

**MILWAUKEE COUNTY  
HOUSE OF CORRECTION**

**DATE:** October 1, 2020

**TO:** Supervisor Marcelia Nicholson, Chairwoman, Milwaukee County Board of Supervisors

**FROM:** Jose Hernandez, Interim Superintendent, Milwaukee County House of Correction (HOC)

**SUBJECT:** Informational Report on Contract with Wellpath, LLC for Provision of Correctional Medical Services

**BACKGROUND**

In 2018, with support from the Department of Administrative Services - Procurement Division, the House of Correction and Milwaukee County Sheriff's Office issued a Request for Proposals for a Correctional Medical Services provider for a new contract for health care services in the Jail and HOC beginning in 2019 (RFP 98180020: Correctional Medical Services).

Much of this report up to the Status Update section is from File 19-192 prepared by Erin Schaffer, Manager - Contracts, Department of Administrative Services, who managed the RFP and initial contracting process with Wellpath in coordination with the Office of Corporation Counsel.

RFP 98180020: Correctional Medical Services was issued on July 20, 2018. The RFP closed for submissions on September 14, 2018. Following evaluation by an Evaluation Committee comprised of County medical, correctional operations, legal, risk, and fiscal professionals, the Evaluation Committee recommended award of the RFP to Wellpath, LLC.

Several highlights from the RFP included:

- Increased focus on the requirement of NCCHC accreditation (to be achieved within 18 months of contract start), and clear requirements that all care provided to inmate-patients be based on the NCCHC's standards, regardless of the status of accreditation;
- Inclusion of a contract monitor (see related report) to oversee clinical care and fiscal requirements, and to ensure compliance with the contract and RFP terms;
- A major overhaul of the staffing methodology, moving from an FTE-based model in the current contract to a care-hours model in the RFP and future contract. This shift

suggested and supported by the Court Monitor, Dr. Shansky, places an emphasis on clinical roles and requires that such roles be staffed 100% of the required hours. This means that 1 RN must be staffed as 40 hours per week of RN care, rather than 38 hours of RN care for an FTE model. Additional staffing modifications include, but are not limited to:

- o 24 hour/365 day per year mental health coverage at the MCJ, including evening and off-hours coverage by a qualified mental health professional (QMHP) or RN, coverage at intake, and access to on-call psychiatry when the psychiatrist is not on-site;
  - o 7-day a week mental health coverage at the HOC, including on-site response of a QMHP when needed during off-hours;
  - o Inclusion of telemedicine and telepsychiatry to support existing positions;
  - o Inclusion of three (3) Wellness Coordinators to serve as patient care liaisons and ombudsmen/women, with a specific focus on high-acuity or vulnerable inmate-patients.
- Separation of the pharmacy services contract from the overall medical services contract, permitting the County to use a third-party, TBE pharmacy (Clinical Solutions, LLC) to provide pharmaceuticals. The separation of this contract from the overall contract allows the County greater control and oversight over pharmacy operations and permits the use of Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP) pricing, which is expected to save the County a substantial amount in pharmaceutical costs.

## **CONTRACTUAL IMPROVEMENTS**

The RFP required the contract include specific obligations, detailing patient care requirements, staffing requirements, accreditation requirements and other standards. Some highlights from the new contract include:

- Inclusion of reference to NCCHC standards as an integral part of the contract, rather than as a passive, outside requirement to be met. Standards are now the primary basis for care, and accreditation is a result of improved standards, rather than a minimum bar to be met;
- Identification of specific timeframes and high-priority items (such as health assessments, sick call, priorities of care, refusal documentation, etc.) in the contract terms;
- Accreditation requirements:
  - o Wellpath was required to obtain NCCHC Accreditation within 18 months of entry to the facility, or face fines and penalties.
  - o While some accreditation items are the responsibility of the County (such as custody and facility related requirements), the new contract requires Wellpath to provide a monthly report identifying any and all compliance concerns with NCCHC standards, regardless of whether they are medical or custody related,

and additionally requires that the report advise the County if action is needed by the County, and if so, what actions are necessary to bring the item into compliance.

The board was presented with three (3) options for award of this contract:

- A 5-year contract with one (1) optional five (5) year renewal (this option tracks to the request made in the RFP);
- A 2-year contract with eight (8) optional one (1) year renewals; and
- A 1-year contract with nine (9) optional one (1) year renewals.

The contract was awarded for a two-year term expiring March 31, 2021. Resolution #19-192 included eight (8) one-year options. The total cost of these services for the first five years is as follows.

| Year          | Cost                 |
|---------------|----------------------|
| One           | \$19,573,982         |
| Two           | \$20,161,201         |
| Three         | \$20,766,037         |
| Four          | \$21,389,018         |
| Five          | \$22,030,689         |
| <b>TOTAL:</b> | <b>\$103,920,927</b> |

In addition to the costs above, the County pays \$750,000 a year directly toward pharmacy costs with an independent, third-party TBE pharmacy provider (Clinical Solutions) that is part of the Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP). Once the \$750,000 cap is exceeded, Wellpath will be responsible for 75% of all additional pharmacy costs (if any) and the County will be responsible for the remaining 25% of additional pharmacy costs (if any).

**STATUS UPDATE**

Attachment 1 was prepared by our medical consultants at NRI to highlight some of the improvements to the provision of medical services the County is experiencing with Wellpath.

Additionally, with the assistance of Corporation Counsel, Procurement, and the Sheriff's Office, the House of Correction recently executed Amendment #1 with Wellpath to provide additional leadership; both the HOC and the jail each now have a Medical Director. The amendment also made improvements to mental health staffing. The changes were at no additional cost to the County.

Staffing penalties are declining monthly since the onset of the contract. The chart below, provided by NRI, shows the trend. COVID is currently impacting nursing staff causing a slight increase.



Offsite claims costs are also declining. Pharmacy costs are stabilizing, and the HOC is working with Wellpath on a 340b program which can reduce the cost of HIV prescriptions, which are a large percentage of costs.

**CONCLUSION**

Wellpath has been providing a comprehensive program of medical, dental, and mental health services, compliant with the National Commission on Correctional Health Care's (NCCHC's) standards and the Christensen Consent Decree. It is our understanding that File No. 19-14 presented by Procurement to the Finance & Audit Committee on February 1, 2019 about insourcing medical services did not have any momentum. It would be too costly and difficult to implement with current shortages of medical staffing in the marketplace and so on. Therefore, the HOC is anticipating bringing the renewal of the contract with Wellpath to the board prior to the current term expiring at the end of March next year. The item may be presented as soon as the December cycle.

pp  David Ryaber Asst. Superintendent  
 Jose Hernandez, Interim Superintendent

- cc: David Crowley, Milwaukee County Executive
- Mary Jo Myers, Chief of Staff, Office of the County Executive
- Julie Landry, Director, Department of Administrative Services
- Kelly Bablitch, Chief of Staff, County Board
- Earnell Lucas, Sheriff, Sheriff's Office
- Aaron Dobson, MCJ Commander, Sheriff's Office
- Supervisor Anthony Staskunas, Chair, Judiciary, Safety & General Services Committee
- Supervisor Sylvia Ortiz-Velez, Vice Chairperson, JSGS Committee

## Attachment 1

**Positive trends produced by Wellpath following contract award that have been a result of their commitment in combination with both on-site and remote monitoring conducted monthly by the NRI contract monitoring team: (Dr. Richard Clarke, MD; Dr. William Elliott, Psychologist; James Voisard CCHP-A, Team Lead.**

- Improved patient access to health care services (medical, mental health & dental)
  - Established a request form process that has resulted in patients being assessed for all clinical issues within 24 hours of request submission
- Chronic care protocols and processes have been improved
  - Chronic care issues are identified during the intake screening process & referred for follow-up in a timely manner
  - Providers assess patients during chronic care clinic visits, provide indicated care and schedule follow-up visits based on patient status and condition
  - The improvements have resulted in better management of chronic care conditions and has contributed to a reduction in emergency room visits
- As a result of NRI monitoring feedback, there has been a significant improvement in the drafting and implementation of individualized treatment plans for patients with chronic care and/or special needs
- The number of emergency room (ER) visits have decreased which has been a direct result of better ongoing patient health care management
- There has been an increase in off-site visits scheduled for specialist care which is a trend that indicates that health care conditions are being identified and managed before they fester into a crisis status and must be sent to the ER for intervention
- There is a very robust continuous quality improvement (CQI) program that has been very effective, along with the NRI monitoring process, in identifying problems in delivery of care, drafting and implementing corrective action, and re-studying the situation to ensure that correction action taken has been effective
- Both the MCJ and HOC have applied for National Commission on Correctional Health Care (NCCHC) accreditation and are awaiting notification from NCCHC on the scheduling of the on-site accreditation surveys
- Wellpath has researched, established collaborative relationships with community resources to implement some of the critical components of a Medication Assisted Treatment (MAT) program
- Wellpath, MCJ and HOC worked very well together to draft and establish policies/procedures and protocols to effectively deal with the COVID pandemic. All entities worked together to make revisions and adjustments in an effective manner in response to the frequently modified screening, quarantine and treatment recommendations from the Centers for Disease Control and Prevention and State/local health care agencies.
- Wellpath has been receptive to the NRI monitoring findings, notifications, and recommendations which has resulted in a health care system that has improved timely access to care, continuity of care throughout incarceration, and mitigation of risk.