

#### COLLIN COUNTY, TEXAS

ADDENDUM NO. TWO (2)

RFP NO. 2022-061

#### REQUEST FOR PROPOSAL

FOR

#### **INMATE HEALTH CARE MEDICAL SERVICES**

DATE: JULY 12, 2022

NOTICE TO ALL PROSPECTIVE BIDDERS:

PLEASE MAKE THE FOLLOWING CHANGES TO THE REQUEST FOR PROPOSAL:

ADD ATTACHMENT: MANDATORY PRE-PROPOSAL MEETING ATTENDANCE RECORD

ADD ATTRIBUTE NO. 24: ADDENDUM NO. 2 ACKNOWLEDGEMENT

ALL OTHER TERMS AND CONDITIONS OF THE SOLICITATION AND SPECIFICATIONS REMAIN THE SAME.

SINCERELY, MICHELLE CHARNOSKI, NIGP-CPP, CPPB PURCHASING AGENT

/HA



## 2022-061 Addendum 2

### **Inmate Health Care Medical Services**

Issue Date: 6/21/2022 Questions Deadline: 7/18/2022 05:00 PM (CT) Response Deadline: 7/28/2022 02:00 PM (CT)

**Collin County Purchasing** 

## **Contact Information**

Contact: Hunter Alley Senior Buyer Address: Purchasing Admin. Building Ste. 3160 2300 Bloomdale Rd. Ste. 3160 McKinney, TX 75071 Phone: (972) 548-4117 Fax: (972) 548-4694 Email: halley@co.collin.tx.us

## **Event Information**

| Number:            | 2022-061 Addendum 2  |
|--------------------|--|
| Title:             | Inmate Health Care Medical Services  |
| Туре:              | Request for Proposal - Other   |
| Issue Date:        | 6/21/2022  |
| Question Deadline: | 7/18/2022 05:00 PM (CT)  |
| Response Deadline: | 7/28/2022 02:00 PM (CT)  |
| Notes:             | Collin County's intent of this Request for Proposal (RFP) and resulting contract is to |
|                    | provide contractors with sufficient information to prepare a proposal for professional |
|                    | services and comprehensive health care to the inmate population including but not      |
|                    | limited to management, medical services/physicians, nursing, mental health, dental,    |

pharmacy, medical records, lab, x-ray and on-site routine medical services.

## **Ship To Information**

Address: See Purchase Order McKinney, TX 75071

## **Billing Information**

Address: Auditor Admin. Building Ste. 3100 2300 Bloomdale Rd. Ste. 3100 McKinney, TX 75071

### **Bid Activities**

### Mandatory Pre-Proposal Conference & Tour

7/12/2022 9:00:00 AM (CT)

MANDATORY PRE-PROPOSAL ACTIVITIES: A mandatory pre-proposal conference with mandatory site tours will be conducted by Collin County on Tuesday, July 12, 2022 at 9:00 a.m. at the Collin County Justice Center, located at 4300 Community Avenue, McKinney, Texas, 75071. The mandatory site tours shall be conducted at the following locations, in the sequence below;

Collin County Justice Center, 4300 Community Avenue, McKinney, Texas 75071

Minimum Security, 4800 Community Avenue, McKinney, Texas 75071

Juvenile Detention, 4700 Community Avenue, McKinney, Texas 75071

The **mandatory pre-proposal conference** provides an opportunity for all interested companies to ask questions, receive clarification and additional documentation providing statistical information. Participation in the conference is mandatory for any vendor intending to submit a proposal. The site tours are **MANDATORY** to avoid the situation of a proposal being submitted without the vendor having seen the facilities.

For the conference and tours, each participant must have a valid driver's license or other officially-issued photo identification. **Please arrive 30 minutes early, to check-in, and receive visitor credentials.** While the conference and site tours are mandatory, it is not mandatory that the same company representatives participate in both activities. Delegation of each task assignment is at the discretion of the vendor; however, at least one company representative must represent the vendor at each activity.

### **Bid Attachments**

| 2022-061 Addenda No. 2 PDF.pdf                             | View Online |
|--|-------------|
| Addenda No. 2  |             |
| 2022-061 Addenda No1 pdf.pdf                               | View Online |
| Addenda No. 1  |             |
| 2022-061 LEGAL NOTICE CO 2022-540-06-20.pdf                | Download    |
| Legal Notice   |             |
| General_Instructions_Proposals 09.03.21.docx               | View Online |
| 1.0 General Instructions - Proposal - updated 09.03.21     |             |
| Terms_of_Contract_Proposals2.10.21.docx                    | View Online |
| 2.0 Terms of Contract - Proposals                          |             |
| 2022-061 Insurance_Requirements.doc                        | View Online |
| 3.0 Insurance Requirements                                 |             |
| 2022-061_Inmate_Health_Specifications_FINAL_ADDENDA 1.docx | View Online |
| 4.0 Special Conditions & Specifications - Addenda No. 1    |             |
| Performance_Bond_Sample.pdf                                | View Online |
| Sample Performance Bond Form                               |             |

| Payment_Bond_Sample.pdf  | View Online |
|--|-------------|
| Sample Payment Bond Form   |             |
| ATTACHMENT A HEALTH SERVICES AGREEMENT 2022.docx                                     | View Online |
| Attachment A: Sample Healthcare Services Agreement                                   |             |
| Attachment B Equipment List_updated.pdf  | View Online |
| Attachment B: Equipment List   |             |
| Attachment C Staffing Worksheet.xlsx   | View Online |
| Attachment C: Proposed Staffing Plan Worksheet                                       |             |
| 2022-061 INMATE HEALTH PRE PROPOSAL MTG 7.12.22.pdf                                  | View Online |
| Mandatory Pre-Proposal Conference & Tour Attendance Record                           |             |
| Exhibit A_Current staffing matrix Adult.pdf  | View Online |
| Exhibit A: Current Adult Detention & Min Security Staffing Matrix                    |             |
| Exhibit B_Current staffing matrix Juvenile.pdf                                       | View Online |
| Exhibit B: Current Juvenile Center Staffing Matrix                                   |             |
| Ex C Suggested Staffing - Inmate HC.pdf  | View Online |
| Exhibit C: 2022 Recommended Adult & Min Security Staffing Matrix                     |             |
| Ex D Suggested Staffing - Inmate HC.pdf  | View Online |
| Exhibit D: 2022 Recommended Juvenile Center Staff Requirements                       |             |
| Exhibit E_Medical Stats Adult 2020.pdf   | View Online |
| Exhibit E: Medical Statistical Summary Adult 2020                                    |             |
| Exhibit F_Medical Stats Adult 2021.pdf   | View Online |
| Exhibit F: Medical Statistical Summary Adult 2021                                    |             |
| Exhibit G_Medical Stats Juvenile 2020.pdf  | View Online |
| Exhibit G: Medical Statistical Summary Juvenile 2020                                 |             |
| Exhibit H_Medical Stats Juvenile 2021.pdf  | View Online |
| Exhibit H: Medical Statistical Summary Juvenile 2021                                 |             |
| Exhibit I_NCCHC Certificate 08242020.pdf   | View Online |
| Exhibit I: 2020 NCCHC Certificate  |             |
| Exhibit J_2021 Certificate of Compliance.pdf   | View Online |
| Exhibit J: Detention Center & Min Security Texas Commission on Jail Standards Report |             |
| Exhibit K_TOP MED REPORT2021r1.pdf   | View Online |
| Exhibit K: Top 25 Medications 2021   |             |
| 2022-061_Information_Regarding_Conflict_of_Interest_Questionnaire.docx               | View Online |
| Information Regarding Conflict of Interest Questionnaire                             |             |
| CIQ_113015.pdf   | View Online |
| Conflict of Interest Questionnaire   |             |
| W-9 rev 2018.pdf   | View Online |
| W-9 Form   |             |

## **Requested Attachments**

#### Proposal

(Attachment required)

The proposal shall not include pricing. All pricing shall be submitted in an separate file.

#### Proposed Staffing Matrix

(Attachment required)

Complete Attachment C: Proposed Staffing Matrix Worksheet

#### W-9

(Attachment required)

#### **Conflict of Interest Questionnaire**

### **Bid Attributes**

#### 1 eBid Notice

Collin County exclusively uses IonWave Technologies, Inc. (Collin County eBid) for the notification and dissemination of all solicitations. The receipt of solicitations through any other means may result in your receipt of incomplete specifications and/or addendums which could ultimately render your bid/proposal non-compliant. Collin County accepts no responsibility for the receipt and/or notification of solicitations through any other means. Please initial.

(Required: Maximum 1000 characters allowed)

#### 2 Contact Information

List the contact name, email address and phone number of the main person(s) Collin County should contact in reference to this solicitation. Contact(s) shall be duly authorized by the company, corporation, firm, partnership or individual to respond to any questions, clarification, and or offers in response to this solicitation.

(Required: Maximum 4000 characters allowed)

#### 3 Delivery

Delivery will be F.O.B. inside delivery at Collin County designated locations and all transportation charges are to be paid by the supplier to destination. Please state delivery in calendar days from date of order.

(Required: Maximum 1000 characters allowed)

#### 4 Exceptions

Do you take exception to the specifications? If so, by separate attachment, please state your exceptions.

#### 🗌 Yes 🗌 No

(Required: Check only one)

| 5 | Insurance Acknowledgement  |
|---|--|
|   | I understand that the insurance requirements of this solicitation are required and are included in the submitted pricing. A certificate of insurance shall be submitted to the Purchasing department if I am awarded all or a portion of the resulting contract. Please initial.   |
|   |  |
|   |  |
|   | (Required: Maximum 1000 characters allowed)  |
| 6 | Bonding Requirement Acknowledgement  |
|   | I understand that the bonding requirements of this solicitation are required and are included in the submitted pricing. A bond certificate (payment, performance, and/or maintenance) as stated in the specification document shall be submitted to the Purchasing department if I am awarded all or a portion of the resulting contract. Please initial.  |
|   |  |
|   |  |
|   | (Required: Maximum 1000 characters allowed)  |
| 7 | Subcontractors   |
|   | State the business name of all subcontractors and the type of work they will be performing under this contract. If you are fully qualified to self-perform the entire contract, please respond with "Not Applicable-Self Perform".   |
|   |  |
|   |  |
|   |  |
|   | (Required: Maximum 4000 characters allowed)  |
|   |  |
| 8 | Reference No. 1  |
|   | List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process. |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | (Required: Maximum 4000 characters allowed)  |

| 9 | Reference | No. | 2 |
|---|-----------|-----|---|
|---|-----------|-----|---|

| Reference NO. 2  |
|--|
| List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process.   |
|  |
| (Required: Maximum 4000 characters allowed)  |
| Reference No. 3 List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process.   |
| (Required: Maximum 4000 characters allowed)  |
| <b>Cooperative Contracts</b><br>As permitted under Title 8, Chapter 271, Subchapter F, Section 271.101 and 271.102 V.T.C.A. and Title 7, Chapter 791, Subchapter C, Section 791.025, V.T.C.A., other local governmental entities may wish to also participate under the same terms and conditions contained in this contract. Each entity wishing to participate must enter into an interlocal agreement with Collin County and have prior authorization from vendor. If such participation is authorized, all purchase orders will be issued directly from and shipped directly to the local governmental entity requiring supplies/services. Collin County shall not be held responsible for any orders placed, deliveries made or payment for supplies/services ordered by these entities. Each entity reserves the right to determine their participation in this contract. Would bidder be willing to allow other local governmental entities to participate in this contract, if awarded, under the same terms and conditions? |
|  |

(Required: Check only one)

| 1      | Preferential Treatment   |
|--------|--|
| 2      | The County of Collin, as a governmental agency of the State of Texas, may not award a contract to a nonresident bidder unless the nonresident's bid is lower than the lowest bid submitted by a responsible Texas resident bidder by the same amount that a Texas resident bidder would be required to underbid a nonresident bidder to obtain a comparable contract in the state in which the nonresident's principal place of business is located (Government Code, Title 10, V.T.C.A., Chapter 2252, Subchapter A). |
|        | <ol> <li>Is your principal place of business in the State of Texas?</li> <li>If your principal place of business is not in Texas, in which State is your principal place of business?</li> <li>If your principal place of business is not in Texas, does your state favor resident bidders (bidders in your state) by some dollar increment or percentage?</li> <li>If your state favors resident bidders, state by what dollar amount or percentage.</li> </ol>   |
|        |  |
|        |  |
|        |  |
|        |  |
|        | (Required: Maximum 4000 characters allowed)  |
| 1<br>3 | <b>Debarment Certification</b><br>I certify that neither my company nor an owner or principal of my company has been debarred, suspended or<br>otherwise made ineligible for participation in Federal Assistance programs under Executive Order 12549,<br>"Debarment and Suspension," as described in the Federal Register and Rules and Regulations. Please initial.  |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
| 1<br>4 | Immigration and Reform Act<br>I declare and affirm that my company is in compliance with the Immigration and Reform Act of 1986 and all<br>employees are legally eligible to work in the United States of America. I further understand and acknowledge that<br>any non-compliance with the Immigration and Reform Act of 1986 at any time during the term of this contract will<br>render the contract voidable by Collin County. Please initial.   |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
| 1      | Disclosure of Certain Relationships  |
| 5      |  |

Chapter 176 of the Texas Local Government Code requires that any vendor considering doing business with a local government entity disclose the vendor's affiliation or business relationship that might cause a conflict of interest with a local government entity. Subchapter 6 of the code requires a vendor to file a conflict of interest questionnaire (CIQ) if a conflict exists. By law this questionnaire must be filed with the records administrator of Collin County no later than the 7th business day after the date the vendor becomes aware of an event that requires the statement to be filed. A vendor commits an offense if the vendor knowingly violates the code. An offense under this section is a misdemeanor. By submitting a response to this request, the vendor represents that it is in compliance with the requirements of Chapter 176 of the Texas Local Government Code. Please send completed forms to the Collin County County Clerk's Office located at 2300 Bloomdale Rd., Suite 2104, McKinney, TX 75071. Please initial.

(Required: Maximum 1000 characters allowed)

| 16 | Anti-Collusion Statement Bidder certifies that its Bid/Proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Bid/Proposal for the same materials, services, supplies, or equipment and is in all respects fair and without collusion or fraud. No premiums, rebates or gratuities permitted; either with, prior to, or after any delivery of material or provision of services. Any such violation may result in Agreement cancellation, return of materials or discontinuation of services and the possible removal from bidders list. Please initial.  |
|----|--|
| 17 | <b>Disclosure of Interested Parties</b><br>Section 2252.908 of the Texas Government Code requires a business entity entering into certain contracts with a governmental entity to file with the governmental entity a disclosure of interested parties at the time the business entity submits the signed contract to the governmental entity. Section 2252.908 requires the disclosure form (Form 1295) to be signed by the authorized agent of the contracting business entity, acknowledging that the disclosure is made under oath and under penalty of perjury. Section 2252.908 applies only to a contract that requires an action or vote by the governing body of the governmental entity before the contract may be signed or has a value of at least \$1 million. Section 2252.908 provides definitions of certain terms occurring in the section. Section 2252.908 applies only to a contract entered into on or after January 1, 2016. Please initial. |
|    | (Required: Maximum 1000 characters allowed)  |
| 18 | Notification Survey         In order to better serve our offerors, the Collin County Purchasing Department is conducting the following survey.         We appreciate your time and effort expended to submit your bid. Should you have any questions or require more information please call (972) 548-4165. How did you receive notice of this request?         Plano Star Courier       Plan Room       Collin County eBid Notification       Collin County Website         Other       (Required: Check only one)   |
| 19 | Proposer Acknowledgement Proposer acknowledges, understands the specifications, any and all addenda, and agrees to the proposal terms and conditions and can provide the minimum requirements stated herein. Offeror acknowledges they have read the document in its entirety, visited the site, performed investigations and verifications as deemed necessary, is familiar with local conditions under which work is to be performed and will be responsible for any and all errors in Proposal submittal resulting from Proposer's failure to do so. Proposer acknowledges the prices submitted in this Proposal have been carefully reviewed and are submitted as correct and final. If Proposal is accepted, vendor further certifies and agrees to furnish any and all products/services upon which prices are extended at the price submitted, and upon conditions in the specifications of the Request for Proposal. Please initial.                       |

| 2      | Critical Infrastructure Affirmation  |
|--------|--|
| 0      | Pursuant to section 2274.0102 of the Texas Government Code, Respondent certifies that neither it nor its parent company, nor any affiliate of Respondent or its parent company, is: (1) majority owned or controlled by citizens or governmental entities of China, Iran, North Korea, Russia, or any other country designated by the Governor under Government Code Section 2274.0103, or (2) headquartered in any of those countries. Please initial.  |
|        |  |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
| 2      | <b>Energy Company Boycotts</b><br>Pursuant to Section 2274.002 of the Texas Government Code, should the contract have a value of \$100,000 or more and the company employs 10 or more full-time employees, Respondent represents and warrants that: (1) it does not, and will not for the duration of the contract, boycott energy companies, and (2) will not boycott energy companies during the term of the contract. If circumstances relevant to this provision change during the course of the contract, Respondent shall promptly notify Agency. Please initial.  |
|        |  |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
| 22     | <b>Firearm Entities and Trade Associations Discrimination</b><br>Pursuant to section 2274.002 of the Texas Government Code, should the contract have a value of \$100,000 or more and the company employs 10 or more full-time employees, Respondent verifies that: (1) it does not have a practice, policy, guidance, or directive that discriminates against a firearm entity or firearm trade association and (2) will not discriminate during the term of the contract against a firearm entity or firearm trade association. If circumstances relevant to this provision change during the course of the contract, Respondent shall promptly notify Agency. Please initial. |
|        | (Required: Maximum 1000 characters allowed)  |
|        |  |
| 2<br>3 | Addendum No. 1 Please initial to verify your receipt of the addendum.  |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
| 2<br>4 | Addendum No. 2 Please initial to verify your receipt of the addendum.  |
|        |  |
|        | (Required: Maximum 1000 characters allowed)  |
|        |  |

# **Bid Lines**

| 1 | State annual co<br>(Response required  |   | County Detention Center and Minimu   | um Security Facility.   |
|---|--|---|--|---|
|   | Quantity: 1  | UOM: year   | Unit Price: \$   | Total: \$   |
|   |  |   |  |   |
|   |  |   |  |   |
|   |  |   |  | Additional notes<br>(Attach separate sheet)   |
|   |  |   |  | (   |
| 2 | Facility when po<br>(Response required<br>Quantity: <u>1</u>   | Dopulation is over the monthly aver<br>UOM: <u>each</u>                                     | ate for the Collin County Detention C<br>erage.<br>Unit Price: \$                | Total: \$ No bid  |
|   |  |   |  | Additional notes (Attach separate sheet)  |
| 3 | State annual co<br>(Response required  | st of services for the Collin Cou   | nty Juvenile Detention Facility.   |   |
|   | Quantity: 1  | UOM: year   | Unit Price: \$   | Total: \$   |
|   |  |   |  |   |
|   |  |   |  |   |
|   |  |   |  | (Attach separate sheet)   |
|   |  |   |  |   |
| 4 | State the per di<br>is over the mon<br>(Response required  | thly average.   | for the Collin County Juvenile Detent  | ion Facility when population  |
|   |  |   | Unit Price: \$   | Total:  |
|   | Quantity: 1  |   |  | $10tal. \Psi$   |
|   |  |   |  |   |
|   |  |   |  | No bid  |
|   |  |   |  |   |
|   |  |   |  | No bid     Additional notes   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required  | em cost per inmate for long-ter   | m care and / or geriatric services.  | No bid<br>Additional notes<br>(Attach separate sheet)   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required  | em cost per inmate for long-ter   |  | No bid<br>Additional notes<br>(Attach separate sheet)   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required  | em cost per inmate for long-ter   | m care and / or geriatric services.  | No bid     Additional notes     (Attach separate sheet)  Total:   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity: <u>1</u>  | em cost per inmate for long-ter   | m care and / or geriatric services.<br>Unit Price: \$                            | No bid<br>Additional notes<br>(Attach separate sheet)   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity: <u>1</u>  | em cost per inmate for long-ter   | m care and / or geriatric services.<br>Unit Price: \$                            | No bid Additional notes (Attach separate sheet) Total: \$ No bid  |
| 5 | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity: <u>1</u>  | em cost per inmate for long-ter   | m care and / or geriatric services.<br>Unit Price: \$                            | No bid Additional notes (Attach separate sheet) Total: \$ No bid Additional notes   |
| 5 | Supplier Notes:<br>State the per di<br>(Response required)<br>Quantity: <u>1</u><br>Supplier Notes:<br>State an annua                            | em cost per inmate for long-ter<br>)<br>UOM: <u>each</u>                                    | m care and / or geriatric services.<br>Unit Price: \$                            | No bid Additional notes (Attach separate sheet) Total: \$ No bid Additional notes   |
|   | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity: <u>1</u><br>Supplier Notes:<br>State an annua<br>(Response required       | em cost per inmate for long-ter<br>)<br>UOM: <u>each</u><br>  not-to-exceed cap in HIV medi | m care and / or geriatric services.<br>Unit Price: \$<br>cation expenses.        | <ul> <li>No bid</li> <li>Additional notes<br/>(Attach separate sheet)</li> </ul> Total: \$ Output: Support of the separate sheet of the separ |
|   | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity:1<br>Supplier Notes:<br>State an annua<br>(Response required<br>Quantity:1 | em cost per inmate for long-ter<br>UOM: <u>each</u><br>not-to-exceed cap in HIV medi        | m care and / or geriatric services Unit Price: \$ cation expenses Unit Price: \$ | No bid Additional notes (Attach separate sheet) Total: \$ No bid Additional notes (Attach separate sheet) Total: \$   |
|   | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity: <u>1</u><br>Supplier Notes:<br>State an annua<br>(Response required       | em cost per inmate for long-ter<br>UOM: <u>each</u><br>not-to-exceed cap in HIV medi        | m care and / or geriatric services.<br>Unit Price: \$<br>cation expenses.        | No bid Additional notes (Attach separate sheet) Total: \$ No bid Additional notes (Attach separate sheet) Total: \$ Total: \$ No bid  |
|   | Supplier Notes:<br>State the per di<br>(Response required<br>Quantity:1<br>Supplier Notes:<br>State an annua<br>(Response required<br>Quantity:1 | em cost per inmate for long-ter<br>UOM: <u>each</u><br>not-to-exceed cap in HIV medi        | m care and / or geriatric services Unit Price: \$ cation expenses Unit Price: \$ | <ul> <li>No bid</li> <li>Additional notes<br/>(Attach separate sheet)</li> <li>Total: \$</li> <li>No bid</li> <li>Additional notes<br/>(Attach separate sheet)</li> <li>Total: \$</li> </ul>  |

### **Supplier Information**

| Company Name: |  |
|---------------|--|
| Contact Name: |  |
| Address:      |  |
|               |  |
|               |  |
|               |  |
| Phone:        |  |
| Fax:          |  |
| Email:        |  |
| Supplier Note | es a la companya de la |
|               |  |
|               |  |
|               |  |
|               |  |
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|               |  |
|               |  |

The undersigned hereby certifies the foregoing proposal submitted by the company listed below hereinafter called "offeror" is the duly authorized agent of said company and the person signing said proposal has been duly authorized to execute same. Offeror affirms that they are duly authorized to execute this contract; this company; corporation, firm, partnership or individual has not prepared this proposal in collusion with any other offeror or other person or persons engaged in the same line of business; and that the contents of this proposal as to prices, terms and conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal.

Print Name

Signature

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| Project: 2022-061 Inmate     |                |              | Mastina Data                       | McKinney, TX 75071                   |  |
|------------------------------|----------------|--------------|------------------------------------|--------------------------------------|--|
| Health Care Medical Services |                |              | Meeting Date: 7/12/2022            |                                      |  |
| Facilitator: Hunter Alley    |                |              | Place/Room: Adult Detention Center |                                      |  |
| Name                         | Company        | Phone        | Fax                                | E-Mail                               |  |
| NIcole Taylor                | Wellpath       | 480-270-4930 | _                                  | nictaylor@wellpath.us                |  |
| Ryan Bernuf                  | Wellpath       | 724-464-4114 | _                                  | rbernate wellpath. US                |  |
| Charles Guttey               | Wellpath       | 575-635-7173 |                                    | Charles. gnffey @ wellpath. us       |  |
| John Roth                    | Wellpath       | 817996 266   | 3 ~                                | Jroth "                              |  |
| Keivey BADWULD               | Armor Health   | 817-228-2090 |                                    | Kgadway@armontealtheare.com          |  |
| BLENN HOMLETT                | ARMOR Health   | 786-770-161  | 1 -                                | glenn. ham lefte armor heal the are. |  |
| PAUL BRITT                   | Wexford Health | 205-422-190  | 5                                  | pbritte wexford health.com           |  |
| KAREN DAVIES                 | YESCARE        | 9546493043   | -                                  | Karen. davies Oyescare corp. com     |  |
| Mike Rich                    | YesCare        | 7457173774   |                                    | Mike. Rich @yescare cop. com         |  |
| Many 2. id                   | ComHealth      | 505-803-4300 | -                                  | Mang. 201 e my corrheaton. Con       |  |
| tool musting                 | Contrain (     | 24)563-8224  |                                    | fold. In phy or my contrasich - Con  |  |
| William Cooper               | Turn Key       | 405 465 366  | 7                                  | wcooper@turnkey health clinics.com   |  |
| Kara Black                   | Turnkey        | 870-351-8266 | 0                                  | Kblack@ turnkey healthclinics.com    |  |

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| SELLEY Pre-B   | Bid Meeting Att           | endance Li       | st            | Office of the Purchasing Agent<br>Collin County Administration Building<br>2300 Bloomdale Rd., Ste 3160<br>McKinney, TX 75071 |
|--|---------------------------|------------------|---------------|---|
| Project: 2022-061 Inmate<br>Health Care Medical Services |                           |                  | Meeting Date: | : 7/12/2022   |
| Facilitator: Hunter Alley                                |                           |                  | Place/Room:   | Adult Detention Center  |
| Name   | Company                   | Phone            | Film          | E-Mail  |
| Tiffany Hill   | Turn Key                  | 903.278-2        | .553          | tifhill@turnkeyheatthclinics.c  |
| April Farmer   | Tumkey                    | (219)6749        | 1959          | afarmer@turnkeyhealttclis   |
| Crystal Pang   | CCHCS                     | 972-548-55       |               | cpanga CO. collin. tx. us   |
| Ramzi Taim   | CCHCS                     | 972-548-         | 5541          | rtaimeco.collin. tx. us   |
| Cardy Blarr  | CCHCS                     | 972-548-5        |               | clotair @ Co. Collin. tx. 45  |
| Marci Chrismon   | Purchasing                | <b>a</b> 972-54  | 18-4212       | mchrismon @co.collin.tx.u   |
| Sarah Caton  | Purchasing                | 972-548-         |               | SCAton@Co.Collin.tx.US  |
| Hunter Allas   | Pur.                      | 4112             |               |   |
| Johnny Vaquess   | CCDF                      | 214-578-4078     | 8             | jaquesseco.collin.tx.us   |
| CHRESTOPHER PERFECTA                                     | CONTRA COUNTY SHEEDERS O  | 1000 912-547-521 | 6             | Clease resh OCOLIED COLIED CONTEX, 60)  |
| MICHAEL SEPULNADO  | Course Courses SHEREATTIN | OTTOLE 972-547-  |               | misepulvado C co. collin. tx. us  |
| Gregory Ladel  | yus Care                  | 520-405-2530     |               | Ayodej1: ladele 20 yearscorp.   |
| Josepha Shaw   | Rudalt                    | X4672            |               | vehavie co. collin. tx. 45  |

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| Project: 2022-061 Inmate<br>Health Care Medical Services |               |              | Meeting Date: 7/12/2022 |   |  |
|--|---------------|--------------|-------------------------|---|--|
| Facilitator: Hunter Alley                                |               |              |                         | Place/Room: Adult Detention Center  |  |
| Name   | Company       | Phone        | Fax                     | E-Mail  |  |
| Bruce I  | EN YESCHE     | 415-4762     | 539                     | RAVE. TENCIKS   |  |
| Cole Cazen   | ARLE Wellputh | 720-975-5118 |                         | E-Mall<br>RAUE. TENC IK) (<br>CO COSEY Wellpoth. US<br>Jearle Ovellpath. US |  |
| JUSTIN SE  | ARLE Wellputh | 619.787.88   | vo                      | ; Jew te Owell path. W  |  |
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