensing medications as ordered by appropriate providers, completing initial receiving screenings, and completing other nursing tasks as directed by the provider staff.

All completed nursing protocol forms are sent to the on-site Medical Director's electronic medical record queue for review and signature. Issues that may be identified are directly addressed with the appropriate staff member. Nursing protocols are reviewed annually by the Statewide and on-site Medical Directors. They are also reviewed by the Vice-President, Regional Managers and on-site Health Services Administrators.

Nurses are clinically supervised by the on-site Health Services Administrator and Medical Director. The Health Services Administrator completes monthly CQI audits that directly monitor nursing care at the Facility. Issues related to nursing care are addressed at the monthly staff meeting and on an individual basis if necessary.

DAILY SICK CALL / DISPENSARY OPERATION

Sick call is the system through which each inmate/patient reports for and receives appropriate medical services for non-emergent illness or injury. PrimeCare Medical has established sick call protocols which are system based and have set areas of assessments which should occur based on the inmate/patient concern. The Sick Call Protocols are reviewed on an annual basis and are limited within the scope of the practice per state licensure regulations. Per policy, annual training shall occur, conducted by the facility Medical Director, which reviews these protocols and assessment techniques. When an inmate/patient who desires to be evaluated for a medical condition or concern, they will have the opportunity to register via a sick call request slip (Electronic if so equipped) on a daily basis, which shall be reviewed that day by the health authority or other person designated by the responsible physician. When the sick call requests are received in the Medical Department, the following process will occur:

- In accordance with established nursing protocols, an appropriately licensed nurse will conduct a screening / triage of all sick calls received seven (7) days per week (shall occur within 24 hours of receipt). Actual sick call clinics shall occur within 48 hours of submission of the sick call request, or sooner as may be required by the RFP. All such forms shall be reviewed, signed, dated, and timed by PrimeCare Medical.
- Based on the results of this screening, the nurse will administer appropriate treatment in accordance with treatment protocols and make appropriate referrals to a Provider Clinic.
- The Physician's Clinic/Physician Assistant Clinic/Nurse Practitioner Clinic shall be conducted in the Medical Department on daily basis consistent with the staffing plan contained within this Proposal, or at other designated locations as required by the Putnam County Correctional Facility.
- Upon completion of the physician's clinic, each inmate/patient will have an appropriate notation made within their electronic record. Any necessary additional laboratory testing or treatments will be ordered at that time. All of the laboratory, x-ray, and medical tests performed will be reviewed by the on-site Medical Director/Physician Assistant/Nurse Practitioner and recommendations for additional medical tests or treatments will be made.

Sick call shall be conducted within the parameters of applicable standards. During normal operations, sick call will be conducted in the designated medical unit for general population inmates/patients. Offenders housed in segregated units may be handled within their unit or at specified times in the medical unit. Regardless of whether a segregated inmate/patient requests medical service, nursing rounds shall still occur within the segregation units, to include assessments and appropriate follow-up care. Additionally, mental health staff shall conduct rounds within these units in accordance with NCCHC Standards. All such segregation round encounters are documented within the respective inmate/patient medical records. Co-Payment procedures shall be carried out in accordance with Putnam County Correctional Facility policy, if applicable. The Putnam County Correctional Facility will coordinate a sick call schedule with

PrimeCare Medical. Although this schedule will be given priority, the security needs of the Facility shall prevail.

PHYSICIAN / PHYSICIAN ASSISTANT / NURSE PRACTITIONER SERVICES

PrimeCare Medical shall designate a responsible physician to approve health care policies, procedures and agreements which may include the use of emergency rooms in local hospitals. A properly licensed local Physician, Physician Assistant and/or Nurse Practitioner will conduct providers' clinic at the Putnam County Correctional Facility, as detailed within the enclosed Staffing Plan. Physician's coverage will include on-call availability twenty-four (24) hours a day, seven (7) days a week for emergency situations. They shall be further supported by Carl A. Hoffman Jr., D.O., D.Sc., CCHP, Corporate Medical Director; Victoria Gessner, M.D., Assistant Corporate Medical Director; and various other members of the Utilization Review Committee.

Duties of the Physician / Physician Assistant / Nurse Practitioner shall include the following:

- Conducting inmate/patient physician's clinic at the Facility on days and at times scheduled in conjunction with the Facility.
- Examining, diagnosing, and treating inmates/patients referred to the respective provider.
- Reviewing all laboratory, X-ray, and other ancillary reports and documenting the review in the medical record.
- Examining and rendering initial emergency medical treatment of persons who are injured or who become ill while on the premises. These persons (other than inmates/patients) shall be stabilized and referred to their physician for any necessary follow-up care.
- Performing annual and/or employment physical examinations for the Facility, where contractually applicable.
- Providing minor surgical treatment at the institution as deemed medically appropriate, to include suturing for minor lacerations.
- Conducting intake and annual physical examinations of inmates/patients.
- Evaluating food handler candidates, inmate workers, trustees, work release inmates/patients, etc. prior to assignment and periodically thereafter to ensure compliance with all health regulations.
- Constantly evaluating the need for non-emergency referrals to medical specialists or outside hospitals as needed for diagnosis or treatment of those inmates/patients with health care problems which may extend beyond the scope of services provided on-site.
- Documenting all health care contacts in the inmate's/patient's health care record.

- Participating in quality assurance programs, which include, but are not limited to, peer audit and medical chart review procedures.
- Provide for daily reports including condition, diagnosis, treatment plan, medications, prognosis, and discharge planning and clinical status / progress on all hospitalized inmates/patients.
- Be knowledgeable in the treatment of HIV infection, Tuberculosis, Hepatitis and other communicable diseases, and shall remain current in the treatment of these diseases.
- Physicians' lines shall not be concluded until all inmates/patients scheduled have been assessed.

PrimeCare Medical staff will adhere to accepted medical practice in evaluating and monitoring the medical status of each inmate/patient to ensure that all necessary supporting diagnostic examinations are provided as needed. All health problems identified will be managed through appropriate follow-up. All supporting diagnostic/follow-up coordination needs will be managed by the PrimeCare Medical Health Services Administrator and on-site Medical Director. The provider shall review and sign all diagnostic test results and off-site treatment records during their next scheduled visit to the Facility. The physician shall also be responsible for adherence to PrimeCare Medical's policy on the use of clinically ordered therapeutic restraints and therapeutic seclusion, which is based upon NCCHC Standards.

To assist in reducing the frequency of unnecessary transports to local hospitals outside of PrimeCare Medical professional staffs' typical working hours, we have developed systems to provide our clinicians with financial incentives to return to the institution(s) to render care for certain health related concerns. On average, PrimeCare Medical will compensate our providers between \$200 - \$500 per instance, dependent upon the provider's licensure and specific clinical situation. Such health related situations include, but are not limited to, clinical assessments, suturing, etc. Presently, this practice has been instituted in various contracted facilities, which has proven to be very effective in reducing many off-site transports; thus, resulting in reduced officer overtime and other unnecessary expenses.

PrimeCare Medical also intends to work with various local residency programs and OB/GYN groups in the local community in an effort to identify qualified, appropriately trained providers to assist with providing additional coverage that may be needed at the Putnam County Correctional Facility.

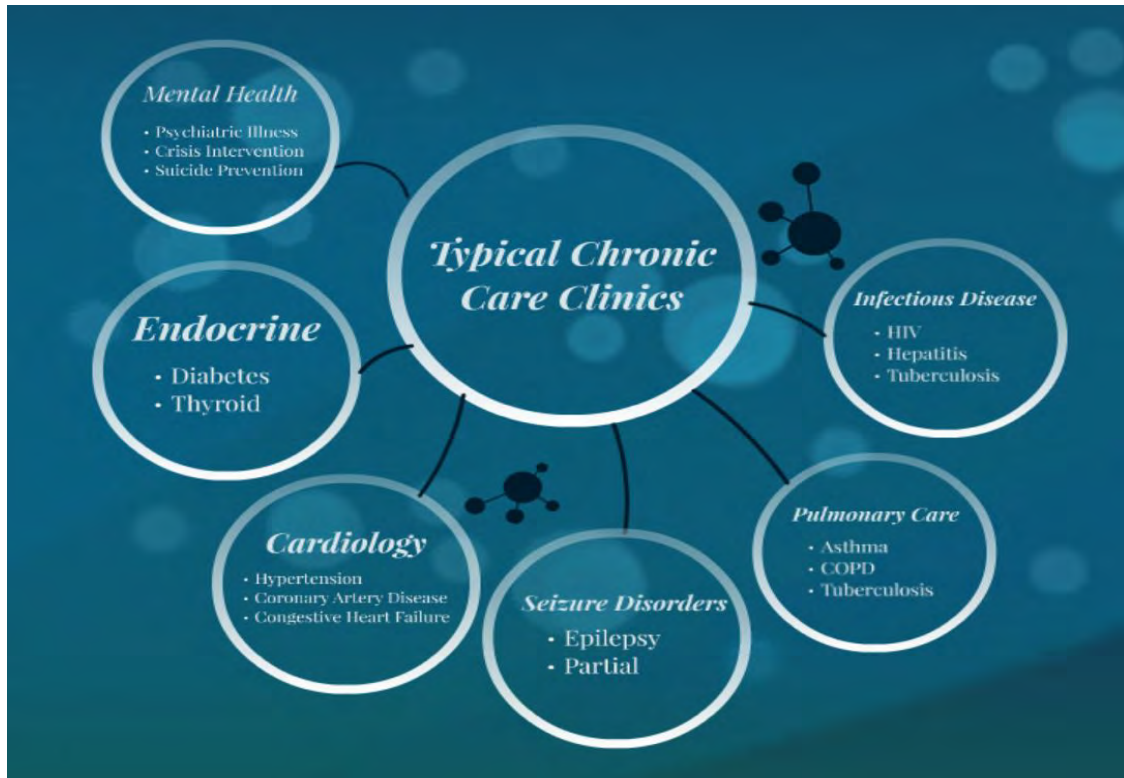
SPECIALTY CLINICS AND CHRONIC CONDITIONS

NCCHC Standards relating to Special Needs Treatment Plans require close monitoring of inmates/patients with special needs (i.e., chronically ill, communicable disease, physically handicapped, disabled, frail elderly, terminally ill, special mental health needs, inmates/patients in a diagnostic or therapeutic "Pipeline" and the developmentally disabled). PrimeCare Medical places a major emphasis on chronic care at all of its sites.

PrimeCare Medical will provide the services of specialists needed for comprehensive medical services for inmates/patients at the Putnam County Correctional Facility through the contract hospital, local managed care network and/or the local medical community. During the initial Receiving Screening process, all inmates/patients are asked questions related to chronic health conditions. If inmates/patients answer in the positive that they have a chronic condition, automatically, the respective inmates/patients receive a referral for a rapid assessment during the next scheduled provider line. During this chronic care assessment, the inmate/patient is ordered all necessary diagnostic testing and a review of medications shall occur. By rapidly assessing and providing unfettered access to health care services, we have noted a dramatic reduction in hospitalizations related to untreated or delayed care for our sickest and highest risk populations. During this visit, the medical provider will also schedule future appointments.

During the Health Assessment and on a continuous basis, inmate/patients who are chronically ill are identified and tracked to ensure that they are seen every thirty (30) to ninety (90) days, or less depending on the severity of their illness, to monitor the chronic condition by the physician, physician assistant, or certified nurse practitioner. The physician shall be required to complete a review of these individuals at a minimum of every three (3) months. Additionally, the physician shall review the care and treatment plans for each of these inmates/patients. A specialized treatment plan will be developed for each inmate/patient requiring such on-going therapeutic care through a multidisciplinary team of health care professionals. When seen, preventative medical maintenance shall be provided and shall include health education and medical services, such as inoculation and immunization in order to take measures in advance of the onset of illness and to provide instruction in the self-care of chronic conditions. Treatment plans shall include a written statement which specifies the particular course of therapy and the roles of medical and non-medical personnel in carrying out the course of therapy, to include specific instructions regarding diet, exercise, medication, type and frequency of diagnostic testing, the frequency of medical follow-up, and adjustment of treatment modality. Such plans shall be individualized and based on an assessment of the inmate's/patient's needs, short and long term goals, and the methods by which these goals shall be pursued.

PrimeCare Medical shall utilize aggressive case management for all inmates/patients identified as being at risk for exacerbation of their chronic illnesses related to being incarcerated. It is PrimeCare Medical's belief that through aggressive case management, the health needs of the Facility's high health risk population will be managed in the most efficient and cost-effective manner possible; thus resulting in the most favorable inmate/patient health outcomes. Some of the Chronic Care Clinics which are regularly conducted include the following:



INFECTIOUS DISEASE

PrimeCare Medical will manage all infectious disease cases identified at the Putnam County Correctional Facility as clinically indicated. Guidelines and educational procedures will be such that proper diagnosis, screening, and treatment of these special inmates/patients will be performed by PrimeCare Medical staff in a timely fashion. HIV testing shall be completed at the request of the inmate/patient. PrimeCare Medical will strictly adhere to state confidentiality laws. PrimeCare Medical has successfully managed and implemented many programs to protect and prevent the transmission of various infectious disease processes within our institutions. Types of these programs include the successful prevention of Tuberculosis, Multidrug Resistant Tuberculosis, MRSA, Influenza, varicella infections, etc. We believe education is paramount to the successful prevention of many infectious disease processes. Through our aggressive management and rapid detection, we have successfully mitigated and prevented the possible spread of illness throughout our institutions. PrimeCare Medical collaborates and coordinates our infection control measures with community, State and Federal public health departments.

The PrimeCare Medical Facility and Statewide Medical Directors will utilize the services of various infectious disease consultants, on acute infectious disease issues, including treatment regimens and medication recommendations. Inmate/Patient management shall be provided only through one or more Board Certified Infectious Disease Specialist(s) or, at a minimum, be supervised by a Board Certified Infectious Disease Specialist(s). Proper and appropriate documentation of services and record keeping shall be maintained, including written recommendations to the Corporate Utilization Review Committee on necessary formulary

additions with updates as required by advancing pharmacology. If any significant revisions are made to the current treatment regimens for infectious diseases, the costs of such additional treatments shall be separately negotiated between PrimeCare Medical and the Putnam County Correctional Facility.

Additionally, PrimeCare Medical shall evaluate and clear all inmates/patients requesting to work in the food service areas / kitchen, to ensure they are free of contagious diseases. Additional diagnostic testing shall be completed as required by the Facility.

- HIV/AIDS MEDICAL CASES: PrimeCare Medical will manage any AIDS or HIV positive cases identified at the Putnam County Correctional Facility. Guidelines and educational procedures will be such that proper diagnosis, screening, and treatment of these special inmates/patients will be performed by PrimeCare Medical staff in a timely fashion. Treatment for HIV/AIDS shall include: one-on-one counseling, medication education, medication prescription, monitoring and management, medical treatment, management of medical needs and coordination with community based agencies for care and follow-up upon discharge from the Facility. PrimeCare Medical will work closely with the community HIV Case Management Agency for purposes of continuity of care. State confidentiality laws will be strictly adhered to.
- HEPATITIS MEDICAL CASES: PrimeCare Medical will provide testing for the inmate/patient population pursuant to the requirements of the RFP. In addition to the specialty clinics, immunization and therapeutic treatment regimens will occur in accordance with Putnam County Correctional Facility policy and procedure. The Facility Medical Director, in conjunction with the PrimeCare Medical infectious disease physicians, will evaluate and implement therapeutic treatment regimens for this disease process.
- MRSA/MULTI-DRUG RESISTENT MEDICAL CASES: PrimeCare Medical will manage any positive or suspected MRSA or other drug resistant infections identified at the Putnam County Correctional Facility with community approved clinical treatment regimens. Guidelines and educational procedures will be such that proper surveillance, diagnosis, treatment, prevention and monitoring of these special inmates/patients will be performed by PrimeCare Medical staff in a timely fashion. PrimeCare Medical will provide prevention education for all inmates/patients currently housed within the Putnam County Correctional Facility. Strict screening will occur on intake for any signs or symptoms of CA-MRSA or other multi-drug resistant bacterial infections. All procedures will be completed in accordance with the State Department of Health and the Center for Disease Control guidelines.
- INFULENZA-LIKE-ILLNESS (ILI): PrimeCare Medical will manage any suspected or confirmed ILI cases identified at the Putnam County Correctional Facility. Guidelines and educational procedures will be such that proper surveillance, diagnosis, treatment, prevention and monitoring of these infectious inmates/patients will be performed by PrimeCare Medical staff in a timely fashion. All procedures will be completed in

accordance with the State Department of Health and the Center for Disease Control guidelines. All inmates/patients who are housed and or arriving at the Putnam County Correctional Facility will be screened and receive education on ILI illness. In the event a new strain or a strain with significant virulence occurs, PrimeCare Medical will implement its pandemic plan to assist the Putnam County Correctional Facility with clinical and operational oversight. Our plan focuses on monitoring the State Department of Health and Center for Disease Control sentinel reporting methods, monitoring national and international media outlets, monitoring the Center for Disease Control and the World Health Organization (WHO). Once reported, PrimeCare Medical will increase surveillance efforts to monitor all sites and regions for any unusual activity. PrimeCare Medical will work with the State Department of Health to determine if rapid testing is available. If available, sentinel testing will begin within the Facility. PrimeCare Medical will immediately work with the Putnam County Correctional Facility to implement rapid education, increase surveillance efforts, and will recommend any special housing recommendations. Pertinent information will be shared with all PrimeCare Medical and Putnam County Correctional Facility employees.

SCHEDULING OF OFF-SITE CONSULTATIONS

PrimeCare Medical shall be responsible for administrative efficiency, quality, and cost-effectiveness of any off-site specialty consultation. PrimeCare Medical shall recruit, credential, develop, and contract with a preferred provider network to provide all covered medically necessary services, which cannot be provided on-site to the inmate/patient population of the Facility. PrimeCare Medical shall make all reasonable attempts to develop the preferred provider network within the closest available proximity to the Facility, keeping in mind the additional burden placed on security personnel as a result of these off-site transports. Such outside specialists will be brought on-site to the Putnam County Correctional Facility whenever possible to furnish services. Upon a contract award, PrimeCare Medical fully intends to formalize agreements with all other community specialists / members of the existing preferred provider network and negotiate financial discounts in accordance with applicable state legislation. PrimeCare Medical shall coordinate all off-site medical, mental health, and dental referrals to local community specialists as determined clinically appropriate by the respective on-site physician. All scheduling, continuity of care paperwork, and payment coordination shall be the responsibility of PrimeCare Medical.

All off-site referrals will be reviewed and evaluated for clinical appropriateness by the Statewide Medical Director and the Corporate Utilization Review Committee and shall be coordinated with Facility Administration. A Request for Consultation review form will be completed and sent with the inmate/patient to the respective community provider's office. PrimeCare Medical shall endeavor to consolidate the scheduling of appointments and services for inmates/patients with community physicians, hospitals, and other health care providers. PrimeCare Medical shall obtain daily updates on all inmates/patients receiving health care services from any off-site specialty care provider while the inmate/patient is receiving such off-site care. All medical documentation / findings received from the local provider's office shall be reviewed by the physician / physician's assistant / certified registered nurse practitioner in accordance with

applicable standards and placed in the inmate's/patient's medical record with appropriate orders for any new treatment and/or medication required. Any non-routine follow-up care that is recommended by the preferred provider's office shall be communicated directly with the Facility Medical Director to determine the most appropriate course of future treatment.

SPECIAL NEEDS HOUSING / INFIRMARY

The PrimeCare Medical Physician / Physician Assistant / Nurse Practitioner will utilize the infirmary / medical observation unit / special needs housing located in the Facility in lieu of placement in an outside hospital unless it is medically necessary to do so. Placement outside of the infirmary / medical observation unit / special needs housing unit will occur only when the medical condition of the inmate/patient is such that special needs housing is not appropriate because of the resource level demanded for successful treatment of the inmate/patient condition. These units shall be utilized to their fullest extent. Prior to inmates/patients with diagnosed psychiatric or significant medical illnesses are given housing assignments, work assignments, disciplinary measures or transfers, the Prison Facility's administrator and the responsible physician or their designees shall confer to consider any special precautions or preparations. A list of frequent illnesses which require special arrangements shall be developed.

HOSPITALIZATION SERVICES

PrimeCare Medical will provide outside hospitalization at local hospitals for Putnam County Correctional Facility inmates/patients. The Health Services Administrator will coordinate with the security staff for arranging transportation and correctional officer supervision of hospitalized inmates/patients. Same day surgical services will be encouraged and outpatient treatments, radiology, and emergency room care will be coordinated with the appropriate local providers.

PrimeCare Medical shall insure that the medical condition of hospitalized inmates/patients is routinely monitored (daily) to insure that hospitalization is continued only until no longer medically necessary. The daily monitoring of hospitalized inmates/patients, to include anticipated treatment plans and discharge plans, shall be coordinated through the Statewide Medical Director and the Facility's Medical Director. Such daily reporting shall be communicated to the Putnam County Correctional Facility. Hospital utilization managers and discharge planners shall be contacted so that discharges from the hospital are arranged as soon as clinically indicated.

PrimeCare Medical shall maintain documentation of appropriate licensing and accreditation for any hospitals, clinics or laboratories which provide services under this contract. A copy of these certificates will be kept at the Facility, as well as at the PrimeCare Medical Corporate Office. All applicable Federal and State laws regarding patient confidentiality will be strictly adhered to for all inmate/patient hospitalizations.

PrimeCare Medical makes all attempts to aggressively negotiate significant discounted rates through local hospitals and specialty care providers in the community. Significant infrastructure is available within our corporate offices to assist with processing claims received for in-patient

and out-patient care. PrimeCare Medical will seek any and all third party available sources (i.e., private insurance, federal funding, worker's compensation, etc.) to assist with off-setting expenses for out-patient and in-patient care of the inmate/patients of the Putnam County Correctional Facility. Such alternate payment opportunities shall be utilized to their fullest extent. PrimeCare Medical staff shall be responsible for the coordination and enrollment of inmates/patients into any such available programs. Off-site detailed billing summaries shall be provided to the Putnam County Correctional Facility as required by the RFP.

MANAGEMENT OF OFF-SITE CARE AND COST CONTAINMENT

PrimeCare Medical has various systems and protocols in place to effectively manage the inmate's/patient's health needs on-site at the Putnam County Correctional Facility. However, as mentioned above, clinical situations do arise where the need for off-site specialty services and/or hospitalization is required. In such cases, PrimeCare Medical's Utilization Review Committee, RN Case Managers, local Health Services Administrators and Medical Directors work collaboratively together to ensure the need for such service is clinically indicated and that PrimeCare Medical's cost containment protocols are enforced. Federal inmates require specific approvals for such off-site care through the responsible Federal agency.

Typically, when PrimeCare Medical transitions a new medical services contract, we conduct an initial baseline review and analysis of the current facility / medical operations to determine necessary and required operational modifications that we believe will lead to increased efficiencies and cost effectiveness. Based upon these findings, we will strategically and systematically initiate changes which we believe will help us to achieve these goals. Once initiated, we will begin to monitor their effectiveness and continue to make slight modifications to them until the desired outcome is achieved. While many of these operational changes have assisted us in reducing the clients' financial liability, many more significant achievements have been realized which cannot be quantified. PrimeCare not only offers to you, but encourages you to contact any of our existing clients to validate our performance.

Based upon our review of the Putnam County Correctional Facility's RFP and historic utilization statistics, we believe there are several options and efficiencies that we can offer to significantly reduce the number of outside transports. One component of this is through the use of our telemedicine clinics, which is further discussed later in this Proposal. Through the PrimeCare solution, we can offer the Putnam County Correctional Facility with the option of having various different health care specialists evaluate inmates/patients through the use of telemedicine video conferencing equipment, thus eliminating the need for these individuals to be transported off-site. Some examples of such specialists include OB/GYN providers, oral care specialists, and infectious disease physicians. Another component that PrimeCare Medical would suggest to reduce the number of inmate/patient transports would be by reviewing and evaluating the Facility's overall medical operation as it relates to your existing staffing matrix to ultimately make the determination if modifications / adjustments / increases to the staffing plan could lead to increased efficiencies related to the provision of patient care. Based upon your statistics, we believe this could play a critical role in reducing non-emergent after hour transports. PrimeCare Medical has already made similar staffing adjustments within other correctional institutions,

which have yielded invaluable results to both our medical team and the facility correctional staff. For example, in Dauphin County, Pennsylvania, they were experiencing an increase in the number of off-site consultations and in-patient hospitalizations. As a result, PrimeCare Medical successfully recruited for a full-time Infectious Disease / Chronic Care Registered Nurse. Since this position was created, the number of consults and hospitalizations has decreased significantly, saving PrimeCare and the County financially. In Northumberland County, Pennsylvania, they were also experiencing a surprisingly high number of off-site referral requests. Again, following our analysis of their operation, we coordinated for an additional provider clinic one time per week, which almost immediately nearly eliminated the use of off-site consultation requests.

Another critical aspect of this process, specifically relating to cost containment initiatives, is spearheaded by our Corporate Utilization Review Committee. Typically, pharmaceutical expense is the largest variable on-site operating cost in any correctional health care setting. PrimeCare Medical's medication formulary, which is detailed later in this Proposal, is the most significant method by which we adequately and appropriately manage this expense. In the event a health care provider elects to order a non-formulary medication, prior approval must be obtained, pursuant to Company policy, from the Utilization Review Committee. Throughout the years, we have managed to successfully reduce many clients' pharmaceutical budgetary line items significantly through this process. Recently, PrimeCare Medical was awarded a correctional health services contract in Crawford County, Pennsylvania; where in the first year of our contract alone, we were able to reduce the total pharmaceutical expense by over ninety (90%) percent.

With regards to off-site care, this is often times another substantial cost to a County's inmate health care budget. Again, many of PrimeCare Medical's initiatives and cost containment strategies are detailed throughout this proposal, to include utilization review, aggressive case management, negotiating for significantly reduced billable charges through outside agencies, etc. Through these efforts we have managed to significantly limit the financial exposure of our clients as it pertains to off-site consultations and in-patient and out-patient hospitalizations. Three (3) of the most significant accomplishments PrimeCare Medical is extremely proud to say is that we played a critical role in developing and the passing of state legislation in Pennsylvania (Act 22 of 2011), West Virginia (House Bill 2422), and New Hampshire (NH RSA 623-C:1); which regulate what hospitals and off-site specialists can charge for inmate/patient health care services. Each of these pieces of legislation capitate billable charges by these organizations at the Medicaid and Medicare fee structures, thus, resulting in significant savings to the respective clients.

In Chester County, Pennsylvania, the County is responsible for the health needs of a detainee prior to their booking into the correctional facility. Through our aggressive negotiation efforts and network of local community providers, we have managed to save Chester County between \$1.5M to \$2.0M over recent years.

In Dauphin County, Pennsylvania, the County had housed two (2) different hemophiliac patients within the past few years, both of which required extensive in-patient hospitalization. Again, through our ability to negotiate with the respective hospital organizations, we successfully

negotiated the first inmate's charges from \$4.4M to only \$399,000. The second hemophiliac patient incurred hospital charges of over \$7.0M. In this case, we were able to coordinate with the hospital's case management and billing department to have the inmate enrolled in Medicaid, which ultimately made full payment on behalf of the County.

LONG-TERM CARE

PrimeCare Medical recognizes that long-term care may be required at the Putnam County Correctional Facility. As such, we will partner with the Facility to provide for the identification, planning, and care of this critical group of inmates/patients. PrimeCare Medical has proposed adequate staffing for these services and will follow Putnam County Correctional Facility policy and applicable standards on long-term care referrals and procedures. The services PrimeCare Medical will provide include, but are not limited to: skilled care, intermediate care, personal care, assistance with ADL's, and specialty medical care (i.e., ventilator, wound care, dialysis, and extensive rehabilitation).

HOSPICE

PrimeCare Medical will work closely with the Putnam County Correctional Facility to continue to follow the nationally accepted standards set forth by the NCCHC, ACA, National Hospice and Palliative Care Organization, and the National Prison Hospice Association. PrimeCare Medical shall fully cooperate and assist the Putnam County Correctional Facility in the continuation and enhancement of the comprehensive hospice program for inmates/patients with terminal illness.

A terminally ill inmate/patient is defined as one whose physical condition has deteriorated to the extent that the prognosis of life expectancy is less than one (1) year. Early release refers to an inmate/patient being released before expiration of his or her sentence based upon inmate's/patient's terminal condition. PrimeCare Medical is sensitive and understands that some terminally ill inmates/patients will not be permitted to be released from the custody of the Putnam County Correctional Facility under these circumstances. In these cases, we will provide end-of-life care using a holistic approach.

PrimeCare Medical understands the effects that end-of-life care has on an inmate's/patient's physical, psychological, social, and spiritual needs. A hospice program's focus is on symptom and pain management, not in attempting to cure the inmate's/patient's condition. PrimeCare Medical staff will receive training in the basic theories and techniques of hospice care. Hospice Care, according to the National Prison Hospice Association, is an interdisciplinary comfort-oriented care that allows seriously ill and dying patients to die with dignity and humanity with as little pain as possible in an environment where they have mental and spiritual preparation for the natural process of dying. With the increasing "elderly" inmate/patient population in the Putnam County Correctional Facility, PrimeCare Medical is poised to handle the medical needs of these inmates/patients.

As such, PrimeCare Medical proposes to develop this program as a true partnership, through a multidisciplinary team approach with involvement from custody, health care providers and

community resources. This type of team approach will aid and support in the Putnam County Correctional Facility's and PrimeCare Medical's goal of providing a holistic approach to care for inmates/patients requiring the levels of care associated with hospice programs. Hospice care is a concept that necessitates that the health care provider evaluates and considers all aspects of death and dying. Palliative care will be available at the Putnam County Correctional Facility if medically necessary. As noted within our operational plan, PrimeCare Medical will provide a community based palliative care program to include pain management. These programs will be implemented with the primary care site physician and the program managers as the primary focal point. Our goal will be to provide a holistic program and to preserve the dignity of the dying inmate/patient.

PrimeCare Medical will address needs of the inmates/patients according to the current Community Standards. Adequate and appropriate pain management will be provided and documented in the inmate's/patient's medical record. When PrimeCare Medical's Medical Director determines that care in a community setting is medically preferable or transfer to a facility that can offer a higher level of care than can be offered at the Putnam County Correctional Facility, he or she will make a recommendation to the appropriate legal authority for the inmate's/patient's transfer or early release request.

EMERGENCY TRANSPORTATION

PrimeCare Medical will be responsible for ambulance, medic unit ground transportation, and medically equipped aircraft coverage for emergency life threatening medical conditions of inmates/patients through contracts or operating agreements with local ambulance companies. Ambulance services shall be provided in the form of Basic Life Support (BLS) or Advanced Life Support (ALS) through local contract arrangements. PrimeCare Medical will coordinate these services when the situation or condition warrants BLS Transportation. ALS services are requested when medically necessary. The Physician/Physician Assistant/Nurse Practitioner will determine what type of transportation is needed to transport inmates/patients through consultation with facility authorities. The Facility will arrange for transportation of the correctional officers or designee necessary for security coverage of inmates/patients admitted to the hospital. Emergency care will also be extended to all staff, volunteers, visitors, and vendors as needed. Treatment for visitors and staff consisting of stabilization and referral to a personal physician or local hospital shall be provided as required by the Putnam County Correctional Facility.

NON-EMERGENCY TRANSPORTATION

The Putnam County Correctional Facility shall provide and pay for routine non-emergency transportation of inmates/patients, which may become necessary between the facilities and to other medical facilities, as PrimeCare Medical may deem medically necessary and appropriate for the health care of the inmates/patients. All non-emergency transportation of inmates/patients shall be provided by the Facility or designee. The Facility shall also provide and pay for any necessary security transportation in conjunction with inmate/patient trips to such medical facilities.

PrimeCare Medical recognizes that inmates/patients being transported off-site may place the security transportation staff at risk. Our staff will be educated to provide the minimum amount of health information necessary to protect the county transportation staff (i.e., If patient is suspected of having an illness that could expose the transportation staff, our staff will advise the transporting staff what personal protection device they should utilize for the transport).

PREGNANCY, PRENATAL, AND POSTPARTUM CARE

PrimeCare Medical shall be responsible for the health of the pregnant female inmate/patient and the unborn child. PrimeCare Medical will provide timely and appropriate OB/GYN and prenatal care, specialized obstetrical services, and postpartum care as clinically indicated and as required by the RFP. Prior to incarceration, many female patients have maintained unhealthy lifestyles, often times including a history of extensive drug, alcohol, and tobacco use; many also lack proper OB/GYN prenatal care. Therefore, many inmate/patient pregnancies can be classified as high risk. In addition, other factors complicate high-risk pregnancies, such as infectious diseases, poor nutritional status, and mental health concerns. On admission and upon request, female inmates/patients are tested to determine if they are pregnant. If the pregnancy test is found to be positive, formal pregnancy counseling will occur; which includes education on pregnancy options (i.e., delivery, adoption and or termination). In the event complications occur within any pregnancy, PrimeCare Medical shall refer the inmate/patient to the local hospital, or other local specialty care clinic, for urgent care needs. Additionally, PrimeCare Medical has in place policies and procedures regarding care of the pregnant female who report a history of certain drug abuse, detailing how certain medication maintenance to sustain the viability and health of the pregnant female and their unborn child, as discussed in greater detail within our detoxification section of this Proposal. Under such programs, PrimeCare Medical shall be responsible for maintaining and the accounting of all such medications and any licensing or training required for distribution of these medications.

Following the February 2012 American Civil Liberties Union (ACLU) Report, *Reproductive Health Locked Up: An Examination of Pennsylvania Jail Policies.*, the ACLU recognized PrimeCare Medical as having “excellent” protocols and policies relating to inmate/patient pregnancies. The ACLU went on to report that “the policies of jails that use PrimeCare as their medical contractor were more complete than most others in the state. In a sense, PrimeCare is taking the place of laws or regulations that we believe should be coming from the state legislators or the DOC. We applaud your efforts to develop comprehensive policies.” (*American Civil Liberties Union of Pennsylvania [ACLU], 2012*), (*Petratis, 2012*)

MENTAL HEALTH SERVICES

PrimeCare Medical has considerable experience in providing treatment to inmates/patients with mental illness. PrimeCare Medical and its contracted mental health care professionals understand the unique challenges and individual needs of this critical population. Comprehensive Mental Health Services, consistent with all requirements of the RFP, shall be provided by PrimeCare Medical, mental health professionals, such as psychiatrists, mental health specialists, and/or other appropriately trained health care personnel as outlined in the proposed

staffing matrix, which shall meet the minimum staff / credentialing requirements set forth in the RFP.

Nearly all of PrimeCare Medical's correctional health care contracts are comprehensive in scope (i.e., provision of both medical and mental health services), with the only exceptions being a few small county facilities who have separately contracted with local county offices to provide mental health services. As such, PrimeCare Medical has unparalleled experience in providing a comprehensive health care system to the Putnam County Correctional Facility, building upon our thirty-two (32) years of correctional health experience. Consistent with the Facility's goal of improving the integration and communication between medical and mental health care providers, PrimeCare Medical will ensure this is successfully maintained during the life of this medical services contract.

PrimeCare Medical has adopted best practices and evidenced based treatment therapies that are utilized when providing mental health services for inmates/patients. Cognitive Behavioral Therapy (CBT), an evidenced based treatment, is provided in individual and group modalities. CBT has been demonstrated as an effective therapeutic treatment for inmates/patients with depression, anxiety, psychosis, and many other mental illnesses. Staff is also trained to provide Dialectic Behavioral Therapy (DBT), a specific type of CBT, which has been found very effective in treating persons with severe personality disorders where a high degree of emotionality and acting out behaviors are present. Mental health staffs also have expertise in other more specific treatment strategies, such as addressing anger control and anger management, and therapies that improve individuals coping skills, socialization skills, and other behavioral deficits that may be problematic.

Best practices in mental health services are evident in our suicide prevention program, which meets and exceeds the requirements of the NCCHC and has been reviewed and approved by Lindsay Hayes, a nationally recognized expert on suicide prevention in corrections. Another example of best practices is evidenced in our treatment of inmates/patients with serious mental illness (i.e., schizophrenia, major depression, bipolar disorder, and borderline personality disorder). Inmates/Patients with serious mental illness receive psychiatric treatment and are followed by the psychiatrist as often as needed, at minimum once every 90 days, even if stability has been established. Mental health staff also provide follow-up therapy and supportive care as needed. Individual treatment plans are developed and specify the frequency and types of treatment provided by mental health staff (i.e., psychologists, social workers, licensed counselors, and psychiatric nurses).

Mental Health staff shall communicate effectively and work collaboratively with medical staff to review and discuss treatment regimens and medication management for the Facility's mentally ill population. Qualified mental health personnel will initiate voluntary and involuntary mental health commitments as clinically indicated. PrimeCare Medical shall not be responsible for the cost of these proceedings or any mental health treatment at state or community forensic facilities.

PrimeCare Medical understands the unique challenges and needs of mentally ill inmates/patients who enter your institutions with a wide range of mental disorders, intellectual disabilities, and

treatment needs. Therefore, PrimeCare Medical will ensure that this population's physical and mental health care is provided as an integrated system. This will be accomplished as outlined in our Collaboration Plan and Continuous Quality Improvement Program. At the facility level, PrimeCare Medical staff will have weekly team meetings to determine current needs of new and existing mentally ill offenders with special attention to those with serious mental illness. The meeting will also include discussion of sentinel events and related protocols that may need to be changed as a result of the review. A mental health representative shall attend all monthly Continuous Quality Improvement (CQI) meetings. PrimeCare Medical will also conduct CQI audits of psychiatric and mental health processes for both mental health care, as well as, care issues involving coexisting medical and mental health conditions. All audit findings are shared with on-site mental health staff and the corporate medical and mental health management as outlined in the CQI program. Indicators found to be below established thresholds require that corrective action(s) be implemented. These corrective actions are to be monitored and modified as necessary until the system deficiency is corrected.

Health care integration between medical and mental health providers is also realized through the use of our electronic medical record system, CorEMR. This occurs immediately at the time of intake, when the inmate/patient receives a comprehensive health assessment including both the inmate's/patients mental and physical condition. Once an inmate/patient is identified as being in need of mental health services, an immediate referral is generated to a qualified mental health provider via CorEMR. The qualified mental health provider automatically receives the referral and is able to review findings in the medical record immediately to utilize the information while conducting their clinical assessment of the inmate/patient. Once the mental health assessment is completed (which shall be completed on all new intakes – with specific screenings utilized on minors as required by the RFP), the qualified mental health provider can then create follow-up tasks, document relevant information and forward it to medical staff or a specific provider, so that all medical providers are aware of and actively participating in the ongoing care of inmates/patients with mental illness.

As discussed previously, medical staff is trained to be alert for symptoms of mental illness during the Initial Receiving Screening process as well as during all subsequent contact with inmates/patients. Medical Staff and Corrections Staff shall be trained by the Psychologist and/or Psychiatrist on what symptoms and issues to look for when screening for mental illness. The New York Model Suicide Screening Tool will be utilized on all new prison commitments. The system utilizes a weighted scoring system consisting of individual questions addressing suicide risk factors. When the screen cut-off score is reached, the inmate/patient is immediately placed on suicide precautions and referred to Mental Health staff for further evaluation.

Mental health services shall be provided to all inmates/patients under the jurisdiction and control of the Putnam County Correctional Facility. Inmates/Patients processed into the Facility will have a mental health assessment completed by a mental health professional, consistent with all RFP requirements, within fourteen days of admission. Inmates/Patients with high risk indicators will be immediately referred for a comprehensive psychological assessment and evaluation. Examples of high risk indicators may include the following, a) a significant mental health history including psychiatric treatment and hospitalizations, b) a current prescription for psychotropic

medication(s), c) currently exhibiting symptoms of serious mental illness (i.e., psychosis, delusions, agitation, suicidal thoughts). PrimeCare Medical will refer inmates/patients through the electronic medical record system; which provides for immediate referrals and minimizes delays in assessment and treatment. Mental health records are immediately requested and prescription drug orders are verified through the inmate's/patient's prior physician. Referrals are also made through appropriate staff such as Administrators, Counselors, Officers, Work Supervisors, and Medical Staff. Annual Suicide Prevention / Awareness Training will be provided by PrimeCare Medical in coordination with the Facility's Administration and/or Training Officers.

As part of the medical intake process, all inmates/patients are required to sign a general consent to treatment document prior to undergoing any evaluation or assessment and before receiving any treatment including medication. When inmates/patients are seen by psychiatric providers, they must provide informed consent prior to evaluation and treatment. They are informed of the potential risks and benefits of medication and/or psychotherapy and sign consent forms acknowledging this understanding prior to their receiving treatment. Information on medication classes is provided to the inmates/patients at the time that medication is prescribed. All signed consent forms, and copies of information provided are scanned into the inmate's/patient's medical record.

Inmates/Patients should complete a sick call slip to access mental health services. Those in segregation units can also verbally request to be seen by mental health staff by speaking with nursing or mental health staff completing segregation rounds. Security and other facility staff can also refer an inmate/patient to mental health by contacting the medical department. All referrals are input as tasks to the appropriate mental health staff to be seen depending on the nature and purpose of the referral. Once 'tasked' to mental health, the referrals will be completed within 24 hours, contingent upon approved contractual staffing plans. Medical staff will also accept referrals from family members.

Inmates/Patients will be medically cleared as soon as is clinically appropriate to permit transfer to a mental health or special needs unit. Suicide prevention and reduction of self-injurious behavior are met through the Collaboration Plan, Continuous Quality Improvement (CQI) program and orientation/training curriculum. Medical care in mental health units, psychiatric observation cells and special needs units will be managed daily via rounds and referral mechanism and weekly via on-site treatment teams.

Mental health staff shall respond to inmates/patients experiencing psychiatric emergencies, including suicidal behavior, immediately. A psychiatric provider will be contacted when an inmate/patient is experiencing a psychiatric emergency. If present in the facility, mental health staff will evaluate the inmate/patient immediately. If no mental health staff is on site at that time, the on-call psychiatric provider will be called by medical staff for orders. Please refer to the Suicide Prevention Screening Guidelines discussed earlier in this proposal.

Forced psychotropic medication will only be utilized in accordance with State law, Facility Policy Directive, PrimeCare Medical policy, and within the scope of professional practice.

PrimeCare Medical mental health staff shall arrange for the transfer of mentally ill inmates/patients to an appropriate psychiatric facility based on the current established criteria. Mental health staff will work with the Putnam County Correctional Facility to complete the admission process within established requirements for such admissions, to include psychiatric evaluations, clinical assessments, and required documentation. Further, as required by the RFP, PrimeCare Medical acknowledges that we may be required to perform forensic evaluations as required by the courts, through independently contracted psychiatrists and/or psychologists. Additionally, PrimeCare Medical mental health staff shall be available and cooperate with the County's Mental Health Court as required.

Laboratory screening ordered by mental health staff to determine therapeutic drug levels, will be entered into the electronic medical record system and tasked to medical staff to be drawn. Psychotropic medication non-compliance is automatically calculated by the electronic medical record system and mental health personnel will be able to view this critical inmate/patient information without prompting from medical. This system also minimizes delays in clinical interventions and allows both medical and mental health staff to spend their time providing inmate/patient care in a more efficient manner.

Discharge planning, including continuity of care and referrals for community based services is crucial for effective mental health treatment. PrimeCare Medical is committed to providing transition services for inmates/patients being discharged and shall adhere to all requirements set forth in the RFP. Regarding aftercare planning and referrals to community agencies and psychiatric providers, PrimeCare Medical will continue existing relationships that we have established and seek additional services and providers in the community. We have found working closely with the local mental health offices to be the best way to facilitate effective discharge planning which typically involves securing funding and/or obtaining health care insurance.

PrimeCare Medical will provide for the purchase, prescription, administration, and management of psychoactive medications as further detailed within the Pharmacy Section of this Proposal. Psychotropic medications are prescribed by psychiatric providers after they conduct a clinical assessment or in the case of new commitments, when it is verified that the inmate/patient had a valid prescription and was compliant with his psychotherapeutic treatment. Medication administration is conducted by nursing at the same time as other medications are dispensed. Stock psychopharmacological medication is maintained on-site and is available when prescribed. Psychiatric providers shall discuss medications with each inmate/patient they intend to prescribe medication to during their clinical assessment. The discussion will include the potential risks and benefits of the medication. Printed literature will also be provided at this time as necessary.

As part of the transition plan to PrimeCare Medical, all current psychotropic medications will be continued until the inmates/patients can be seen by a psychiatric provider. Whenever possible, medications will be continued and not modified unless there is a clinical need. If existing medications are not on our formulary they may be converted to similar medications which are on the formulary, unless clinically contraindicated. All inmates/patients on suicide precautions or psychiatric observation will remain on that status and their care will be assumed on the transition

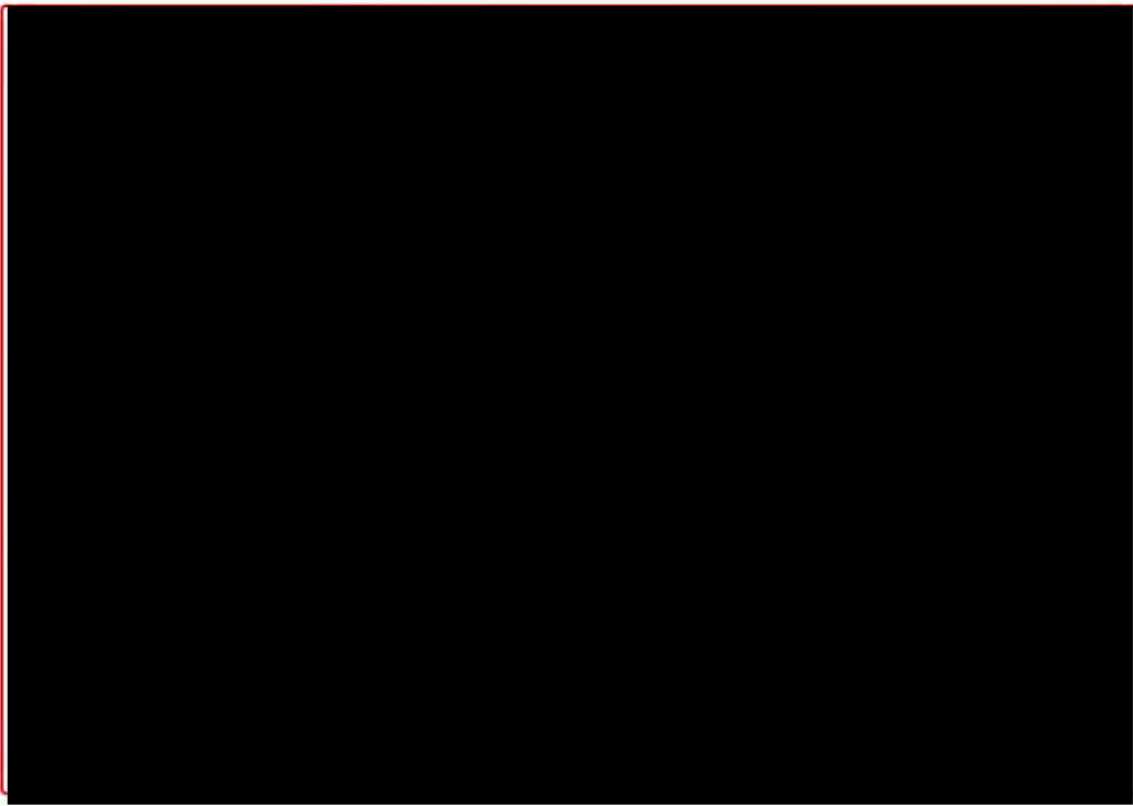
date. All relevant and current records on inmates'/patients' mental health care and the services they received will be reviewed as they are seen for routine follow-ups or referrals. Please see details on the overall transition plan discussed elsewhere in this Proposal.

TELEMEDICINE CAPABILITIES

PrimeCare Medical will implement and utilize state-of-the-art telemedicine technologies to assist with the provision of mental health care and certain other specialty health care clinics as approved by the Putnam County Correctional Facility. Designed for mobility and ease of use at the point of care, a high-definition video collaboration system with functionality make it ideal for medical cases ranging from remote inmate/patient consultations to virtual care teams and medical education. Through these technologies, health care providers can overcome the barrier of distance, deliver better and timelier care to inmates/patients, and work more productively through remote face-to-face collaboration in a medical setting. This system will operate in compliance with PrimeCare Medical's policies on Telemedicine.

Telemedicine has been utilized as an important adjunct to our facility staff. In some jurisdictions, PrimeCare Medical has utilized this critical technology for not only emergent mental health evaluations, but also for unique specialists such as infectious disease certified physicians. Our technology systems allow these off-site providers to see the inmate/patient, complete documentation, and issue orders directly in the inmate's/patient's electronic health record. PrimeCare Medical will work with local specialty groups and those currently on staff to assist when needed to conduct these services. Additional local specialists who may be opposed to entering the correctional environment, but would be willing to collaborate and evaluate our inmates/patients through this electronic media will be recruited and retained.

For the End User Equipment, PrimeCare Medical is proposing the "Cisco TelePresence – Jabber" telemedicine devices. The Cisco Jabber brings the power of telepresence to health care environments. Designed for mobility and ease of use at the point of care, a high-definition video collaboration system with functionality makes it ideal for medical use cases ranging from remote patient consultations to virtual care teams and medical education. This mobile telemedicine endpoint is part of the Cisco portfolio, which offers a total solution approach including content sharing, recording, firewall traversal, and management capabilities. Healthcare providers can overcome the barrier of distance, deliver better and timelier care to inmates/patients, and work more productively through remote face-to-face collaboration in a medical setting.



The Cisco Video Conferencing infrastructure will allow authorized end points to register securely over the internet. The infrastructure allows for robust and reliable video conferencing communications and simplifies the end point user interface to ease the burden on end users. Since the servers are in the cloud, bandwidth is readily available.

End User Training – PrimeCare Medical will provide end user training sessions on the Cisco Jabber. In these training sessions, users will be shown how to make and receive video calls and operate the system.

Technical Support – Connectivity to the service provides will be in conjunction with Office of Information Technology regarding technical support due to connectivity/registration issues; all other Technical Support will flow through PrimeCare Medical’s established call center.

Security regarding our proposed telemedicine services shall be provided in accordance with PrimeCare Medical’s policies on the use of such, as well as, in accordance with our Computer Usage Guidelines Policy, Telemedicine Consent Forms, and our IT Disaster Recovery Plan.

ORAL CARE SERVICES

Part of the initial assessment will include a dental screening to be performed by a PrimeCare Medical health care professional. This screening includes an assessment of the individual’s dental health and provides education to assist with dental hygienic practices. Medical staff

personnel responsible for completing these screenings will be trained by Dr. Nathan Kalteski, Director of Dental Health Services, or his designee. Basic dental services and treatments will be performed by the contracted dentist and shall include examinations, extractions, fillings, dental hygiene instruction, emergency care, provision of all dental prosthetics and lab services, and provision of maxillofacial surgery services when indicated. All dental evaluations and treatments shall be documented by the contracted dentists within the PrimeCare Medical electronic medical record system to ensure continuity of inmate/patient care is maintained at all times. Arrangements for emergent care through locally contacted oral surgeon offices shall also be available and coordinated as clinically indicated. The assigned dentist, or a Corporate Dentist, shall be available on-call twenty-four (24) hours per day, seven (7) days per week for emergency situations.

VISION CARE SERVICES

Eye examinations shall be performed in accordance with Putnam County Correctional Facility Policy, as well as being in accordance with NCCHC and ACA Standards. PrimeCare Medical shall utilize Institutional Eye Care, a Pennsylvania Corporation, for optical services, as well as, locally contracted eye care providers. These services will include: Regular eye examinations, Emergency eye care services, Prescribing, Ordering, Dispensing, Fitting of eyeglasses, routine eyeglass maintenance, routine eye examinations when medically indicated and other eye care services as required. Contact lenses will only be provided if medically necessary in accordance with Putnam County Correctional Facility policy.

CONTINUITY OF CARE

PrimeCare Medical will ensure continuity of care is maintained for all inmates/patients at the Putnam County Correctional Facility, through established communication systems and protocols. PrimeCare Medical's electronic medical records system, CorEMR, has been instrumental in maintaining continuity of care for all health related services, to include provider-to-provider consultation, inmate/patient follow-up on chronic and/or acute health conditions, off-site health referrals, hospitalizations, and discharges from Facility custody. As inmates/patients are continually being discharged from custody while receiving specific treatment regimens, the health care team to include members from Medical and Mental Health, are responsible for coordinating appropriate community referrals prior to the time in which the individual is being released from custody. This effort cannot be successful without the continued collaboration and communication with facility treatment personnel and local support agencies within the community. Our Transition Coordinator will design, develop and implement a referral resource network within the local communities and be responsible for the successful transition of the inmate/patient back into society.

PHARMACEUTICAL SERVICES

PrimeCare Medical has written policies outlining the proper procedure for medication administration, documentation requirements on the medication administration record (MAR), routine provider follow-up evaluations for continued long-term medication orders, and

counseling / referring of inmates/patients who refuse prescribed medications. Through this effort, PrimeCare Medical's goal is to provide safe and cost effective care. All prescriptions are written in accordance with a formulary, which includes generic drugs approved for substitution by the Medical Director/Physician Assistant/Nurse Practitioner. Preference is for generic drugs whenever appropriate. The purpose of this medication formulary is to:

- Promote cost containment/effectiveness without increased risk of adverse consequences or therapeutic misadventures.
- Promote rational and objective drug therapy.
- Promote appropriate generic drug utilization and use of the lowest cost therapeutically equivalent drug within a category.
- Work with other state agencies to purchase medications in bulk at the state agency rate.

Our pharmaceutical system shall provide for the ordering, monitoring on-site receipt, and maintaining an inventory of pharmaceuticals in a safe, secure, and organized fashion. The responsible physician shall approve written procedures for the distribution, administration, accounting and disposal of medications. The responsible physician shall also approve a formal medication log (Medication Administration Record) which shall be maintained for each inmate/patient receiving medication. The inmate's/patient's medication log shall include the date, time, name of drug and dosage administered. PrimeCare Medical shall also adhere to any Putnam County Correctional Facility's keep-on-person limited medication policy as approved by the Facility and Statewide Medical Director. PrimeCare Medical currently only allows for very limited usage of keep-on-person medication programs, as most medications are administered in accordance with Company policy to ensure the appropriate distribution of all such medication orders. Medications shall be stored in a locked storage area and a list of stored medications shall be maintained. Medications shall be secured within these areas in both locked cabinets and also locked medication carts. All drugs are stored under proper conditions of sanitation, temperature, light, moisture, ventilation, and security. Internal and injectable medications will be stored separately from antiseptics, drugs for external use, disinfectants, and cleaning supplies.

Persons administering medication shall do so under the supervision of the responsible physician and shall have received training appropriate to their assignment. They are accountable for administering medications according to orders as to both frequency and dosage, and for recording the administration of medications in a manner and on a form approved by the responsible physician. Training from the responsible physician shall include the medical aspects of administration or distribution of medication to all individuals involved with the handling, ordering, or administering of medications. When feasible, once a day or twice a day dosing is preferred.

Any inmate/patient who refuses medication shall sign a statement to that effect, which shall be signed by a staff member and filed in the inmate's/patient's medical record. Medications shall be administered only by an appropriately licensed health care professional. When medications

are taken orally, the person administering the medication shall take appropriate action to verify that the medication has been swallowed, thereby ensuring proper ingestion of the prescribed medication. The on-site registered nurse shall be responsible for maintaining the accuracy of the MAR each shift and that any inaccuracies / errors are corrected. Furthermore, inmate/patient MAR's shall be available to the providers during all clinical encounters. PrimeCare Medical shall provide notifications of contraindications (i.e., drug interactions, drug allergy, or incorrect dose).

PrimeCare Medical will provide all medical supplies, office supplies, books, periodicals, and forms necessary to maintain a facility dispensary for the care of the Putnam County Correctional Facility inmate/patient population. PrimeCare Medical will provide a central pharmacy through Correct Rx Pharmacy Services, Inc. for prescription services. Through our agreement with Correct Rx Pharmacy Services, we will ensure that all requirements of the RFP are met, to include on-site STAT dose capabilities for emergencies, availability of emergency medication boxes, daily medication delivery in unit dose packs, on-site starter doses of medications, pharmacy's provision of alerts and reports to our health care providers regarding drug interactions and dosage alerts, and quarterly pharmacy audits with written reports completed by a registered independent pharmacist. PrimeCare Medical shall also contract with local back-up pharmacy providers within the community, so that any prescribed medications ordered after hours can be made available to the respective inmates/patients; thus, making pharmaceutical delivery available seven (7) days per week. Upon an inmate's/patient's discharge from the facility, an adequate supply of medication shall be sent with them in accordance with Putnam County Correctional Facility's policy. These services shall be further customized for the Facility's needs and will be furnished in compliance with all State, Federal and other applicable regulations.

Over-The Counter (OTC) Medications and Stock Medications Inventory:

- PrimeCare Medical shall establish a stock supply of commonly utilized medications (OTC's, legend and controlled substances) for administration to inmates/patients prior to receipt of their specific prescription as permitted by State Law and the Putnam County Correctional Facility.
- Stock medications shall be managed and maintained in a safe and secure environment with a perpetual inventory tracking system, developed by PrimeCare Medical, to ensure accountability.
- PrimeCare Medical shall train all involved facility and health care staff that are involved in the process of their duties and responsibilities, in order to initiate and maintain the system. The training program shall be approved in advance by the Putnam County Correctional Facility.

In order to minimize the waste of pharmaceutical and consumable medical supplies, it is the responsibility of the PrimeCare Medical Health Services Administrator to designate one (1) individual to be responsible for conducting a weekly inventory and ordering of all supplies and

one (1) individual, to be responsible for weekly ordering of medications. This will ensure that physicians have adequate notice to review and renew prescriptions. This specific designation of responsibility increases accountability and reduces the possibility of double ordering, missed prescriptions, delay in ordering, lack of supplies when most needed, and premature prescription changes.

Our electronic medical record system is critical to effective medication management. Physicians order medications directly through the electronic medical record system and inmates/patients receive their medications (if available) at the next medication pass. When a clinician orders medications, the order is sent electronically directly to the pharmacy via the electronic medical record system. This system allows for faster ordering and processing of medications in all facilities. This one step process allows for a reduction in staff time and makes transcription errors less likely. Furthermore, inmate/patient MAR's are available to the providers during all clinical encounters.

A Pharmacy and Therapeutics Committee, consisting of at least the on-site Medical Director/Physician Assistant or Nurse Practitioner, Health Services Administrator, Pharmacist, and members of the Facility's Administration will meet as required, but no less than quarterly. This committee, which will report to the Continuous Quality Improvement Committee, shall be responsible for considering and recommending additions and deletions to the formulary. The usage of all pharmaceuticals, including psychotropic drugs, shall be closely monitored and prescribing patterns identified. The Committee shall also assist with drug utilization audits. Generic prescription drugs are used whenever possible. Effective, accepted drugs which have been on the market are provided initially, and only when they are ineffective, are newly approved drugs prescribed. PrimeCare Medical and the contracted pharmacy vendor shall report all requested pharmacy statistics required by the Putnam County Correctional Facility.

LABORATORY SERVICES

PrimeCare Medical will contract laboratory services through Bio-Reference Laboratories, Inc. PrimeCare Medical will ensure that all subcontracted laboratory services meet all state licensing requirements and shall provide documentation of routine quality control activities as requested. All specimen results, when received, will be reviewed by the nurse on-duty, with calls placed to the on-call provider for orders when clinically appropriate. A record of the date and time of this communication as well as resulting intervention orders is documented in the inmate's/patient's health care record. It shall be the responsibility for the qualified health care professional receiving the lab results to ensure that appropriate intervention is initiated. The ordering and completion of STAT laboratory services shall also be available as clinically indicated, either through Bio-Reference Laboratories or through arrangements with local hospitals; thus, eliminating the need for off-site transports for the respective inmates/patients. All test results shall be made available to the facility within twenty-four hours, with abnormal findings being made available immediately upon interpretation by the provider. PrimeCare Medical will utilize CareEvolve, a subsidiary of Bio-Reference Laboratories, Inc. to provide on-line access to laboratory results. CareEvolve provides access to test results as soon as they are available via a

secure web portal with a unique login and password. Bio-Reference Laboratories is required to notify PrimeCare Medical immediately by telephone of any critical abnormal results.

Specimens will be picked up, Monday through Saturday, at approximately the same time each day and delivered to the laboratory as soon as possible. Stat labs will be transported to a local hospital within one (1) hour.

In order to ensure a high level of quality control, PrimeCare Medical will require the contracted laboratory to utilize both internal and external systems to monitor the accuracy and precision of each inmate/patient run for every test performed in the laboratory. In addition, data from laboratory quality control proficiency procedures is to be available for review upon request. The on-site Medical Director/Physician Assistant/Nurse Practitioner shall check, initial, and date all laboratory results within an appropriate time to assess the follow up care indicated and to screen for discrepancies between the clinical observations and the laboratory results.

RADIOLOGY SERVICES

PrimeCare Medical will provide contracted x-ray and radiological services to the Putnam County Correctional Facility by utilizing Physicians Mobile X-Ray Services. These mobile radiology services personnel are appropriately trained, insured, and certified in accordance with State Law. PrimeCare Medical shall be responsible for providing all necessary supplies and equipment to complete required on-site radiological services, to include all fees associated with the transportation of x-ray films and related interpretation readings by a licensed Radiologist. The ordering and completion of STAT radiological services shall also be available as clinically indicated. All test results shall be made available to the facility within twenty-four hours, with abnormal findings being made available immediately upon interpretation by the provider.

Digital and regular radiographs will be conducted Monday through Friday at times designated by the institutions (regularly scheduled days), unless institutional operational schedules dictate otherwise, by a registered technician; with interpretations completed by a board certified radiologist who shall provide a typed and/or automated report to the institution within acceptable time frames. PrimeCare Medical shall ensure that results of services will be reported no later than twenty-four (24) hours after service was rendered. When warranted, STAT readings are to be provided immediately to the institution when findings are significant. PrimeCare Medical shall be responsible for the maintenance, pulling, filing, and purging of all X-ray films. All such radiology services shall be fully integrated into the electronic medical records system, which will provide for the highest levels of continuity of care following such testings. PrimeCare Medical shall utilize electronic medical records system for the storage, retention, and documentation of digital images.

PrimeCare Medical shall also be responsible for all other X-rays and diagnostic testing not available at the institution. The use of on-site mobile ultrasounds, bone mineral density studies, EKG's, and digital holter monitoring will be available and utilized as specific inmates'/patients' needs warrant. PrimeCare Medical understands that if radiological services cannot be

completed on-site, the scheduling of radiological services will be coordinated with Facility Administration to ensure security and transportation requirements.

ECG SERVICES

PrimeCare Medical shall provide EKG services, equipment, and necessary supplies to the Putnam County Correctional Facility. EKG equipment utilized by PrimeCare Medical will be provided by Mortara Instrument ECG's, a world leader in ECG technology. Widely recognized, Mortara resting ECG interpretation algorithms use gender specific and adult criteria to provide a silent second opinion for resting ECG interpretation. PrimeCare Medical will be responsible for the direct interpretation of all electrocardiograms and tracings through an interpretive machine located on-site. These tracings will become part of the inmate's/patient's permanent medical record with full interpretations performed by a Cardiologist/Internal Medicine specialist. The ordering and completion of STAT EKG services shall also be available as clinically indicated. Readings from these machines, as well as their interpretations shall be electronically integrated through the electronic medical records system. PrimeCare Medical will provide all equipment and supplies necessary for these specific services.

THERAPEUTIC DIET PROGRAMS

The on-site Physician/Nurse Practitioner/Physician Assistant will be responsible for the ordering, monitoring, and evaluating of therapeutic diet programs as dictated by applicable standards at the Putnam County Correctional Facility. Necessary therapeutic diets will be permanently recorded in the inmate's/patient's medical record. These therapeutic diet programs may only be ordered by the Physician/Physician Assistant/Nurse Practitioner and must be reviewed on a monthly basis. These diets are the financial responsibility of the Facility. Inmates/Patients who suffer from diabetes, hypertension, cardiac problems, AIDS, hepatitis, or other nutritionally complicated conditions, such as pregnancy, may require a therapeutic diet. PrimeCare Medical's contracted dietician, Susan Brennan, RD, LDN, shall be available to consult on semi-annual dietary menu cycle reviews in accordance with applicable standards and complete specific inmate/patient reviews when therapeutic dietary treatment plans have been ordered for unique nutritional concerns. The PrimeCare Medical contracted dietician and health care providers shall educate inmates/patients on the topics of dietary needs, food consumption, and commissary.

INFECTIOUS WASTE DISPOSAL

PrimeCare Medical will be responsible for the custody and approved appropriate method of disposal of any and all hazardous waste generated by medical care or treatment provided to the Putnam County Correctional Facility. These disposal methods shall be in compliance with any applicable standards and/or regulations relevant to the disposal of bio-hazardous waste material. PrimeCare Medical shall take appropriate measures to ensure that only biomedical waste material is deposited in the designated contaminated waste containers. This will occur through a contractual relationship with Stericycle, Inc., who currently provides medical waste disposal services to all PrimeCare Medical contracted facilities. All certificates of disposal shall be maintained by PrimeCare Medical

INMATE/PATIENT GRIEVANCES

Any medical grievances filed by inmate(s)/patient(s) shall be referred to the on-site Health Services Administrator, who shall review the claim and gather information concerning the complaint and take appropriate action consistent with institutional grievance procedures. All grievances received shall be reviewed for patterns and trends at the monthly Continuous Quality Improvement team meetings. If patterns are noted, plan of actions are developed to improve inmate/patient satisfaction rates. The Health Services Administrator shall be responsible for meeting with all inmates/patients who submit a medical grievance. The purpose of this meeting is to obtain all of the facts regarding the grievance and to provide education when necessary. We have determined many grievances can be eliminated through this procedure. All grievances received shall also be reviewed at the monthly health care staff meeting. The review shall include any corrective action plans developed as a result of patterns or trends noted. All grievances are further reviewed weekly by the Corporate Risk Manager as a proactive approach to resolving potential problems at an early stage.

RE-ENTRY / DISCHARGE PLANNING

PrimeCare Medical shall work in cooperation with the Putnam County Correctional Facility designated Re-entry Coordinators to develop discharge planning services for inmates/patients being discharged from the care and custody of the Facility. PrimeCare Medical's discharge planning process shall adhere to all requirements set forth in the RFP. PrimeCare Medical will identify continuing areas of concern for re-entry, and make recommendations for changes where needed in existing re-entry programs, and make recommendations for the development of new programs to address inmate/patient re-entry needs. Health Care Release Planning is initiated for each inmate/patient when the medical department is notified of the inmate's/patient's pending release. Health Care Release Planning consists of several components, to include health education, self-care instruction, and continuity of care plan development, which includes both the treatment plan and community agency referrals.

PrimeCare Medical will designate a member of the facility's Medical Department to serve as a Health Care Release Coordinator. The work associated with the Health Care Release Coordinator is accomplished in coordination with various other departments and multiple disciplines. The duties of the Health Care Release Coordinator include, but are not limited to:

- Review Facility Re-entry Coordinator's list of inmates/patients eligible for parole and/or release. Notify the Putnam County Correctional Facility of any inmate/patient with a serious health condition that will require extensive medical care or who may present complex medical conditions post-release.
- Discussion with the inmate/patient about discharge.
- Assist assigned correctional counselor(s) with medical information when inmate/patient has been deemed eligible for Social Security benefits.

- Coordinate discharge planning of every mental health/mental retardation (MH/MR) inmate/patient with the designated Mental Health Coordinator.
- Provide information to inmate/patient related to self-care and health education, as well as education on special needs.
- PrimeCare Medical shall make every reasonable effort to ensure that inmates/patients have a sufficient supply of medication upon discharge.
- Schedule necessary follow-up visits / consults with local community care providers as clinically indicated.

MEDICAL RECORDS

Medical documentation will occur on a daily basis to ensure that NCCHC and ACA standards are consistently maintained. We will guarantee through an internal auditing system that medical records are complete and contain accurate legible entries. All information acquired shall be kept confidential in accordance with State Law, the Health Insurance Portability and Accountability Act (HIPAA), and NCCHC Standards.

PrimeCare Medical shall have access to private and confidential data maintained by the Putnam County Correctional Facility to the extent required for PrimeCare Medical to carry out the duties and responsibilities defined in this agreement. PrimeCare Medical agrees to maintain confidentiality and security of the data made available. PrimeCare Medical shall have full access to the medical records after the termination of any contract in order to prepare for litigation or anticipated litigation brought by third persons in connection with the services rendered by PrimeCare Medical pursuant to this proposal.

Confidentiality of Health Records: Active health care records shall be maintained under secure conditions and separately from confinement records pursuant to NCCHC Standards. Access to active inmate/patient records is controlled by the health care authority. PrimeCare Medical shall not deny Facility Administration or his/her designee access to such records in accordance with applicable law.

Release of Health Care Information: Detailed health care information shall only be released to an outside agency upon written authorization from the inmate/patient or in accordance with PrimeCare Medical Policy on the matter. Exempt from this policy is the pertinent health care information necessary for any off-site consultation and/or specialty referral.

Transfer of Records: When an inmate/patient receives off-site examination or treatment or is transferred to another facility or hospital, the inmate's/patient's health record or a copy of the summary shall accompany him or her. In the event that an inmate/patient is transferred to a correctional facility outside the jurisdiction of the Putnam County Correctional Facility, an inmate/patient health care summary sheet shall accompany the inmate/patient. Documentation of

any off-site examination or treatment shall be made in the health record by the physician or other health professional involved.

Records Retention: PrimeCare Medical shall comply with all applicable Federal and State rules and regulations, and requirements governing the maintenance of documentation to verify any cost of services or commodities rendered under this contract by PrimeCare Medical. PrimeCare Medical shall maintain such records a minimum of seven (7) years and make available all records to the Putnam County Correctional Facility personnel in accordance with applicable Federal and State rules and regulations.

ELECTRONIC MEDICAL RECORDS SYSTEM

PrimeCare Medical continually updates and improves technology throughout the Corporation. In 2006, PrimeCare Medical signed a contract with “CorEMR”, an Electronic Medical Records Corporation based in Orem, Utah. CorEMR has designed an electronic medical record (EMR) system specifically for corrections. In an effort to continue with product improvements, PrimeCare Medical continuously works with CorEMR to provide further customization to this software to better serve each of our facilities. We have already implemented this electronic medical records system in nearly all PrimeCare Medical contracted facilities. A complete listing of these facilities, to include the Facility Administrator’s contact information, is contained in the Addenda Section of this Proposal. This system has significantly improved the efficiency of medical record maintenance, such as the storage, instantaneous access to intake/receiving screening, current and complete medical information, health assessment, etc. for staff and increased speed and efficiencies of several processes that used to require a significant amount of time.

CorEMR brings real time and accurate health records to the treating medical staff in an efficient and effective manner. Through built in functionality, CorEMR allows for increased inmate/patient care and overall improved inmate/patient outcomes. This system is a completely paperless electronic medical record system. It has the ability to interface with OMS, laboratories, radiology providers, pharmacies, and other outside agencies. The system is continuously improving and growing. The built in tracking and reporting features are robust and information is readily available to the end user. Exago or eWeb Reports can mine database information, custom and ad hoc reporting can be produced, saved and reference at any time. It is built on a sound backbone for expansion and growth. With health conditions of inmate/patient populations changing and the world of medicine continually evolving, PrimeCare Medical and CorEMR understand the importance of staying up to date on all national and local trends, medical protocols and changes within the Putnam County Correctional Facility.

PrimeCare Medical plans to begin its initial implementation of its electronic medical records system at the Putnam County Correctional Facility immediately upon a contract award so that its transition / implementation process can begin. PrimeCare Medical’s proposed electronic medical record system shall be fully implemented at the Putnam County Correctional Facility upon contract commencement. This implementation period shall be contingent upon the timely cooperation of all parties involved and the approval of the Putnam County Correctional Facility.

PrimeCare Medical is proposing the installation of its completely customized electronic medical records system, CorEMR, to the Putnam County Correctional Facility immediately upon a contract award.

Included within PrimeCare Medical's CorEMR system is our proven and proprietary business model, operational health systems, forms, policies, protocols and procedures. It is this customization that separates PrimeCare Medical's CorEMR system apart from the competition. All upgrades and enhancements are thoroughly tested prior to deployment and any patches/fixes are done timely. PrimeCare Medical will provide updates to the facility with any new features and software enhancements on a quarterly basis. We have already implemented this electronic medical record system in "forty-two" (42) sites – accounting for over "21,000" lives. PrimeCare Medical is currently working towards implementing this system in all contract facilities. The system currently services PrimeCare Medical facilities ranging in size from 2,600 beds (York County) to 49 beds (Lancaster Youth Intervention Center) including a state wide multi-site system (West Virginia Regional Jail Authority).

PrimeCare Medical will be the custodian of all medical records in accordance with all Putnam County Correctional Facility Policies. The records will also comply with all HIPAA rules and regulations. PrimeCare Medical's implementation of an electronic medical records system will reduce the amount of records being produced going forward. PrimeCare Medical will scan medical charts that it deems necessary to maintain the continuity of care of chronically ill inmates/patients.

PrimeCare Medical brings the Putnam County Correctional Facility a solution that will service the inmate/patient population in the most state of the art and high availability model currently being offered. PrimeCare Medical hosts this solution in a Tier III data center. The virtualized environment allows the solution to scale as needed and is accessible at all times. The EMR is continuously replicated to diverse geographical locations and monitored 24/7. CorEMR can be accessed simultaneously by different users at multiple locations. CorEMR runs through a web browser, so no extra software is needed. This backbone will ensure availability and security of medical records compliant with all state and federal regulations.

As previously mentioned, the system is "completely paperless" touching every aspect of medical services: Intake, Sick Call, Medication Pass, Forms, Reports, Scheduling and much more. When an inmate/patient is committed to the Putnam County Correctional Facility an intake is completed by our medical staff – it is at this point they are entered into CorEMR and the process begins. An individual health care record is created and maintained for every inmate/patient regarding medical, dental, or mental health services as a result of the inmate/patient screening process, or for services rendered following assignment to a housing area. CorEMR has a built in scheduler that will automatically schedule inmate/patient referrals and follow-ups based on PrimeCare Medical's proprietary screening. An extensive mental health assessment is also completed with suicidal risk factors. The system is set up to accept digital signatures as well as email notifications for risk factors and/or classification purposes.

CorEMR can also integrate with Putnam County Correctional Facility jail management software and pass inmate/patient demographic and location information on a constant basis. CorEMR can also send and receive confirmations from a pharmacy provider and other outside agencies. If sick call requests are submitted through a kiosk or telephonically, a system will be set up so that CorEMR will also capture this information and task to the appropriate health care worker.

KEY FEATURES:

Certification & Standards Compliancy

- ✓ CorEMR v5.0 received ONC Staging 1 Meaningful Use certification in December 2012.
- ✓ The software is NCCHC compliant and will assist the facility in reaching and maintaining NCCHC accreditation.
- ✓ The software supports AJA, ACA and NSA standards

Integrations

- ✓ Imports patient data from existing Offender Management Systems (OMS). This integration creates an automatic electronic patient chart. Patient photo and basic demographic information is automatically captured.
- ✓ Sends medication orders to our/your pharmacy provider for shipment or delivery.
- ✓ Receives lab results fully integrated with the health record.
- ✓ X-ray imaging seamlessly transferred to patient record.

Technology

- ✓ Simultaneous access allowed for multiple terminals and users within the facility.
- ✓ Web based structure that runs on the facility's local network or by a server running at one central location for facilities with multiple locations.
- ✓ Built on a SQL back end and is compatible with SQL Server 2005, 2008, 2012 and MySQL 5.0+.

Medical Forms

- ✓ Forms can be configured with “triggers” that automatically create actions (i.e., creating an active problem for a diabetic or scheduling a task for the nurse on duty to review that intake form).
- ✓ Transfer and release forms configured 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.
- ✓ Unique forms creation tool allows users to create customized forms to use throughout the system. These forms can be categorized as medical, dental or mental health and can be defined as Intake, Release, Patient Requests, Subjective Interview, Patient History, Education and Exam Forms (Objective).
- ✓ Forms with built in Protocols based on a specific problem or condition.
- ✓ Forms can also capture not-examination information, such as administrative and patient consent forms, refusals, release of information, as well as many others.
- ✓ All forms are titled, date and time stamped with an electronic signature attached with the name and title of each documenter.

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.
- ✓ 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.
- ✓ 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.
- ✓ The Chart Summary includes: current medical problems, medications, task summary, intake form summary and recent medical history with links to each section.
- ✓ Chronic Care is also part of the inmate's chart.
- ✓ Maintenance of all records will be in compliance with state and federal law and will be made available to Facility personnel, consistent with HIPAA requirements.

Infirmary Charting

- ✓ The software supports distinct and separate charting for inmates/patients that are being held in the Infirmery, yet maintains a single chart as per NCCHC requirements.
- ✓ The software will track doctor ordered level changes (i.e., level 1,2,3, observatory, etc.) which determines the level of care required while the inmate/patient is in the Infirmery.
- ✓ The software will allow for different Forms to be available within the Infirmery Chart as opposed to the Master Chart, providing a level of separation of the information captured in the chart.
- ✓ The software supports an admission and discharge process that will allow the user to determine which data related to medications, alerts and problems is shared between the Infirmery and Master sections of the chart.

Scheduler

- ✓ Includes a robust appointment scheduler that can be filtered by task category (doctor, dentist, nurse, social worker etc.), priority and housing location.
- ✓ Tasks and appointments can be viewed by day, week or by month.
- ✓ The system can prevent the over scheduling of a user or user type.
- ✓ The system will allow an administrative user to configure an unlimited number of Task Categories or Types.

Sick Call (SOAPe Notes)

- ✓ Uses the standard SOAPe note format for Sick Call examination.
- ✓ Displays patient summary information such as current medical problems and current medication compliance on the Sick Call.
- ✓ Gives users access to the Subjective, Objective, Action, Plan and Education sections directly from the Sick Call module, allowing doctors to record orders for later note off or complete the actions themselves.

- ✓ Available actions include completing interview or exam forms, scheduling future appointments, ordering lab work, and ordering medications.
- ✓ Receive and store scanned documents and electronic files directly into sick calls.
- ✓ Allows users to note if Sick Calls (clinic) or medications are billable.

Medication Administration

- ✓ Med Pass times are configured by day and Med Pass Prep List is generated accordingly.
- ✓ Med Pass lists can be grouped by housing unit or alphabetically by last name.
- ✓ Patient's acceptance or refusal of each dose is recorded. Graphical and detailed MAR reports can be viewed at any time.
- ✓ The system easily accommodates KOP, PRN, injections and stat dosing.
- ✓ Optional bar code reader integration to find 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 Med Pass to indicate injection sites.
- ✓ The software will allow for off-line medication administration in facilities that do not have wireless network connectivity throughout the facility.
- ✓ Med Pass data is safeguarded using a Local Save feature that will prevent the Med Pass from being lost if the laptop being used is accidentally powered off or the battery life would happen to expire.
- ✓ The software supports Medication schedule configurations to meet the distribution schedule.
- ✓ The software will support administrative user configuration of multiple Med Passes for a given day (i.e. 0800, 1200, 1600, and 2000)
- ✓ The software will allow an administrative user to tie medication frequencies to the configured Med Pass Times (i.e., BID medications distributed at 0800 and 1600, QD distributed at 0800, etc.).
- ✓ The software will allow reporting on medication compliancy so the providers can make an informed decision as to continue the medication or discontinue it based on missed dosages.

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 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.
- ✓ Eliminates the need for double entry of medications into the EMR and also the Pharmacies on-line ordering system.
- ✓ Eliminates potential pharmacy/provider transcription error that can result in medication errors.
- ✓ Provides positive confirmation that the order has been received by the pharmacy.
- ✓ Provides for near real-time order status including error reporting on medication orders (i.e. reorder too soon, requires a signed paper prescription, etc.).

- ✓ Provides positive Prescription identification using the RX number that will allow the check-in of medications using bar-code scanning
- ✓ The software supports STAT medication ordering that will allow for the ordering and administration of the med in a single step, while updating the MAR appropriately.

Integrated Document Scanning

- ✓ Documents can be attached to the inmate/patient chart and categorized for easy retrieval.
- ✓ Documents can be attached to the chart, an inmate form, a release form or a sick call record.

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.
- ✓ 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.
- ✓ Medical Studies are conducted through our CQI program and CorEMR reporting.

Administration

- ✓ Permissions Grid restricts access by user type.
- ✓ Ability to manage and edit all forms and form triggers. Includes the ability to create event triggers (such as automatically create a specific task when a question on a form is answered a certain way).
- ✓ Ability to create Medication Sets—multiple medications configured to be ordered as a group, for situations like alcohol withdrawal protocols.
- ✓ The software can automatically create in inmate/patient chart when a new inmate to the system is entered into the JMS system minimizing manual data entry of demographic data.
- ✓ The software will update the chart by adding new booking data (Booking Number, Booking Date and Booking Time) to an existing chart. If two charts exist for the same patient those charts can be easily merged together to form one complete medical record.
- ✓ The system will track the inmate's/patient's housing location history to assist with Med Pass and also disease management due to contagious diseases (inmate/patient proximity report).
- ✓ The system can capture Agency information (i.e., ICE, US Marshal, Fed, etc.) that is entered into the JMS that can be used to generate billing reports or passed on to the Pharmacy for billing.
- ✓ The system will automatically cancel any future scheduled Task and Discontinue any medications when the inmate is released from the Jail Management System.
- ✓ Non-Inmate activities can be entered into the system to assist with communication between management and clinical staff.
- ✓ Activities can be marked as complete so that they will no longer display.

As mentioned above, PrimeCare Medical feels that it is uniquely suited with “CorEMR” to provide the Putnam County Correctional Facility with a “state-of-the-art, completely customized electronic medical records system”. PrimeCare Medical has built specific efficiencies into CorEMR and feels that Putnam County Correctional Facility would benefit immensely with the implementation of CorEMR. PrimeCare Medical’s is confident that we can provide a level of service that is unsurpassed by our competitors.

MEDICAL SUPPLIES AND EQUIPMENT

PrimeCare Medical shall be responsible for the maintenance, repair, and replacement of equipment and for acquisition of additional equipment and supplies necessary for the proper conduct of inmate/patient medical services at the Putnam County Correctional Facility and remain flexible to the ongoing needs of the Facility. The Purchasing Department of PrimeCare Medical will receive and process all supply orders for the Putnam County Correctional Facility. All of these purchases will be acquired within acceptable timeframes. Additionally, the PrimeCare Medical Purchasing Department will be responsible for coordinating the acquisition of telemedicine equipment and service contracts for this equipment in collaboration with the PrimeCare Medical Information Technology Department.

PrimeCare Medical utilizes the following system of on-going Corporate review:

- All supply orders are received by the Director of Purchasing at the Corporate Office for review and processing. Any significant increase in the number of specific supplies ordered that cannot be explained by an increase in the inmate/patient population is noted and questioned by the Director of Purchasing before the order is processed.
- PrimeCare Medical’s Corporate computer capability is such that all supply and prescription costs can be tracked by facility and any significant increase suggesting waste will quickly be identified with appropriate instructions to explain or address the situation provided to the PrimeCare Medical Health Services Administrator.
- The utilization review and contract compliance audit processes noted in this Proposal also provides a valuable checks and balances mechanism which guards against waste and unnecessary expenditures.

INMATE/PATIENT HEALTH EDUCATION

PrimeCare Medical has developed, subject to the Putnam County Correctional Facility approval, an inmate/patient health education program utilizing posters, pamphlets, and individual health counseling. To further this health education process, formal sessions shall be made available based on the assessed educational needs of the inmates/patients. Inmate/Patient health education topics shall include, but, not be limited to, personal hygiene, medication education, sexually transmitted diseases, chemical dependency, effects of smoking, and communicable diseases. Such health related topics are also available and provided to health care staff, as well as, facility security personnel. PrimeCare Medical’s Continuous Quality Improvement Program’s

assessment tools require compliance that all patient encounters include education topics related to the visit. We believe that with continued education, the health care team can effect change in inmate/patient lives. This improvement in health will not only benefit the inmate/patient, but will provide for improved patient outcomes and will assist once the inmate/patient is discharged back into the community.

CRITICAL INCIDENTS AND MORTALITY REVIEW

PrimeCare Medical takes a collaborative approach in responding to any critical incidents that occur within our contracted facilities through a formal critical incident debriefing process as defined by NCCHC. This is completed as a joint effort by the Health Services Administrator, Medical Director, and Mental Health Staff. A formal review of all processes and actions leading up to the incident are reviewed, with formal action plans developed if any procedural discrepancies are noted. These individuals also meet with all staff members involved in the incident immediately following the event. Such services are also made available to facility personnel if requested (i.e., mental health staff meet with personnel involved if an attempted suicide occurs within the facility).

Additionally, PrimeCare Medical policy clearly defines appropriate protocols and procedures to be followed in the event of an inmate/patient death, based upon applicable standards. A formal mortality review is required to be completed within thirty (30) days of death, which includes members from Facility Administration, the Health Services Administrator, Medical Director, Mental Health Staff, Regional Directors, and members of the Corporate Utilization Review Committee. Should any corrective action plans be required as a result, PrimeCare Medical shall issue a formal report of such to Facility Administration.

STAFF WELLNESS PROGRAM

PrimeCare Medical will conduct Pre-Employment and Annual Staff physicals examinations in accordance with Putnam County Correctional Facility policies as required by the RFP. Upon receipt of staff/employees names requiring either annual or pre-employment physicals, PrimeCare Medical's Health Services Administrator or Designee will schedule the examination. Laboratory and diagnostic studies will be completed as medically appropriate and in accordance with Facility policy. A physician will review the results and document findings in the employee's file. Additionally, PrimeCare Medical will participate in any and all other required staff wellness program obligations as required by the Correctional Facility.

EMERGENCY PREPAREDNESS

PrimeCare Medical has an established all-hazard medical disaster and contingency plan to provide for the delivery of medical services in the event of an unexpected event or disaster, either naturally occurring or man-made. PrimeCare Medical will implement procedures for the delivery of medical services in the event of a disaster such as fire, tornado, epidemic, riot, strike or mass arrests. Such procedures will be developed by the Responsible Health Authority, in cooperation with correctional staff and PrimeCare Medical corporate management personnel.

All such plans and emergency measures shall be coordinated with the nearest local disaster agency. The all-hazard medical disaster plan is in compliance with all applicable standards. Upon a contract award, PrimeCare Medical will implement its already developed disaster plans and customize them to fit the needs of the Putnam County Correctional Facility, based upon the Facility's needs and risk assessments. PrimeCare Medical shall review all findings and disaster plans on an annual basis and more frequent as systems warrant.

All health care staff shall receive orientation training and yearly mandatory training in their roles in the event of a disaster or disruption within the context of this plan. PrimeCare Medical utilizes Tabletop discussions to reinforce specifics of emergency response planning and steps in the event of a pandemic or disaster. PrimeCare Medical conducts functional and real life exercises in the form of mass disaster drills and man-down drills; including all appropriate record keeping and METTAG or California Fire Chief's Triage Tags system in accordance with all applicable standards. PrimeCare Medical shall provide the Facility's Administration with a copy of the plan, as well as, a contact list for recall of key health care staff and qualified health care professionals.

Employee training will be facilitated through PrimeCare Medical's SharePoint Portal. This portal has been designed for every employee to access information including, but not limited to: Human Resources, Training, Information Technology, Legal, Policy and Procedures, and Operations. Through this portal, information can be passed quickly and efficiently to staff alerting them of emergencies or changes to our already established Disaster Plan.

Several Emergency Management Elements or core components that may be affected in an emergency have been identified as illustrated below.



PrimeCare Medical has identified several key functions related to technology. PrimeCare Medical has invested heavily in its infrastructure to ensure redundancy and backup solutions are present for these key functions. PrimeCare Medical has an established Information Technology Disaster Plan. This plan details key functions and individuals in the event of any emergency. Information regarding the electronic medical record and how it operates in the event of a disaster is also detailed in this plan. The electronic medical record will be housed in a Tier 3 in Reading, PA; which is uniquely equipped to support this structure. PrimeCare Medical’s Emergency Preparedness Plan and Information Technology Disaster Plan was developed and tested by a third party who specializes in these types of programs. These plans are reviewed at least annually; with specific portions and aspects of the plan being tested as often as quarterly (i.e., Backup Solutions). PrimeCare Medical corporate policy requires a comprehensive review and test of all emergency preparedness plans be completed on an annual basis.

PrimeCare Medical will operate the Incident Command Center (ICC) for the Emergency Management Group (EMG) from our Corporate Office in Harrisburg, PA. The ICC is a secure building with backup two (2) natural gas generators to ensure uninterrupted power supply. Multiple redundant Internet connections, multiple vendor phone/fax line and use of mobile communications will ensure that the ICC is able to communicate as effectively and efficiently as

possible with the Putnam County Correctional Facility and any of the local institutions throughout the State. The EMG consists of all upper management and department heads. Key members of the EMG are required to be registered with the Putnam County Alert Network and receive notifications about prison emergencies.

With any Pandemic, staffing is called into question. PrimeCare Medical will utilize its already established network of correctional healthcare providers and staff. We will also lean on temporary staffing agencies which we have contracted with. Additionally, PrimeCare Medical will leverage its technology (use of telemedicine and its electronic medical records system) to ensure the employees can carry out all essential functions. PrimeCare Medical shall also identify and utilize internal and external resources, such as the State's Department of Health and PrimeCare Medical subcontractors to assist the EMG in the rapid response plan and implementation of emergency management and recovery procedures and tools.

For example, on January 14, 2015 at 1400 hours, a fire was reported in the Left Wing of the Northumberland County Prison, located in Sunbury, Pennsylvania. The Prison census that day totaled 208 inmates; 172 males and 36 females. PrimeCare Medical personnel on-site consisted of one registered nurse, two licensed practical nurses, and one mental health worker. Within forty-five (45) minutes of receiving the initial report of the fire, the registered nurse regional manager arrived at the scene. Due to the severity of the fire, the entire Prison was ordered to evacuate by Facility Administration. During evacuation, all inmates/patients were examined exiting the Prison by PrimeCare Medical's health care personnel upon their arrival at the evacuation site, and again intermittently while awaiting for bus transport to SCI Coal Township (males) and SCI Muncy (females). Prior to arriving at the state facilities, a verbal medical report was provided to both SCI facility medical departments by the PrimeCare Medical RN administrator. In addition, through the established working relationship we have developed with the Secretary of Corrections for the Commonwealth of Pennsylvania, both SCI facilities were granted "Read Only" access to PrimeCare Medical's electronic medical record system (CorEMR) for the entire 208 inmate population. This shared access through our EMR system allowed for seamless continuity of care that included all patients' medical histories, current plans of care, and medication records. Additionally, a 30-day supply of prescription medications were supplied to both facilities through PrimeCare Medical's pharmacy vendor within eight (8) hours of evacuation. Although the Prison population provided for multiple medical challenges that day (pregnant females, and multiple asthma and cardiac patients), only one (1) patient required transport to the local emergency department for further evaluation; who returned to the Prison within three (3) hours with a diagnosis of anxiety. The medical department staff later credited their quick and professional response of that day's events to the multiple Mass Disaster and Man Down Drills conducted by PrimeCare Medical throughout the year.

An additional example, on April 26, 2009, the U.S. Department of Health and Human Services declared a public health emergency as a result of the detection of twenty (20) known cases of individuals infected with what is now known as 2009 H1N1 pandemic influenza in the United States. PrimeCare Medical initiated its Emergency Preparedness and pandemic plan immediately upon this announcement. Within twenty-four (24) hours of the initial notification, detailed correspondence was disseminated via email to all PrimeCare Medical staff and facility

administrators identifying key facts and recommendations in preparation for a potential H1N1 pandemic. PrimeCare Medical's Pandemic Policy and Procedures took effect immediately, setting off a chain-of-events: Education was provided to all staff and inmate/patient populations, aggressive surveillance measures were taken to rapidly identify and quarantine patients/inmates with Influenza-Like Illness (ILI) symptoms, and subcontractors were notified of our needs and a surplus of necessary emergency supplies began to be immediately stockpiled. PrimeCare Medical conducted meetings with the State Departments of Health and local Emergency Response Organizations to assist in the development and identification of further needs and treatment options. On June 11, 2009, the World Health Organization declared H1N1 to be a pandemic. Fortunately, due to PrimeCare Medical's prompt initiatives and support from local and state health organizations, as well as through the partnerships of our contracted clients, we were successful in appropriately treating all inmates/patients who presented with signs and symptoms of H1N1 and avoided any serious outbreaks in any PrimeCare Medical contracted site.

PrimeCare Medical guarantees that, in cooperation with Putnam County Correctional Facility Staff, it can deliver all medical services in the event of a disaster within a reasonable period of time. The Medical Disaster Plan includes the following:

- Communications system
- Recall of key staff
- Assignment of health care staff
- Establishment of command post
- Safety and security of the inmate/patient and staff areas
- Use of emergency equipment and supplies
- Establishment of a triage area
- Triage procedures
- Medical records - identification of injured
- Use of ambulance services
- Transfer of injured to local hospitals
- Evacuation procedures (to be coordinated with security personnel)
- Practice drills

PrimeCare Medical shall be a participating member of the Putnam County Correctional Facility response team that provides and participates in post trauma incident debriefings and counseling services for critical incidents, including disasters and pandemic episodes. Such services are provided and intended to expedite the recovery process, help foster a better understanding of the roles and traumas each individual suffered, aid in recovery, and promote a better understanding and appreciation for the roles played by all those involved. The on-site Medical Director/Physician Assistant/Nurse Practitioner will ensure that capable emergency medical treatment, including the following, is provided:

- In-service education on first aid and emergency procedures for all staff members (both Medical and Security).

- Written policies and procedures concerning emergency transfer and transportation of inmates/patients.
- Emergency 24-hour on-call provider coverage.
- Coordination with security for arrangements when the immediate transfer of an inmate/patient is indicated.
- Treatment for visitors and staff consisting of stabilization and referral to a personal physician or local hospital.

SECURITY REQUIREMENTS

A strong working relationship with security personnel is critical to meeting inmate/patient and staff needs. All medical personnel must be trained in the security operations of each facility where they work. To build upon the working relationships that already exist, PrimeCare Medical will continually educate staff on the importance of security, as well as, any other acute issues that are applicable to the correctional setting. The Health Services Administrator will be responsible for maintaining positive working relationships and operations of adhering to security regulations. PrimeCare Medical will work with security staff to develop alternatives when particular medical orders implicate particular institutional security concerns.

Without exception, it is the responsibility of PrimeCare Medical to ensure that all work areas, equipment and supplies are kept secure, and information that pertains to security matters and inmate/patient health care is properly controlled. No inmate/patient or inmate/patient visitor is to be left unattended or unobserved within any treatment or procedural area at any time. PrimeCare Medical shall control entry and access into its assigned work areas. Areas that provide for the storage of medication, instruments, or sharps are to be kept locked at all times. Non-Medical personnel shall not be left unattended in these areas. Inmates/Patients shall not be permitted access to these areas. Inmates/Patients will not be notified in advance of the date or time of any off-site specialty appointments. Privileged information, that is information regarding security in regard to inmate/ patient care, will be provided only on a need-to-know basis.

PrimeCare Medical will work in conjunction with the security staff of the Putnam County Correctional Facility. PrimeCare Medical realizes the importance of security at correctional facilities and pledges full cooperation. Due to the nature of correctional facilities, the following requirements will be accepted by PrimeCare Medical:

- Personnel will adhere to all security rules of the Putnam County Correctional Facility.
- Submit names, social security number, driver's license number, race, gender, and date of birth of all PrimeCare Medical prospective employees providing services to the Putnam County Correctional Facility. The Facility shall conduct a background check, on each individual and may prohibit any individual from entering their institutions when in their

discretion; such individual poses a threat to the security, safety or orderly operation of the institution.

- The responsibility for scheduling appointments in a manner that causes minimum disruptions to the daily institutional schedule.
- Will be responsible for maintaining operations during planned/unplanned institutional lockdowns, state of emergencies, natural disasters, and implementation of Incident Command Systems (ICS).
- It is acknowledged that the Putnam County Correctional Facility has the right to investigate any employee or subcontractor of PrimeCare Medical for security reasons.
- Employee breaks, meals, shift changes, etc. will be coordinated with security to coincide with the Facility's personnel staff schedules and requirements.

A member of security is requested to attend all monthly CQI meetings. At every staff, CQI and quarterly meeting; access to medical care is addressed along with a CQI audit that is completed on the quality of access to medical services. It is important that medical orders are carried out within each institution. In the event that a medical order cannot be carried out, the Health Services Administrator and Medical Director are contacted to review the situation, and if possible, an alternative plan will be developed that meets the medical needs of the inmate/patient while maintaining security within the institution. In the event that a resolution is not possible at this level, it shall be addressed up the chain of command within PrimeCare Medical and the Facility.

ADMINISTRATIVE OPERATIONAL PLAN

PrimeCare Medical's business model provides for a comprehensive Administrative Operations Plan (inclusive of management for both clinical and administrative duties), which has been designed to guide, govern, analyze and support the health care services being provided to our inmate/patient populations, to include those of the Putnam County Correctional Facility. PrimeCare Medical, since its inception, has been committed to providing efficient, quality health care. This is accomplished through a commitment to operating the company on a day-to-day basis by nationally accepted standards, by consistently monitoring the health needs of our inmate/patient populations, and by immediately implementing evidence based standards of care when clinically indicated. The following Administrative Operations Plan addresses the major managerial aspects of PrimeCare Medical's health care delivery systems, to include: policies and procedures, accreditations, continuous quality improvement, utilization review and cost containment, management information systems, technological enhancements, risk management, transition planning, staff education and training, and human resources. Below, PrimeCare Medical will provide a detailed overview and explanation of our proven business model, identifying how our solution will provide for the provision of comprehensive health care services to the Putnam County Correctional Facility. Although these critical functions are described separately within this section, our multidisciplinary management and transition team shall

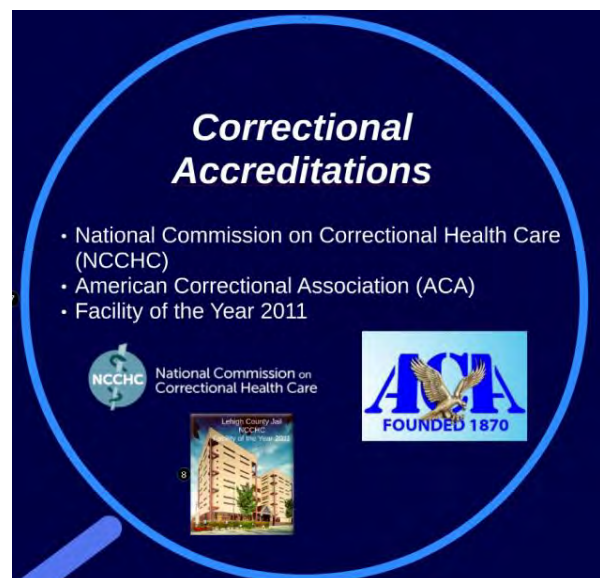
strategically and systematically integrate each of these functions into our overall work plan; thus, creating a model that will ensure the highest level of health care services are provided to the Putnam County Correctional Facility in the most cost effective and efficient manner possible.

HEALTH CARE POLICY AND PROCEDURE MANUAL

Under the supervision of PrimeCare Medical’s Director of Policies and Procedures, Francis J. Komykoski Sr., MBA, CCHP, and Carl A. Hoffman, Jr., D.O., D.Sc., CCHP, President and Corporate Medical Director, the Corporation has successfully completed a year-long review of our Company Policies and Procedures Manual. The result has been a 650 page Policy Manual which incorporates the standards of the American Correctional Association (ACA), National Commission on Correctional Health Care (NCCHC), the American Medical Association (AMA), Centers for Disease Control Protocols and Guidelines, State Licensing Boards Laws and Regulations, and Federal OSHA Guidelines. This Policy Manual provides guidance and direction to all personnel employed by the Corporation, for both clinical and administrative issues that may arise. Our Policy and Procedures Manual has stood the test of time in not only providing for clear, concise directives in how to function in a correctional health care setting, but also in guiding our staffs to provide the appropriate and necessary health related services needed by our inmate/patient populations and in effectively defending the Corporation from frivolous medical actions filed against us. Copies of this Manual are present in all contracted facilities’ Medical Departments, with additional copies being furnished to each of our clients. The PrimeCare Medical Policy Manual represents already developed policies, which shall be further customized to fit the specific needs of the Putnam County Correctional Facility upon contract award. These Corporate Policies and Procedures have been further refined within each of our institutions in the format of local policies, which are routinely updated and revised (at minimum of annually) at the Facility level, ensuring all applicable State and Facility requirements are incorporated into our policy manuals. The Facility shall approve all local institutional policies developed by PrimeCare Medical pursuant to this contract.

ACCREDITATION

PrimeCare Medical is a strong supporter of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA) accreditation processes. Over the years, PrimeCare Medical has successfully achieved accreditation, as well as re-accreditation, from these agencies in 100% of our audits; earning NCCHC Accreditation at forty-three (43) of our contracted facilities and ACA accreditation at several others. We are extremely proud of these accreditations and of the fact that not only have we achieved accreditation each and every time that we have applied, but also the fact that we have never lost



an accreditation at any of our contracted facilities. The only instance in which PrimeCare Medical has not applied for and achieved accreditation exists with a few of our smaller correctional institutions where such accreditation is not required by the client. One of the key reasons why we feel so strongly about these agencies and their accreditation processes is that they provide our clients with an unbiased, third party evaluation of the level of service PrimeCare Medical provides.

PrimeCare Medical has successfully achieved and maintained NCCHC Accreditation an astonishing one hundred sixty-eight (168) times for those contracted facilities that have requested NCCHC Accreditation. PrimeCare Medical has also earned the distinguished honor of having achieved NCCHC Accreditation at two (2) of the first state-wide correctional systems in the Country; the West Virginia Regional Jail Authority and the West Virginia Division of Juvenile Services. Additionally, PrimeCare Medical is extremely proud of the fact we have earned the distinct honor of being recognized by the NCCHC as “Facility of the Year” in 2011 at the Lehigh County Prison in Allentown, Pennsylvania. Although we have had numerous facilities nominated for this award throughout the years, this was the first instance in which we received it. Additionally, PrimeCare Medical is very proud of earning the prestigious honor of being recognized as the 2016 Program of the Year for its Broad Array of Inmate Health Programs at the Dauphin County Prison in Harrisburg, Pennsylvania. This is a distinguished honor issued to only one correctional health care facility in the country each year.

Since our inception, PrimeCare Medical has always provided a guarantee to each of our clients of our proven ability to successfully manage and operate their institutional health care programs on a daily basis so that we will not only achieve accreditation from any agency requested, but also that we will maintain such continuous accreditation for the life of any medical services contract. Thus, we can state without hesitation that by awarding the Putnam County Correctional Facility health care contract to PrimeCare Medical, that we will maintain NCCHC Accreditation at your Facility for the life of this medical services contract. All fees and document maintenance associated with NCCHC Accreditations shall be the responsibility of PrimeCare Medical.

PrimeCare Medical’s model of correctional health care establishes each individual facility’s on-site Health Services Administrator’s primary responsibility as managing the day-to-day operations of their Medical Department in a manner consistent with all applicable standards. The Health Services Administrators’ efforts are further supported by our established regional and senior level management personnel.

Additionally, we have invested significant amounts of time and energy in developing our completely customized Continuous Quality Improvement Programs, which are designed to monitor and analyze all aspects of our health care delivery systems, to include our uniquely devised Peer Audit Review Program. This program was developed to mirror the NCCHC and ACA Accreditation programs; all of which are further detailed in the below sections of our Proposal. It is the combination of these management systems and quality assurance tools that enables PrimeCare Medical to achieve and maintain a perfect accreditation history.

Additionally, PrimeCare Medical shall participate in any other required audits / external reviews that are conducted at the Putnam County Correctional Facility and shall assist the Facility in obtaining accreditation through the New York State Sheriffs Association and in achieving PREA Certification. Should any deficiencies be noted, appropriate corrective action plans shall be prepared and initiated through the Health Services Administrator and Medical Director.

QUALITY IMPROVEMENT PROGRAM

PrimeCare Medical embraces an active Continuous Quality Improvement (CQI) Program within all contracted facilities. The program takes a multidisciplinary collaborative approach to ensure that all inmates/patients under the care of PrimeCare Medical receive appropriate, timely and clinically sound medical treatment. Any existing quality assurance programs being conducted by the Facility shall also be integrated into this process.

A CQI committee will be formed and is chaired by the on-site Medical Director. The committee meets monthly and includes a representative(s) from the PrimeCare Medical Corporate Office, Prison Administration, Security, Treatment, Mental Health, Pharmacy, Dentistry, Medical Records, and Dietary; as well as the Health Services Administrator. The committee reviews findings of monthly audits which cover all aspects of the health care delivery system, as well as, discuss the following mandatory topics: access to medical services, mortalities, inmate/patient grievances, pregnancies, hospitalizations, infirmary care, dialysis care, outside consultations, suicide/attempted suicide, adverse patient occurrences, emergency response, infection control, patient/staff safety, staffing, monthly environmental and kitchen inspections, credentialing, training, pharmacy, diagnostic testing, diets, health records, dentistry, intake and discharge planning and mental health concerns. These items are also reviewed for patterns and trends that may have developed since the last committee meeting.

Audit findings that fall below established thresholds, to include any patterns or trends that have been identified, are discussed in-depth by the committee, a plan is developed to bring the indicators into compliance, and the necessary corrective actions are taken by the appropriate committee member(s). Indicators below the established thresholds are monitored until the CQI committee determines there to be continued evident compliance. Until such time, continuous re-evaluation of the plan and continued corrective action efforts shall occur. This is typically done through the development and implementation of a Process and Outcome Study based upon the identified deficiencies. These studies are completed every month for a minimum period of six (6) months and until the findings exceed the established thresholds for a minimum of three (3) continuous months. This three (3) month timeframe ensures that a realized compliance is not merely a one (1) month phenomenon, but rather, that such compliance has been established for the long term and that true corrective action measures have been adopted as customary practice.

PrimeCare Medical has an established chart review process that is tasked on a monthly audit calendar. The monthly audit calendar is followed by the Health Services Administrator each month, which provides the health related topics that are to be studied for the particular month. At minimum, the PrimeCare Medical Health Services Administrator, or medical staff designee, is required to conduct monthly chart reviews of at least a five (5%) to ten (10%) percent random

sample of active charts. During this review, established criteria are applied to each chart and identified problems are immediately referred to the responsible physician with follow-up by the Medical Review Committee. In all cases, monthly reviews must be completed on adverse patient occurrences, acute care hospitalizations, medical emergencies, conditions requiring outside medical services, and medical grievances. The responsible physician must be able to demonstrate that inmates/patients are receiving appropriate care and all written orders and procedures have been properly carried out. Indicators on audits are based on NCCHC Standards. The Putnam County Correctional Facility practices and protocols will be integrated into this CQI system upon a contract award.

PrimeCare Medical has also developed a comprehensive Peer Audit Review system, in which various members of the middle to upper level management TEAM travel on-site to each contracted Facility every six (6) months to complete an internal review of all systems, policies, and procedures to verify and validate their respective compliance measures. These Peer Audit Reviews have been designed around and mirror the NCCHC Accreditation inspection process, thereby ensuring compliance with all applicable standards. PrimeCare Medical's goal is to operate according to policy and procedure/standards at all times. With the peer audit reviews being completed every six (6) months, it allows on-site staff to be continually educated in the process of NCCHC Accreditation and ensures medical departments are striving for continued policy compliance, regardless of when the next accreditation may occur.

Over the years, PrimeCare Medical has also contracted with various other agencies whose expertise is in the field of correctional health care as part of our continued efforts for continuous quality service improvement. Most recently, PrimeCare Medical has contracted the services of Correctional Medical Monitoring and the National Center on Institutions and Alternatives, who have reviewed, audited, and analyzed different aspects of our health care delivery program; thus, ensuring that PrimeCare Medical is always striving to provide the most appropriate and cost effective levels of health care in the industry.

PrimeCare Medical also completes clinical performance evaluations each year on all professional health care staff. Random samplings of the provider's charts are pulled and an audit on the documentation and soundness of clinical judgment is completed by another provider of equal or greater training in accordance with applicable standards. Findings are documented and discussed with the individual provider, and if necessary, a confidential plan of corrective action is developed through the Utilization Review Committee. Any noted deficiencies shall be corrected in a timely fashion. An unplanned peer review may also be initiated in response to inmate/patient complaints or inmate/patient care issues. The Peer Review will be conducted by an individual who does not regularly perform services at the facility being evaluated. Such auditor shall be of equal or greater training than of the individual being audited. The outcome of the review is designed to be constructive and provide a learning experience for the provider. Alternatively, if corrective action is necessary, a Corrective Action Plan will be formulated that includes timeline for remediation. If the issues are not corrected, recommendations will be dealt with by the supervisor of the provider and the PrimeCare Medical Utilization Review Committee.

The Medical Director, Regional Manager, and Vice-President shall review all reports, minutes, audits and findings every month for each of their assigned facilities. These individuals will also attend each of their assigned facilities' CQI meetings at a minimum of quarterly. This system allows individual facilities' accomplishments and deficiencies to be viewed from a more global perspective and allow for study and analysis of any potential regional trends that may develop. Relevant findings of the audits and CQI committee meetings are discussed at monthly medical department staff meetings to teach an understanding of the importance of following policy and procedure and to continually educate staff in clinically sound care. PrimeCare Medical will also participate actively on any local or Statewide Quality Improvement Committees.

PrimeCare Medical shall provide quality management services to support the provision of the comprehensive health service program. PrimeCare Medical shall be responsible for all costs incurred for these services. Quality management support services shall be system-wide and have already been established in the existing PrimeCare Medical contracted facilities. PrimeCare Medical shall provide written documentation to substantiate these services, which shall include at a minimum, the following:

- [Continuous Quality Improvement \(CQI\)](#) - This is designed to monitor the quality of health services delivery. This includes such items as chart review by a qualified health care professional with the appropriate recommendations for corrections of any discrepancies.
- [Infection Control](#) - This is designed to provide surveillance of infections, to institute preventative measures, and to report those infections in accordance with applicable laws. Infection control monitoring shall be an on-going process.
- [Utilization Management](#) - This is designed to monitor and review all outside consultations and in-patient services. PrimeCare Medical has a written plan of action which addresses, at a minimum, the mechanisms which will facilitate timely and appropriate consultations, specialty referrals, and out-patient and in-patient hospitalizations.
- [Risk Management](#) - This is designed to manage critical incidents. It shall include mortality review procedures.
- [Safety and Sanitation Inspections](#) - This is designed to monitor institutional food service, housing and work areas within the contracted facilities. PrimeCare Medical coordinates monthly safety and sanitation inspections and makes appropriate recommendations for corrections of any discrepancies.

The intent of the above process is to ensure that problems are found as they occur and appropriate corrective action is taken immediately. In order to further ensure that corrective action is taken, all minutes of the Quality Assurance Committee and the Quarterly Tracking Report are forwarded to both the on-site Medical Review Committee and the Corporate Medical Review Committee.

Upon receiving the information at Corporate Headquarters, a Medical and Risk Management Review is conducted by the Corporate Medical Director and the Director of Risk Management. The minutes of both the Quality Improvement Committee and the Tracking Report will be carefully reviewed and, if necessary, on-site visits will be conducted. Throughout the process, physician and nursing notes will be compared to ensure that there is continuity in the medical records. Where problems are found, every attempt will be made to educate the physician and nurse in a positive, constructive manner.

All findings and required reports and chart audits are reported by PrimeCare Medical to the Putnam County Correctional Facility to ensure the highest quality of inmate/patient health care is being provided in the most efficient, cost-effective manner possible.

UTILIZATION REVIEW & COST CONTAINMENT

PrimeCare Medical has an effective Utilization Review procedure. All hospitalizations, outpatient procedures, outside consultations, outside diagnostic procedures, and non-formulary medication requests are subject to review by the Corporate Utilization Review Committee. Elective and experimental drugs and procedures are not utilized unless the immediate health or quality of life of the inmate/patient will be adversely affected. Emergency issues are handled by the individual facilities' Physicians, but an immediate report to the Corporate Medical Director is made once a situation has stabilized. Pre-approval is requested from the U.S. Marshall's Service or U.S. Immigrations on all Federal Inmates/Patients. This Utilization Review procedure shall demonstrate to the Putnam County Correctional Facility that the use of off-site services is appropriate and that the length of stay, if applicable, is neither longer nor shorter than medically indicated. PrimeCare Medical's Corporate Utilization Review Committee is multidisciplinary in scope and is comprised of the following members:

- [Carl A. Hoffman, Jr., D.O., D.Sc., CCHP](#) - President and Corporate Medical Director, with over forty (40) years of correctional health care experience.
- [Victoria Gessner, M.D.](#) - Assistant Corporate Medical Director, with approximately twenty (20) years of correctional health care experience.
- [Todd W. Haskins, RN, BSN, CCHP](#) - Vice President of Operations, with over twenty-five (25) years of correctional health care experience.
- [Paul W. Navarro, M.S.N., NP-C, CCHP](#) - Junior Vice President of Clinical Operations and Nurse Practitioner, with nearly fifteen (15) years of correctional health care experience.
- [Jennifer Mroz, MS, PA-C, CCHP](#) – Director of Clinical Operations, with over thirteen (13) years of correctional health care experience.

PrimeCare Medical utilizes aggressive case management for all inmates/patients identified as being at risk for exacerbation of their chronic illnesses related to being incarcerated. It is

PrimeCare Medical's belief that through aggressive case management, the health needs of the Putnam County Correctional Facility high health risk population will be managed in the most efficient and cost-effective manner possible; thus resulting in the most favorable inmate/patient health outcomes. This team's primary responsibility is to aggressively case manage all inmate/patient hospitalizations, specialty consultations, and acute care inmates/patients; providing daily progress updates to the Utilization Review Committee.

Additionally, PrimeCare Medical's Utilization Review Program includes:

- An identified percentage of all cases for medical provider review.
- An identification of whether the determination is such that a medical provider becomes involved.
- The number of medical provider requests that would be reviewed in a year, identifying how many were approved for Medical / Surgery, Mental Health, and Dental Services.
- Implementation of a coding system for diagnoses and procedures.
- Develop review criteria and procedures for determining medical necessity for proposed treatment (including chemical dependency withdrawal), admission to off-sites facilities and/or the infirmary to include appropriate length of stays; mental health care (in-patient and out-patient); case management; and out-patient services. Prior authorization from the Utilization Review Committee is required for all such care, except for in emergent situations as detailed above. Reviews shall occur within a timely manner, typically within twenty-four (24) hours of request, to facilitate timely access to care. All such requests will be reviewed to ensure such care is in accordance with applicable clinical standards so that the inmate's/patient's medical needs are addressed and to quickly redirect certain cases to the best alternative sources of required treatment.
- The Utilization Review Committee shall have the ability to review and discuss any non-formulary and/or consultation requests with the respective on-site providers / facility medical directors to ensure the most clinically appropriate care is being provided to the inmates/patients. All such communication and requests shall be appropriately documented.
- The system shall accommodate and provide for an appeal process that is quick and that allows the primary care physician to appeal a case, along with his/her supervisor, to a committee of physicians overseen by the Corporate Medical Director who shall serve as a final arbiter in all cases.

PrimeCare Medical shall cooperate and work with the Putnam County Correctional Facility to assure that its Utilization Review Program staff and Quality Assurance Staff have an effective means of communication with the Facility regarding all critically ill inmates/patients.

MANAGEMENT INFORMATION SYSTEM

PrimeCare Medical tracks all statistics relative to the services detailed throughout this Proposal, to include a staffing analysis, making daily, weekly, monthly, quarterly, and annual reports to the Putnam County Correctional Facility Administration and/or designee. PrimeCare Medical will maintain trend analysis charts on key statistical data taken from the monthly reports and, should an unusual trend occur, the information will be shared with all parties involved. As part of this process, PrimeCare Medical will:

- Make cost containment information available to the Administrative Office or selected designee as requested.
- Track all costs related to primary health care services by:
 - Laboratory Services
 - Radiology Services
 - Other Ancillary Services (i.e., physical therapy, clinics, oxygen therapy)
 - Outpatient Services
 - Specialty Services - by Specialty
 - Dental Care
 - Inpatient Services
 - Pharmaceutical
 - Medical Supplies

The above management information system will be capable of providing statistical data necessary for the evaluation and monitoring of health services. Information gathered by PrimeCare Medical will be utilized for the preparation of the following documents:

- Monthly reports of services.
- Reports for administrative meetings with Facility officials.
- Annual reports for the analysis of services provided.
- Specifically, PrimeCare Medical shall provide a monthly and an annual report that includes:
 - Inmate's/Patient's requests for various services
 - Inmates/Patients seen at physician's clinic
 - Inmates/Patients seen by dentist
 - Inmates/Patients seen by mental health
 - Special Needs Unit admission, patient days, average length of stay
 - Off-site hospital admissions
 - Medical specialty consultation referrals
 - Intake medical screening

- History and physical assessments
 - Diagnostic studies
 - Percentage of inmate/patient population dispensed medication
 - Inmates testing positive for sexually transmitted diseases
 - Inmates/Patients testing positive for HIV
 - Inmate/Patient mortality
 - Other data deemed appropriate by the Facility's Administration and/or the Putnam County Correctional Facility
- Data collection will be monitored by the on-site Medical Director. Monthly reports shall be generated and presented for discussion at each Quality Improvement Committee Meeting. Any significant variances in the data will be investigated and discussed during these monthly meetings. All documents pertaining to health care services will be forwarded to the Quality Improvement Committee for evaluation.

PrimeCare Medical meets at least quarterly with the Facility's Administrators / designee(s) to review and discuss our health care programs at the Putnam County Correctional Facility. Meeting minutes are kept for all such meetings. Meetings are to be attended by PrimeCare Medical staff, members of the Facility's staff, and any other individual deemed appropriate. Meetings should, as much as possible, be multi-disciplinary in their scope. The chairperson may determine the specific focus of any meeting. Reports shall be submitted monthly on the health care delivery system at the Facility. Topics shall include the effectiveness of the health care delivery system, a description of any environmental factors which may require improvement, changes effected since the last report, and recommendations for corrective action if needed. Depending on contractual and jurisdictional requirements, other additional reports may be required. The Health Services Administrator is responsible for thorough review and knowledge of the medical services contract and its requirements. Standard reporting requirements of PrimeCare Medical include the following, which can be further enhanced to meet the specific needs of the Putnam County Correctional Facility:

- The Quarterly Report shall include an agenda to address at a minimum the following topics: Minutes from previous Quarterly Meetings, Review of Catastrophic Medical Expenses, Medical Grievances and Resolutions, Medical Staffing, and Quarterly Statistical Summary.
- Along with this report, the Health Services Administrator may be asked to submit a copy of Staff Meeting Minutes, QI/QA tools and minutes, Quarterly Pharmacy Inspections, Daily Head Count and any other reports that may be required depending on contractual requirements.
- The Statistical Summary Report shall include morbidity statistics for the quarter. Trends shall be analyzed to determine if corrective action is needed.
- The Environmental Health and Safety Report is to be completed monthly by the PrimeCare Medical Health Services Administrator. The Environmental Health and Safety

Report evaluates the Facility to determine if it is safe and clean in order to promote good health.

- The Annual Report is typed synopsis of the year's major events, an overview of the annual QI/QA review in accordance with PrimeCare Medical Corporate Policy, major facility achievements for the year, and goals and objectives for the upcoming year.

Additionally, PrimeCare Medical shall meet weekly with Facility staff and the Facility Administrators to review inmate/patient medical services and to propose corrections of deficiencies or problems, to identify in-services training needs and to suggest improvements to the delivery of contracted services. PrimeCare Medical will communicate with the Putnam County Correctional Facility more frequently as any potential issues are noted or chronically ill inmates/patients are identified. Furthermore, a daily communication protocol will be developed between PrimeCare Medical and the Putnam County Correctional Facility. Additionally, PrimeCare Medical's executive management personnel shall be available at the request of the County to meet to discuss any questions or concerns related to the performance of this contract, as is the standard philosophy of PrimeCare Medical in each of its contracted institutions. Required PrimeCare Medical meetings include, but are not limited to the following:

- [Quarterly Administrative Meetings](#) - PrimeCare Medical Regional Office personnel, Health Services Administrator and Facility Administrator or designee. Purpose: to review effectiveness of health care services.
- [Monthly Health Service Staff Meetings](#) - PrimeCare Medical administration and medical staff. Purpose: to disseminate information and problem solving.
- [Quarterly Pharmacy & Therapeutics Meetings](#) - Pharmacists, PrimeCare Medical Administration, Medical Director / Nursing Supervisor. Purpose: to evaluate and monitor quality care delivery criteria, focus on quality improvement, review the appropriateness of prescriptions ordered at the Facility and to review any changes to the formulary made by the Pharmacy and Therapeutics Committee.
- [Monthly Continuous Quality Improvement Meetings](#) - PrimeCare Medical selected staff, Medical Director and Psychiatrist. Purpose: to evaluate and monitor quality care delivery criteria and focus on quality improvement.
- [Quarterly Infection Control Meetings](#) - PrimeCare Medical Health Services Administrator, Medical Director, Staff Physicians, Nursing Director, Facility Treatment Staff. Purpose: to report incidence of infectious and communicable diseases and initiate a way to promote a safe and healthy environment.
- [Monthly Medical Administrative Committee \(MAC\) Meetings](#) – PrimeCare Medical Health Services Administrator, Facility Administration Staff, and all other parties requested by Facility. Purpose: to review effectiveness and appropriateness of health care services, inmate/patient treatment plans, and efficiency of medical operations.

TECHNOLOGICAL ENHANCEMENTS

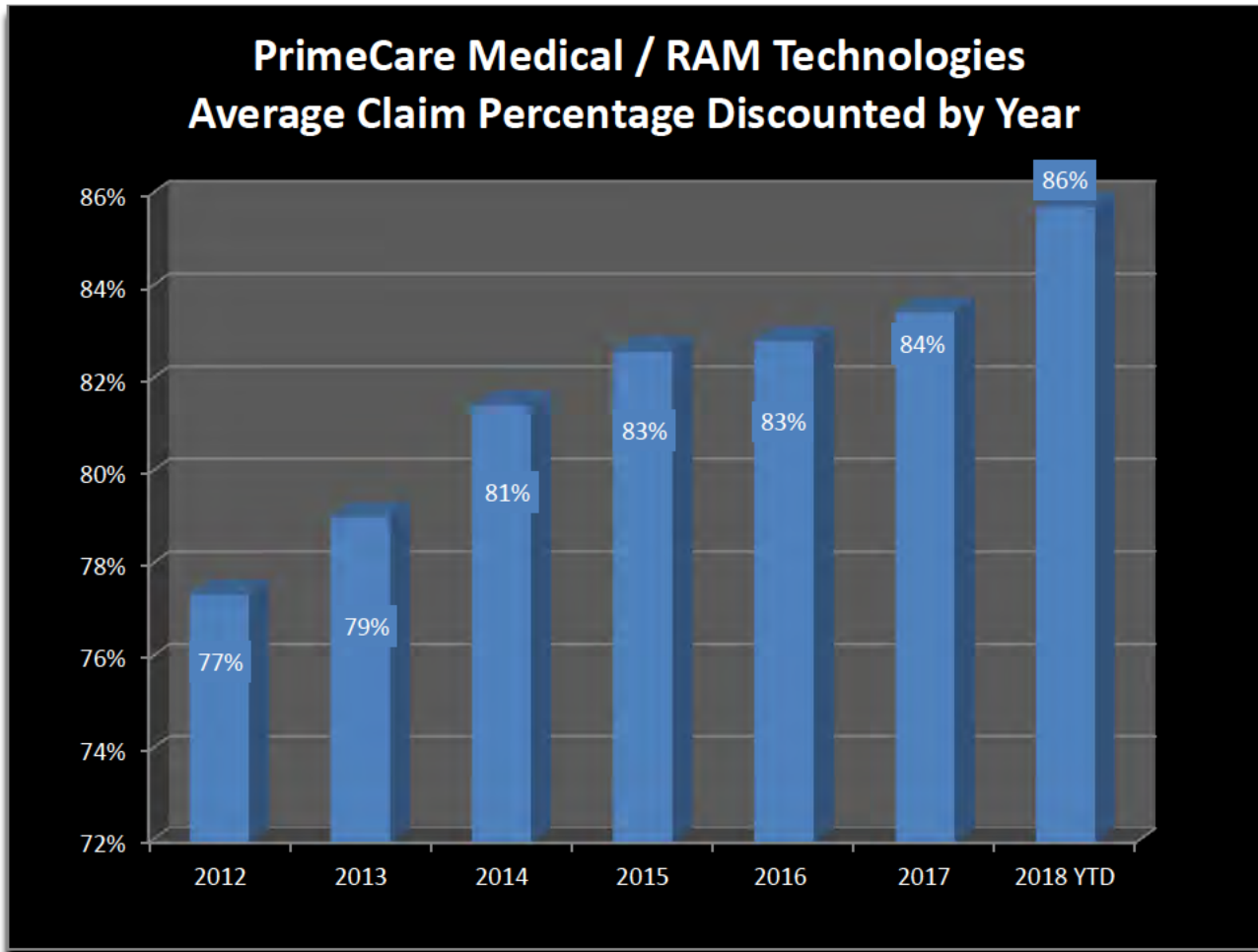
PrimeCare Medical has devoted significant amounts of resources and has made substantial financial investments into an array of technological based advancements, which have taken us to the cutting edge of correctional health care. These investments have enabled PrimeCare Medical to be a significant force in a highly competitive market and remain at the forefront of correctional medicine. Through the successful development and implementation of these critical technological programs, PrimeCare Medical has not only improved the provision of overall care to our inmates/patients, but has also realized substantial increases in operational effectiveness and staffing efficiencies.

PrimeCare Medical’s most significant stride in the technology-medical industry has been through its complete customization and integration of its electronic medical record system, CorEMR. The operational efficiencies of this system allows for immediate implementation of policy changes, enhanced continuity of care, improved inmate/patient outcomes, and most importantly, prevents inmates/patients from “*slipping through the cracks*”.

PrimeCare Medical has also made significant enhancements within our internal financial management programs, such as our state-of-the-art inmate/patient manager program, HEALTHsuite, created by RAM Technologies. This integrated claims processing system tracks all inmates/patients in a step-by-step tracking format from the date of an initial claim until payment is made to the treating institution or provider. This program utilizes McKesson products to assist with claim appropriateness and fiscal management of each inmate’s/patient’s interaction with all off-site providers. Through the integration of CorEMR and HEALTHsuite, medical claims can be monitored and approved in a more simplified approach that increases our billing efficiencies and accuracies while only paying for appropriately authorized claims. Below are graphical illustrations of the significant cost savings realized by PrimeCare Medical and our contracted clients as a result of this proven claims processing program in conjunction with other applicable federal and state legislation.

Advancements in Technology

- CorEMR – Corrections based EMR
- PCM Portal
- HEALTHsuite by RAM Technologies – McKesson & Optum Coding
- “eConsults” for offsite care tracking
- PCM NOW



Additionally, PrimeCare Medical has developed an internal clinical authorization system to more easily communicate, collaborate and determine what treatment regimens are best for our inmates/patients. This eConsult System enables health care providers at multiple facilities to seek clinical guidance and advice concerning complex health care treatments from our Corporate Utilization Review Committee.

PrimeCare Medical has also created an internal data sharing platform, PCM Portal, to bring information together from various sources. This unified approach is now available to our employees, vendors and clients to access information in a consistent and efficient manner. The PCM Portal is also the “launch-pad” for several customized reporting interfaces that we have developed. This portal enables PrimeCare Medical to update staff and other parties with new policy and procedural protocols, necessary employee credentialing renewals, and other critical health updates.

PrimeCare Medical has created an instant reporting and monitoring system. This system, PCM *NOW*, responds to business/medical issues by automatically sending alerts or notifications when pre-defined events occur. These alerts can include anything from certain inmate/patient events

(i.e., high blood pressure, low blood sugars, etc.) to inmates/patients approaching monetary thresholds on their medical claims. PCM *NOW* allows for alerts to be sent via email and/or text in real time. It is configurable through our electronic medical record system to send notifications on such items as: medical restrictions, specialty diets, suicidal ideations, hospital updates/reports and other predetermined thresholds and actionable items. This NOW technology gets information delivered to key decision makers quickly. This technology puts PrimeCare Medical on the forefront of technology, “NOW”.

CORPORATE SAFETY COMMITTEE

In an effort to promote and foster the safest work environment possible, PrimeCare Medical has assembled a Corporate Safety Committee to provide continuous assessment and recommendations with regard to the safe operations of our medical departments in a wide variety of correctional settings throughout the Company. The Safety Committee has continued to evolve and is currently composed of nine (9) members who represent the regional interests and issues of their respective areas of responsibility. These areas include West Virginia, Maryland, New Hampshire, New York and Pennsylvania. This membership aggregate insures compliance with all Federal safety regulations in addition to all State and Local safety regulations throughout the PrimeCare Medical system. PrimeCare Medical’s Safety Committee has a demonstrated ability to reduce the numbers of work related injuries sustained by our health care personnel and decrease unnecessary health related expenses; thus creating a more productive labor force within our contracted correctional institutions.

Safety Committee Meetings are held on a monthly basis and follow a published agenda. The agenda is organized into sections that include Old Business, New Business, Review and Discussion of Workers Compensation Claims and Review and Discussion of Near Misses. This format allows for interaction and collaboration among committee members and has been an integral part in developing effective safety related policies. Meeting minutes from each meeting are generated and maintained in addition to attendance sheets, that each attendee is required to sign. All records related to the Safety Committee are maintained at the PrimeCare Medical Corporate Office in Harrisburg, Pennsylvania.

LEGAL, RISK MANAGEMENT & INSURANCE PROGRAMS

PrimeCare Medical will assemble a team of New York and Pennsylvania attorneys to represent its interests and those of the Putnam County Correctional Facility. Each of these attorneys will work closely with Thomas Weber, Esquire, Chief Executive Officer for PrimeCare Medical in a proactive manner to aggressively defend medical operations at the Putnam County Correctional Facility. This will be done in a cooperative fashion with the Facility and will emphasize working as a team. PrimeCare Medical always stands with its clients and defends them when inmate/patient medical lawsuits are filed. Together, this team of legal professionals will defend against frivolous inmate/patient medical lawsuits, will assist in obtaining court orders for medications and other interventions that may be necessary to appropriately manage mental health emergencies, will consult on a variety of medical issues, and will intervene on behalf of the Putnam County Correctional Facility where medical care is at issue. PrimeCare Medical agrees

to cooperate with the Facility in all matters under individual or joint litigation. In addition, PrimeCare Medical will act as a consultant to the Facility upon request in litigation where the Corporation is not involved.

PrimeCare Medical will furnish the Putnam County Correctional Facility certificates verifying that it carries insurance for the life of this contract naming the Putnam County Correctional Facility as an additional insured. The policies will contain a covenant by the company issuing the same that the policies will not be cancelled by the issuing company unless a thirty (30) day written notice of cancellation first be submitted to the Putnam County Correctional Facility. All premiums due upon these policies will be paid by PrimeCare Medical. PrimeCare Medical shall carry and maintain insurance limits in the minimum amounts as required by the RFP.

Professional liability coverage for PrimeCare Medical is underwritten through Syndicates at Lloyd's. Lloyd's specializes in underwriting medical professional liability insurance for clients with unusual coverage needs. Lloyd's underwrites under a binder authority on behalf of The Beazley Group. The Beazley Group is rated A+, XV by A.M. Best. This gives PrimeCare Medical the substantive financial backing needed in a tight insurance market. General Liability, Umbrella Liability, and automotive coverages are through Cincinnati Insurance Company, with Workman's Compensation coverage provided through Old Republic Insurance Group, which is rated A+, XII by A.M. Best. The Facility will be named on all general liability and automobile liability policies as "Additional Named Insured" for the proposed work. All Insurance Coverage Limits shall meet the minimum limit requirements as set forth in the RFP.

PrimeCare Medical has insurance professionals available to assist in identifying insurance needs and meeting these needs with state-of-the-art products. These include: Matthew Anderson, Jon Kirssin, and Clay Foltz.

- [Matthew Anderson](#) is a representative of CRC Professional Liability/Healthcare Insurance and serves as medical professional liability broker and consultant to PrimeCare Medical. He is available to assist on any health care professional liability issue.
- [Jon Kirssin](#) is President of Captive Formation Management Corporation. He has been the focal point in adapting PrimeCare Medical's coverage's to changes in the marketplace. His specialty is alternative markets.
- [Clay Foltz](#) is PrimeCare Medical's consultant on all surety issues, including bid, payment and performance bonds.

All three individuals are available to the Putnam County Correctional Facility on any insurance-related issue.

HIPAA COMPLIANCE

As a result of its services in correctional institutions throughout the region, PrimeCare Medical has diligently fulfilled its obligations to protect all inmates/patients privacy rights, including

those established under the Health Insurance Portability and Accountability Act (“HIPAA”). This compliance continues to be monitored and adjusted as the regulations are modified and/or affected by other provisions, such as HITECH. PrimeCare Medical has a company-wide Privacy Officer, as well as a Security Officer. Respectively, the Privacy Officer and Security Officer are charged with the responsibility of overseeing HIPAA compliance. Immediate contact to these individuals will be made available to all appropriate Facility employees involved with, or concerned about, inmate/patient privacy matters. In addition, the Privacy Officer and Security Officer have immediate access to PrimeCare Medical’s Chief Executive Officer, who is well versed on HIPAA compliance, having written and extensively lectured on the subject matter. PrimeCare Medical has instituted company-wide training on HIPAA compliance on at least an annual basis and will continue to do so throughout the term of any health services agreement.

LIQUIDATED DAMAGES & PERFORMANCE DEFICIENCY ADJUSTMENTS

In accordance with Putnam County’s RFP, PrimeCare Medical acknowledges that its performance under this contract is subject to the County’s performance deficiency adjustments, and liquidated damages should we fail to meet the terms and conditions set forth by this agreement, as further detailed within the RFP.

HUMAN RESOURCES AND PERSONNEL

For over thirty-two (32) years, PrimeCare Medical has had the pleasure of partnering with an amazing multitude of hard working and dedicated health care professionals. Our commitment to preserving jobs for locally qualified individuals is foremost to our hiring practices as our employees are the driving force behind our continued success. At PrimeCare Medical, we recognize the need to employ qualified, well-trained and appropriately licensed individuals that share the same core values as our Corporation. It is these hard working employees who are on the front lines of our correctional health care delivery systems and continue to impress and carry out our Company’s mission. These dedicated employees are paramount to our continued success as an industry leader in the field of correctional health care.

PrimeCare Medical shall provide sufficient staffing services to appropriately fulfill the needs of the Putnam County Correctional Facility as detailed within our proposed staffing matrix. Any vacant positions that should occur shall be the responsibility of PrimeCare Medical to secure appropriate coverage. Due to PrimeCare Medical’s existing footprint in the local region, we are uniquely suited to access a large network of health care staffs who are currently employed and licensed in the State of New York, as well as, providers and other necessary resources to assist with staffing vacancies.

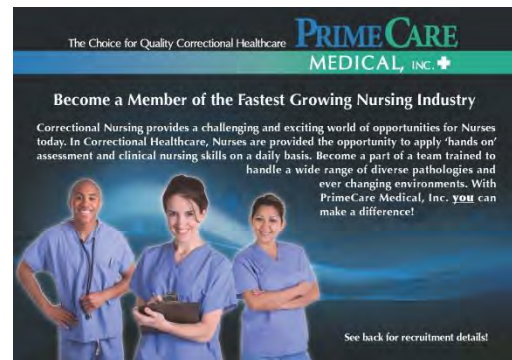
RECRUITMENT PRACTICES

PrimeCare Medical’s current recruitment practice was formulated in response to the tight labor market for health care personnel as an adaptation to the realities of today’s marketplace. PrimeCare Medical employs a Junior Vice President Operations and Recruitment to coordinate recruitment activities at every PrimeCare Medical facility. The position oversees two (2)

recruitment specialists, in addition to other duties in the Operations Department. Both recruitment specialist are full-time and are dedicated to staffing. They will assist, through proven techniques that have been proven as effective recruiting/hiring tools, including: local advertising, online, job fairs and professional conferences, national and regional professional publications, and direct mailings. PrimeCare Medical recognizes the unique issues of staffing in a correctional environment and has identified resources for each designated region. PrimeCare Medical has a proven track record in recruiting and retention; currently recruiting, hiring and retaining employees in the State of New York. PrimeCare Medical has also identified the need for use of several staffing agencies to assist with staffing in emergent situations as staffing issues may arise.

PrimeCare Medical shall employ only such personnel who are qualified by training, education and experience for the positions they hold; and who meet all applicable licensing and certification requirements for practice in the State of New York. PrimeCare Medical is committed to using medical personnel residing and paying taxes in New York and shall make all reasonable attempts to retain existing medical staff, as long as they are appropriately licensed and otherwise qualified to provide quality medical services. All members of the existing health care staff shall be given priority as to scheduling of interviews and offering of positions with PrimeCare Medical. We will ensure strict compliance with federal immigration law. In accordance with Facility policy, all potential applicants are required to successfully complete a criminal background screening, as well as other required screenings to include fingerprinting and urine drug screen, prior to being offered a position at the Facility. The Facility's Administration shall have the right of approval for all employees and prospective employees to be utilized by PrimeCare Medical at the Putnam County Correctional Facility. The Facility's Administrators, or designee, shall also be involved in the interview and selection process for the Medical Director and Health Services Administrator(s).

Not only does PrimeCare Medical recruit competent nursing and health care personnel, it also utilizes a pre-employment screening which is EEOC compliant and designed to assess key job-related characteristics and identify predictable hiring mistakes. It produces employees with higher levels of workforce productivity in such areas as work ethic, care-giving attitudes, reliability, retention, integrity, and client service. PrimeCare Medical's hiring process starts with applicant identification and moves through a series of steps from self-survey screenings to face-to-face interviews, which ultimately can result in an offer of employment letter and institutional placement. Through our paperless onboarding and self-service module, we have made the new hiring and orientation processes more efficient and more attractive for our employees; thus, resulting in a more stable workforce.



All PrimeCare Medical personnel at the Putnam County Correctional Facility shall comply with all current and future federal, state, and local laws and regulations, court orders, administrative

regulations, administrative directives, and policies and procedures of the Facility. All such personnel are subject to removal from the Facility if the Facility's Administration determines an individual has engaged in illegal, unprofessional, or threatening behavior, or has violated the terms of the contract. PrimeCare Medical and the Facility shall consult on all personnel matters prior to terminations / separations from employment occurring.

PrimeCare Medical also takes a proactive approach to retaining employees. We believe hiring the right person from the start is the best way to reduce turnover. Traditionally, we have enjoyed below average industry standards in turnover rates. PrimeCare Medical also has systems in place for annual employee review programs, which are completed each year on all professional health care staff. Through a comprehensive recruiting and screening process, a thorough orientation program, and on-going commitment to continuing education in-services, PrimeCare Medical believes that the health staff at the Putnam County Correctional Facility can be appropriately managed and the turnover rates can be minimized.

EQUAL EMPLOYMENT OPPORTUNITIES

PrimeCare Medical is committed to equal employment opportunity and maintaining a workplace free from harassment or hostility. PrimeCare Medical does not discriminate against employees, contractors, or job applicants on the basis of race, religion, color, sex, age, national origin, ancestry, or on any other basis prohibited by law. This nondiscrimination policy applies to all terms and conditions of employment. To assure the existence of such a workplace, PrimeCare Medical requires all employees, contractors, and job applicants to read, sign, and abide by its Policy on Equal Opportunity and Sexual Harassment. It has become a part of our professional credentialing package.

DRUG-FREE WORK PLACE

PrimeCare Medical acknowledges and certifies its understanding that the following acts by PrimeCare Medical, its employees or agents performing services pursuant to this Agreement are prohibited: (1) The unlawful manufacture, distribution, dispensing, possession or use of alcohol or other drugs; and (2) Impairment from the use of alcohol or drugs (except the use of drugs for legitimate medical purposes as directed by a physician). PrimeCare Medical shall further comply with any Facility policy regarding initial and/or random employee drug screening as part of a joint effort to provide for a drug-free work place environment.

SECURITY REQUIREMENTS

PrimeCare Medical will work in conjunction with the security staff of the Putnam County Correctional Facility. The Company realizes the importance of security at a correctional facility and pledges full cooperation. All staff employed by PrimeCare Medical are subject to the same security requirements, to include obtaining and maintaining a security clearance to the Facility, as all correctional personnel. PrimeCare Medical will inform the Putnam County Correctional Facility if any applicant or employee requires ADA accommodations. PrimeCare Medical understands the nature of essential job functions and requirements of staff, to include:

negotiating stairway, mobility and movement around interior compound, lifting of inmates/patients, written and oral communication to inmates/patients and staff and standing for long periods of time. PrimeCare Medical provide coverage for any employee who is unable to perform their assigned duties in a reliable manner, demonstrates an uncooperative attitude or is deemed to be unsatisfactory by the Administrator of the Facility in which he or she is employed. PrimeCare Medical follows a progression discipline policy for corrective action. PrimeCare Medical's employees are classified as essential employees and understand it is expected to report to work even when other state agencies are closed for emergencies.

EMPLOYEE BENEFITS

Employees currently established as full-time with the current vendor and retained through the transition process will be permitted to waive the waiting period for benefits. Typically, when county correctional facilities transition between health care providers, especially when existing health care personnel are either county employees or part of a collective bargaining unit, their existing benefit packages cannot be matched by the incoming health care provider (i.e., insurance premiums, retirement options, legacy costs, etc.). As such, when PrimeCare Medical transitions this type of program, we will traditionally attempt to off-set these differences through various other types of financial incentive programs, such as offering higher starting wage rates, additional financial bonus programs, higher leave accrual rates; which has proven to be an extremely effective recruiting function for our Corporation. Most recently, with our transition of the Monroe County Jail (New York) health services contract, the health staff had been employed by a competitor prior to PrimeCare Medical transitioning the contract, similar to the current situation in Putnam County. Upon contract award, PrimeCare Medical had aggressively began its recruiting process of existing health care personnel, offering similar type financial incentives to offset the existing benefit programs, as detailed above. The result, an extremely smooth and efficient transition of most all health care staff. All full-time employees receive the following benefits.

- [Health Insurance](#) - Provided by Highmark / Blue Shield, including a prescription drug plan. Dental and vision coverage will be provided through Highmark / Blue Shield.
- [Health Savings Account](#) – Those employees participating in a qualified high deductible plan may elect to participate in a health savings account. Currently, the accounts are administered through Bank of America. Employees may elect a monetary deduction, pre-pay, from their paycheck to be deferred into the account. Qualified medical expenses, as defined by the Internal Revenue Service, may be paid for using money from the account. Funds will roll-over from year to year and the account is portable.
- [Life Insurance / Disability Insurance](#) – This includes a term life insurance policy in which the employee names their beneficiary. The employee can purchase additional life insurance at reduced group rates. A short-term twenty-six (26)

week disability policy is also an insurance voluntary option. Voluntary long term disability is available at a significant reduction in premium.

- Retirement Plan – The Company has a 401(k) Plan in place for all employees who are with the Corporation for a minimum of one (1) year, attain the age of twenty-one (21), and work at least one thousand (1,000) hours per year. The Company also provides a discretionary match for each participating employee.
- Jury Duty / Military Leave / Bereavement – available per written PrimeCare Medical policy.
- Leave – Leave is considered as any time for which an employee is paid for time while not working. Paid leave is available to full-time employees only. Leave is any time off. Since PrimeCare Medical is a twenty-four (24) hour, 365 day per year operation, no holidays, whether legal or religious, are granted as leave. All time taken off during regularly scheduled working hours is considered leave time. Full-time employees are granted leave as follows:
 - Start date through conclusion of first year employment – 0.50 days (4 hours) for each payroll period worked (thirteen (13) days for first year worked).
 - Second year of employment – 0.615 days for each payroll period worked (sixteen (16) days per year).
 - Third year of employment – 0.769 days for each payroll period worked (twenty (20) days per year).
 - Fourth year of employment – 0.846 days for each payroll period worked (twenty-two (22) days per year).
 - Fifth year of employment – 1.0 days for each payroll period worked (twenty-six (26) days per year). Any waiver of this provision must be in writing and signed by the President and Executive Vice President.

EMPLOYEE ASSISTANCE PROGRAM

PrimeCare Medical's Employee Assistance Program (EAP) is provided as part of the Company's health insurance plan, where full-time employees may utilize covered visits for both Outpatient Psychiatric and Outpatient Substance Abuse treatments. They may also utilize the plan for covered visits for both Inpatient Psychiatric Visits and Inpatient Substance Abuse treatments. Employees who are in need of assistance that cannot be covered by Highmark or who may not be part of the plan shall be referred to appropriate local providers.

STAFF TRAINING AND PERSONNEL DEVELOPMENT

PrimeCare Medical shall be responsible for providing educational services for all health services staff and non-clinical staff employed pursuant to this Proposal. PrimeCare Medical's contractual relationship with qualified health care professionals shall provide for support of continuing education activities required for maintenance of licensure. All qualified health care professionals are required to participate in annual continuing education. PrimeCare Medical has an established comprehensive continuing education program for all institutional health care staff as well as PrimeCare Medical staff. Staff employed by PrimeCare Medical pursuant to this RFP shall successfully complete all required hours of annual in-service training. Tools are in place for tracking and retention of individual staff training verification.

PrimeCare Medical requires all of its practitioners to submit an Out Service Training Request (OSTR) for off-site continuing education training. All OSTR requests enter an approval process. PrimeCare Medical strives to reduce the number of off-site trainings for its practitioners through its E-learning and continuing education programs. PrimeCare Medical is committed to continuing education for its staff. All staff members who successfully complete the exam for Certified Correctional Healthcare Professional (CCHP) are fully reimbursed for examination expense by the Corporation. Staff requesting attendance at NCCHC and/or ACA conferences, are given fair consideration.

Additionally, PrimeCare Medical shall assist the institution in providing preventative health education for the inmate/patient population. As described within our Training Section, each training agenda will be developed with the institutional health care staff on mutually identified topics and tailored to the Facility's needs.

Staff is encouraged to continue their education and PrimeCare Medical periodically provides information bulletins to field staff to keep them informed about topics of interest. PrimeCare Medical utilizes a variety of community resources (i.e., hospital, education programs, Red Cross, Department of Health, specialty doctors and nurses), as well as an internal pool of Corporate staff and field staff to provide in-service education programs. PrimeCare Medical pays for a variety of continuing education programs. Staff attending these programs, are then eligible to teach other staff. All staff at the Putnam County Correctional Facility will be eligible to attend Medical In-services at no expense to the Facility.

To date, in-service trainings have addressed the following topics:

- Basic and Advanced CPR
- Mental Health Education / Emergencies
- Basic and Advanced First Aid
- Disaster Planning
- Drug Abuse Education
- HIV/AIDS Education
- In-house Pharmaceutical Prescription (with drug interaction education)
- Management of the Mentally Ill Offender

- Poison Control and Diagnosis/Education
- Industrial and Occupational Injury Education
- Multiple Medical Systems Education
- “Sharps” Container Handling and Disposal
- Suicide Awareness
- Smoking and Tobacco Education
- Sexually Transmitted Disease
- Crash Cart Procedures
- Oral Care
- Prison Rape Elimination Act (“PREA”)
- Rehabilitation Assistance
- Diabetic and Epilepsy Recognition
- Cardiovascular Recognition
- HIPAA Training in Privacy Practices
- Pandemic Preparedness
- Infection Control
- Emergency Medical Treatment and Triage

PrimeCare Medical shall provide eighty (80) hours of orientation to all health care staff within the first thirty (30) days of the start date. PrimeCare Medical will implement a mentoring program, providing each facility Health Services Administrator with a PrimeCare Medical mentor.

Many of the continuing education and training topics for medical staff will be conducted via web-based E-learning modules on topics agreed upon by both PrimeCare Medical and the Facility in compliance with all NCCHC and ACA Standards. PrimeCare Medical will implement instructional systems design (ISD) methodology to develop new training plans on an annual basis. Documentation of training and continuing medical education credits will be kept in each employee’s personnel file. Facility staff will be invited to attend such training at no additional cost.

PrimeCare Medical has built its success on bringing together talented health care professionals who are passionate about delivering quality care for patients, accountability for clients and long-term value for the public. The PrimeCare Medical Team understands that the success of any training program is contingent on the training recipients’ understanding and receptiveness to ongoing training and recertification offerings that will

The PrimeCare Medical Team brings the right mix of experience to help you meet your training objectives.

- Strong track record of working with correctional agencies.
- Our approach leverages our experience of working with correctional agencies to develop and deliver training programs to audiences with varied functional training needs as well as being geographically dispersed across the State.

help in the day-to-day operations. The cornerstone for building a receptive user community is the ability to accurately align training courses, roles, and individuals.

The Putnam County Correctional Facility needs a training strategy that prepares personnel to be proficient in their roles starting immediately with the Putnam County Correctional Facility orientation training delivered at the inception of the contract, ongoing continuing education, and recurring recertification and retraining opportunities. We designed our training program taking into consideration training effectiveness as well as project schedule.

The PrimeCare Medical Team has the expertise and resources to support the training effort required to transform and maintain the skills of the Putnam County Correctional Facility professional staff, as well as our own staff being brought in to provide the health care services requested through this RFP. Specifically, PrimeCare Medical will staff the training team with individuals possessing in-depth medical knowledge and extensive experience in developing comprehensive training programs, creating customized training content, and delivering expansive training curriculums to a diverse user group. PrimeCare Medical also understands its obligation to have its staff comply with all Facility training requirements. Knowing how to deliver effective training to meet these challenges is paramount to the project's success and helps minimize disruptions that an implementation of this size and scope has on staff, business partners, and other stakeholders.

[Career Advancement Paths](#) - It is the policy of PrimeCare Medical to promote from within whenever possible. All openings are posted throughout the entire company before anyone is recruited from the outside.

[Licensing / Certification Requirements](#) - PrimeCare Medical shall be responsible for assuring and verifying that all the required registrations, licenses, board certifications, and credentials associated with the operation are active and in good-standing. This includes, but is not limited to, physicians, physician assistant (PA), nurse practitioner (NP), nursing, optometry, radiology, and other licenses, DEA registration, as well as registration with appropriate State Boards. PrimeCare Medical shall provide the Putnam County Correctional Facility with current resumes and licenses, required by statute, on all applicable qualified health care professional employees as well as those subcontracted, if applicable. All qualified health care professionals shall possess unrestricted licenses. All physicians will be monitored by PrimeCare Medical through a National Physician Databank for any actions which would cause practice concerns while practicing in other jurisdictions. This databank will be used as part of the credentialing process for all current and newly recruited practitioners.

PrimeCare Medical is responsible for all taxes as well as the acquisition of and all costs associated with licensures, taxes, fees, bonds, permits, Workers Compensation, accreditation and all other costs associated in the fulfillment of this contract. PrimeCare Medical shall maintain documentation of the appropriate licensing and accreditation for and hospitals, clinics or laboratories which provide services under this contract.

Duties And Responsibilities - PrimeCare Medical shall ensure the duties and responsibilities of medical personnel shall be governed by written job descriptions approved by the responsible physician and the facility administrator. Verification of current credentials and job descriptions shall be kept on file. Written job descriptions shall include qualifications required and the specific role in the health care delivery system of that position.

PrimeCare Medical intends to use an automated time keeping system at the Putnam County Correctional Facility for payroll and reporting purposes. The current automated time keeping system utilized by PrimeCare Medical is a hand / finger scan device, which is provided through our contracted payroll company, ECI. Further, PrimeCare Medical shall comply with any required Facility sign-in / sign-out procedures.

STAFFING MATRIX

Putnam County Correctional Facility

Position	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hrs/Wk	
DAY SHIFT									
Health Services Administrator (RN)	8	8	8	8	8			40	
Medical Director/Physician		2			2			4	
Certified Registered Nurse Practitioner	2		2					4	
Psychiatrist			3					3	
Registered Nurse						8	8	16	
Licensed Clinical Social Worker	8	8	8	8	8			40	
Dentist				2				2	
Administrative Assistant	8	8	8	8	8			40	
EVENING SHIFT									
Registered Nurse	8	8	8	8	8	8	8	56	
NIGHT SHIFT									
Registered Nurse	8	8	8	8	8	8	8	56	
Total Hours Per Week									261

Professional Services contracts dictate that services shall be provided within a reasonable amount of hours proposed. These hours may fluctuate dependent upon the medical services provider; and the medical services provider never leaves the facility until all of his/her work is completed. Also, the medical services provider and the Health Services Administrator are typically not required to be on-site at the Facility during Federal Holidays. Furthermore, all professional medical services providers shall be available on-call, twenty-four (24) hours per day, seven (7) days per week. PrimeCare Medical’s Facility Medical Directors, if requested by Putnam County Correctional Facility, shall make all reasonable attempts to arrange for courtesy privileges for use of local hospitals for admitting, monitoring, and discharging inmates/patients being hospitalized. Copies of staff schedules shall be provided to the Facility’s Administration on a monthly basis, with a bi-weekly staffing analysis (daily if required) also being submitted, as

required by the RFP. PrimeCare Medical currently completes similar staffing analyses for several of our other contracted client facilities.

Relief Factor to account for combined leave is based upon the PrimeCare Medical's full time employee's employment status and longevity. It is the policy of PrimeCare Medical to ensure that all full-time employees are provided with a sufficient amount of leave to permit time away from work, consistent with facility staffing needs. The leave accrual process starts when an employee is hired full-time. Part-time or PRN staff do not earn combined leave.

Calculating relief factor is based upon the average employee with three years in a full time employment status of 20 days per year of earned leave. The 20 days per year adds an additional 160 work hours (8 hours per day x 20 days) to the employees normal work year or 2080 hours (40 hours per week x 52 weeks per year) for a total of 2240 work hours per year (2080 hours + 160 hours). The additional 20 days years calculates out to an additional 3.08 or 0.077 full time equivalents (FTE) (160 hours per year / 52 weeks) hours per work week as a relief factor on average to account for the full time employees' accrued leave. Typically the relief factor is covered by part-time and PRN staff. To illustrate with a FTE compliment of 15 this represents on average an additional 1.16 FTE per week (15 FTE x 0.077 relief factor); however, PrimeCare Medical does not limit the number of part-time or PRN staff at a facility to only the calculated value for the weekly relief factor.

The Facility Administrator shall have the right of approval for all employees and prospective employees to be utilized by PrimeCare Medical under this contract. This right may be exercised at any time, but such approvals shall be withheld for valid security reasons only. PrimeCare Medical recognizes the requirements of the Putnam County Correctional Facility and its security clearance procedures.

ORIENTATION MANUAL

PrimeCare Medical offers a comprehensive Orientation Manual which provides direction and guidance into key Corporation policies and procedures. The Orientation Manual is designed to be utilized for each new staff member. The period of orientation shall be approximately eighty (80) hours. Orientation shall commence on the first day of hire and should be completed within the first month of employment. An Orientation to the respective Correctional Facility (Security Policy and Procedures) for each new employee is required to also occur within the initial Orientation Period. PrimeCare Medical will be responsible for the orientation of all clinical and non-clinical staff (Employees and Subcontractors).

CREDENTIALING

PrimeCare Medical shall provide to the Putnam County Correctional Facility a current accounting of all required credentials for professionally licensed and certified staff. Our current system maintains capabilities of storing, retrieval, reporting, and auditing for all staff credentials/license renewals, first aid and CPR expirations, and malpractice insurance criteria. Qualified health care professionals shall not possess restricted licenses as designated by the

appropriate State Board. The Facility maintains the right to disqualify individuals from providing service based on prior work history and security concerns.

TRANSITION PLAN

PrimeCare Medical guarantees a comprehensively coordinated and seamless transition of the Putnam County Correctional Facility's medical services contract, which shall commence immediately upon a contract award. PrimeCare Medical's "Transition TEAM" shall be spearheaded through the leadership of Todd W. Haskins, RN, BSN, CCHP, Vice President of Operations; and Kelly Ehrich, MBA, RN-BSN, CCHP, Jr. Vice President of Operations. Additional Corporate support of this critical transition shall be provided by Francis J. Komykoski, Sr., MBA, CCHP, Strategic Planning Officer; and Brent W. Bavington, MBA, CCHP, Junior Vice President of Operations and Recruitment. A synopsis of PrimeCare Medical's transition plan, to include key transitional components designed specifically for the Putnam County Correctional Facility can be found below.

PERT / GANTT CHART

The project management methodology used by PrimeCare Medical for the transitioning of contracts is the Program Evaluation and Review Technique (PERT) and Gantt Charts system. Through the use of the PERT and Gantt management tools, PrimeCare Medical is able to process data representing the major, finite accomplishments essential to achieve transitioning of our systems into the Putnam County Correctional Facility. This is obtained through the processing of data to achieve end-objectives; the inter-dependence of those events; and estimates of ranges of times necessary to complete each activity between multiple successive events.

The Gantt chart utilized by PrimeCare Medical can be found within our Addenda Section to this Proposal and demonstrates in a graphic format, all tasks and timelines required to accomplish transitioning. While the Gantt chart is a comprehensive approach to project management, PrimeCare Medical has expanded its focus on system requirements and assignments of those systems into the development of its PERT. The PrimeCare Medical standard transition methodology is to assign key staff members responsibility for each task, from high level administrative positions to facility level members to insure ownership and accountability of actions. Empowered department heads and other key personnel are held accountable for implementation of assigned tasks, who assure successful collaboration in team projects.

The PERT and Gantt Charts provide for versatility of additions, changes, and flexibility when required. Based on PrimeCare Medical's extensive correctional health care experience and focus on continuous improvement, the PERT and Gantt Charts will be used to communicate and document any necessary changes.

TRANSITION

The PrimeCare Medical model of transition management has been refined and proven effective for contract implementation for over thirty-two (32) years. PrimeCare Medical has developed an

organizational structure for managing the fundamental components common to every transition that clearly delineates authority, responsibility and accountability of key positions/functions necessary for effective management.

Large projects can be most effectively managed if they are broken down into smaller segments and implemented by key personnel who are at the facility level. This implementation can only occur if the culture of the implementation team remains sensitive to the daily operational concerns of the facilities where the implementation is occurring. The implementation team works not to make changes to the correctional facility, but merges our corporate mission statement into the existing culture within the each institution. Our transition program is streamlined with less focus on layers of administrative management and increased focus on visibility, accessibility, and service delivery.

Our specific organizational approach on transition implementation reflects the Putnam County Correctional Facility's operational scope, cost accountability and assures continuity of management. Drawing upon our extensive expertise in managing correctional health care contracts, we have created a management structure to insure an appropriate level of supervision, monitoring and accountability of staff functions. A cost-effective and accountable deployment of resources to the Putnam County Correctional Facility will begin immediately upon notice of contract award. Recognizing the critical importance of implementing programs with minimal service and management disruption, PrimeCare Medical presents a comprehensive transition plan tailored to the unique requirements of the Putnam County Correctional Facility's contract, detailing how PrimeCare Medical will manage the transition in a responsive and timely manner. As mentioned above, our PERT and GANTT Charts outline specific activities, goals, responsible parties and projected completion dates.

PrimeCare Medical has developed its transition plan based upon a full completion within a thirty (30) day implementation period beginning with the date of contract award, with an additional 30-day review and compliance monitor, which can be further modified based upon the Facility's needs. PrimeCare Medical will communicate and coordinate directly with the Putnam County Correctional Facility to facilitate the transition to assure continuity of care and a seamless delivery of services and is fully prepared to start this contract on a date to be determined by the Putnam County Correctional Facility. Over the past thirty-two (32) years, PrimeCare Medical has successfully started or transitioned over sixty (60) jails, prisons, state-wide correctional systems and juvenile detention centers.

To demonstrate our ability to effect an uninterrupted and smooth transition, PrimeCare Medical has prepared a written description of our approach, identification of dedicated personnel and resources followed by our PERT and GANTT Charts, which illustrates the specific task, person responsible and time line for completion. We have also included our plans for deactivation, should the need ever arise.

As explained in the Management Summary, PrimeCare Medical is proposing an innovative, integrated management structure that will frame our approach to health care delivery subject to approval by the Putnam County Correctional Facility. The Transition Plan requires an initial

series of meetings with the Facility's administrative personnel, where we will collaborate on the approach to re-engineer staffing patterns, designate health care unit missions, review the inmate/patient medical classification system, and work toward program consolidation. While the transition planning will begin immediately, it is a process of innovation and system changes that must be collaborative and evolve over time.

Upon a contract award, the Transition Vice President and project leadership personnel will meet with the appropriate Putnam County Correctional Facility representatives to review the Transition Plan. At that time, all aspects of the transition plan will be prioritized and the initiation and/or completion dates and responsible parties will be confirmed. It is imperative that the Putnam County Correctional Facility key staff be involved with all aspects of this transition, to ensure a safe, timely, and efficient transition for all parties involved. Simultaneously, since this will be a very concerning time period for the current staff, PrimeCare Medical will notify all such personnel through all media channels available of this change and offer informational workshops to ease their concerns of this transition process.

This approach to health care delivery is population-based and systems-oriented. It is an approach that this management team has experience in implementing and has been used to meet the needs of other large facilities and state systems, including the West Virginia Regional Jail Authority, the West Virginia Division of Juvenile Services, York County Prison, Bucks County Department of Corrections, Montgomery County Correctional Facility, Lehigh County Department of Corrections, Berks County Prison, Lancaster County Jail System, etc.

The PrimeCare Medical approach to program management implementation, developed and refined with our experiences over time, combines the following major elements:

- Use of a structured plan that details the specific tasks, timeframes and individuals responsible for a seamless transition as detailed in our PERT and GANTT Charts.
- Designation of a 'transition team' composed of representatives from operations, human resources, clinical services, pharmacy, network development, information systems, finance and other areas with a clear understanding of tasks and transition challenges.
- Transition Team members at the Putnam County Correctional Facility to work side-by-side with key members of the medical staff and correctional administrators to insure successful integration of the transition implementation.
- Close proximity of our Corporate Offices based in Harrisburg, Pennsylvania.
- Communications, orientation, education and coordination around all aspects of employee transition issues.
- Holding a series of meetings with the Putnam County Correctional Facility to obtain, from their prospective, a checklist of their needs related to the corrections division. Based

on the areas of concern(s), the PrimeCare Medical Transition Team will collaborate and provide an explanation how the transition program implementation can be initiated.

- Reviewing and evaluating the status of the current health services program for primary care and on/off-site specialty care to insure access to care.
- Developing needs assessment procedures designed to insure we meet chronic care clinic requirements.
- Development of unique medical programs to meet the needs of the inmate/patient population for on-site specialty services.
- Verifying medication requirements and needs for chronic care inmates/patients are met.
- Intensive network development/provider contracting, technology applications, pharmacy, claims and other support systems implementation.
- Development and deployment of the Transition Plan model in collaboration with the Putnam County Correctional Facility.

PrimeCare Medical understands the uncertainty and anxiety that will result in any contract transition and PrimeCare Medical will do everything possible to ease the transition of the current staff. All current employees will be interviewed and given first priority for available positions for which they are qualified. As needed, PrimeCare Medical will initiate recruitment efforts locally, within PrimeCare Medical's base of 1,000+ affiliated professionals and support staff, as well as nationally, if needed to fill any vacancies or new positions. PrimeCare Medical will schedule timely information sessions introducing key team members. As part of our transition process, PrimeCare Medical will meet with Putnam County Correctional Facility staff to determine your preferred location for these meetings. Key employee informational documents will be provided; clearly describing the PrimeCare Medical approach, benefit packages, and relevant contact personnel. The PrimeCare Medical Transition Teams will have members from our Human Resources Department who are intimately familiar with all Human Resources/Employee Benefit functions, as well as, the concerns and issues which will need to be addressed with current employees. Coordination of all matters related to employee transition and this administrative process will be managed through the PrimeCare Medical Human Resources Department.

PrimeCare Medical maintains a comprehensive plan to retain and recruit Medical Providers, Mid-Level Practitioners and Management Staff at all contracted correctional facilities. PrimeCare Medical values the knowledge and loyalty of existing staff within a facility and will strive to retain those individuals within their existing positions. PrimeCare Medical will launch all efforts to reach out to those existing employees to discuss retention upon immediate notice of a contract award. For any outstanding vacancies, PrimeCare Medical will initiate a variety of recruiting techniques to include advertisement in various local periodicals, professional organization publications, job fairs, online and other media outlets such as television and radio,

direct mailings and referral bonus programs. PrimeCare Medical has a team of recruiters whose experience totals over thirty (30) years in all aspects of Human Resources, which includes two (2) Master's Level Practitioners.

Each candidate will be interviewed and be given an opportunity to review the job description for the position they wish to hold. Upon successful completion of the interview, a telephone psychological screening test will be administered as well as information forwarded to Facility Security Personnel to ensure that the candidate is eligible to work in a correctional facility. A series of reference checks will occur as well as a credentialing procedure, if applicable. Once these items have successfully been completed, each candidate will be offered a job both verbally and in writing through an Offer of Employment Letter. They will then be transferred to the Orientation and Training Modules.

The management process of planning, organizing, actualizing, and controlling is most effectively and successfully accomplished by those closest to the work. We are anxious to share our vision with the Putnam County Correctional Facility should we be awarded the Putnam County Correctional Facility contract and look forward to collaborating on a new and improved model for correctional health care delivery.

PrimeCare Medical has successfully transitioned numerous contracts for medical services. Our tested systems and team approach to the specific requirements of each client assures that nothing is overlooked and your particular concerns are addressed timely and professionally. PrimeCare Medical is confident that our experience in managing this important process, coupled with our sensitivity to these issues, will result in uninterrupted service to the inmates/patients confined to the Putnam County Correctional Facility. PrimeCare Medical is able to fully commit the scope and focus of key personnel and regional based company resources needed to insure a timely, smooth start-up and continuity of services. It is these personalized services and commitment to excellence that makes PrimeCare Medical a true competitor.

[Deactivation Plan](#) - If, for any reason, PrimeCare Medical is not retained at the conclusion of this contract term, or if it were to be terminated at any point prior to the expiration of the contract term, PrimeCare Medical will be fully cooperative and communicative with the Putnam County Correctional Facility, institution staff and incoming provider(s) to assist with a smooth transition to a new vendor. Continuity of care with minimal inconvenience to the institution and its inmates/patients will be the primary consideration. A deactivation plan will be initiated as soon as notification is received that there will be a new provider. The Vice President will implement a definitive plan through consultation with the Putnam County Correctional Facility and institution staff as appropriate. The final plan will elaborate on the actions to be completed by designated individuals and defining specific time periods. PrimeCare Medical will continue with our existing policy to utilize exit surveys designed to identify deficiencies or shortcomings during the deactivation process.

Tasks required to assure continuity of care upon expiration of the contract include the following:

- Meet with incoming vendor regarding continuity of care and specific needs.

- Confirm contract completion with subcontractors and provide written notification.
- Inventory medical supplies and discuss levels of stock (i.e., supplies and medication required for transition period).
- Bookkeeping review of any outstanding accounts payable and accounts receivable and establish formalization of accounts.
- Insure that the quality of health care services is maintained up to termination of services. (Insure arrangements for orderly transfer of medical documentation (i.e., pending referrals and scheduled outside trips).
- Insure all employees are advised as to their rights and benefits with the contract termination. Wherever possible, PrimeCare Medical will actively assist employees in exploring other job opportunities within our Company and/or the new vendor.

CONCLUSION

It is this combination of PrimeCare Medical's proven business philosophy in correctional medicine of over thirty-two (32) years, the vast professional experiences of our multidisciplinary senior management team, our extensive comprehensive presence in local correctional health care systems, proven ability to operate state-wide correctional systems, innovation into various technological advancements, and experience with local unions that makes PrimeCare Medical the ideal health care solution for the Putnam County Correctional Facility.

Due to the unique and diverse composition of our senior corporate leadership, PrimeCare Medical has the unparalleled capability to effectively engage in the type of strategic operational planning, medical/administrative consultation, and rapid response to emergent / client issues necessary for the proper delivery of medical services to the Putnam County Correctional Facility. As one of the largest providers of comprehensive correctional health care services to the local region, PrimeCare Medical has positioned itself to seamlessly transition the Putnam County Correctional Facility in the most cost effective and efficient manner possible.

PrimeCare Medical will not only meet, but far exceed all levels of services presented in this proposal. The Company is highly qualified to implement this proposal, which is designed specifically to service the health care delivery systems for the Putnam County Correctional Facility. The result is the best possible health care package for the inmate/patient and the most cost effective delivery system for the Putnam County Correctional Facility.

COUNTY OF PUTNAM - PURCHASING PUTNAM COUNTY OFFICE BUILDING, 40 GLENEIDA AVENUE, ROOM 105, CARMEL NY 10512 TELEPHONE: 845-808.1088		PAGE: 25
TITLE: COMPREHENSIVE HEALTHCARE SERVICE FOR THE PUTNAM COUNTY CORRECTIONAL FACILITY		RFP NUMBER: 7-18

RECEIPT CONFIRMATION FORM

Please complete and return this confirmation form as soon as possible to Alessandro Mazzotta at: alessandro.mazzotta@putnamcountyny.gov

Company Name: PrimeCare Medical of New York, Inc.

Address: 3940 Locust Lane

City: Harrisburg State: PA Zip Code: 17109

Contact Person: Thomas J. Weber, Esq.

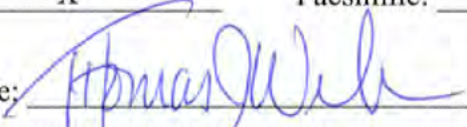
Phone Number: 717-545-5787 Cell Phone: XXXXXXXXXX

E-mail: tweber@primecaremedical.com Fax: 717-3641226

I authorize the County of Putnam to send further correspondence that the County deems to be of an urgent nature by the following method:

Courier Collect: _____ Account: _____

Mail: Facsimile: _____ e-mail:

Signature: 

Title: Chief Executive Officer

IF YOU PLAN TO SUBMIT A PROPOSAL YOU MUST RETURN THIS FORM TO ENSURE THAT YOU WILL RECEIVE FURTHER COMMUNICATION REGARDING THIS RFP.

COUNTY OF PUTNAM - PURCHASING PUTNAM COUNTY OFFICE BUILDING, 40 GLENEIDA AVENUE, ROOM 105, CARMEL NY 10512 TELEPHONE: 845-808.1088		PAGE: 27
TITLE: COMPREHENSIVE HEALTHCARE SERVICE FOR THE PUTNAM COUNTY CORRECTIONAL FACILITY	RFP NUMBER: 7-18	

IMPORTANT: THIS FORM MUST BE FILLED IN BY BIDDER

RELATIONSHIPS TO PUTNAM COUNTY

STATE OF NEW YORK)

: ss

COUNTY OF PUTNAM)

NAME OF REPORTING ENTITY: PrimeCare Medical of New York, Inc.

ADDRESS: 3940 Locust Lane, Harrisburg, PA 17109

TELEPHONE NO.: 717-545-5787 EXT: 1103 TELEFAX NO.: 717-364-1226

THE REPORTING ENTITY IS (Check one of the following):

 AN INDIVIDUAL A PARTNERSHIP X A CORPORATION

A.) Related Employees

1. Are any of the employees that you will use to carry out this contract with Putnam County also an officer or employee of Putnam County, or the spouse, or the child or dependent of such Putnam County officer or employee?

Yes No X

If yes, please provide details:

B.) Related Owners

1. If you are the owner of the Contractor, are you or your spouse, an officer or employee of the County?

Yes No X

If yes, please provide details:

To answer the following question, the following definition of the word "interest" shall be used:

Interest means a direct or indirect pecuniary or material benefit accruing to a county officer or employee, his or her spouse, child or dependent, whether as the result of a contract with county or otherwise. For the purposes of this chapter, a county officer or employee shall be deemed to have an "interest" in the contract of:

COUNTY OF PUTNAM - PURCHASING PUTNAM COUNTY OFFICE BUILDING, 40 GLENEIDA AVENUE, ROOM 105, CARMEL NY 10512 TELEPHONE: 845-808.1088		PAGE: 28
TITLE: COMPREHENSIVE HEALTHCARE SERVICE FOR THE PUTNAM COUNTY CORRECTIONAL FACILITY	RFP NUMBER: 7-18	

- i. His/her spouse, children and dependents, except a contract of employment with the County;
- ii. A firm, partnership or association of which such officer or employee is a member or employee;
- iii. A corporation of which such officer or employee is an officer, director or employee; and
- iv. A corporation of which more than five (5) percent of outstanding capital stock is owner by any of the aforesaid parties.

RELATIONSHIPS TO PUTNAM COUNTY
(Continued)

2. Do any officers or employees of the County of Putnam have an interest in the Contractor or in any subcontractor that will be used for this contract?

Yes _____ No X

If yes, please provide details:

I am the Chief Executive Officer (Title or Office) of the reporting entity listed above.

I make this affirmation based upon my personal review of the books and records of the reporting entity. All of the foregoing information is true to the best of my knowledge, after inquiry. I make these statements under penalty or perjury.

SIGNATURE Thomas J. Weber

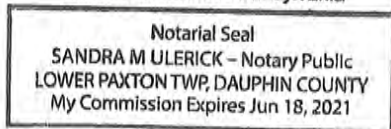
PRINT Thomas J. Weber, Esq.

SWORN to before me this 10th day of

September, 2002018
Sandra M. Ulerick

Notary public

Commonwealth of Pennsylvania



COUNTY OF PUTNAM - PURCHASING PUTNAM COUNTY OFFICE BUILDING, 40 GLENEIDA AVENUE, ROOM 105, CARMEL NY 10512 TELEPHONE: 845-808.1088		PAGE: 29
TITLE: COMPREHENSIVE HEALTHCARE SERVICE FOR THE PUTNAM COUNTY CORRECTIONAL FACILITY		RFP NUMBER: 7-18

CERTIFICATION OF COMPLIANCE WITH THE IRAN DIVESTMENT ACT

As a result of the Iran Divestment Act of 2012 (the "Act"), Chapter 1 of the 2012 Laws of New York, a new provision has been added to State Finance Law (SFL) § 165-a and New York General Municipal Law § 103-g, both effective April 12, 2012. Under the Act, the Commissioner of the Office of General Services (OGS) will be developing a list of "persons" who are engaged in "investment activities in Iran" (both are defined terms in the law) (the "Prohibited Entities List"). Pursuant to SFL § 165-a(3)(b), the initial list is expected to be issued no later than 120 days after the Act's effective date at which time it will be posted on the OGS website.

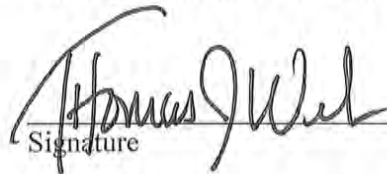
By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, each Bidder/Contractor, any person signing on behalf of any Bidder/Contractor and any assignee or subcontractor and, in the case of a joint bid, each party thereto, certifies, under penalty of perjury, that once the Prohibited Entities List is posted on the OGS website, that to the best of its knowledge and belief, that each Bidder/Contractor and any subcontractor or assignee is not identified on the Prohibited Entities List created pursuant to SFL § 165-a(3)(b).

Additionally, Bidder/Contractor is advised that once the Prohibited Entities List is posted on the OGS Website, any Bidder/Contractor seeking to renew or extend a Contract or assume the responsibility of a Contract awarded in response to this solicitation must certify at the time the Contract is renewed, extended or assigned that it is not included on the Prohibited Entities List.

During the term of the Contract, should the County receive information that a Bidder/Contractor is in violation of the above-referenced certification, the County will offer the person or entity an opportunity to respond. If the person or entity fails to demonstrate that he/she/it has ceased engagement in the investment which is in violation of the Act within 90 days after the determination of such violation, then the County shall take such action as may be appropriate including, but not limited to, imposing sanctions, seeking compliance, recovering damages or declaring the Bidder/Contractor in default.

The County reserves the right to reject any bid or request for assignment for a Bidder/Contractor that appears on the Prohibited Entities List prior to the award of a contract and to pursue a responsibility review with respect to any Bidder/Contractor that is awarded a contract and subsequently appears on the Prohibited Entities List.

Thomas J. Weber, Esq. being duly sworn, deposes and says that he/she is the
Chief Executive Officer of the PrimeCare Medical of New York, Inc.
 Corporation and that neither the Bidder/Contractor nor any proposed subcontractor is identified
 on the Prohibited Entities List.


 Signature

NYS Department of State

Division of Corporations

Entity Information

The information contained in this database is current through March 22, 2018.

Selected Entity Name: PRIMECARE MEDICAL OF NEW YORK, INC.

Selected Entity Status Information

Current Entity Name: PRIMECARE MEDICAL OF NEW YORK, INC.

DOS ID #: 2280555

Initial DOS Filing Date: JULY 20, 1998

County: BROOME

Jurisdiction: NEW YORK

Entity Type: DOMESTIC BUSINESS CORPORATION

Current Entity Status: ACTIVE

Selected Entity Address Information

DOS Process (Address to which DOS will mail process if accepted on behalf of the entity)

C/O LEVENE GOULDIN & THOMPSON, LLP

450 PLAZA DRIVE

VESTAL, NEW YORK, 13850

Chief Executive Officer

CARL A. HOFFMAN, JR. DO, CCHP

3940 LOCUST LANE

HARRISBURG, PENNSYLVANIA, 17109

Principal Executive Office

CARL A. HOFFMAN, JR. DO, CCHP

3940 LOCUST LANE

HARRISBURG, PENNSYLVANIA, 17109

Registered Agent

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by viewing the certificate.

***Stock Information**

# of Shares	Type of Stock	\$ Value per Share
200	No Par Value	

*Stock information is applicable to domestic business corporations.

Name History

Filing Date	Name Type	Entity Name
JUL 20, 1998	Actual	PRIMECARE MEDICAL OF NEW YORK, INC.

A **Fictitious** name must be used when the **Actual** name of a foreign entity is unavailable for use in New York State. The entity must use the fictitious name when conducting its activities or business in New York State.

NOTE: New York State does not issue organizational identification numbers.

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BID BOND

International Fidelity Insurance Company
2507 Boulevard of The Generals, Suite 125, Norristown, PA 19403

CONTRACTOR:

(Name, legal status and address)

PrimeCare Medical Services, Inc.
3940 Locust Lane
Harrisburg, PA 17109

OWNER:

(Name, legal status and address)

County of Putnam
40 Gleneida Avenue, Room 105
Carmel, NY 10512

SURETY:

(Name, legal status and principal place of business)

International Fidelity Insurance Company
2507 Boulevard of The Generals, Suite 125
Norristown, PA 19403

BOND AMOUNT: Ten Percent (10%) of the bid submitted herewith

PROJECT:

(Name, location or address, and Project number, if any)

County of Putnam

Comprehensive Healthcare Service for the Putnam County Correctional Facility

RFP # 7-18

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

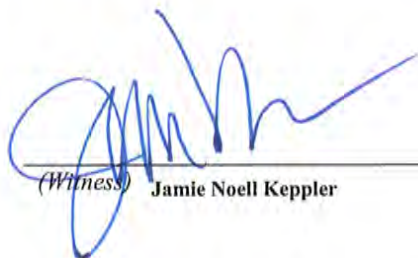
If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

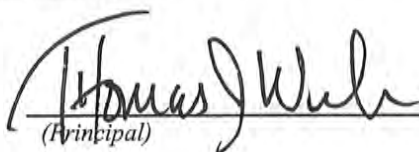
Signed and sealed this 14th day of September, 2018.



(Witness)



(Witness) **Jamie Noell Keppler**



(Principal) (Seal)
CEO

(Title)

International Fidelity Insurance Company


(Surety) (Seal)
R. Clay Foltz, Attorney-In-Fact

(Title)

INTERNATIONAL FIDELITY INSURANCE COMPANY

CONSENT OF SURETY

International Fidelity Insurance Company, 2507 Boulevard of The Generals, Suite 125, Norristown, PA 19403, duly qualified to transact business in the State of New Jersey, hereby agrees that if PrimeCare Medical Services, Inc. is the successful bidder for Comprehensive Healthcare Service for the Putnam County Correctional Facility RFP# 7-18 it as surety, will provide the Bidder with a bond in such form and sum as required in the advertisement or in the specifications.

Signed, sealed and dated this 14th day of September, 2018.

INTERNATIONAL FIDELITY INSURANCE COMPANY

BY: 

R. Clay Foltz, Attorney-In-Fact

POWER OF ATTORNEY

INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

R. CLAY FOLTZ, PAUL E. SEIBERT

Dover, DE.

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 10th day of July, 2015:

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Vice President or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 31st day of December, 2016.



STATE OF NEW JERSEY
County of Essex

George R. James
Executive Vice President (International Fidelity Insurance Company) and Vice President (Allegheny Casualty Company)



On this 31st day of December 2016, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY
My Commission Expires April 16, 2019

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this

12th

day of

September, 2018

MARIA BRANCO, Assistant Secretary

INTERNATIONAL FIDELITY INSURANCE COMPANY
 ONE NEWARK CENTER, 20TH FLOOR, NEWARK, NEW JERSEY 07102-5207

STATEMENT OF ASSETS, LIABILITIES, SURPLUS AND OTHER FUNDS

AT DECEMBER 31, 2017

<u>ASSETS</u>	
Bonds (Amortized Value)	\$129,146,944
Common Stocks (Market Value)	35,217,707
Mortgage Loans on Real Estate	354,803
Cash, Bank Deposits & Short Term Investments	19,878,873
Unpaid Premiums & Assumed Balances	9,751,860
Reinsurance Recoverable from Reinsurers	(115,529)
Electronic Data Processing Equipment	138,265
Investment Income Due and Accrued	918,427
Net Deferred Tax Assets	2,545,704
Receivables from Parent, Subsidiaries & Affiliates	37,109
Other Assets	<u>21,934,273</u>
TOTAL ASSETS	<u>\$219,808,436</u>
 <u>LIABILITIES, SURPLUS & OTHER FUNDS</u>	
Losses (Reported Losses Net as to Reinsurance Ceded and Incurred But Not Reported Losses)	\$5,279,222
Reinsurance Payable on Paid Losses and Loss Adjustment Expenses	1,078,655
Loss Adjustment Expenses	3,559,438
Commissions Payable, Contingent Commissions & Other Similar Charges	1,386,906
Other Expenses (Excluding Taxes, Licenses and Fees)	6,393,991
Taxes, Licenses & Fees (Excluding Federal Income Tax)	282,722
Current Federal and Foreign Income Taxes	58,761
Unearned Premiums	36,204,847
Dividends Declared & Unpaid: Policyholders & Stockholders	1,294,389
Ceded Reinsurance Premiums Payable	2,089,984
Funds Held by Company under Reinsurance Treaties	1,031
Amounts Withheld by Company for Account of Others	60,144,796
Provision for Reinsurance	72,386
Payable to Parent, Subsidiaries and Affiliates	57,862
Other Liabilities	<u>7,654,547</u>
TOTAL LIABILITIES	<u>\$125,559,537</u>
Common Capital Stock	\$1,500,000
Gross Paid-in & Contributed Surplus	374,600
Surplus Notes	16,000,000
Unassigned Funds (Surplus)	76,879,289
Less: Treasury Stock at cost (21,904 shares common) (value incl. \$45.)	<u>504,990</u>
Surplus as Regards Policyholders	<u>\$94,248,899</u>
TOTAL LIABILITIES, SURPLUS & OTHER FUNDS	<u>\$219,808,436</u>

I, Francis L. Mitterhoff, President of INTERNATIONAL FIDELITY INSURANCE COMPANY, certify that the foregoing is a fair statement of Assets, Liabilities, Surplus and Other Funds of this Company, at the close of business, December 31, 2017, as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of New Jersey.



IN TESTIMONY WHEREOF, I have set my hand and affixed the seal of the Company, this 23rd day of February, 2018.
 INTERNATIONAL FIDELITY INSURANCE COMPANY



ENDERS

09/13/2018

County of Putnam
48 Gleneida Avenue
Carmel, New York 10512

RE: LETTER OF INTENT- PrimeCare Medical, Inc.

Der Sirs &/or Madams:

We are the insurance agent for PrimeCare Medical, Inc.'s Cincinnati Insurance Company Commercial General Liability, Automobile Liability, and Umbrella insurance policies. We are authorized by the company to issue this letter of intent state that if PrimeCare Medical, Inc. is awarded your contract we could comply with the requirement to provide:

- On the Commercial General Liability insurance policy, County of Putnam will be named as Additional Insured.
- On the Commercial Automobile Liability insurance policy,
 - County of Putnam will be named as Additional Insured.
- On the Umbrella insurance policy, County of Putnam will be named as Additional Insured.
- 30 Days Written Notice of Cancellation to County of Putnam

Although Cincinnati Insurance Company has indicated their willingness to insure PrimeCare Medical, Inc. for this potential eventuality, no coverage has been bound at this time.

Sincerely,

Jana J Van Scoik, CISR

INSURANCE FINANCIAL BENEFITS

717.652.4902 • ENDERSINSURANCE.COM • 5912 LINGLESTOWN ROAD - HARRISBURG, PA - 17112



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/13/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Enders Insurance Associates 5912 Linglestown Road Harrisburg, PA 17112	CONTACT NAME: PHONE (A/C, No, Ext): (717) 652-4902	FAX (A/C, No): (717) 545-1191
	E-MAIL ADDRESS: enders@endersinsurance.com	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: The Cincinnati Insurance Company		10677
INSURED PrimeCare Medical Inc Inc., PrimeCare Medical of WV Inc; Primecare Medical of NY Inc, PA Inst Health Services Inc 3940 Locust Lane Harrisburg, PA 17109	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

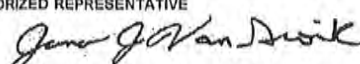
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X		EPP0408274	08/15/2018	08/15/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			EBA 0491024	07/01/2018	07/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			EPP 0224288	01/01/2018	01/01/2019	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is additional insured in regards to general liability
30 Days Notice of Cancellation is afforded to County of Putnam 48 Gleneida Ave Carmel, New York 10512

CERTIFICATE HOLDER

CANCELLATION

County of Putnam Attn Law Dept/Risk Manager 48 Gleneida Ave Carmel, NY 10512	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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September 13, 2018

Attn: Law Dept./Risk Manager
County of Putnam
48 Gleneida Avenue
Carmel, NY 10512

RE: PrimeCare Medical, Inc.
Policy Number: W1E0A3180201

To Whom It May Concern:

This letter confirms, that should PrimeCare Medical, Inc. be awarded a contract to provide inmate medical services at Putnam County Correctional Facility, Beazley would be able to quote terms with the requested limits of \$1,000,000/\$3,000,000.

Beazley would need final ADC and patient visits, seek loss history if available and would propose using the current program structure to do so. They would not agree to cover or indemnify the direct acts of the County.

If you have any questions or concerns, please feel free to contact me at 570-344-5150 ext. 201.

Sincerely,

Joann Dippre

Joann Dippre
Commercial Lines
Northeast Insurance & Financial Consultants

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD

NOTICE OF COMPLIANCE
DISABILITY BENEFITS LAW
TO EMPLOYEES

1. If you are unable to work because of an illness or injury not work-related, you may be entitled to receive weekly benefits from your employer, or his or her insurance company, or from the Special Fund for Disability Benefits.
2. To claim benefits you must file a claim form, within 30 days from the first date of your disability, but in no event more than 26 weeks from such date.
3. Use one of the following claim forms:
-If, when your disability begins, you are employed or are unemployed for four weeks or less, use claim form DB-450, which you may obtain from your employer, his or her insurance carrier, your health provider or any office of the Workers' Compensation Board, and send it to your employer or the insurance carrier named below.
-If, when your disability begins, you have been unemployed more than four weeks, use claim form DB-300, which you may obtain from any Unemployment Insurance Office, your health provider or any office of the Workers' Compensation Board. Send completed claim form to the Workers' Compensation Board, Disability Benefits Bureau, Albany, New York 12241.
IMPORTANT: Before filing your claim, your health care provider must complete the "Health Care Provider's Statement" on the claim form, showing your period of disability.
4. You are entitled to be treated by any physician, chiropractor, dentist, nurse-midwife, podiatrist or psychologist of your choice. However, unlike workers' compensation, your medical bills will not be paid unless your employer and/or union provides for the payment of such bills under a Disability Benefits Plan or Agreement.
5. If you are ill or injured during the time you are receiving Unemployment Insurance Benefits, file a claim for Disability Benefits as soon as you sustain the injury or illness, by following the instructions outlined above.
6. If you are out of work in excess of seven days, your employer is required to send you a Disability Benefits Statement of Rights (Form DB-271).
7. Other information about Disability Benefits may be obtained by writing or calling the nearest Workers' Compensation Board Office.

WORKERS' COMPENSATION BOARD OFFICES

Albany, 12241 - 100 Broadway-Menands - (866) 750-5157
Binghamton, 13901 - State Office Bldg.-44 Hawley St.- (866) 802-3604
Brooklyn, 11201 - 111 Livingston St. - Brooklyn - (800) 877-1373
Buffalo, 14202 - Staller Towers - 107 Delaware Ave. - (866) 211-0645
Hauppauge, 11788 - 220 Rabro Drive - Suite 100 - (866) 681-5354
Hempstead, 11550 - 175 Fulton Avenue - (866) 805-3630
New York, 10027 - 215 W.125th St. - Manhattan - (800) 877-1373
Peekskill, 10566 - 41 North Division St. - (866) 746-0552
Queens, 11432 - 168-46 91st Ave. - Jamaica (800) 877-1373
Rochester, 14614 - 130 Main Street West - (866) 211-0644
Syracuse, 13203 - 935 James St. - (866) 802-3730

ESTADO DE NUEVA YORK
JUNTA DE COMPENSACION OBRERA

AVISO DE CUMPLIMIENTO
LEY DE BENEFICIOS POR
INCAPACIDAD A LOS EMPLEADOS

1. Si usted no puede debido a enfermedad o lesión no relacionada con el trabajo, podría tener derecho a recibir beneficios semanales de su patrón o de la compañía de seguros de él/ella o del Fondo Especial para Beneficios por Incapacidad.
2. Par reclamar beneficios usted debe presentar una forma de reclamación, dentro 30 días a partir de la primera fecha de su incapacidad, pero en ningún caso más de 26 semanas de dicha fecha.
3. Use una de las siguientes formas de reclamación:
-Si, cuando comience su incapacidad usted a ésta empleando o ha estado desempleado por cuatro semanas o menos, use la forma de reclamación (Form DB-450), la cual puede obtener de su patron o de la compañía de seguros de él/ella, o de su proveedor de cuidados de salud, o bien de cualquier oficina de la Junta de Compensación Obrera, y envíela a su patron o a la compañía de seguros nombrada abajo.
-Si, cuando comience su incapacidad, usted ha estado desempleado más de cuatro semanas, use la forma de reclamación (Form DB-300), la cual puede obtener en cualquier Oficina de Seguro Desempleo, de su proveedor de salud, o bien de cualquier oficina de la Junta de Compensación Obrera. Envle la forma de reclamación, debidamente terminada, a Workers' Compensation Board, Disability Benefits Bureau, Albany, New York 12241.
IMPORTANTE: Antes de presentar usted su reclamación, es necesario que su proveedor de salud complete la declaración del médico ("Health Care Provider's Statement") en la forma de reclamación, indicando el periodo de su incapacidad.
4. Usted tiene derecho a ser tratado por cualquier médico, quiropráctico, dentista, enfermera-partera, podiatra o psicólogo que usted elija. Pero, contrarlo a la compensación obrera, sus cuentas médicas no seran pagadas a menos que su patrón y/o Union proporcione pago de tales cuentas médicas bajo un Plan o Convenio de Beneficios por Incapacidad.
5. Si estuviera usted enfermo o lesionado durante el tiempo que esté recibiendo beneficios del Seguro de Desempleo, presente una reclamación para Beneficios por Incapacidad, siguiendo las instrucciones arriba descritas, tan pronto como sufra la lesión o la enfermedad.
6. Si usted está desempleado por mas de siete días, su patrón está obligado madarle a usted la Declaración de Derechos de Beneficios por Incapacidad (Form DB-271).
7. Otras informaciones relativas a Beneficios por Incapacidad pueden obtenerse escribiendo o llamando a la oficina más cercana de la Junta de Compensación Obrera

Clarissa M. Rodriguez
Chair (Presidenta)

www.wcb.state.ny.us

The undersigned employer is in compliance with the provisions of the Disability Benefits Law
(El patrón abajo firmante está en conformidad con las disposiciones de la Ley de Beneficios por incapacidad).

Disability Benefits, when due, will be paid by (Los Beneficios por incapacidad, cuando debidos, seran pagados por):

THE STATE INSURANCE FUND	
NYSIF Document Control Center-Disability Underwriting 1 Watervliet Ave Ext, Albany, NY 12206 (866) 697-4332	
Effective: From <u>08/15/2018</u>	To <u>08/15/2019</u>
(En Vigor Desde)	(Hasta)
Policy No. <u>DBL 6784 05-3</u>	
(Poliza No.)	

THE WORKERS' COMPENSATION BOARD EMPLOYS AND SERVES
PEOPLE WITH DISABILITIES WITHOUT DISCRIMINATION.

LA JUNTA DE COMPENSACION OBRERA EMPLEA
Y SIRVE A PERSONAS INCAPACITADAS SIN DISCRIMINAR.

Prescribed by Chair
Workers' Compensation
Board State of New York

DB-120 (7-09)

3099

The benefits provided are (Los beneficios provistos son)

<input checked="" type="checkbox"/>	Statutory (Estatutorios)
-------------------------------------	-----------------------------

<input type="checkbox"/>	Under a Plan or Agreement (Bajo un Plan o Convenio)
--------------------------	--

Class(es) of employees covered (Clases(s) de empleados amparados)

Name of Employer (Nombre del patrón)

By PRIMECARE MEDICAL OF NEW YORK INC

**THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND
ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.**



Paid Family Leave

NOTICE TO EMPLOYEES

Paid Family Leave Insurance Coverage Provided by:

THE STATE INSURANCE FUND

Covering Employees of:

PRIMECARE MEDICAL OF NEW YORK INC

Paid Family Leave is insurance that provides job protected paid time off to:

- **Bond** with a newly born, adopted, or fostered child
- **Care** for a family member with a serious health condition
- **Assist** loved ones when a family member is deployed abroad on active military service

How to File:

- **Notify** your employer at least 30 days in advance, if foreseeable, or as soon as possible
- **Submit** the Request for Paid Family Leave form to your employer
- **Complete** and attach the additional documentation as instructed on the request form and submit to the insurance carrier listed below

Employers should NEVER discriminate or retaliate against anyone who requests or takes leave

FOR MORE INFORMATION AND HELP:
Visit ny.gov/PaidFamilyLeave
or call (844) 337-6303

You can get forms to take Paid Family Leave from

- Your employer,
- The insurance carrier below, or
- ny.gov/PaidFamilyLeave

New York State Insurance Fund
NYSIF Document Control Center-Disability Underwriting
1 Watervliet Ave Ext, Albany, NY 12206
(866) 697-4332

Policy #: DB 6784 05-3 Effective From: 08/15/2018 To: 08/15/2019

Statutory Under a Plan or Agreement

Class(es) of Employees Covered:

All Eligible Employees

NOTICE OF COMPLIANCE

PRESCRIBED BY THE CHAIR, WORKERS' COMPENSATION BOARD
THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.





Workers' Compensation Board

CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

<p>1a. Legal Name & Address of Insured (use street address only)</p> <p>Prime Care Medical, Inc. 3940 Locust Lane Harrisburg, PA 17109-4023</p> <p>Work Location of Insured <i>(Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy)</i></p>	<p>1b. Business Telephone Number of Insured 800.245.7277 x1101</p> <p>1c. NYS Unemployment Insurance Employer Registration Number of Insured</p> <p>1d. Federal Employer Identification Number of Insured or Social Security Number 23-2428261</p>
<p>2. Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)</p> <p>County of Putnam 48 Gleneida Avenue Carmel, New York 10512 Attn.: Law Dept./Risk Manager</p>	<p>3a. Name of Insurance Carrier Old Republic Insurance Company</p> <p>3b. Policy Number of Entity Listed in Box "1a" MWC 313593 00</p> <p>3c. Policy effective period 06-01-18 to 06-01-19</p> <p>3d. The Proprietor, Partners or Executive Officers are <input type="checkbox"/> included. (Only check box if all partners/officers included) <input checked="" type="checkbox"/> all excluded or certain partners/officers excluded.</p>

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. **(To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy).** The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

Will the carrier notify the certificate holder within 10 days of a policy being cancelled for non-payment of premium or within 30 days if cancelled for any other reason or if the insured is otherwise eliminated from the coverage indicated on this certificate prior to the end of the policy effective period? YES NO

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Workers' Compensation contract of insurance only while the underlying policy is in effect.

Please Note: Upon cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved by: Janine Prusow
(Print name of authorized representative or licensed agent of insurance carrier)

Approved by: 09/06/18
(Signature) (Date)

Title: Policy Production Specialists

Telephone Number of authorized representative or licensed agent of insurance carrier: 262-957-2700

Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue it.

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.
2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

PrimeCare Medical, Inc. - Putnam County Correctional Facility / Transition Plan

ID	Transactional Activities	Duration	Start	Finish	Key Resource	Timeline											
						11/25	12/2	12/9	December			1/6	January				
						12/16	12/23	12/30	1/6	1/13	1/20	1/27					
1	Administration (Corporate)	1 day	Fri 11/30/18	Fri 11/30/18													
2	Identify Transition Team	1 day	Tue 11/27/18	Tue 11/27/18	VP Ops,VP Ops - Clinical												
3	Review transition plan with Transition Team	1 day	Tue 11/27/18	Tue 11/27/18	VP Ops,VP Ops - Clinical												
4	Identify / establish any reporting requirements, performance indicators, and define responsibilities	1 day	Tue 11/27/18	Tue 11/27/18	VP Ops,VP Ops - Clinical												
5	Prepare a list of key contacts for both PCM and facility Administration	0 days	Tue 11/27/18	Tue 11/27/18	VP Ops												
6	Develop problem / issue escalation procedures	1 day	Tue 11/27/18	Tue 11/27/18	VP Ops												
7	General Operations and Implementation Team	25 days	Wed 11/28/18	Tue 1/1/19													
8	Award of Contract	1 day	Tue 11/27/18	Tue 11/27/18	President & Corporate Medical Director, VP Ops												
9	Schedule initial meeting with Regional Coordinator, HSA, and Medical Director	5 days	Wed 11/28/18	Tue 12/4/18	Jr VP Ops - Mktg,President & Corporate Medical Director,VP Ops												
10	Forward copy of proposal to Regional Coordinator for review of contract terms and commitments	1 day	Tue 11/27/18	Tue 11/27/18	Admin Asst 1												
11	PCM Corporate Staff Meeting to discuss Transition Plan	35 days	Wed 11/28/18	Tue 1/15/19													
12	PCM Corporate Staff Meeting to discuss Transition Plan 1	1 day	Tue 11/27/18	Tue 11/27/18	VP Ops												
13	PCM Corporate Staff Meeting to discuss Transition Plan 2	0 days	Tue 12/4/18	Tue 12/4/18	VP Ops												
14	PCM Corporate Staff Meeting to discuss Transition Plan 3	0 days	Tue 12/11/18	Tue 12/11/18	VP Ops												
15	PCM Corporate Staff Meeting to discuss Transition Plan 4	0 days	Tue 12/18/18	Tue 12/18/18	VP Ops												
16	PCM Corporate Staff Meeting to discuss Transition Plan 5	0 days	Tue 12/25/18	Tue 12/25/18	VP Ops												
17	PCM Corporate Staff Meeting to discuss Transition Plan 6	0 days	Tue 1/1/19	Tue 1/1/19	VP Ops												
18	PCM Corporate Staff Meeting to discuss Transition Plan 7	0 days	Tue 1/8/19	Tue 1/8/19	VP Ops												
19	PCM Senior Corporate staff to meet with Facility Administration (Contact Warden) to develop transition schedule and rollout	5 days	Wed 11/28/18	Tue 12/4/18	Jr VP Ops - Mktg,President & Corporate Medical Director,RCs,VP Ops												
20	Meet weekly with Prison administrative contact.	35 days	Wed 11/28/18	Tue 1/15/19													
21	Meet weekly with Prison administrative contact. 1	1 day	Tue 11/27/18	Tue 11/27/18	HSA,RCs,VP Ops												
22	Meet weekly with Prison administrative contact. 2	0 days	Tue 12/4/18	Tue 12/4/18	HSA,RCs,VP Ops												
23	Meet weekly with Prison administrative contact. 3	0 days	Tue 12/11/18	Tue 12/11/18	HSA,RCs,VP Ops												
24	Meet weekly with Prison administrative contact. 4	0 days	Tue 12/18/18	Tue 12/18/18	HSA,RCs,VP Ops												
25	Meet weekly with Prison administrative contact. 5	0 days	Tue 12/25/18	Tue 12/25/18	HSA,RCs,VP Ops												
26	Meet weekly with Prison administrative contact. 6	0 days	Tue 1/1/19	Tue 1/1/19	HSA,RCs,VP Ops												
27	Meet weekly with Prison administrative contact. 7	0 days	Tue 1/8/19	Tue 1/8/19	HSA,RCs,VP Ops												
28	PCM Dept Head Prison Tour	5 days	Wed 11/28/18	Tue 12/4/18	Jr VP Ops - Mktg,President & Corporate Medical Director,VP Ops,RCs												
29	Schedule date for PCM department heads to meet all potential staff who currently work at facility	5 days	Wed 11/28/18	Tue 12/4/18	VP Ops,VP Ops - Clinical												
30	Perform an inventory and assessment of medical/office supplies	10 days	Wed 11/28/18	Tue 12/11/18	Admin Asst 2,Jr VP Ops,RCs,VP Ops												
31	Contact current medical provider regarding supplies and equipment being left on-site	25 days	Wed 11/28/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
32	Meet with MH / MR regarding obtaining mental health records & 304 commitment contact person	10 days	Wed 11/28/18	Tue 12/11/18	Mental Health Director,VP Ops												
33	Telephone call to State Health Dept regarding HIV Testing	10 days	Wed 11/28/18	Tue 12/11/18	Jr VP Ops - Clinical,VP Ops												
34	Health Services Administrator to submit nursing schedule for first month of contract	10 days	Wed 11/28/18	Tue 12/11/18	RCs,VP Ops												
35	Meet with Health Services Administrator to ensure all necessary supplies and equipment are ordered (medical, dental, office, lab, pharm)	10 days	Wed 11/28/18	Tue 12/11/18	RCs,VP Ops												
36	Meet with Contract Administrator to discuss facility's security procedures	10 days	Wed 11/28/18	Tue 12/11/18	RCs												
37	Establish orientation schedule for all newly hired PCM staff	10 days	Wed 11/28/18	Tue 12/11/18	HSA,RCs												
38	Attain property insurance for new facility	10 days	Wed 11/28/18	Tue 12/11/18	Jr VP Ops -HR & Recruit												
39	PCM Corporate staff-Final meeting (invite Health Services Administrator)	5 days	Wed 12/26/18	Tue 1/1/19	VP Ops												
40	Complete facilities gouge sheet	10 days	Wed 12/19/18	Tue 1/1/19	Jr VP Ops												
41	Complete facilities T O	10 days	Wed 12/19/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												

PrimeCare Medical, Inc. - Putnam County Correctional Facility / Transition Plan

ID	Transactional Activities	Duration	Start	Finish	Key Resource	Timeline											
						11/25	12/2	12/9	December			January			1/27		
						12/16	12/23	12/30	1/6	1/13	1/20	1/27					
42	Physician training regarding consults and non-formulary medications	5 days	Wed 12/26/18	Tue 1/1/19	Jr VP Ops - Clinical,RCs,VP Ops - Clinical												
43	Establish Petty Cash Amount	5 days	Wed 12/26/18	Tue 1/1/19	Dir. of Finance												
44	Conduct mandatory training as per established training schedule	4 days	Thu 12/27/18	Tue 1/1/19	RCs												
45	Security and Emergency Procedures training	4 days	Thu 12/27/18	Tue 1/1/19	HSAs,RCs												
46	Set-up dates for all meetings for the next quarter (i.e. Staff meetings, CQI Meetings, Education in-services, Quarterly Meetings, Holiday Staff Party date, etc...)	4 days	Thu 12/27/18	Tue 1/1/19	HSAs,RCs												
47	Review Essential and important Standards regarding PCM policy and procedures to see what is currently being done and not done at this facility (Initial Peer Audit)	10 days	Wed 11/28/18	Tue 12/11/18	Peer Audit Team 1,Peer Audit Team 2,RCs												
48	Review Essential and important Standards regarding PCM policy and procedures to see what is currently being done and not done at this facility (Peer Audit)	8 wks	Wed 11/28/18	Tue 1/22/19	Peer Audit Team 1,Peer Audit Team 2,RCs												
49	Transition Support team to be onsite at facility to provide support	12 days	Mon 12/31/18	Tue 1/15/19	RCs,VP Ops												
50	Ensure list of all Corporate and Emergency Contacts are posted for all medical staff needs	1 day	Tue 1/1/19	Tue 1/1/19	RCs												
51	Documentation / Books	25 days	Wed 11/28/18	Tue 1/1/19													
52	Review PCM intake form vs facilities intake form	20 days	Wed 12/5/18	Tue 1/1/19	Jr VP Ops -HR & Recruit,RCs,VP Ops - Clinical												
53	Complete Emergency Preparedness Local Procedure for Initial Staff Orientation	20 days	Wed 12/5/18	Tue 1/1/19	RCs												
54	Local Policy and Procedure manuals to be established and completed	20 days	Wed 12/5/18	Tue 1/1/19	RCs												
55	Provide Policies & Procedures, Forms, and Protocol Manuals	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
56	CD's to be established of PCM forms manual and policy manual (Adobe & Microsoft Word)	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
57	Prepare month end book	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
58	Consult Approval and Claims form books	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
59	Binders for NCCHC standards	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
60	Log Books - new intake, EKG book, lab book, x-ray, sick call, time sheet, dental instrument count sheet, narcotic book, sharps and instrument	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 1,Admin Asst 2												
61	Redacted copy of contract, RFP, and Tech & Pricing Proposal sent	15 days	Wed 12/12/18	Tue 1/1/19	Admin Asst 2												
62	Contracts	24 days	Thu 11/29/18	Tue 1/1/19													
63	Start developing relationships with hospital for a contractual partnership	24 days	Thu 11/29/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
64	Contact X-Ray company for contract	20 days	Wed 12/5/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
65	Set-up initial meeting with Lab vendor	20 days	Wed 12/5/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
66	Set-up initial meeting with Pharmacy.	10 days	Wed 11/28/18	Tue 12/11/18	Admin Asst 2,VP Ops - Clinical												
67	Get copies of MARs at each site and forward to pharmacies	10 days	Wed 11/28/18	Tue 12/11/18	RCs,VP Ops - Clinical,VP Ops												
68	Review all non formularies	10 days	Wed 11/28/18	Tue 12/11/18	VP Ops - Clinical												
69	Finalize any outstanding contracts	10 days	Wed 12/19/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
70	Finalize contract with Hospital	10 days	Wed 12/19/18	Tue 1/1/19	Admin Asst 2,Jr VP Ops												
71	Meet with Medical Doctors regarding contracts	20 days	Wed 12/5/18	Tue 1/1/19	RCs,VP Ops												
72	Mail to Physicians PCM drug formulary with contracts	20 days	Wed 12/5/18	Tue 1/1/19	Admin Asst 2												
73	Human Resources	23 days	Fri 11/30/18	Tue 1/1/19													
74	Weekly updates on status of new hires	31 days	Fri 11/30/18	Fri 1/11/19	Jr VP - HR,Jr VP Ops -HR & Recruit												
75	Weekly updates on status of new hires 1	0 days	Fri 11/30/18	Fri 11/30/18	Jr VP - HR,Jr VP Ops -HR & Recruit												
76	Weekly updates on status of new hires 2	0 days	Fri 12/7/18	Fri 12/7/18	Jr VP - HR,Jr VP Ops -HR & Recruit												
77	Weekly updates on status of new hires 3	0 days	Fri 12/14/18	Fri 12/14/18	Jr VP - HR,Jr VP Ops -HR & Recruit												

PrimeCare Medical, Inc. - Putnam County Correctional Facility / Transition Plan

ID	Transactional Activities	Duration	Start	Finish	Key Resource	11/25	12/2	12/9	December 12/16	12/23	12/30	1/6	January 1/13	1/20	1/27
78	Weekly updates on status of new hires 4	0 days	Fri 12/21/18	Fri 12/21/18	Jr VP - HR,Jr VP Ops -HR & Recruit										
79	Weekly updates on status of new hires 5	0 days	Tue 1/1/19	Tue 1/1/19	Jr VP - HR,Jr VP Ops -HR & Recruit										
80	Weekly updates on status of new hires 6	0 days	Fri 1/4/19	Fri 1/4/19	Jr VP - HR,Jr VP Ops -HR & Recruit										
81	Weekly updates on status of new hires 7	0 days	Fri 1/11/19	Fri 1/11/19	Jr VP - HR,Jr VP Ops -HR & Recruit										
82	Introduction meeting with current staff	5 days	Wed 11/28/18	Tue 12/4/18	Jr VP - HR,Jr VP Ops -HR & Recruit,VP Ops,RCs	█									
83	Research current staffing situation at each site and develop a plan for PCM to staff contract (Coordinate with Operations)	5 days	Wed 11/28/18	Tue 12/4/18	RCs,VP Ops	█									
84	Start recruiting process for potential new hires, RN's, LPN's and Mental Health position(s) immediately (Brent to coordinate with Operations)	25 days	Wed 11/28/18	Tue 1/1/19	HR Recruit 1,HR Recruit 2,Jr VP Ops -HR & Recruit	█	█	█	█	█	█	█	█	█	█
85	Set up Interviews	25 days	Wed 11/28/18	Tue 1/1/19	HR Recruit 1,HR Recruit 2	█	█	█	█	█	█	█	█	█	█
86	Meet with all agency nurses about becoming PCM staff nurses As approved by Contract Administrator and Director of Nurses (if applicable)	25 days	Wed 11/28/18	Tue 1/1/19	RCs,VP Ops	█	█	█	█	█	█	█	█	█	█
87	Obtain Psychologicals on all new hires (Set up training for all hires)	20 days	Wed 11/28/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2	█	█	█	█	█	█	█	█	█	█
88	Verify all staff licenses and insurances	15 days	Wed 12/5/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2		█	█	█	█	█	█	█	█	█
89	Offer of Employment letters sent to all potential nurses	15 days	Wed 12/5/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2,Jr VP Ops -HR & Recruit		█	█	█	█	█	█	█	█	█
90	Provide list of employees to HR / Finance Departments	10 days	Wed 12/19/18	Tue 1/1/19	HR Recruit 1,HR Recruit 2										
91	Request Security Clearances on all new hires (NLT DATE)-Hair follicle test	10 days	Wed 12/12/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2										
92	HR to ensure that all offer letters have been returned	10 days	Wed 12/12/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2										
93	Set Start Dates for all employees (mandatory attendance for all new hires 2 days prior to contract start date)	10 days	Wed 12/12/18	Tue 12/25/18	HR Recruit 1,HR Recruit 2,HSAs										
94	Mandatory posters posted in Medical - specified by state!	1 day	Fri 12/28/18	Fri 12/28/18	Employee Relations Mgr										
95	Finance	25 days	Wed 11/28/18	Tue 1/1/19		█	█	█	█	█	█	█	█	█	█
96	Assign Facility a number	5 days	Wed 11/28/18	Tue 12/4/18	Dir. of Finance	█									
97	Receive Contract 30 days prior to start up	5 days	Wed 11/28/18	Tue 12/4/18	Dir. of Finance	█									
98	Provide (leave slips, time sheets, etc) Forms (Pay check questionnaires, W4, Direct Deposit, I9 forms) - all received Friday before upcoming pay date	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Finance										
99	Assign pay dates (employees and sub-contractors)	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Finance										
100	Receive Sub-contractor info sheet	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Finance										
101	Submit memo for all providers (sub-contractors) and discounts	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Finance										
102	All bills (lab, pharm, x-ray, EKG) received in a timely fashion	1 day	Tue 1/1/19	Tue 1/1/19	Dir. of Finance										
103	IT	25 days	Wed 11/28/18	Tue 1/1/19		█	█	█	█	█	█	█	█	█	█
104	Review computer and technology needs Check on current PC	15 days	Wed 11/28/18	Tue 12/18/18	Dir. IT,Jr VP Ops -HR & Recruit	█	█	█	█	█	█	█	█	█	█
105	Provide contract with requirements for telemedicine hook ups	15 days	Wed 11/28/18	Tue 12/18/18	Dir. IT	█	█	█	█	█	█	█	█	█	█
106	Prepare all technical aspects and have all equipment, supplies, and accessibility ready to go	15 days	Wed 11/28/18	Tue 12/18/18	Dir. IT	█	█	█	█	█	█	█	█	█	█
107	Establish facility e-mail	10 days	Wed 12/19/18	Tue 1/1/19	Dir. IT										
108	Establish facility fax	10 days	Wed 12/19/18	Tue 1/1/19	Dir. IT										
109	Establish facility telephone	10 days	Wed 12/19/18	Tue 1/1/19	Dir. IT										
110	EMR	45 days	Wed 11/28/18	Tue 1/29/19		█	█	█	█	█	█	█	█	█	█
111	Review current system, work flow and process	20 days	Wed 11/28/18	Tue 12/25/18	Dir. IT,Jr VP Ops -HR & Recruit	█	█	█	█	█	█	█	█	█	█
112	Identify systems requirements	20 days	Wed 11/28/18	Tue 12/25/18	Dir. IT	█	█	█	█	█	█	█	█	█	█
113	Purchase Equipment	10 days	Wed 12/19/18	Tue 1/1/19	Dir. IT										
114	Deploy hosted EMR framework	27 days	Mon 11/26/18	Tue 1/1/19		█	█	█	█	█	█	█	█	█	█
115	Interfaces with lab, x-ray, pharmacy	5 days	Wed 12/26/18	Tue 1/1/19	Jr VP Ops -HR & Recruit										
116	Migration of Patient Data	21 days	Tue 1/1/19	Tue 1/29/19	Dir. IT										

PrimeCare Medical, Inc. - Putnam County Correctional Facility / Transition Plan

ID	Transactional Activities	Duration	Start	Finish	Key Resource	Timeline																	
						11/25	12/2	12/9	December		12/16	12/23	12/30	1/6	January		1/13	1/20	1/27				
117	End User Training 2 weeks	11 days	Tue 1/1/19	Tue 1/15/19	COR IT																		
118	Reporting Requirements	16 days	Tue 1/1/19	Tue 1/22/19	Jr VP Ops -HR & Recruit																		
119	Legal	10 days	Wed 12/19/18	Tue 1/1/19																			
120	Meet with Health Services Administrator to discuss legal concerns	5 days	Wed 12/26/18	Tue 1/1/19	Dir. of Risk Mgmt.																		
121	Daily Logs	4 days	Tue 1/1/19	Fri 1/4/19	Dir. of Risk Mgmt.																		
122	Conduct HIPPA training for all new employees	4 days	Tue 1/1/19	Fri 1/4/19	Dir. of Risk Mgmt.																		
123	Conduct HIPPA training for Facility Administrator	4 days	Tue 1/1/19	Fri 1/4/19	Dir. of Risk Mgmt.																		
124	Grievances sent weekly and other in services as needed	5 days	Mon 12/31/18	Fri 1/4/19	Dir. of Risk Mgmt.																		
125	Court Orders/Subpoenas/Lawsuits/Hunger Strikes/Adverse Occurrences	5 days	Mon 12/31/18	Fri 1/4/19	Dir. of Risk Mgmt.																		
126	Purchasing	30 days	Wed 11/28/18	Tue 1/8/19																			
127	Order Dental furniture (if applicable)	30 days	Wed 11/28/18	Tue 1/8/19	Dir. of Purchasing																		
128	Purchase dental suite (if applicable)	20 days	Wed 12/5/18	Tue 1/1/19	Dir. of Purchasing																		
129	Purchase new EKG Machine	20 days	Wed 12/5/18	Tue 1/1/19	Dir. of Purchasing																		
130	Order large equipment: Exam Tables (if applicable)	20 days	Wed 12/5/18	Tue 1/1/19	Dir. of Purchasing																		
131	Determine who will provide printer/fax/copier	15 days	Wed 12/12/18	Tue 1/1/19	Dir. of Purchasing																		
132	Determine office equipment needs	15 days	Wed 12/12/18	Tue 1/1/19	Dir. of Purchasing																		
133	Supply copier to facility (if needed)	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Purchasing																		
134	Order office equipment and supplies - computer, copy, printers, fax (coordinate with operations dept on who will supply), doctors stamp, discharge stamp, chronic care stamp, date stamp	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Purchasing																		
135	Order necessary medical supplies to include oxygen, nebulizer	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Purchasing																		
136	Order necessary lab supplies and equipment	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Purchasing																		
137	Pharmacy -- Medication carts to be delivered (if applicable)	10 days	Wed 12/19/18	Tue 1/1/19	Dir. of Purchasing, VP Ops - Clinical																		
138	PCM forms printed	5 days	Wed 12/26/18	Tue 1/1/19	Dir. of Purchasing, Admin Asst 1																		
139	Orientation / Education Topics:	21 days	Tue 1/1/19	Tue 1/29/19																			
140	Completion of all new hire paperwork	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
141	Tour of facility for new hires	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
142	Meet with Deputy Warden of Treatment and Warden	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
143	Emergency Preparedness Training	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
144	Security Training	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
145	Review Sexual Harassment Policy	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
146	HIPPA Training	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs,Dir. of Risk Mgmt.																		
147	Risk Management Training	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
148	PCM Policies and Procedure Book	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
149	Law Suit processing dos and don'ts	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
150	Oral Assessment Training if not conducted within past year	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
151	Medication Administration Training if not conducted within past year	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
152	Blood Borne Pathogen Review	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
153	Proper intake completion	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
154	Suicide prevention Training	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
155	PCM Leave procedures	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
156	Call-off procedure	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
157	Payroll procedure	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
158	Review PCM policies on sick call	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
159	Review PE's with all RN's	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
160	Review of vena-punctures	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
161	Review of TB Procedure	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
162	Review PCM emergency procedures	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
163	Consult review	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
164	ER Consult Review	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		
165	Corporate Medical Director review regarding consults and inmates in Hospital	21 days	Tue 1/1/19	Tue 1/29/19	HSAs,RCs																		

ADDENDA

LETTER

RECEIPT OF CONFIRMATION -----A

RELATIONSHIP TO PUTNAM COUNTY -----B

CERTIFICATION OF COMPLIANCE WITH THE IRAN DIVESTMENT ACT -----C

CERTIFICATE OF GOOD STANDING -----D

CONSENT OF SURETY -----E

INSURANCE -----F

TRANSITION PLAN -----G

ADDENDA

LETTER

RECEIPT OF CONFIRMATION -----	A
BUSINESS REFERENCES -----	B
BUSINESS REFERENCES – EXPIRED CONTRACTS (2013-2018) -----	C
COMPANY POLICY OPERATION MANUAL TOC -----	D
COMPUTERIZED MEDICAL RECORDS (COREMR) SCREEN SHOTS -----	E

Contract # _____

**Professional Services Agreement
Between
THE COUNTY OF PUTNAM
and
PRIMECARE MEDICAL OF NEW YORK, INC.**

THIS PROFESSIONAL SERVICES AGREEMENT, (the "Agreement") is made by and between **THE COUNTY OF PUTNAM**, a municipal corporation of the State of New York, having an office and place of business at 40 Gleneida Avenue, Carmel, New York 10512, by and through its Sheriff's Department (hereinafter referred to as the "COUNTY") and **PRIMECARE MEDICAL OF NEW YORK, INC.**, located at 3940 Locust Lane, Harrisburg, Pennsylvania 17109 (hereinafter referred to as "CONTRACTOR").

WHEREAS, the COUNTY desires to contract with CONTRACTOR and CONTRACTOR agrees to provide the comprehensive healthcare services for the inmates at the Putnam County Correctional Facility (hereinafter the "FACILITY") that are described herein and set forth in the COUNTY's RFP #7-2018 and any addenda thereto (the "RFP"), and CONTRACTOR's response dated September 14, 2018 to the COUNTY's RFP #7-2018, and any clarifications thereto (the "Proposal"), all of which are incorporated by reference herein and as more fully described hereunder; and

WHEREAS, CONTRACTOR has the personnel or will enter into subcontracts with personnel who have the necessary licensure, qualifications, experience and education, and the resources and/or facilities to provide the services desired by the COUNTY, as more fully described herein.

NOW, THEREFORE, in consideration of the terms and conditions herein contained, the parties agree as follows:

FIRST: The COUNTY has the necessary funds to pay CONTRACTOR under, but not limited to, budget line(s): 10008000 54646.

SECOND: Commencing on January 1, 2019 ("Service Commencement Date") CONTRACTOR agrees to provide the comprehensive healthcare services for inmates at the FACILITY that are described herein and set forth in the RFP and Proposal (the "Services"). Additionally, CONTRACTOR shall comply with and provide correctional medical and mental health care services that are statutorily or otherwise required under, current state and/or federal mandates, including, but not limited to, any statutes, rules and regulations issued by or included in the New York State Codes, Rules and Regulations ("NYCRR"), the New York State Office of Mental Health ("NYSOMH"), the New York State Health Department ("NYSHD"), the Putnam County Correctional Facility's Policies and Procedures, the Affordable Care Act, the American Medical Association ("AMA"), Centers for Disease Control Protocols and Guidelines, Federal Prison Rape Elimination Act ("PREA"), State Licensing Board laws and regulations, Federal Occupational Safety and Health Act of 1970 ("OSHA") guidelines, and all other applicable Federal, State, and local laws and regulations.

The Services shall meet the level of care at not less than acceptable minimum standards set forth by the National Commission on Correctional Health Care ("NCCHC"), as well as those standards promulgated by the New York State Commission of Correction ("NYSCOC"), including any and all standards set forth in any memoranda issued by the Chairman regarding provisions of health services in correctional facilities. In the event there is a conflict between the minimum standards set forth by NCCHC and those set forth by the NYSCOC, the minimum standards set forth by NYSCOC shall control.

CONTRACTOR shall provide, within sixty (60) days of the start of this Agreement, a complete manual of healthcare policies and procedures that is made specific to the Putnam County Correctional Facility and such manual must be continuously updated to meet current medical practice and standards.

CONTRACTOR shall provide medical, nursing, technical and support personnel necessary for the rendering of the Services to inmates at the FACILITY as further described in the Staffing Matrix attached hereto and incorporated herein as Schedule "A". In the event that either of the parties seek to make staffing changes which have no effect upon the total annual cost of this Agreement, said changes may be made to the Staffing Matrix by mutual written agreement of the COUNTY and the CONTRACTOR. In the event that either of the parties seek to make staffing changes which have an alleged effect upon the total annual cost of this Agreement, the parties shall negotiate any potential increase in the annual cost of the Agreement resulting from such staffing changes.

CONTRACTOR agrees that it will at all times faithfully, industriously and to the best of its ability, experience and talents perform all of the duties that may be required of and from it pursuant to express and implicit terms hereof, to the reasonable satisfaction of the COUNTY. CONTRACTOR understands and agrees that the work to be performed pursuant to this Agreement will commence promptly in accordance with the terms hereunder and will be conducted in the best interests of the COUNTY.

THIRD: CONTRACTOR shall maintain a complete, accurate and legible medical record that documents all services provided in a single integrated medical record for each inmate and is

in compliance with all applicable law, including but not limited to the Health Insurance Portability and Accountability Act ("HIPAA").

CONTRACTOR shall, within ninety (90) days of the Effective Date of this Agreement, implement and utilize (1) the electronic medical records system known as CorEMR, for all medical, mental health and dental records. CONTRACTOR shall ensure that the CorEMR system is in compliance with the provisions of stage 2 of the Federal Health Information Technology for Economic and Clinical Health Act ("HITECH"). After the CorEMR system is implemented CONTRACTOR may replace the paper files upon approval, in writing, of the Sheriff and Putnam County.

Upon the termination of this Agreement, all medical records shall be delivered to and remain with the COUNTY. CONTRACTOR shall ensure that the medical records are provided in a readable format and will transition said records to the COUNTY in a mutually agreeable format. COUNTY shall retain sole and exclusive ownership rights to any and all data. COUNTY will provide CONTRACTOR reasonable access to inmate medical records subsequent to the termination of this Agreement for the purpose of defending litigation and as required by any legal obligation imposed on CONTRACTOR, subject to the mandates of HIPAA.

FOURTH: The parties shall establish the committees explained herein, as well as in the RFP and Proposal, and such committees shall meet at the intervals set forth herein and in the RFP and Proposal.

The parties shall establish a Medical Administrative Committee ("MAC") consisting of the Health Services Administrator, Facility administration staff, and all other parties requested by

COUNTY, that will meet monthly to review effectiveness and appropriateness of health care services, inmate/patient treatment plans, and efficiency of medical operations.

A Pharmacy and Therapeutics Committee, consisting of at least the on-site Medical Director/Physician Assistant or Nurse Practitioner, Health Services Administrator, Pharmacist, and members of the Facility's Administration will meet as required, but no less than quarterly.

CONTRACTOR shall also establish a Continuous Quality Improvement Committee that shall meet monthly to evaluate and monitor quality care delivery criteria and focus on quality improvement.

CONTRACTOR'S Health Services Administrator shall meet with the Facility Administrator and other Facility staff on a weekly basis for regular updates regarding the Services, including but not limited to, review inmate/patient medical services and to propose corrections of deficiencies or problems, to identify in-services training needs and to suggest improvements to the delivery of contracted services. All such meetings shall be documented in writing by the parties, and such documentation shall include, but not be limited to, who was in attendance, what issues were discussed and any resolutions.

CONTRACTOR'S administration and medical staff shall meet monthly to disseminate information and for problem solving. CONTRACTOR'S Regional Office personnel, the Health Services Administrator and the Facility Administrator or designee shall meet quarterly to review the effectiveness of the Services delivered at the Facility.

During the term of this Agreement, but only as specifically requested by the COUNTY, CONTRACTOR, by and through its Chief Executive Officer or other duly designated officer, shall provide in-person information/status reports regarding correctional medical and mental

health care services at the FACILITY to the COUNTY's Legislative Protective Services Committee at its monthly legislative meeting. When applicable, the COUNTY shall inform CONTRACTOR of the scheduled date of such monthly Legislative Protective Services Committee Meeting(s) as soon as practicable after the monthly legislative committee meeting schedule(s) becomes available from the County Legislature, but in no event, unless due to cancellation or scheduling change, less than five business (5) days prior to such legislative committee meeting date(s).

CONTRACTOR, by and through its Chief Executive Officer or other duly designated officer, shall visit the FACILITY bi-monthly to address, among other things, any concerns of the FACILITY's doctor(s), dentist(s), mental health care provider(s), nurse(s) and any other health care provider(s) at the FACILITY. CONTRACTOR shall maintain written documentation of such visits and any of the concerns discussed, and shall make such documentation available to COUNTY at its request.

Additionally, at the COUNTY's discretion and upon reasonable notice to CONTRACTOR, CONTRACTOR's Chief Executive Officer or other duly designated officer, shall meet with COUNTY personnel, including, without limitation, the FACILITY's chief administrative officer, and shall be available to discuss by phone, during normal working hours, with the County Executive, at the County Executive's discretion, any issues/concerns/matters regarding correctional medical and mental health care/services at the FACILITY. Reasonable efforts shall be made between the COUNTY and CONTRACTOR to schedule any of the foregoing in-person meetings, as requested, close in time to such other COUNTY appointments

with CONTRACTOR in order for CONTRACTOR to coordinate scheduling and travel plans efficiently.

FIFTH: CONTRACTOR shall maintain statistical data in the following areas: inmate sick calls requests, sick call encounters (non-physicians), sick call encounters (physicians and specialists), mental health evaluations and treatment related data, hospital stays, off-site emergency visits, off-site consultant specialty referrals, history and physical assessments, medications, lab testing (including for HIV/AIDS, HEP-C), radiology, dental encounters for examination and treatment, chronic care, use of clinically ordered restraints, constant watches, emergency forced medications, and in such areas as the COUNTY believes would be useful for evaluating the health care program and planning for its future. The CONTRACTOR shall provide the COUNTY with an annual and monthly reports of these statistical data, as well as a monthly narrative report of the Services provided that month. Twice annually, the CONTRACTOR must provide to the COUNTY an analytical report comparing the reported monthly statistics. The narrative report of the Services provided that is included in the monthly report shall include, but not be limited to, the effectiveness of the health care delivery system, a description of any environmental factors which may require improvement, changes effected since the last report, and recommendations for corrective action if needed.

The monthly and an annual report shall also include the following, at a minimum:

1. Inmate's/Patient's requests for various services
2. Inmates/Patients seen at physician's clinic
3. Inmates/Patients seen by dentist
4. Inmates/Patients seen by mental health
5. Special Needs Unit admission, patient days, average length of stay
6. Off-site hospital admissions
7. Medical specialty consultation referrals
8. Intake medical screening

9. History and physical assessments
10. Diagnostic studies
11. Percentage of inmate/patient population dispensed medication
12. Inmates testing positive for sexually transmitted diseases
13. Inmates/Patients testing positive for HIV
14. Inmate/Patient mortality
15. Other data deemed appropriate by the Facility's Administration and/or the COUNTY

CONTRACTOR shall provide the COUNTY with a quarterly report that summarizes the activities of the Case Management System, including but not limited to the served population, number of interviews, testing results and outcomes.

CONTRACTOR shall also submit to the COUNTY, on a monthly basis, an Environmental Health and Safety Report. The Environmental Health and Safety Report evaluates the Facility to determine if it is safe and clean in order to promote good health.

CONTRACTOR shall deliver to the COUNTY any other reports reasonably requested by COUNTY, and those set forth in the RFP and Proposal.

SIXTH: The term of this Agreement will commence January 1, 2019 and will terminate on December 31, 2021, unless otherwise terminated in accordance with the provisions hereof. COUNTY reserves the option to renew this Agreement for three (3) additional years, renewed one year at a time on the same terms and conditions as provided herein, by providing written notice to CONTRACTOR of its intent to renew within ninety (90) days prior to the termination of the then current term.

SEVENTH: This is a full vendor risk comprehensive health services Agreement. CONTRACTOR is responsible for all health related costs incurred by inmates during the term of

this Agreement. In exchange, the COUNTY will pay the CONTRACTOR the following during the term of this Agreement for the Services rendered (the "Service Fee"):

- Year One: (January 1 – December 31, 2019)
 - o eleven (11) monthly payments of \$95,054.17, and one (1) monthly payment of \$95,054.13, for a total of \$1,140,650.00 annually;
- Year Two (January 1 – December 31, 2020)
 - o eleven (11) monthly payments of \$97,515.97, and one (1) monthly payment of \$97,516.02, for a total of \$1,170,191.69 annually; and
- Year Three (January 1 – December 31, 2021)
 - o eleven (11) monthly payments of \$97,515.97 and one (1) monthly payment of \$97,516.02, for a total of \$1,170,191.69 annually.

In any calendar month during this Agreement that the average daily population ("ADP") at the Facility exceeds one hundred (100) inmates, the compensation paid to the CONTRACTOR will increase, on the month after the exceedance in ADP, by \$3.40 for each inmate who is in custody at the Facility for more than four (4) hours. The ADP shall be calculated by totaling the daily population counts contained in the Chief Jailer's daily population reports and dividing the resultant sum by the number of days in that month.

The amounts set forth above shall remain firm through the first three-year contract period, with no adjustments allowed, except in the event of a change in law or change in staffing (as set forth in the "Second" paragraph hereof). If there is a change to any existing applicable law and/or any new applicable law is passed pertaining to this Agreement and/or the Services, the COUNTY and the CONTRACTOR agree to negotiate the effect such changes will have on

the Services and this Agreement, if any. If the parties are unable to agree on the appropriate adjustment(s), the Agreement may be terminated.

If the COUNTY exercises any of the option years of this Agreement, the CONTRACTOR may submit a request for an increase in compensation at least ninety (90) days in advance of the anniversary date; in writing to the COUNTY Director of Purchasing. Any and all increases in compensation shall be adjusted by the previous calendar year's twelve month average of the Cost-of-Living Index for the U.S. City Average of Medical Care Services as published by the United States Department of Labor.

After the expiration of the initial three (3) year agreement and subsequent three (3), one-year (1) renewals, the COUNTY will be required to issue a new request for proposals and award a new contract. This Agreement will be continue on a month-to-month basis, if a new contract is not awarded prior to the expiration of the last renewal term of this Agreement. Provided the CONTRACTOR continues to meet the terms set forth in this Agreement, CONTRACTOR shall be entitled to continue receiving its monthly compensation in accordance with this paragraph and the above annual increases during each year in which a new contract has not been executed.

CONTRACTOR shall submit an invoice to the Facility's Administration for approval by the Sheriff or his/her duly authorized representative, as of the first (1st) day of the month preceding delivery of the Services. The COUNTY shall make payment on approved invoices by the first (1st) day in the month for which services are provided.

Prior to the making of any payments hereunder, the COUNTY may, at its option, audit all files and disbursement records of CONTRACTOR as are reasonably pertinent to this Agreement to substantiate the basis for payment, including but not limited to, CONTRACTOR'S records of

its financial transactions with the COUNTY for all on-site and off-site expenses, including, without limitation, pharmaceutical, laboratory, X-rays and other tests, insurance, and administrative costs.

CONTRACTOR'S files and records shall be kept in accordance with sound accounting practices and each transaction shall be fully documented. Upon COUNTY's written request for such files and records, including those pertaining to the \$12 million line of credit through PNC Bank, CONTRACTOR shall provide the files and records to the County Auditor or his/her authorized representative, as well as to the County Commissioner of Finance, or his/her duly authorized representative, within thirty (30) days of the COUNTY'S request.

EIGHTH: CONTRACTOR agrees not to hold itself out as an agency, department or office of the COUNTY, nor shall any of CONTRACTOR'S officers, employees or agents make any claim against the COUNTY as an officer or employee thereof for such benefit as workers' compensation coverage, unemployment insurance benefits, social security coverage or retirement membership or credit or any other benefits accruing to said officers or employees of the COUNTY.

NINTH: The parties agree that, except as otherwise provided herein with respect to termination rights, in the event that either party breaches this Agreement, the other party may exercise any legal rights it has under this Agreement and under applicable law to recover damages or to secure specific performance, and that such rights to recover damages and to secure specific performance shall ordinarily constitute adequate remedies for any such breach.

It is understood and agreed by and between the parties hereto that the Services to be rendered by CONTRACTOR in performance of this Agreement are a material element of this Agreement. Any failure to provide such Services will be deemed a material breach and this

Agreement will terminate in accordance with the terms hereof. Notwithstanding the foregoing and without waiving any of its rights hereunder, the COUNTY may, at its discretion, provide CONTRACTOR, within a reasonable period of time under the circumstances, with a written notice to cure any such breach. If CONTRACTOR fails to cure any such breach within ten (10) days of said written notice and to the reasonable satisfaction of the COUNTY, the COUNTY may terminate any unfulfilled portion of this Agreement without any further notice to CONTRACTOR and the COUNTY shall be entitled to seek from CONTRACTOR, among other things, damages, at law or in equity, under the circumstances. Except as otherwise contemplated herein and/or agreed to between the parties hereto, no substitution of the Services of CONTRACTOR by another will be permitted during the term of this Agreement without the express written consent of the COUNTY.

TENTH: Except as otherwise provided under paragraph "NINTH" herein, the COUNTY, upon thirty (30) days' notice to CONTRACTOR, may terminate this Agreement, in whole or in part, when the COUNTY deems it to be in its best interest. In such event, CONTRACTOR will be compensated and the COUNTY will be liable only for payment for Services already rendered and expenses incurred under this Agreement up to the effective date of termination.

In the event of a dispute as to the value of the services rendered by CONTRACTOR prior to the date of termination, it is understood and agreed that the Sheriff, or his/her duly authorized representative, will determine the value of such services rendered by CONTRACTOR. Such reasonable and good faith determination will be accepted by CONTRACTOR as final.

ELEVENTH: Subcontractor shall mean every person (other than employees of the CONTRACTOR) employed or engaged by the CONTRACTOR or any person directly or

indirectly in privity with the CONTRACTOR (including every subcontractor of whatever tier) for any portion of the Services, whether for the furnishing of labor, equipment, supplies, services, or otherwise in connection with the Services. CONTRACTOR intends to utilize those Subcontractors set forth in the Proposal. Any additional Subcontractors shall be subject to the COUNTY'S written approval, requested in advance of the commencement of Subcontractor's services.

All Subcontractors shall have the obligation to comply with all covenants and agreements of the CONTRACTOR set forth herein. The CONTRACTOR hereby agrees that the CONTRACTOR shall be responsible for the performance or failure to perform of such Subcontractor as if the CONTRACTOR was performing the services itself.

The CONTRACTOR shall retain full responsibility to the COUNTY under the terms of this Agreement for all matters related to the Services notwithstanding the execution or terms and conditions of any subcontract. No failure of any Subcontractor used by the CONTRACTOR in connection with the provision of the Services shall relieve the CONTRACTOR from its obligations hereunder to perform the Services. The CONTRACTOR shall be responsible for settling and resolving with all Subcontractors all claims arising out of the Services. The CONTRACTOR shall pay or cause to be paid to all direct Subcontractors all amounts due in accordance with their respective Services furnished. The CONTRACTOR acknowledges that its indemnity obligations under this Agreement shall extend to all claims for payment or damages by any Subcontractor who furnishes or claims to have furnished any labor, services, materials or equipment in connection with the Services.

The CONTRACTOR shall not assign, transfer, convey, sublet or otherwise dispose of the Agreement, or of its right, title, or interest therein, or assign all or any of the portion of money that may be due or become due under the terms hereof, or its power to execute the Agreement, to any other person or corporation without the previous written consent of the COUNTY. If the CONTRACTOR violates this section, the COUNTY shall have the right, in its sole discretion, to terminate this Agreement without prior notice and without a cure period, and in the event of a termination pursuant to this provision the CONTRACTOR shall forfeit all monies earned hereunder. This Agreement may only be assigned by either party hereto with the prior written consent of the other party, except that the COUNTY may make such assignments, create such security interests in its rights hereunder and pledge such monies receivable hereunder as may be required in connection with the issuance of bonds without the consent of the CONTRACTOR.

TWELFTH: Commencing with the Effective Date and continuing throughout the remainder of the term of this Agreement, the CONTRACTOR shall obtain and maintain the insurance specified in Appendix B entitled "Putnam County Insurance Requirements," annexed hereto and made a part hereof, and shall comply with all applicable insurance requirements. Insurance coverage required pursuant to this section shall be maintained with generally recognized financially responsible insurers reasonably acceptable to the COUNTY and qualified and licensed to insure risks in the State of New York. The cost of the CONTRACTOR insurance shall be paid by the CONTRACTOR and shall not be subject to reimbursement by the COUNTY. The CONTRACTOR shall pay all insurance deductibles. The CONTRACTOR shall provide a Certificate of Insurance to the COUNTY evidencing CONTRACTOR'S compliance

with the insurance requirements included herein. In addition, if a peril occurs which is an insurable event but the costs incurred due to such peril are less than the deductible amounts, the Contractor shall be responsible for paying the same amount or percentage of such costs as it would pay if such costs were a deductible amount. It is understood and agreed by the parties hereto that CONTRACTOR, its employees, its Subcontractors, including, without limitation, physicians, nurses, dentists, psychiatrists and other medical care providers shall be required to obtain insurance(s) as set forth on Schedule "B" entitled "Putnam County Insurance Requirements," annexed hereto and made a part hereof. CONTRACTOR shall submit to the COUNTY proofs of insurances for said Subcontractors prior to such Subcontractors performing any Services hereunder.

CONTRACTOR also agrees to provide the COUNTY with an endorsement to its professional liability policy evidencing an increase in coverage to \$2,000,000 per claim and \$4,000,000 aggregate.

THIRTEENTH: CONTRACTOR will comply, at its sole expense, with the provisions of all applicable state and municipal requirements and with all state and federal laws applicable to CONTRACTOR. CONTRACTOR will further comply with all rules, regulations and licensing requirements pertaining to its professional status and that of its employees, partners, associates, Subcontractors and others employed to render the services hereunder.

CONTRACTOR expressly agrees that it shall be solely responsible for supervising its employees, that it shall comply with all rules, regulations, orders, standards and interpretations promulgated pursuant to the OSHA and Public Employees Safety and Health Act ("PESH"), including, but not limited to, training, providing personal protective equipment, adhering to all

appropriate lockout/tagout procedures, and providing all notices, material safety data sheets, labels, etc. required by the right-to-know standard under OSHA.

The conduct and control of the performance of Services contemplated herein lie solely with CONTRACTOR.

All of CONTRACTOR'S staff and Subcontractors shall possess current New York State licensure/certification as statutorily required. All staff credentials must be kept at the Facility and be made available to the Sheriff on request. The Sheriff has final refusal of all personnel. A criminal background check will be conducted by the Sheriff on all personnel and any criminal findings may result in the staff being dismissed or not qualified to work in the COUNTY. Any cost associated with such background check is to be borne by the CONTRACTOR.

CONTRACTOR shall obtain and maintain NCCHC accreditation of the health care program within twelve (12) months of the Service Commencement Date. Accreditation shall be achieved in accordance with the current NCCHC Standards for Health Services in Correctional Facilities. If CONTRACTOR fails to maintain NCCHC accreditation, the COUNTY will have the right, without restriction of any kind, to deduct five percent (5%) from the monies due to the CONTRACTOR or to become due to the CONTRACTOR for each month that the accreditation is not in effect as required. The CONTRACTOR shall be obligated to provide all Services set forth herein during this period.

FOURTEENTH: No discrimination by CONTRACTOR will be permitted during the performance of this Agreement with respect to race, religion, creed, color, national origin, sex, age, handicap, political affiliation or beliefs.

FIFTEENTH: Notwithstanding anything contained herein to the contrary, in addition to, and not in limitation of, the insurance requirements contained in Schedule "B," attached hereto and made a part of this Agreement, CONTRACTOR agrees, to the fullest extent permitted by law, to protect, defend, indemnify and hold the County of Putnam and its officers, employees and agents free and harmless from and against any and all losses, penalties, damages, settlements, costs, charges, professional fees or other expenses or liabilities of every kind and character arising out of or relating to any and all claims, liens, demands, obligations, actions, proceedings or causes of action of every kind and character in connection with or arising directly or indirectly out of this Agreement and/or the performance hereof, unless that liability was created by the gross negligence of the COUNTY. CONTRACTOR further agrees to investigate, handle, respond to, provide defense for and defend any such claims, etc., at its sole expense, and agrees to bear all costs and expenses related thereto, even if it (claims, etc.) is groundless, false or fraudulent. CONTRACTOR shall not settle any claims in a manner which imposes any obligation on COUNTY without the prior written consent of COUNTY. COUNTY shall be entitled to engage counsel at its sole expense to consult with CONTRACTOR and CONTRACTOR'S legal representatives with respect to the defense of the claim. The provisions of this section shall survive the termination of this Agreement.

SIXTEENTH: CONTRACTOR shall, during the term of this Agreement, provide and maintain a performance bond as security for providing the Services at a value of not less than 100% of the annual contract cost in each respective year, *to wit:* \$1,140,650 in Year 1, \$1,170,191.69 in Year 2 and 3. The cost and expense of obtaining and maintaining the performance bond shall be included in the Service Fee. The performance bond shall be in the

form set forth in Section F of the insurance requirements contained in Schedule "B" and executed by a surety company authorized to do business in the State of New York. An authorized Consent of Surety from a surety company authorized to do business in the State of New York consenting to become bound as surety and guaranteeing the faithful performance by CONTRACTOR during the term of this Agreement is required and shall be attached hereto as Schedule "C". The bond underwriter or surety must appear on the U.S. Treasury Department's listing of approved sureties (as specified in Department Circular 570) and all sureties must be licensed to transact business in the State of New York as a surety company. Except as otherwise agreed to between the parties hereto, CONTRACTOR shall provide the COUNTY the performance bond/Consent of Surety at the time this Agreement is executed.

SEVENTEENTH: The failure of the COUNTY to insist, in any one or more instances, upon strict performance of any term or condition herein contained shall not be deemed a waiver or relinquishment for the future of such term of condition, but the same shall remain in full force and effect. No waiver by the COUNTY of any provision hereof shall be implied.

EIGHTEENTH: All notices of any nature referred to in this Agreement shall be in writing and hand delivered or sent by registered or certified mail, postage pre-paid, to the respective addresses set forth below or to such other addresses as the respective parties hereto may designate in writing:

To the COUNTY:

COUNTY ATTORNEY
48 Gleneida Avenue
Carmel, New York 10512

To CONTRACTOR:

**PRIMECARE MEDICAL OF NEW YORK,
INC.**
3940 Locust Lane,
Harrisburg, Pennsylvania 17109

All notices shall be effective on the date of mailing.

NINETEENTH: This Agreement and its attachments, including the RFP and the Proposal, constitute the entire Agreement between the parties with respect to the subject matter hereof and shall supersede all previous negotiations, commitments and writings. With respect to a conflict, error, or discrepancy within the Agreement, RFP, and Proposal, those documents shall be given precedence in the following order (1) this Agreement; (2) RFP; and (3) Proposal. Moreover, CONTRACTOR expressly agrees to be subject to and bound by the terms provided in the "Business Associate Addendum", a copy of which is attached hereto and made a part hereof as Schedule "D". This Agreement will not be released, discharged, changed or modified except by an instrument in writing signed by a duly authorized representative of each of the parties.

TWENTIETH: This Agreement will be deemed executory only to the extent of the monies available to the COUNTY for the performance of its terms and no liability will be incurred by the COUNTY beyond the monies so available.

TWENTY-FIRST: This Agreement will be construed and enforced in accordance with the laws of the State of New York. Any and all disputes and/or legal actions or proceedings arising out of this Agreement shall be venued in Putnam County, New York. The parties expressly waive any right otherwise provided by any applicable law to remove a matter regarding this Agreement to any other state or federal venue.

TWENTY-SECOND: Unless specifically provided by law, electronic signatures may be used in lieu of a signature affixed by hand. The use of said electronic signatures shall have the same force and effect of law and shall be deemed binding. Moreover, this contract shall not be

deemed effective until fully executed by the CONTRACTOR, the required COUNTY signatories and the County Executive.

TWENTY-THIRD: CONTRACTOR is required to provide the following documents to the COUNTY before this Agreement will be finalized and/or executed by the COUNTY, and before the COUNTY will approve any voucher/invoice submitted for payment by CONTRACTOR:

1. "Request for Taxpayer Identification Number and Certification" form
(IRS Form W-9).
2. "Notice of Application to Certify Compliance with Federal Law" and "Affidavit of Compliance," in accordance with the provisions of 8 U.S.C. §1324a and Chapter 134 of the Putnam County Code. In the event that CONTRACTOR subcontracts any part of the work under this Agreement in accordance with paragraph "TENTH" of this Agreement, CONTRACTOR shall provide the COUNTY with a completed "Notice of Application to Certify Compliance with Federal Law" and an "Affidavit of Compliance" for each and every subcontractor hired to perform work under this Agreement.
3. Appropriate Certificate of Insurance, in accordance with paragraph "TWELFTH" of this Agreement and the requirements contained in Schedule "B".

TWENTY-FOURTH: The parties recognize that a variety of contract administrative matters will routinely arise throughout the term of this Agreement. These matters will by their nature involve requests, notices, questions, assertions, responses, objections, reports, claims, and other communications made personally, in meetings, by phone, by mail and by electronic and

computer communications. The purpose of this section is to set forth a process by which the resolution of the matters at issue in such communications, once resolution is reached, can be formally reflected in the common records of the parties so as to permit the orderly and effective administration of this Agreement. The principal formal tool for the administration of matters arising under this Agreement among the parties shall be a "Contract Administration Memorandum." A Contract Administration Memorandum shall be prepared, once all preliminary communications have been concluded, to evidence the resolution reached by the parties as to matters of interpretation and application arising during the course of the performance of their obligations hereunder. Such matters may include, for example: (1) issues as to the meaning, interpretation, application or calculation to be made under any provision hereof; (2) notices, waivers, releases, satisfactions, confirmations, further assurances, consents and approvals given hereunder; and (3) other similar contract administration matters.

The COUNTY or the CONTRACTOR may request the execution of a Contract Administration Memorandum. When resolution of the matter is reached, a Contract Administration Memorandum shall be prepared by or at the direction of the COUNTY reflecting the resolution. The Contract Administration Memorandum shall be numbered, dated, signed by an authorized representative of each party. The COUNTY and the CONTRACTOR each shall maintain a parallel, identical file of all Contract Administration Memoranda, separate and distinct from all other documents relating to the administration and performance of this Agreement. Executed Contract Administration Memoranda shall serve to guide the ongoing interpretation, application and performance of this Agreement. Any material change, alteration,

revision or modification of this Agreement, however, shall be effectuated only through a formal amendment to this Agreement properly authorized by the parties.

TWENTY-FIFTH: Any medical grievances filed by inmate(s)/patient(s) shall be referred to the on-site Health Services Administrator, who shall review the claim and gather information concerning the complaint and take appropriate action consistent with institutional grievance procedures. A copy of all such grievances shall be provided to the COUNTY. All grievances received shall be reviewed for patterns and trends at the monthly Continuous Quality Improvement team meetings. If patterns are noted, CONTRACTOR shall develop a plan of action to improve inmate/patient satisfaction rates. The Health Services Administrator shall be responsible for meeting with all inmates/patients who submit a medical grievance. The purpose of this meeting is to obtain all of the facts regarding the grievance and to provide education when necessary. All grievances received shall also be reviewed at the CONTRACTOR'S monthly health care staff meeting. The review shall include any corrective action plans developed as a result of patterns or trends noted. The CONTRACTOR shall provide the COUNTY with a copy of all corrective action plans.

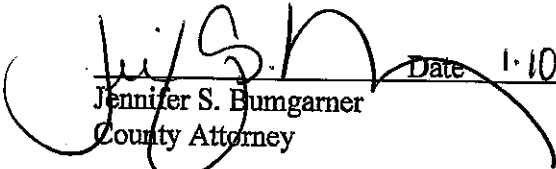
TWENTY-SIXTH: If any clause, provision, subsection, or section of this Agreement shall be ruled invalid by any court of competent jurisdiction, then the parties shall: (1) promptly meet and negotiate a substitute for such clause, provision, subsection, or section which shall, to the greatest extent legally permissible, effect the intent of the parties therein; (2) if necessary or desirable to accomplish item (1) above, apply to the court having declared such invalidity for a judicial construction of the invalidated portion of this Agreement; and (3) negotiate such changes in, substitutions for or additions to the remaining provisions of this Agreement as may be


necessary in addition to and in conjunction with items (1) and (2) above to effect the intent of the parties in the invalid provision. The invalidity of such clause, provision, subsection, or section shall not affect any of the remaining provisions hereof, and this Agreement shall be construed and enforced as if such invalid portion did not exist.

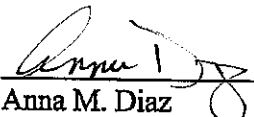
IN WITNESS WHEREOF, the parties have executed this Agreement in Carmel, New York, on the date hereinabove set forth.

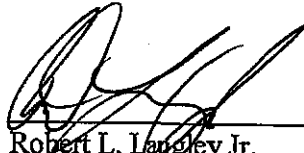
READ & APPROVED:

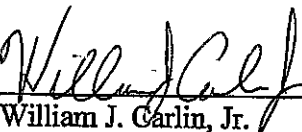
THE COUNTY OF PUTNAM:


Date 1.10.19
Jennifer S. Bumgarner
County Attorney

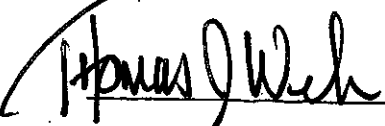

Date 1.17.19
MaryEllen Odell
County Executive


Date 1/10/19
Anna M. Diaz
Senior Deputy County Attorney


Date 01/08/19
Robert L. Langley Jr.
Putnam County Sheriff


Date 1/10/19
William J. Carlin, Jr.
Commissioner of Finance

**PRIMECARE MEDICAL OF
NEW YORK, INC.**



Date 12.26.18

By: THOMAS J. WEBER, CEO
Please Print Name & Title

ACKNOWLEDGMENT OF PUTNAM COUNTY:

STATE OF NEW YORK)
) ss.:
COUNTY OF PUTNAM)

On this 17 day of JANUARY, 2018 before me personally came **MARYELLEN ODELL** to me known, who being by me duly sworn, did depose and say that she is the County Executive of Putnam County, the corporation described in and which executed the foregoing instrument; that she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; and the same was affixed to said instrument under authority of the Putnam County Charter and that she signed her name thereto under the same authority.

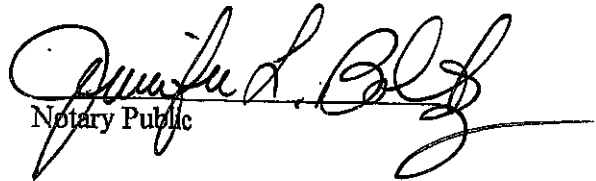

Notary Public

MAUREEN BERNARD
Notary Public, State of New York
No: 01BEG09398
Qualified in Putnam County
Commission Expires May 10, 2020

ACKNOWLEDGMENT OF CONTRACTOR:

STATE OF PENNSYLVANIA)
) ss.:
COUNTY OF DAUPHIN)

On this 26th day of DECEMBER, 2018 before me personally appeared **THOMAS J. WEBER** personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that s/he executed the same in his/her capacity and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.


Notary Public

Commonwealth of Pennsylvania - Notary Seal
Jennifer L. Boltz, Notary Public
Dauphin County
My commission expires May 30, 2021
Commission number 1013944
Member, Pennsylvania Association of Notaries

SCHEDULE A

Duties And Responsibilities - PrimeCare Medical shall ensure the duties and responsibilities of medical personnel shall be governed by written job descriptions approved by the responsible physician and the facility administrator. Verification of current credentials and job descriptions shall be kept on file. Written job descriptions shall include qualifications required and the specific role in the health care delivery system of that position.

PrimeCare Medical intends to use an automated time keeping system at the Putnam County Correctional Facility for payroll and reporting purposes. The current automated time keeping system utilized by PrimeCare Medical is a hand / finger scan device, which is provided through our contracted payroll company, ECI. Further, PrimeCare Medical shall comply with any required Facility sign-in / sign-out procedures.

STAFFING MATRIX

Putnam County Correctional Facility

Position	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hrs/Wk	
DAY SHIFT									
Health Services Administrator (RN)	8	8	8	8	8			40	
Medical Director/Physician		2			2			4	
Certified Registered Nurse Practitioner	2		2					4	
Psychiatrist			3					3	
Registered Nurse						8	8	16	
Licensed Clinical Social Worker	8	8	8	8	8			40	
Dentist				2				2	
Administrative Assistant	8	8	8	8	8			40	
EVENING SHIFT									
Registered Nurse	8	8	8	8	8	8	8	56	
NIGHT SHIFT									
Registered Nurse	8	8	8	8	8	8	8	56	
Total Hours Per Week									261

Professional Services contracts dictate that services shall be provided within a reasonable amount of hours proposed. These hours may fluctuate dependent upon the medical services provider; and the medical services provider never leaves the facility until all of his/her work is completed. Also, the medical services provider and the Health Services Administrator are typically not required to be on-site at the Facility during Federal Holidays. Furthermore, all professional medical services providers shall be available on-call, twenty-four (24) hours per day, seven (7) days per week. PrimeCare Medical's Facility Medical Directors, if requested by Putnam County Correctional Facility, shall make all reasonable attempts to arrange for courtesy privileges for use of local hospitals for admitting, monitoring, and discharging inmates/patients being hospitalized. Copies of staff schedules shall be provided to the Facility's Administration on a monthly basis, with a bi-weekly staffing analysis (daily if required) also being submitted, as

required by the RFP. PrimeCare Medical currently completes similar staffing analyses for several of our other contracted client facilities.

Relief Factor to account for combined leave is based upon the PrimeCare Medical's full time employee's employment status and longevity. It is the policy of PrimeCare Medical to ensure that all full-time employees are provided with a sufficient amount of leave to permit time away from work, consistent with facility staffing needs. The leave accrual process starts when an employee is hired full-time. Part-time or PRN staff do not earn combined leave.

Calculating relief factor is based upon the average employee with three years in a full time employment status of 20 days per year of earned leave. The 20 days per year adds an additional 160 work hours (8 hours per day x 20 days) to the employee's normal work year or 2080 hours (40 hours per week x 52 weeks per year) for a total of 2240 work hours per year (2080 hours + 160 hours). The additional 20 days per year calculates out to an additional 3.08 or 0.077 full time equivalents (FTE) (160 hours per year / 52 weeks) hours per work week as a relief factor on average to account for the full time employees' accrued leave. Typically the relief factor is covered by part-time and PRN staff. To illustrate with a FTE compliment of 15 this represents on average an additional 1.16 FTE per week (15 FTE x 0.077 relief factor); however, PrimeCare Medical does not limit the number of part-time or PRN staff at a facility to only the calculated value for the weekly relief factor.

The Facility Administrator shall have the right of approval for all employees and prospective employees to be utilized by PrimeCare Medical under this contract. This right may be exercised at any time, but such approvals shall be withheld for valid security reasons only. PrimeCare Medical recognizes the requirements of the Putnam County Correctional Facility and its security clearance procedures.

ORIENTATION MANUAL

PrimeCare Medical offers a comprehensive Orientation Manual which provides direction and guidance into key Corporation policies and procedures. The Orientation Manual is designed to be utilized for each new staff member. The period of orientation shall be approximately eighty (80) hours. Orientation shall commence on the first day of hire and should be completed within the first month of employment. An Orientation to the respective Correctional Facility (Security Policy and Procedures) for each new employee is required to also occur within the initial Orientation Period. PrimeCare Medical will be responsible for the orientation of all clinical and non-clinical staff (Employees and Subcontractors).

CREDENTIALING

PrimeCare Medical shall provide to the Putnam County Correctional Facility a current accounting of all required credentials for professionally licensed and certified staff. Our current system maintains capabilities of storing, retrieval, reporting, and auditing for all staff credentials/license renewals, first aid and CPR expirations, and malpractice insurance criteria. Qualified health care professionals shall not possess restricted licenses as designated by the

SCHEDULE B

PUTNAM COUNTY INSURANCE REQUIREMENTS

THE FOLLOWING MUST APPEAR ON EACH INSURANCE CERTIFICATE:

UNDER THE CERTIFICATE HOLDER SECTION:

**COUNTY OF PUTNAM
48 GLENEIDA AVENUE
CARMEL, NEW YORK 10512
ATTN.: LAW DEPT./RISK MANAGER**

**ADDITIONALLY, IN THE SPACE (DESCRIPTION OF OPERATIONS/LOCATIONS)
ON THE INSURANCE CERTIFICATE, IT MUST BE NOTED AS FOLLOWS:**

***"PUTNAM COUNTY IS INCLUDED AS AN ADDITIONAL INSURED except for
Professional Liability and Workers' Comp."***

It is the requirement of the County of Putnam and/or Putnam County Highway Department that for work performed under contract and/or permit authorized by the County and/or Highway Department and/or any event or performance conducted on County property that the contractor or permittee procure and maintain at their own expense and without expense to the County, until final acceptance of the work by the County, the insurances listed below.

Before commencement of any work, event or performance a certificate or certificates of insurance must be furnished to the County and/or Highway Department in forms satisfactory to the County and/or Highway Department.

All insurance coverages must be from an A.M. Best Rated "secured" (B++A++), New York State admitted insurer.

All certificates of insurance must provide that the policy or policies shall not be changed or canceled until at least thirty (30) days prior written notice has been given to the County and/or Highway Department.

When required by the Highway Department the "XCU" exclusion of the policy or policies shall be eliminated or show proof that "XCU" is covered.

**The Contractor shall provide and maintain at its own expense the following
minimum insurance coverage:**

- A. **Workers' Compensation Insurance** - This is statutorily required and is required for all contracts. Each policy must cover all operations and all locations involved in the contract. If applicable, the policy should also include New York State Disability Benefits. Proof of Workers' Compensation Insurance is required and should be received by Putnam County on a C105.2 form, SI 12 form, form or U-26.3 - all of these forms are available through your carrier.
- B. **Commercial General Liability** - covering all operations and all locations involved in the contract, including the following coverages:
 - \$2,000,000 General Aggregate
 - 5,000 Medical Expense Limit
 - \$1,000,000 Personal & Advertising Injury Limit
 - \$1,000,000 Each Occurrence
 - \$2,000,000 Products/Completed Operations Aggregate
 - \$50,000 Fire Damage Legal Liability Limit

- C. **Commercial Automobile Liability** - Covering all operations and locations involved in the contract, including the following coverages:
(1) Owned Automobiles (2) Hired Automobiles (3) Non-Owned Automobiles
Unless specifically required, each policy shall provide limits of not less than \$1,000,000 Combined Single Limits for Bodily Injury and Property Damage.
- D. If applicable, Professional Liability (errors and omissions) in the amount of at least \$1,000,000 per claim.
- E. **Excess Liability or Umbrella Policy**
Limits depending on the following contract size
\$100,000 - \$250,000 - 1 million
\$250,001 - \$500,000 - 5 million
\$500,000+ 10 million
- F. **Bid, Performance/Payment, Labor & Material Bonds**
Required for any contract in excess of \$250,000. These bonds shall be provided by a New York State admitted surety company in good standing. Only the (AIA) - The American Institute of Architects- A312 form- will be accepted. In addition, pursuant to NYS Insurance Law Section 1111 all bonds must include a certificate of solvency for the surety which shall be updated annually. In addition, the Surety must be on the U.S. Treasury List (Circular 570) of acceptable sureties.

STANDARD INSURANCE REQUIREMENTS AND INDEMNIFICATION REQUIREMENT:

All policies and certificates of insurance of the contractor shall contain the following clauses:

1. Putnam County is named as an additional insured and as Certificate Holder. Insurers shall have no right of recovery or subrogation against the County of Putnam (including its agents and agencies), it being the intention of the parties that the insurance policies so effected shall protect both parties and be primary coverage for any and all losses covered by the above described insurance.
2. The Clause "other insurance provisions" in a policy in which the County of Putnam is named as an additional insured, shall not apply to the County of Putnam.
3. The insurance companies issuing the policy or policies shall have no recourse against the County of Putnam (including its agents or agencies) for payment of any premiums or for assessments under any form of policy.
4. Any and all deductibles in the above described insurance policies shall be assumed by and be for the account of, and at the risk of the contractor.

SCHEDULE C

PAYMENT BOND

International Fidelity Insurance Company
2507 Boulevard of the Generals Suite 125 Norristown, PA 19403

Bond No.: PAIFSU0658485

CONTRACTOR:

(Name, legal status and address)

PrimeCare Medical Services, Inc.
3940 Locust Lane
Harrisburg, PA 17109

SURETY:

(Name, legal status and principal place of business)

International Fidelity Insurance Company
2507 Boulevard of the Generals, Suite 125
Norristown, PA 19403

OWNER:

(Name, legal status and address)

County of Putnam
40 Gleneida Avenue, Room 105
Carmel, NY 10512

CONSTRUCTION CONTRACT

Date: January 1, 2019

Amount: One Million One Hundred Forty Thousand Six Hundred Fifty Dollars and 00/100 (\$1,140,650.00)

Description:

(Name and location)

Putnam County RFP 7-2018 Comprehensive Healthcare Services for Correctional Facility

BOND

Date: January 1, 2019

(Not earlier than Construction Contract Date)

Amount: One Million One Hundred Forty Thousand Six Hundred Fifty Dollars and 00/100 (\$1,140,650.00)

Modifications to this Bond: None See Section 18

CONTRACTOR AS PRINCIPAL

Company:

(Corporate Seal)

PrimeCare Medical Services, Inc.

Signature:

Name and Title:

THOMAS J. WEBER

SURETY

Company:

International Fidelity Insurance Company

Signature:

Name and Title: R. Clay Foltz, Attorney In Fact

(Any additional signatures appear on the last page of this Payment Bond.)

(FOR INFORMATION ONLY — Name, address and telephone)

AGENT or BROKER:

Delmarva Underwriters, Ltd t/a The Bond Agency
846 Walker Road, Suite 31-1
Dover, DE 19904
(302) 678-9399

OWNER'S REPRESENTATIVE:

(Architect, Engineer or other party:)

§ 1 The Contractor and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors and assigns to the Owner to pay for labor, materials and equipment furnished for use in the performance of the Construction Contract, which is incorporated herein by reference, subject to the following terms.

§ 2 If the Contractor promptly makes payment of all sums due to Claimants, and defends, indemnifies and holds harmless the Owner from claims, demands, liens or suits by any person or entity seeking payment for labor, materials or equipment

furnished for use in the performance of the Construction Contract, then the Surety and the Contractor shall have no obligation under this Bond.

§ 3 If there is no Owner Default under the Construction Contract, the Surety's obligation to the Owner under this Bond shall arise after the Owner has promptly notified the Contractor and the Surety (at the address described in Section 13) of claims, demands, liens or suits against the Owner or the Owner's property by any person or entity seeking payment for labor, materials or equipment furnished for use in the performance of the Construction Contract and tendered defense of such claims, demands, liens or suits to the Contractor and the Surety.

§ 4 When the Owner has satisfied the conditions in Section 3, the Surety shall promptly and at the Surety's expense defend, indemnify and hold harmless the Owner against a duly tendered claim, demand, lien or suit.

§ 5 The Surety's obligations to a Claimant under this Bond shall arise after the following:

§ 5.1 Claimants, who do not have a direct contract with the Contractor,

- .1 have furnished a written notice of non-payment to the Contractor, stating with substantial accuracy the amount claimed and the name of the party to whom the materials were, or equipment was, furnished or supplied or for whom the labor was done or performed, within ninety (90) days after having last performed labor or last furnished materials or equipment included in the Claim; and
- .2 have sent a Claim to the Surety (at the address described in Section 13).

§ 5.2 Claimants, who are employed by or have a direct contract with the Contractor, have sent a Claim to the Surety (at the address described in Section 13).

§ 6 If a notice of non-payment required by Section 5.1.1 is given by the Owner to the Contractor, that is sufficient to satisfy a Claimant's obligation to furnish a written notice of non-payment under Section 5.1.1.

§ 7 When a Claimant has satisfied the conditions of Sections 5.1 or 5.2, whichever is applicable, the Surety shall promptly and at the Surety's expense take the following actions:

§ 7.1 Send an answer to the Claimant, with a copy to the Owner, within sixty (60) days after receipt of the Claim, stating the amounts that are undisputed and the basis for challenging any amounts that are disputed; and

§ 7.2 Pay or arrange for payment of any undisputed amounts.

§ 7.3 The Surety's failure to discharge its obligations under Section 7.1 or Section 7.2 shall not be deemed to constitute a waiver of defenses the Surety or Contractor may have or acquire as to a Claim, except as to undisputed amounts for which the Surety and Claimant have reached agreement. If, however, the Surety fails to discharge its obligations under Section 7.1 or Section 7.2, the Surety shall indemnify the Claimant for the reasonable attorney's fees the Claimant incurs thereafter to recover any sums found to be due and owing to the Claimant.

§ 8 The Surety's total obligation shall not exceed the amount of this Bond, plus the amount of reasonable attorney's fees provided under Section 7.3, and the amount of this Bond shall be credited for any payments made in good faith by the Surety.

§ 9 Amounts owed by the Owner to the Contractor under the Construction Contract shall be used for the performance of the Construction Contract and to satisfy claims, if any, under any construction performance bond. By the Contractor furnishing and the Owner accepting this Bond, they agree that all funds earned by the Contractor in the performance of the Construction Contract are dedicated to satisfy obligations of the Contractor and Surety under this Bond, subject to the Owner's priority to use the funds for the completion of the work.

§ 10 The Surety shall not be liable to the Owner, Claimants or others for obligations of the Contractor that are unrelated to the Construction Contract. The Owner shall not be liable for the payment of any costs or expenses of any Claimant under this Bond, and shall have under this Bond no obligation to make payments to, or give notice on behalf of, Claimants or otherwise have any obligations to Claimants under this Bond.

§ 11 The Surety hereby waives notice of any change, including changes of time, to the Construction Contract or to related subcontracts, purchase orders and other obligations.

§ 12 No suit or action shall be commenced by a Claimant under this Bond other than in a court of competent jurisdiction in the state in which the project that is the subject of the Construction Contract is located or after the expiration of one year from the date (1) on which the Claimant sent a Claim to the Surety pursuant to Section 5.1.2 or 5.2, or (2) on which the last labor or service was performed by anyone or the last materials or equipment were furnished by anyone under the Construction Contract, whichever of (1) or (2) first occurs. If the provisions of this Paragraph are void or prohibited by law, the minimum period of limitation available to sureties as a defense in the jurisdiction of the suit shall be applicable.

§ 13 Notice and Claims to the Surety, the Owner or the Contractor shall be mailed or delivered to the address shown on the page on which their signature appears. Actual receipt of notice or Claims, however accomplished, shall be sufficient compliance as of the date received.

§ 14 When this Bond has been furnished to comply with a statutory or other legal requirement in the location where the construction was to be performed, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

§ 15 Upon request by any person or entity appearing to be a potential beneficiary of this Bond, the Contractor and Owner shall promptly furnish a copy of this Bond or shall permit a copy to be made.

§ 16 Definitions

§ 16.1 Claim. A written statement by the Claimant including at a minimum:

- .1 the name of the Claimant;
- .2 the name of the person for whom the labor was done, or materials or equipment furnished;
- .3 a copy of the agreement or purchase order pursuant to which labor, materials or equipment was furnished for use in the performance of the Construction Contract;
- .4 a brief description of the labor, materials or equipment furnished;
- .5 the date on which the Claimant last performed labor or last furnished materials or equipment for use in the performance of the Construction Contract;
- .6 the total amount earned by the Claimant for labor, materials or equipment furnished as of the date of the Claim;
- .7 the total amount of previous payments received by the Claimant; and
- .8 the total amount due and unpaid to the Claimant for labor, materials or equipment furnished as of the date of the Claim.

§ 16.2 Claimant. An individual or entity having a direct contract with the Contractor or with a subcontractor of the Contractor to furnish labor, materials or equipment for use in the performance of the Construction Contract. The term Claimant also includes any individual or entity that has rightfully asserted a claim under an applicable mechanic's lien or similar statute against the real property upon which the Project is located. The intent of this Bond shall be to include without limitation in the terms "labor, materials or equipment" that part of water, gas, power, light, heat, oil, gasoline, telephone service or rental equipment used in the Construction Contract, architectural and engineering services required for performance of the work of the Contractor and the Contractor's subcontractors, and all other items for which a mechanic's lien may be asserted in the jurisdiction where the labor, materials or equipment were furnished.

§ 16.3 Construction Contract. The agreement between the Owner and Contractor identified on the cover page, including all Contract Documents and all changes made to the agreement and the Contract Documents.

§ 16.4 Owner Default. Failure of the Owner, which has not been remedied or waived, to pay the Contractor as required under the Construction Contract or to perform and complete or comply with the other material terms of the Construction Contract.

§ 16.5 Contract Documents. All the documents that comprise the agreement between the Owner and Contractor.

§ 17 If this Bond is issued for an agreement between a Contractor and subcontractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

§ 18 Modifications to this bond are as follows:

(Space is provided below for additional signatures of added parties, other than those appearing on the cover page.)

CONTRACTOR AS PRINCIPAL

Company:

(Corporate Seal)

SURETY

Company:

(Corporate Seal)

Signature: _____

Name and Title:

Address:

Signature: _____

Name and Title:

Address:

POWER OF ATTORNEY

INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY, a corporation organized and existing under the laws of the State of New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

R. CLAY FOLTZ, PAUL E. SEIBERT

Dover, DE.

their true and lawful attorney(s) in fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 10th day of July, 2015:

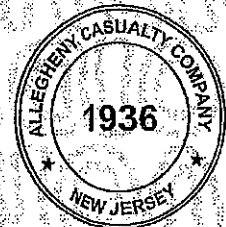
"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Vice President or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto; such signature and seals, when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 31st day of December, 2016.



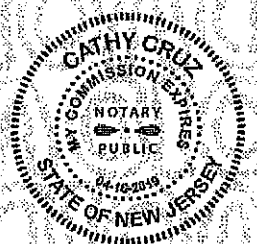
STATE OF NEW JERSEY
County of Essex

George R. James
Executive Vice President (International Fidelity Insurance Company) and Vice President (Allegheny Casualty Company)



On this 31st day of December 2016, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY
My Commission Expires April 16, 2019

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this

7th day of December, 2016

MARIA BRANCO, Assistant Secretary

INTERNATIONAL FIDELITY INSURANCE COMPANY
 ONE NEWARK CENTER, 20TH FLOOR, NEWARK, NEW JERSEY 07102-5207

STATEMENT OF ASSETS, LIABILITIES, SURPLUS AND OTHER FUNDS

AT DECEMBER 31, 2017

<u>ASSETS</u>	
Bonds (Amortized Value)	\$129,146,944
Common Stocks (Market Value)	35,217,707
Mortgage Loans on Real Estate	354,803
Cash, Bank Deposits & Short Term Investments	19,878,873
Unpaid Premiums & Assumed Balances	9,751,860
Reinsurance Recoverable from Reinsurers	(115,529)
Electronic Data Processing Equipment	138,265
Investment Income Due and Accrued	918,427
Net Deferred Tax Assets	2,545,704
Receivables from Parent, Subsidiaries & Affiliates	37,109
Other Assets	<u>21,934,273</u>
TOTAL ASSETS	<u>\$219,808,436</u>
<u>LIABILITIES, SURPLUS & OTHER FUNDS</u>	
Losses (Reported Losses Net as to Reinsurance Ceded and Incurred But Not Reported Losses)	\$5,279,222
Reinsurance Payable on Paid Losses and Loss Adjustment Expenses	1,078,655
Loss Adjustment Expenses	3,559,438
Commissions Payable, Contingent Commissions & Other Similar Charges	1,386,906
Other Expenses (Excluding Taxes, Licenses and Fees)	6,393,991
Taxes, Licenses & Fees (Excluding Federal Income Tax)	282,722
Current Federal and Foreign Income Taxes	58,761
Unearned Premiums	36,204,847
Dividends Declared & Unpaid: Policyholders & Stockholders	1,294,389
Ceded Reinsurance Premiums Payable	2,089,984
Funds Held by Company under Reinsurance Treaties	1,031
Amounts Withheld by Company for Account of Others	60,144,796
Provision for Reinsurance	72,386
Payable to Parent, Subsidiaries and Affiliates	57,862
Other Liabilities	<u>7,654,547</u>
TOTAL LIABILITIES	<u>\$125,559,537</u>
Common Capital Stock	\$1,500,000
Gross Paid-in & Contributed Surplus	374,600
Surplus Notes	16,000,000
Unassigned Funds (Surplus)	76,879,289
Less: Treasury Stock at cost (21,904 shares common) (value incl. \$45.)	<u>504,990</u>
Surplus as Regards Policyholders	<u>\$94,248,899</u>
TOTAL LIABILITIES, SURPLUS & OTHER FUNDS	<u>\$219,808,436</u>

I, Francis L. Mitterhoff, President of INTERNATIONAL FIDELITY INSURANCE COMPANY, certify that the foregoing is a fair statement of Assets, Liabilities, Surplus and Other Funds of this Company, at the close of business, December 31, 2017, as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of New Jersey.



IN TESTIMONY WHEREOF, I have set my hand and affixed the seal of the Company, this 23rd day of February, 2018.
 INTERNATIONAL FIDELITY INSURANCE COMPANY

PERFORMANCE BOND

International Fidelity Insurance Company
2507 Boulevard of the Generals Suite 125 Norristown, PA 19403

Bond No.: PAIFSU0658485

CONTRACTOR:

(Name, legal status and address)

PrimeCare Medical Services, Inc.
3940 Locust Lane
Harrisburg, PA 17109

OWNER:

(Name, legal status and address)

County of Putnam
40 Gleneida Avenue, Room 105
Carmel, NY 10512

CONSTRUCTION CONTRACT

Date: January 1, 2019

Amount: One Million One Hundred Forty Thousand Six Hundred Fifty Dollars and 00/100 (\$1,140,650.00)

Description:

(Name and location)

Putnam County RFP 7-2018 Comprehensive Healthcare Services for Correctional Facility

SURETY:

(Name, legal status and principal place of business)

International Fidelity Insurance Company
2507 Boulevard of the Generals, Suite 125
Norristown, PA 19403

BOND

Date: January 1, 2019

(Not earlier than Construction Contract Date)

Amount: One Million One Hundred Forty Thousand Six Hundred Fifty Dollars and 00/100 (\$1,140,650.00)

Modifications to this Bond: None See Section 16

CONTRACTOR AS PRINCIPAL


Company:

PrimeCare Medical Services, Inc

Signature:

Name and Title:

(Corporate Seal)


THOMAS J. WEST CEO

SURETY

Company:

International Fidelity Insurance Company

Signature:

Name and Title: R. Clay Foltz, Attorney In Fact

(Corporate Seal)



(Any additional signatures appear on the last page of this Performance Bond.)

(FOR INFORMATION ONLY — Name, address and telephone)

AGENT or BROKER:

Delmarva Underwriters, Ltd t/a The Bond Agency
846 Walker Road, Suite 31-1
Dover, DE 19904
(302) 678-9399

OWNER'S REPRESENTATIVE:

(Architect, Engineer or other party:)

§ 1 The Contractor and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors and assigns to the Owner for the performance of the Construction Contract, which is incorporated herein by reference.

§ 2 If the Contractor performs the Construction Contract, the Surety and the Contractor shall have no obligation under this Bond, except when applicable to participate in a conference as provided in Section 3.

§ 3 If there is no Owner Default under the Construction Contract, the Surety's obligation under this Bond shall arise after
1 the Owner first provides notice to the Contractor and the Surety that the Owner is considering declaring a Contractor Default. Such notice shall indicate whether the Owner is requesting a conference among the Owner, Contractor and Surety to discuss the Contractor's performance. If the Owner does not request a conference, the Surety may, within five (5) business days after receipt of the Owner's notice, request such a conference. If the Surety timely requests a conference, the Owner shall attend. Unless the Owner agrees otherwise, any conference requested under this Section 3.1 shall be held within ten (10) business days of the Surety's receipt of the

The Company executing this bond vouches that this document conforms to American Institute of Architects Document A312, 2010 edition

Owner's notice. If the Owner, the Contractor and the Surety agree, the Contractor shall be allowed a reasonable time to perform the Construction Contract, but such an agreement shall not waive the Owner's right, if any, subsequently to declare a Contractor Default;

- .2 the Owner declares a Contractor Default, terminates the Construction Contract and notifies the Surety; and
- .3 the Owner has agreed to pay the Balance of the Contract Price in accordance with the terms of the Construction Contract to the Surety or to a contractor selected to perform the Construction Contract.

§ 4 Failure on the part of the Owner to comply with the notice requirement in Section 3.1 shall not constitute a failure to comply with a condition precedent to the Surety's obligations, or release the Surety from its obligations, except to the extent the Surety demonstrates actual prejudice.

§ 5 When the Owner has satisfied the conditions of Section 3, the Surety shall promptly and at the Surety's expense take one of the following actions:

§ 5.1 Arrange for the Contractor, with the consent of the Owner, to perform and complete the Construction Contract;

§ 5.2 Undertake to perform and complete the Construction Contract itself, through its agents or independent contractors;

§ 5.3 Obtain bids or negotiated proposals from qualified contractors acceptable to the Owner for a contract for performance and completion of the Construction Contract, arrange for a contract to be prepared for execution by the Owner and a contractor selected with the Owner's concurrence, to be secured with performance and payment bonds executed by a qualified surety equivalent to the bonds issued on the Construction Contract, and pay to the Owner the amount of damages as described in Section 7 in excess of the Balance of the Contract Price incurred by the Owner as a result of the Contractor Default; or

§ 5.4 Waive its right to perform and complete, arrange for completion, or obtain a new contractor and with reasonable promptness under the circumstances:

- .1 After investigation, determine the amount for which it may be liable to the Owner and, as soon as practicable after the amount is determined, make payment to the Owner; or
- .2 Deny liability in whole or in part and notify the Owner, citing the reasons for denial.

§ 6 If the Surety does not proceed as provided in Section 5 with reasonable promptness, the Surety shall be deemed to be in default on this Bond seven days after receipt of an additional written notice from the Owner to the Surety demanding that the Surety perform its obligations under this Bond, and the Owner shall be entitled to enforce any remedy available to the Owner. If the Surety proceeds as provided in Section 5.4, and the Owner refuses the payment or the Surety has denied liability, in whole or in part, without further notice the Owner shall be entitled to enforce any remedy available to the Owner.

§ 7 If the Surety elects to act under Section 5.1, 5.2 or 5.3, then the responsibilities of the Surety to the Owner shall not be greater than those of the Contractor under the Construction Contract, and the responsibilities of the Owner to the Surety shall not be greater than those of the Owner under the Construction Contract. Subject to the commitment by the Owner to pay the Balance of the Contract Price, the Surety is obligated, without duplication, for

- .1 the responsibilities of the Contractor for correction of defective work and completion of the Construction Contract;
- .2 additional legal, design professional and delay costs resulting from the Contractor's Default, and resulting from the actions or failure to act of the Surety under Section 5; and
- .3 liquidated damages, or if no liquidated damages are specified in the Construction Contract, actual damages caused by delayed performance or non-performance of the Contractor.

§ 8 If the Surety elects to act under Section 5.1, 5.3 or 5.4, the Surety's liability is limited to the amount of this Bond.

§ 9 The Surety shall not be liable to the Owner or others for obligations of the Contractor that are unrelated to the Construction Contract, and the Balance of the Contract Price shall not be reduced or set off on account of any such unrelated obligations. No right of action shall accrue on this Bond to any person or entity other than the Owner or its heirs, executors, administrators, successors and assigns.

§ 10 The Surety hereby waives notice of any change, including changes of time, to the Construction Contract or to related subcontracts, purchase orders and other obligations.

§ 11 Any proceeding, legal or equitable, under this Bond may be instituted in any court of competent jurisdiction in the location in which the work or part of the work is located and shall be instituted within two years after a declaration of Contractor Default or within two years after the Contractor ceased working or within two years after the Surety refuses or fails

The Company executing this bond vouches that this document conforms to American Institute of Architects Document A312, 2010 edition

to perform its obligations under this Bond, whichever occurs first. If the provisions of this Paragraph are void or prohibited by law, the minimum period of limitation available to sureties as a defense in the jurisdiction of the suit shall be applicable.

§ 12 Notice to the Surety, the Owner or the Contractor shall be mailed or delivered to the address shown on the page on which their signature appears.

§ 13 When this Bond has been furnished to comply with a statutory or other legal requirement in the location where the construction was to be performed, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

§ 14 Definitions

§ 14.1 Balance of the Contract Price. The total amount payable by the Owner to the Contractor under the Construction Contract after all proper adjustments have been made, including allowance to the Contractor of any amounts received or to be received by the Owner in settlement of insurance or other claims for damages to which the Contractor is entitled, reduced by all valid and proper payments made to or on behalf of the Contractor under the Construction Contract.

§ 14.2 Construction Contract. The agreement between the Owner and Contractor identified on the cover page, including all Contract Documents and changes made to the agreement and the Contract Documents.

§ 14.3 Contractor Default. Failure of the Contractor, which has not been remedied or waived, to perform or otherwise to comply with a material term of the Construction Contract.

§ 14.4 Owner Default. Failure of the Owner, which has not been remedied or waived, to pay the Contractor as required under the Construction Contract or to perform and complete or comply with the other material terms of the Construction Contract.

§ 14.5 Contract Documents. All the documents that comprise the agreement between the Owner and Contractor.

§ 15 If this Bond is issued for an agreement between a Contractor and subcontractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

§ 16 Modifications to this bond are as follows:

(Space is provided below for additional signatures of added parties, other than those appearing on the cover page.)

CONTRACTOR AS PRINCIPAL

SURETY

Company:

(Corporate Seal)

Company:

(Corporate Seal)

Signature: _____

Signature: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SCHEDULE D

SCHEDULE "D"

Business Associate Privacy Regulation Compliance Notice

PRIMECARE MEDICAL OF NEW YORK, INC., ("Business Associate") expressly agrees to be subject to and bound by the requirements as set forth within this Business Associate Privacy Regulation Compliance Notice ("Notice").

The Business Associate regularly uses and discloses Protected Health Information in its performance of the Services described in the Professional Services Agreement (the "Services Agreement") between itself and the County of Putnam, by and through its Sheriff Department, ("Covered Entity"), to which this Schedule "D" is attached; and

Both parties agree to modify and amend any oral or written agreement now existing between the parties to conform to the terms of this Notice; and

Both parties are committed to complying with the Standards for Privacy of Individually Identifiable Health Information (the "Privacy Regulation") and other regulations issued under 45 CFR parts 142 and 160-164 pursuant to the Health Insurance Portability and Accountability Act of 1996 (collectively, "HIPAA").

The parties agree as follows:

1. Definitions

- a. Capitalized terms not otherwise defined in this Notice will have the meanings given to them in Title 45, Parts 160 and 164 of the CFR and are incorporated into this Notice by reference.
- b. The term "Protected Health Information" means individually identifiable health information, including without limitation, all information, data, documentation, and materials, including without limitation, demographic, medical and financial information that relates to the past, present, or future physical or mental health condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.
- c. Business Associate acknowledges and agrees that all Protected Health Information that is created or received by Covered Entity and disclosed or made available in any form, including paper record, oral communication, audio recording, and electronic display by Covered Entity or its operating units to Business Associate or is created or retrieved by Business Associate on Covered Entity's behalf will be subject to this Notice.

2. Obligations and Activities of Business Associate

- a. Use and Disclosure. Business Associate agrees not to use or disclose Protected Health Information other than as permitted or required by the Services Agreement or as Required by Law.
- b. Appropriate Safeguards. Business Associate agrees to use appropriate safeguards to prevent use or disclosure of the Protected Health Information other than as provided for by the Services Agreement, or as required by law. Without limiting the generality of the foregoing, Business Associate agrees to protect the integrity and confidentiality of any Protected Health Information it electronically exchanges with Covered Entity.
- c. Mitigation. Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of Protected Health Information by Business Associate in violation of the requirements of this Notice.
- d. Reporting. Business Associate agrees to report to Covered Entity any use or disclosure of the Protected Health Information not provided for by the Services Agreement, of which it becomes aware, including incidents that constitute breaches of unsecured protected health information.
- e. Agents. Business Associate agrees to ensure that any agent or third party, including but not limited to a subcontractor, to whom it provides and/or discloses Protected Health Information, received from, or created or received by, Business Associate on behalf of Covered Entity agrees to the same restrictions and conditions that apply through this Notice to Business Associate with respect to such information.
- f. Access to Designated Record Sets. To the extent that Business Associate possesses or maintains Protected Health Information in a Designated Record Set, Business Associate agrees to provide access, at the request of the Covered Entity, and in the time and manner designated by Covered Entity, to Protected Health Information in a Designated Record Set, to Covered Entity or, as directed by Covered Entity, to an Individual in order to meet the requirements under 45 CFR 164.524.
- g. Amendments to Designated Record Sets. To the extent that Business Associate possesses or maintains Protected Health Information in a Designated Record Set, Business Associate agrees to make any amendment(s) to Protected Health Information in a Designated Record Set that the Covered Entity directs or agrees to pursuant to 45 CFR 164.526 at the request of Covered Entity or an Individual, and in the time and manner designated by the Covered Entity.
- h. Access to Books and Records. Business Associate agrees to make internal practices, books, and records, including policies and procedures and Protected Health Information, relating to the use and disclosure of Protected Health Information

received from, or created or received by Business Associate on behalf of, Covered Entity available to the Covered Entity, or to the Secretary, in a time and manner designated by the Covered Entity, or the Secretary, for purposes of the Secretary determining Covered Entity's compliance with the Privacy Rule.

- i. **Accountings.** Business Associate agrees to document such disclosure of protected Health Information and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR 164.528.
- j. **Request for Accountings.** Business Associate agrees to provide to Covered Entity or an Individual, in the time and manner designated by Covered Entity, information collected in accordance with Section 2.i of this Notice, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR 164.528.

3. **Permitted Uses and Disclosures by Business Associate**

- a. **Services Agreement.** Except as otherwise limited in this Notice, Business Associate may use Protected Health Information to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in the Services Agreement, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity or the minimum necessary policies of the Covered Entity.
 - b. **Use for Administration of Business Associate.** Except as otherwise limited in this Notice, Business Associate may use Protected Health Information for the proper management and administration of the Business Associate or to carry out the legal responsibilities of the Business Associate.
 - c. **Disclosure for Administration of Business Associate.** Except as otherwise limited in this Notice, Business Associate may disclose Protected Health Information for the proper management and administration of the Business Associate, provided that disclosures are required by law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the Information has been breached.
4. **Permissible Request by Covered Entity.** Except as set forth in Section 3 of this Notice, Covered Entity will not request Business Associate to use or disclose Protected Health Information in any manner that would not be permissible under the Privacy Rule if done by Covered Entity.

5. **Responsibilities of Covered Entity.** With regard to the use and/or disclosure of Protected Health Information by Business Associate, Covered Entity agrees to do the following:

- a. Inform Business Associate of any changes in the form of Notice of Privacy Practices (the "Notice") that Covered Entity provides to individuals pursuant to HIPAA, and provide the Business Associate a copy of the Notice currently in use.
- b. Inform Business Associate of any changes in, or withdrawal of, the consent or authorization provided to Covered Entity by individuals pursuant to HIPAA.
- c. Notify Business Associate, in writing and in a timely manner, of any arrangements permitted or required of Covered Entity under HIPAA that may impact in any manner the use and/or disclosure of Protected Health Information by Business Associate under this Notice.
- d. Allow Business Associate to make any use and/or disclosure of Protected Health Information permitted under HIPAA, except uses or disclosure for research are not permitted without prior approval by Covered Entity.

6. **Term and Termination.**

- a. **Term.** This Notice will be effective as of the date of the Services Agreement and will terminate when all of the Protected Health Information provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy Protected Health Information, in any manner that would be permissible under the Privacy Rule if done by Covered Entity.
- b. **Termination for Cause.** Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity will either:
 - 1) Provide an opportunity for Business Associate to cure the breach or end the violation. If Business Associate does not cure the breach or end the violation within the time specified by Covered Entity, Covered Entity will terminate: (A) this Notice; (B) all of the provisions of the Services Agreement that involve the use or disclosure of Protected Health Information; and (C) such other provisions, if any, of the Services Agreement as Covered Entity designates in its sole discretion;
 - 2) Immediately terminate: (A) this Notice; (B) all of the provisions of the Services Agreement that involve the use or disclosure of Protected Health Information; and (C) such other provisions, if any, of the Services Agreement as Covered Entity designates in its sole discretion if Business Associate has breached a material term of this Notice and cure is not possible; or

- 3) If neither termination nor cure is feasible, Covered Entity will report the violation to the Secretary.

c. **Effect of Termination.**

- 1) Except as provided in Paragraph 2 of this Section 5.c, upon termination of the Services Agreement, for any reason, Business Associate will return or destroy all Protected Health Information received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision will apply to Protected Health Information that is in the possession of subcontractors or agents of Business Associate. Business Associate will retain no copies of the Protected Health Information.
- 2) In the event that Business Associate determines that returning or destroying the Protected Health Information is infeasible, Business Associate will provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon mutual agreement of the Parties that return or destruction of the Protected Health Information is infeasible, Business Associate will extend the protections of this Notice to such Protected Health Information and limit further uses and disclosure of such Protected Health Information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such Protected Health Information.

7. **Electronic Transaction Standards**

- a. **Compliance with HIPAA Standards.** When providing its services and/or products, Business Associate will comply with all applicable HIPAA standards and requirements (including, without limitation, those specified in CFR Part 162) with respect to the transmission of health information in electronic form in connection with any transaction for which the Secretary has adopted a standard under HIPAA ("Covered Transactions"). Business Associate will make its services and/or products compliant with HIPAA's standards and requirements no less than thirty (30) days prior to the applicable compliance dates under HIPAA. Business Associate represents and warrants that it is aware of all current HIPAA standards and requirements regarding Covered Transactions, and Business Associate will comply with any modifications to HIPAA standards and requirements which become effective from time to time. Business Associate agrees that this compliance will be at its sole cost and expense, including, but not limited to, increased fees.
- b. **Agents and Subcontractors.** Business Associate will require all of its agents and subcontractors (if any) who assist Business Associate in providing its services and/or products to comply with all applicable requirements of HIPAA, including without limitation, compliance with 45 CFR Part 162.

- c. **Survival.** The respective rights and obligations of Business Associate under Section 5.c of this Notice will survive the termination of the Services Agreement.
- d. **Interpretation.** Any ambiguity in this Notice will be resolved to permit Covered Entity to comply with the Privacy Rule.
8. **Indemnification.** The Parties agree to indemnify, defend and hold harmless each other and each other's respective employees, directors, officers, subcontractors, agents or other members of its workforce, each of the foregoing hereinafter referred to as "indemnified party", against all actual and direct losses suffered by the indemnified party and all liability to third parties arising from or in connection with any breach of this Notice or Services Agreement or of any warranty hereunder or from any negligence or wrongful acts or omissions, including failure to perform its obligations under the Privacy Regulation, by the indemnifying party or its employees, directors, officers, subcontractors, agents or other members of its workforce. Accordingly, on demand, the indemnifying party will reimburse any indemnified party for any and all actual and direct losses, liabilities, lost profits, fines, penalties, costs or expenses (including reasonable attorneys' fees) which may for any reason be imposed upon any indemnified party by reason of any suit, claim, action, proceeding or demand by any third party resulting from the indemnifying party's breach hereunder. The parties obligation to indemnify any indemnified party shall survive the expiration or termination of this Notice or Services Agreement for any reason.
9. **Miscellaneous.** The terms of this Notice are hereby incorporated and made a part of the Services Agreement. Except as otherwise set forth in Section 7(d) of this Notice, in the event of a conflict between the terms of this Notice and the terms of the Services Agreement, the terms of this Notice will prevail. The terms of the Services Agreement, which are not modified by this Notice, will remain in full force and effect in accordance with the terms hereof. The Services Agreement together with this Notice constitutes the entire Agreement between the parties with respect to the subject matter contained in this Notice.

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.
2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.