

May 30, 2014

James C. Welch, RN, HN-BC,
Chief, Bureau of Correctional Healthcare Services
Department of Correction
245 McKee Road
Dover, DE 19904

**Re: Department of Correction Professional Services Request for Proposal
Correctional Health Care Pharmaceutical Services
Proposal No. DOC1427-PHARM**

Dear Mr. Welch:

Correct Rx Pharmacy Services, Inc. (Correct Rx) has provided a detailed description of “HOW” we intend to provide every aspect of Pharmacy Services for the Delaware Department of Correction (DDOC) offender population in our response to the Request for Proposal. Our 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.

What distinguishes us from our competition is that our clinical pharmacists are actually healthcare partners, working with other medical professionals to achieve the optimal use of medication. Our 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.

Example of New Information Format

Correct Rx in response to Addendum #13 to PROPOSAL NO.: DOC1427-PHARM, Correctional Health Care Pharmaceutical Services dated April 22, 2014, has taken this opportunity to provide supplemental information to our previously submitted response of October 18, 2013. Our approach is to provide our entire response as one offering. While much of the content is the same we have also provided supplemental information to further enhance our offering to the DDOC. The supplemental information is denoted in the Table of Contents. Also, in consideration of the analysis that has already been completed, all new information is presented in easily recognizable burgundy text boxes. This will allow the selection committee to distinguish this information from our prior submission of October 18, 2013.

Correct Rx is proud to be your pharmacy vendor and we embrace the opportunity to present our past accomplishments, the services we are currently providing and the new services we are introducing in this proposal. We are pleased to advance our shared history, communicate our willingness to adjust to challenges facing DDOC and commit to leading edge innovations that are designed to accelerate success. As a clinical pharmacy who works in collaboration with your medical team we define success as improved outcomes for the patients under your care resulting in decreased overall healthcare costs.

Authorized Respondent

As the President/CEO and majority owner of Correct Rx Pharmacy Services, Inc., I am authorized by Correct Rx Pharmacy Services, Inc. to bind the firm to all statements including service, timelines and pricing contained in this response. I will be directly involved with any contract negotiations. I am also the individual who may be contacted should any clarifications be necessary and I will make certain that all your questions are answered.

Corporation in Good Standing

Correct Rx Pharmacy Services, Inc. is a Maryland Corporation and not a subsidiary of any other corporation or an affiliate of another organization. Additionally, Correct Rx is submitting their proposal independently and without collusion, consultation, communication, or agreement with any other Proposer as to any matter concerning pricing. Also, Correct Rx has not employed any company or person to solicit or secure this contract. Correct Rx has not paid or agreed to pay any company or person any fee, commission, percentage, brokerage fee, gifts or any other consideration contingent upon or resulting from the award of this contract.

Correct Rx affirmatively acknowledges and is in agreement that for breach or violation of this term, the State has the right to annul the contract without liability or, in its discretion, to deduct from the contract price the amount of any such fee, commission, percentage, brokerage fee, gifts or contingencies. Correct Rx is not currently nor has it ever been suspended, debarred or otherwise excluded from any state or Federal procurement and non-procurement programs.

Tax Identification Number: 75-3111495

Address:

Correct Rx Pharmacy Services, Inc.
803 A Barkwood Court
Linthicum, Maryland 21090
Phone: (800) 636-0501 Fax: (410) 636-9706

Key Contact:

Dr. Ellen H. Yankellow
President & CEO
Email: eyankellow@correctrxpharmacy.com
410-636-9500 office


Acceptance of Terms and Conditions

Correct Rx is forwarding all material and enclosures collectively as the response to this RFP and submits this transmittal letter as well as its response with full acceptance and willingness to comply with all terms and conditions and RFP requirements.

No Exceptions

Correct Rx is not taking any exceptions to the requirements including any contractual terms or conditions. Correct Rx will deliver services that surpass your expectations and the requirements of the RFP.

Vendor Activity

Correct Rx attests to the fact that no activity related to this proposal/contract will take place outside of the United States and that no activity will be executed in an off shore facility, either by a subcontracted firm or a foreign office or division of Correct Rx.

Compliance with EEOC

Correct Rx is in full compliance with the affirmative action and equal employment regulations. Correct Rx does not discriminate in its employment practices with regard to race, color, religion, age, sex, marital status, political affiliation, national origin or handicap.

Correct Rx's employment practices are conducted in a manner that will not discriminate against any employee or applicant because of race, color, religion, sex, national origin, age, sexual orientation, the presence of physical or mental disability, or whether the individual is a veteran or disabled veteran, or any other characteristic protected by law. Such nondiscriminatory practices apply to all aspects of employment, including the following: hiring, upgrading, promotions, job reclassifications, transfers, recruiting, layoffs, job terminations, benefit and compensation programs, educational, and staff development opportunities. In addition to being a woman-owned business, Correct Rx also employs a diverse work force; over 70% of our employees are classified as minorities.

Employee conduct, whether intentional or unintentional, that results in harassment of other employees regarding race, sex, age, religion, veteran status, disability, national origin, or any other protected class will not be tolerated. Harassment in any form is strictly prohibited, and will result in immediate disciplinary action, up to and including termination of employment. Correct Rx Pharmacy Services, Inc. has a full affirmative action and EEOC plan on file and will make it available to the DDOC upon request.

Conclusion

Correct Rx is an institutional pharmacy. No other institutional pharmacy has adopted this clinical approach to the extent that we have, although many claim to offer clinical pharmacy services.

Correct Rx is the only institutional pharmacy that has wholeheartedly adopted this holistic service approach. The result is that not only is it possible for our customers to provide improved, and often more effective, healthcare services to their patients, but also it is possible to do so while lowering overall healthcare costs for the institution.

In spite of the obvious advantages of the clinical pharmacy approach, cost per pill is often the standard practice for purchasing agents and RFP review committees looking for a yardstick against which to measure various companies – even though it does not take into consideration the larger pictures of healthcare costs and effectiveness.

Correct Rx offers our customers demonstrably better health outcomes in addition to distinct economic advantages with longer-term and more comprehensive healthcare cost savings than any pharmacy company based strictly on a cost-per-pill formula.

In our response we have articulated our unique history and understanding through our firsthand experience with the DDOC. Correct Rx has focused particular attention on the specific needs of DDOC today (i.e., clinical expertise, program management, regulatory adherence, cost saving opportunities, innovative solutions, Statewide healthcare integration, dependable and reliable delivery, technology, attention to detail, teamwork, philanthropy, integrity, etc.).

Correct Rx is confident that our innovative thinking, clinical expertise, compelling holistic approach and attention to detail will continue to provide the DDOC with the **Best Value** for pharmacy services. We have presented both a Per Inmate Per Month (PIPM) Management Fee pricing proposal and an alternative pricing proposal that replaces the PIPM with a dispensing fee.

Both proposals include our full array of services. The outcome specific clinical program is no longer a part of an incentivized program as previously submitted; it is now included in both the primary and alternative pricing submissions from Correct Rx.

We are excited to present our innovative and comprehensive pharmacy service plan to the selection committee and look forward to the committee's assessment. Thank you for the opportunity to submit our proposal and the prospect of continuing our partnership with the DDOC as your pharmacy provider.

Respectfully submitted,

Dr. Ellen H. Yankellow
President and CEO

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*Supplemental Information: **Proposal Format***

Correct Rx in response to Addendum #13 to PROPOSAL NO.: DOC1427-PHARM, Correctional Health Care Pharmaceutical Services dated April 22, 2014, has taken this opportunity to provide supplemental information to our previous response submitted October 18, 2013 as required.

Our approach to this submission is to provide our entire response together as one offering. Much of the content is the same or with minor edits, but we have also provided new and supplemental information to enhance our offering to the DDOC. The supplemental and new information added to our response is denoted in the Table of Contents. Also, in consideration of the analysis that has already been completed, all new and supplemental information is presented in easily recognizable burgundy text boxes. This will allow the selection committee to distinguish this information from our submission of October 18, 2013.

Correct Rx is providing a comprehensive pharmacy services program specifically designed to meet the needs of the DDOC and the offenders we serve. Unfortunately, when responding to RFP's many vendors offer promises they cannot keep. Correct Rx has demonstrated through our years of service with the DDOC that we deliver on our promises. The selection committee among its many responsibilities is charged with assessing who is making promises they can keep based upon experience, reputation, expertise and transparency.

Correct Rx understands that this is a services contract and as such the comprehensive services provided by the pharmacy vendor have a direct impact on healthcare outcomes and the overall healthcare spend for the DDOC. We are dedicated to being a dependable partner through the provision of professional and comprehensive services that both contain costs and improve outcomes. Correct Rx is proud of the clinical, operational and administrative accomplishments we have realized together with the DDOC, the BCHS and our co-vendors and yet we know there is still more work to be done. We are thankful for the opportunity we have to compete for your business and are excited about the new solutions we are offering in our response to this thoughtful RFP.

Correct Rx appreciates the time and attention the selection committee has already dedicated to this evaluation process and we are confident that your continued commitment will determine the best value for the taxpayers in the State of Delaware. In the end, we are hopeful that you will share our view that Correct Rx is the best viable option for the DDOC and we respectfully submit our response on the pages that follow.

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Correct Rx Pharmacy Services, Inc. (Correct Rx) is approaching this RFP as an opportunity to underscore the current services we provide to the Delaware Department of Correction (DDOC), but more importantly to showcase our revised cost structure, expanded clinical programs, dashboard reporting, State Health Care Innovation Plan (with support from CMMI-SIM) integration, and adaptation of the Affordable Healthcare Act along with active program management.

Our proposal is reflective of our best thinking and delineates our compelling holistic methodology to improve patient outcomes while positively impacting your overall healthcare budget. Correct Rx is proud to be your current pharmacy vendor and we embrace the opportunity of dialogue about our past and present accomplishments, the services we are currently providing and the new services we will be introducing in this proposal. We are pleased to advance our shared history, communicate our willingness to adjust to challenges facing DDOC and commit to leading edge innovations that are all designed to accelerate DDOC's success. We define success as improved care for the patients under your custody resulting in decreased overall healthcare costs.

Building on Our History

Correct Rx believes that our pharmacy services are tailor-made to satisfy the requirements set forth as demonstrated by our dedicated efforts over the past many years along with the additional offerings that are designed to meet the needs of DDOC today and into the future. Correct Rx has matured both in size and in our specialized capabilities. We are up to the new challenges that are presenting themselves in the correctional healthcare market. If DDOC chooses to continue the partnership with Correct Rx, there will be no setback or learning curve.

Embracing DDOC's Culture of Excellence

Correct Rx is well versed in DDOC's culture of excellence and shares the Bureau of Correctional Healthcare Services' (BCHS) commitment to cost effective and innovative approaches that provide the highest quality of services. Further, Correct Rx has a clear understanding of each DDOC facility, their individual nuances and the specific requirements of the pharmacy vendor. This will serve as a great advantage to DDOC and the BCHS as you move forward with the clients you serve.

No Client is More Important

At Correct Rx there is no client more important than DDOC and this commitment is felt at every level of our organization. Our history together only creates the foundation of our commitment to DDOC. We respond with thoughtful urgency, intensity and passion to each and every request from DDOC no matter what the request.

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Correct Rx has never taken our relationship with DDOC for granted and we continue to earn your business every day. Dr. Yankellow has always made it known that when DDOC calls the answer is always a resounding “**Yes.**”

Supplemental: Approach to Diversity

MBE/WBE Certification

Correct Rx is a woman-owned and operated business certified by the Delaware Office of Supplier Diversity (**OSD Certification Number:** DE14042152) and the Maryland Department of Transportation (Certification No. 03-440) In addition to being a woman-owned business, Correct Rx also employs a diverse work force; over 70% of our employees are classified as minorities.

Approach for Inclusion & Diversity

Correct Rx, as a certified MBE/WBE, understands the challenges and importance of providing opportunities to small businesses throughout the nation. As a result of this we always strive, wherever feasible, to include other small businesses and MBEs as our sub-contractors on contracts when required. 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.

We use a small Maryland MBE delivery company to provide delivery services to DDOC. We also use a Maryland MBE company for our office cleaning, stationery supplies and staffing requirements. Each of these businesses is a small business, and a certified MBE, as per the guidelines of the Maryland Department of Transportation.

Executive Order 44

On March 26, 2014 Delaware Governor Markell signed Executive Order 44 that expanded the scope of the Governor’s Supplier Diversity Council and the commitment to expand small business opportunities with State procurement. As Michelle Morin, Executive Director of the Office of Supplier Diversity in the Office of Management and Budget stated it is their mission to assist the entire supplier diversity community in competing for the provision of public works, goods and services to state government.

Correct Rx is proud to be a women-owned and operated company, but even more proud of the opportunities we have created for our diverse team of employees and other MBE businesses. We hope that DDOC shares our sense of pride through the opportunities that you have created by contracting with Correct Rx. The DDOC has not only met the guidelines of Executive Order 44 by contracting with an OSD certified company, but the spirit of Governor Markell’s Order through inclusion of a diverse supplier community.

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Meeting the Needs of Today

We have tried to articulate our unique history and understanding with DDOC throughout our response, taking into consideration the growth and changes of DDOC. Correct Rx has focused particular attention on the specific needs of DDOC today (i.e., clinical expertise, program management, regulatory adherence, cost saving opportunities, innovative solutions, Statewide healthcare integration, dependable and reliable delivery, technology, attention to detail, teamwork, philanthropy, integrity, etc.). Correct Rx firmly believes we are providing DDOC with the **“Most Advantageous Offer.”** We know our innovative thinking, clinical expertise, compelling holistic approach and attention to detail will continue to be essential to the success of the mission of DDOC. It will be Correct Rx’s ability to deliver these services in a true cost savings model that will represent the **“Best Value.”**

The selection committee will find that there are many content areas and topics that overlap throughout the writing of our response. Correct Rx has deliberately repeated some of the text in our response to these related topic areas. This was a strategic and deliberate action on our part. Given the importance of our response and the vast amount of information that needs to be reviewed by the selection committee, we have found that providing a comprehensive answer to each specific requirement facilitates the evaluation process.

The Impact of Project Understanding

Correct Rx, as the incumbent, is intimately familiar with the facilities serviced under this contract, the populations served and the nuances germane to the respective sites and their staff. Some pharmacy vendors may offer artificially low management fees designed to win the contract at the expense of delivering what is actually required. While these bids may appear to be cheaper, they will ultimately lead to an increase in overall drug and healthcare spending with a decrease in services.

Fully Credentialed and Capable Managers

Correct Rx understands the importance of selecting fully credentialed and capable program managers. Our ability to retain our same management staff is not only a testament to Correct Rx’s owners and managers, but it reinforces that Correct Rx’s program managers have the specific awareness and appreciation of what it actually takes to successfully implement every aspect of this contract. We are not telling DDOC that *we think we can do what is required*, but that **we know we can** because that is exactly what we have been doing since our inception.

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Separation of Administrative and Clinical Program Management

To ensure the success of this program, Correct Rx has and will continue to maintain separate Administrative and Clinical Program Managers. DDOC will be well served by these managers who ensure contractual compliance by participating in the required meetings, furnishing the required reports, serving on the ad hoc committees and providing immediate responses to DDOC's requests. We value our partnership with DDOC and remain 100% committed to providing pharmacy services that are designed to improve patient care and reduce costs, ultimately honoring your stellar reputation as our own.

BCHS Mission

Correct Rx embraces the BCHS Mission Statement "To ensure medical, mental health and substance abuse services are delivered to offenders, and services meet the quality standards as outlined by the NCCHC, ACA and other professional standards in the most cost-effective manner."

Compliance with NCCHC and ACA Standards

Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA). Correct Rx ensures that all pharmacy services are compliant with NCCHC and ACA standards. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them. Correct Rx has implemented a comprehensive Continuous Quality Improvement (CQI) program, as set forth in ACA standards and according to the NCCHC essential Standard P-A-06 and J-A-06 (compliance indicators and definitions).

Accreditation Experts

One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. Correct Rx Programs are all designed to meet or exceed NCCHC and ACA accreditation standards. Correct Rx has become known as correctional pharmacy accreditation specialists. Correct Rx will partner with our co-vendors and the DDOC to ensure that all DDOC facilities exceed the pharmacy standards, so that achieving and maintaining accreditation is never in question.

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Supplemental: Regulatory Affairs

Correct Rx will not put the DDOC or our company in harm's way. There is increased scrutiny to ensure regulatory compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring for the safety and welfare of the public. Correct Rx's commitment to promoting strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division that monitors the laws, rules and regulations which govern institutional pharmacies and the clients we serve.

Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of Federal, State and local legislation. Observing State and Federal law should be the most basic condition required to provide service to the DDOC. Correct Rx finds it distasteful at best that some decide to misrepresent the law to potential clients in an attempt to win business. A vendor's effort to either intentionally mislead the DDOC or failure to comprehend the laws that govern pharmacy licensure cannot be left without correction as at the very least they have the potential to confound the evaluation process. Perhaps, this behavior is indicative of future behavior if awarded the contract.

Correct Rx performs all work in compliance with all Federal, State, and contract specifications. Correct Rx customizes its facility policy and procedures to comply with law and institutional policies and directives as well as all regulatory and credentialing institutions (e.g., BOP, JC, NCCHC, ACA, DEA).

Correct Rx is licensed as an institutional pharmacy by the Maryland Board of Pharmacy and maintains a DEA license that allows for the dispensing of controlled substances. We are a licensed pharmacy provider in 48 States, including Delaware. There have not been any actions taken or any actions pending against our license in Maryland or Delaware.

Correct Rx is proud of the fact that we have not had any liquidated damages or fines assessed by any client since our inception. Even further, we have not negotiated relief of any liquidated damages and or fines. Correct Rx ensures that all Federal and State licenses and certificates necessary to legally provide the pharmacy program or any of its sub-components in the name of DDOC are obtained and retained. Correct Rx prides ourselves on doing what the contract requires thus eliminating the potential for fines or assessments. Correct Rx has never settled a lawsuit since our inception nor is any pending. Correct Rx has never referred any client or patient to our insurance company.

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Supplemental: Regulatory Affairs (continued)

Correct Rx works to keep our clients abreast of the community standards and National and State regulations. Some vendors attempt to muddy the waters surrounding licensure and create confusion in the correctional community regarding which licenses are required by both the facility and the pharmacy to provide services and patient-specific and non-patient specific medications. Misleading statements either demonstrate a failure by the vendor to understand the applicable law or are an effort to intentionally misinform the DDOC. Vendors should realize that the DDOC is not well served by false statements and willful deception could result in technical disqualification.

Please refer to section IV. B. 1. “Supplemental: Regulatory Affairs” of our Response for a more specific and expanded discussion.

Holistic Approach

Correct Rx is determined to provide a proposal that represents the Best Overall Value for the DDOC in response to this RFP. ***Our approach is holistic and the solutions that we have offered are innovative and leading edge.***

The chart on the following page is an abbreviated list of the ***Pharmacy Services*** that Correct Rx intends to provide to the DDOC. This visual aid can be utilized as an easy reference guide by the Evaluation Committee when reviewing our response. This chart provides the committee a clear and concise check off list of the key pharmacy services that are being offered by Correct Rx.

Standard	Description
Program Management	<ul style="list-style-type: none"> ● Effective Program Management-Joint Vendor Meeting Participation ● Division of Administrative and Clinical Responsibilities-Direct Report to the President and CEO ● Weekly Summary Report to BCHS Chief and Medical Director ● Real Time Access to Accurate and Professional Reports ● Same Cut-off Time for New and Refill orders ● Limited Turnover in Key Personnel ● Superior Emergency Preparedness
Clinical Services	<ul style="list-style-type: none"> ● Sophisticated High Level Clinical Initiatives ● Proven Disease State Management ● Medication Therapy Management and Poly-pharmacy Review ● Quarterly Pharmacy & Therapeutics Meetings ● Provider Consultation, Collaboration, & Education

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Standard	Description
	<ul style="list-style-type: none"> ● Patient Education-Diabetes Education ● Utilization Management and Statistical Analysis ● Refill Due Reports and Expiration Reports customized by facility ● Novel Approach to Non-Formulary Management
Staffing	<ul style="list-style-type: none"> ● Corporate Accountability, Support and Access ● Clinical Director and Support - Deep Bench Strength ● Dedicated Clinical Pharmacists to the DDOC contract ● Program Management and Administrative Support ● Dedicated Billing Account Personnel
Medication Room Audit	<ul style="list-style-type: none"> ● Medication Room audits performed by Correct Rx pharmacists familiar with ACA, NCCHC and JC standards and regulations ● On-site support by Correct Rx team when called upon to correct problems at the facility level.
Medication Delivery	<ul style="list-style-type: none"> ● Timely and Accurate Delivery of Medication ● Special packaging and individualized quantities to meet the facility's needs ● Network of Local Emergency Back-up Pharmacy Coverage
(Supplemental)	<ul style="list-style-type: none"> ● Stat deliveries at no cost to the DDOC
Operations & Specialty Services (Supplemental)	<ul style="list-style-type: none"> ● Knowledge of nuances and requirements of every Facility ● IV Preparation-797 Compliant- Patient Specific ● Medication Returns (Credit for full and partial cards) ● Specialized Packaging and Flexible Quantities by Facility ● Robust Half Tab Program to Maximize Savings ● Discharge Medication Program-Continuity of Care
Accounting Department	<ul style="list-style-type: none"> ● Electronic Invoicing in Excel Format ● Correct Rx supported Internal Audit Department ● External CPA Audit/Clean Opinion ● Financially Sound with Sufficient Resources to Support this Contract ● Third Party Billing Expertise- Poised to integrate the AHCA
I.T. Department (Supplemental)	<ul style="list-style-type: none"> ● EPHR Interface Capability (Electronic order transmission) ● In the final testing stage of an interface with the EHR system that the DDOC will be using July 1st. Interface will be completed prior to July 1st ● Proprietary Bar-Code Automated Medication Order Check In System including Automated Refill Requests ● 24-hour Support by In-House IT Dept/ Automatic alert if interface fails
Regulatory Affairs Department	<ul style="list-style-type: none"> ● Monitoring Federal and State laws ● Compliance with NCCHC, ACA, Joint Commission, BOP, DOJ, DEA, ACLU standards and regulations ● No settled lawsuits since inception or pending litigation ● All necessary MD, Delaware and Federal licenses and permits

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Doing More for Less: *The “New Norm”*

Correct Rx understands the current state of the economy and the need for fiscal conservatism. State and Federal budgets continue to demand that all of us do more for less. This has become the “***new norm***” that we all must learn to navigate and thrive in this environment. Correct Rx is living this “***new norm***” every day and we understand the importance of bringing true value to the DDOC through competitive pricing and effective contract and clinical management. We embrace this responsibility as an opportunity to demonstrate our responsiveness to this RFP. Correct Rx knows that your success is our success. To this end, Correct Rx has responded in a myriad of ways including but not limited to the following:

- **Competitive Revised Pricing Model** Correct Rx has responded in an aggressive and thoughtful manner to provide the greatest savings to the DDOC.
- **Active Program Management** Correct Rx provides professional Program Management Services to support the Pharmacy Services Program. Correct Rx has extensive experience in managing statewide and other large correctional systems. Correct Rx believes contract management is an essential component of delivering a comprehensive pharmacy services program. We always set a goal of 100% compliance with the terms of the RFP and resultant contract. We hold ourselves to high standards and believe that the DDOC deserves this level of integrity.

Our approach focuses on fully understanding the requirements of the contract and then providing services that not only meet the standards, but exceed your expectations. Our reputation for doing what we promise is well documented. The DDOC will be the recipient of this dependable program management and excellent work ethic. What we promise will in-fact continue to be a reality. Each facet of the Correct Rx program is monitored and adjusted as needed to address the DDOC’s requirements.

- **Dedicated DDOC Clinical Pharmacy Program** Correct Rx is recognized nationally for our cutting edge clinical initiatives. Our program has matured over the past 10 years and there will be no learning curve for the DDOC. Correct Rx has a breadth and depth of experience in providing clinical pharmacists as part of the healthcare team that can’t be matched by any of our competitors. This holistic approach to pharmacy care is common practice in the Veterans Affairs (VA) system and several hospital settings, but is quite unique in the correctional arena.

We have the infrastructure, intellectual know-how and the experience to implement a patient directed pharmaceutical care program for DDOC. This program will not only focus on the drug spend, but also on offsite care costs by reducing avoidable hospitalizations through better disease state management.

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- **Confidential & Proprietary: Highly credentialed clinical pharmacists.** The Correct Rx clinical department is staffed with a team of clinical pharmacists who have earned a Doctorate in Pharmacy (PharmD) and have completed a post graduate residency program. These post graduate residency trained pharmacists will provide the DDOC with a level of competency that is essential when collaborating with your providers. All of our clinical pharmacists are either board certified or are in the process of obtaining this very rigorous certification. Correct Rx has even secured a clinical pharmacist who has a nursing background. This RN, PharmD' brings a unique understanding of the integration of nursing and pharmacy when implementing patient care plans.
- **Strategic initiative that requires all of our clinical pharmacists to obtain the Certified Correctional Health Professional (CCHP) certification issued by the National Commission on Correctional Health Care (NCCHC) and the Pharmacotherapy Specialist certification issued by the Board of Pharmacy Specialties (BPS).** Correct Rx's investment in this certification initiative will provide the DDOC with not only clinically trained PharmD' but with pharmacists that have a greater understanding of the standards surrounding healthcare in the correctional setting.
- The creation of a **Medication Therapy Management Department.** This department was created to supply essential drug information to Correct Rx's clients and for assisting providers in the proper selection of the most cost effective drug therapy that will result in the best outcome. This department is led by a doctoral trained pharmacist with years of correctional experience who is CCHP certified and possesses a Master of Science in pharmaceutical outcomes and policy in applied pharmacoeconomics from the University of Florida. Dr. Valerie Barnes, Director of Pharmacoeconomics.
- **Pharmacy and Therapeutics Committee:** *Not your average P&T.* Correct Rx plays an active and vital role in the quarterly Pharmacy and Therapeutics Committee meetings for the DDOC. The Pharmacy and Therapeutics meeting is a forum established and tailored to ensure that medication costs are well managed. Correct Rx through the P&T committee provides continual monitoring of medication use and applies pharmacoeconomic principles in the development of a sound formulary with respect to the changing drug market, established clinical pathways and standards of care. Correct Rx has had considerable experience in managing Pharmacy and Therapeutics (P&T) Committee processes. The P&T Committee is the primary formal link that establishes communications between the health care practitioners, the pharmacy, and the DDOC as it relates to the use of medications for the patients under your care.

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- **Inspections and Audits** The visits are performed by fully credentialed clinical pharmacists who possess first-hand knowledge of the DDOC. Correct Rx's clinical pharmacists are utilizing the new audit tool that was designed and implemented specifically for our clients. This tool ensures that our 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.
- **Forecasting Pharmaceutical Expenditures.** Correct Rx launched a new and exciting cost-containment initiative which began February 2012. On a regular basis, Correct Rx provides an analysis of current drug market trends. This information is essential to planning your drug budget, controlling medication costs and in determining which medications provide the most value for the DDOC. Managers need forecasting data to make decisions and policy. Correct Rx will partner with you and your medical vendor to help you reach your budgetary goals.
- **Autonomous Technology Solutions** Correct Rx's I.T. Department is under the direction of knowledgeable I.T. managers who spearhead the implementation of our corporate technology. The I.T. Department is responsible for the development, implementation and integration of the company's business systems infrastructure, thereby positioning Correct Rx with the ability to meet the needs of DDOC now and in the future.

The key word is **Autonomous**. Our I.T. offerings are not designed to make you so dependent on Correct Rx for I.T. solutions that DDOC would find it difficult to extricate yourself without disrupting your entire system. We are independent and as such will assist DDOC as you determine the best I.T. solution for each of your sites. Our correctional specific software is HL7 compliant and as a result we have already interfaced with multiple EMR systems and Inmate Management vendors.

- **Interface Capabilities.** Our correctional specific pharmacy software is HL7 compliant and interfaced with the current EMR used by the DDOC. This facilitates our ability to easily create a two way interface with the DDOC's current or future Electronic Health Record system. Our experience is vast and we have the internal and external resources necessary to assist the DDOC and medical vendor with their technology solutions.

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Supplemental: Correct Rx is in the final testing stage with the EHR system that the DDOC will be using as of June 2014. This two way interface with Correct Rx is anticipated to be completed in late May or early June. With Correct Rx, the DDOC will have an established two-way interface allowing for the timely and accurate electronic transmission of medication orders which will ensure: patient safety; medical record accuracy; accountability and completeness; and continuity of care; as well as safeguards, efficiencies and accountability for the medical, mental health and dental staff onsite. Without an established interface the DDOC will have to implement an alternate medication ordering process (e.g., a paper fax and fill system) that is fraught with potential patient safety issues, inefficiencies, and threats to medication accuracy, accountability, and documentation.

Correct Rx has already been working with the DDOC and the outgoing medical vendor to ensure there is a complete and accurate data transfer of patient medication profiles to include both the existing and historical orders. We have provided files and begun the testing phase with the new EHR system. If awarded, Correct Rx will be able to transition this contract without any disruption to patient care. The DDOC will also have redundancy protection, since the historical data will be available from Correct Rx for the past three years as well.

- **Bar Code Check in System:** The Bar Code Medication check-in is fast and creates an additional layer of security to ensure that all ordered medications were received. In addition to providing heightened accountability and verification of receipt, shipment check-in time is reduced dramatically versus the manual process of checking orders against the paper packing list.

- **Training and Education – In Person and On Line Training Modules:** Correct Rx is committed to training and education. We have a tried and proven method of on-site training. Starting with the implementation and transition plans to specific medication trainings designed to improve patient care. Correct Rx has created a high quality series of training videos designed to address pharmacy operations, medication administration and documentation.

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These videos are accessible on-line as part of a self-paced comprehensive training module. They are always accessible, which is convenient for scheduling new staff orientation or for those who may wish to view a specific training topic as a refresher. Correct Rx is also always available to answer questions or provide in person trainings specifically designed for the needs of the medical staff.

- **Internal Regulatory Affairs Department** led by a full time licensed attorney. This department was recently expanded to include a dual degree Doctoral trained pharmacist who also has a law degree.

Correct Rx will not put DDOC or Correct Rx in harm's way. Correct Rx recognizes that there is increased scrutiny to ensure regulatory compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring for the safety and welfare of the public. Correct Rx's commitment to promoting strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division. Our focus promotes and monitors the laws, rules and regulations that govern institutional pharmacies and the clients that we serve. Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of Federal, State and local legislation. While many organizations have failed to address the issue and view the matter as either unimportant or cost prohibitive, Correct Rx has developed a Regulatory Affairs Department.

Correct Rx ensures that all work is performed in compliance with all Federal, State, and Contract Specifications, or in their absence, the best practices of the trade. Correct Rx's facility policy and procedures will be customized to comply with institutional policies and directives and is already compliant with all regulatory and credentialing institutions (e.g., BOP, JC, NCCHC, ACA, and DEA).

Confidential & Proprietary: Creating Undeniable Value through Innovative Clinical Pharmacy Programs

Correct Rx looks forward to the opportunity to serve and the DDOC with our comprehensive pharmacy programs. Correct Rx has a proud record of establishing collaborative relationships with our clients and co-vendors designed to improve patient outcomes while managing overall healthcare costs. Creating this ***undeniable value*** has been accomplished through the participation of our board certified clinical pharmacists as part of the multidisciplinary healthcare team and through effective program management. Our clinical pharmacists with the support of our sophisticated corporate clinical department are able to assist at a high level to manage your highest risk patients and disease states in collaboration with your selected medical vendor. The results are real and reproducible. Correct Rx is excited to share this data with the DDOC and we encourage you to contact any of our clients as we have built our business by producing outcomes and providing customers with excellent service and cost savings.

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Not Comparable to Buying a Fixed Commodity

The DDOC is well aware that the traditional approach of treating pharmacy as a commodity and attempting to cut costs by decreasing Clinical Services and Program Management actually results in an increase in drug spending and leads to a decrease in the quality of healthcare. Poor healthcare services result in lawsuits, loss of clients, and regulatory investigations (e.g., DOJ, ACLU).

Impact on Drug Spend

Correct Rx knows from experience that the actual price per pill and management fee does not determine the ultimate cost of a comprehensive pharmacy program. One must also consider quantity and selection of medications ordered and the impact pharmacy services has on patient care and overall healthcare costs.

We ask DDOC's selection committee to place the proper consideration on the impact of each of the pharmacy services, including but not limited to: cost of drug, operational controls and efficiencies, formulary management/utilization review, quality assurance initiatives, I.T. offerings and Clinical Programs. Beyond the "cheapest price" comparisons, the overall value of pharmacy services must factor in the following two variables:

- ***Selection and Quantity of Medications Dispensed each month***
- ***The impact of Clinical Pharmacy Initiatives on reducing the overall costs of patient care***

Total Pharmaceutical Expenditures – We want to be your partner!

A modest increase in quality clinical services and program management not only improves patient care, but significantly decreases the total drug cost. The delivery of Quality Healthcare Services decreases overall healthcare spending by reducing the need for secondary care, hospitalizations, and offsite transports.

The direction of pharmacy services nationally is one of collaboration, education and therapy management all in an effort to improve outcomes while reducing short and long term costs. Correct Rx's clinical team bolsters healthcare services in DDOC facilities by providing a real impact on the quantity, selection and mix of drugs being purchased. **Factors such as poor patient compliance, over-ordering, adverse events, and the early discontinuation of medications can increase the quantities of returned medications.** The success of Correct Rx's clinical programs has been demonstrated in our statewide and corporate contracts and we are looking forward to expanding the impact through our partnership with DDOC.

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Cutting Edge Clinical Programs

Correct Rx's clinical programs have set the benchmark that others can only hope to copy. Our company was founded on the principal that by providing cutting edge clinical services and initiatives we would be able to improve our client's success in providing healthcare to the offenders under their custody. Innovation for the purpose of improving our client's results is the reason behind our investment in innovative clinical programs. Correct Rx maintains the opinion that improved outcomes means healthier patients, fewer complications and reduced overall costs to DDOC.

Comparison to Nationally Published ACO Benchmarks

Correct Rx works collaboratively with the BCHS, DDOC and our co-vendors to collect, analyze and communicate the impact of the DDOC's clinical pharmacy programs that are focused on disease state and medication therapy management. We will deliver a program with measurable healthcare quality improvement outcomes. The impact will be measured according to healthcare quality indicators that create, support and sustain positive treatment outcomes, while efficiently managing the overall health care spend. Although the DDOC is not an Accountable Care Organization (ACO), the benchmarks described are designed to mimic the innovative approach used by ACOs to improve healthcare quality.

Clinical Pharmacists as Active Participants in the Correct Rx/DDOC Model

The impact of our comprehensive clinical programs is profound. In our model the clinical pharmacists are active participants on the healthcare team. The pharmacy is not simply dispensing and delivering medications, but is intimately involved in collaborating with the medical and mental health providers. That is why Correct Rx our clinical pharmacists dedicated to the DDOC contract is so valuable.

State Innovation Model and Correct Rx

Our proposed benchmarks are strategically designed in accordance with the State Health Care Innovation Plan to transform Delaware's health care system, with support from the Center for Medicare and Medicaid Innovation (CMMI) State Innovation Models (SIM). While it is a bit unclear how the DDOC will be impacted by this transformation, one thing is clear – it will have a dramatic impact. Our proposed initiative will perfectly align the DDOC with the State's Triple Aim Goals to (1) Improve Patient Experience of Care, (2) Improve Health of Delawareans; and (3) Reduce Healthcare Costs as described in the Affordable Health Care Act. The focus of the State Innovation Models and Affordable Care Act is to transform the current healthcare environment focusing on improved quality of care and cost sharing while shifting away from fee for service payment.

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Supplemental:

Our business model is based on a balanced approach of onsite PharmDs, a clinical team, full-time program manager, and administrative support. This gives our clients a welcome blend of operational efficiency, cutting-edge clinical programs, and cost savings.

Contract Management and Attention to Detail

Correct Rx believes contract management is an essential component of delivering a comprehensive pharmacy services program. We will set a goal of 100% compliance with the terms of the resultant contract. Correct Rx has a proven method of studying the terms of the contract and then delivering exactly what we promised from Day One. We do not build in time for a learning curve. We hold ourselves to high standards and believe that you deserve this level of integrity. Our approach will focus on fully understanding the requirements and then providing services that exceed your expectations.

Cutting Edge Clinical Programs

Correct Rx has dedicated our focus, attention and resources to establish a clinical department that is the best in the industry. Our clinical programs have set the benchmark that others can only hope to copy. Our company was founded on the principal that by providing cutting edge clinical services and initiatives we are able to improve our client's success in providing healthcare to the offenders under their custody. Innovation for the purpose of improving our client's results is the reason behind our investment in innovative clinical programs. Correct Rx maintains the opinion that improved outcomes means healthier patients, fewer complications and reduced overall costs.

Correct Rx has a corporate clinical department that works in conjunction with our dedicated Managing Director of Clinical Pharmacy Programs. Our clinical team is well versed in disease state management, pharmacy regulation, pharmacoeconomics, practicing in corrections, policy development, formulary and non-formulary management, Medication Therapy Management, drug information, clinical in-services, pharmacy and therapeutics, best practices, and patient education.

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Supplemental: Continued

Clinical Impact on Drug Spend

Correct Rx's clinical team will bolster healthcare services in your facilities by providing a real impact on the quantity, selection and mix of drugs being purchased. Factors such as poor patient compliance, over-ordering, adverse events, and the early discontinuation of medications can increase the quantities of returned medications.

Correct Rx has a competitive advantage in the industry by utilizing our team of residency trained clinical pharmacists to improve healthcare outcomes and to reduce the overall healthcare spend.

Summary

Simply stated Correct Rx's response to the DDOC's RFP is a service plan designed to improve care and manage pharmaceutical costs along with overall healthcare expenditures. Correct Rx knows through experience this can be accomplished through a multifaceted approach. Every pharmacy vendor responding to this RFP will state emphatically that they can meet all of the requirements listed and then some. They will point to their size as proof of their capabilities and make claims that it applies to DDOC.

This contract and the level of care provided are unique to DDOC. Correct Rx believes the real proof is uncovered by examining a company's track record for delivering pharmacy services and innovative initiatives that improve patient outcomes and reduce healthcare spending.

Correct Rx has put forth a proposal that builds on our history, meets the challenges of today and provides leading changes that are all designed to positively impact what DDOC spends on drugs and healthcare costs well into the future. We trust that the selection committee understands the importance that Correct Rx places on our relationship with DDOC and our willingness to work with you in a variety of leading ways to provide the "Best Value" for DDOC.

"Correct Rx's approach is holistic and the solutions that we are offering are innovative and leading edge. Providing Undeniable Value to DDOC, this is the Correct Way".

- *Dr. Ellen H. Yankellow, PharmD
President & CEO*

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B. General Requirements:

Correct Rx is proud to be the current pharmacy services vendor for the Delaware Department of Correction (DDOC), having been awarded the contract that commenced in July 2010. We have worked diligently since that time to demonstrate to the Department and Bureau of Correctional Health Care Services (BCHS) that we deliver on the promises made in our RFP response. Correct Rx is dedicated to providing pharmacy services that are tailored to the unique and specific needs of the offenders served in this unified system. We are ever mindful of the DOC Mission Statement ***“To protect the public by supervising adult offenders through safe and humane services, programs and facilities.”***

At Correct Rx, we firmly believe and now have the scientific data to support that our clinical programs not only improve patient care, but actually reduce the overall healthcare spend. We remain committed to working collaboratively with our co-vendors and the Department to ensure that we continue to offer comprehensive services and real time solutions to the ever changing needs of the over 21,000 offenders that flow through the system each year. Our promise of excellence is detailed throughout our RFP response and we are hopeful to continuing our partnership well into the future.

1. Summary of Service Provision

- a. *The Vendor will be responsible for offering on-site comprehensive pharmacy, formulary and inventory management services. These services will be provided on-site so as to prudently use budgeted security dollars and prevent off-site travel whenever possible, for example, supplying chemotherapeutic, anti-infectives and other medications available in out-patient and infirmary pharmacies. Off-site travel always includes at least one officer and most often two officers or more along with the vehicle, increase the costs and special security procedures which can be avoided if care is provided on-site, e.g. chemotherapy. The Vendor must provide daily (same day) on-site inside the facility delivery of medications 6 days a week. Where there are multiple locations of pharmacy, all areas within the facility must be covered for delivery. Correction facilities have populations of offenders in relatively close proximity which has the potential for transmission of infectious diseases such as influenza and other viral diseases and ectoparasites. The Vendor must be able to respond with timely delivery of adequate quantities of anti-infectives and/or supportive medications as necessary for DDOC to control the spread and treat the situation within 24 hours of request. On-site clinical pharmacist services include direct patient care through pharmacist directed clinic, chart reviews, system level disease state management, infirmary rounding, non-formulary review, prospective drug review, consultation and patient education.*

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Correct Rx will be responsible for offering on-site comprehensive pharmacy, formulary and inventory management services. These services are provided on-site so as to prudently use budgeted security dollars and prevent off-site travel whenever possible, for example, supplying chemotherapeutic, anti-infectives and other medications available in out-patient and infirmary pharmacies. Correct Rx understands that Off-site travel always includes at least one officer and most often two officers or more along with the vehicle, increase the costs and special security procedures which can be avoided if care is provided on-site, e.g. chemotherapy.

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Supplemental Information: Licensed Delaware Clinical Pharmacist

The DDOC provided the following response to question number 20 in Addendum #15, “The State feels that the license is an absolute for the PharmD to be physically present in the facility.” Correct Rx agrees that the law requires the onsite pharmacist to be licensed in the State of Delaware.

The onsite clinical pharmacists employed by Correct Rx were specifically chosen for **the DDOC contract with the specific nuances of the State’s healthcare needs in mind.** We sought pharmacists with special skill sets such as a nursing or geriatric care background to optimize the impact of each clinical pharmacist position. **Correct Rx’s** foresight to employ these highly credentialed pharmacists has been proven advantageous based on the unprecedented value gained by the Department through the implementation of robust clinical pharmacy services. Our dedication and ability to recruit, screen and employ highly trained pharmacists with correctional experience is something for which we take great pride.

Correct Rx began our contract with the Delaware Department of Correction on July 1st, 2010 to provide traditional pharmacy and to initiate an onsite clinical pharmacy program. In preparation of being the awarded vendor of the previous RFP, Correct Rx embarked on obtaining licensure for its clinical pharmacists which is a requirement by the Delaware Board of Pharmacy in order to practice pharmacy in the state. State licensure requirements for pharmacists are a minimum requirement to practice pharmacy in all states.

Per Title 24, Chapter 25 of the Delaware Code concerning Professions and Occupations, the following definitions and rules apply:

“Pharmacist” or “licensee” means an individual licensed by the State pursuant to this chapter to engage in the practice of pharmacy.

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Supplemental Information:

"Practice of pharmacy" means the interpreting, evaluating, and dispensing of a practitioner's or prescriber's order. The practice of pharmacy includes, but is not limited to, the proper compounding, labeling, packaging, and dispensing of a drug to a patient or the patient's agent, and administering a drug to a patient. The practice of pharmacy includes the application of the pharmacist's knowledge of pharmaceuticals, pharmacology, pharmacokinetics, drug and food interactions, drug product selection, and patient counseling. It also includes:

- a. Participation in drug utilization and/or drug regimen reviews;
- b. Participation in therapeutic drug selection, substitution of therapeutically equivalent drug products;
- c. Advising practitioners and other health care professionals, as well as patients, regarding the total scope of drug therapy, so as to deliver the best care possible;
- d. Monitoring drug therapy;
- e. Performing and interpreting capillary blood tests to screen and monitor disease risk factors or facilitate patient education, the results of which must be reported to the patient's health care practitioner; screening results to be reported only if outside normal limits;
- f. Conducting or managing a pharmacy or other business establishment where drugs are compounded or dispensed; and
- g. Administration of injectable medications, biologicals and adult immunizations pursuant to a valid prescription or physician-approved protocol approved by a physician duly licensed in the State under subchapter III of Chapter 17 of this title. Pharmacists shall request which physician or physicians and notify the physician or physicians as designated by the patient of such administration within 24 hours. The notice shall include the patient's name, the name of the immunizations, inoculations or vaccinations administered, and the date of administration and may be submitted by phone, fax, post or electronically. Upon request a copy of the protocol will be made available to the designated physician or physicians without costs.

In order to fulfill the terms of this RFP, based on Delaware law, the onsite clinical pharmacists are required to be appropriately licensed by the Delaware Board of Pharmacy and be subject to their rules and regulations.

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Additionally, the RFP seeks onsite clinical pharmacists who have prior correctional experience. Correctional experience is a general requirement of participation in most RFP procurements. This requirement is neither overly restrictive nor a clear and distinct advantage for Correct Rx. In fact, every correctional pharmacy vendor who submitted an RFP response has the opportunity to meet this minimum requirement.

Correct Rx's clinical pharmacist offering, however, is above and beyond the traditional correctional experience of dispensing pharmacists. Over the past 11 years, Correct Rx has been utilizing on site pharmacists inside correctional facilities focused primarily on clinical activities. These years of clinical correctional experience uniquely allows our onsite staff to integrate with an interdisciplinary team, be accepted as healthcare providers with medication therapy expertise, and work hand-in-hand with custody staff and administration to further the goal of safety and healthcare outcomes. This is the type of correctional experience that separates those who are larger from those who are leaders.

Correct Rx is distinguished from our competition in that our clinical pharmacists are actually healthcare partners, working along other medical professionals to achieve the optimal use of medications. Our endeavor is to ensure the best possible health outcomes and that the most cost-effective treatment is provided to Delaware offenders. We accomplish these goals through our operational efficiencies and clinical solutions including formulary and medication therapy management. We also ensure regulatory compliance, advanced technology and aggressive pricing. Any assertion that the requirement for on-site personnel to provide clinical services adds no advantage or simply elevates costs, clearly demonstrates a lack of understanding of how to implement such a program. Correct Rx has the proof through outcome studies, some of which we have presented in this RFP response. Moreover, the DDOC and BCHS have experienced it firsthand.

Correct Rx has worked collaboratively with the BCHS and our co-vendors (medical, mental health, substance abuse and dental) to provide expanded health care services specific to medication use by offering diabetes, anticoagulation and HIV management, medication utilization studies, and formulary and cost management. There are many ways in which vendors can propose to provide these services and Correct Rx believes there is no substitute for the type of direct patient care only afforded when onsite.

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Active Formulary Management

Development, Enforcement, Management, and Expertise

Correct Rx's management team has over 25 years of direct experience in developing and maintaining formularies, nursing protocols for Over-the-Counter (OTC) programs and starter stock lists that are specifically designed for Correctional Systems. Correct Rx has successfully implemented formulary guidelines that have assisted our clients in containing pharmaceutical costs and has provided these services for the DDOC over the past three and a half years.

Our Medication Therapy Management department is headed by a CCHP (NCCHC certified correctional healthcare professional) certified Doctoral trained **pharmacist who possesses her Master's in Pharmacoeconomics with years of correctional experience**. This department was created to supply information to our clients that help them reduce medication cost while improving the quality of care. This is **achieved by the clinical pharmacist's assistance with formulary management** that is supported by documented research of alternate therapies, drug product selection, and other methods that result in lower cost. This department is vital for helping our clients provide the highest quality of care while being mindful of costs.

Correct Rx offers an array of contemporary formulary management approaches. We first embraced the development of collaborative relationships with all stakeholders when addressing nonformulary utilization. Medical, mental health, dental providers and custody play a vital role when selecting formulary medications and we all understand that the DDOC Medical Director has the final authority.

Successful Formulary Management

Correct Rx has achieved great success in the implementation of clinical cost saving strategies. For example, through effective formulary management, the DDOC was well positioned to experience the full economic impact of a major **single source antipsychotic agent's generic** availability.

A pharmacist driven formulary management program allows for excellent quality of care, provider accountability, improved adherence, and greater cost savings. The following list provides a sampling of our successes and current initiatives:

- Correct Rx saved one client \$1,227,870 in FY09 by strategically placing risperidone (as opposed to Geodon) as the preferred second generation antipsychotic.

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- Correct Rx estimates a savings of \$426,000 by reducing the inappropriate use and overuse of Proton Pump Inhibitors (PPIs).
- During a one-year pilot program of nonformulary review for one region of a statewide correctional system, we saved the state \$449,000 in medication cost.

Formulary and Non-Formulary Medications

Correct Rx provides prescriptions consistent with the DDOC approved formulary. **Correct Rx's pharmacy operating software system allows us to identify whether a drug is formulary or non-formulary at the time the order is processed.** The specific DDOC Formulary is uploaded into our system and is updated any time there is a formulary change. Of interest to the DDOC is that this formulary may be customized per facility or even by specific locations within a facility (e.g., infirmary, population, mental health unit) as an option to provide individualized attention within the DDOC system. Correct Rx is a small enough company that we are able to adjust the specific services offered to the DDOC without encountering the cumbersome process of passing things through the red tape of the home corporate office that is often experienced when dealing with larger companies. The DDOC is familiar with the agility, speed and customized services that Correct Rx provides specifically tailored to address the needs of the DDOC. We provide the DDOC with hands on attention from our CEO Dr. Ellen Yankellow, our Corporate Clinical leaders Dr. Hui Seo and Dr. Valerie Barnes and our Program Manager, John Nattans.

Correct Rx will follow all procedures outlined in this RFP regarding the dispensing of Formulary and Non-Formulary medications, as well as adhering to all policies and procedures related to the approval, denial or alternate medication recommendation regarding the DDOC approved non-formulary request process.

IV Drugs

Correct Rx provides compound intravenous solutions to be administered in DDOC facilities. Correct Rx offer a myriad of options based upon the level of staffing, expertise and patient needs at the respective facilities. From our own IV room we provide IV medications to those offenders needing IV services. In addition to the close monitoring provided by our on-site pharmacist, Correct Rx assigns a particular IV specialist to follow each patient. We only send in a three day supply at a time. We communicate with the infirmary staff on a daily basis to ensure that the patient is still on the IV medication before sending out an additional three day supply. These types of operational efficiencies provide better healthcare outcomes and significant cost savings.

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Correct Rx provides complete IV services from our IV certified pharmacy. **Correct Rx's IV room and policies are in compliance with USP 797. USP 797 is a** federally mandated far-reaching regulation that governs a wide range of pharmacy policies and procedures. It is designed both to cut down on infections transmitted to patients through pharmaceutical products and to better protect staff working in pharmacies in the course of their exposure to pharmaceuticals. Issued by U.S. Pharmacopoeia (USP), the regulation governs any pharmacy that prepares "compounded sterile preparations" (CSPs).

Supplying chemotherapeutic, anti-infectives and other medications

Correct Rx provides oral chemotherapeutic products, oral and parenteral anti-infectives and other supporting medications as needed by DDOC facilities. Our operational pharmacists are experienced at navigating the registration requirements for many oral chemotherapy products which often require communication with medical staff to obtain laboratory data, patient and **prescriber registration and special "drop shipment" delivery requirements.**

Anti-infective medications are available from Correct Rx in both oral and parenteral forms. Not only will our pharmacist provide anti-infectives, our onsite clinical pharmacist can assist in culture and sensitivity interpretation and antibiotic selection. Likewise, other medications of a special nature such as anti-infectives and chemotherapy products will also be available from Correct Rx Pharmacy.

Inventory Accountability

Correct Rx has implemented a robust inventory management system that provides accountability for both patient specific and non patient specific medications through Formulary Management, Stock Accountability, Medication Delivery and Check-In Accountability (Barcode System), monthly medication room audits and weekly destruction of controlled substances. We will work with the BCHS, DDOC, and our co-vendors to assess ongoing needs and the success of the inventory management system and to develop and improve process as needed. Correct Rx is committed to Continuous Quality Improvement and the **commitment to consistently "tweak" and improve systems in the provision of constitutional healthcare in the DDOC.**

Correct Rx appreciates the concerns associated with maintaining interim emergency medications. Accountability is the key to minimizing potential over dispensation to the patient and possible diversion concerns. Correct Rx dispenses **all stock medication with an affixed "Stock Accountability" record.** This record is utilized to record accountability for each dose administered from the dispensed quantity.

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Proper documentation of the stock drug record is essential; it creates accountability. This system of accountability is developed to comply with all NCCHC and ACA guidelines. The completed Stock Accountability record should be returned to the pharmacy for reconciliation. This is in addition to and separate from the required documentation of the Medication Administration Record.

Barcoding System to Efficiently Check in Deliveries and Request Refills Online

Correct Rx has a web based electronic barcoding system that provides each facility with an easy way identify what has been ordered, track problem orders, verify medication shipment and initiate medication refills in a manner that improves both accountability and efficiency.

Scanning the Order into the Shipment Box at Correct Rx

Correct Rx's proprietary Barcoding System is already in place and used in the DDOC facilities throughout Delaware. Correct Rx scans each dispensed medication as it is placed into the respective box for delivery to the DDOC facilities. A delivery report is run using the state-of-the art software program that compares each order scanned versus the medications that were ordered for that facility. If there are any discrepancies, they are immediately remedied to ensure that each facility will receive all medications as ordered with each shipment. Once an order is verified it is sealed for delivery and handed to the medication courier for delivery to the facility.

Medication Check-in at the Facility-Time Savings and Accountability

Once the medication is received and signed for at the facility the order is ready to be checked-in using our user friendly web based electronic bar code system. The healthcare professional onsite simply logs in to our website (www.correctrxpharmacy.com) selects the shipment date and checks the order in using a standard bar code scanner. The check-in is fast and creates an additional layer of security to ensure that all ordered medications were received. In addition to providing heightened accountability and verification of receipt, shipment check-in time is reduced dramatically versus the manual process of checking orders against the paper packing list.

After scanning each medication in the delivery for that date, a report is run to ensure that all orders were received. Orders that were checked in properly will be highlighted with a green box, while any order that was not properly scanned in will be highlighted in a red box.

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If an item that was not properly scanned in is found it may be verified by simply clicking on the red highlighted box and the scanning the item. If there are any items that are missing, which is rare, the facility simply calls Correct Rx to ensure the medication is included with the next delivery.

The shipment records are archived on the website for 60 days providing managers and administrators with an extra layer of accountability. Key Managers and designated personnel from the Department and our co-vendors have access to the barcode system to review, which sites are using the system and which orders have been delivered into the facility. Medical providers and nurses concerned about whether an order has been delivered can log into the system at any time to confirm facility receipt of medication. Correct Rx conducts a monthly CQI survey to measure compliance with using the web based electronic check-in system.

Notification of Problem Orders

As a means to ensure patient safety and continuity of care, Correct Rx has a system to identify problem orders. In addition to the delivery manifest that identifies all medications that were successfully ordered and dispensed, our web based program also provides a daily discrepancy log (a hard copy of this report is also placed daily in the delivery box for each site). The discrepancy log lists all medications that were not successfully ordered and thus not dispensed and delivered.

The purpose of the Discrepancy Log is to list every order the facility requested but that Correct Rx did not dispense on that day and more importantly why the order was not filled. For example, an order may have been filled the day before and a medication nurse accidentally requests that the order be filled again. The order will not be filled and the discrepancy log will note that the order is being requested **too soon**. It will also inform the facility of the date the order can be refilled. If a nonformulary is requested without proper authorization, this will be listed on the discrepancy log. If a refill is requested, but the order is expired, this will be listed on the discrepancy log. While these are only a few examples, the importance of this report is that on a daily basis the facility is informed of medications that require follow-up in order to be dispensed. This provides a resource to the nurses and providers responsible for ensuring that patients receive their medications as prescribed in a timely and safe manner. This resource enhances continuity of care and provides a level of security that patients will not go without their medications.

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Delivery Receipts

Our web-based program also allows the **medical staff to view what is being delivered in their package before it arrives.** There is no mystery if a particular medication is going to come. The nursing staff has access to their delivery manifests via our website that informs the medical staff of anticipated delivery items. We believe that this advancement in the use of technology provides significant time savings to our clients, and results in higher accuracy for our shipments. Correct Rx is dedicated to providing the right medication to the right patient in a timely fashion.

Delivery

Correct Rx provides daily (same day) on-site inside the facility delivery of medications six (6) days a week. Where there are multiple locations of pharmacy, all areas within the facility must be covered for delivery.

Close Proximity

Correct Rx is located in Linthicum, Maryland and is a neighbor to the State of Delaware. All facilities serviced under this contract are only an hour and half to two hour drive from our door to yours.

Level V Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Howard R. Young Correctional Institution (HRYCI)	79.93 miles	1 hour 28 minutes
James T. Vaughn Correctional Center (JTVCC)	94.86 miles	1 hour 43 minutes
Sussex Correctional Institution (SCI)	93.49 miles	1 hour 59 minutes
Delores J. Baylor Women's Correctional Institution (BWCI)	77.05 miles	1 hour 26 minutes
Level IV Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Sussex Violation of Probation Center (SVOP)	93.49 miles	1 hour 59 minutes
Sussex Community Corrections Center (SCCC)	93.49 miles	1 hour 59 minutes
Central Violation of Probation Center (CVOP)	95.12 miles	1 hour 42 minutes

II. Scope of Work

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Level IV Facilities		
Morris Community Correctional Center (MCCC)	83.72 miles	1 hour 48 minutes
Plummer Community Correctional Center (Plummer)	81.31 miles	1 hour 32 minutes
John L. Webb Correctional Facility (WCF)	76.20 miles	1 hour 25 minutes
Hazel D Plant Treatment Center (HDPTC)	76.88 miles	1 hour 26 minutes

Cut-off Time

Correct Rx provides **same day medication delivery** for all medication orders (prescription and over-the-counter) received by 4:00 P.M. every weekday. Additionally, Correct Rx provides “**same day**” Saturday delivery for all orders received by 12:00 P.M. While these are the official cutoff times established in conjunction with the Department, Correct Rx is often able to extend these cutoff times for emergent needs, thus avoiding costly trips to the back-up pharmacy and potential adverse events that could lead to off-site trips and even hospitalizations. Our drivers typically, leave the building around 7:00 PM to 7:30 PM weekdays. Our healthcare co-vendors and the Department know that if they have forgotten to place an order or there is an emergent need for a medication to be included in the delivery, they can call us well past the cutoff time and it will be included in the delivery for that day. (Correct Rx also, at no charge to the Department, provides STAT deliveries at any time for emergency medication needs 24 hours a day, 365 days a year).

CORRECT RX PHARMACY SERVICES OFFERS THE SAME CUT OFF TIMES FOR NEW, REFILL & OTC PRESCRIPTIONS!!

Correct Rx does not have different cut-off times for new medication orders (both prescription and OTC) and refill requests. All authorized medication requests transmitted to Correct Rx by 4:00 p.m. ET Monday through Friday and 12:00 P.M. on Saturday will be delivered later the same day.

This added benefit ensures continuity of care and no lapses in medication therapy. In addition, this **same day** delivery schedule will reduce the volume of returns and the need for excessive Emergency medication. There will be no learning curve for Correct Rx or our Management Team. This front door service is a critical part of the “Correct Way.”

Deliver Inside the Facility to Multiple Locations

Correct Rx delivers the medication inside the facility to the designated medication rooms and infirmaries. This ensures continuity of care by ensuring that the medications will get to the patients in the shortest time possible.

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The onsite healthcare professional does not have to go off the unit to collect the medications from a centralized drop box location or to sign for it at the entrance. This allows more time to be spent on providing healthcare. Also there is better institutional security as the medication is not left unaccounted or at the very least passes through less hands before getting to the patient. The following list identifies the current 19 specific delivery designations and sorts for the DDOC Facilities:

- HRYCI Population
- HRYCI Infirmary
- HRYCI Pretrial
- JTVCC MHU
- JTVCC SHU
- JTVCC Pharmacy
- JTVCC Infirmary
- SCI Pretrial
- SCI Infirmary
- SCI Population
- BWCI Infirmary
- BWCI Population
- SVOP
- SCCC
- CVOP
- MCCC
- Plummer
- WCF
- HDPTC

No Learning Curve

Correct Rx is proud of the delivery service we have been providing for the DDOC over the past three and a half years. Since Correct Rx is the current pharmacy vendor, there will be no learning curve to our medication delivery services. Correct Rx already has credentialed drivers with DDOC identification badges who are familiar with the specific facilities. Our drivers understand the protocol, policies and procedures for the safe delivery of medication and have developed professional rapport with several of the officers who work the facility entrance post.

*Please refer to section II.3.a Daily Delivery Services for a more robust description.

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Emergency Services

Correct Rx's Vendor responds with timely delivery of adequate quantities of anti-infectives and/or supportive medications as necessary for DDOC to control the spread and treat the situation within 24 hours of request.

STAT Delivery

Supplemental Information: The DDOC is not and will not be charged the transportation costs incurred by Correct Rx for STAT deliveries and under this contract Correct Rx will be responsible for the medication cost as well. Given our close proximity to all of the DDOC facilities, Correct Rx has dramatically reduced the need for back-up pharmacy. Also, back-up pharmacies use standard pill bottle packaging and introduce different labeling formats, which pose additional safety and accountability issues. Correct Rx is capable of making STAT deliveries from our pharmacy less than two hours away, which eliminates this problem and provides the DDOC with access to drugs that are often unavailable from the back-up either because they do not have the product (e.g., IV medication) or do not have the quantity needed (e.g., scabies outbreak). With Correct Rx serving as your pharmacy, the DDOC will be assured that the reliance on back-up pharmacy and the inherent risks associated will remain very low.

Given our close proximity and experience providing services for the DDOC, the Department is guaranteed the timely delivery of all medications. This has dramatically decreased the time between when the order is written and when the medication is administered to the patient thus improving patient care. Providing this same day service has dramatically decreased the need for the use of back-up pharmacy services from a cost of over 3,000 dollars a month down to less than 200 dollars.

In the rare instances when emergency “stat” medications are required, Correct Rx serves as the primary “back-up” pharmacy for medications delivered to all DDOC facilities.

Comprehensive Network of Local Backup Pharmacies

In the event that there is a need to use back-up pharmacy services from a community pharmacy, Correct Rx partners with a Pharmacy Benefits Manager providing the DDOC facilities with easy access to a nationwide network of pharmacies (independents and chains).

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The claim is submitted electronically by the backup pharmacy and the bill is forwarded to Correct Rx for payment. The formulary and authorized quantity to be dispensed by the emergency backup pharmacies will be determined by the DDOC Medical Director and the Bureau Chief along with Correct Rx. There are provisions in place for when exceptions are needed regarding the quantity to be dispensed by the backup pharmacy. Correct Rx provides training for all staff on-site on “when” and “how” to use these services. Also, a group number is assigned to each facility, which eliminates the need for a credit card, cash, etc. to be used for payment.

Below are a number of examples of how Correct Rx assisted in the response to potential outbreaks/emergencies on-site:

Scabies Outbreak at HRYCI

On Sunday, September 8th, the DDOC Medical Director informed Correct Rx that there was a confirmed scabies outbreak affecting the 110 patients housed at HRYCI. Given the large number of patients affected and the potential risks associated with Ivermectin use, Permethrin 5% cream was ordered as the best option for urgent treatment. On Sunday afternoon, Correct Rx process orders for 120 tubes of Permethrin, **which exceeded our “on shelf” inventory at the time.** Our operational pharmacy staff was able to access our warehouse stockpile in order to completely fulfill this request. Correct Rx organized STAT delivery to HRYCI, contacted medical shift supervisors so that they could expect the unscheduled delivery, and followed up with the Medical Director. Within 4 hours of the original call, 120 tubes of Permethrin were delivered inside the medication room at HRYCI. As a follow-up to this event, Correct Rx, in collaboration with the BCHS and our co-vendors, provided an onsite education program to allay the anxiety and fear among the offender population, medical staff and custody. The focus of this in-service was the prevention, diagnosis, and treatment of scabies. This program was provided on Wednesday September 11th.

Resistant Head Lice Treatment at BWCI

On August 28th 2013, while at HRYCI, a nurse practitioner consulted with the Correct Rx on-site Clinical Pharmacist regarding an offender who has been treated for head lice several times with NIX without success. The Pharmacist recommended the use of Malathion 0.5% lotion and also coordinated with the pharmacy to ensure that the medication was delivered that same evening since the offender was supposed to be moved into another housing area. A recommendation was made to complete the treatment in the medical area and not allow this as a “**keep on medication**” since **this product has high alcohol content.** The prompt action and collaborative effort may have prevented the spread of lice to other housing areas.

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Onsite Clinical Pharmacists

Correct Rx provides on-site clinical pharmacist services that include direct patient care through pharmacist directed clinic, chart reviews, system level disease state management, infirmary rounding, non-formulary review, prospective drug review, consultation and patient education.

Correct Rx has a breadth and depth of experience in providing clinical pharmacists as **part of the healthcare team that can't be matched by any of our competitors.** We have the infrastructure, intellectual know-how and the experience to provide patient directed pharmaceutical care programs unique to the correctional environment. Correct Rx is excited to continue our partnership with the Department to provide robust clinical pharmacy services. We have proof that these programs improve patient outcomes and reduce unnecessary costs. Our services not only focus on the drug spend, but also on offsite care costs by reducing avoidable hospitalizations through better disease state management.

Correct Rx has gained insightful experience working in DDOC facilities over the past three years. Each DDOC facility is unique with respect to their operations; however, each facility must adhere to the high standards of practice that BCHS seeks to maintain. Correct Rx endeavors to expand our clinical pharmacist consulting services in DDOC to increase our impact on the healthcare on a larger offender population. In collaboration with the Medical Director, BCHS, and co-vendor healthcare staff, Correct Rx will refine and improve our clinical offerings which include direct patient care, disease state management, infirmary rounding, medication reviews and patient education.

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Supplemental Information: Addressing Polypharmacy

Correct Rx works directly with our co-vendors and the DDOC to decrease the occurrence and eliminate the risks associated with polypharmacy. Polypharmacy is a national problem because it places patients at risk for adverse medication events, drug interactions and use of medications without appropriate indications.

There is a direct correlation between the number of medications (including over-the-counter products) prescribed for each patient and the risk of developing an adverse outcome as a result of polypharmacy. Polypharmacy is not simply defined by the number of medications a person is prescribed. While the most commonly accepted definition uses five or more medications (including over-the-counter products) to identify patients who are at risk for polypharmacy there are other factors to consider such as, indication, efficacy, patient characteristics, demographics, and co-morbidity to name a few. Age is another positive risk factor for polypharmacy. Older patients are the largest consumers for prescription and over-the-counter medications and most susceptible to adverse medication outcomes.

The complexity of managing polypharmacy has increased over the past decade due to the increased reliance on medications to manage chronic disease states. National statistics report that the use of prescription medications has increased significantly over the past ten years. In a 2010 CDC report, the percentage of Americans using prescription medications increased significantly from 1999 to 2008.¹ The percentage of people on one or more prescription medications increased from 44% to 48%. People on two or more drugs increased from 25% to 31%. The highest risk group, people on five or more prescription medications increased from 6% to 11%.

Collaboration between prescribers, nurses and pharmacists is required in order to **effectively manage polypharmacy for each patient**. Correct Rx's onsite clinical pharmacists are well suited to act as part of a healthcare team to mitigate the risk of interactions, diversion and negative outcomes that occur from polypharmacy and high-cost specialty medications. Polypharmacy cannot be effectively managed remotely as argued by some. First of all, the prescription order alone or even a drug utilization review does not convey enough information to evaluate the patient as whole. A patient may legitimately need five prescriptions to manage multiple disease states or (s)he may need only one. This analysis is conducted through an **extensive review of the patient's health record, through consultation with the onsite provider and at times through direct patient encounters**. All of these activities achieve better outcomes when conducted onsite.

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Supplemental Information: Addressing Polypharmacy (continued)

Our clinical team is comprised of medication experts who examine utilization and treatment on a patient-by-patient basis to ensure that the benefit of medication therapy outweighs risks. Our clinicians also verify that the duration of treatment is appropriate and that those medications deemed unnecessary are presented to medical colleagues for discontinuation. A plan is developed and reviewed with the entire healthcare team at the facility. Our goal is to provide the best medication management available to patients while decreasing the risks of patient harm and avoiding unnecessary medication costs.

1. Center for Disease Control (CDC). 2010. Prescription Drug Use Continues to Increase: U.S. Prescription Drug Data for 2007-2008. Viewed on May 1, 2014 from <http://www.cdc.gov/nchs/data/databriefs/db42.htm>

Direct Patient Care

Correct Rx has provided direct contact counseling to nearly 1,697 Delaware DOC patients since the beginning of the onsite clinical pharmacy program. Most patient encounters by onsite pharmacists result in recommendations to the medical or mental health provider to optimize medication management. Each encounter, however, also presents an opportunity to counsel patients on their ability to participate in health care management. Proper patient education results in empowering the patient to take responsibility for their own healthcare and reduces medication treatment failure from poor adherence. Secondly, there is an added benefit of reducing the burden of unscheduled clinic visits. **More specifically, pharmacist's counseling and patient education allows for better** healthcare management, thus reducing sick call requests. This allows more time for providers, nursing staff, and custody staff. Also, patients who are noncompliant with their mental health medications often pose a significant safety risks for custody, healthcare staff and other patients; therefore, when a clinical pharmacist provides a mental health patient with medication adherence counseling or education on their disease state, institutional safety is improved.

Chart Reviews

Correct Rx's team of onsite clinical pharmacists play a central role around the appropriate use of medications. This begins with a comprehensive review of all **the medications a patient is taking. Reviewing patient's medical records is the** initial step of our direct patient care protocol. Our clinical pharmacists work hand-in-hand with the medical record staff onsite to obtain access to charts.

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Over the past two (2) years, our processes for obtaining charts and performing comprehensive reviews have been streamlined to improve access and efficiency. As part of our comprehensive review, clinical pharmacist evaluates the following:

1. Patient demographic data
2. Medical and mental health diagnosis
3. Current medication regimen
4. Laboratory data
5. Existing plan of care
6. Medical and cognitive limitations to follow care plan

All patients identified by the onsite clinical pharmacists or referred by other sources will receive an initial medication regimen review. Patients who require additional services receive a direct patient encounter and medication care plan.

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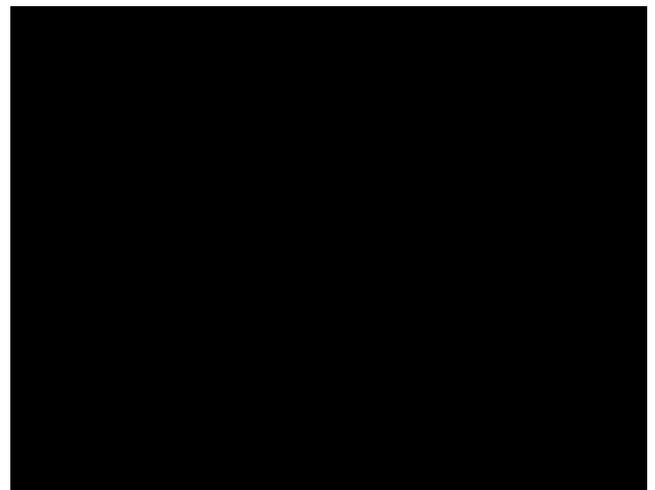
System Level Disease State Management

Statewide Diabetes Initiative

Diabetes care continues to improve through the Pharmacist Directed Statewide Diabetes Initiative. This collaborative initiative was established upon initiation of the DDOC clinical pharmacy program to create a standardized approach in preventative care for the diabetes population – adopting community standards of care. [REDACTED]

[REDACTED] [REDACTED] [REDACTED] [REDACTED] Enrolled patients receive a comprehensive medication regimen review and recommendations for modification to the drug regimen are submitted to prescriber.

Our recommendations have led to a reduction of hemoglobin A1c and the risk of disease progression and complications. **The clinical pharmacist's role has helped** reduce provider time by substituting the clinical pharmacist consultation for some provider interactions by assuming activities for implementing and monitoring medication therapy and providing education and counseling to these patients.

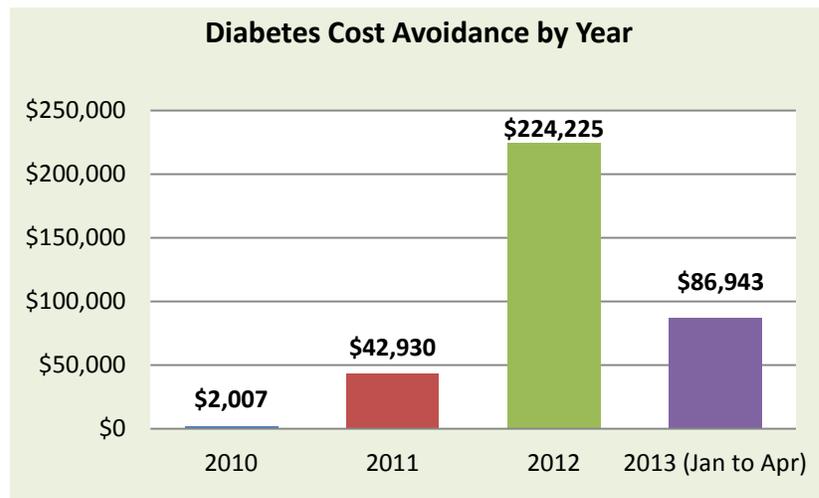


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Diabetes Program Recommendations

- [REDACTED]



Overall, 53% of diabetics with [REDACTED] were able to successfully achieve the [REDACTED]. The cost avoidance value associated with clinical pharmacist intervention for diabetes was \$365,105. Correct Rx looks forward to expanding this program to include all level 5 and level 4 facilities to encompass all patients with uncontrolled diabetes who would benefit from clinical pharmacist intervention.

Anticoagulation

Pharmacist-run anticoagulation (AC) services are common in the community setting. Warfarin therapy is considered to be the second most dangerous medication in the country because of its narrow therapeutic index. When managed inappropriately, patients receiving warfarin result in increased provider time and increased utilization of other healthcare resources. Managing anticoagulation requires patient education, awareness of drug-drug interactions and timely monitoring of patient response.

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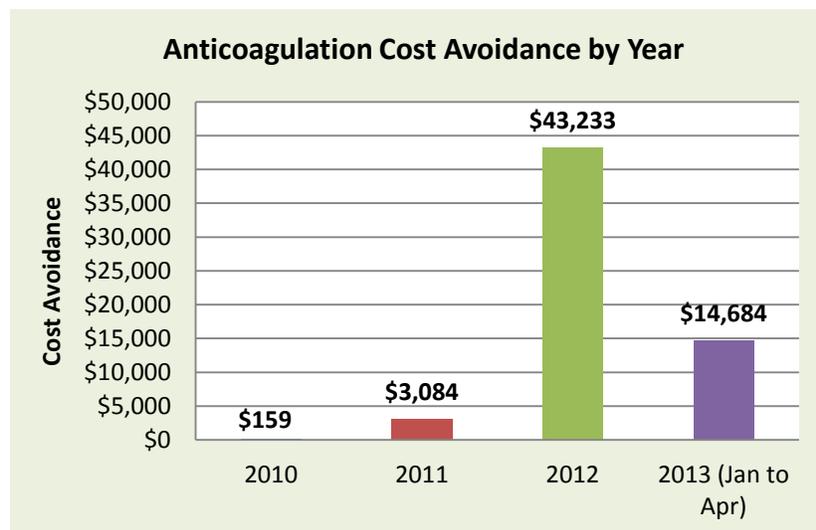
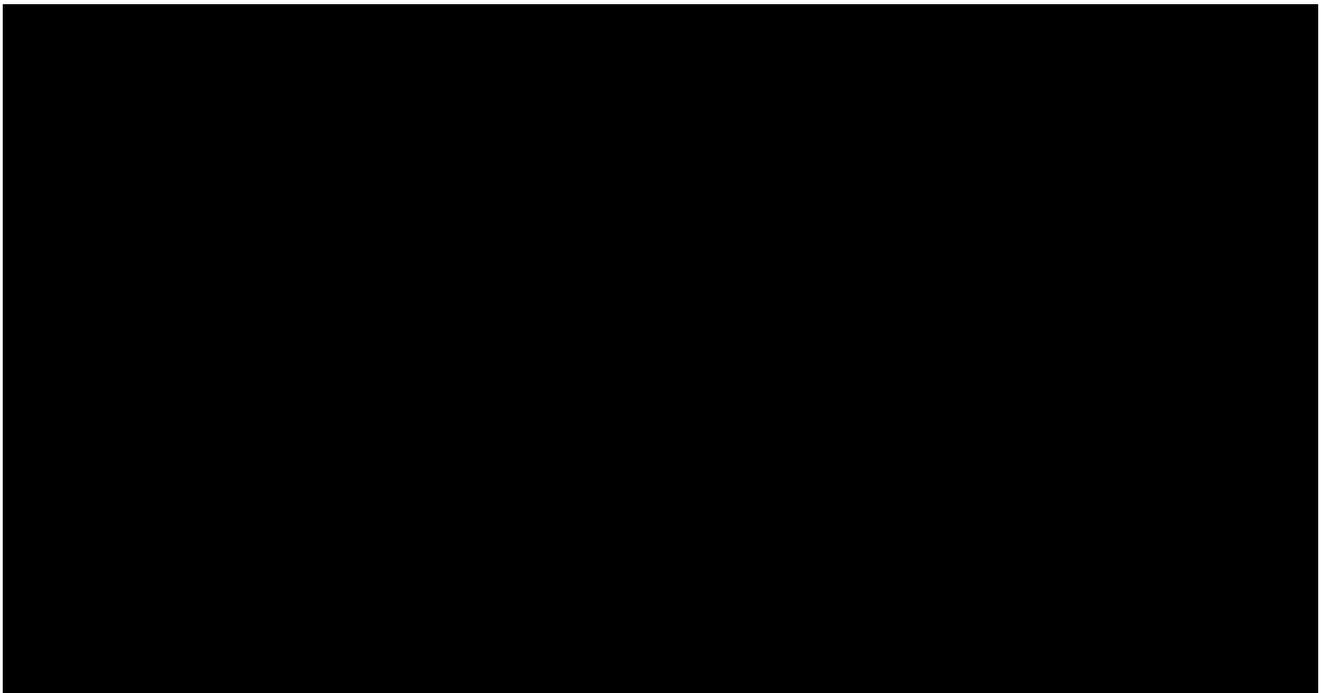
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Recognizing that the patients on AC therapy are not likely to be concentrated in one facility, it is vital to establish a care plan and anticoagulation model that is successfully implemented amongst all DDOC facilities. **Correct Rx's clinical pharmacy team** will serve to standardize the evaluation of these patients and to provide adjustments to AC therapy where needed. Our recommendations are based on ACCPs 2012 Evidence Based Clinical Practice Guidelines.

Anticoagulation Recommendation
Description:

Anticoagulation Interventions by



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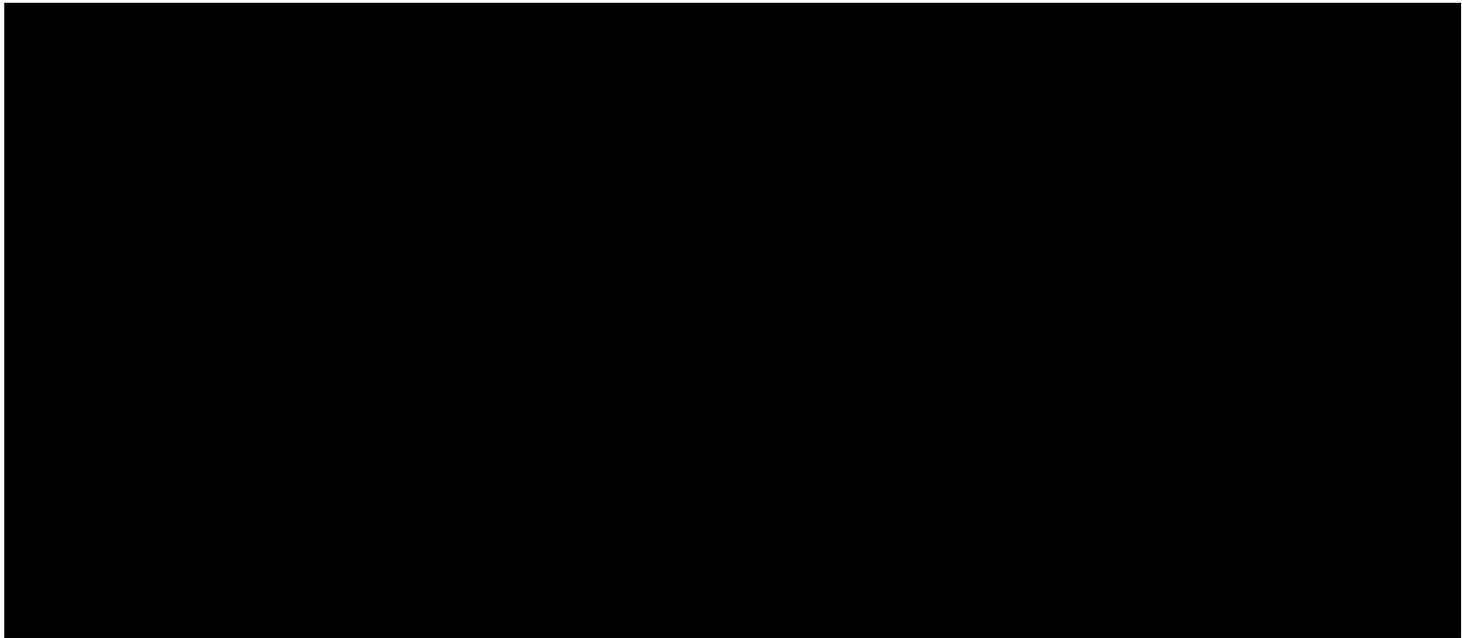
Over the course of this initiative, the proportion of therapeutically treated patients has increased to 86% compared to 60% in the community setting. Additionally, achieving therapeutic INR values in the vast majority of patients allows the Department to benefit from utilization of Warfarin as the preferred anticoagulant compared to higher cost, newer agents. **Correct Rx's anticoagulation management initiative** has greatly benefited the Department and the offenders we serve. The estimated value of clinical pharmacist intervention in anticoagulation management is \$61,160.

Chronic Cardiovascular Disease

The most common reason for emergency room visits, after trauma and physical injury, are cardiovascular emergencies. In an effort to reduce the impact on patients, medical and custody personnel, Correct Rx initiated a chronic cardiovascular disease management initiative. Hypertension and hyperlipidemia are disease states that are amenable to patient education and lifestyle changes. As a result, our clinical pharmacists have intervened with this patient population through counseling and patient education in chronic care clinics.

Patients who have uncontrolled hypertension, defined as an average blood pressure reading greater than 140/90, or hyperlipidemia are enrolled in the pharmacist-directed cardiovascular disease initiative. Modifiable risk factors such as patient weight, diet and exercise are significant influencers in the disease course for cardiovascular disease. Our focus for this initiative has been to create a balance between pharmacotherapy and therapeutic lifestyle changes.

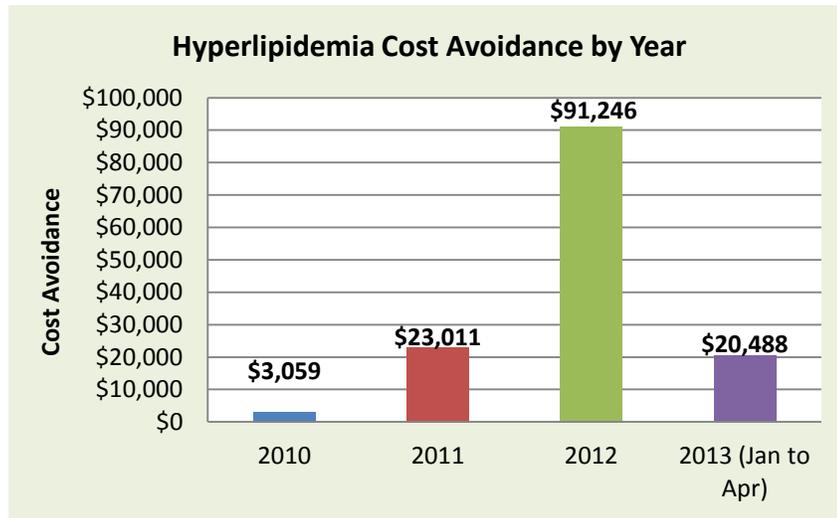
Hyperlipidemia Interventions



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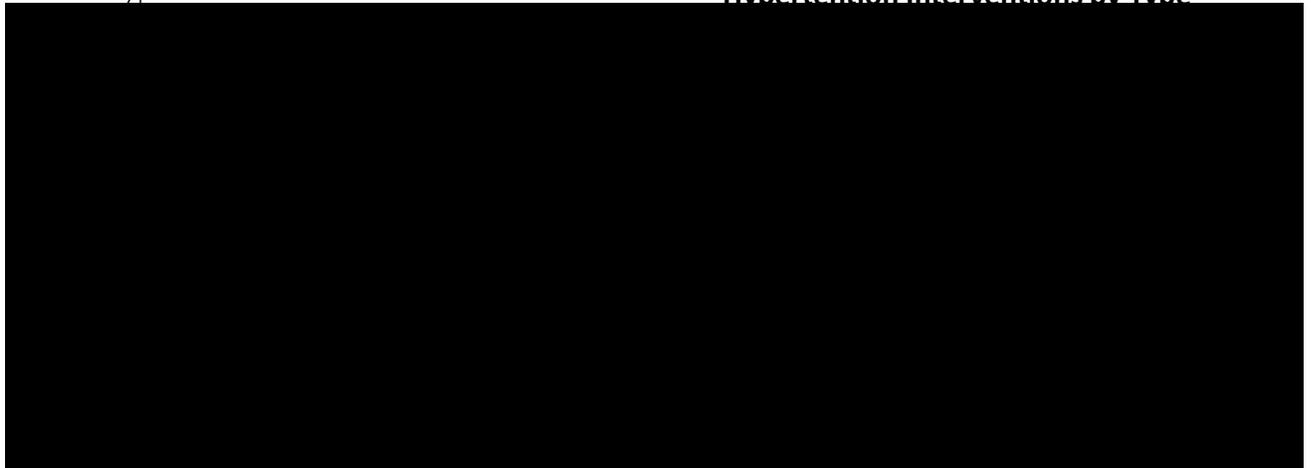
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Our hyperlipidemia program has produced significant reductions in LDL-C, and triglyceride levels and has increased HDL-C. This disease state, in particular, is highly subject to the lifestyle choices of the offender. Correct Rx has predominately focused our efforts to improve patient education and empower patients to control their modifiable risk factors. Roughly, 35% of patients enrolled in the cardiovascular initiative with a diagnosis of hyperlipidemia successfully achieved their targeted LDL-C goal. The value of the clinical pharmacist intervention for patients with hyperlipidemia totals \$137,804.

Hypertension Interventions

Hypertention Interventions by Type

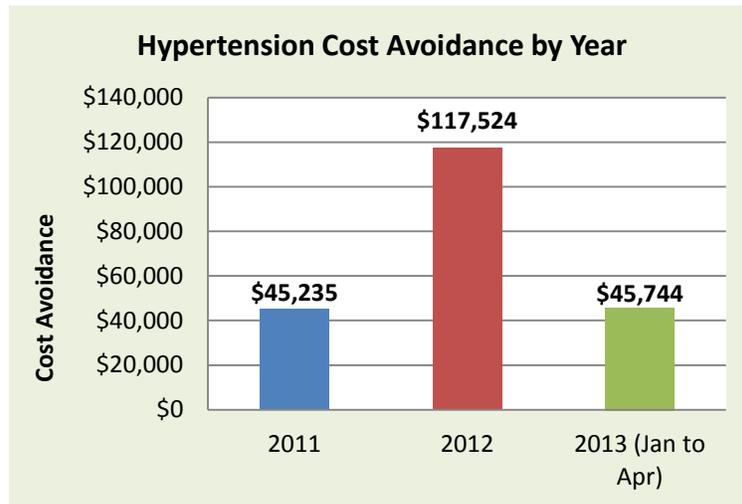


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■	[REDACTED]



Properly managing hypertension can be a significant challenge. It often requires polypharmacy, using multiple medication classes to obtain an optimal effect. Comprehensive chart reviews and patient education is vital in this population. Our hypertension initiative has been very successful and 67% of enrolled patients have achieved their targeted hypertension goal of blood pressure less than 140/90. The clinical value of the interventions made for patients enrolled in this clinical pharmacist initiative is \$208,503.

Obesity and Disease State Management Class

Group education classes are provided for patients with chronic cardiovascular disease who would benefit from therapeutic lifestyle changes. Class eligibility includes patients with BMI >30, patients with BMI <30 plus poor eating habits, diagnosis of chronic **kidney disease or history of myocardial infarction**. Correct Rx's obesity and disease state management class is highly dependent on patient participation and strictly requires patients to adhere to the patient responsibility rules.

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Patient Responsibility for Class Participation:

- [REDACTED]
- [REDACTED]
- [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Correct Rx expects class participants to have an increased knowledge about their disease state, an improved ability to make appropriate food selections from commissary, and to lose weight and maintain a healthier BMI. Reversing obesity requires ACTION! Correct Rx believes that our pharmacist-led group education efforts are a step in right direction to healthier living amongst the chronically ill offender population.

Infirmary Rounding

[REDACTED]

[REDACTED]

Non-formulary Review

[REDACTED]

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[Redacted]

[Redacted]

[Redacted]

Prospective Drug Review

[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

[Redacted]

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Consults

[Redacted]

Patient Education

[Redacted]

Group Diabetes Class

[Redacted]

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[REDACTED]

Correct Rx believes that pharmacists participating in DUR programs can directly improve the quality of care for patients, individually and as populations, by striving to prevent the use of unnecessary or inappropriate drug therapy, prevent adverse drug reactions and improve overall drug effectiveness.

Correct Rx's DUR process involves a comparison of DDOC medication utilization against predetermined criteria in an effort to improve healthcare quality. Our periodic DURs will entail a comprehensive review of patients' prescription and medication utilization data to evaluate appropriate medication decision-making and positive patient outcomes. As a quality assurance measure, we feel that DUR programs provide corrective action, prescriber feedback and improved care for the entire system.

- c. The Vendor will be responsible for maintaining an appropriate Stock Medication Formulary and Inventory Control of Controlled Substances, prescription items and Over-the-Counter (O-T-C) items to facilitate cost-effective on-site care.*

Non Patient Specific Orders

Correct Rx understands that timely medication administration improves treatment outcomes, decreases costs and decreases the need for offsite transportation. Non-patient specific medications are processed and dispensed according to approved policies and procedures. Drug selection and maximum quantities are developed in collaboration with the DDOC Medical Director, and our co-healthcare vendors providing medical, mental health, substance abuse and dental services as a function of the Statewide P&T committee. The official DDOC stock lists for OTC and prescription medications are reviewed by the Statewide Pharmacy and Therapeutics Committee. These medications are to be used on an emergency interim basis, while awaiting a patient specific medication to arrive onsite and to ensure that there are no lapses in treatment.

Due to Correct Rx's efficient and reliable medication delivery, the DDOC has been able to decrease its reliance on stock medication, which increases patient safety and decreases issues related to cost, diversion, waste, regulatory noncompliance. Not all medication rooms need to have every item on the stock list at the maximum quantity. Correct Rx works closely with our co-vendors and the Department to ensure these stock lists are relevant and well managed.

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The list of medications and quantities are tailored for DDOC based on an assessment of the prescribing habits as well as established and acceptable treatment guidelines.

Correct Rx realizes that starter medications are necessary to ensure continuity of care until patient specific medications are obtained. Overstock of medication, however, can unnecessarily increase the financial burden on the Department; medications potentially may go unused and expire, thereby creating waste and regulatory concerns.

Many times, the fear of not receiving patient specific medications in an appropriate time frame leads to an excess of non-patient specific stock medications. Correct Rx knows what it takes to deliver medications in a timely **manner the “Correct Way”**. **Correct Rx’s ability to deliver medications the same day** eliminates the potential for excess stock medications. An overstocked medication room leads to poor documentation, possible diversion, potential nurse dispensing

All stock medication to include both prescription medication and over-the-counter medications are to be used on a short term, interim basis. For those medication orders that must be initiated immediately per the prescriber, the interim medication supply is to be used for the administration of the initial doses while awaiting the patient specific medication to arrive on-site.

Given our same day medication delivery service, Correct Rx has been able to reduce the reliance on stock medication. There are some cases (e.g., over the counter nursing protocols or short term therapy) in which the prescriber will indicate that the medication should be administered from stock. Correct Rx works closely with the Department to monitor stock utilization and to make appropriate changes to the approved DDOC stock list for both OTC and prescription medications. Our clinical team is well versed at reviewing the utilization data to ensure the facilities are well managed have the appropriate products available for immediate release. Given our close proximity and ability to get medication to the facilities expediently, the DDOC does not have to maintain high cost rarely used items that could be needed in emergency situations (e.g., rabies vaccine, varicella vaccine and immune globulins) – after all Correct Rx is less than two hours from each facility.

Controlled Substances

In 2008, Correct Rx submitted a proposed procedure for the removal and destruction of unwanted end-user controlled substances that is consistent with FDA recommendations and compliant with DEA regulations, 21 CFR 1307.2.

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These procedures were approved by the Delaware Board of Pharmacy and subsequently adopted for use today. These procedures were developed to decrease risk for diversion and reduce the environmental impact on surface water contamination.

Currently, Correct Rx clinical pharmacists dispose of all unwanted end-user controlled substances at a minimum of every two weeks at all DDOC facilities. The destructions are performed onsite in the presence of one other licensed healthcare professional. The final waste is discarded as regular waste by facility staff which reduces the unnecessary financial burden of costly biohazardous waste management. This procedure was adapted from FDA guidelines for disposal of prescription medications.

[REDACTED]

In many instances, the destruction process is triggered more often because of the **close coordination between pharmacists and healthcare services provider's nursing** staff. At BWCI where majority of pregnant females receive methadone to prevent or treat opioid withdrawal, there has been the need to frequently destroy controlled substances on a weekly basis and as needed due to the frequent changes in medication dosages.

Correct Rx has also provides destruction of personal property medications; this includes both controlled substances and non-controlled substances. These personal property medications are accompanied by a personal property form from the Medical Vendor with a description of the medication (name of medication is provided when possible) and the quantity. Each identified controlled substance is counted by the pharmacist and witnessed by licensed personnel from the Medical Vendor. Quantities are verified with the documentation on the personal property form and documented on the Correct Rx Controlled Substance Disposal Log.

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The unwanted medications are destroyed using the same policy as stated previously. After each personal property medication is destroyed, the pharmacist documents the destruction on each personal property form and provides all the personal property forms with destruction documentation to the Medical Vendor in addition to a copy of the Correct Rx Pharmacy Controlled Substance Disposal Log.

Currently, destruction is scheduled every two (2) weeks and may be completed **ahead of that schedule or “on demand,” if the facility has a specific identified** need. This timely destruction and removal of all unused controlled substances from storage areas in this manner, has greatly improved accountability and handling of controlled substance to reduce the risk of diversion and abuse at all DDOC facilities.

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B. General Requirements

2. Categorized Pricing Information Required

a. Vendors are required to provide individualized pricing information specific to each of the following areas:

- Prescription Medications*
- Over-the-Counter (O-T-C) Stock items*
- Daily Delivery Services*
- PharmD Consultative Services*
- Pharmacy Inventory Management Services*

b. Proposals must contain both an aggregated price quote for all services and specific price information for each of the service categories. Failure to provide both types of pricing will cause the proposal to be deemed non-responsive. Transparency on purchasing must be provided as well as from whom the pharmacy vendor is purchasing medications.

Correct Rx has provided individualized pricing information specific to each of the required areas: prescription medication, over-the-counter stock items, daily delivery services, PharmD consultative services, pharmacy inventory management services. **Additionally, Correct Rx's proposal contains both an aggregated price quote for all services and specific price information for each of the service categories.** Correct Rx understands and acknowledges that failure to provide both types of pricing will cause the proposal to be deemed non-responsive. **Correct Rx's purchasing is transparent** and we have provided our pharmacy vendor purchasing information. Correct Rx respectfully requests that the selection committee refer to Section III of our response for our detailed response as it relates to the required pricing information.

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B. General Requirements

3. Summary of Service Provision Time Requirements

a. Daily Delivery Services

All requests for prescription and Over-the-Counter (O-T-C) Stock items will be delivered the same day, as needed, upon request by a specified time, e.g. 4PM to;

Howard R. Young Correctional Institution (HRYCI)

James T. Vaughn Correctional Center (JTVCC)

Sussex Correctional Institution (SCI)

Baylor Women's Correctional Institution (BWCI)

Sussex Violation of Probation Center (SVOP)

Sussex Community Corrections Center (SCCC)

Central Violation of Probation Center (CVOP)

Morris Community Correctional Center (MCCC)

Plummer Community Correctional Center (Plummer)

John L. Webb Correctional Facility (WCF)

Hazel D. Plant Treatment Center (HDPTC)

No Learning Curve

Correct Rx is proud of the delivery service we have been providing for the DDOC since our current contract commenced in July 2010. With Correct Rx as the pharmacy vendor, there will be no learning curve to our medication delivery services. We have years of experience delivering medications inside correctional facilities including all of the facilities serviced in this contract. Correct Rx already has credentialed drivers with DDOC identification badges who are familiar with the specific facilities. Our drivers understand the protocol, policies and procedures for the safe delivery of medication and have developed professional rapport with several of the officers who work the facility entrance post.

Daily Delivery Service

All requests for prescription and Over-the-Counter (O-T-C) Stock items are delivered the same day, as needed, upon request by the established cutoff time as approved by the by the DDOC Bureau Chief.

Close Proximity

Correct Rx is located in Linthicum, Maryland and is a neighbor to the State of Delaware. All facilities serviced under this contract are only an hour and half to two hour drive from our door to yours.

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Level V Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Howard R. Young Correctional Institution (HRYCI)	79.93 miles	1 hour 28 minutes
James T. Vaughn Correctional Center (JTVCC)	94.86 miles	1 hour 43 minutes
Sussex Correctional Institution (SCI)	93.49 miles	1 hour 59 minutes
Delores J. Baylor Women's Correctional Institution (BWCI)	77.05 miles	1 hour 26 minutes

Level IV Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Sussex Violation of Probation Center (SVOP)	93.49 miles	1 hour 59 minutes
Sussex Community Corrections Center (SCCC)	93.49 miles	1 hour 59 minutes
Central Violation of Probation Center (CVOP)	95.12 miles	1 hour 42 minutes
Morris Community Correctional Center (MCCC)	83.72 miles	1 hour 48 minutes
Plummer Community Correctional Center (Plummer)	81.31 miles	1 hour 32 minutes
John L. Webb Correctional Facility (WCF)	76.20 miles	1 hour 25 minutes
Hazel D Plant Treatment Center (HDPTC)	76.88 miles	1 hour 26 minutes

Cut-off Time

Correct Rx provides **same day medication delivery** for all medication orders (prescription and over-the-counter) received by 4:00 P.M. every weekday. Additionally, Correct Rx provides **“same day”** Saturday delivery for all orders received by 12:00 P.M. While these are the official cutoff times established in conjunction with the Department, Correct Rx is often **able to extend these cutoff times for emergent needs**, thus avoiding costly trips to the back-up pharmacy and potential adverse events that could lead to off-site trips and even hospitalizations. Our drivers typically, leave the building around 7:00 PM to 7:30 PM weekdays.

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Our healthcare co-vendors and the Department know that if they have forgotten to place an order or if there is an emergent need for a medication to be included in the delivery, they can call us well past the cutoff time and it will be included in the delivery for that day. (Correct Rx also, at no charge to the Department, provides STAT deliveries at any time for emergency medication needs 24 hours a day, 365 days a year).

CORRECT RX PHARMACY SERVICES OFFERS THE SAME CUT OFF TIMES FOR NEW, REFILL & OTC PRESCRIPTIONS!!

Correct Rx does not have different cut-off times for new medication orders (both prescription and OTC) and refill requests. All authorized medication requests transmitted to Correct Rx Pharmacy Services by 4:00 p.m. ET Monday through Friday and 12:00 P.M. on Saturday will be delivered later the same day.

This added benefit ensures continuity of care and no lapses in medication therapy. In addition, this **same day** delivery schedule will reduce the volume of returns and the need for excessive Emergency medication. There will be no learning curve for Correct Rx or our Management Team. This front door service **is a critical part of the “Correct Way.”**

Delivery Inside the Facility to Multiple Locations

Correct Rx delivers the medication inside the facility to the designated medication rooms and infirmaries. This ensures continuity of care by ensuring that the medications will get to the patients in the shortest time possible. The onsite healthcare professional does not have to go off the unit to collect the medications from a centralized drop box location or to sign for it at the door, thus allowing more time to be spent on providing healthcare. Also there is better institutional security as the medication is not left unaccounted or at the very least passes through less hands before getting to the patient.

The following list identifies the current 19 specific delivery designations and sorts for the DDOC Facilities:

- HRYCI Population
- HRYCI Infirmary
- HRYCI Pretrial
- JTVCC MHU
- JTVCC SHU
- JTVCC Pharmacy
- JTVCC Infirmary
- SCI Pretrial
- SCI Infirmary
- SCI Population

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- BWCI Infirmery
- BWCI Population
- SVOP
- SCCC
- CVOP
- MCCC
- Plummer
- WCF
- HDPTC

Institutional Security - Medication Couriers

Our medication couriers all receive a thorough employee orientation that includes a security orientation with DDOC staff and refresher trainings as mandated. Our orientation addresses DDOC security, DDOC code of ethics, code of conduct, drug free workplace, and blood borne pathogen policies in addition to the Correct Rx policies and procedures orientation.

Correct Rx provides the DDOC with written documentation of orientation completion within 30 days of completion as required and also maintains and submits the appropriate documentation as required by the BCHS and site Warden.

Correct Rx works closely with the DDOC to ensure that our assigned medication couriers receive DDOC clearance and identification cards, so that they may deliver the medication inside the facility directly to the medication rooms / infirmaries or designated areas. This high level of service ensures continuity of care by systematically decreasing the time it takes for the patient to receive patient specific medication once it has been ordered. With Correct Rx delivering medications not only inside the facilities, but on the same day the medication is ordered, patient care is enhanced and regulatory compliance is strengthened (e.g., DOJ, NCCHC, ACA), which also reduces the legal liability for the institutions.

Correct Rx understands that disrupting a medication regimen may not only have an adverse impact on patient health, but may also threaten the safety of the environment. For example, some mental health patients may exhibit psychotic and violent behaviors if their medication is disrupted. This adds a threat to the security of the institution, the patient, other offenders, custody personnel, and the healthcare staff. Strengthening the security and safety of the institution through the provision of timely medication is one of the primary considerations that informs the Correct Rx medication delivery service.

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All medication orders will be delivered in sealed containers properly identified with the facility name. The couriers will not deliver any packages that are not properly sealed or identified. Correct Rx medication delivery team is experienced with the special nuances of making deliveries to correctional facilities, they will receive DDOC orientation and ID badges. Therefore, after complying with the routine initial inspection at the point of entry performed by custody and in accordance with DDOC policy, the package containing the medication will be delivered directly to the Medical Unit if requested (or other identified area in the facility) where the driver will have the appropriate person sign a delivery receipt. One copy of this receipt will be provided to the signer and two are returned to the Pharmacy. Controlled medications will be delivered in a hermetically sealed package. Controlled medications are also listed on a separate delivery sheet that is signed and verified by the appropriate medical personnel before the driver leaves the facility.

This entire procedure only takes a few minutes, but ensures that all medications are packaged securely and that there are no unnecessary delays in each facility receiving their medication deliveries and that the appropriate documentation is in place to minimize any opportunities for diversion and or mistakes.

In the end, the DDOC will receive medication personally delivered inside the facilities to the medication rooms and infirmaries if requested, six days a week by our DDOC credentialed couriers in an efficient and cost effective manner. Correct Rx believes this is exactly the type of service the DDOC deserves.

Delivery of Medications in Emergency, Severe and Inclement Weather Conditions

The DDOC knows firsthand that Correct Rx provides reliable medication delivery even in times of emergency, severe, or inclement weather. Given our strategic location and the close proximity of our pharmacy to all facilities serviced under this contract, the DDOC can be assured that their facilities will never go without receiving their medication orders.

Unlike those providers who are relying upon national courier services like FedEx and UPS, Correct Rx has an experienced team of medication couriers and several all wheel drive vehicles that will reassure the DDOC that medications will be delivered without delay. Correct Rx is not dependent upon regional airports or back-up pharmacies that may close due to inclement weather, thus preventing medication from being delivered. After all, the DDOC facilities do not close for **weather nor are the patients' needs postponed because of snow**. Correct Rx understands the importance of continuity of care and the potential deleterious impact of interrupting or delaying medication therapy.

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Furthermore, the safety of the facility/institution is always the top priority. In times of inclement weather there is already a heightened security risk due to changing staffing patterns. The security of the institution may be threatened further should the patients become disgruntled due to a lack of medication availability. Correct Rx will add to the stability of the institution by ensuring that weather does not cause unnecessary delays in treatment.

Delaware and the Mid-Atlantic Region is susceptible to severe snowstorms. Our use of couriers and the short distance to each facility from our pharmacy will ensure that there is a continuity of care, no lapse in medication therapy, and significant decrease in the reliance upon emergency back-up pharmacies despite how bad the weather gets.

Through effective emergency preparedness and planning, Correct Rx avoids shut-downs by housing many of our operational staff at a nearby local hotel. This ensures that our pharmacy will be open for business and that we can fill the orders as promised. The medication couriers use transport vehicles properly equipped to handle severe weather and the medications are safely delivered with only minor delays. Correct Rx looks forward to continuing to this same excellent level of service for the DDOC.

STAT Delivery

Given our close proximity and experience providing services for the DDOC, the Department is guaranteed the timely delivery of all medications. This has dramatically decreased the time between when the order is written and when the medication is administered to the patient thus improving patient care. Providing this same day service has dramatically decreased the need for the use of back-up pharmacy services from a cost of over 3,000 dollars a month down to less than 200 dollars.

In the rare instances when emergency “stat” medications are required, Correct Rx serves as the primary “back-up” pharmacy for medications delivered to all DDOC facilities.

Comprehensive Network of Local Backup Pharmacies

In the event that there is a need to use back-up pharmacy services from a community pharmacy, Correct Rx partners with a Pharmacy Benefits Manager providing the DDOC facilities with easy access to a nationwide network of pharmacies (independents and chains). The claim is submitted electronically by the backup pharmacy and the bill is forwarded to Correct Rx for payment. The formulary and authorized quantity to be dispensed by the emergency backup pharmacies will be determined by the DDOC Medical Director and the Bureau Chief along with Correct Rx.

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There are provisions in place for when exceptions are needed regarding the quantity to be dispensed by the backup pharmacy. Correct Rx provides training for all staff on-site on **“when” and “how” to use these services**. Also, a group number is assigned to each facility, which eliminates the need for a credit card, cash, etc. to be used for payment.

Correct Rx understands that negative outcomes may occur when medication needed emergently are delayed. We will go above and beyond to ensure patients receive the best care possible, including providing difficult to obtain medications in a timely manner. One example of our dedication to ensuring medication availability for high risk conditions is below.

Example: On 11/28/12, an offender at BWCI in her second trimester of a high risk pregnancy who was experiencing premature contractions with threatened labor was prescribed Celestone (Betamethasone) for fetal lung maturity and Crinone (17 alpha progesterone suppositories) to prevent premature contractions. These medications are specialty care products that Correct Rx does not routinely stock. Both products are vital to ensuring the **offender’s unborn** child will have less risk of post-partum complications. Not delivering these medications as expected was not an option for Correct Rx. We mobilized our on-site clinical pharmacist, Dr. Crosby Amoah, to contact all neighboring hospitals and clinics where these products would likely be available. We successfully acquired these **products through an “honor” agreement where** Christiana Hospital allowed Correct Rx to borrow both medications with a promise to return them the following day. Ultimately, we were able to provide Celestone and Crinone to the patient at BWCI in a timely manner to prevent any adverse events and hospitalization.

Supplemental Information: The DDOC is not and will not be charged the transportation costs incurred by Correct Rx for STAT deliveries and under the terms of this RFP and resultant contract Correct Rx will be responsible for the medication cost as well. Given our close proximity to all of the DDOC facilities, Correct Rx has dramatically reduced the need for back-up pharmacy. Also, back-up pharmacies use standard pill bottle packaging and introduce different labeling formats, which pose additional safety and accountability issues. Correct Rx is capable of making STAT deliveries from our pharmacy less than two (2) hours away, which eliminates this problem and provides the DDOC with access to drugs that are often unavailable from the back-up either because they do not have the product (e.g., IV medication) or do not have the quantity needed (e.g., scabies outbreak). With Correct Rx serving as your pharmacy, the DDOC will be assured that the reliance on back-up pharmacy and the inherent risks associated will remain very low.

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b. Destruction Services

All expired Controlled Substances or ones prescribed for a released or deceased offender will be destroyed with the necessary documentation within a two week time period.

Correct Rx's **onsite clinical** pharmacists will dispose of all unused or expired controlled substances within two weeks at all DDOC facilities in the manner compliant with all Federal, State and Department standards. Not only will our clinical pharmacists assist in controlled substance destruction within the pharmacy and infirmary departments, we will also destroy controlled substances that remain in receiving units that were held as offender personal property. This timely removal of unused controlled substances will help decrease the risk of narcotic diversion and abuse.

The destruction of unused or expired Schedule II, III, IV, and V controlled substances stored at all DDOC facilities will occur with our clinical pharmacy and one other licensed healthcare professional, preferably a nurse supervisor, at least every two weeks using the following method(s):

Medication identified for destruction will be appropriately removed from the perpetual inventory count in the Red Book. The documentation will include: date of removal for destruction, quantity of medication removed, method used for destruction, signature of destroyer with a verifying witness. Additionally, medications removed from the perpetual inventory for destruction will be documented as such in the Red Book index.

The unwanted controlled substances will be removed from the packaging, e.g., blister card or medication vial. The medications will be rendered unusable by crushing using a pill crusher or similar device. The resulting powder will be wetted with water to form a slurry. The slurry will be mixed with an undesirable and absorbent substance like kitty litter, saw dust or coffee grounds. The mixture will then be disposed of in designated waste receptacle for ultimate incineration.

In addition to the documentation in the Red Book, Correct Rx will document all controlled substance destruction on a master destruction log that will include the dispensing pharmacy, prescription number, name of medication, strength, dosage form, quantity, date of dispensing, and date of destruction. The licensed witnesses will sign and date the master log and the original will be maintained onsite and a copy forwarded to Correct Rx to be kept on file for a minimum of five years.

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As Needed Destruction

The frequency of destruction is often performed more frequently to meet individual site needs. At BWCI a significant number of their pregnant females receive methadone to prevent or treat opioid withdrawal. Many times there are frequent dosage adjustments to titrate up or down the Methadone dose. As a result, Correct Rx performs weekly destruction to avoid a buildup of unused medications, increased nursing burden and risk of diversion.

c. Monthly DURs by PharmD pharmacists using criteria agreed upon by the DDOC Medical Director and Bureau Chief.

Correct Rx Pharmacy Services will provide monthly analyses of medication utilization data to DDOC and other co-vendors as agreed upon by the DDOC Medical Director and Bureau Chief. Monthly information regarding medication utilization will be available in two formats: comprehensive statewide and facility spreadsheets and electronically via the Dashboard (see Section C.9 for a detailed description on the Dashboard).

Correct Rx's reports contain useful indicators of formulary, non-formulary, HIV medications, Hepatitis C medication, and psychotropic medication utilization indicators. Historical data is provided as well which can be used to compare current and prior performance. Ultimately, trend analysis and projections can be identified to measure performance indicators.

Correct Rx is also able to provide a variety of other reports to the facilitate to measures of performance on medication or health related needs including an active medication report, discharge medication report, and a report on patients who may present a significant heat risk during the summer months.

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d. Weekly and as requested on-site Clinical Consultation by PharmD pharmacists to the Medical and Mental Health prescribers to ensure safe, effective and cost-effective prescribing patterns.

Correct Rx will provide clinical consultation on Monday through Friday on a daily basis, both routinely and as requested. We boast of a dedicated clinical pharmacy team not only with experience in correctional care but with diverse clinical skills unparalleled by our competitors. Our Clinical Pharmacists are well versed in chronic disease state management, acute care, medication therapy management (MTM), drug information, and direct patient care. Our team of pharmacists works with the medical and mental health vendors to improve and optimize medication related outcomes with the goal of reducing direct medication cost and emergency room visits/hospitalizations.

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These goals are achieved through improved patient compliance, prevention of medication related adverse events, minimizing waste and unnecessary medication therapy, preventing therapeutic failure, preventing or delaying complications and disease progression while ensuring continuity of care. Correct Rx on-site clinical pharmacists provide regular therapeutic interventions. A few interventions of note are described below:

Example #1.

[Redacted text block]

Example #2.

[Redacted text block]

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Supplemental: Example #3

[REDACTED]

[REDACTED]

[REDACTED]

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We believe that our onsite clinical pharmacists are an essential component of the interdisciplinary healthcare team. Our pharmacists will be available for patient consultations on referral from medical, mental health, or the Department at all times. Correct Rx's experience working in DDOC over the past three (3) years informs us that there's undeniable value in the clinical pharmacy services provided by our pharmacists. A brief description of a few other key consultations by our clinical pharmacist that resulted in positive outcomes are outlined below.

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Supplemental Information: 24/7 Access to Correct Rx Pharmacy Services

The DDOC and our co-vendors have access to Correct Rx 24 hours, seven days a week by calling the toll-free phone line at 1-800-636-0501, by faxing to 1-800-636-9752 or by e-mail for consultation and inquiries. This offers assurances to the Department that inmate health service needs are met with prompt attention. Additionally, Correct Rx employs and makes available clinical pharmacists 24 hours a day to address any clinical question. All of the clinical pharmacist are highly trained and have completed their Doctor of Pharmacy Degree. Most of the clinical pharmacists have completed an optional post-graduate residency program and some have obtained their NCCHC Certification in Correctional Healthcare (CCHP). In less urgent circumstances, providers have access to Correct Rx's "Ask a Pharmacist" website to post drug information questions on-line. A clinical pharmacist will generate and deliver a response in the requested format via, phone consultation, fax, teleconference or email within 24 hours. Requests for information may also be submitted by fax using the toll-free 1-800-636-9752 fax communication line.

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NOTE: All DDOC policies referenced in this RFP will be provided on disk in Word® format at the pre-bid conference adjacent to the facility visits. Health care policies are also available at <http://www.doc.delaware.gov/information/policyManual6.shtml>. RFP Reference 295 Library: The DDOC has made every attempt to provide the necessary information within this RFP. The DDOC will make the reference library available only to the winning Vendor.

Correct Rx acknowledges that all DDOC policies referenced in this RFP will be provided on disk in Word© format at the pre-bid conference adjacent to the facility visits. Health care policies are also available at <http://www.doc.delaware.gov/information/policyManual6.shtml>. RFP Reference 295 Library: The DDOC has made every attempt to provide the necessary information within this RFP. Correct Rx understands that the DDOC will make the reference library available only to the winning Vendor.

B. General Requirements

4. Provisions of a Constitutional System for Offender Health Care

a. Each proposal must reflect in their response how their proposed service, which is one or more than one component of a constitutional system of health care delivery, will serve to reinforce the other Vendors' services, e.g. the Medical or Mental Health Vendor, as described below:

i. A Communications and Sick Call System

- A Sick Call System must be provided for all offenders and must be characterized by direct communication of health care concerns between the offender and health care personnel without security intervention;*
- It must be characterized by professional evaluations, performed by properly credentialed and trained health professionals, providing for triaging offender requests, and for attending to the serious medical needs of offenders;*
- The Vendor will be responsible for answering inquiries from family, friends, and advocacy groups concerning an offender as the Vendor will have the medical information available to provide a more detailed response to inquiries.*

Correct Rx will support the Medical and Mental Health Vendor in the delivery of sick call services. Since July 2010, our onsite pharmacists have been available for consultations with patients and providers during the course of their sick-call duties. **Patient's often** present to sick call with complaints of uncontrolled pain, acute illness, or other significant change in condition where a clinical consult by the pharmacist is prudent. Our onsite staff will routinely be available to assist with such needs in hopes that addressing patient complaints during sick call will reduce grievances and future unscheduled healthcare interventions.

All consultations performed by Correct Rx pharmacists as a result of sick call referral or otherwise will result in a professional evaluation. Documentation of the encounter will be consistent with SOAP note format. This well established medical record style will streamline the clinical pharmacist intervention note between all DDOC sites.

Correct Rx will be responsible for answering inquiries regarding medication related topics from family, friends and advocacy groups concerning an offender.

ii. Personnel

- The system must have adequate Leadership and Professional staffing. This must be outlined in a staffing plan, but not only by plan, but in reality; (See Appendix D, Vendor Staffing Requirements). The staffing plan, with individual names of staff must be sent to BCHS on a monthly basis prior to the beginning of the month and any changes to the staffing document must be approved by BCHS.*

Correct Rx understands that we must have adequate Leadership and Professional staffing. We have outlined in a staffing plan, not only by plan, but in reality. Correct Rx understands the staffing plan, with individual names of staff must be sent to BCHS on a monthly basis prior to the beginning of the month and any changes to the staffing document must be approved by BCHS.

**CORRECT RX PHARMACY SERVICES
LEADERSHIP FOR DDOC**

Team Member	Position
Executive Leadership	
Ellen H. Yankellow, PharmD	President & CEO <i>Contract Liaison</i>
Jill R. Molofsky, RPh, CCHP	Vice President
James P. Tristani, RPh	Vice President Purchasing
Martin Yankellow, Esq.	Vice President Regulatory Affairs / <i>I.T. Oversight</i>
R. Donovan “Don” Bossle	Controller – Oversight of Billing Functions <i>Finance Director</i>
Robert Matthews, BS, MA	Director of Sales & Business Development <i>Customer Relations, Inclusion & Diversity</i>
Program Management and QA	
John Nattans, MC, LCPC, NCC	Vice President Programs & Quality Assurance
Rachael Campbell	Vice President Administrative Services
Operations	
Joe DeMino, PD	Vice President of Operations
Jaye Wexler, PharmD	General Manager of Operations <i>Director of Education Services</i>
Peter Crosby	Director of I.T. Systems

Executive Leadership



President and CEO
Dr. Ellen H. Yankellow, BS, PharmD

Dr. Ellen H. Yankellow, PharmD, is the President and CEO of Correct Rx Pharmacy Services, Inc. and a national leader in the advancement of clinical pharmacy for institutions.

Dr. Yankellow is regarded as one of the leading women pharmacists in the country and an expert in institutional/geriatric pharmacy. She started Correct Rx after a long career as a top executive in the pharmacy services industry. Her business model is based on innovative clinical programs that offer better medical outcomes and lower healthcare costs at the same time.

Strongly committed to delivering the highest quality services to her patients who reside in correctional, residential and senior care facilities throughout the country, Dr. Yankellow has created a culture of caring that pervades **every aspect of her business**. **“Correct Rx offers a variety of clinical services including managing the selection and quantity of medications, pharmacist-controlled medication therapy and disease state management. All of these initiatives result in optimal use of medications and provide undeniable value,” says Dr. Yankellow. “At Correct Rx, our goal is to be an indispensable part of your healthcare team. We have proven that Clinical Pharmacy is a smarter way to manage your healthcare costs.”**

Dr. Yankellow’s **phenomenal business success is equally matched by her commitment to** and passion for community activism and philanthropy. She serves on the boards of numerous nonprofit organizations including Chair of the University of Maryland-School of Pharmacy Board of Visitors, The Carter Center Board of Councilors, Network 2000, Inc., Baltimore City Foundation, Inc., Maryland Chamber of Commerce, The Baltimore Symphony Orchestra **Women’s Leadership Council, St. Mary’s Seminary and University, Catholic Community Foundation Board of Trustees, Stevenson University President’s Advisory Council and part of the United Way of Central Maryland Leadership and Philanthropic Network.** She also serves on the corporate boards of AAA Mid-Atlantic and Maryland and J.J. Haines & Company, Inc.

Dr. Yankellow has also been recognized with numerous awards including The Maryland Chamber of Commerce Business Hall of Fame, **The Daily Record’s Maryland’s Most Admired CEOs**, University of Maryland School of Pharmacy Key to Pharmacy Hall, Anne Arundel County and Annapolis Chamber of Commerce Business Leader of the Year, The Daily Record Influential Marylander, Girl Scouts of Central Maryland **Distinguished Women’s Award, Alzheimer’s Association, Greater Maryland Helen C. Schulze Award and Ernst & Young Entrepreneur of the Year Award for health services.**

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She has received three **Maryland's Top 100** Women awards from The Daily Record and has been inducted into its Circle of Excellence. Dr. Yankellow was also inducted into the Chimes Hall of Fame, received the Bravo! Entrepreneur Award from Smart Woman Magazine and was recognized by The Gazette of Politics and Business as one of **Maryland's Top 25 CEO's You Need to Know**.

Dr. Yankellow graduated from the University of Maryland, School of Pharmacy with honors in 1973, and earned her doctorate in pharmacy in 1996.



Vice President & Co-Owner
Jill R. Molofsky, RPh

Jill R. Molofsky, RPh is not only the Vice President but is also an **owner of Correct Rx. There is no substitution for experience.** Jill's years of knowledge, attention to detail and ability to make it all come together and provide a superior level of service from the first day.

Jill Molofsky, RPh is a 1981 graduate from the University of Maryland - School of Pharmacy and has worked with Ellen Yankellow over the past 30 years. Jill has over 25 years of hands-on experience in the management of large institutional/correctional pharmacies. She is intimately knowledgeable concerning the day to day operations of an institutional pharmacy. Jill R. Molofsky, RPh is one of the best kept secrets in the industry. Jill's work ethic and expansive correctional experience combined with her specialized knowledge of correctional pharmacy will prove to be invaluable to the DDOC.



Vice President Purchasing & Co-Owner
James P. Tristani, RPh

Jim Tristani, RPh attended pharmacy school with Dr. Yankellow. Jim has been an owner of various pharmacies and associated businesses in Maryland for the past 30 years. His vast experience as an entrepreneur has provided Jim with a good working knowledge of all of the administrative functions involved in operating a pharmacy. **Jim's buying expertise, combined with Correct Rx's alliances and**

Group Purchasing Organizations, will provide the DDOC with most favorable pricing. This alliance affords Correct Rx competitive pricing usually reserved for the largest pharmacies in the industry. Jim will personally oversee all facets of product purchasing and inventory control as it relates to the DDOC.



Vice President
Martin L. Yankellow, Esq.

Martin L. Yankellow, Jr. is a graduate of Chicago-Kent College of Law. In 2006 Mr. Yankellow joined Correct Rx as the Director of Regulatory Affairs after closing his private practice as a trial attorney in Chicago, Illinois. The Regulatory Affairs Department is charged with monitoring state, federal and regulatory boards throughout the country.

Since his arrival he has worked with each level of management, reviewing contracts, developing policies and procedures, orienting and training employees and acting as a clearing house for a multitude of questions and concerns regarding various legal issues. By keeping current on regulations in combination with the clinical, legal and business knowledge possessed throughout our company we are able to present information to managers and supervisors that assures good corporate governance and regulatory compliance. Our efforts have created a complete oversight program that addresses each tier of our corporate structure. Integration has led to improved information sharing, creating a dynamic operational and organizational change.

This undertaking has created a complete program for oversight that addresses the needs of each tier of our corporate structure. The result is a company that is in tune with industry-wide changes as well as state-specific regulations.

Correct Rx recognizes that there is increased scrutiny to ensure regulatory compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring for the **safety and welfare of the public**. **Correct Rx's** commitment to promoting strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division. Our focus promotes and monitors the laws, rules and regulations that govern institutional pharmacies and the clients that we serve.

Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of federal, state and local legislation. While many organizations have failed to address the issue and view the matter as either unimportant or cost prohibitive, Correct Rx has developed a Regulatory Affairs Department.

Integration has led to improved information sharing by creating a dynamic operational and organizational change. An added value of the Regulatory Affairs Department is the operational experience of our staff and the ongoing analysis of resource allocation, including leadership development and comprehensive continuing education. Our Regulatory Affairs Department implements a companywide staff development program designed to recognize potential compliance issues and promotes sound operational policies for the whole of Correct Rx. The DDOC will receive the benefit of a company with policies and procedures that comply with the strictest standards of our industry and regulatory branches of government.

Correct Rx ensures that all work as a result of this proposal shall be done in compliance with all Federal, State, and RFP Specifications, or in their absence, the best practices of **the trade. Correct Rx's facility policy and procedures are customized to comply with all** State protocols and directives, NCCHC, ACA and JC standards. In addition, Correct Rx will assist the DDOC in updating protocols.



Controller: Finance Director
R. Donovan Bossle

Don Bossle, Correct Rx Controller, has worked with Correct Rx for over five years. As such he oversees all of the invoicing and financial reporting for each of Correct Rx's clients. Under Mr. Bossle's leadership, Correct Rx has developed a reputation for accurate billing and integrity. His posture is customer oriented and responsive to our client's requests. Mr. Bossle will direct the monthly invoicing process of the DDOC billing. He will act as a direct liaison in relation to all billing matters. Additionally, Mr. Bossle will supervise the accounting and billing specialist assigned to the DDOC account.

Mr. Bossle came to Correct Rx with over 25 years of experience in Accounting and Financial Management. He has worked in manufacturing, distribution, and fabrication industries. For over 11 years Don held the position of CFO and Treasurer of Lyon, Conklin & Co., Inc. a privately owned distributor of heating and air conditioning products. Most recently he was the CFO for Snow Valley, Inc. in Upper Marlboro, Maryland before joining Correct Rx. Mr. Bossle will oversee all financial aspects of the DDOC contract. He will work in concert with the independent CPA auditors to ensure timely and accurate year end financials.



Director of Sales and Business Development
Robert L. Matthews, BS, MA

Bob has a wealth of experience in both Public and Private Corrections that includes over 28 years in the Federal Bureau of Prisons in positions of increasing responsibility. He has served as Warden at the U.S. Penitentiary Leavenworth, Delaware and at the U.S. Penitentiary Atlanta, Georgia.

He was Western and Southeast Regional Director of the Federal Prison System and appointed to Assistant Director of the Program Review Division in Washington, D.C. Bob also was appointed United States Marshal for the District of Columbia where he received **the Attorney General's Award for Distinguished Service.**

In the Private Sector, he was Senior Vice President of a privately held prison company in Sarasota, Florida and Vice President of a Security Firm in Vienna, Virginia. More recently he has served as President of his own Correctional Consulting Firm, Matthews Correctional Consulting. Bob graduated from Florida A. & M. University with a BS in Sociology and a Masters Degree in Criminology from Indiana State University.

Mr. Matthews' ability to develop and maintain business relationships on a national level along with working directly with key decision makers will produce positive results for Correct Rx and the clients we serve. Mr. Matthews will ensure that the DDOC is consistently pleased with all provided services.

Program Management & Quality Assurance



Vice President Program Management & Quality Assurance

John R. Nattans, MC, LCPC, NCC

John R. Nattans, MC, LCPC, NCC is a Licensed Clinical Professional Counselor (LCPC) in Maryland and a Nationally Certified Counselor (NCC).

He earned a Masters of Counseling degree from Arizona State University, a Bachelor of Arts degree in Psychology from the University of Delaware, and has taken several postgraduate courses at the Johns Hopkins University, School of Professional Studies in Business and Education.

Mr. Nattans has been supervising professionals and managing programs over the past 20 years and mores specifically has had direct administrative management of our contract with the DDOC since July 2010. He joined Correct Rx in February 2005 and currently serves as the Vice President of Program Management. Mr. Nattans' **wealth of direct** hands-on correctional experience and excellent written and oral communication skills has created the ideal relationship with our clients.

Correct Rx is committed to delivering service. Mr. Nattans will ensure that all service areas and all necessary facility representatives are informed of our performance. The required written reports and participation in interdisciplinary meetings will provide Correct Rx with the opportunity to consistently demonstrate our quality of service and dedication to focusing on the client value first, being customer friendly, being customer centered, and always providing something extra.

Understanding and meeting the needs of our clients is essential and always in the forefront of our operations. In the event that there is a concern with service delivery, Correct Rx will ensure that a corrective plan of action is initiated and communicated. Mr. Nattans will ensure that our communication is consistent and informative, as Correct Rx strives to exceed your service expectations.

Correct Rx is committed to Continuous Quality Improvement (CQI) and staff development. Mr. Nattans serves on both committees at Correct Rx. The CQI committee ensures that all goals are clearly defined; that there is input from multiple levels within Correct Rx; that the outcomes are based upon service delivery and customer satisfaction; that the outcomes are derived from scientific data; and that the outcomes are communicated effectively and utilized in future goal setting. As the Corporate Director of Program Services he will manage the clinical pharmacist and work collaboratively on the staff development committee providing continuous and as needed trainings and workshops to our clients and customers. For example, when Correct Rx begins service for a new facility a comprehensive orientation program is provided.

Correct Rx takes the time to patiently and fully explain our services because it is our belief that this understanding sets the foundation for a healthy and effective relationship. Each participant receives a manual and Correct Rx is continuously available to re-train or answer any questions. Additionally, Correct Rx is committed to educating the clients and has provided clinically focused workshops which facilitate care, improve treatment, optimize health, and ultimately reduces cost. The staff development committee also identifies workshops and trainings to be provided in-house to all Correct Rx employees. Mr. Nattans also works with this committee to create individual development or corrective action plans for specific identified employees.



Vice President Administrative Services
Rachael A. Campbell

Rachael has worked with Dr. Yankellow for over ten years providing direct support to our correctional operations and clients. Rachael is thoroughly familiar with the concepts, practices and procedures of **correctional pharmacy**. **Rachael's intimate knowledge** of every aspect of our contracts cannot be overstated. She is instrumental in maintaining all of our licensures and certifications.

In the capacity of Vice President Administrative Services, Rachael organizes and leads the technical writing team as we respond to RFPs throughout the year. The highly professional RFP response that the selection committee is reading is a direct result of the skills of Rachael. Rachael also supervises all administrative staff and various office activities to achieve maximum administrative support to our staff and that of our clients. This includes the supervision of our administrative assistants.

This attention to detail and oversight by Ms. Campbell has been invaluable to their growth and success in their respective positions. Rachael has also embraced the **Correct Rx's value of giving back**. **She has served on the committee of the Women Moving Forward Conference** at the Maryland Correctional Institute for Women for the past three (3) years. She chaired this committee in 2010. Under her leadership this annual conference has grown in size and mission.

Operations



Vice President of Operations Joseph A. DeMino, PD

Joseph A. DeMino, PD recently joined Correct Rx as Vice President of Operations. Joseph has over 30 years of experience as a pharmacist. He is a 1984 graduate from the University Of Maryland School Of Pharmacy and also a 1982 graduate from Mount Saint Mary's College.

Joseph brings strong operations management skills obtained over his 25 years of experience in direct hands-on retail management. He previously has held numerous management positions with CVS Pharmacy. He also held Pharmacy Operation and General Manager positions with a national long term care pharmacy provider. His knowledge, training and passion for operations, coupled with his commitment to customer service have been a valuable addition to Correct Rx.

Joseph has also devoted his time and services to many local and national professional organizations. He has held numerous leadership positions within these organizations. He has served as President and Chairman of The Maryland Pharmacists Association, President of The University of Maryland School of Pharmacy Alumni Association. He was also named as an honored alumnus for The University of Maryland. He was appointed by the Governor of Maryland to serve as a commissioner on The Maryland **Board of Pharmacy**. He also serves on The Board of Visitors for Mount Saint Mary's University School of Math and Natural Sciences and is a past member of The University of Maryland School of Pharmacy Board of Visitors where Dr. Ellen Yankellow currently serves as Chair.

In his current position as Vice President of Operations, Joseph oversees every aspect of the day to day business from the start up of pharmacy to the management of Correct Rx's \$90 million operation.



General Manager of Operations: Director of Education Services **Jaye Wexler, PharmD**

Jaye Wexler, PharmD, joined Correct Rx as Operations Manager in 2007. Prior to joining Correct Rx, Jaye held positions as Pharmacy Team Leader, District Pharmacy Supervisor, and Regional Support Pharmacist for a national company.

He has also successfully built two businesses from scratch and helped a small previous employer open satellite offices. His operational experience includes writing and implementing staff training and development programs, work flow analysis, new work flow rollouts, and management of over 100 direct reports.

Jaye has earned awards for his efforts from past employers and national organizations. Examples include a Master of Excellence Award for Customer Service and Retention from a national franchisor, a District Paragon Award for Excellence from a national pharmacy retailer, and an APhA-ASP Professionalism Award. Jaye also served as an original member of an advisory committee for a national pharmacy chain.

Jaye brings over 20 years of experience in all facets of operations to Correct Rx. In his role as Operations Manager, Jaye reports directly to the Vice President of Operations. In addition to overseeing day to day operations, Jaye is responsible for quality control, work flow execution, staff development, and special projects. Jaye also developed a Maryland Board of Pharmacy Technician Training Program for Correct Rx employees. His program was one of the first that the MDBOP approved.



Director of Information Technology Services
Peter Crosby

Peter has over 30 years' experience in the information technology field, much of it focusing on customer service. He went to work for Data General Corp out of college maintaining and repairing computer equipment. Peter worked for Data General for 19 years and relocated to New Orleans with Data General in 1981 to work as a Field Service Engineer. Peter switched career directions in 1995 when he went to work for Bell South in Lafayette, LA as a network administrator servicing their retail stores and customer service center in Southwest Louisiana.

Peter was IS Supervisor for CII Carbon in New Orleans overseeing all computer and **telecommunications activities. Peter's most recent position was Sr. Network Administrator for Peoples Health in New Orleans responsible for the daily operation and maintenance of Peoples Health's data center. Peter recently relocated to the Baltimore area and oversees the data processing and telecommunications for Correct Rx. Peter's expertise will be instrumental in spearheading the I.T. solution selected by the DDOC including electronic order entry, eMAR, interface with jail management systems and a full Patient Health Record System if so desired.**

• A key to Constitutional Care for Offenders provided by Vendors, in addition to establishing processes that meet NCCHC, ACA and other generally accepted professional standards, is the staffing of the health care delivery system with sufficient and qualified pharmaceutical personnel.

Correct Rx understands that a key to Constitutional Care for Offenders provided by Vendors, in addition to establishing processes that meet NCCHC, ACA and other generally accepted professional standards, is the staffing of the health care delivery system with sufficient and qualified pharmaceutical personnel.

Subject Matter Experts!

The key to a well-designed comprehensive pharmacy program is that all associates work in tandem to provide the highest level of patient care. First you must ensure that you hire staff with the best experience and impeccable credentials. It is equally important that you provide a corporate culture founded on caring and accuracy. **Correct Rx embraces the concept that what we do and how well we perform our job matters. We call it the “Correct Way”.**

All new associates as part of their orientation are trained to understand the importance of providing safe and reliable pharmaceuticals. Our associates are expected to do things the “Correct Way”. You can always expect something extra from Correct Rx associates, whether that is producing an accurate CQI report, preparing or sending an order, or taking a call after business hours. Accuracy is core to the culture of Correct Rx.

Credentialing

Correct Rx knows that accuracy and reliability are essential when providing pharmacy services for the Delaware Department of Corrections (DDOC). Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies and professional references. Correct Rx maintains a Quality Assurance credentialing spreadsheet used to monitor compliance and plan for license and certification renewal. This credentialing spreadsheet is reviewed monthly at the internal CQI meeting.

Correct Rx is proud of our pharmacists. Dr. Yankellow serves as the Chair of the University of Maryland Board of Visitors and we take great pride in our relationship with the University Of Maryland School Of Pharmacy. In addition, Dr. Yankellow serves as a faculty clinical instructor for the School of Pharmacy. Correct Rx is also an approved practice site for Pharmacy Students. As preceptors and mentors to Pharmacy School interns we are able to not only teach them the mandatory requirements of proper dispensing, clinical interventions, checking for interactions but also the importance of being accurate. As a pharmacy owned and operated by pharmacists being accurate is core to the culture of Correct Rx.

Correct Rx extends this pledge of excellence to our sub-contractors whether it is our maintenance company, or our courier service they must attend the Correct Rx orientation and abide by our rules. Most importantly all employees and sub-contractors **must accept the “Correct Way” of doing things.**

We verify all sub-contractors' credentials and business licenses. "If it's the right way, it's the Correct Way" is more than a tag line it is a promise of excellence surrounding our entire program. Correct Rx will ensure through our credentialing process that all staff has the proper credentials and licenses required by law to provide the pharmacy services described in the RFP Specifications. Correct Rx is fully licensed as an institutional pharmacy. All of our pharmacists are licensed pharmacists and are all in good standing.

**CORRECT RX PHARMACY SERVICES
CORPORATE CLINICAL LEADERSHIP FOR DDOC**

Team Member	Position
Corporate Clinical Support	
Hui Seo, PharmD, MBA, CCHP	Vice President Clinical Programs
Valerie Barnes, PharmD, MS	Director of Pharmacoeconomics Senior Clinical Pharmacist
Kareem Karara, PharmD	Clinical Pharmacist
Heather Hurley, PharmD	Clinical Pharmacist

Clinical Oversight



**Vice President of Clinical Programs
Hui Seo, PharmD, MBA, CCHP**

Dr. Seo received his Doctor of Pharmacy graduate from the University of Maryland, School of Pharmacy in 1998. He completed a post graduate residency program at Walter Reed Army Medical Center while serving as an officer in the Army. Dr. Seo recently completed his Master of Business Administration from the University of Maryland.

He has clinical pharmacy experience in both the acute care and ambulatory care setting through rounding with the surgical intensive care team and direct patient care contact in an outpatient disease state management clinic. He served as formulary manager for the Walter Reed Army Medical Center to provide pharmacy benefit management in the National Capital Area.

Dr. Seo also comes with significant operational experience managing an outpatient pharmacy and as the Pharmacy Manager for Coram Healthcare, a national home infusion provider. Dr. Seo is responsible for developing clinical initiatives to improve patient outcomes.

Dr. Seo has broken new ground in the delivery of clinical pharmaceutical care by implementing disease state management clinics for pharmacists to provide direct patient care in correctional facilities. Dr. Seo works directly with the Vice President of Operations to ensure the quality and accuracy of the day to day workflow. In addition to **operations, he will oversee the clinical pharmacist's monitoring of medication** consumption by tracking and trending the utilization data searching for anomalies and inconsistencies. Correct Rx believes in taking a proactive approach in preventing the misuse, over-ordering, and inappropriate prescribing of medication.

The clinical pharmacist will also help manage the drug costs by providing drug information services to the healthcare providers, including doctors, nurses, psychiatrists as well as pharmacy personnel. We believe that direct communication with the prescribers and education can lead to better prescribing habits that will not only be cost effective, but be beneficial to the patients' overall health and well-being.



**Director of Pharmacoeconomics
Senior Clinical Pharmacist
Valerie D. Barnes, PharmD, MS**

Dr. Valerie D. Barnes received her Doctor of Pharmacy degree from Florida A&M University in 2001. She joined Correct Rx as Senior Clinical Pharmacist in 2009. Prior to joining Correct Rx, Dr. Barnes held a position as the local Pharmacy Operations Manager for a national long-term care pharmacy provider. She has completed her Master of Science in pharmaceutical outcomes and policy in applied pharmacoeconomics in 2011 from the University of Florida.

Dr. Barnes's experience in pharmacoeconomics will be invaluable to the DDOC as these principles will be applied to improve healthcare outcomes and reduce healthcare costs. Dr. Barnes also possesses extensive experience as a consultant pharmacist and disease state management pharmacist specializing in the area of respiratory care.

For the past two years, Dr. Barnes has been actively involved in the Delaware DDOC contract. She has chaired the quarterly Pharmacy and Therapeutics meetings, attending the monthly Multivendor meeting and supervised the activities of the onsite clinical pharmacist. Her past positions have afforded her a strong background in the areas of customer service, quality assurance, and drug utilization review. She acts as a drug information resource for the customers she serves and had the opportunity to present at the 2009 Mid-Atlantic ASCP Conference.

Dr. Barnes brings years of experience to the clinical department of Correct Rx. In her role as Senior Clinical Pharmacist, she is responsible for supporting our clinical management team regarding drug utilization, medication therapy management, and formulary management as well as conducting Pharmacy and Therapeutics meetings and site visits for our facilities.



Senior Clinical Pharmacist Heather A. Hurley, PharmD, BCPS

Dr. Heather A. Hurley received her Doctor of Pharmacy degree from Wilkes University Nesbitt School of Pharmacy in 2001. She then went on to complete an accredited pharmacy practice residency at **Saint Luke's Hospital in Kansas City, Missouri.** Following her residency Dr. Hurley entered into hospital practice at the Mayo Clinic in Rochester, Minnesota where she was a point of care pharmacist gaining experience on a variety of in-patient services including surgery, hematology-oncology, and critical care services in addition to initiating clinical services with the kidney-pancreas transplant service.

After gaining board certification as a pharmacotherapy specialist (BCPS) in 2004 she took on a full time clinical specialist position at the University of Maryland Medical Center where she worked as part of the multi disciplinary team taking care of abdominal transplant (kidney, pancreas and liver) patients both pre and post transplant. This practice lead to a transition from pharmacist dispensing medications to the prescriber of immunosuppressant medications, related infectious disease prophylaxis and tailoring of the whole medication regimen to meet patient specific needs under a collaborative practice agreement with the surgeons, nephrologists and hepatologists.

Transplantation is a specialty that encompasses all areas of medicine that requires one to maintain high level expertise in all areas of practice. She has participated in clinical research initiatives in living donor outcomes, pancreas transplant outcomes, antibody medicated rejection, HIV, and hepatitis B and C.

In addition to Dr. Hurley's **clinical and operational experience she has also been active in** the education of pharmacy students and residents during her years of practice. She took residents from multiple outside programs for transplant and medicine rotations in addition to starting a transplant specialty program. She was the founding residency **program director the University of Maryland's PGY2 residency in solid organ transplant** achieving its primary accreditation and then serving as a specialty specific accreditation surveyor with **ASHP's commission on credentialing for other institutions.** In her role as Senior Clinical Pharmacist, she is responsible for supporting our clinical management team regarding drug utilization, medication therapy management, and formulary management as well as conducting Pharmacy and Therapeutics meetings and site visits for our facilities. Dr. Hurley has immediately taken an active role in precepting students at Correct Rx as well.



Clinical Pharmacist Kareem A. Karara, PharmD

Dr. Kareem. A. Karara received his Doctor of Pharmacy degree from the Philadelphia College of Pharmacy in 2011. He joined Correct Rx as a Corporate Clinical Pharmacist in 2012. Prior to joining Correct Rx, Dr. Karara completed a Post Graduate Year 1 Pharmacy Practice Residency at the Einstein Medical Center in Philadelphia.

He has also served as the Paul G. Cano Legislative Intern for the American Society of Consultant Pharmacists and as a Regulatory Affairs Intern for the National Community Pharmacists Association. Dr. Karara previously worked in long term care, where he managed implementation and operation of automated medication dispensing systems.

Dr. Karara is a well-versed and energetic clinician who has worked collaboratively with prescribers in both the inpatient and outpatient care settings. He has experience in managing drug therapy for anticoagulation patients, complex infectious disease cases, and HIV patients, among others. His skills in drug information and evidence-based clinical practice will be invaluable to the DDOC as these principles will be applied to provide a high level of pharmaceutical care while working to reduce healthcare costs.

His past positions have afforded him a strong background in the areas of clinical practice, drug information, systems implementation, and customer service. He has had the opportunity to publish in the nursing magazine Advance, develop an accredited continuing education program, and present on the effects of the Affordable Care Act to a national physician audience. In his role as a Corporate Clinical Pharmacist, he is responsible for supporting our clinical management team and onsite staff regarding drug utilization and information, formulary management, non-formulary request evaluation, as well as conducting Pharmacy and Therapeutics meetings and site visits for our facilities.

• Staffing levels must be specific to the position, i.e. if the staffing position document calls for a PharmD pharmacist a Registered Nurse, or Licensed Practical Nurse may not be substituted without approval by the DDOC Medical Director. PharmD must have a Doctorate in Pharmacy, completed a post graduate clinical residency, licensed in the State of Delaware, one should also be a registered nurse and one must have experience as a Geriatric Pharmacy. Experience in a Correctional setting is required.

Correct Rx understands that staffing levels must be specific to the position, i.e. if the staffing position document calls for a PharmD pharmacist a Registered Nurse, or Licensed Practical Nurse may not be substituted without approval by the DDOC Medical Director. Correct Rx acknowledges that PharmD must have a Doctorate in Pharmacy, completed a post graduate clinical residency, licensed in the State of Delaware, one should also be a registered nurse and one must have experience as a Geriatric Pharmacy. Correct Rx acknowledges that experience in a Correctional setting is required.

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Supplemental Information: Licensed Delaware Clinical Pharmacist

The DDOC provided the following response to question number 20 in Addendum #15, **“The only requirements for a PharmD is a Delaware license to provide services in a Delaware State facility and have correctional experience. The State feels that the license is an absolute for the PharmD to be physically present in the facility.”** Correct Rx agrees that the law requires the onsite pharmacist to be licensed in the State of Delaware.

The onsite clinical pharmacists employed by Correct Rx were specifically chosen for **the DDOC contract with the specific nuances of the State’s healthcare needs** in mind. We sought pharmacists with special skill sets such as a nursing or geriatric care **background to optimize the impact of each clinical pharmacist position.** Correct Rx’s foresight to employ these highly credentialed pharmacists has been proven advantageous based on the unprecedented value gained by the Department through the implementation of robust clinical pharmacy services. Our dedication to recruit, screen and employ highly trained pharmacists with correctional experience is an area where we take great pride.

Correct Rx began our contract with Delaware Department of Correction on July 1st, 2010 to provide traditional pharmacy and to initiate an onsite clinical pharmacy program. In preparation of being the awarded vendor of the previous RFP, Correct Rx embarked on obtaining licensure for its clinical pharmacists which is a requirement by the Delaware Board of Pharmacy in order to practice pharmacy in the state. State licensure requirements for pharmacists are a minimum requirement to practice pharmacy in all states.

Per Title 24, Chapter 25 of the Delaware Code concerning Professions and Occupations, the following definitions and rules apply:

“Pharmacist” or “licensee” means an individual licensed by the State pursuant to this chapter to engage in the practice of pharmacy.

“Practice of pharmacy” means the interpreting, evaluating, and dispensing of a practitioner’s or prescriber’s order. The practice of pharmacy includes, but is not limited to, the proper compounding, labeling, packaging, and dispensing of a drug to a patient or the patient’s agent, and administering a drug to a patient. The practice of pharmacy includes the application of the pharmacist’s knowledge of pharmaceuticals, pharmacology, pharmacokinetics, drug and food interactions, drug product selection, and patient counseling. It also includes:

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Supplemental Information: Continued

- a. Participation in drug utilization and/or drug regimen reviews;
- b. Participation in therapeutic drug selection, substitution of therapeutically equivalent drug products;
- c. Advising practitioners and other health care professionals, as well as patients, regarding the total scope of drug therapy, so as to deliver the best care possible;
- d. Monitoring drug therapy;
- e. Performing and interpreting capillary blood tests to screen and monitor disease risk factors or facilitate patient education, the results of which must be reported to the patient's health care practitioner; screening results to be reported only if outside normal limits;
- f. Conducting or managing a pharmacy or other business establishment where drugs are compounded or dispensed; and
- g. Administration of injectable medications, biologicals and adult immunizations pursuant to a valid prescription or physician-approved protocol approved by a physician duly licensed in the State under subchapter III of Chapter 17 of this title. Pharmacists shall request which physician or physicians and notify the physician or physicians as designated by the patient of such administration within 24 hours. The notice shall include the patient's name, the name of the immunizations, inoculations or vaccinations administered, and the date of administration and may be submitted by phone, fax, post or electronically. Upon request a copy of the protocol will be made available to the designated physician or physicians without costs.

Based on Delaware law, it is a requirement in order to fulfill the requirements of this RFP to require onsite clinical pharmacists to be appropriately licensed by the Delaware Board of Pharmacy and be subject to their rules and regulations.

CORRECT RX PHARMACY SERVICES
ON-SITE CLINICAL PHARMACIST FOR DDOC

Team Member	Position
DDOC On-site Clinical Pharmacists	
Crosby Amoah, PharmD, R.N.	On-Site Clinical Pharmacist DDOC Clinical Coordinator
Jaime McGee, PharmD	On-Site Clinical Pharmacist
Janene Cornish, PharmD, MT (ASCP)	On-Site Clinical Pharmacist

Correct Rx provides the best clinical pharmacy services in corrections in 40 states. Our clinical department is known for its innovative clinical initiatives, always designed to improve patient care while complying with accreditation standards and assisting with maintenance of fiscal viability.

Our On-site clinical pharmacists all have their Doctor of Pharmacy degrees, with years of correctional experience, and above all, in-depth knowledge in medication therapy management, with diabetes, hypertension, anti-coagulation, dyslipidemia, mental health and HIV/AIDS. Currently we have three on-site Clinical Pharmacists.

Upon award of the contract, we are confident that we will be able to add two (2) additional clinical pharmacists that will be equally qualified to provide services for the DDOC and represent the Correct Rx stellar reputation. All hires will be subject to approval by the BCHS Bureau Chief and Medical Director. Given the timeliness of this RFP, we are confident we will have our complete staffing requirements in place prior to the start date.

Supplemental: In May 2014, the Correct Rx clinical and operational team coordinated to supply Veletri, a continuous IV infusion for the treatment of pulmonary arterial hypertension, to a hospitalized offender from HRYCI. Our efforts to obtain Veletri began after our onsite clinical pharmacist notified us of the sensitive nature of this medication (half-life of six (6) minutes and dangers of interrupted infusion) and the need to have it available so that this offender could return to HRYCI as soon as possible. Two (2) specialized distributors supply Veletri and obtaining this medication required a lengthy process involving patient enrollment, including a comprehensive past medical history, and provider registration. This process can take up to a week to complete under normal circumstances. Correct Rx managed to successfully obtain Veletri and have it delivered

Supplemental: (Continued)

onsite in two (2) days. Additionally, our operational department was able to negotiate the wholesale purchase of this medication which offered significant cost savings to the DDOC and reduced the risk of a delay in medication availability.

In addition to the outstanding work provided by our operational team, Correct Rx's clinical department went above and beyond to ensure patient safety onsite. Dr. Crosby Amoah, a registered nurse and pharmacist, was instrumental in the coordination of care for this offender. Dr. Amoah obtained the past medical history required for registration, visited the offender in the hospital to assess his current CADD pump, and partnered with the hospital nursing and pharmacy staff to ensure that Veletri will be available, uninterrupted, for the transfer from the hospital to HRYCI. Dr. Amoah also provided education and training to our medical co-vendor concerning pump operations, Veletri reconstitution, administration, storage and stability.

Correct Rx takes extreme pride in the qualifications of our onsite clinical pharmacists. **Dr. Amoah's credentials as both a pharmacist and nurse were critical in the role he** played in the care of this patient. Our operational team demonstrated their commitment to our high service level commitment by providing quality pharmacy service that extended beyond minimal contract compliance to meet the needs of our patients and client.



**On-Site Clinical Pharmacist
DDOC Clinical Coordinator
Crosby Amoah, PharmD, RN**

Dr. Crosby Amoah provides onsite clinical services at HRYCI and BWCI and serves as the pharmacy clinical coordinator for Correct Rx in Delaware. Dr. Amoah brings a varied and valuable skill set to the group. He graduated from The University of Charleston School of Pharmacy in West Virginia in 2011. Dr. Amoah is certified by the American Pharmacy Association (APhA) in Pharmacist led immunization administration and also as a Medication Therapy Management (MTM) expert.

In addition to his pharmacy experience he is a registered nurse with over ten (10) years of experience in Psychiatry, Geriatrics, Medical Surgical, and Orthopedics. His nursing background has proven beneficial to all members of the patient care team while working on medication regimen design and compliance counseling. In addition to his nursing and pharmacy back ground he also has a degree in science education which just shows his commitment to learning and teaching and caring for others over the course of his career.



On-site Clinical Pharmacist Jaime McGee, PharmD

Dr. Jaime McGee provides onsite clinical services at JTVCC, WCCC, PCCC, HDPTC and CVOP. She received her Doctor of Pharmacy degree from the University of Maryland, School of Pharmacy in 1997. She joined the Correct Rx team over a year ago as a clinical pharmacist. Prior to joining the Correct Rx team, Dr. McGee had been a geriatric care consultant pharmacist in Massachusetts for 11 years and later served four years as a Manager of Clinical Operations for the New England district responsible for consultant pharmacists practicing in nine states for a large national long-term care pharmacy.

She is an established expert in the care of the geriatric population and also been a guest speaker at the University of Rhode Island Pharmacy School, Mass Pro, and Massachusetts Hospital Association educating professionals and aspiring professionals about geriatric therapeutics and prevention of medication errors. Dr. McGee was a consensus group member for the Massachusetts Coalition for Prevention of Medication Errors Safe Medication Practices Workbook released in 2008. In 2001, Dr. McGee was awarded the Massachusetts Consultant Pharmacist of the Year award.



On-site Clinical Pharmacist Janene Cornish, PharmD, MT (ASCP)

Dr. Janene Cornish provides onsite clinical services at JTVCC, MCCC, SCI, and SVOP. Dr. Cornish is a graduate of Virginia Commonwealth University School of Pharmacy, was accepted into the Bayhealth Medical Center in Dover, DE residency program. Prior to joining the Correct Rx team, Dr. Cornish had seven years of clinical pharmacy experience in a variety of settings prior to her work with Correct Rx in ambulatory oncology, geriatrics, and inpatient acute care. In addition to her pharmacy experience she is also a board certified Medical Technologist with the American Society for Clinical Pathology.

Our dedicated on-site clinical Pharmacist receives all the support they need from our corporate clinical team. Correct Rx Pharmacy Services will submit a monthly staffing documentation and also notify BCHS of any changes in staffing.

Correct Rx understands that we will be required to provide service coverage at all facilities based on the services stipulated in this contract. The chart below identifies a schedule that Correct Rx is proposing to satisfy the requirements of this RFP. Correct Rx understands that the final staffing plan will be discussed with and authorized by the BCHS Medical Director and Bureau Chief.

Pharmacist	Monday	Tuesday	Wed	Thursday	Friday
Crosby Amoah	HRYCI	HRYCI	PCCC	HRYCI	HRYCI
Janene Cornish	JTVCC	JTVCC	JTVCC	JTVCC	Morris
Jaime McGee	JTVCC	JTVCC	CVOP	JTVCC	JTVCC
Additional Pharmacist #1	BWCI	HDP	BWCI	WEBB	BWCI
Additional Pharmacist #2	SCI	SCI	SCCC	SCI	SCI

- *Adequate staffing must be supported by adequate resources, e.g. locum tenens; necessary to deliver the care and any prolonged gaps in staffing will require a contract Management Fee price adjustment;*

Correct Rx understands that we will be responsible for providing staff to the DDOC under this solicitation and must have a continuously active recruitment and retention operation designed to attract qualified health professionals and keep all positions filled, especially clinical positions. The plan must be in writing and accepted by the Bureau Chief. Correct Rx has met and exceeded the staffing requirements over the previous contract term. In addition, we have corporate resources and clinical pharmacist that are licensed in Delaware. They would be mobilized if necessary to ensure that the staffing requirements are fully met.

Recruitment Plan

Supplemental: Correct Rx understands and is excited that this RFP requires two (2) additional on-site clinical pharmacists. We have been actively interviewing candidates for these positions since October 2013 and have already identified several qualified professionals. As the DDOC is aware, Correct Rx hires pharmacists that are highly credentialed to include completion of a post graduate residency. Upon award, Correct Rx will move quickly to make offers to these candidates. We are hopeful that these prospective candidates will join our team and that they will be paired with the three (3) onsite pharmacists who will be retained in their current positions.

At Correct Rx we have adopted many of the principles presented by Geoff Smart and Randy Street in their *New York Times* best seller “*Who.*” We have devised a hiring strategy or “*blueprint*” in which we very clearly define the specific roles for which we are hiring and the individual skill set needed to overachieve in these roles. Then we go about the process of finding and hiring these “A” players. We embrace the concept of an ongoing recruitment strategy in which you generate a stream of top candidates. This approach has served Correct Rx quite well.

Correct Rx follows a continuous recruitment plan that ensures we have multiple levels of access to perspective recruits. In addition to placing ads via online job sites, local newspapers and clinical journals, Correct Rx has used professional recruiting firms and participated in various job fairs. Furthermore, our team of clinicians is active in the professional community, allowing us access to the most qualified candidates in the industry.

For example, Dr. Yankellow is the Chair of the University of Maryland, School of Pharmacy Board of Visitors and a preceptor for pharmacy interns. She is also the immediate past President of the American Society of Consultant Pharmacists. Our Vice President of Operations, Jill Molofsky is a member of the admissions committee at the University of Maryland, School of Pharmacy and the Rotary Club of Baltimore. Our General Manager of Operations, Dr. Jaye Wexler, is a preceptor for the College of Notre Dame's School of Pharmacy and a member of the admissions committee.

We believe our overall success is directly linked to the individual success of each employee. Correct Rx not only provides a competitive salary schedule but also is recognized for our excellent benefits. This combination along with our superior work environment make Correct Rx an organization that is considered one of the most desired companies to work for in Central Maryland.

Correct Rx always takes special care when selecting the key members of our team to provide the administrative, operational and clinical responsibilities of our contracts. In addition to verifying licensing and all requirements of credentialing specified in the RFP, our key Managers and onsite Clinical Pharmacists are selected based upon their experience, skills and qualifications ensuring that their strengths match the needs of the DDOC. We are fortunate at Correct Rx because our owners, managers, onsite pharmacists and key pharmacy staff have direct experience in providing excellent service in corrections.

Correct Rx will ensure that there is no interruption in services due to staff vacancies, vacations, trainings, or any other situation that may or may not make it appear that there are insufficient personnel to complete services named throughout this document. The Vice President of Program Services and Quality Assurance, John Nattans, is and will be responsible for maintaining monthly staffing schedules, weekly adjustments and any variations in staffing patterns due to vacancies, vacations, trainings or any other reason.

- *All institutions must have defined staff; frequently changing different staff is disruptive to the operations and must be minimized.*

Correct Rx understands that all institutions must have defined staff; frequently changing different staff is disruptive to the operations and must be minimized.

Staff Retention

Correct Rx has an excellent track record for recruiting and retention with the DDOC. We are currently fully staffed and have never experienced an extended vacancy of our required positions. Correct Rx is confident in our ability to keep these positions fully staffed and are quite proud of our low turnover rate. Our years of experience providing onsite clinical services are producing measurable and sustainable outcomes that reduce overall healthcare costs and now we have the data that proves it.

Our onsite clinical pharmacists possess a higher level of clinical expertise with an emphasis on therapeutics and an understanding of the unique correctional practice environment. We select candidates that possess a Doctor of Pharmacy Degree and either a post-graduate residency program or equivalent clinical experience. Many of our clinical programs are managed by clinical pharmacists that have advanced Board Certifications through the American College of Clinical Pharmacists. These standards result in higher quality of recommendations and meaningful impact on patient care.

EXECUTIVE LEADERSHIP RESUMES

The resumes of the Correct Rx Executive Leadership Team assigned to manage and perform the services under the DDOC contract are provided on the following pages.

ELLEN H. YANKELLOW, PHARM.D
PRESIDENT & CEO

EDUCATION

- | | | |
|-----------|--|------------------|
| 1992-1996 | Doctor of Pharmacy, University of Maryland
• School of Pharmacy | Baltimore, MD |
| 1970-1973 | BS Pharmacy, University of Maryland
• School of Pharmacy
• Graduated with Honors in top ten of class | Baltimore, MD |
| 1968-1970 | Philadelphia College of Pharmacy and Science
• Pre Pharmacy Program | Philadelphia, PA |

PROFESSIONAL EXPERIENCE

- | | | |
|--------------|--|---------------|
| 2003-present | Correct Rx Pharmacy Services, Inc.
President & CEO, Majority Owner
• Performs all functions as President.
• Negotiates and signs all contracts.
• Responsible for all business development.
• Oversees both Operations and Administration.
• Customer Relations with both clients and vendors.
• Interfaces with buying groups.
• Ensure proper inventory turns in excess of 30 per year.
• Developed a Clinical Department that set the benchmark for excellence in the industry.
• Over 12 direct reports and 100 Associates company wide.
• Established Banking Relationship and Credit Line. | Linthicum, MD |
| 1999-2003 | Y&S Pharmacy Services
President & COO
• Directed the operations of three large institutional pharmacy operations.
• Provided pharmacy services to more than 130 facilities.
• Directly responsible for all business development. Increased sales from \$8.5 million to over \$51 million in three years.
• Established all internal processes | Baltimore, MD |
| 1996-1999 | PharmMerica Pharmacy Services
Senior Vice President
• Designed and managed a 26,000 sq. ft. state of the art institutional pharmacy. | Baltimore, MD |

- Provided pharmacy services to more than 165,000 lives.
- Managed more than 160 associates.
- Directly responsible for all business development and response to proposals.
- Design and implement a pre-pack division

1994-1996 Capstone Pharmacy Services Baltimore, MD

Vice President of Operations

- Provide pharmacy services for over 80 correctional pharmacies.
- Managed the operations of three large correctional pharmacies
- Responsible for all business development. Department grew from 25,000 lives to over 120,000 lives in three years.
- Accountable for all budgets and related items.

1992-1996 Choice Drug Systems Baltimore, MD

Director of Operations

- Oversee three divisions of institutional and managed care pharmacy.
- Supervise a \$40 million dollar a year operation
- Responsible for all business development.
- Received company highest sales award four years in a row.
- Developed innovative programs to improve efficiency and profits

PROFESSIONAL APPOINTMENTS

2013	Carter Center Board of Councilors
2013	Chair of Corporate Sponsorships for Alzheimer's Memory Ball
2013	Catholic Community Foundation Board of Trustees
2012	Maryland Chamber of Commerce Board of Director
2012	Kennedy Krieger Cabinet Member Capital Campaign
2012	Co-Chair Capital Campaign University of Maryland School of Pharmacy
2011-	
Present	St. Mary's Seminary Board of Directors
2010	Baltimore Symphony Orchestra
	<ul style="list-style-type: none"> • Governing Member • Women's Leadership Council Steering Committee
2010	Advisor to the Formation and Education Committee, St. Mary's Seminary
2009	President, Maryland Chapter, Association of Consultant Pharmacists
2009	President, Network 2000, Inc.
2009-	
Present	Stevenson University President's Advisory Council
2008-2009	Ernst & Young Entrepreneur of the Year Judge
2008-2009	Charlestown Retirement Community Board
2008-	
Present	JJ Haines, Inc. Board of Directors
2008	Girl Scouts of Central Maryland Board of Directors

2008- Present	Baltimore City Foundation, Inc. Board of Directors
2008	American Heart Association Baltimore Heart Gala Special Appeal Chair
2007	Leadership Maryland Graduate
2007/2008	Co-Chair, Memory Ball Committee, Alzheimer's Association, Greater Maryland Committee
2007	University of Maryland School of Pharmacy, Dean Search Committee
2006-2009	Member, University of Baltimore Advisory Board of Entrepreneurship
2006- Present	Long Term Care Commission Task Force, Maryland Department of Mental Health and Hygiene
2006- Present	Board of Directors, American Society of Consultant Pharmacists
2006- Present	United Way of Central Maryland's Alexis de Tocqueville Society Women's Leadership Council
2006- Present	Board of Directors, The Catholic High School of Baltimore
2005- Present	Memory Ball Committee, Alzheimer's Association, Greater Maryland Committee
2004-2008	Member, Inner Circle
2004- Present	Regional Board of Directors, AAA Mid-Atlantic Region
2004- Present	Network 2000 (Treasurer 2006)
2003	Ad Hoc Legislative Committee, University of Maryland School of Pharmacy Board of Visitors
2003-2008	Chairperson Governance Committee, Keswick Multi-Care Center
2002-2008	APCTO- 2 nd Vice President
2000-2008	Keswick Multi-Care Center Board of Directors
2000- Present	University of Maryland School of Pharmacy Board of Visitors (Chair, effective 2009)
2000-2008	Strategic Planning Committee, Keswick Multi Care Center
2000-2008	Board of Directors, Keswick Multi-Care Center
1996- Present	Covenant House, Promise Keepers
1994-1995	University of Maryland School of Pharmacy, Alumni Association President
1993-1995	Baltimore Metropolitan Pharmacists Association, President
1991-1994	Maryland Pharmacists Association, Board of Trustees
1974-2003	Clinical Instructor, University of Maryland School of Pharmacy

HONORS AND AWARDS

- 2014 Maryland Chamber of Commerce Business Hall of Fame Inductee
- 2013 Community Investor Award, Associated Black Charities
- 2012 ***The Daily Record's Maryland's Distinguished CEO Award***
- 2011 Women in the Boardroom
- 2011 Key to Pharmacy Hall Award for Contribution to Profession and University of Maryland
- 2011 Correct Rx Pharmacy Services Shero Award
- 2011 ***Baltimore SmartCEO Magazine***, Top 100 CEOs
- 2010 Business Leader of the Year, Annapolis & Anne Arundel County Chamber of Commerce
- 2010 Influential Marylander, ***The Daily Record***
- 2010 Healthcare Hero, Finalist, ***The Daily Record***
- 2010 **Girl Scouts of Central Maryland Distinguished Women's Award**
- 2010 Helen S. Schulze Award – **Alzheimer's Association**
- 2009 Tribute to Women and Industry Award, YWCA of Anne Arundel County
- 2009 **Maryland's Top 100 Women, Circle of Excellence Inductee, *The Daily Record***
- 2009 Baltimore Smart CEO Magazine, Top 100 CEOs
- 2009 ***The Maryland Gazette***, Top 25 CEOs To Know
- 2009 Network 2000, Inc., ***Roadmap to the Boardroom***, Panelist
- 2008 Chimes Hall of Fame Inductee
- 2007 Maryland Chamber of Commerce Philanthropy Award
- 2007 **Maryland's Top 100 Women, *The Daily Record***
- 2006 Future 50 Company, ***Baltimore SmartCEO Magazine***
- 2006 **Greater Baltimore Committee "Bridging the Gap" Achievement Award**
- 2006 **Maryland's Top 100 Minority Business Enterprise Awards**
- 2006 ***Smart Woman Magazine*** Bravo! Entrepreneur Award 25 Outstanding Women
- 2006 Employer of the Year, The League For People With Disabilities
- 2006 Ernst & Young Entrepreneur of the Year Award- Healthcare Services
- 2006 Maryland Chamber of Commerce Small Business of the Year Award
- 2005 ***Baltimore Business Journal*** Book of Lists, Largest Women owned Businesses (Ranked 4th)
- 2005 Business of the Year Award, Network 2000 and Daily Record
- 2005 Ernst and Young Entrepreneur of the Year Award- Regional Finalist
- 2005 **Maryland's Top 100 Women, *The Daily Record***
- 2005 Future 50 Company, Baltimore Smart CEO Magazine
- 2004 Baltimore Smart CEO Future 50 Company
- 2004 Baltimore Business Journal Top 50 Women-Owned Company (Ranked 6th)
- 2000 University of Maryland School of Pharmacy, Distinguished Alumnus of the Year
- 1995 Merck Award of Excellence
- 1994 Chairperson of the Alumni Annual Fund
- 1994 NARD Pharmacy Leadership Award

JILL R. MOLOFSKY, RPH, CCHP
VICE PRESIDENT

EDUCATION

1981 BS Pharmacy, University of Maryland Baltimore, MD
• School of Pharmacy

PROFESSIONAL EXPERIENCE

2003- Present Correct Rx Pharmacy Services, Inc. Linthicum, MD
Vice President & Owner

- Responsible for the design and layout of Correct Rx Pharmacy Operation.
- Correctional Computer Software Specialist, work with software vendor to **make any necessary changes to accommodate client's needs.**
- Customer Relations with both clients and vendors.
- Monitoring Quality Assurance Program
- Directly responsible for maintaining an operating budget of over \$50 million a year operation

1999-2003 Y&S Pharmacy Services Baltimore, MD
Director of Pharmacy Operations

- Oversaw daily operations of a large institutional pharmacy.
- Direct supervision of over 60 employees including pharmacists and technicians
- Maintained a purchasing budget in excess of \$1.5 million per month.
- Established all billing procedures for the nursing homes and assisted living facilities.
- Accountable for payroll, overtime, supplies, shipping cost, etc.

1998-1999 Stadtlanders Pharmacy Landover, MD
Director of Pharmacy Operations

- Total oversight of daily operations of 16,000 sq. ft. institutional pharmacy.
- Responsible for operating budget.
- **Direct supervision of more than 70 FTE's**

1993-1998 PharmMerica Pharmacy Services Hanover, MD
Director of Pharmacy Operations

- Supervisor of all daily operations of 68 long term care facilities and 120 correctional facilities.
- Director of Long term Care Operations.
- Supervisor of pharmacists and technicians

PROFESSIONAL ORGANIZATIONS

Maryland Pharmacist Association
Baltimore Metropolitan Pharmacist Association
American Pharmaceutical Association
Rotary Club of Baltimore

JAMES P. TRISTANI, RPH
VICE PRESIDENT PURCHASING

EDUCATION

- 1970-1973 BS University of Maryland Baltimore, MD
- School of Pharmacy
- 1968-1970 Pre-Pharmacy Programs completed at
- Community College of Baltimore Baltimore, MD
 - Johns Hopkins University Baltimore, MD

PROFESSIONAL EXPERIENCE

2003-Present Correct Rx Pharmacy Services, Inc. Linthicum, MD
Treasurer & Vice President Purchasing

- Oversee Accounting & A/R Department
- Directly involved in product bid negotiations
- Oversees all facets of product purchasing and inventory control
- Ensured inventory turns remain at 30 turns or higher

1977-Present Harford Pharmacy Inc
1986-Present Institutional Pharmacy Services
2004 MacPhail Pharmacy Inc.

President/CEO and Co-owner of family run community oriented Pharmacies located in Harford County, Maryland

- Perform all functions as President
- Develop & oversee economic strategy for the firm
- Develop new business opportunities
- Function as a Community Pharmacist

1973-1977 Revco Drugs Stores
Pharmacist

- Achieved managerial status in first year with firm
- 1976-**Manager of chain's #1 pharmacy in region**
- 1977 Offered Regional Supervisory Position.

PROFESSIONAL APPOINTMENTS

1988-1997	Member of the Board of Trustees of the Maryland Pharmacist Association
1995-1997	Appointed to Pharmacy Committee by the State board of Pharmacy to develop the first comprehensive rewrite of Maryland Pharmacy law since the 1930's
1996	President of Maryland Pharmacist Association
1997	Chairman of the Board
1997- Present	Member of the Past Presidents Council
2003- Present	Member of the Maryland Department of Health and Mental Hygiene Emergency Response Program. (First Responders)
2004	Named Pharmacy Liaison for board of Pharmacy to the Cecil County Emergency Program

HONORS AND AWARDS

- Squibb “Pro Re Nata” Leadership Award 1995
- Merck & Company Leadership Award 1995
- National Community Pharmacist Association Leadership Award 1996
- Maryland Pharmacist Association Leadership Award 1996
- Appointed to Harford County Maryland Banking and Finance Committee 2011

CHARITABLE & EDUCATIONAL ENDEAVORS

2010-Executive Producer of Children’s Ecology Musical “It’s not mean to Green”

2010-2011- Joined with Author & Playwright Jamie Kleman to form an educational foundation known as **A Bigger Boat Foundation** (BBF), serving on the Board.

A Bigger Boat Foundation is a non-profit foundation which seeks to inform children and families through educational and entertaining formats. Addressing topics pertinent to today’s youth, BBF is committed to engaging and inspiring its audience by creating musical productions, books, and media of high quality and entertainment value while delivering a message. Our ever evolving mission is to reach future generations and encourage them to become responsible stewards of environmental, personal, and social issues, and thereby creating a “boat” big enough for all to board and take part in this journey.

2001-2002 The Law Offices of Rick Halprin

Chicago, IL

Senior Vice President

- Criminal and civil rights litigation in state and federal forums.
- Appellate criminal litigation in state and federal forums.
- Researched and drafted legal memoranda, motions, appellate briefs and writs of mandamus in state and federal forums.

PROFESSIONAL APPOINTMENTS

2007 Advisory Board Member- All State Career, Baltimore Maryland

2007 Greater Baltimore Committee- Public Safety and Legal Affairs Committee

2013 Loyola University – Loyola Clinical Centers – Board Member

PROFESSIONAL LICENSURE

2002 Licensed to practice law in Illinois

**R. DONOVAN BOSSLE
CONTROLLER**

EDUCATION

1976 BS Business Administration, Towson University Towson, MD

PROFESSIONAL EXPERIENCE

2004-present Correct Rx Pharmacy Services, Inc. Baltimore, MD

Controller

- Responsible for all aspects of financial management of company.
- Assist with development of internal policies and procedures.
- Manage outside audit of year-end results.
- Supervise monthly invoicing process of all contract billing.
- Customer Relations with both clients and vendors.
- Develop and produce annual operating budget and capital expenditure.
- Analyze variances from budget and recommend cost-saving opportunities.
- Supervise staff of accounting and billing specialists.
- Manage employee payroll and benefit plans.

2003-2004 Snow Valley, Inc. Upper Marlboro, MD

Controller/CFO

- Responsible for all aspects of the financial management of the company. Supervise accounting staff.
- Worked with Owner, General Manager, and other managers and team members to develop process documents to streamline operations and eliminate redundancies.
- Developed internal control systems to improve financial controls and reporting.
- Developed and implemented budgeting system to provide basis for financial analysis and future planning.

2001-2003 Certex U.S. Columbia, MD

Group Controller

- Consolidated accounting operations
- Hired and developed accounting team to handle all accounting functions, including general ledger, accounts receivable, and fixed assets.
- Redesigned fixed asset reporting system.

PROFESSIONAL ASSOCIATIONS

Member, Financial Executives Networking Group, Baltimore Chapter

**ROBERT MATTHEWS
DIRECTOR OF MARKETING**

EDUCATION

Master's Degree, **Criminology**; Indiana State University
Bachelor of Science Degree, **Sociology**; Florida A&M University

PROFESSIONAL EXPERIENCE

2010-Present Correct Rx Pharmacy Services, Inc.
Director of Sales and Business Development
803 –A Barkwood Court
Linthicum, MD 21090

Responsible for developing new business opportunities and contracts for a leading Pharmacy Services Company that provides Pharmacy Services for over 200,000 patients in Jails, Adult and Juvenile Detention Centers and Prisons Nationwide. The Company also provides services to some Long Term Care Facilities in various locations. Also is responsible for directing and managing the Company Sales Staff.

2008- 2010 MATCO, Inc.
President, Matthews Correctional Consultants, LLC
705 Birkdale Drive • Fayetteville, Georgia 30215

President of a company providing consulting services for correctional management issues relating to privatization, detention services, transportation, and other operational concerns for offenders and detainees housed in local, state, and federal facilities to include the outsourcing of programs and services.

2007- 2008 MHM, Inc.
Vice President Detention and Law Enforcement Support Services
1593 Spring Hill Road, Suite 700
Vienna, VA 22182

Responsible for managing and directing Detention Operations for contracts with Immigration and Customs Enforcement. Also responsible for oversight of transportation contracts with the U.S Marshal Services and the Office of Detention Trustee. Provided operational direction and support for Business Development initiatives and response to proposals.

2006- 2007 MATCO, Inc.

President, Matthews Correctional Consultants, LLC
705 Birkdale Drive • Fayetteville, Georgia 30215

President of a company providing consulting services for correctional management issues relating to privatization, detention services, transportation, and other operational concerns for offenders and detainees housed in local, state, and federal facilities to include the outsourcing of programs and services.

2001 - 2005 Correctional Services Corporation
Senior Vice President, Adult Division
1819 Main Street, Suite 1000
Sarasota, FL 34236

Directed and managed the overall security and support operations of all Adult Division facilities in the company. Responsible for the initial start-up of new prisons, the day-to-day oversight of all operations and the maintenance of population levels. Ensured compliance with contractual responsibilities, state and federal regulations, and CSC policies and procedures. Developed management reports and implemented systems to ensure all correctional facilities had effective and efficient operations

1996-2001 Federal Bureau of Prisons
Regional Director, Southeast Region
Atlanta, GA

Supervised 18 Federal Prison Wardens in five states and Puerto Rico, to include 6,000 employees and 24,000 inmates. Managed an annual budget of over \$433 million.

1994-1996 Federal Bureau of Prisons
Assistant Director, Program Review Division
Washington, D.C.

Directed and coordinated the Federal Bureau of Prisons' comprehensive reviews and audits of programs in all major disciplines of correctional institution operations to include finance, security, safety, training, medical service, food service, etc. These reviews and audits were conducted for more than 100 federal correctional facilities nationwide, as well as regional offices and community corrections centers.

- 1991-1994 Federal Bureau of Prisons
Regional Director, Western Region - Dublin, CA
Supervised 12 Federal Prison Wardens in the Western United States, to include 5,000 employees and 20,000 inmates. Managed an annual budget of over \$400 million.
- 1990-1991 Federal Bureau of Prisons
Warden at the United States Penitentiary
Atlanta, GA
- 1987-1990 Federal Bureau of Prisons
Warden at the United States Penitentiary
Leavenworth, KS
- 1985-1987 Federal Bureau of Prisons
Warden at the Federal Correctional Institution
Lexington, KY
- 1983-1985 U.S. Marshals Service
United States Marshal for the District of Columbia
Washington, D.C.
- 1981-1983 Federal Bureau of Prisons
Warden at the Federal Correctional Institution
Ashland, KY
- 1980-1981 Federal Bureau of Prisons
Associate Warden at the United States Penitentiary
Leavenworth, KS
- 1979-1980 Federal Bureau of Prisons
Correctional Programs Administrator
Washington, DC
- 1978-1979 Federal Bureau of Prisons
Chief of Unit Management
Washington, D.C.
- 1976-1978 Federal Bureau of Prisons
Unit Manager - Drug Abuse Unit - the United States Penitentiary
Atlanta, GA
- 1973-1976 Federal Bureau of Prisons
Case Manager at the United States Penitentiary
Terre Haute, IN

Awards

- 1983 **The Attorney General's Award for Distinguished Service**
- 1989 **The Director's Award for Public Service**
- 1990 Correctional Service Award from the National Association of Blacks in Criminal Justice (NABJC)
- 1997 William L. Hastie Award; the highest award bestowed by the National Association of Blacks in Criminal Justice
- 1999 Georgia Chapter of NABJC established the R.L. Matthews Criminal Justice Annual Scholarship Award
- 2001 **The Director's Distinguished Service Medal for Extraordinary and Meritorious Service**

Military Service

- 1965-1969 United States Air Force

Leadership Training

- 1987 Wharton School of Management
- 1991 Princeton School of Management
- 1993 Aspen Institute for Senior Government Executives

Professional and Community Affiliations

- American Correctional Association
- National Association of Blacks in Criminal Justice
- Downtown Atlanta Rotary Club
- Trustee Board Member – Olivet Baptist Church; Fayetteville, Georgia
- Member of the Southern Federal Credit Union Supervisory Committee
- Leavenworth Rotary Club
- President of National Association of Blacks in Criminal Justice -August 2008- Present

JOHN R. NATTANS, MC, LCPC, NCC
VICE PRESIDENT PROGRAM MANAGEMENT & QUALITY ASSURANCE

EDUCATION

2001-2004	Johns Hopkins University School of Professional Studies in Business and Education	Baltimore, MD
1994	Masters of Counseling, Arizona State University	Tempe, AZ
1990	B.A. Psychology, University of Delaware	Newark, DE

PROFESSIONAL EXPERIENCE

2012-Present	Correct Rx Pharmacy Services, Inc. <i>Vice President of Program Management and Quality Assurance</i> <ul style="list-style-type: none">• Oversee all service requirements for Correct Rx.• Provide written reports and participation in interdisciplinary meetings.• Customer Relations with clients.• Integral Part of Transition Team• Member of the Correct Rx Senior Management Team	Linthicum, MD
2005-2012	Correct Rx Pharmacy Services, Inc. <i>Director of Program Management</i> <ul style="list-style-type: none">• Oversee all service requirements for Statewide Correctional Systems.• Provide written reports and participation in interdisciplinary meetings.• Customer Relations with clients.• Integral Part of Transition Team	Linthicum, MD
2002-2005	National Center on Institutions and Alternatives Youth in Transition School <i>Director of Clinical and Related Services</i> <ul style="list-style-type: none">• Coordinated all clinical aspects of nonpublic special education high school designed to serve over 90 severely emotionally disturbed and/ or mentally retarded adolescents.• Provided supervision for Master level clinicians, consults with parents, school personnel, professional colleagues and company resources.• Manage medical assistant billing and quality assurance program.• Provided individual, group and crisis counseling.	Woodlawn, MD

2001-2002 National Center on Institutions and Alternatives Maryland
Department of Juvenile Justice Collaboration

Case Assessment Specialist

- General detailed social histories and effective service plans.
- Coordinated and facilitated resource staff meetings.
- Mobilized multiple State agencies and private resources to provide services **for adolescents “committed” to Department of Juvenile Justice.**

1996-2001 National Center on Institutions and Alternatives
YIT Residential Program and York Family Centers Woodlawn, MD

Clinical Director

- Directed clinical operations for NCIA Baltimore and York adolescent residential programs.
- Ensured quality of care while doubling the size of the program.
- Supervised a team of Master level therapists.
- Served on Senior Management Team.

PROFESSIONAL ORGANIZATIONS

Maryland Criminal Justice Association

- Immediate Past President October 2013 – Present
- President November 2011 – October 2013
- President Elect November 2009 – October 2011
- Board of Directors May 2008 – Present

American Correctional Association June 2005 – Present

American Counseling Association December 1994 – Present

American Psychotherapy Association January 2009 – Present

National Board of Professional Counselors December 1994 – Present

CERTIFICATIONS AND LICENSURES

- Licensed Clinical Professional Counselor
 - State of Maryland DHMH
- Nationally Certified Counselor
 - National Board for Certified Counselors
- Certified in Cardiopulmonary Resuscitation

RACHAEL A. CAMPBELL
VICE PRESIDENT ADMINISTRATIVE SERVICES

EDUCATION

- 1989 – 1993 Carver Vocational Technical High Baltimore, MD
- *High School Diploma – State of Maryland*
 - *Vocational Diploma (Secretarial Office Practice) Graduated with honors.*

PROFESSIONAL EXPERIENCE

- 2012-Present Correct Rx Pharmacy Services, Inc. Linthicum, MD
Vice President Administrative Services
- Provide executive support to President, including but not limited to coordinating incoming and outgoing contracts, phone calls, correspondence, information mailings, and meeting notices.
 - Plan, develop, organize, implement, direct and evaluate the organization's administration function and performance.
 - Manages the preparation materials for bids and proposals.
- 2003-2011 Correct Rx Pharmacy Services, Inc. Linthicum, MD
Director of Administrative Services
- Provide executive support to President, including but not limited to coordinating incoming and outgoing contracts, phone calls, correspondence, information mailings, and meeting notices.
 - Schedules travel, conference calls and accommodations for company associates.
 - Expedites workflow of monthly medication usage reports for clients serviced.
- 2000-2003 Y&S Pharmacy Services Halethorpe, MD
Administrative Assistant
- Provided overall administrative support to President, including but not limited to coordinating incoming and outgoing contracts, phone calls, correspondence, information mailings, and meeting notices.
 - Schedules travel, conference calls and accommodations for visitors.
 - Manages the preparation materials for bids and proposals.
 - Expedites workflow of monthly medication usage for clients serviced.

1994-1999 Smith Management Construction

Arlington, VA

Administrative Assistant: 1998-1999

- Provides overall administrative support to Vice President of Business Development, including but not limited to coordinating incoming and outgoing contracts, phone calls, correspondence, information mailings, and meeting notices.
- Schedules travel, conference calls and accommodations for visitors.
- Manages the preparation materials for presentations including graphs, overheads and handouts.
- Expedites workflow of reporting. Reviews submission and reports for accuracy and conformance to policies and procedures.
- Adjusts errors and responses to complaints as appropriate.

Administrative Assistant: 1997-1998

- Provided support to Project Manager.
- Provide a high level of independent judgment and communication with high level internal and external management.
- Utilize administrative skills to ensure that requirements are met.
- Answer telephones and take accurate messages; coordinate meetings and conferences.
- Coordinate mailings to field staff.
- Process invoices for payment in a timely fashion.
- Produce weekly statistical reports for distribution.

Secretary: 1994-1996

- Provided support to Senior Project Manager.
- Provide a high level of independent judgment and communication with high level internal and external management.
- Utilize administrative skills to ensure that requirements are met.
- Answer telephones and take accurate messages; coordinate meetings and conferences.
- Coordinate distribution of incoming and outgoing mail to staff.
- Process invoices for payment in a timely fashion.
- Produce weekly statistical reports for distribution.

1992-1994 Patriarch, Inc.

Baltimore, MD

Personnel Clerk

- Conduct interview process for potential applicants.
- Employ and release personnel based on qualifications.
- Maintain all employee files.
- Back-up to the payroll clerk including but not limited to posting employee timesheets for payroll processing in a timely fashion.
- Answer telephones and take accurate messages; coordinate meetings and conferences.

JOSEPH ANTHONY DEMINO
VICE PRESIDENT OPERATIONS

EDUCATION

BS, Pharmacy, University of Maryland • School of Pharmacy	Baltimore, MD
BS, Biology/Chemistry, Mount Saint Mary's University	Emmitsburg, MD

PROFESSIONAL EXPERIENCE

2011-Present Correct Rx Pharmacy Services, Inc. Linthicum, MD
Vice President of Operations

- Design and layout of Correct Rx Pharmacy Operation.
- Hire all technicians and data entry work force.
- Supervise original data input for all new facilities.
- Work with software vendor to make any necessary changes to **accommodate client's needs.**
- Customer Relations with both clients and vendors.
- Oversee day to day operation of all dispensing functions.
- Monitoring Quality Assurance Program
- Directly responsible for maintaining an operating budget of over \$90 million a year operation

2010-2014 Millennium Pharmacy Systems, Inc. Columbia, MD
General Manager/Pharmacy Operations

- Achieved 30% growth with increased business by adding new homes and bed growth over the past 3 years.
- Maintained customer satisfaction goals (95%) while retaining customer accounts.
- Conversion of location from Gaithersburg to new larger prototype facility in Columbia.
- Reduction of inventory by decreasing days on hand, maintaining PAR levels and increasing number of turns per year.
- Reduction in delivery costs by 25% by updating and consolidating routes and controlling expenses.
- Controlled payroll budget by decreasing OT, employee expenses and controlling costs.

2001 – 2010 CVS/CAREMARK, INC.,
Pharmacy Supervisor

- Regional expert for Pharmacy Care Initiative program resulting in standardization and improvement in workflow.
- Paragon Award recipient, recognized as top supervisor in region for sales, prescriptions and customer service.
- **Pharmacy “Talent Magnet” Award winner for being top recruiter in region.**
- Chosen Area Expert for Loss Prevention initiative to improve shrink in region and area.
- Designed the project build-out to remodel and enlarge the store to accommodate increase in business.
- Successfully integrated 6 stores/sites acquired by CVS retaining 60% of the customer base and increasing business in excess of 25%.

1996-1999 CVS/CAREMARK, INC.,
Procare Pharmacy Manager

- Negotiated and established agreements with Long-Term Care Nursing facilities to service vendors during off hours and emergency situations.
- Fertility specialist and compounded medicines for this specialty.
- Lectured and spoke to local high schools on the dangers of drug abuse and looked to generate interest in the health care profession.

1993-1996 CVS/CAREMARK, INC.,
Pharmacy Supervisor

- Provided direction and leadership for the operation of 19 community retail pharmacies accounting for over \$27 million in sales and 1 million prescriptions filled annually.
- Actively participated on a team that led to a successful name change and cultural acceptance during acquisition of regional drug chains.
- Provided regulatory compliance and oversight.

1991-1993 CVS/CAREMARK, INC.,
Manager of Pharmacy Systems and Special Projects

- Enhanced the workflow and improved the operating efficiency of the Pharmacy Department by developing a prototype change in existing operational design and procedures.
- Assisted in the conversion of existing computer system to better serve the needs of the pharmacists and the customers.
- Oversaw operations of systems help desk; trained and developed new team and successfully relocated operations from Virginia to corporate office in Rhode Island.

PROFESSIONAL AFFILIATIONS

Commissioner, Maryland Board of Pharmacy

President, University of Maryland School of Pharmacy Alumni Association

Member, Academic Advisory Committee, University of Maryland School of Pharmacy

Member, Board of Visitors, University of Maryland School of Pharmacy

Member, Board of Visitors, Mount Saint Mary's University

Member, National Association of Boards of Pharmacy

President, Maryland Pharmacists Association

Member, Maryland association of Chain Drug Stores

CERTIFICATIONS

Certified Immunizer, American Pharmacists' Association Pharmacy-Based Immunization Delivery. Licensed in Maryland, Virginia and Washington, DC

Certified Trainer, American Pharmacists' Association Pharmacy-Based Immunization Training

Licensed Pharmacist, Maryland, Virginia and Washington, DC

PIC/Team Leader, Store #2066: 2001-2002

- Sent to this store to stabilize operations, customer service and staffing issues, and to rebuild sales and local market share.

PIC/Team Leader/Trainer, Store #1286: 1998-2001

Macedon, New York

- Sent to this store to stabilize operations, customer service and staffing issues, and to rebuild sales and local market share.
- Training of new pharmacist hires (multi-district).
- Mentored Pharmacy Technician Trainer and wrote and taught a CPhT course for Pharmacy Technicians (100% pass rate for three years).

Floater Pharmacist/Trainer: 1997-1998

Richmond, Virginia

- Traveled the entire state of Virginia to provide staff support and operational trouble shooting directly to several District Managers (2007 position title would be Regional Support Pharmacist).
- Wrote, and implemented a training program in multiple districts to prepare REVCO Pharmacists for CVS acquisition in advance of conversion team.

2003 – 2006 The Cleaning Authority

Parkville, MD

President

- Owner/Operator of a residential cleaning service, built from scratch to over 300 clients and nearly \$1 Million annualized sales, employing 23 full-time staff.

1998 – 2000 Strong Memorial Hospital

Rochester, NY

Finger Lakes Poison and Drug Information Center

Poison and Drug Information Specialist

- Provided both emergency poison and acute drug information to the lay public and health care professionals.
- Maintained clinical records and follow-up consulting.
- Prepared and presented clinical information to clinical staff.

1993 – 1997 J&S Paradise Pharmacies

Baltimore, MD

Pharmacy Technician,

- Training for front store and pharmacy staff of a 3 store independent pharmacy chain.
- Maintained over 200 accounts receivable.

1990 – 1993 Primerica Financial Services

Central Maryland

Regional Manager

- Recruiting and training of Financial Consultants for personal and small business insurance and investments, and debt management.
- Provided weekly continuing education for sales staff.

1987 – 1991 Gascoyne Laboratories, Inc., and IH Services, Inc., Baltimore, MD

Laboratory Technician

- Wet lab analysis of EPA regulated corporate effluent streams.
- Established an Aquatic Toxicology lab facility.
- Established a remote sample receiving location at IH Services sister company location.
- Provided Industrial Hygiene monitoring and site management of asbestos abatement projects.

HONORS AND AWARDS

2005 Master of Excellence Award for Customer Service and Retention
2001 – 2002 CVS Pharmacy Advisory Committee, Charter Member
1999 CVS District Paragon Award for Excellence
1997 APhA-ASP Professionalism Award
1996 – 1997 **Who's Who Among Students in American Universities & Colleges for Outstanding Merit**
1996 Charter Member, Phi Lambda Sigma Pharmacy Leadership Organization Local Chapter
1995 -- 1996 President, Phi Delta Chi Iota Chapter Professional Pharmacy Fraternity
1994 -- 1995 Vice President, Phi Delta Chi Iota Chapter Professional Pharmacy Fraternity

PROFESSIONAL AFFILIATIONS

1993 – Present American Pharmaceutical Association

May 30, 2014

PETER CROSBY
I.T. SPECIALIST / SYSTEM ADMINISTRATOR

EDUCATION

1975 – 1977 Southern Maine Vocational Technical Institute Portland, ME
Associates Degree Electronics Technology

PROFESSIONAL EXPERIENCE

2011-Present Correct Rx Pharmacy Services, Inc. Linthicum, MD
IT Specialist, System Administrator

- Environment: Windows Server 2003, XP professional, SQL server 2005/2008, Coldfusion version 7/version 8, Dreamweaver 8, VB,
- Oversees company-wide IT initiatives
- Maintains IT systems
- Directs electronic interfaces with clients
- Acts as liaison to third party IT vendors
- Develop original applications and programs for use by Correct Rx and its clients
- Troubleshoot and resolve IT issues for Correct Rx and its clients
- Assist in development of strategic long-term IT plan

2007–2011 Peoples Health Network
Senior Network Administrator

- Daily management of Windows 2003 Active Directory, Microsoft Exchange Server 2003, and Windows 2000, 2003, and 2008 application servers.
- Monitor and troubleshoot Cisco network equipment, managing an HP EVA SAN, and overseeing the operations of the tape library backup system using Veritas Netbackup.
- Created Ether channels between core Cisco switches on multiple floors at the main corporate office. Installed an ongoing management of Symantec Endpoint Protection antivirus system on a 600+ node network ensuring all servers and client are virus free and have up to date antivirus definitions.
- Installed and manage a Windows Update Service Server. Yearly testing of both onsite and offsite DR plan using backup system to restore and test full functionality of Windows servers.

2006–2007 Spire Network Services

- Provided customer support for Windows Active Directory and Cisco Networks. Configured VPNs between customer locations, setup and managed Windows Active Directory systems, aided in the installation and configuration of Cisco VoIP systems.
- Configured and tested various disaster recovery solutions including DoubleTake. Installed and supported Symantec Backupexec.

2000–2006 CII Carbon, LLC Chalmette, LA - New Orleans, LA - Kingwood, TX

Information Systems Supervisor

- Responsibilities included network administration, management of telecommunications and data communications systems, determining technical specifications and purchasing of new servers, PCs, and phone systems, the IT budget, server support for Dell and HP servers, end user support for dell laptop and desktop systems, and application support for the corporate office, 7 plants, and 1 laboratory. System installation and management experience with Windows Server 2003, 2000 and NT 4.0, Oracle 8i with ERP system, Citrix Metaframe, and Exchange 5.5 and 2003.
- Telecommunications system management and configuration includes Avaya Partner key phone systems for plants, Vodavi phone system for corporate office, and Mitel VoIP phone system for corporate office. Data communication systems support included frame relay using Cisco routers, point to point VPN tunnels using Cisco Pix firewalls for plants and lab using, and client VPNs for executives while traveling. Ethernet LANs at all locations using Cisco and Dell Ethernet switches.
- Managed IT infrastructure build out, telecomm, and data circuit installation for a move from Chalmette, LA to New Orleans, LA in 2005 to a new corporate office. Upgraded the corporate phone system to a Mytel VoIP phone system. Upgraded network operating system from Windows NT 4.0 to Windows 2003 using active directory and upgraded email system from Exchange 5.5 to Exchange 2003. Managed the integration of IT systems for the acquisition of another company adding two additional plants and 70 additional users. Performed disaster recovery of IT systems from backups after forced evacuation due to hurricanes **Katrina and Rita. Coordinated the technical build out of CII's permanent office in Kingwood, TX.**

CERTIFICATIONS

MCSE NT 4.0

CORPORATE CLINICAL TEAM RESUMES

The resumes of the Correct Rx Corporate Clinical Team assigned to manage and perform the services under the DDOC contract are provided on the following pages.

HUI SEO, PHARM D, MBA, CCHP
VICE PRESIDENT CORPORATE CLINICAL PROGRAMS

EDUCATION

2010-2011	Master of Business Administration University of Maryland, University College	Adelphi, MD
1999-2000	ASHP Pharmacy Practice Residency <ul style="list-style-type: none"> • Walter Reed Army Medical Center 	Washington, DC
1994-1998	Doctor of Pharmacy, University of Maryland <ul style="list-style-type: none"> • School of Pharmacy 	Baltimore, MD
1988-1992	BA, University of Maryland	College Park, MD

PROFESSIONAL EXPERIENCE

2012 - Present	Correct Rx Pharmacy Services, Inc.	Linthicum, MD
	<i>Vice President Clinical Programs</i> <ul style="list-style-type: none"> • Responsible for developing clinical initiatives to improve patient outcomes. • Break new ground in the delivery of clinical pharmaceutical care by implementing disease state management clinics for pharmacists to provide direct patient care in correctional facilities. • Provide oversight of delivery of care by clinical staff through direct supervision, evaluations, and audits; serve as a mentor and manage the resolution of practice related challenges of clinical staff 	
2006-2011	Correct Rx Pharmacy Services, Inc.	Linthicum, MD
	<i>Corporate Director of Clinical Programs</i> <ul style="list-style-type: none"> • Responsible for developing clinical initiatives to improve patient outcomes. • Break new ground in the delivery of clinical pharmaceutical care by implementing disease state management clinics for pharmacists to provide direct patient care in correctional facilities. • Provide medication use evaluations through P&T meetings for correctional facilities and consultant chart reviews for long term care facilities. • Clinical Responsibility for the state of Maine contract. • Establish Psychiatric Clinical Pathways for large national medical and mental health vendors. • Certified in Medication Therapy Management. • Oversee Clinical Initiatives and Pharmacists Inventions • Calculate the Return on Investment for pharmacy management activities 	

2004-2006 Coram Healthcare

Columbia, MD

Director of Pharmacy

- Oversee daily pharmacy operations.
- Supervise six pharmacists, three patient service representatives, and three pharmacy technicians.
- Ensure compliance with USP 797.

2002-2004 Walter Reed Army Medical Center

Washington, DC

Formulary Manager/Clinical Pharmacist

- Manage a \$44.4 million budget.
- Review and authorize contract procurement for the Department of Pharmacy.
- Create and apply pharmacoeconomics programs to control drug expenditures.
- Design and review drug utilization reports to monitor trends in drug utilization.
- Maintain drug database used by the Army, Air Force, and Navy.
- Oversee daily operations of the Supply and Support Section.
- Ensure compliance with national drug contracts for the Department of Defense and Veterans Administration.
- Coordinate the Pharmacy and Therapeutics Committee and implement its policies.
- Provide direct patient care in an ambulatory medicine clinic.
- Provide clinical pharmacy services for multidisciplinary care team in the Medical Intensive Care Unit.

2001-2002 Second Infantry Division, Eighth Army USA

South Korea

Division Pharmacist

- Manage Army pharmacy operations in 18 battalion aid stations and three health clinics.
- Supervise pharmacists, technicians, and combat medics.
- Train Army medics to function as pharmacy technicians and to provide pharmacy services.
- Conduct site visits to ensure compliance with standards identified by Joint Commission on Accreditation of Healthcare Organization (JC).
- Participate as young voting member in the Pharmacy Therapeutics Committee and the Medical Evaluation Subcommittee for the Korean Peninsula.

1999-2001 Walter Reed Army Medical

Washington, DC

Chief, Outpatient Pharmacy

- Oversee daily operations of the Outpatient Pharmacy.
- Supervised pharmacists and technicians.
- Implemented, operated, and maintained the Baker APS automated dispensing system and Pharmacy 2000 software.
- Develop use of palm operating systems to track prescription errors and Pharmacy interventions.

- Accountable for resolving patient issues, including pharmacy benefits, complaints, drug information, and making recommendations to physicians.
- Participate in multidisciplinary care team in the Medical Intensive Care Unit.

PUBLICATIONS, RESEARCH AND PRESENTATIONS

“Stability of OKT3 in Normal Saline When Given as a Continuous Infusion”

Hui W. Seo, Rebecca Viola, and Kevin Stiles Walter Reed Army Medical Center, Washington DC.	1999
Publications by Army Pharmacists Walter Reed Army Medical Center, Washington DC	1999
IV PUSH Administration Guide- WRAMC PAM 40-67 Walter Reed Army Medical Center, Washington DC	1999
Food and Drug Interactions Americans Pharmaceutical Association and FDA Pamphlet Rockville, Maryland	1999
Invasive Candida Infections in ICU Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1998
Comparison of Amphotericin B Lipid Formulations Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1998
Guidelines for the Treatment of Neutropenic Fever Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1999
Osteosarcoma Oncology Grand Rounds Walter Reed Army Medical Center, Washington DC	1999
Ewing’s Sarcoma Oncology Grand Rounds Walter Reed Army Medical Center, Washington DC	1999
Management of Neuropathic Pain Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1999

May 30, 2014

Drugs in Hypertension Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1999
Antibiotic Dosing in Continuous Renal Replacement Therapy Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1999
Special Drug Level Monitoring Pharmacy Grand Rounds Walter Reed Army Medical Center, Washington DC	1999

CERTIFICATIONS

- NCCHC- Certified Correctional Health Professional
- APhA Certified Medication Therapy Management
- Certified Cardiopulmonary Resuscitation

HONORS AND AWARDS

2002	Army Commendation Medal- 18 th Medical Command Seoul, South Korea
2001	Army Commendation Medal- Walter Reed Medical Center
2000	Army Commendation Medal- Walter Reed Medical Center
1999	Army Commendation Medal- Walter Reed Medical Center

VALERIE BARNES, PHARM.D, MS, BCPS
DIRECTOR OF PHARMACOECONOMICS, SENIOR CLINICAL PHARMACIST

EDUCATION

2009-2011	Masters of Science in Applied Pharmacoeconomics University of Florida	Gainesville, FL
1995-2001	Doctor of Pharmacy, Florida A&M	Tallahassee, FL

PROFESSIONAL EXPERIENCE

2009-present Correct Rx Pharmacy Services, Inc. Linthicum, MD
Senior Clinical Pharmacist

- Perform formulary management services for corporate correctional contracts to maintain high levels of patient care with clinically appropriate and cost effective medications.
- Conduct quarterly Pharmacy and Therapeutics meetings to review site performance indicators with key medical providers and staff. Performance trends reported include formulary and non-formulary utilization, percentage of clients receiving medication, prescription ordering volume and psychotropic utilization.
- Present disease state spending trends to identify variations in disease state spending. Drivers for increased or decreased utilization are identified and recommendations are made where appropriate.
- Medications are by both quantity used and cost to identify opportunities to maximize patient outcomes while containing costs.
- Educate key medication personnel and staff regarding new FDA approvals, new warnings and alerts on medications, and relevant pharmacy issues.
- Conduct medication room inspections to ensure compliance with regulatory agencies.
- Reviews and approves drug therapy regimens to assure their appropriateness for the individual patient considering the dose, route and schedule of administration, compatibility with existing medication regimen, and cost.
- Helps maintain the system of controlled substance inventory, distribution, and quality control.

2006-2009 PharMerica

Beltsville, MD

Pharmacy Operations Manager

- Oversee day-to-day operations of a long-term care pharmacy servicing 15+ skilled nursing facilities.
- Distribute relevant pharmaceutical information to facilitate the ability of nurses, administrators, and medical practitioners to make informed clinical decision regarding their patients.
- Analyze quality assurance metrics to ensure our service level commitment and meet organizational goals.
- Perform drug utilization reviews for short-stay residents and residents who have recently experienced a significant change of condition.
- Analyze and compile facility reports related to the average number of routine and PRN medications and psychotropic drug use to ensure residents are treated effectively using the least amount of medications.
- Analyze facility usage reports to identify high cost medications and prescribing trends to reduce facility and patient cost.
- Monitor pharmacy and physician compliance with therapeutic interchange program.
- Manage and implement quality improvement programs regarding customer service, medication errors, and maintenance of service level commitments.
- Coordinate and respond to customer concerns.
- Provide feedback to corporate regarding customer relations and status of quality improvement programs.
- Ensure compliance with all regulatory agencies including Federal and state agencies.
- Pharmacy Clinical Externship Preceptor for Howard University.

2004-2006 Heartland Pharmacy

Woodridge, IL

Pharmacy Consultant

- Performed chart reviews for 1,000 nursing home residents.
- Participated in monthly and quarterly quality assurance committees with interdisciplinary staff.
- Conducted drug regimen review to identify drug interactions, contraindications, suboptimal therapies and therapeutic interchange opportunities.
- Perform pharmacokinetic dosing for Aminoglycosides and Vancomycin.
- Ensure proper utilization of psychotropic medications and compliance with gradual dose reduction guidelines
- Performed drug regimen reviews to ensure appropriate dosage, proper durations and elimination of unnecessary medication.

2001-2004 Osco Pharmacy

Chicago, IL

Staff Pharmacist/ Respiratory Care Pharmacist

- Dispensed medication pursuant to physician order.
- Provided seminars and private consultations to patients with asthma to identify and eliminate asthma triggers.
- Communicated with physicians to ensure asthma therapy consisted of proper use of maintenance medications to decrease the number of asthma exacerbations.
- Analyzed and reported information to assess the benefit of disease state management in the retail setting.

PUBLICATIONS

Barnes, V. “HIV Vaccine” Dose. Volume 3(2) pp. 16-18 (2010)

Shaik, M.S., O. Ikediobi, V.D. Barnes, J. McSween, N. Kanikkannan and M. Singh. Long-circulating monensin nanoparticles for the potentiation of immunotoxin and anticancer drugs. *Journal of Pharmacy and Pharmacology*, 53:617-627 (2001).

PRESENTATIONS

“Talk About Frayed Nerves” An Overview of Neuropathic Pain – presented at the 2009 ASCP Midyear Meeting.

**HEATHER A. HURLEY, PHARMD, BCPS
SENIOR CLINICAL PHARMACIST**

EDUCATION

Doctor of Pharmacy May 2001
Wilkes University, Nesbitt School of Pharmacy
Wilkes-Barre, Pennsylvania
Cum Laude honors graduate

Liberal Arts Associate in Arts May 1996
Broome Community College
Binghamton, New York

POST GRADUATE TRAINING

ASHP Accredited-Pharmacy Practice Residency July 2001- July 2002
Saint Luke's Hospital of Kansas City
Kansas City, Missouri

PROFESSIONAL EXPERIENCE

Senior Clinical Pharmacist April 2013- present
Correct Rx Pharmacy Services
Linthicum, Maryland

Work with all members of the corporate clinical team, in performance of; drug utilization review, medication therapy management, non-formulary medication review and approval, on site facility audits to ensure compliance with all regulatory standards and conduction of Pharmacy and Therapeutics meetings for onsite administrators and clinicians. Provide ongoing education of Correct Rx and client staff regarding new FDA approvals, new warnings and alerts on medications, drug shortages and relevant pharmacy issues.

Clinical Specialist II, Transplant March 2005- March 2013
University of Maryland Medical Center
Baltimore, Maryland

Provide both in-patient and outpatient clinical pharmacy services for the kidney-pancreas and liver transplant programs. Pharmacy services included management of medications under a collaborative practice agreement, precepting of students and residents and staff education. Also worked to ensure adherence to all industry and investigator initiated research protocols, and participated in various clinical research initiatives.

May 30, 2014

Decentralized Pharmacist, ICU/Transplant
Mayo Clinic, Rochester Methodist Hospital
Rochester, Minnesota

January 2003- March 2005

Initiated services and serve as a primary resource for inpatient Kidney-Pancreas transplant service, as well as provide staffing coverage for liver transplant and the associated ICU.

Decentralized Pharmacist, Medical-Surgical
Mayo Clinic, Rochester Methodist Hospital
Rochester, Minnesota

August 2002-December 2002

Responsible for order entry and clinical monitoring of surgical patients from a variety of services.

Part-Time Pharmacist
Marsh's Sun Fresh Pharmacy
Kansas City, Missouri

September 2001- July 2002

ACADEMIC APPOINTMENTS

Program Director
ASHP Accredited-Transplant Pharmacy Residency
University of Maryland Medical Center
Baltimore, Maryland

August 2006- April 2013

Residency Graduates:

Elizabeth Hetterman, PharmD, BCPS- Clinical Pharmacist, Transplant; University of Illinois at Chicago; Jennifer Deyo, PharmD - Clinical Pharmacist, Transplant, University of North Carolina; Megan Highbaugh PharmD, BCPS- Clinical Pharmacist, Transplant- Baylor Medical Center at Dallas; Brian Masters, PharmD- Clinical Pharmacist Transplant-Methodist Hospital, Houston, Texas; Bennett Noell, PharmD-graduation June 2013

Adjunct Clinical Faculty Member
Wilkes University
Nesbitt School of Pharmacy
Wilkes-Barre, Pennsylvania
Provide yearly specialty lecture in PHA 525.

September 2009-present

Clinical Assistant Professor
University of Maryland
School of Pharmacy
Baltimore, Maryland

January 2006- present

Provided a variety of didactic lectures in transplantation PHAR 525, 554, 555, 562. Precept students on both transplant elective and medicine clinical rotations, and student summer research elective PHMY 539.

Transplant Residency Surveyor
ASHP Commission on Credentialing
University Health System San Antonio

March 2013

Transplant Residency Surveyor
ASHP Commission on Credentialing
The Mount Sinai Hospital

May 2012

Transplant Residency Surveyor
ASHP Commission on Credentialing
University of California San Diego

June 2011

Adjunct Clinical Faculty Member
University of Missouri- Kansas City
School of Pharmacy
Kansas City, Missouri

September 2001-July 2002

PUBLICATIONS

Haririan, A, Nogueira, Kambiz, Z, Aiyer, R, Hurley, H, Cooper, Matthew, Klassen, D, Weir, M, The Independent Association Between Serum Uric Acid and Graft Outcomes After Kidney Transplantation. *Transplantation*. 2010; 89(5): 579-579.

Manitpistikul W, Wilson N, Cooper M, Gurk-Tuner C, Hurley H, Rasetto F, Kukuruga D, Barth RN, Philosophie B. Rescue Therapy for Early Antibody Mediated Rejection with a Proteasome Inhibitor: A case report. *Clinical Transplantation*. 2009: 461-3.

A Haririan, B Kiangkitiwan, D Kukuruga, M Cooper, H Hurley, C Drachenburg D Klassen, The Impact of C4D Pattern and Donor-Specific-Antibody on Graft Survival in Recipients Requiring Indication Renal Allograft Biopsy. *American Journal of Transplantation*. 2009; 9: 1-10.

Noguiera JM, Haririan A, Jacobs SC, Weir MR, Hurley HA, Al-Qudah HS, Phelan MW, Drachenberg CB, Bartlett ST, Cooper M, The Detrimental Effect of Poor Early Graft Function After Laproscopic Live Donor Nephrectomy on Graft Outcomes. *American Journal of Transplantation* 2008; 8: 1-11

Noguiera JM, Jacobs SC, Haririan A, Phelan MW, Weir MR, Seliger SL, Hurley HA, Cooper M, A single center comparison of long-term outcomes of renal allografts procured laproscopically versus historical controls Procured by the open approach. *Transplant International*: 21 (2008) 908-814.

Hurley HA, Haririan A., Corticosteroid Withdrawal in Kidney Transplantation: The Current Status. *Expert Opin Biol Ther*. 7(8)1137-1151.

Krajicek BJ, Kudva YC, Hurley HA. Potentially Important Contribution Of Dextrose Used as Diluent to Hyperglycemia in Hospitalized Patients. *Diabetes Care* 28: 981-982.

Kies SJ, Pabelick CM, Hurley HA, White RD, Ackerman MJ. Anesthesia for Patients with Congenital Long QT Syndrome: Literature Review and Recommendations *Anesthesiology*. Vol 102, No 1: 204-210.

Lucas AJ, Hurley HA; Basic Bibliographies: Fever. *Hospital Pharmacy*. vol 37, No 12: 1351-1354.

PEER REVIEW ACTIVITIES

Pharmacist Letter- Expert Reviewer February 2013
“Walking the Thin Line with Transplant Medications”

ASCAP Chapter Pulmonary and Preventive Care September 2012
Solid Organ Transplant Medication Management

Journal of Pharmacy Technology July 2011
Belatacept Post Kidney Transplantation

LECTURES

“Immunosuppression Basics: How Every Pharmacist Can Make a Difference” January 2013
Clinical Updates in Pharmacotherapy Conference
University of Maryland Medical Center
Baltimore, Maryland

“Immunosuppression: Where Have We Been and Where are We Going?”
Transplant Grand Rounds August 2012
University of Maryland Medical Center
Baltimore, Maryland

“Clinical Pharmacokinetics: CNI’s and M-Tor Inhibitors” Two Hour Elective Lecture University of Maryland School of Pharmacy Baltimore, Maryland	Annually 2008-2012
“Induction and Rejection Therapies” Greater Chesapeake Chapter International Transplant Nurses Society Baltimore, Maryland	September 2010
“Transplant Immunology” Two Hour Immunology ISAT Lecture University of Maryland School of Pharmacy Baltimore, Maryland	April 2010
“Renal Transplantation” Two hour ISAT lecture University of Maryland School of Pharmacy Baltimore, Maryland	Annually 2006-2011
“What You Can Expect After Transplantation... At Least Drug Wise” Transplant Patient Education Series University of Maryland Medical Center Baltimore, Maryland	January 2009
“Kidney Transplantation” Two hour therapeutics lecture Wilkes University Nesbitt School of Pharmacy Wilkes-Barre, Pennsylvania	Annually 2007-2012
“Immunosuppression in Liver Transplantation” GI Fellow Education Series University of Maryland Medical Center Baltimore, Maryland	February 2008
“Immunosuppression Protocol Primer” Transplant Coordinator Education Series University of Maryland Medical Center Baltimore, Maryland	January 2008
“Immunosuppression/ Protocol Review” Nephrology Fellow Education Series University of Maryland Medical Center Baltimore, Maryland	Annually 2006-2010

“Immunosuppression Basics- What Every NP Should Know...” November 2007
Nurse Practitioner Grand Rounds
University of Maryland Medical Center
Baltimore, Maryland

“Transplant Pharmacology: Keys to Medication Management August 2007
In Organ Transplant Recipients- Post Transplant Medical Complications”
Sponsor: TG Medical Education, LLC
Morton’s Steak House
Baltimore, Maryland

"Managing Medications, The Buck Stops Where?" April 2007, Feb 2009
Transplant Patient Education Series
University of Maryland Medical Center
Baltimore, Maryland

PRESENTATIONS

**“The Effect of Induction Therapy on Pancreas Transplant Outcomes:
Lessons Learned Following a Decade of Change”** July 2012
Hurley H, Masters B, Barth R, Bartlett S, Bromberg J, Cooper M
TTS Congress Poster Presentation
Berlin, Germany

**“Very Rapid Steroid Withdrawal is Not Associated with Increased
Early Rejection in Hepatitis C Liver Transplant Recipients”** June 2012
S. Fayek, H. Hurley, T. Woodroof, R. Munivenkatappa, R. Barth,
J. LaMattina, B. Philosophie
ATC Poster Presentation
Boston, Massachusetts

**“Unmet Drug Information Needs and Adherence to Immunosuppressant
Drugs after Kidney Transplantation”** June 2012
F. Pradel, M. Campbell, L. Bradley-Baker, H. Hurley, M. Cooper
ATC Poster Presentation
Boston, Massachusetts

**“Role of Health Literacy on Kidney Transplant Patients Immunosuppressant
Drugs Information Needs”** June 2012
Campbell ML, Pradel FG, Bradley-Baker L, Mullins CD, Hurley H, Cooper M
IPSOR Annual Meeting Poster Presentation
Washington, DC

- “Outcomes of Renal Transplantation in HIV Recipients Is Too Little Costing Too Much?”** May 2011
M. Highbaugh, H. Hurley, J. Nogueira, R. Barth, S. Bartlett, M. Cooper
ATC Podium Presentation
Philadelphia, Pennsylvania
- “Transplant Glomerulopathy (TG): Histological Features And Impact on Graft Outcome”** May 2011
B. Kiangkitiwan, D. Kukuruga, H. Hurley, C. Drachenberg, A. Haririan
ATC Poster Presentation
Philadelphia, Pennsylvania
- “Outcome of Acute Antibody-Mediated Rejection (AAMR) After Treatment With Plasmapheresis (PP)/ IVIg in Renal Allograft Recipients”** May 2010
H. Hurley, T. Richards, J. Noguiera, M. Cooper, D. Klassen, A. Haririan
ATC Poster Presentation
San Diego, California
- “Kidney Transplant Patients’ Immunosuppressant Drug Information Needs”** May 2010
F. Pradel, L. Bradley-Baker, M. Campbell, L. Wagner, H. Hurley, M. Cooper
ATC Poster Presentation
San Diego, California
- “Association between C4D Staining in Kidney Transplantation and Donor Specific Antibody”** May 2008
B. Kiangkitiwan, C. Drachenberg, M. Cooper, M. Riveros-Angel, D. Kukurugua, H. Hurley, M. Kennedy, D. Klassen, A. Haririan
ATC Podium Presentation
Toronto, Ontario
- “The Prevalence of Donor Specific Antibody after Kidney Transplantation and its’ Associated Risk Factors”** May 2008
D. Kukurugua, B. Kiangkitiwan, M. Cooper, R. Beattie, H. Hurley, M. Kennedy, D. Klassen, A. Haririan
ATC Poster Presentation
Toronto, Ontario
- “The Role of Uric Acid as a Risk Factor for Worse Graft Outcomes after Kidney Transplantation”** May 2007
A. Haririan, K. Zandi-Nejad, J. Noguiera, H. Hurley, E. Owens, A. Chandraker, M. Cooper, D. Klassen, S. Jacobs,
ATC Poster Presentation
San Francisco, California

- “Effect of Pre-Donation Estimated GFR on Recipient Renal Function After Live Donor Kidney Transplantation”** May 2007
 J. Noguiera, A. Haririan, M. Cooper, M. Weir, H. Hurley, S. Jacobs,
 ATC Poster Presentation
 San Francisco, California
- “Differential Effects of Thymoglobulin Depletion and Basiliximab Induction in Sensitized Patients Undergoing Renal Transplantation”** May 2007
 B. Philosophe, H. Hurley, K. Butler, E. Schweitzer, L. Campos,
 M. Cooper, R. Barth, S. Bartlett
 ATC Poster Presentation
 San Francisco, California
- “Impact of Induction Agents on Renal Recipient Outcomes of the First 1000 Laparoscopic Donor Nephrectomies at a Single Institution”** May 2007
 M. Cooper, J. Noguiera, A. Haririan, H. Hurley, S. Jacobs, E. Schweitzer,
 L. Campos, R. Barth, B. Philosophe, S. Bartlett
 ATC Poster Presentation
 San Francisco, California
- “Variables Affecting Outcomes of Dual Kidney Transplants”** July 2006
 H. Al-Qudah, B. Philosophe, H. Hurley, E. Schweitzer, L. Campos,
 M. Cooper, S. Bartlett
 WTC Podium Presentation
 Boston, Massachusetts
- “Long Term Outcomes of Dual Kidney Transplantation”** July 2006
 H. Al-Qudah, B. Philosophe, H. Hurley,
 E. Schweitzer, M. Cooper, L. Campos, S. Bartlett
 WTC Podium Presentation
 Boston, Massachusetts

PROFESSIONAL RECOGNITION

- AST- Pharmacy Committee of Practice Member Spotlight 2013
 Shock Trauma Hero Aware Recipient 2013

Recognized with other members of transplant team for excellence in the care of transplant recipients.

COMMITTEE MEMBERSHIPS

Maryland Pharmacy Coalition Committee Member	2012-present
University of Maryland Pharmacy Practice Residency Committee	2006-2013
University of Maryland Critical Care Residency Committee	2006-2013
Mayo Clinic Profiling Errors Continuous Improvement Work Group	2004-2005
Mayo Clinic Resident/ Student Steering Committee	2003-2005
Mid- West Residency Conference Rochester Planning Committee	2003-2004

PROFESSIONAL MEMBERSHIPS

Maryland Society of Health-System Pharmacists	2008-present
Legislative Committee Co-Chair	2013-present
American Society of Transplantation	2007-present
AST- Pharmacy Community of Practice	2009-present
Maryland Pharmacist Association	2006-2007
Minnesota Society of Health System Pharmacists	2003-2006
Missouri Society of Health System Pharmacists/ Greater Kansas City	
Society of Health System Pharmacists	2002-2003
American Council of Clinical Pharmacists	2001-present
American Society of Health-Systems Pharmacists	1999-present

LICENSES/ CERTIFICATIONS

Board Certified Pharmacotherapy Specialist
 Registered Pharmacist, Illinois
 Registered Pharmacist, Maryland
 Registered Pharmacist, Michigan
 Registered Pharmacist, Missouri

VOLUNTEER ACTIVITIES/ BOARD MEMBERSHIPS

Banner Neighborhoods Board Member	2013-present
Patterson Park Neighborhood Association- Safety Chair	2012-2013
President Patterson Park Neighborhood Association	2010-2011
South East Baltimore Presidents Council	2010-2011
Vice President Patterson Park Neighborhood Association	2009
Chesapeake Habitat for Humanity Jimmy Carter Work Day	2010
Breath of God Lutheran Church Summer Service Trip Chaperone	2010-2012

KAREEM A. KARARA, PHARM.D CLINICAL PHARMACIST

EDUCATION

August 2005 to May 2011 Doctor of Pharmacy
Philadelphia College of Pharmacy
University of the Sciences
Philadelphia, PA

PROFESSIONAL EXPERIENCE

July 2012 to Present *Clinical Pharmacist*
Correct Rx Pharmacy Services, Linthicum, MD

- Identify/implement clinically appropriate programs that lower the overall costs of health care.
- Conduct clinical drug reviews and monitor impact of multiple formularies.
- Review requests for non-formulary medications.
- Design, conduct, and implement research studies measuring clinical, economic, and humanistic outcomes. associated with pharmacy services.
- Conduct facility inspections to ensure compliance with all applicable state and federal regulations.
- Chair Pharmacy and Therapeutics meeting with on-site administrators, prescribers, and health staff to review facility drug utilization.
- Develop and maintain expertise in correctional health care systems.
- Prepare and conduct training appropriate for meeting the needs of the customer and staff.
- Analyze customer complaints and overall operational processes.
- Direct and facilitate the completion of special projects as assigned

June 2011 to June 2012 *PGY1 Pharmacy Resident*
Einstein Healthcare Network (EHN), Philadelphia, PA

PGY1 Pharmacy Practice Learning Experiences

Completed Learning Experiences

Medical ICU
Inpatient Anticoagulation Management
Infectious Disease Consult Service
Internal Medicine
Pharmacy Practice
Pharmacy Administration
Antimicrobial Stewardship
Cardiology
Transplant Medicine

PGY1 Pharmacy Practice Longitudinal Learning Experiences

Immunodeficiency Clinic

- Effectively communicate with other HIV health care professionals for the purpose of identifying, solving, and preventing drug related problems.
- Perform detailed medication reconciliation and evaluate potential for drug-disease/drug-drug/drug-food interactions as well as adverse drug reactions.
- Educate HIV patients on proper administration of medications and drug adherence.

Drug Information

- Participate on the Medication Use Committee for maintenance of health network formulary- prepare and present drug monographs as well as publication of newsletter updating network healthcare providers on formulary changes/medication issues.
- Participate in the Adverse Drug Reaction reporting system. Complete an ACPE accredited continuing education program.

Deep Vein Thrombosis (DVT) Treatment Program

- Assess patient eligibility for PGY1 Pharmacy Practice Resident-managed consult service.
- Communicate patient needs for ambulatory and home care services to the medical and care management teams.
- Recommend LMWH and VKA dosing utilizing current practice guidelines.
- Counsel patients on proper self-administration of LMWH as well as any drug-drug, drug-food, and adverse reactions related to drug therapy.

Precepting Doctor of Pharmacy APPE students

- Provide guidance, advice, and supervision to general medicine students.
- Evaluate students on weekly formal case presentations.
- Assist students in the application of evidence-based medicine and resolving patient related issues.

Medication REACH Program

- Effectively coordinate the transition of patients from the hospital to home with focused attention on safe medication management.
- Perform medication reconciliation to ensure continuity in transitions of care.
- Review discharge medications for potential drug-drug, drug-disease interactions and dosing related errors.
- **Educate patients on how to take medications, review each medication's purpose, provide customized instructions, and discuss possible side effects.**
- Follow up with patients over the phone within 72 hours of discharge and again at 30 days.

August 2010 to May 2012	<i>Automated Dispensing Systems Project Leader</i> NewCourtland Elder Services, Philadelphia, PA
May 2009 to August 2009	<i>Paul G. Cano Legislative Intern</i> American Society of Consultant Pharmacists, Alexandria, VA
May 2006 to May 2010	<i>Pharmacist Intern and CPhT</i> CVS/Pharmacy, Bridgewater, NJ

KEY PRESENTATIONS

Karara, K. Diabetes Education: State and Pharmacy Partnership Goes Beyond Medication Treatment. *Corrections Today*. 2013. (accepted for publication)

Karara, K. HIV Pharmacotherapy Review. *Advance RN*, December 2011. Available at: <http://nursing.advanceweb.com/Features/Articles/HIV-Pharmacotherapy-Review.aspx>.

Karara, K. Health Care Triangle: Patients, Physicians, and Pharmacists. Pennsylvania Pharmacists Association Student Newsletter. March 25, 2010.

Karara, K. "House Energy & Commerce Committee Accepts 'Independence at Home' Act Pilot Program as Amendment During Health Bill Markup". American Society of Consultant Pharmacists. July 31, 2009. Web. February 7, 2009. <
<http://www.earthtimes.org/articles/show/house-energy--commerce-committee,911934.shtml>>

Karara, K. "Senator Wyden and Representative Markey Introduce the 'Independence at Home' Act. American Society of Consultant Pharmacists. May 22, 2009. Web. February 7, 2009 <http://ascp.com/about/media/ascpnews.cfm>

PROFESSIONAL ACTIVITIES/AFFILIATIONS

November 2011 to Present	American Academy of HIV Medicine (AAHIVM) <i>Resident Member</i>
September 2011 to Present	Making a Difference in Infectious Diseases Pharmacotherapy (MAD-ID) <i>Resident Member</i>
August 2011 to Present	Mid-Atlantic College of Clinical Pharmacy (MACCP) <i>Resident Member</i>

May 30, 2014

October 2010 to Present American Society of Health Systems Pharmacists (ASHP)
Resident Member

June 2010 to July 2010 National Community Pharmacists Association (NCPA)
Legislative Intern

- Arranged legislative internship to further develop expertise in healthcare topics such as medication use, hospital readmissions, chronic disease prevention/management, medical home, and quality measures.

February 2009 to June 2012 Pennsylvania Pharmacists Association (PPA)

New-Practitioner Member (July 2011 to Present)

Government Relations Subcommittee Member (July 2011 to Present)

- Provide e-mail responses to PPA staff regarding thoughts on pending legislation relevant to pharmacy.

Student Member (February 2009 to June 2011)

- Completion of the Government Relations and Advocacy for Students Pharmacists (GRASP) certificate program.

March 2009 to Present Phi Lambda Sigma
Member

September 2005 to Present American Pharmacists Association (APhA), Academy
of Student Pharmacists (ASP)

Student Political Action Coordinator (Fall 2009 to Spring 2010)

- Oversaw government relations activities for one of the largest APhA-ASP chapters in the nation with 835 members

New Jersey Pharmacists Association Chairperson (Fall 2008 to Spring 2009)

- Managed student-relations activities that facilitated interaction with NJPhA

APhA Advocacy National Key Contact (Fall 2008 to 2011)

January 2009 to 2011 American Society of Consultant Pharmacists
Student Member

Professional Licensure and Certification

September 2013 to Present	Delaware Pharmacist License License Number: A1-0004492
July 2013 to Present	Florida Pharmacist License License Number: PS 50484
April 2013 to Present	District of Columbia Pharmacist License License Number: PH100001303
November 2012 to Present	Virginia Pharmacist License License Number: 0202211883
June 2012 to Present	Maryland Pharmacist License License Number: 20647
August 2011 to Present	Pennsylvania Pharmacist License License Number: RP445988

Honors and Awards

June 2012	First Place Quality Assurance Research Project Award- Einstein Medical Center
May 2011	Pharmacy Leadership Recognition Award- University of the Sciences
August 2010	ACCP Clinical Pharmacy Challenge 4 th Place- University of the Sciences
October 2009	Medication Adherence Project 1 st Place- Pennsylvania Pharmacists Association
April 2009	Student Government President's Choice Award - University of the Sciences
April 2009	Good Government Student Pharmacist of the Year- APhA-ASP at the University of the Sciences
2005 to 2011	Merit Scholarship- University of the Sciences

DDOC ON-SITE CLINICAL PHARMACISTS RESUMES

The resumes of the Correct Rx DDOC On-Site Clinical Pharmacist Team assigned to provide services for the DDOC facilities are provided on the following pages. Upon award of the contract, we are confident that we will be able to add two (2) additional clinical pharmacists that will be equally qualified to provide services for the DDOC and represent the Correct Rx stellar reputation. All hires will be subject to approval by the BCHS Bureau Chief and Medical Director. Given the timeliness of this RFP, we are confident we will have our complete staffing requirements in place prior to the start date.

Supplemental: Correct Rx understands and is excited that this RFP requires two (2) additional on-site clinical pharmacists. We have been actively interviewing candidates for these positions since October 2013 and have already identified several qualified professionals. As the DDOC is aware, Correct Rx hires pharmacists that are highly credentialed to include completion of a post graduate residency. Upon award, Correct Rx will move quickly to make offers to these candidates. We are hopeful that these prospective candidates will join our team and that they will be paired with the three onsite pharmacist who will be retained in their current positions.

The DDOC will be well served by Correct Rx's years of experience providing onsite clinical services to include the DDOC facilities. There will be no learning curve. Others may claim to have the ability to provide onsite clinical services (or even suggest that these services could be delivered from offsite), but Correct Rx has a comprehensive and mature clinical offering that improves outcomes and reduces cost . . . and we now have the outcome data to prove it.

CROSBY AMOAH, PHARMD, RN DDOC CLINICAL PHARMACIST

EDUCATION

- University of Charleston School of Pharmacy, Charleston WV. Doctor of Pharmacy (Pharm.D). Cum Laude. May 2011.
- Community College of Baltimore County Baltimore, Maryland. Associate Degree in Nursing, May 2003.
- University of Education, Winneba, Ghana. Diploma in Science Education. May 1997.

PROFESSIONAL EXPERIENCE

Correct Rx Pharmacy Services, Linthicum, MD.

Clinical pharmacist, Delaware State

November 2011-Present

- Pharmacist-Run clinic; diabetes, cholesterol, hypertension etc
- Chart Review
- Drug information service
- Training and education of Providers, Nurses and Patients.
- Statistical review and drug utilization monitoring
- Medication room inspections
- P&T Meeting
- Non-formulary Review
- Diabetes Education Program at Delores Baylor Correctional Institute Newark DE.

HCR Manor Care Nursing and Rehabilitation Center, Baltimore, MD

RN Supervisor, Charge Nurse

May 2009-November 2012

- Sub-acute unit admissions
- Nursing Care of the Elderly
- Medication administration; PO/IV/Tube feeding

Union Memorial Hospital Decker Orthopedic Institute, Baltimore MD.

Registered Nurse

February 2004- July 2010

- Charge Nurse and Preceptor.
- Trained new employees, performed patient care
- Medication administration; oral and intravenous, blood product infusion.
- Leech therapy post re-vascularization procedures.
- Pain management

CVS Pharmacy, St Albans, WV

Pharmacy Intern

August 2008- December 2009

- Provided excellent customer services.
- Prepared prescriptions for customers.
- Counted pills and measured specific quantities of liquids.
- Received and verified prescription drugs for completeness and accuracy
- **Maintained patient's records and billing profile.**

Sheppard Pratt Psychiatric Hospital, Baltimore MD

Psychiatric Nurse

May 2005-July 2006

- Cared for patients with Psychiatric illnesses
- Counseled patients with suicidal ideations
- Crisis stabilization
- Anti-psychotic drug administration and monitoring

Riverview Nursing and Rehabilitation Center, Baltimore, MD

Charge Nurse

February 2004- May2006

- Medication, and tube feeding administration
- Patient care, discharge counseling, wound care.

PHARMACY SCHOOL FINAL YEAR ROTATIONS

Community Care: Walgreens Pharmacy Charleston WV.

May 31- July 2, 2010

- Filled and processed prescriptions.
- Counseled patients and answered questions regarding medications, nutritional supplements, and herbal preparations.

Research: University of Charleston School of Pharmacy WV.

July 5–August 6, 2010

- Researched on D-cycloserine permeation studies using rat skin at different solvent concentrations.
- Performed stability testing and formulation development of cardioplegic solutions for open heart surgery.

Pharmacy Administration Management Charleston Area Medical Center. Charleston WV.

Aug. 16- Sept. 17, 2010

- **Attended pharmacy and administrative heads' meetings.**
- Helped with Computer Prescriber Order Entry (CPOE) implementation
- Investigated missing medications to make medication available for patient use
- Updated pharmacy medication inventory and price list.
- Performed administrative services including organizing monthly staff meeting and staffing.

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Community Clinic: Kaiser Permanente Pharmacy, Baltimore MD.

Sept. 20 – Oct. 22, 2010

- Processed and filled prescriptions
- Counseled patients on appropriate use of medications, including nebulizers, inhalers and eye drops.
- Organized training for old and newly diagnosed patients with diabetes.
- Performed blood pressure screening.
- Contacted Physician offices to educate, recommend, and promote use of formulary medication for cost-effective pharmaceutical care.
- Followed diabetic patients and made recommendations to adjust **patients' insulin** and other anti-diabetic medication therapies where appropriate.
- Journal club presentation

Institutional Care: Med Central Hospital, Mansfield Ohio.

Oct. 25 – Dec. 3, 2010

- Reviewed daily antimicrobial report and offered recommendations to physicians.
- **Reviewed patient's profile for appropriateness of ordered medications.**
- Reviewed and processed prescriptions orders using the Sorian Computer System.
- Performed Coumadin dosage adjustment based on INR values, available **patient's specific information, and** counseled patients at the anticoagulation clinic with a clinical pharmacist.
- Assisted in preparing oncology medications.
- Serve as a drug information specialist to provide drug information to the other medical team members.

Home Infusion: Advanced Pharmacy Services, Charleston WV.

Jan. 3–Feb. 4, 2011

- **Reviewed and processed physicians' prescription orders**
- Prepared intravenous medications
- Prepared Total Parenteral Nutrition supplement for debilitated, tube-feeding patients
- **Contacted Physicians' offices, laboratory and home health nurses for needed patient information to**
Modify patient's drug therapy.
- As a member of the medical team, I professionally worked closely with case managers, nurses, Physicians and the rest of the health care team to plan and implement **patient's specific treatment goals.**

Internal Medicine: Charleston Area Medical Center, Charleston WV.

Feb. 8 -March 21, 2011

- Reviewed antimicrobial clinical guidelines
- Performed medication use evaluation on Daptomycin due to misuse and overuse of this medication.
- Performed blood pressure and diabetes screening, and recommended follow up with primary care Providers in pre-diabetes and borderline hypertensive patients. Educated and counseled patients on diet and encouraged exercise as non- drug treatment in these patients.
- Journal club presentations

Internal Medicine: Veterans Hospital, Huntington WV.

March 21-April 22, 2011

- Performed daily clinical care rounds with the department medical team
- Reviewed patients profile and provided recommendations to the medical team
- Served as drug information resource personnel to provide drug information relating treatment, adverse reaction, drug-drug, drug-disease interactions to the medical team members.
- Provided counseling to discharged patients with CHF, COPD, HTN, Diabetes relating to their discharged medications. Also educated post MI and stroke patients discharge on Coumadin and other anticoagulant drug therapies.

RESEARCH WORK & POSTER PRESENTATIONS

- “D-Cycloserine Permeation Studies”: *University of Charleston School Of Pharmacy, July 2010,*
- Stability Testing and Formulation Development of Cardioplegic Solutions: *Presented at the WV-NIH Institutional Development Award (IDeA)’s Network of Biomedical Excellence(INBRE) Symposium, West Virginia University, Morgantown WV, July 28, 2010*
- “Bachelor of Science in Pharmaceutical Sciences”: A Review. *Published in American Journal of Pharmaceutical Education 2010, 74(5) Article 96. Poster presented at the 111th Annual Meeting of American Association of Colleges of Pharmacy, Seattle, Washington, July 10-14, 2010*
- “HIV/AIDS: Whose Illness Is It Anyway?” *A continued education presentation to pharmacy staff at Mansfield Hospital, Ohio.*
- “Recognizing the different salt forms of the Amphetamines”. *An in-service for nursing staff at Highland Hospital Charleston WV, January 2011.*

- “Getting Rid of the Big Staph: MRSA, Current Challenges and Updates”: *Presented at the University of Charleston, WV. March 18, 2011.*
- “Current Updates on the Treatment of Hormone Refractory Metastatic Prostate Cancer”. *Presented to the inpatient pharmacy staff and medical residents at the VA medical center, Huntington WV, April 21, 2011.*

VOLUNTARY ACTIVITIES

- Health Fair: Church of Pentecost Annual Health Fair and Picnic, Aberdeen MD. *August 18th 2012*
- **Diabetes Education Program: Delores Baylor Women’s Correctional Institute, New Castle, DE.**
- BP/Diabetes screening: Edgewood Summit Assisted Living facility. Charleston, WV. *Spring 2011.*
- SNPhA/APhA-ASP Flu vaccination: *fall 2009*
- **West Virginia Governor’s Pharmaceutical Advocate; Office of Prescription Drug Forum and Brown Bag Session: *Asthma/BP screening, Patient counseling Feb 2009.***
- **Breast cancer walk, SNPhA/ American Cancer Society: “Hope Start Here” October 2008.**
- AIDS Awareness fundraiser, SNPhA. *February 2008 & 2009.*
- Coat and clothing Drive, SNPhA: *Items donated to the YMCA, Charleston WV. Fall 2007, 2008 and 2010.*

AWARDS & RECOGNITION

- Member of Rho Chi Pharmacy Honor society. *Inducted on April 26th 2012 at University of Charleston School of Pharmacy WV.*
- **Dean’s List: Six Consecutive Semesters 2007-2010**
- Edmond Fougera Scholarship award: *National Association of chain Drug Stores (NACDS), Fall 2009*
- Nursing Excellence Award Nominee: *Union Memorial Hospital Baltimore 2009.*
- APhA-ASP Patient counseling competition Award: *University Of Charleston School Of Pharmacy, Spring 2008, 2009&2010.*
- Appalachian Sprirt Award (Wal-Mart/CVS): *University of Charleston School of Pharmacy West Virginia, Spring 2008 & 2009.*
- Family Scholarship Award: *University of Charleston School of Pharmacy, Spring 2009.*

AFFILIATIONS

- American Pharmacy Association-Academy of Student Pharmacists, *member since 2007.*
- Student National Pharmaceutical Association, *member since 2007.*
- Christian Pharmacist Fellowship International- *member since 2007.*

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- American Society of Health System Pharmacists, *member since 2009*
- Pharmacy Delegates, University of Charleston School of Pharmacy, *member since 2007.*

LICENSES, CERTIFICATIONS & SKILLS

- Maryland State Pharmacist License
- Delaware State Pharmacist License
- Maryland State Registered Nurse
- West Virginia State Registered Nurse
- Certified Vaccination Pharmacist
- Certified Medication Therapy Management (MTM) Pharmacist
- Certified Advance Cardiac Life Support Personnel
- Certified CPR Personnel
- Skilled in Intravenous Line Insertion and Blood draws.

JAIME LEIGH MCGEE, PHARM.D
DDOC CLINICAL PHARMACIST

EDUCATION

UNIVERSITY OF MARYLAND
SCHOOL OF PHARMACY
BALTIMORE, MD
Doctorate of Pharmacy

September 1993–May 1997

WEST VIRGINIA UNIVERSITY
MORGANTOWN, WV
Pre-Pharmacy, Biology

August 1989 – May 1993

PROFESSIONAL EXPERIENCE

CORRECT RX PHARMACY SERVICES
Clinical Pharmacist

July 2012 - present

- Conduct clinical medication regimen reviews to assure appropriateness of drug use, cost effective therapy, formulary management, appropriate dosage of medications, potential drug/disease interactions, potential side effects, route of administration, appropriate monitoring, and follow-up
- Conduct medication room and medication cart inspections and ensure compliance with state, federal, and facility regulations and policy
- Conduct review of controlled substance documentation periodically to ensure compliance with state, federal, and facility regulations and policy
- Develop and provide clinical education for facility medical staff on new FDA approvals, DOC formulary updates, new clinical therapies for patients, controlled substance documentation, and relevant pharmacy issues.
- Provide drug information for medical staff
- Coordinate pharmaceutical services within the facility and help facility identify, evaluate, address and resolve any pharmaceutical concerns
- Review medication incidents in facilities and offer guidance to facility for evaluation and prevention of medication incidents
- Attend Quarterly Pharmacy and Therapeutics meetings
- Attend monthly facility meetings as requested
- Provide patient education on disease state management, medication therapy, and discharge education

PHARMERICA
LOUISVILLE, KY

January 2008 – June 2011

Manager of Clinical Operations, New England District (ME, VT, NH, CT, Western MA, DE, MD)

- Managed, mentored, and assessed consultant pharmacists in the field
- Provided guidance and mentoring to ensure quality and improve efficiency and cost containment metrics
- **Reviewed each consultant's schedule monthly to ensure all facilities were accounted for and provide guidance to maximize productivity**
- Provided technical guidance to other Directors of Clinical Operations, Managers of Clinical Operations, and consultants for the clinical consulting computer program
- Established metrics, developed and attained corporate, department and personal goals
- Reviewed consultant travel within the region and identified potential for route synergies to maximize efficiency and cost containment
- Audited and reviewed all submitted consultant expenses
- Standardization of consultant services provided
- Assisted multiple internal departments with development and implementation of clinical initiatives
- Billing standardization and assurance of complete and accurate monthly submission of consultant billable and non-billable hours
- Reviewed accuracy of consultant hours billed to facilities to ensure accuracy of billing from the regional billing office
- Assisted in training new consultant pharmacists at the corporate office and in the field
- Worked with Account Management and Sales to promote district customer growth and retention
- Reviewed monthly financial statistics, ordered supplies for consultants, maintained payroll records, completed monthly forecasting of budget, completed yearly budget for NE district, and prepared and submitted required reports timely

KINDRED PHARMACY SERVICES/PHARMERICA

May 1998 – December 2007

Clinical Consultant Pharmacist, 2nd Lead Consultant Pharmacist

- Evaluated physician medication orders for appropriateness of drug use, dosage, potential interactions, route of administration, and stability. Made recommendations for therapy changes to the physician and facility staff as appropriate
- Reviewed the drug regimen and clinical indicators of each resident as assigned at least monthly and reported any irregularities to the Director of Nursing, Administrator, and attending physicians with a written report of findings and recommendations

- Documented all communication with physicians, nurses, nurse practitioners, psychiatric consultants, dietitians, other members of the healthcare team, and patients/residents and their family members
- Knowledge of pharmacy laws and federal and state regulations concerning long-term care
- Completed quarterly or more frequent medication room and medication cart inspections, and medication pass reviews with nursing staff.
- Developed and provided clinical education for nursing staff, facility staff and patients/residents on clinical issues, regulatory issues, Medicare Part D and medication administration issues.
- Reviewed, monitored, and trended medication incidents in facilities and offered guidance to facility for evaluation and prevention of medication incidents
- Coordinate pharmaceutical services within the facility and help facility identify, evaluate, address and resolve any pharmaceutical concerns.
- Assume Lead Consultant Pharmacist role when Lead Consultant is unavailable
- Provide computer guidance and regulatory guidance to Boston/Westwood consultant team
- Beta Tester for multiple consultant pharmacist computer programs.
- Start-up new skilled nursing facilities for Boston/Westwood pharmacy and other KPS pharmacies
- Member of RxPertise committee 8/2003 – 12/2007.
- Developed standards of practice for use of the RxPertise software. Trained consultant pharmacists with RxPertise software. Provided technical guidance to RxPertise users.
- Trained new consultant pharmacists for the Boston/Westwood Pharmacy and other KPS pharmacies
- **Coordinated PharmD student's clerkship rotations.**
- Member of Kindred Healthcare Pharmacy and Therapeutics Committee 4/05 – 7/07, Coumadin and Antibiotic subcommittees 2006 – 2007. Reviewed medication classes and specific medications for possible inclusion in the KPS Formulary. Developed and guided implementation of clinical initiatives for KPS. Participated in development of Coumadin Management Program and created in-services on Coumadin for pharmacist and nursing education.
- Pharmacy liaison for MassPro and Massachusetts Hospital Association 2005 – 2006. Participated in the Medication Error project and provided education to prevent medication errors.
- Staff pharmacist at KPS Pharmacy in Westwood. Dispensed medications, verified orders, verified accuracy of filled prescription, managed other pharmacists and technicians, provided drug information to nursing staff and prescribers.

THE ICPS GROUP, INC.

July 1997 - April 1998

Clinical Consultant Pharmacist, Disease Management Specialist

- Consultant Pharmacist performing drug regimen reviews, medication passes, and physical inspections at various Skilled Nursing Facilities and Transitional Care Units.
- Pharmacist for East Boston Elder Care. Performed clinical evaluations of patients at all sites, provided clinical recommendations to physicians to manage therapy. Developed and implemented formulary in conjunction with dispensing pharmacy and medical director.
- Staff pharmacist at Bournemouth Hospital. Coordinated and supervised Drug Utilization Reviews with physicians and other pharmacists at Bournemouth Hospital.
- Osteoporosis Disease Management Program, developed list of risk factors for Osteoporosis screening of residents. Reviewed long-term care resident's clinical information for increased risk of Osteoporosis and determine if residents should be screened for Osteoporosis. Coordinated PharmD student clerkship rotations.
- Coordinated and implemented a 4 day infectious disease traineeship for consultant pharmacists in Albany, NY February 1998

PRESENTATIONS

UNIVERSITY OF RHODE ISLAND PHARMACY SCHOOL *May 1st, 2002*
Special Populations – Introduction to Consultant Pharmacy

KINDRED PHARMACY SERVICES REGIONAL CLINICAL PROGRAM *June 2003*
Round Table discussions – Advanced RxPertise Reports

MASSPRO *November 4th, 2005*
MEDICATION ERRORS IN THE LONG-TERM CARE SETTING:
COLLABORATIVE LEARNING WORKSHOP
Culture of Safety – Approach and Development of the Team

MASSACHUSETTS HOSPITAL ASSOCIATION *December 16th, 2005*
JCAHO RECONCILIATION
Long-Term Care

MASSPRO *April 15th, 2008*
JUNE 18TH, 2008
CONSULTANT PHARMACISTS' ROLE IN PREVENTING MEDICATION ERRORS
Long-Term Care

AWARDS

MASSACHUSETTS CONSULTANT PHARMACIST OF THE YEAR *September 2001*

PROJECTS

A SYSTEMS APPROACH TO QUALITY IMPROVEMENT IN *November 2005*
-2006

LONG-TERM CARE: SAFE MEDICATION PRACTICES WORKBOOK
In conjunction with MassPro, Massachusetts Coalition for the Prevention of Medication Errors, and Massachusetts Extended Care Federation

ASSOCIATIONS

AMERICAN SOCIETY OF CONSULTANT PHARMACISTS *1996 – Present*

CERTIFICATIONS

CERTIFICATION IN GERIATRIC PHARMACY *December 2005 – 2010*

**JANENE LAVONNE CORNISH, PHARM.D, MT(ASCP)
DDOC CLINICAL PHARMACIST**

EDUCATION

Virginia Commonwealth University/Medical College of Virginia May 2005
Richmond, VA Doctor of Pharmacy

University of Delaware May 1997
Newark, DE Bachelor of Science in Medical Technology, Biology (minor)

PROFESSIONAL EXPERIENCE

Correct Rx Pharmacy Services—Linthicum, MD October 2011-present
Clinical Pharmacist /Delaware Department of Corrections Team

Provide operational pharmacist support to onsite facility pharmacy technician and nursing staff to ensure proper delivery of medications both routine and emergent. Operate daily chronic care clinic in collaboration with onsite providers to provide maximize care in between 90 day Physician/Nurse practitioner visits for difficult to manage diabetic, hypertensive and dyslipidemia inmates. Evaluate charts for polypharmacy, drug-drug interactions, and potential opportunities for more cost effective disease management. Perform medication room audits to ensure sites remain NCCHC/ACA compliant. Attend onsite and DDOC headquarter meetings as required to maintain excellent communication between co-vendors and the DDOC.

Beebe Medical Center—Lewes, DE May 2008-present
Clinical Resource Pharmacist /Staff Pharmacist

Dispense and compound prescriptions, and maintain accurate patient records for outpatient prescriptions received. Provide dosing, calculation information and directions for physicians or nurses as necessary. Interact with specialty pharmacies for oncology patient clientele. Keep abreast of new developments within hospital, retail and ambulatory pharmacy. Utilize McKesson® based pharmacy and hospital wide system for pharmacy order entry and medication reconciliation for patient safety.

Key Contributions:

- Work closely with the Vice-President/Special Assistant to the President to bring about ongoing policy changes for Elder Care within the hospital. (Collaborative care initiatives--decreasing medications on profile at high risk for over prescription, fall risk, etc.)
- **Consult with multiple physicians, nurse practitioners and RN's on a daily basis in order to clarify, verify prescriber orders to ensure correct medications arrive to patient at the bedside.**

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Review side effects, discuss and avoid potential drug interactions as well as resolve medication delivery problems as necessary with technicians on delivery.

- Monitor drug-inventory management for waste control. Decreasing usage of multiple agents within single class for cost effectiveness.
- Work in concert with two arms of the hospital in both Gerontology and Oncology Services, providing both inpatient and outpatient services. Interacting with specialty **care pharmacies and specialty payer's for medications** for oncology patients, resolving discrepancies in medication orders as necessary, and billing as per pharmacy prevue.
- Outpatient Oncology Services-- Introduced new system (paper format) to monitor **visiting patient's receiving Procrit® on day of therapy**. Vital tool for pharmacist to pharmacist follow-up and better patient care allowing more detailed , treatment, lab, appointment monitoring—tool goal safety, efficacy and financially appropriate treatment every time.
- Lead the Medication Safety Committee initiative to establish new orders for Stroke management for more concise physicians/nursing process throughout the hospital. Provided medication support to the team as well as other essential elements to create a three-page multidisciplinary, all inclusive order set for stroke.
- **Speaker for the National Stroke Association speaker's bureau as well as often called** upon speaker at the Tunnell Cancer Center and Beebe Medical Center education departments, topics including: Medication Safety, Geriatric Care, Oncology and Anti-emetic Management.
- Comply with all state, government and local laws regarding medication dispensing and regulated waste. Participate in hospital preparedness drills and monitor maintenance of medication stockpiles in case of natural disaster or terroristic threat.
- Served as co-preceptor for UMES students on IPPE clinical rotation when assigned.

PharMerica Corporation—Newark, DE
Long Term Care Pharmacist

May 2007- February 2008

- Completed daily drug utilization review, communicated with nursing home staff (particularly nurses/nurse practitioner) regarding optimization of patient therapies. Performed prescription dispensing and limited processing. Monitored patients in collaboration with doctors and on-site consultant pharmacist for adverse drug **reactions. Worked in the “Narcotics Vault”, providing medications to over 20** nursing homes from Rising Sun, MD to Lewes, De. Covered twelve hour overnight on-call duty to provide nursing homes with medications needed emergently for newly admitted patients.

Target Department Stores—Dover, DE
Executive Pharmacist Per Diem,

October 2006- May 2007

- Filled and dispensed guest prescription. Performed insurance troubleshooting. Solved customer service issues and supervised technicians. Monitored inventoried **and evaluated DUR's. Collaborated with physicians and nurses daily to verify doses** and ensure patient medication compliance secondary to cost. Performed patient and family counseling as needed and when requested.

LICENSURE AND CERTIFICATES

State of Delaware Professional Licensure
Pharmacist—Current until 2012

February 2006-Present

American Society of Clinical Pathologist (ASCP)
Board of Registry-Medical Technologist

June 1997-Present

American Heart Association
Heart Saver CPR/First Aid/ACLS

April 2002-Present

PROFESSIONAL MEMBERSHIPS

Phi Delta Chi Professional Fraternity

2002- Present

American Society of Health System Pharmacist

2003 – Present

Phi Lambda Sigma (Pharmacy Leadership Honor Society)

2004 – Present

Hematology/Oncology Pharmacy Association

2010-Present

Nurses Improving Care for Healthsystem Elders
(multidisciplinary organization)

2010-Present

iii Contracting-Out (Sub-contracting)

- The use of independent contractors does not relieve the Vendor of the legal responsibility to provide timely pharmacy services to meet the serious medical needs of offenders;*

Correct Rx understands that the use of independent contractors does not relieve us of the legal responsibility to provide timely pharmacy services to meet the serious medical needs of offenders.

Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies and professional references. Correct Rx maintains a Quality Assurance credentialing spreadsheet used to monitor compliance and plan for license and certification renewal.

In this contract Correct Rx has no intent to sub-contract our centralized or on site clinical pharmacy programs. However, if we should use subcontractors, Correct Rx extends our pledge of excellence to our subcontractors, whether it is our maintenance company or our courier service; they must attend the Correct Rx orientation and abide by our policies and procedures. Most importantly, all employees and subcontractors must accept the **“Correct Way” of doing things. We verify all subcontractors’ credentials and business licenses. “If it’s the right way, it’s the Correct Way” is more than a tag line, it is a promise of excellence surrounding our entire program.**

iv Medical Records

- The Vendor will be responsible for documenting in the DDOC unified medical and mental health record established per DDOC policy H-01, Health Record Format & Contents in coordination with all other Vendors;*
- At a minimum, records must be kept separately for each offender;*
- Proper medical records not only promote continuity of care and protect the health and safety of the offender population but also provide correctional administrators with evidence of the course of treatment when individual offenders bring liability suit in court asserting that care was not provided;*
- Each Vendor must coordinate with the EMR Vendor to ensure conversion and maintenance of the paper record to an electronic record.*
- The Vendor is responsible for maintaining the offender records to be in compliance with all federal and state laws, policies and regulations including but not limited to 11 Del. C. §4322.*

Medical Records

Correct Rx will be responsible for documenting in the DDOC unified medical and mental health record established per DDOC policy H-01, Health Record Format & Contents in coordination with all other Vendors. Correct Rx understands that at minimum, records must be kept separately for each offender.

Correct Rx acknowledges that proper medical records not only promote continuity of care and protect the health and safety of the offender population but also provide correctional administrators with evidence of the course of treatment when individual offenders bring liability suit in court asserting that care was not provided. Correct Rx will coordinate with the EMR Vendor to ensure conversion and maintenance of the paper record to an electronic record. Correct Rx is responsible for maintaining the offender records to be in compliance with all federal and state laws, policies and regulations including but not limited to 11 Del. C. §4322.

Correct Rx on-site Clinical Pharmacist recommendations are carefully typed for legibility and inclusion in the medical record. To maintain flow of communication a copy of the recommendation is always given to the chronic care nurse to assist in follow up and to ensure continuity of care. The chart copy is **placed under the “out-patient consult”** section of the chart and flagged for easy provider access. The chart is then placed in the provider co-sign bin. Any urgent issues are always discussed immediately with the medical and/ or mental health providers in addition to the written recommendation(s). Each consultation is written up individually to avoid any cross referencing of information and the any contribution to potential medication errors. This documentation system also serves a proof of medical consults and appropriate decision making in the event of a grievance.

All patients records are maintained in accordance with federal and state laws, policies and regulations including but not limited to 11 Del. C. §4322. Correct Rx clinical pharmacists have been involved and contributed to the discussion on the conversion to and maintenance an electronic medical record to facilitate a smooth transition upon the EMR roll out. This collaboration will ensure that all of the medication ordering and documentation aspects of the EMR comply with federal, state and accreditation standards.

v. Outside Consultation Care

- As the safety and security costs to transport offenders to outside consultations and procedures are extremely high, the Vendor will make all reasonable efforts to provide services on-site at the facilities to minimize the inherent risk to the public related to the movement of offenders outside of the correctional environment, e.g. being able to stock chemotherapeutic agents and assist in any destruction of agents as necessary.*

Outside Consultation Care

Correct Rx understands that off-site care is an essential component of treatment for complex conditions, procedures or diagnostic tests that are not appropriately performed onsite. Outside consultation are a necessary component of comprehensive healthcare services but there are higher costs and security considerations associated with transporting patients off site.

Correct Rx believes that appropriately using medications and providing access to acute and specialty medications will help reduce the need for outside consultations. At Correct Rx, our primary goal in part, is to provide cost effective pharmaceutical care and reduce emergency room visits by identifying high risk patients and providing the necessary interventions needed to appropriately provide care for them onsite. We will make all reasonable efforts to provide services on-site at the facilities to minimize the inherent risk to the public related to the movement of offenders outside of the correctional environment, e.g. being able to stock chemotherapeutic agents and assist in any destruction of agents as necessary.

Correct **Rx's experience in Delaware demonstrates that** medication availability and same day delivery service can impact the need for outside consultations. Patients being discharged from off-site care or returning from consultations can expect to receive medications the day of their return. This ensures that the conditions which prompted outside care will not worsen or become aggravated by treatment delays. Our ability to reliably provide IV drug services, oral chemotherapy and access to specialty medications makes a significant difference in the healthcare **team's** decision to provide care onsite or transfer patients for offsite care.

Our history shows that Correct Rx is willing to perform above and beyond normal measures to ensure medications are available for high-risk patients. We have successfully provided many specialty medications such as Revlimid for chemotherapy, rabies vaccine, and omalizumab (a monoclonal antibody therapy) for persistent asthma treatment without delay. Our onsite clinical pharmacists have capitalized on their relationships with community hospitals in Delaware to ensure continuity of care. We have driven to neighboring hospitals such as Christiana Care Hospital to borrow medications such as 17 alpha progesterone vaginal suppositories and Betamethasone to stop pre-mature contractions and enhance fetal lung maturity for pregnant patients who are in danger of premature delivery at BWCI. All of these efforts are to help the Medical and Mental health Vendors offer effective in-house treatment and decrease unnecessary outside consultations and emergency room visits.

vi. Facilities and Resources

- The Vendor must ensure that the space and supplies be adequately maintained to meet the health care needs of the institutional population. Dangerous or unsanitary physical equipment, unavailability of medications can lead to violations of the Constitution. Vendor(s) are responsible for equipment purchase and maintenance contracts under \$500.*

Facilities and Resources

Correct Rx will ensure that space and supplies are adequately maintained to meet the health care needs of the institutional population. Correct Rx understands that dangerous or unsanitary physical equipment and unavailability of medications can lead to violations of the Constitution. Correct Rx acknowledges that we are responsible for equipment purchase and maintenance contracts under \$500.

As part of our quarterly pharmacy medication room inspection, Correct Rx pharmacist ensures that all medication rooms, medication storage areas and medication carts are clean, functional and well maintained. We inspect for the condition of the medication supply on hand, that expiration dates are valid and quantities on hand are reasonable in quantity to ensure site needs are met but supplies are not so large to contribute unnecessarily to cost and waste. These inspections help ensure the medication rooms are in full compliance with requirements of all accrediting and regulating bodies (DEA, board of pharmacy, board of nursing, NCCHC).

vii. Quality Improvement, Accreditation, and Compliance with Standards

Correct Rx has identified the following eight “Opportunities for Excellence” in the delivery of a comprehensive pharmacy services program: Contract Management, Operations, Advanced Technology, Clinical Programs, Accounting, Regulatory Adherence, Education, and Continuous Quality Improvement. In order to seize the opportunity, we believe in an unrelenting attention to detail, a system of ongoing assessment and feedback, industry experience, discipline expertise and a persistent commitment to provide the best patient care possible. While these eight opportunities of excellence are interdependent, Correct Rx monitors each independently for quality assurance and optimum performance (see section II.C.10.g: Continuous Quality Improvement for a more thorough description of this program).

Accreditation Experts

One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. Correct Rx Programs are all designed to meet or exceed NCCHC and ACA accreditation standards. Correct Rx has become known as correctional pharmacy accreditation specialists. Correct Rx will partner with our co-vendors and the DDOC to ensure that all DDOC facilities exceed the pharmacy standards, so that achieving and maintaining accreditation is never in question.

Compliance with NCCHC and ACA Standards

Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA). Correct Rx ensures that all pharmacy program services are compliant with NCCHC and ACA standards. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them.

- *Quality improvement is a process of ongoing monitoring and evaluation to assess the adequacy and appropriateness of the care provided and to institute corrective action as needed;*

Correct Rx acknowledges that Quality improvement is a process of ongoing monitoring and evaluation to assess the adequacy and appropriateness of the care provided and to institute corrective action as needed. Correct Rx has implemented a comprehensive Continuous Quality Improvement (CQI) program, as set forth in ACA standards and according to the NCCHC essential Standard P-A-06 and J-A-06 (compliance indicators and definitions):

1. Includes a multidisciplinary improvement committee;
2. Monitors areas specified in the compliance indicators;
3. Provides an annual review of the effectiveness of the CQI Program itself;
4. Includes two process quality improvement studies and two outcome quality improvement programs; and
5. All studies identify areas in need of improvement and effect remedial actions or strategies.

Correct Rx performs quality assurance measurements, conducts studies, compiles reports and monitors compliance both independently and as a cooperative and collaborative member of the multivendor interdisciplinary CQI teams. All goal statements, performance standards, compliance indicators, outcome measures, expected practices, policies, protocols and process indicators are formatted according to Healthcare Industry Standards. Correct Rx works collaboratively with the DDOC and BCHS to ensure that all reports are generated in an approved format and are submitted as required. Correct Rx ensures that all goals are clearly defined and driven by input from multiple internal and external sources. The outcomes are based upon service delivery, customer satisfaction, and derived from scientific data. Correct Rx assures that the outcomes are communicated effectively and utilized in future goal setting.

- *The Vendor under this solicitation is required to have its own Continuous Quality Improvement System (CQIS) to ensure the adequacy and appropriateness of care provided, and for reporting on this monthly to the DDOC according to DDOC policy;*

Correct Rx acknowledges that under this solicitation we are required to have our own Continuous Quality Improvement System (CQIS) to ensure the adequacy and appropriateness of care provided, and for reporting on this monthly to the DDOC according to DDOC policy.

Continuous Quality Improvement System (CQIS) is the management term utilized by Correct Rx to describe the process of systematically reviewing and improving existing operational processes. This process is best described as the commitment to the ongoing improvement of patient outcomes through the systematic review and enhancement of **Correct Rx's Quality Care Initiatives and their continuous improvement** over time.

Correct Rx focuses on a team approach to improvements that rewards rather than creating a culture of blame. A Corrective/Preventive Action policy is essential to an effective quality improvement program. Some of the key components of the Correct Rx corrective/preventive portion of our CQIS program are:

- Identification of the Issue
- Evaluation
- Investigation
- Analysis
- Action Plan
- Implementation
- Follow up

Correct Rx's CQIS program provides the knowledge and expertise to affect organizational improvements. Correct Rx focuses on the structure and dynamics of the entire organization to equip it with the tools and skills to meet existing and emergent challenges. As part of our CQIS initiatives, Correct Rx provides educational workshops to all of our associates. The following is a partial list of the Specific Quality Indicators that Correct Rx monitors as part of our CQIS initiatives:

- Regulatory and Accreditation Standards
- Data Management
- Organizational Effectiveness
- Discrepancies and Errors
- Pharmacist Accessibility and Advice
- Patient Medication Management/Comprehensive Pharmaceutical Care
- Formulary Reviews
- Generic Substitutions
- Therapeutic Interventions
- DURs
- Statistical Analysis
- Drug Information Services
- Dispensing Temperature Sensitive Products
- Pharmacy Appearance
- Pharmacist and Technician Appearance

Accuracy Rate: Operationally, Correct Rx ensures that error rates are minimized and the delivery schedule is followed; all DDOC standards for reports and meetings are followed; all CQIS initiatives are performed; outcomes are measured; there is compliance with medication room audits. Safety and security protocol is followed; and that regulatory adherence is enforced. Correct Rx monitors all discrepancies on a monthly basis. A discrepancy report is generated each month and reviewed by the owners of Correct Rx. As part of our QA process, all discrepancies are investigated and the results are reported at the MAC, CQI and P&T meetings and submitted to as required. Correct Rx has found that the key to establishing a successful CQI program is to make sure that it is fully understood by those who use it.

Periodic quality improvement, audits, inspections and reporting programs:

Correct Rx considers the medication room audit as a valuable tool to measure quality indicators for the DDOC. The results of the medication room audit are reviewed with the designated healthcare staff at each respective facility as part of the exit report. The medication room audit is designed to meet all State and Federal regulations. In addition, adherence to this audit ensures compliance with DDOC, ACA, and NCCHC standards. **Correct Rx's role is to improve quality initiatives that will exceed industry standards.** A copy of the written report is left with the appropriate medical staff. Corrective actions are documented and followed for compliance. The following areas to be audited include but are not limited to:

- ✓ Medication Storage
- ✓ Medication Procedures
- ✓ Compliance with Regulations and Standards
- ✓ Compliance with Policies and Procedures
- ✓ Records
- ✓ Controlled Medications
- ✓ Emergency Medication Box

The Correct Rx auditing pharmacist ensures that the pharmaceuticals stored within the facility are within the expiration date and have not been compromised through improper storage or other environmental variables such as temperature and humidity. Medications found to be out of date or compromised are removed from inventory.

Correct Rx also provides a review of Protocols, Policies and Procedures on a regular basis no less than once a year. The manuals are comprehensive with the goal of defining a safe and effective pharmacy distribution system. The revised manuals remain the property of the facility.

• The Vendor shall provide a written CQIS plan which ensures that offenders receive medically necessary care with quality equivalent to that provided to individuals not incarcerated and in accordance with the generally accepted professional standards. The Vendor must work closely with the DDOC to ensure that health care and security needs are met for all levels of offenders at all times;

Correct Rx understands that we shall provide a written CQIS plan which ensures that offenders receive medically necessary care with quality equivalent to that provided to individuals not incarcerated and in accordance with the generally accepted professional standards. Correct Rx will work closely with the DDOC to ensure that health care and security needs are met for all levels of offenders at all times.

In addition to participation in the multidisciplinary CQI programs at the facility level, Correct Rx will continue to conduct internal CQI meetings for our employees and subcontractors monthly to review measures of performance and to develop and monitor and measure quality improvement outcomes.

These meetings are held on the third Monday of the month at Correct Rx. They include all DDOC designated employees. DDOC and BCHS personnel are always invited to attend and participate. The meeting is called to order and after a review of old business, the group focuses on the following agenda items:

Administrative Issues

- ✓ The group reviews a portion of the RFP, contract, manuals, policies, procedures, protocols, directives, decrees, standards, laws and/or regulations.
- ✓ Communication: The group evaluates communication within our company, with the client and our co-vendors. Effective communication is essential to the successful delivery of services.
- ✓ Documentation: The submission of all required documentation and reports are reviewed for timeliness, effectiveness and professionalism.

Serious Incident Reports, Grievances, Offender Complaints

- ✓ The committee reports all serious incident reports, grievances, ARPs and inmate correspondence received since the last meeting.
- ✓ For all that apply, the group ensures that each was handled according to contract requirements and was documented appropriately and has been resolved successfully.

Staffing / Credentials

- ✓ The committee examines DDOC designated employee staffing patterns, vacancies, and schedules used to satisfy the requirements of this contract
- ✓ The credential folders and respective spreadsheets are reviewed highlighting any updates or the need for action to maintain compliance (training, certification, licensure, health status).

Equipment

- ✓ The status of all pharmacy equipment requests, authorizations, and delivery are reviewed.
- ✓ The group ensures that proper documentation has been completed.

Training / Staff Development

- ✓ The committee reports all training that was offered to the DDOC, the other health care contractors and our own employees. Additional training opportunities are discussed and scheduled.
- ✓ The group ensures that all training descriptions and sign-in sheets have been submitted.

New Project Status

- ✓ When Correct Rx initiates or collaborates with the DDOC or another health care contractor on a new project, an update is given at this time.
- ✓ The committee discusses plans for new initiatives and projects that may meet an existing deficiency, client need or generally improves the delivery of healthcare services.

CQI Performance Measure

- ✓ Correct Rx conducts both process and outcome CQI studies on an ongoing basis (e.g., pharmacy discrepancies, bar code scanning compliance, early refill, monthly pharmacy audit). The performance outcomes are reviewed at this meeting.
- ✓ The group discusses any changes that may be necessary to the existing studies and the possibility of introducing additional studies.

Clinical Programs and Patient Care

- ✓ The committee discusses current clinical interventions and initiatives and provides a review of the quantitative and qualitative results (e.g., infirmary rounding, nonformulary request review, diabetes management, anticoagulation therapy, inhaler utilization).
- ✓ The committee examines performance outcomes, identifies barriers to care, and makes the appropriate adjustments, while also examining additional opportunities to positively impact patient outcomes.

• The Vendor's CQIS shall include such DURs, audits, narrative reports and executive summaries necessary to identify and remedy any quality issues identified in the Vendor's operations and consistent with, and/or required by the DDOC;

Correct Rx acknowledges that our CQIS shall include such DURs, audits, narrative reports and executive summaries necessary to identify and remedy any quality issues **identified in the Vendor's operations and consistent with, and/or required by the DDOC.**

Correct Rx is extremely proud of our past performance with the DDOC contract regarding contract management and we will again set a goal of 100% compliance with the terms of the new RFP and resultant contract. Our approach continues to focus on fully understanding the requirements and then providing services that exceed your expectations. Correct Rx has two high-level dedicated managers assigned to manage the DDOC contract.

- John R. Nattans, Vice President of Program Management and Quality Assurance, manages all administrative issues related to the DDOC contract. Mr. Nattans has been managing this contract since our relationship began in 2010 and will continue to serve as the Contract Manager.

Mr. Nattans will be the main point of contact for any contract matters raised by the DDOC and BCHS.

- Valerie Barnes, PharmD, Director of Pharmacoeconomics, will provide direct oversight for the five on-site clinical pharmacists and is responsible for managing all clinical issues related to the DDOC contract.

Our managers have demonstrated their ability to perform hard work, attention to detail and uphold integrity. Their efforts have provided the Bureau with two dependable managers dedicated to the provision of an optimal pharmacy services program. Mr. Nattans and Dr. Barnes know the DDOC facility by facility and have forged meaningful professional relationships with custody, administration, BCHS, and the other health care contractors.

Correct Rx does not act as an independent entity, but as a member of a unified team working to provide healthcare for the inmates receiving care. Correct Rx believes in providing support for the other health care contractors so that we may all achieve success. Because of our key managers, Correct Rx has a reputation for solution focused teamwork designed to improve the delivery of healthcare services for all patients served by the DDOC.

• Reports of CQIS activity must be provided to the DDOC Chief, Bureau of Correctional Healthcare Services (“BCHS”) or designee (collectively herein “Bureau Chief”) on a monthly basis. Any reports provided under this contractual obligation will be labeled “This document is protected from disclosure pursuant to state and federal peer review and quality assurance privileges” and remain confidential unless otherwise authorized by the Bureau Chief, however, all documents related to offender care and quality improvement activities must remain available to the DDOC at all times;

Correct Rx acknowledges that reports of CQIS activity must be provided to the DDOC Chief, Bureau of Correctional Healthcare Services (“BCHS”) or designee (collectively herein “Bureau Chief”) on a monthly basis. We understand that any reports provided under this contractual obligation will be labeled “This document is protected from disclosure pursuant to state and federal peer review and quality assurance privileges” and will remain confidential unless otherwise authorized by the Bureau Chief, however, all documents related to offender care and quality improvement activities must remain available to the DDOC at all times.

Correct Rx believes in full transparency with the BCHS. Correct Rx has demonstrated over the past six (6) years that we are dedicated to doing our part to ensure that the total health care needs of the individual are addressed in a timely, safe and holistic manner. Correct Rx is proud of the collegial relationships we have fostered and maintained throughout the duration of the current contract and intend to continue to deliver this level of excellence under the terms of the new contract.

The BCHS and DDOC (as well as our co-vendors) know from experience that Correct Rx shares information openly and without discretion with the BCHS, which ensures the Department is aware of any and all positive progress as well as any adverse situations that may arise throughout the term of the contract. All Correct Rx employees will continue to speak openly with Bureau representatives without filter or fear of retribution.

- *All reports, data compilations, and other information submissions required by the contract shall be certified by the Vendor's appropriate supervisory employee;*

Correct Rx acknowledges that all reports, data compilations, and other information **submissions required by the contract shall be certified by Correct Rx's appropriate supervisory employee.** Accuracy and reliability are cornerstones of utilization and disease state management.

Correct Rx uses the latest software (CIPS) to ensure the accuracy of the reports we generate. Additionally, we have weekly meeting with KALOS the company that owns this industry standard software for correctional pharmacy. In these weekly meeting, we are always looking for ways to improve / tailor our reporting capabilities to meet the idiosyncratic needs of the clients we serve. There is always a testing phase to ensure the accuracy and reliability of the custom reports created. There are rigorous checks and balances performed in the testing environment prior to bringing these reports into live production. Our IT Team also performs continuous Quality Assurance to ensure the system is functioning properly.

For all utilization data and statistical reports, Correct Rx ensures that a second and final review is performed by a PharmD Clinical Pharmacist (other than the person who compiled the report) prior to submission to the DDOC. Even further and due to the need to interpret the data and provide recommendations as to the content of these reports, there is a high level of scrutiny and analysis that is conducted prior to submission. Anyone who works with data and statistical analysis understands that each report identifies areas that need further scrutiny and additional reports to verify or explain the data trends.

Correct Rx does this work for the Department as we not only provide the “what”, but the “why” and perhaps most importantly the recommendations to address these identified trends. Given the time and resources dedicated to providing this service, it is critical that the data is accurate and reliable to begin with, so we apply a tremendous amount of resources, checks and balances to ensure our data is correct.

The DDOC knows firsthand that Correct Rx provides this same level of scrutiny and attention to detail when providing program management, narrative, billing and other CQI and QA reports. Correct Rx works hard to establish and maintain a reputation of integrity. This is not something one can merely claim; it must be earned through continuous effort and expressed by the clients we serve. Correct Rx is committed to the process of earning it every day through the services we provide the DDOC.

- *Each Vendor will provide Quality Assurance, QA Metrics for BCHS monitoring of the healthcare system as stipulated by BCHS. The QA Metrics will include clinical, fiscal, operational, and other data to facilitate comprehensive monitoring of the healthcare system. Examples of the QA Metrics that will be required will be found in the QA Metrics Appendix E (CQI Indicators). The vendor shall be aware that a failure to meet the standards set forth in the QA matrix may result in a financial penalty or other off-set;*

Correct Rx will provide Quality Assurance, QA metrics for BCHS Assurance, monitoring of the healthcare system as stipulated by BCHS. The QA Metrics will include clinical, fiscal, operational, and other data to facilitate comprehensive monitoring of the healthcare system. Examples of the QA Metrics that will be required will be found in the QA Metrics Appendix E (CQI Indicators). The vendor shall be aware that a failure to meet the standards set forth in the QA matrix may result in a financial penalty or other off-set.

The DDOC has firsthand experience with Correct Rx's ability to provide QA metrics and reports with a quick turnaround and to meet the specific needs of the BCHS auditors. Here are a few examples:

- Correct Rx worked closely with Victoria Windle and Jessica Piccolo to satisfy the request of the BCHS to add the QA Metrics to the monthly utilization spreadsheets regarding Total Rx, Psych Rx and HIV Rx in a Per Client Per Month Ratio by Facility, By Level and Statewide.
- Correct Rx provides Tracy Wilkins and the BCHS team with a Total Active Medication Reports each month, which is used to facilitate patient care audits on site.
- Correct Rx began through the request of Mike Records (now for Hope Shoemaker) to audit the Monthly Discharge Medications. This then evolved onto the request for a second audit report from the BCHS Medical Director and Bureau Chief to document on a monthly basis the number of discharge medication that are dispensed and then returned to pharmacy.
- The Correct Rx onsite pharmacists provide a review of all patients who are prescribed mental health medications at the time of in-take to ensure that mental health conditions treated in the community are addressed in a timely manner in the DDOC facilities.
- Other clinical disease state and DUR-QA projects included:
 - Chart Review for appropriateness of care for all Asthma patients;
 - Reviewed health records for appropriate use of anti-coagulation medication as demonstrated by respective patient labs;
 - Reviewed health records of patients with long term nonsteroidal anti-inflammatory drug (NSAID) use and evaluated each for cardiovascular and gastrointestinal disorders based upon the increased risk factors;

- Provided a retrospective review of high cost medications dispensed to ensure cost-effectiveness
- Reviewed labs and provided recommendations for anyone with a hemoglobin A1C > 9.0 or that demonstrated an uncontrolled fasting or random blood sugar

Correct Rx is dedicated to the CQI and QA process and will continue to partner with the DDOC, BCHS, and our healthcare co-vendors to ensure that we are providing services that produce the best possible outcomes in a fiscally responsible manner.

• Clinical staff will participate in the peer review program administered by the local facility and monitored by BCHS. The Vendor will participate in ensuring that clinical staff move forward on any corrective action plan developed to correct deficiencies identified by the peer review process, random or scheduled audits or other processes. Medical Providers will receive privileges to practice in the DDOC healthcare system based on credentialing and maintenance of performance as judged by the peer review system. Providers may have privileges revoked at any time due to failure to correct performance deficiencies identified through peer review or other means or because of egregious breaches of conduct or clinical performance as judged by BCHS, Wardens or their designees.

Correct Rx will participate in the peer review program administered by the local facility and monitored by the BCHS as directed. Correct Rx will participate in ensuring that clinical staff move forward on any corrective action plan developed to correct deficiencies identified by the peer review process, random or scheduled audits or other processes. Correct Rx understands that Medical Providers will receive privileges to practice in the DDOC healthcare system based on credentialing and maintenance of performance as judged by the peer review system. Correct Rx further understands that Providers may have privileges revoked at any time due to failure to correct performance deficiencies identified through peer review or other means or because of egregious breaches of conduct or clinical performance as judged by BCHS, Wardens or their designees.

Correct Rx has assembled a Peer Review Committee that is chaired by our Vice President of Clinical Services, Dr. Hui Seo. The Peer Review Committee is responsible for providing an independent review of each clinical pharmacist on an annual basis. At Correct Rx, we strive to evaluate our clinical pharmacists based on the Objective Structured Clinical Examination (OSCE) format. The committee evaluates performance based upon evidenced based professional standards.

In addition to verifying that each clinician has an up-to-date and acceptable credential file, the Peer Review Committee assesses all of our pharmacists for core clinical competencies based on our internal in-training examinations, clinical recommendation audits, assigned clinical initiatives outcomes and clinical evaluation exercises.

In-training examinations are based on the assessment of the clinical pharmacists' knowledge post training. Clinical recommendation audits are performed on the weekly patient encounter submissions and non-formulary review recommendations. Each pharmacist has direct involvement with a statewide clinical initiative. The work of the pharmacist in relationship to the success of the initiative is evaluated by examining interventions, recommendations and outcomes. Clinical evaluation exercises are based on the actual onsite reviews of the pharmacists performing their duties, whether it is observing patient encounters or witnessing the pharmacists conduct Pharmacy and Therapeutics Committee meetings.

The peer review committee provides written recommendations that are incorporated in **the employee's goals for the next year. The recommendations are designed to improve** performance through education and training. The Peer Review Committee may also recommend changes to systems and processes.

For those employees who perform poorly on the peer review evaluation, an individualized corrective action plan is implemented. While the intent of the Peer Review Committee is to be educational rather than punitive, if it is deemed that an employee can no longer practice safely, a recommendation of termination may be carried out.

In addition, Correct Rx conducts monthly clinical roundtables headed by our Director of Pharmacoeconomics, Dr. Valerie Barnes. During these sessions, we focus on national clinical guidelines, keeping our clinical pharmacist abreast on new clinical information and community standards. Each pharmacist completes a journal review with an emphasis on randomized clinical trials that evaluate cost effective appropriate drug therapies, focusing on disease states relevant to the correctional setting.

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B. General Requirements

5. Special Accommodation Populations

The DDOC has responsibility for a number of offenders who need special accommodations;

- Disabled Offenders*
- Elderly Offenders*
- Juvenile Offenders*
- Chronically Ill Offenders*
- Mentally Ill Offenders*
- Offenders in a Diagnostic or Therapeutic “Pipeline”*
- HIV/AIDS Screening, Testing and Treatment*

Correct Rx understands there are many patients in the offender population that have special medical and mental health requirements. We will collaborate in the development of individualized treatment care plans to accommodate the special needs of offenders in DDOC custody. Our clinical pharmacists regularly collaborate with the medical and mental health vendors to best meet the needs of all patients. A core belief of our clinical pharmacy model is that a multidisciplinary approach to care produces optimum results. Our depth of experience has been an asset to our patients and healthcare partners and will continue to expand as we grow and further develop relationships with our clients and collaborating co-vendors. To achieve positive outcomes, the Correct Rx on-site clinical pharmacists will evaluate current therapy through chart reviews, patient consultation, staff education and direct provider consultation to ensure that offenders requiring special accommodations have to their healthcare needs fully satisfied.

Disabled Offenders

Correct Rx will support the DDOC and respective medical and mental health vendor to ensure the special needs of disabled offenders are met to ensure all members of the **facilities’ populations are served equally**. Depending on the nature of the disability, offenders may be more susceptible to pressure wounds, infection and pain. For patients with mental disabilities, awareness of health status and comprehension of treatment plans and medication regimens may be lacking. Our clinical pharmacist are available to help bridge existing gaps in care for this population, including wound treatment consultations, chart reviews and direct patient counseling.

Elderly Offenders

The number of elderly offenders continues to increase in correctional facilities across the country. The healthcare demands of this special population can be a challenge as many facilities are still in the process of creating protocols to accommodate geriatric care. As patients age, physiologic changes affect the way medications behave both pharmacokinetically and pharmacodynamically. Medication choice in elderly and frail offenders can be difficult due to side effect profiles and disease/drug interactions.

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Correct Rx is proficient and experienced in providing chart reviews and patient consults to the elderly where we enforce many of the quality indicator measures outlined by the Center for Medicaid and Medicare Services. Dr. Jaime McGee is the coordinator for clinical activities focused on elderly offenders and those requiring palliative care. She possesses 15 years of clinical experience with geriatric patients in skilled nursing homes, assisted living facilities, and group homes that inform our ability to accommodate this special population.

Correct Rx on-site clinical pharmacists will expand their practice to systematically offer guidance for appropriate medication options for elderly offenders. Community standards of quality indicators will be observed in this population which will include:

- Presence of nine (9) or more medications
- Unnecessary medication
- Gradual dose reductions for psychotropic medications
- Appropriate prescribing
 - **Avoiding Beer's List of Medications when possible**

Observing these quality indicators for elderly offenders will help ensure safe and appropriate prescribing in this population.

Juvenile Offenders

Youth offenders represent a special population for all correctional systems. Juveniles are often at high risk for medical and mental health disorders. Pharmacological management of health conditions in youth offenders requires special consideration. Many medications that are considered the standard of care for adults have limited studies showing their efficacy and safety in juvenile patients. Navigating through evidence-based literature to ensure juveniles receive medications that are appropriate is essential and can be seamless with a clinical pharmacist as part of the interdisciplinary team.

Juvenile offenders may require completion of pediatric vaccination series. Correct Rx will provide access to vaccinations to ensure continuity of healthcare received prior to incarceration.

Chronically Ill Offenders

Correct Rx on-site clinical pharmacists follow chronically ill offenders and improve cost effective control of chronic diseases such as diabetes, anticoagulation, asthma, HIV, and mental illness. Following national guidelines for care of these diseases helps reduce overall cost of therapy along with decreasing urgent off-site care, frequent sick call visits, and disease complications. Patients with chronic disease benefit significantly by participating in pharmacist driven chronic care clinics and educational classes.

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The pharmacy clinics allow for more frequent medication outcome assessment and regimen adjustment.

Participation in the “**Healthy Living While Incarcerated**” classes aims to empower offenders to change their modifiable risk factors for disease or complications (e.g. blood pressure, hemoglobin A1c, cholesterol levels and obesity). Our greatest “**Health Living**” success story involves one motivated participant losing 113 pounds as a result of their participation in the program.

Our experience providing onsite clinical pharmacy services for the past 3 years proves **that there’s no substitute for direct** patient care by pharmacists. While chart reviews provide one perspective of the offender (from the nurses view, other clinicians, prior office visits, etc.), the one-one-one counseling session allows the clinical pharmacist to ask questions not often thought of by other practitioners and augment the information available in the chart. A more detailed description of our statewide disease state initiatives may be found under Section B.1.

Dialysis

The management of patients with end stage renal disease (ESRD) on hemodialysis presents a significant challenge. We recognized early on in our current contract that this special needs population required extra clinical services. For more than a year now, our clinical pharmacist at JTVCC performs chart reviews and offers frequent consultations on patients on dialysis. Consideration must be given to medications which are dialyzed and those where renal function is vital to drug elimination. Understanding disease specific factors is vital for dialysis patients who often require polypharmacy in order manage the kidney disease and comorbidities present. Going forward, Correct Rx intends to continue performing comprehensive medication reviews on patients who receive dialysis, including women receiving care through other means. Opportunities for improving patient care and cost-effective utilization will be identified in the interest of patient care and the BCHS.

Mentally Ill Offenders

Medication compliance and continuity of care is of utmost importance with mentally ill offenders. Correct Rx has collaborated with the mental health co-vendor to provide a clinical pharmacist evaluation of new intakes at JTVCC. This active program exists to identify relevant mental health history and to ensure necessary therapies are continued during their incarceration. Correct Rx helps to identify psychotropic medications that **have “abuse potential” and will** recommend therapeutic interchanges where appropriate to minimize risk of diversion. Correct Rx on-site clinical pharmacists are always available for consultation with mental health vendor providers on drug interaction, side effects, and cost effective therapy for mentally ill offenders.

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Offenders in a Diagnostic or Therapeutic “Pipeline”

An offender that presents to a facility while participating in an outside clinical trial can present a number of challenges for the patient care team. Correct Rx’s team of clinical pharmacists is well versed in aspects of study design and serves as a resource and conduit for information transfer from the research study centers and the correctional facility. Our clinical contribution to managing offenders in a diagnostic or therapeutic “pipeline” will be to determine if the study therapies can or are appropriate to continue, identifying necessary monitoring needs associated with either continuation or discontinuation of an agent and gathering information to ensure that drug-drug interactions are accounted for to minimize the risk of patient, provider or general population harm.

HIV/AIDS Screening, Testing and Treatment

Correct Rx recognizes that early detection and treatment of HIV/AIDS is essential in optimizing patient outcomes and avoiding additional expense related to disease complications. Our clinical pharmacists can be instrumental in patient education regarding screening or medication selection of newly diagnosed patients. Unfortunately, HIV/AIDS continues to carry a stigma for many in community and corrections population. Patients often associate current medications with the side effects and failures of medications in the past. Our onsite pharmacists serve as a resource for patients and medical staff to dispel patient concerns and answer questions regarding HIV treatment.

Correct Rx in consultation with the medical vendor and BCHS, will provide all preferred HIV/AIDS medications for offenders diagnosed with HIV/AIDS according to current treatment guidelines established by the National Institutes of Health (NIH). As the pipeline for HIV medications continues to produce improved regimens, we will ensure their unrestricted formulary access as agreed upon by the Pharmacy and Therapeutics committee.

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B. General Requirements

6. Emergency Services and Maintenance of Automatic Electronic Defibrillators

The Vendor staff must be trained in and will use the DDOC's Automatic Electronic Defibrillators (AEDs) in each institution according to DDOC policy. The Medical Vendor will provide appropriate training in AED use and CPR training to all of their employees and subcontractors. All professional staff must be certified on the use of AEDs as well as CPR.

Correct Rx staff will be trained in and will use the **DDOC's Automatic Electronic Defibrillators (AEDs)** in each institution according to DDOC policy. Correct Rx understands that the Medical Vendor will provide the appropriate training in AED use **and CPR training to all of their employees and subcontractor's**. Correct Rx as a member of the onsite healthcare team will participate in all emergency planning, so that we will follow proper protocols and procedures in times of crisis. All of our professional staff will maintain certification on the use of AEDs as well as CPR.

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B. General Requirements

7. Suicide Prevention

Each Vendor will ensure the DDOC BCHS suicide prevention procedures are followed by all health care staff. The Vendor's suicide prevention policy, procedures, and practices shall be consistent with DDOC Policy G-05, Suicide Prevention, Policies and Procedures. The Vendor awarded the contract for mental health services shall provide all mental health related training, to include suicide prevention for the pharmacy services vendor in accordance with DDOC policy.

Correct Rx actively participates and understands the DDOC policy on Suicide Prevention Program. We have completed the mandatory initial trainings and subsequent annual Suicide Prevention Refresher courses for each clinician who provides services in Delaware. The participation of the trainings is documented in our credentialing files. Our onsite clinical pharmacists accept the responsibility to monitor, assess and refer inmates with suspected suicidal ideation to the appropriate Mental Health (MH) and/or medical vendor for proper evaluation to prevent offender patient suicide.

This is an example of how our onsite clinical team has contributed to the Suicide Prevention Program. During pharmacy disease state management clinics, close attention is given to **“key conversational topics” from inmates that would precipitate the need for an emergent MH referral.** Discussions including: a recent loss of a loved one, divorce, catastrophic illness of family/inmate, or unresolved in-prison disputes are quickly forwarded to the MH provider for additional follow-up.

Clinical example: Correct Rx received a consult for an inmate with uncontrolled diabetes. The inmate had recently been incarcerated at SCI-Pretrial. During the clinical visit the inmate stated that, **“he had not taken his medication for greater than six (6) months due to recent divorce”** and that, **“he did not have a desire to take medications”.** **The inmate was a type one diabetic (insulin dependent), he stated that he “could not remember his medication regimen and restated that he did not wish to take medications.” His current blood glucose results were reading “HI” on the glucometer at each blood glucose reading (=>599 mg/dl).** Blood glucose **“lows” were 390’s – 490’s** following insulin administration. Following discussion with the Clinical Pharmacist, he was willing to share the name of the community pharmacy, so that his home insulin regimen could be obtained. Due to his flat affect and apparent apathy the offender's mental health was discussed with the MH clinician on duty, who ordered a Mental Health evaluation for the offender in light of his current presenting symptoms and social situation.

This example illustrates the process that we have incorporated into routine practice. Correct Rx will continue to support and comply with the DDOC Suicide Prevention Program.

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B. General Requirements

8. Standards of Care

a. DDOC recognizes that standards of care are dynamic, constantly evolving, and not readily defined by a single authority. Therefore, for the purposes of this RFP, the currently accepted standards of care are defined by the multiple sources in the following list. If a Vendor uses standards different from those in the following list, they must be highlighted in the Vendor's response along with the reasons for using the standards. In addition, they must be approved by the Medical Director and Bureau Chief prior to use by the Vendor. The Medical Director and Bureau Chief must approve any change in the use of standards during the course of the contract resulting from this solicitation.

Standards of Care

Correct Rx understands the dynamic nature of healthcare practice standards. Our clinical pharmacy initiatives are based on the most updated clinical practice guidelines published by national organizations such as the American Academy of Clinical Endocrinologists and American Academy of Chest Physicians. Correct Rx does not use **“in house” protocols that differ** from currently accepted standards. It is our belief that adopting national standards of care provides an unbiased performance measure to evaluate the effectiveness of our clinical programs. We welcome the use of national treatment guidelines, protocols and evidence base panel recommendations. Any unforeseen deviation from these standards in the future will be submitted for approval by the Medical Director and Bureau Chief.

b.DDOC also recognizes that all clinical situations may not be covered in existing standards, and, in such cases, the proper course of action must be determined in conjunction with the DDOC BCHS.

In rare instances where clinical situations present that are not covered in existing standards, Correct Rx will collaborate with the DDOC BCHS to determine the proper course of action. Correct Rx clinical pharmacists have established collaborative relationships with BCHS and will continue to participate in policy creation, treatment protocol development and in review of difficult patient care plans.

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c. This list of professional regulations and guidelines is intended to be indicative of the generally accepted professional standard of care and, therefore, is not all-inclusive:

- *DDOC Health Care Policies;*
- *ACA Standards*
- *NCCHC Standards*
- *Delaware Division of Public Health regarding communicable disease management;*
- *Vendor Policies, Procedures, Guidelines and Protocols accepted by DDOC;*
- *Centers for Disease Control Protocols and Guidelines as determined applicable by the DDOC;*
- *Federal OSHA Guidelines;*
- *US Public Health Service Task Force on Preventive Guidelines;*
- *Other DDOC recognized authorities such as the Federal Bureau of Prisons, American Diabetes Association, American Medical Association, the National Commission on Correctional Health Care, American Correctional Association, and other nationally recognized professional health care organizations;*
- *State of Delaware Controlled Substances Registration regulations and Federal Drug Enforcement Agency (DEA) regulations.*

The Standards of Care utilized by the Correct Rx Clinical Pharmacy Team practicing in Delaware closely mirror those found in the:

- American Diabetes Association (ADA)
- American Medical Association (AMA)
- American College of Chest Physicians-CHEST Guidelines (anticoagulation)
- American Correctional Association (ACA) Standards
- NCCHC Standards
- Bureau of Prison Disease State Management Standards
- Centers for Disease Control (CDC)
- Delaware Division of Public Health
- State of Delaware Controlled Substances Registration Regulations
- Federal Drug Enforcement Agency (DEA)
- Federal OSHA guidelines
- Federal Affordable Care Act
- Joint Commission
- Co-Vendor policies, guidelines, protocols and those accepted by the DDOC

Correct Rx requires that our services and clinical initiatives comply with evidence based practice standards, Federal, State and accreditation guidelines, and any other protocol accepted by DDOC. It is our position that these standards offer several advantages to patients, healthcare providers and **the Department**. **Correct Rx's commitment** to implement these standards will improve patient care by offering consistency with treatment recommendations allowing patients and providers to have confidence in the recommendations submitted by the clinical pharmacist. Our healthcare partners will benefit through the additional clinical support provided by pharmacist who enforce the same standards of care.

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Ultimately the Department benefits by an improvement in care provided to the entire population and a reduction in patient complaints and litigation. Our philosophy that evidence based medicine and vetted standards of care are the foundation of our clinical programs and will continue to underlie our clinical program focus.

d. Production Environment Requirements: The DDOC requires that all hardware, system software products, and application software products included in proposals be currently in use in a production environment by a least three other customers, have been in use for at least six months, and have been generally available from the manufacturers for a period of six months. Unreleased or beta test hardware, system software, or application software will not be acceptable.

Correct Rx is only proposing the utilization of hardware, system software and application products that are currently offered by Correct Rx to all of our clients. Each of our systems have been in use and well vetted by both our clients and our IT Department. We have advocated to our clients that they independently contract with vendors. Our ability to meet the technological demands of this proposal is enhanced by both the basis of their knowledge and their experience within our industry. Our efforts in regards to integrating our pharmacy software with other offender management systems, electronic patient health records and electronic medical records, electronic medication administration records, and other software systems will prove to be invaluable. We are able to provide oversight and management requirements. Correct Rx would never utilize unreleased or beta tested software or hardware.

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B. General Requirements

9. Research

No research projects involving offenders (other than projects requiring limited information from records compiled in the ordinary delivery of services) will be conducted without the prior written consent of the Commissioner of Correction. The conditions under which the research will be conducted will be governed by written guidelines mutually agreeable to by the vendor and the DDOC. In every case, the written informed consent of each offender who is a subject of the research project will be obtained prior to the offender's participation. All Federal and State regulations applicable to such research will be fully and strictly followed, including but not limited to HIPAA regulations and Federal Office of Human Resource Protections. Research must be approved by a Human Subjects Review Board and approved by the Bureau Chief.

Correct Rx will not conduct research projects involving offenders (other than projects requiring limited information from records compiled in the ordinary delivery of services) without the prior written consent of the Commissioner of Correction. Further, Correct Rx acknowledges that the conditions under which research would be conducted would be governed by written guidelines mutually agreeable by Correct Rx and DDOC. Additionally, written informed consent of each offender who is a subject of the research **project will be obtained prior to the offender's participation. All Federal and State** regulations applicable to such research will be fully and strictly followed, including but not limited to HIPAA regulations and Federal Office of Human Resource Protections. Finally, Correct Rx acknowledges that research must be approved by a Human Subjects Review Board and approved by the Bureau Chief.

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B. General Requirements

10. Drug Free Workplace

The Vendor is to have a drug-free work place with sufficient policies to comply with Federal and State regulations and DDOC policies. The Vendor will be required to maintain and develop a urine analysis program for all employees, comparable to the DDOC's random urine analysis program for at least 5% per month of the institution's medical personnel, e.g. a facility with 200 employees must randomly test 10 employees per month. The DDOC reserves the right to review urine analysis procedures and results. The Vendor agrees to comply with any current or future drug detection initiative that the DDOC may implement applicable to vendor employees, visitors and consultants. As there are only a few employees at DOC facilities this may be accomplished through the Vendors overall drug testing program upon approval of the Bureau Chief

Correct Rx has an established drug-free work place policy and procedure that complies with Federal and State regulations and DDOC policies. **Correct Rx's urine analysis** program covers all employees. Correct Rx acknowledges that the DDOC reserves the right to review urine analysis procedures and results. Correct Rx agrees to comply with any current or future drug detection initiative that the DDOC may implement applicable to vendor employees, visitors and consultants.

Correct Rx's Drug-Free Workplace Program was adopted to ensure that we have a work environment free of the negative effects of drug and alcohol abuse. The abuse of drugs and alcohol leads to an increased number of accidents and medical claims. Our goal is to ensure that our workplace is operating efficiently and safely. We believe that early recognition is critical to the minimization of business disruption. We also believe it is **important that our employee's personal privacy and dignity be respected, while** maintaining a safe and productive workplace. The Drug-Free Workplace policy covers all employees of Correct Rx.

Correct Rx prohibits any employee deemed intoxicated or under the influence of illegal substance(s) from reporting to work at the beginning of a shift, after a meal, or at any time with any evidence of having consumed alcoholic beverages or having used any illegal drug.

While employees who are authorized to operate company-supplied vehicles for personal use may consume alcohol while not on company time or on company business, such **employees are never permitted to drive while drinking or "under the influence" of** alcohol (defined in Maryland as a blood alcohol content of higher than 0.05). Such activities are cause for disciplinary action up to and including immediate termination and/or arrest by proper authorities.

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Employees taking prescription drugs must do so according to their physicians' direction, and must follow the manufacturer's directions when taking over-the-counter drugs. Employees in safety-sensitive positions who take prescription or over-the-counter drugs must immediately notify a supervisor of his or her drug use if reported side effects of **that drug include anything that could alter the employee's physical or mental ability to perform his or her job.**

If an employee admits to the use of or to being under the influence of alcohol, illegal drugs, or prescription drugs that could interfere **with the employee's ability to perform his or her job, the employee's Supervisor** is notified and Correct Rx determines the appropriate disciplinary action. An employee reasonably suspected of having consumed alcoholic beverages or illegal drugs when reporting for duty, while on duty, or while on Correct Rx property must submit to a medical examination or drug test if the employee **denies recent use or being under the influence and the employee's Supervisor feels that** the employee is under the influence.

Failure to abide by this Standard of Conduct will subject an employee to disciplinary action, up to and including termination of employment, and may subject the offender to personal, legal, and financial liability.

Testing Procedure

Testing is the only objective way to know with certainty whether an individual has drugs or alcohol in his or her system. For the safety of all employees, Correct Rx may require an employee or job applicant to submit to drug and/or alcohol testing under the following circumstances:

Job Applicant Testing. Correct Rx may require qualified applicants, upon a conditional offer of employment, to take and successfully pass a drug and/or alcohol test.

Testing for Cause. Correct Rx has the right to require any employee to submit to drug and/or alcohol testing whenever:

- a. Correct Rx believes from the facts and circumstances that the employee **has violated any part of Correct Rx's Drug-Free Workplace Policy.**
- b. Correct Rx reasonably believes from the facts and circumstances that the employee is or has been using or is under the influence of an illegal drug, controlled substance, or alcohol while working.

Post-Accident Testing. Correct Rx has the right to require any employee to submit to drug and/or alcohol testing when he or she is involved directly in an accident or is near an accident which involves or could have involved physical injury to any other person or, in the opinion of Correct Rx, damage to its property, customer or to the general public.

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For the purpose of this policy, an accident is any unplanned, unexpected, or unintended event which occurs on company property, during the performance of company business, or during working hours, or which involves a company-supplied motor vehicle or other vehicle being used for company purposes.

Random Testing. Correct Rx has the right to require any employee to submit to random drug and/or alcohol testing.

Government-Required Testing. Correct Rx has the right to require any employee to submit to testing as required by the government.

Post-Rehabilitation Testing. Correct Rx has the right to require any employee who has participated in a drug or alcohol dependency treatment program for drug- or alcohol-related counseling following a confirmed positive drug or alcohol test to undergo testing at any time within two years following treatment.

Correct Rx has adopted the following testing procedures:

- All drug testing samples are to be taken by or under the supervision of a laboratory or clinic selected by Correct Rx.
- All samples will be tested and analyzed by a laboratory certified for such tests by the State in which the laboratory operates and in accordance with the guidelines of the United States Department of Health and Human Services.
- All positive test results shall be confirmed by re-analysis of the same sample by a confirmatory test using different chemical principles that is of equal or greater accuracy than the prior drug or alcohol test.
- Correct Rx will pay all costs for drug or alcohol testing and any confirmatory tests required by this policy.
- When an employee receives a confirmed positive test result, Correct Rx will provide the employee with:
 - A copy of the test report indicating the test results;
 - A copy of this policy;
 - **Where applicable, notice of Correct Rx's intent to take disciplinary action or change the condition of the employee's employment;**
 - Notice to the employee that he or she has a right to have the same sample tested by another laboratory, certified by the State in which the employee works, at his or her own expense; and

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- o Notice to the employee that he or she has a right to be given an opportunity to explain the positive test results, in confidence, to Correct Rx within five (5) business days of receipt of notification of a confirmed positive drug or alcohol test. This opportunity to explain a positive test **result in no way replaces Correct Rx's right to take disciplinary action, up to and including termination of employment.**

Consequences

Any employee who refuses to be tested when so required will be subject to disciplinary action, up to and including termination of employment. Any attempt to alter or substitute the specimen provided will be deemed to be a refusal to take the drug test, and will subject the employee to disciplinary action up to and including termination of employment.

Any employee who tests positive for controlled or illegal substances or alcohol, or who **violates any aspect of Correct Rx's Drug-Free Workplace Policy**, even if it is a first offense, may be subject to discipline, as determined by Correct Rx, up to and including termination. Correct Rx reserves the right to determine whether to allow the employee an opportunity to seek and obtain rehabilitation before imposing discipline.

Inspection Procedure

Whenever Correct Rx has reasonable suspicion to believe that an employee may be in possession of alcohol, drugs or drug paraphernalia on company property, Correct Rx may search company property or may request that the employee empty the contents of his/her personal effects or personal vehicle on company property. Failure to abide by this Standard of Conduct will subject the employee to disciplinary action, up to and including termination of employment and may subject the offender to personal, legal, and financial liability.

Confidentiality Policy

All records of drug tests and results will remain the confidential property of Correct Rx. Such records shall not be provided to any person or entity without the written permission of the person whose records are sought. These records will be maintained **separately from the employee's personnel file, and will be made available only to those who need to know the contents and make decisions regarding the employee or any other aspect of his or her employment.**

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B. General Requirements

11. Vendor Employee Orientation

a. The Vendor will describe in detail the personnel orientation program and provide copies of the outlines or manuals in the appendix of its proposal. Prior to any “Start date” the Vendor will be responsible for ensuring that all new personnel are properly cleared for entry into the facility and provided with orientation and appropriate training regarding medical practices and security. Orientation regarding other institutional operations will be the responsibility of the DDOC. The Vendor will ensure that all newly hired, personnel receive 40 hours of pre-service training and orienting within the first 30 days of employment. Orientation refers to that training necessary to ensure the employee’s ability to perform the tasks associated with his/her position and to familiarizing the employee with the specific institution(s) he/she is assigned to and the Vendor’s responsibilities, policies, and procedures at that (those) institution(s). Moving employees among facilities will require orientation to the new facility. Employees not oriented to a specific facility and begin work will incur a Management Fee price adjustment.

Correct Rx has provided a detailed description of our personnel orientation program below and a copy of our “Personnel Policies and Procedures Manual” is attached in the appendix of this proposal as required. Correct Rx understands that Prior to any “Start date” we will be responsible for ensuring that all new personnel are properly cleared for entry into the facility and provided with orientation and appropriate training regarding medical practices and security. Orientation regarding other institutional operations will be the responsibility of the DDOC.

Correct Rx will ensure that all newly hired, personnel receive 40 hours of pre-service training and orienting within the first 30 days of employment. Correct Rx acknowledges that Orientation refers to that training necessary to ensure the employee’s ability to perform the tasks associated with his/her position and to familiarizing the employee with the specific institution(s) he/she is assigned to and the Correct Rx’s responsibilities, policies, and procedures at that (those) institution(s). Correct Rx understands that moving employees among facilities will require orientation to the new facility and that employees not oriented to a specific facility who begin work will incur a Management Fee price adjustment.

Correct Rx provides an extensive competency based new hire orientation program for all employees joining the Correct Rx Team. There are several components to our comprehensive program detailed below: 1) Correct Rx Personnel Orientation; 2) Correctional Facility Orientation; 3) Position Specific Orientation and 4) Site Specific Orientation.

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COMPETENCY BASED ORIENTATION

Correct Rx ensures that the New Hire orientation is competency based. Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies, professional references and ensures compliance with the DDOC Staff Credentialing requirements.

During the Personnel Orientation each employee reviews all Personnel Policies and Procedures, is afforded the opportunity to ask questions and is provided with a personal copy of this manual. The Correctional Facility Orientation phase provides a thorough **review of Correct Rx's Policies and Procedures for Correctional facilities and the (Delaware) Department of Correction Policy Manual.** Correct Rx also reviews policies and procedures as well as terms of the RFP during each monthly CQI meeting, which provides an opportunity to solidify learning.

The process of shadowing during the position specific orientation phase allows for a skills based assessment of competency under the guidance of a proven professional. This allows Correct Rx to identify individual strengths and weaknesses, which will inform scope of practice, staff development opportunities and areas of expertise. In addition to the annual peer review program and employee evaluation, each clinical pharmacist is required to participate in the monthly Clinical Roundtable. These sessions provide the opportunity for ongoing skill assessment and development as well as clinical practice updates.

The site specific orientation is outcome driven (e.g., issuance of the DOC ID Badge, documentation of successful completion of 40 hour pre-service orientation, 40 hours of **annual training, continued licensure requires professional CE's, annual CPR certification, etc.**).

CORRECT RX PERSONNEL ORIENTATION

This phase of orientation is designed to provide our employees with the history and mission of Correct Rx, while acquainting new team members with our culture, rules, performance expectations and benefits. Each new employee meets with a member of our Senior Management Team and is walked through our operations and introduced personally to their new teammates. The individual also tours the administrative offices and is introduced to our billing, management and clinical teams. All new associates are **personally introduced to the owners of the company setting the tone for our "Open Door" Policy.**

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At the monthly Correct Rx staff meeting for all employees, all new employees are recognized and welcomed to our team with a round of applause, which helps establish our belief in teamwork and accomplishment through hard work, integrity and acknowledgement.

Each new employee participates in a scheduled orientation session in which every page of our **“Personnel Policies & Procedures Manual”** is reviewed. All employees are provided with their own personal copy of this manual and are required to sign an acknowledgement that the manual was received, reviewed and understood. The following list identifies the topics covered in this manual:

- The History of Our Company
- Our Mission Statement
- Employee Relations
- Business Policies and Guidelines
- Your Health and Safety
- Drug-Free Workplace Policy
- Integrity
- Compensation Package
- Employee Benefits
- Your Career with Correct Rx Pharmacy Services
- Acknowledgement to the Handbook

Correct Rx’s belief that our employees are our strength and our investment in the future begins on day one. All employees are engaged in designing their career path and goals as a part of the orientation process.

CORRECT RX CORRECTIONAL FACILITY ORIENTATION

This phase of orientation is designed to introduce our new employees to the Policies and Procedures we have created for correctional facilities. Correct Rx has developed many pharmacy policy and procedure manuals for specific correctional facilities and statewide systems. These policies and procedures are intended to ensure compliance with all laws and regulations related to pharmacy operations. All Correct Rx employees participate in **a scheduled session in which every page of the “Correct Rx Policy and Procedure Manual for Correctional Facilities”** is reviewed. The purpose of this Policy and Procedure manual is to serve as a professional guide to pharmaceutical services for the correctional facility and to:

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- Enhance patient care and assure the safety of offenders receiving pharmaceutical services
- Ensure regulatory compliance
- Promote consistency and continuity
- Communicate important policies
- Aid in personnel training
- Increase legal protection
- Aid in evaluating performance

POSITION SPECIFIC ORIENTATION

All Correct Rx employees receive position specific orientation as well. This phase focuses on two (2) key elements – understanding the job description and hands-on training by a more experienced team member. All positions at Correct Rx have well **defined job descriptions. The importance of practicing within the scope of one's** responsibility and understanding the role of others is highlighted. Understanding the responsibilities of each member of the interdisciplinary team is important to ensuring the provision of competency based services. As our company continues to evolve over time, these descriptions are consistently updated to reinforce accuracy. As part of the annual performance evaluation, all employees are asked to provide a review of their job descriptions. At the time of hire, all new employees are given a copy of their job descriptions to review. In order to bring the description to life, Correct Rx has designed a shadowing program in which the new employee works alongside a more experienced employee performing the same or similar role. This personal approach affords the new **employee with training and guidance specific to the individual's need. Also, the length** of this personal orientation is based upon actual performance as observed by a supervisor or manager.

Additionally, Correct Rx has an active CQI committee that contributes to the orientation program. One of the responsibilities of the CQI committee is developing, revising, and **maintaining Correct Rx's Emergency Preparedness Plans.**

All new employees must review these plans with the supervisor of their department within the first 30 days of starting work to ensure they understand how these plans will be implemented and any responsibilities they may be asked to fulfill. Each employee reviews these plans on an annual basis.

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SITE SPECIFIC ORIENTATION

This phase of orientation applies to specific site assignments. For example, in this contract any Correct Rx employee assigned to provide services in a DDOC facility will require the following:

1. Proper background clearance for entry into the facility and ID badge issuance;
2. Orientation and training regarding healthcare practices, security, and emergency preparedness;
3. 40 hours of pre-service training and orientation (in addition to the required 40 hours of annual training);
4. DDOC orientation regarding institutional operations;
5. Security Orientation with DDOC staff, refresher training and DDOC-wide and site specific policies and procedures;
6. DDOC Code of Ethics;
7. Code of Conduct and drug-free workplace;
8. DACS training;
9. Blood-Bourne Pathogens;
10. Suicide Prevention Training and follow-up training;
11. PREA Training

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b. At a minimum, Vendor employee orientation will address DDOC security, DDOC Code of Ethics, Code of Conduct, drug free workplace, DACS training, blood-borne pathogen policies, and Vendor policies and procedures. Vendor employee orientation will include a security orientation with DDOC staff. Moving employees among facilities will require orientation to the new facility. The Vendor will require all personnel to attend security orientation refresher training when the DDOC offers it. This training will include DDOC-wide acceptable use policies and procedures and be tailored to meet the conditions of each institution.

As detailed above, the Correct Rx orientation program exceeds the minimum requirements. Specifically, Correct Rx will address DDOC security, DDOC Code of Ethics, Code of Conduct, drug free workplace, DACS training, blood-borne pathogen policies, and Correct Rx policies and procedures. The Correct Rx employee orientation will include a security orientation with DDOC staff. Moving employees among facilities will require orientation to the new facility. The Vendor will require all personnel to attend security orientation refresher training when the DDOC offers it. This training will include DDOC-wide acceptable use policies and procedures and will be tailored to meet the conditions of each institution.

c. PREA - In accordance with the Federal Prison Rape Elimination Act of 2003, and Delaware Department of Correction Policy Number 8.60 "Prison Rape Elimination Act", the Vendor agrees to report allegations of sexual misconduct promptly, fully cooperate with investigation inquiries and participate in training as directed by the Department of Correction, Employee Development Center, within thirty (30) days of entering into contract. The Vendor, vendor staffs (including volunteers and subcontractors) must agree to abide by Department of Correction Policy 8.60. The Vendor acknowledges that all allegations of staff sexual misconduct and/or harassment will be investigated and, if substantiated, will result in discipline up to and including termination.

In addition, all substantiated cases will be referred to the Delaware Department of Justice for prosecution. Failure to report such misconduct, delays in reporting, or material omissions shall be grounds for termination. If the Department policy is modified, the Vendor will be notified and shall comply. See State of Delaware, Department of Correction Policy Number 8.60 "Prison Rape Elimination Act."

In accordance with the Federal Prison Rape Elimination Act of 2003, and Delaware Department of Correction Policy Number 8.60 "Prison Rape Elimination Act", Correct Rx agrees to report allegations of sexual misconduct promptly, fully cooperate with investigation inquiries and participate in training as directed by the Department of Correction, Employee Development Center, within thirty (30) days of entering into contract. Correct Rx, Correct Rx staffs (including volunteers and subcontractors) agrees to abide by Department of Correction Policy 8.60. Correct Rx acknowledges that all allegations of staff sexual misconduct and/or harassment will be investigated and, if substantiated, will result in discipline up to and including termination.

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Correct Rx understands that all substantiated cases will be referred to the Delaware Department of Justice for prosecution and that failure to report such misconduct, delays in reporting, or material omissions shall be grounds for termination. Correct Rx acknowledges that if the Department policy is modified, Correct Rx will be notified and shall comply. Correct Rx has reviewed and understands State of Delaware, Department of Correction Policy Number 8.60 “Prison Rape Elimination Act.”

(Please refer to section II.C.3 – Prison Rape Elimination Act of our response for a more robust discussion)

e. Suicide Prevention - Vendor will ensure that each new employee receives the required suicide prevention training and follow-up annual training. This training is approved by the DDOC and provided by the Mental Health Vendor.

Correct Rx will ensure that each new employee receives the required suicide prevention training and follow-up annual training. Correct Rx understands that this training is approved by the DDOC and provided by the Mental Health Vendor.

d. The Vendor will provide written documentation of orientation completion to the DDOC within 30 days of completion. The Vendor will maintain and submit to the BCHS and site Warden, a comprehensive list of Vendor and DDOC personnel trained, the subject of each training, dates, and status of required retraining/updating.

Correct Rx will provide written documentation of orientation completion to the DDOC within 30 days of completion. Correct Rx will maintain and submit to the BCHS and site Warden, a comprehensive list of Correct Rx and DDOC personnel trained, the subject of each training, dates, and status of required retraining/updating.

f. Cybersecurity Training – All Vendor employees who access DDOC computer systems or have responsibilities set forth in this proposal must receive initial Cybersecurity training before beginning work and annually thereafter.

Correct Rx employees who access DDOC computer systems or have responsibilities set forth in this proposal will receive initial Cybersecurity training before beginning work and annually thereafter.

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B. General Requirements

12. Medical Administrative Committee (MAC) Meetings

- a. Medical Administrative Committee (MAC) meetings will be held at least monthly with all Vendors, Wardens (or designated representative) of each institution and the BCHS, as required by the NCCHC and ACA Standards. The meetings are intended to provide organized and consistent communication between site administrative staff and medical personnel on issues and/or concerns. A separate meeting will be held for each level 5 and level 4 facilities.*

Medical Administration Committee (MAC) Meeting

Correct Rx's onsite clinical staff will participate in monthly MAC meetings at DDOC level four and level five facilities. Correct Rx believes that the MAC meeting provides an opportunity to communicate issues that impact DDOC staff, BCHS and our co-vendors in a meaningful and organized manner. This belief has been strengthened by our voluntary participation in MAC meetings in the current contract. Our clinical pharmacists are currently attending MAC meetings at SCI, SCCC, JTVCC and HRYCI on a monthly basis. We also often attend monthly MAC meetings at BWCI, especially if medication or clinical pharmacy related concerns exist. Our involvement in MAC meetings has been valuable to our own CQI processes and we look forward to an expanded role in MAC meetings in the new contract.

- b. The Pharmacy Vendor is responsible for participating in and being in attendance for the MAC meetings and submitting all CQIS documentation for review at the meeting.*

Correct Rx will attend and actively participate in MAC meetings where we will provide CQI documentation for review. Currently, Correct Rx MAC reporting primarily includes a medication utilization review for variances > 10% for each month; with a goal of decreasing areas of modifiable excess spending monthly (i.e. early refills). Other required reports include: (1) percentage of inmates on medication, (2) percentage of inmates on psychiatric medications, (3) non-formulary medication utilization, (4) controlled substance use and (5) pharmacy error reporting (6) summary of inspection/audits for the facility. Correct will collaborate with BCHS and our co-vendors to ensure that our MAC reporting format remains informative and focused on areas of value to DDOC. Correct Rx will report our Continuous Quality Improvement documentation at each meeting to update DDOC on current projects and significant findings identified.

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B. General Requirements

13. Controlled Substance Destruction Waste Disposal

The Vendor will provide all appropriate disposal systems for the Controlled Substances destruction process and for developing a hazardous waste plan, describing the collection, storage, removal by a BCHS approved transporter to haul infectious waste and obtaining the appropriate documentation of the hazardous waste receipt by the transporter. The Pharmacy Vendor shall coordinate this process with the Medical Vendor as appropriate.

In 2008, Correct Rx submitted a proposed procedure for the removal and destruction of unwanted end-user controlled substances that is consistent with FDA recommendations and compliant with DEA regulations, 21 CFR 1307.2. These procedures were approved by the Delaware Board of Pharmacy and subsequently adopted for use today. These procedures were developed to decrease risk for diversion and reduce the environmental impact on surface water contamination.

Currently, Correct Rx clinical pharmacists dispose of all unwanted end-user controlled substances at a minimum of every two weeks at all DDOC facilities. The destructions are performed onsite in the presence of one other licensed healthcare professional. The final waste is discarded as regular waste by facility staff which reduces the unnecessary financial burden of costly biohazardous waste management. This procedure was adapted from FDA guidelines for disposal of prescription medications.

The unwanted controlled substances are removed from the packaging, e.g., blister card or medication vial. Patient identification is removed from the packaging. The medications are rendered unidentifiable by crushing using a pill crusher or similar device. The resulting powder is wetted with water to form a slurry mixture. The slurry is then made unusable by mixing with an undesirable and absorbent substance like kitty litter or coffee grounds. The waste is contained within protective plastic to prevent leakage.

All destructions are documented on a destruction log that includes the following information: dispensing pharmacy, prescription number, name of medication, strength, dosage form, quantity, date of dispensing, and date of destruction. All witnesses sign and date the destruction log. Documentation of the disposal shall be done in a bound red book and maintained onsite for a minimum of five (5) years.

In many instances, the destruction process is triggered more often because of the close coordination between pharmacists and **healthcare services provider's** nursing staff. At BWC I where majority of pregnant females receive methadone to prevent or treat opioid withdrawal, there has been the need to frequently destroy controlled substances on a weekly basis and as needed due to the frequent changes in medication dosages.

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Correct Rx also provides destruction of personal property medications; this includes both controlled substances and non-controlled substances. These personal property medications are accompanied by a personal property form from the Medical Vendor with a description of the medication (name of medication is provided when possible) and the quantity. Each identified controlled substance is counted by the pharmacist and witnessed by licensed personnel from the Medical Vendor. Quantities are verified with the documentation on the personal property form and documented on the Correct Rx Controlled Substance Disposal Log. The unwanted medications are destroyed using the same policy as stated previously. After each personal property medication is destroyed, the pharmacist documents the destruction on each personal property form and provides all the personal property forms with destruction documentation to the Medical Vendor in addition to a copy of the Correct Rx Pharmacy Controlled Substance Disposal Log.

Currently, destruction is scheduled every two (2) weeks and may be completed ahead of **that schedule or “on demand,” if the facility has a specific identified need. This timely** destruction and removal of all unused controlled substances from storage areas in this manner has greatly improved accountability and handling of controlled substance to reduce the risk of diversion and abuse at all DDOC facilities.

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B. General Requirements

14. Inspections

As required by the DDOC, ACA, NCCHC Standards, the Delaware Division of Public Health, and any other relevant standards, the Vendor will conduct safety and sanitary inspections, as required. The Vendor's managers are to conduct formal inspections of all areas at least monthly, with follow-up inspections to ensure corrective action has been taken. Written reports are required, with copies sent to the site's Warden's Office. A record of these findings is to be included as an agenda item at the monthly Medical Administrative Committee (MAC) Meeting.

Quarterly Inspections and Audits

Correct Rx utilizes a comprehensive medication room audit tool to exceed standards set by DDOC, ACA, NCCHC, the Joint Commission and Delaware Division of Public Health. The goal is to establish, maintain, and even exceed standards in between accreditations - not just to prepare for them. Even the best maintained organizations are faced with the continual challenge of training replacement staff or staying informed of new changes in standards of practice. Our pharmacists are able to identify deficiencies and provide recommendations or specific training to address issues that threaten quality and safety of medication use.

The inspections are performed by the on-site clinical pharmacists who understand **BCHS'** Vision and are knowledgeable about the safe, reliable and cost effective utilization of medications in correctional healthcare. In addition, the management team will routinely inspect the medication rooms because we believe it is essential to ensure that consistency is maintained with the individual pharmacists used to perform the quarterly audits. The personal attention and face to face interaction that DDOC receives yields better outcomes because the relationship makes it easier to communicate expectations, discuss issues, and resolve problems.

The Correct Rx on-site clinical pharmacists have provided valuable insight into the operations **at the facility level. Correct Rx's inspections of medication storage areas,** inventory records, and administration processes are required by all states as an integral and routine practice to ensure quality, safety, and compliance with state and federal laws. Correct Rx has consistently provided this service to DDOC.

Comprehensive Audit Tool

Correct Rx developed a comprehensive audit tool that exceeds regulatory requirements. The use of the audit tool standardizes the condition of the medication rooms for each DDOC facility. The audit tool addresses Medication Storage, Controlled Substances, Emergency Medication Box, Medications and Labels, and Medication Administration and Orders. In order to be comprehensive, the tool is four (4) pages compared to our **competitor's one** (1) page tool.

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By working collaboratively and cooperatively with administration, the respective healthcare teams and key nursing staff, Correct Rx provides clear and consistent feedback regarding regulatory compliance and meeting performance standards. Correct Rx identifies deficiencies and provides recommendations or specific training to address issues that threaten quality and safety of medication use.

Our reporting format provides immediate feedback at the specific site level, a summative narrative component that facilitates administrative monitoring and a COI component that tracks the progress of corrective action as needed. This multi-level approach provides a valuable tool for DDOC and the respective healthcare teams to ensure patient safety, employee accountability, institutional security and regulatory compliance. The following items are inspected by the licensed pharmacist when conducting a review of the medication rooms:

General Requirements:

- Licensing
- Maintenance of Administrative Procedure, e.g., Location of the Formulary, Location of OTC Commissary List, Poison Control Information, and Drug Information References

Medication Storage:

- Whether the medication room and carts are locked, and the locks are working properly
- Appropriate personnel have access to the keys
- Cleanliness
- Externals are separated from internals, and in turn, separated from medical supplies
- Refrigerator is at the appropriate temperature and temperature logs are kept
- Multiple Dose Vials are properly labeled when opened, stored and discarded in the appropriate time frame

Controlled Substances:

- Counts are accurate and are being conducted according to standards
- DEA Required Biennial Controlled Substance Inventory
- Storage under double lock and key

Emergency Medication Box:

- List of Contents are posted
- Box is sealed
- Documentation of monthly emergency medication checks

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Medication and Labels:

- Medications are properly labeled
- No discontinued, expired, or deteriorated medications on hand
- Quantities of medications do not exceed acceptable levels (Stock and KOP)
- Medications are disposed of properly
- Medications are returned to the pharmacy properly

Medication Administration and Orders:

- Medication Orders are signed and dated
- Stop Orders are adhered to
- PRNs and refusals are properly documented
- Administration of medications is performed by licensed personnel
- Personnel administer medications have signed and initialed the MAR.

Audit Results

The results of the medication room audit are reviewed with the appropriate members of the facility healthcare staff. Copies of the written reports are also provided to all designated personnel. Recommendations and Corrective Action are documented and followed for compliance.

Our reporting format provides:

- (1) Immediate feedback at the specific site level
- (2) Summative narrative component that facilitates administrative monitoring
- (3) CQI component that tracks the progress of corrective action as needed

This multi-level approach will provide a valuable tool for DDOC to ensure patient safety, employee accountability, institutional security and regulatory compliance. The results of the audits will be shared at the institutional specific Medical Administrative Committee (MAC) meeting and allows for additional trending, reinforcement, and/or corrective action.

Correct Rx's Unique Model for KOP Medications

Correct Rx supports and will actively engage in a robust Keep-On-Person (KOP) medication program for DDOC. The KOP program is an important process that serves a dual purpose in corrections. The practice can benefit the patient by developing self **management skills and increasing the patient's useful knowledge of the medications**, e.g. indication and compliance. Additionally, it benefits the correctional system because it will reduce healthcare staff burden and associated security of administering the medication in a pill line.

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The KOP process requires all stakeholders, including custody, to participate in the development, implementation and routine maintenance of the KOP process. To safely accomplish and maintain the KOP program for DDOC, Correct Rx will routinely and systematically evaluate the list of allowable KOP medications. This will include maintenance of the KOP list, develop patient educational material on KOP procedures, work collaboratively to identify weakness in the program and develop actionable recommendations to resolve problems.

KOP Process Improvements

- Develop Patient Information System: Responsibilities and “How To” Guide
- Routine Review and Reinforcement of KOP process during Direct Patient Encounter with Clinical Pharmacist
- Compliance Assessments

Monitoring

Correct Rx’s on-site clinical pharmacist can have a significant impact on KOP programs. Patients enrolled in the program can be dispensed up to a 30 day supply of their qualifying medications. They would receive counseling on the proper administration, storage and side effects and potential interactions of their medications by the on-site clinical pharmacist in easy to understand language. They will be instructed how and when to present for refill requests and have their cards checked for compliance to their regimen. In addition, Correct Rx has great success in implementing teaching aids for participating in the KOP program.

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B. General Requirements

15. Transportation

The Vendor will arrange and pay for the routine daily and emergency delivery of prescriptions and OTC items.

Correct Rx will arrange and pay for the routine daily and emergency delivery of prescriptions and OTC items.

Close Proximity

Correct Rx is located in Linthicum, Maryland and is a neighbor to the State of Delaware. All facilities serviced under this contract are only an hour and half to two hour drive from our door to yours.

Level V Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Howard R. Young Correctional Institution (HRYCI)	79.93 miles	1 hour 28 minutes
James T. Vaughn Correctional Center (JTVCC)	94.86 miles	1 hour 43 minutes
Sussex Correctional Institution (SCI)	93.49 miles	1 hour 59 minutes
Delores J. Baylor Women's Correctional Institution (BWCI)	77.05 miles	1 hour 26 minutes

Level IV Facilities		
Facility	Distance From Correct Rx	Estimated Drive Time
Sussex Violation of Probation Center (SVOP)	93.49 miles	1 hour 59 minutes
Sussex Community Corrections Center (SCCC)	93.49 miles	1 hour 59 minutes
Central Violation of Probation Center (CVOP)	95.12 miles	1 hour 42 minutes
Morris Community Correctional Center (MCCC)	83.72 miles	1 hour 48 minutes
Plummer Community Correctional Center (Plummer)	81.31 miles	1 hour 32 minutes
John L. Webb Correctional Facility (WCF)	76.20 miles	1 hour 25 minutes

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Level IV Facilities		
Hazel D Plant Treatment Center (HDPTC)	76.88 miles	1 hour 26 minutes

Cut-off Time

Correct Rx provides **same day medication delivery** for all medication orders (prescription and over-the-counter) received by 4:00 P.M. every weekday. Additionally, Correct Rx provides **“same day”** Saturday delivery for all orders received by 12:00 P.M. While these are the official cutoff times established in conjunction with the Department, Correct Rx is often able to extend these cutoff times for emergent needs, thus avoiding costly trips to the back-up pharmacy and potential adverse events that could lead to off-site trips and even hospitalizations. Our drivers typically, leave the building around 7:00 PM to 7:30 PM weekdays. Our healthcare co-vendors and the Department know that if they have forgotten to place an order or there is an emergent need for a medication to be included in the delivery, they can call us well past the cutoff time and it will be included in the delivery for that day. (Correct Rx also, at no charge to the Department, provides STAT deliveries at any time for emergency medication needs 24 hours a day, 365 days a year).

CORRECT RX PHARMACY SERVICES OFFERS THE SAME CUT OFF TIMES FOR NEW, REFILL & OTC PRESCRIPTIONS!!

Correct Rx does not have different cut-off times for new medication orders (both prescription and OTC) and refill requests. All authorized medication requests transmitted to Correct Rx by 4:00 p.m. ET Monday through Friday and 12:00 P.M. on Saturday will be delivered later the same day.

This added benefit ensures continuity of care and no lapses in medication therapy. In addition, this **same day** delivery schedule will reduce the volume of returns and the need for excessive Emergency medication. There will be no learning curve for Correct Rx or our Management Team. **This front door service is a critical part of the “Correct Way.”**

Deliver Inside the Facility to Multiple Locations

Correct Rx delivers the medication inside the facility to the designated medication rooms and infirmaries. This ensures continuity of care by ensuring that the medications will get to the patients in the shortest time possible. The onsite healthcare professional does not have to go off the unit to collect the medications from a centralized drop box location or to sign for it at the front door. This means they have more time to focus on providing healthcare services. Also there is better institutional security as the medication is not left unaccounted and it passes through fewer hands before getting to the patient (chain of command).

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The following list identifies the current 19 specific delivery designations and sorts for the DDOC Facilities:

- HRYCI Population
- HRYCI Infirmary
- HRYCI Pretrial
- JTVCC MHU
- JTVCC SHU
- JTVCC Pharmacy
- JTVCC Infirmary
- SCI Pretrial
- SCI Infirmary
- SCI Population
- BWCI Infirmary
- BWCI Population
- SVOP
- SCCC
- CVOP
- MCCC
- Plummer
- WCF
- HDPTC

Delivery of Medications in Emergency, Severe and Inclement Weather Conditions

The DDOC knows firsthand that Correct Rx provides reliable medication delivery even in times of emergency, severe, or inclement weather. Given our strategic location and the close proximity of our pharmacy to all facilities serviced under this contract, the DDOC can be assured that their facilities will never go without receiving their medication orders.

Unlike those providers who are relying upon national courier services like FedEx and UPS, Correct Rx has an experienced team of medication couriers and several all wheel drive vehicles that will reassure the DDOC that medications will be delivered without delay. Correct Rx is not dependent upon regional airports or back-up pharmacies that may close due to inclement weather, thus preventing medication from being delivered. After all, the DDOC facilities do not close for **weather nor are the patients' needs postponed because of snow. Correct Rx** understands the importance of continuity of care and the potential deleterious impact of interrupting or delaying medication therapy.

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Furthermore, the safety of the facility/institution is always the top priority. In times of inclement weather there is already a heightened security risk due to changing staffing patterns. The security of the institution may be threatened further should the patients become disgruntled due to a lack of medication availability. Correct Rx will add to the stability of the institution by ensuring that weather does not cause unnecessary delays in treatment.

Delaware and the Mid-Atlantic Region are susceptible to severe snowstorms. Our use of couriers and the short distance to each facility from our pharmacy will ensure that there is a continuity of care, no lapse in medication therapy, and significant decrease in the reliance upon emergency back-up pharmacies despite how bad the weather gets.

Through effective emergency preparedness and planning, Correct Rx avoids shut-downs by housing many of our operational staff at a nearby local hotel. This ensures that our pharmacy will be open for business and that we can fill the orders as promised. The medication couriers use transport vehicles properly equipped to handle severe weather and the medications are safely delivered with only minor delays. Correct Rx looks forward to continuing to this same excellent level of service for the DDOC.

STAT Delivery

Given our close proximity and experience providing services for the DDOC, the Department is guaranteed the timely delivery of all medications. This has dramatically decreased the time between when the order is written and when the medication is administered to the patient thus improving patient care. Providing this same day service has dramatically decreased the need for the use of back-up pharmacy services from a cost of over 3,000 dollars a month down to less than 200 dollars.

In the rare instances when emergency “stat” medications are required, Correct Rx serves as the primary “back-up” pharmacy for medications delivered to all DDOC facilities.

Comprehensive Network of Local Backup Pharmacies

In the event that there is a need to use back-up pharmacy services from a community pharmacy, Correct Rx partners with a Pharmacy Benefits Manager providing the DDOC facilities with easy access to a nationwide network of pharmacies (independents and chains). The claim is submitted electronically by the backup pharmacy and the bill is forwarded to Correct Rx for payment. The formulary and authorized quantity to be dispensed by the emergency backup pharmacies will be determined by the DDOC Medical Director and the Bureau Chief along with Correct Rx.

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There are provisions in place for when exceptions are needed regarding the quantity to be dispensed by the backup pharmacy. Correct Rx provides training for all staff on-site on “when” and “how” to use these services. Also, a group number is assigned to each facility, which eliminates the need for a credit card, cash, etc. to be used for payment

Supplemental Information: The DDOC is not and will not be charged the transportation costs incurred by Correct Rx for STAT deliveries and under this contract Correct Rx will be responsible for the medication cost as well. Given our close proximity to all of the DDOC facilities, Correct Rx has dramatically reduced the need for back-up pharmacy. Also, back-up pharmacies use standard pill bottle packaging and introduce different labeling formats, which pose additional safety and accountability issues. Correct Rx is capable of making STAT deliveries from our pharmacy less than two (2) hours away, which eliminates this problem and provides the DDOC with access to drugs that are often unavailable from the back-up either because they do not have the product (e.g., IV medication) or do not have the quantity needed (e.g., scabies outbreak). With Correct Rx serving as your pharmacy, the DDOC will be assured that the reliance on back-up pharmacy and the inherent risks associated will remain very low.

No Learning Curve

Correct Rx is proud of the delivery service we have been providing for the DDOC over the past three and a half years. Since Correct Rx is the current pharmacy vendor, there will be no learning curve to our medication delivery services. Correct Rx already has credentialed drivers with DDOC identification badges who are familiar with the specific facilities. Our drivers understand the protocol, policies and procedures for the safe delivery of medication and have developed professional rapport with several of the officers who work the facility entrance post.

*Please refer to section II.B.3.a Daily Delivery Services for a more robust description.

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B. General Requirements

16. Disaster Plan

The Vendor will participate in any Disaster Plan and drills of the facility as needed in concert with the Medical and/or Mental Health Vendors. This includes but is not limited to the delivery of any emergency medicines required when authorized by the Medical Director or Bureau Chief.

Correct Rx will participate in any Disaster Plan and drills of the facility as needed in concert with the Medical and/or Mental Health Vendors. Correct Rx understands that this includes but is not limited to the delivery of any emergency medicines required when authorized by the Medical Director or Bureau Chief. Our on-site clinical pharmacists are well adjusted to the policies and procedures of the DDOC facilities and will continue to ensure adherence, follow the chain of command, and work closely with the DDOC, BCHS and our co-vendors to create and implement Disaster plans as warranted. Correct Rx ensures that appropriate personnel on-site, in our operations and for delivery are available to provide pharmacy services as required by this Contract during severe weather, natural disasters, pandemics and emergencies. A significant amount of resources have been dedicated to planning, designing and implementing emergency preparedness plans. This assures the DDOC that we are committed to providing comprehensive pharmacy services no matter what obstacles are presented.

Correct Rx will participate in all facility and statewide institutional emergency services plan rehearsals as requested by the BCHS. Correct Rx has experience participating in these exercises in other contracts (e.g., participation in a myriad of planning, strategizing, role playing meetings, mock exercises, and rehearsals regarding emergency preparedness and the delivery of healthcare services). For example, we have gained valuable experience through our participation in Avian Flu table top exercises in 2006, intra-agency H1N1 emergency preparedness planning sessions in 2009, facility specific pandemic flu table top exercises hosted in 2010; and multi-vendor collaborative planning for Hurricane Irene in August 2011 to name just a few.

- Correct Rx understands the importance of being prepared for Regional or Statewide emergencies.
- Correct Rx will participate in all emergency in-service training required by the DDOC or any individual facility.
- Correct Rx ensures that on-site staff and essential off-site staff will participate in the regional and statewide rehearsals as part of the institutional emergency services plan including: Institutional mock disaster drills, Departmental requests for regional emergency services plan **rehearsals, which include Contractor's** response to various incidents (e.g., a natural disaster, aviation accident, mass evacuation);

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The participation of the pharmacy vendor in regional and statewide emergency preparedness service plans is essential to a comprehensive healthcare system and should not be optional or reduced. Correct Rx takes this very seriously and understands that any claimed savings would be erased by the ensuing catastrophe an ineffective vendor would create if a true emergency occurred.

Operational Emergency Preparedness

Correct Rx considers all of our personnel to be essential. This policy is outlined in our protocol and procedure manual and is included in our Personnel Policy and Procedure Manual. Correct Rx owns four wheel drive vehicles that are utilized to assist our staff with transportation to and from the pharmacy. Correct Rx never closes during inclement weather unless mandated by the Governor. Further, we have created staffing contingency plans in preparation of a decrease in staffing due to an emergent situation (e.g., flu pandemic). Our technicians are cross-trained so that they are able to fulfill multiple roles within the pharmacy. This is only one example of the multiple strategies we have employed in our emergency preparedness plan.

Correct Rx has created a Continuity Of Operations Plan (COOP) that covers all aspects of operations and the provision of pharmacy services required in this RFP. Correct Rx Emergency Preparedness plans are managed by our Vice President of Program Management and reviewed every two months by our internal COI committee. All of our employees are required to review the Emergency Preparedness Plan annually. The Continuity Of Operations Plan (COOP) and our emergency preparedness plans are also reviewed during our annual risk management review. The risk management experts from Cincinnati Insurance Company review these plans and make recommendations for additional improvements based on their experience and their national perspective in all areas of risk management.

Severe and Inclement Weather Conditions

The DDOC receives the benefit of continuous service from Correct Rx despite emergency, severe or inclement weather. Given our strategic location and the close proximity of our pharmacy to all facilities serviced under this contract, the DDOC is assured that their facilities will not go without their medication orders.

Unlike vendors who rely on national courier services like FedEx and UPS, Correct Rx has an experienced medication delivery service that has proven to the DDOC that medications are delivered without delay. Correct Rx is not dependent upon regional airports or back-up pharmacies that may close due to inclement weather that prevents medication from being delivered. The DDOC facilities do not close for weather and its **patients' needs are not postponed because of snow. Correct Rx understands the importance of continuity of care and the potential deleterious impact of interrupting or delaying medication therapy.**

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Natural Disaster

In case of a natural disaster which prevents the delivery of medications, facilities will have access to emergency medications and emergency backup pharmacies located in close proximity to each facility. In addition, Correct Rx maintains a professional relationship with a large Harford County, Maryland pharmacy that is capable of providing urgent needs to the Department in case of a natural disaster.

Terrorism Threat

In today's day and age the threat of terrorism has become a reality that must be addressed. Terrorist threats can compromise air travel, I.T. infrastructure and can shut down small towns and large metropolitan areas. Due to **Correct Rx's** close proximity, we are available to participate in the DDOC's emergency response strategic planning. Correct Rx is prepared to address issues related to operational services (e.g., medication delivery), facility access, I.T. infrastructure issues and clinical services (e.g., on-site pharmacist staffing). Our less than two hour drive from all facilities provides an extra layer of certainty to the DDOC that we are ready to meet any critical medication needs with our personal delivery service as we are not dependant on airlines or overnight delivery courier service.

Software Failure

If the pharmacy computer system were to suffer a total shutdown, our backup server is utilized. The backup server is updated every morning with all the current information from the primary server. No critical information will be lost.

Power Outage

If the pharmacy experiences a power outage, a backup generator is utilized to restore power to the computer system. In addition, each computer has an automatic battery backup system that is instantly available for power interruptions.

After Hour Capability: 24/7

If information pertaining to an inmate is needed when the pharmacy is closed, our pharmacists can be access the patients profile remotely via the internet. Clinical pharmacists are issued a laptop computer and have access at all times to all inmate data.

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B. General Requirements

17. Telemedicine Expansion

The DDOC recognizes advantage in the implementation of a telemedicine system for certain applications to provide faster access to care at remote sites and to reduce the number of off-site visits that generate substantial security costs and pose some risk to the community. If the Vendor wishes to include a base station and remote stations as part of their plan for offender care they must provide a complete written plan including the physical plant specifications required, and the equipment the Vendor will purchase to implement the system. In advance of implementation the DDOC BCHS, in conjunction with the Department of Technology and Information, must approve any proposed telemedicine program. It is intended that telemedicine be used appropriately so that it does not negatively affect the quality of care provided to the offender. The Vendor must be specific on the plans, protocols, and specialty services intended to be included in the plan.

Correct Rx will support DDOC, BCHS, the Health Services Vendor and Mental Health Services Vendor to expand telemedicine services to increase points of access, especially to specialty healthcare services. We currently use a telemedicine platform to provide clinical consultations on multidisciplinary teams to manage complex, high acuity patients including HIV, hepatitis C, poly-pharmacy cases and patients transitioning from acute care facilities.

Correct Rx will be using the infrastructure already in place, minimizing startup costs. Our corporate office uses Polycom VSX 7000 conferencing equipment which can bridge with most other equipment. Correct Rx used a centralized management model for other state and national clients to demonstrate significant value in using telemedicine to implement therapeutic interchange programs for Levemir to improve patient acceptance. Often offender patients express suspicion when medications are changed and results in poor adherence. This novel paradigm was an efficient process to garner patient participation in cost-saving medication interchange programs. The success of this model was dependent on providing patients a consistent message directly from an independent drug expert to combat institutional suspicion towards correctional healthcare providers.

In DDOC, Correct Rx's onsite clinical pharmacists are strategically located to provide direct, in-person coverage and are well accepted by offender patients. Direct contact with the patient and healthcare team is our preferred method of delivering quality healthcare services. However, there are opportunities when a multidisciplinary team approach maximizes the contributions of each healthcare discipline to provide comprehensive assessment, planning and coordination of care. This is especially true when offsite specialty care is involved or when movement of offender patients can be minimized to reduce custody resources and security risks. Correct Rx proposes to expand clinical pharmacist consultations via telemedicine. On-site clinical pharmacists may be involved with coordinating care with off-site specialty care providers. We will work with the DDOC, BCHS and the Department of Technology to receive approval of any telemedicine program prior to implementation.

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B. General Requirements

18. DACS Data Entry Mandatory

The Delaware Automated Correction System (DACs) is a web-based offender management system. DACs uses Oracle Database© and Oracle© tools to store and retrieve data. Use of the DACs medical module and all the components therein is a material requirement of any health care services contract. This includes mandated data entry related to Intake, transfer, scheduling, chronic care, physical examination, specialty consult, Sick Call and mental health appointments, and any subsequent additions to the medical module such as a prescriber order-entry module. Initial training on the system will be provided by DDOC staff.

Correct Rx will comply with the requirement to use the Delaware Automated Correction System (DACs) medical module and all the components therein. Correct Rx is proficient in maintaining a computerized drug database in conjunction with our correctional pharmacy software and information provided by our clients. Correct Rx utilizes software that is specifically designed to service correctional institutions. Correct Rx has a fully staffed in-house I.T. department with significant breadth of experience and education. Their previous efforts in regards to integrating our pharmacy software with other inmate management systems, electronic patient health records and electronic medical records, electronic medication administration records, and other software systems will prove to be invaluable. They are able to provide oversight and management as well as programming requirements.

Each clinical pharmacist has received training and currently uses DACs on a daily basis for report gathering in the Chronic Care and Mental Health Modules. While we currently do not enter information into the system, we are actively engaged in the evolution of DACs becoming the EMR for DDOC. Correct Rx will ensure that we are prepared to continue all the documentation we currently provide. Once DACs is ready, we will incorporate our clinical documentation in DACs. We are confident that the availability of our clinical recommendations in DACs will greatly enhance the flow of information between providers and facilities. We look forward to continuing our active contributions in any system enhancements.

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B. General Requirements

19. State/DDOC Ownership of All Documentation

All documents, charts, data, studies, surveys, drawings, maps, models, photographs and reports or other material, in paper, electronic or other format, are the property of the State of Delaware and remain as such at the end of the contract, no matter the reason for the contract termination. Vendors are prohibited from bringing flash drives into DOC facilities and Vendor staff may not remove any paperwork or medical documentation from the facility. Further, DDOC shall have immediate access to all records on demand.

Correct Rx acknowledges that all documents, charts, data, studies, surveys, drawings, maps, models, photographs and reports or other material, in paper, electronic or other format, are the property of the State of Delaware and remain as such at the end of the contract, no matter the reason for the contract termination. Further, Correct Rx understands that all employees are prohibited from bringing flash drives into DOC facilities and Correct Rx staff may not remove any paperwork or medical documentation from the facility. Finally, Correct Rx acknowledges that the DDOC shall have immediate access to all records on demand.

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B. General Requirements

20. Offender Health Insurance

a. The Vendor shall gather the information needed to process claims and retain such information for auditing and inspection by DDOC. The Vendor will credit the DDOC 100% of Medicaid or other insurance costs recaptured. These credits will be included with the Vendor's basic medical monthly services invoice/credits and will be clearly noted. The Vendor is invited to propose alternative methods, subject to the approval of the Department, for retrieving and accounting for insurance reimbursements provided to cover offender healthcare services.

Correct Rx will gather all necessary information needed to process claims for both auditing and inspection by DDOC. Correct Rx will credit DDOC 100% of Medicaid or other insurance costs recaptured. Correct Rx will include these credits with our monthly services. **DDOC's credits will be clearly noted.**

Medicare Part D & B Billing

Correct Rx has years of experience billing claims to Medicare Part D through our Long Term Care Division. We currently participate with each Medicare Part D plan available for Maryland residents. Since so many different plans participate in multiple state Medicare Part D programs, Correct Rx should have no problems adding the ability to process Medicare Part D prescriptions for other States. In most cases, we are automatically enrolled in other state plans because we already participate in Maryland. Additionally, Correct Rx is certified by the American Board for Certification in Orthotics, Prosthetics and Pedorthics and we are currently billing Medicare Part B claims for diabetes testing supplies and ostomy supplies.

State Medicaid Billing

Correct Rx also has the capability of billing prescriptions to multiple state Medicaid systems. Each system is unique and presents its own formulary challenges but Correct Rx works with each client to meet the facility needs versus the Medicaid formulary allowances. Currently Correct Rx is a participating provider in Delaware.

Facility Specific Needs

There is always a delicate balancing act between ensuring that patient needs are being met and managing costs at a facility. Incorporating insurance plans into this equation adds one more level of difficulty if the prescribed medication is not a part of the **insurance's formulary. Correct Rx continually works with clients to develop and implement a procedure that meets facility compliance needs with financial concerns.**

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Since not all Medicaid/Medicare/Private Insurance plans cover the same medications in the same strength and quantity combinations, we work with our clients to customize a **procedure that meets that particular facility's needs.**

First, a point of contact is identified for several different areas such as patient identification and intake information. Correct Rx will collect any pertinent ID, DOB, Group number information that is necessary for successful claim submission. A point of contact is also necessary for circumstances when the claim is rejected: Who should we notify if a prescription is too soon to refill, If we need to alter the way the prescription is written in order to get it submitted successfully (i.e. the prescription is written for a medication not on the formulary but the insurance company has given formulary alternatives), and/or if a medication requires a prior authorization.

Correct Rx is also aware that a patient can enter a facility without having all of the intake data present. In all circumstances, a review is done of the final invoice and contact is made regarding any missing information before sending out any invoices in an effort to bill all medications prior to invoicing the facility. For instances where information is received after an invoice or invoices have been generated, Correct Rx will submit all past claims for payment and issue credits for any prescriptions that are successfully re-billed to insurance. A separate itemized report is generated each month showing any prescriptions and credit amounts due to the facility. Each step in this process is customizable to meet the needs of DDOC.

Additionally, Correct Rx does an extensive background check of all prospective employees by an outside vendor. This includes verification of all licenses, Federal or State, held by the prospective employee. In addition Correct Rx is a nationally recognized Accredited Medical Provider by The American Board for Certification in Orthotics, Prosthetics, and Pedorthics.

The accreditation is required to allow us to continue to bill for certain products under Medicare B. It has the effect of validating our legitimacy in provider and billing for services in Medicare A and Medicare D. As part of the accreditation program all personnel are subjected to an additional background check that is outlined below:

Medicare Exclusion List Verification (Pharmacy Personnel)

Policy

In accordance with federal regulations, the Pharmacy shall verify that no prospective Pharmacy personnel, involved in the billing and provision of care, are **on the Office of the Inspector General's (OIG) "List of Excluded Individuals/Entities" (LEIE) nor the General Services Administration's (GSA) "Excluded Parties List System" (EPLS).** Prospective Pharmacy personnel, who are found on either or both "Lists," shall not be hired.

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OIG and GSA Exclusion List verifications are performed annually for all current Pharmacy personnel. Any Pharmacy personnel, whose names are found on the aforementioned lists, shall be processed for termination.

Procedure Exclusion Verification

The Coordinator shall:

- **Verify that no prospective Pharmacy personnel are on the OIG “List of Excluded Individuals/Entities” or the GSA “Excluded Parties List System” prior to hiring the individual. Any individual, whose name is found on either or both “Lists,” shall not be hired.**

The OIG LEIE can be accessed online at
<http://oig.hhs.gov/fraud/exclusions/listofexcluded.html>
(click on link for *Online Searchable Database*)

The GSA EPLS can be accessed online at
<http://www.epls.gov>
(click on link for *Online Searchable Database*)

Correct Rx has never had any sanctions against our staff. We ensure all employees have no tolerance for failing to observe Federal and State regulations that concern providing service and billing for such services. We make available continuing education for all employees involved in these services to ensure no pattern of or systematic abuse of the system occurs. Correct Rx works to avoid situations which can lead to sanctions. When a problem is discovered, we act in conjunction with the affected client to develop a solution and implement a new procedure to follow in the future.

Third Party Billing

Correct Rx has extensive experience in billing medication charges to third party administrators including Anthem Blue Cross and Blue Shield and other supplementary medical insurance companies. We are an approved provider for most prescription medical insurers. We presently provide pharmacy services to correctional facilities, skilled nursing, assisted living, and developmentally disabled institutions, all of which require the ability to process pharmacy claims electronically. We have a trained team of pharmacy technicians, pharmacists, and billing specialists to ensure that all claims are handled properly and efficiently. All of the employees have been trained on how to resolve any ambiguities in the order paperwork and we have a printed policy and procedure manual to identify the proper course of action when handling all third-party payer claims.

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c. The Vendor must provide a plan for the implementation of the Affordable Care Act Marketplace Exchange Insurance Providers and the CMMI/SIM project as it impacts medication provision.

Correct Rx has been actively pursuing information, interpretation and education regarding how the Affordable Care Act Marketplace Exchange Insurance Providers will impact the offender population. We will openly share our information and understanding with the DDOC to ensure you and the offenders served are well positioned to take advantage of the benefits and opportunities that will be provided.

Correct Rx will work collaboratively with the DDOC and our co-vendors to implement a plan that allows for coverage of pre-trial detainees and how it may apply to sentenced offenders (e.g., hospitalized over 24-hours and at discharge). In addition to how this Act will be applied to offender populations **and Correct Rx's partnership with the DDOC and** our healthcare partners, there are implications that will be applicable to the transformation taking shape in the State of Delaware through the Model for State Health Care System Innovation.

Delaware was awarded a design grant from the Federal Government to develop an **innovation plan. The State of Delaware set a "Triple Aim" goal: (1) Improve patient Experience of Care, (2) Improve the Health of Delawareans; and (3) Reduce health care costs.**

In fact Correct Rx participated in **a few meetings of two of the "Workstreams" or key** areas of transformation: Delivery System (chaired by Bettina Riveros) and Workforce (chaired by Kathy Matt). One of the guiding principles of this plan was that there are no **sacred cows in the transformation of Delaware's Health Care. While the design and** implementation of this plan and the involvement of the DDOC are still unfolding, there is no doubt that a transformation is being planned. The State of Delaware has deliberately decided to take a leading role in the future of health care.

From our involvement in this process and the initial interpretation of the Affordable Care Act, the future will be inclusive of clinical pharmacists as integral members of multidisciplinary health care teams and in the delivery of care. The DDOC is ahead of the curve, as the BCHS not only had the foresight of including clinical pharmacists, but had the wherewithal to support the growth and expansion of this program. The DDOC has experienced firsthand the impact of pharmacist driven disease state management (e.g., HIV, Diabetes, cardiovascular diseases). Many of the passionate Workstream discussions were about moving away from point of service payment models into the most cost effective provision of total health care. All of these discussions confirmed the value of the clinical pharmacist.

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This is an exciting time in Delaware and Correct Rx believes this process may create additional opportunities for us to expand our services in the State, both as a Medicare/Medicaid third party provider and through our spectrum of clinical services. At the very least, we will work collaboratively and cooperatively with the DDOC to bring a plan into fruition.

The following excerpt is from the ACCP Updates in Therapeutics® 2012 publication of **“The Pharmacotherapy Preparatory Review and Recertification Course” workbook** (p.2-292):

The Patient Protection and Affordable Care Act of 2010 contains several provisions, ranging from protecting consumers to improving health care quality and lowering costs to increase access to care. As the law translates into regulation, unique opportunities exist for pharmacists to become engaged:

1. Funding opportunities will be available for pharmacists to demonstrate their contributions as providers of medication therapy management.
2. The patient-centered medical home model emphasizes primary care as a central role in managing the chronic conditions of patients using a team based approach.
3. ACOs are a set of providers associated with a defined population of patients accountable for the quality and cost of care delivered to that population.
4. Independent at Home Demonstration Program promotes interdisciplinary collaboration of clinicians to provide home-based medical care for Medicare beneficiaries.

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B. General Requirements

21. Transition Plan between Existing and New Vendor

- a. *The Vendor must develop a transition plan from the current service delivery system. The transition plan must be presented to the Bureau Chief within 30 days of the contract approval and will address an orderly and efficient start-up.*

It has been our privilege to be the pharmacy provider for DDOC for the previous contract term. We hope to continue this relationship and as the current pharmacy services vendor, the transitional phase of the new contract would be the least disruptive for continuity of care for DDOC and BCHS.

At Correct Rx, we are transition experts! We have transitioned over 450 facilities over the past 10 years. Correct Rx has a proven method of transition and will approach this **project in a systematic and organized manner. Correct Rx's owners and managers have** demonstrated their ability to smoothly transition correctional facilities of all sizes. We have identified 18 associates to assist in the transition. They are prepared to hit the ground running. The Correct Rx personnel will be available on site at all of the facilities to assess the needs of the facilities and to tailor the pharmacy services specific to that site. We will meet with the BCHS Medical Director and Bureau Chief with any recommendations we may have to in order to be successful from Day 1 of the new contract.

Communication:

Communication must be open, honest and designed to facilitate the sharing of all necessary information to ensure a smooth transition. Communication between the DDOC facility representatives selected by the Bureau Chief and Correct Rx will occur through regular discussions and written documentation. It is important that all communication is timely and complies with the transition timeline.

Clear Systematic Process:

Correct Rx will approach the entire transition/implementation for each facility in a systematic and organized approach. Assessment, planning, implementation, and evaluation of continuity of care activities are comprehensive and always patient focused. **Correct Rx's** policies, protocols, program description and evaluation will provide consistency and enhance continuity of care for the DDOC patients.

Coordination of Care throughout the Entire Transition/Implementation:

Correct Rx intends to coordinate the transition process from the time of contract award to contract implementation. Successful transitions are uninterrupted successions of events. We have outlined in great detail all activities that will occur during the designated transition period. Continuity of Care requires a coordinated and interdisciplinary team approach. **Correct Rx's transition team will gather all the available resources and services from** each discipline to ensure a quality transition.

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b. A detailed plan must be submitted with the proposal that addresses, at a minimum, how the following issues will be handled during the transition:

- *Identification and assuming current prescriptions*
- *Equipment and medication inventory*
- *Medical record management*
- *Orientation of new staff*
- *Coordination of transition to include the Bureau*

Correct Rx has outlined the necessary 30-day transitional activities below; however, we could transition to the terms of the new contract and train any potential new vendors in an even shorter time frame or according to any schedule the DDOC would request. Our intent is to provide a thoughtful and comprehensive transition plan that ensures DDOC, BCHS and each of our co-vendors in this contract are fully trained and aware of our services. Additionally, we ensure that each of our employees receives the proper orientation, credentialing and training required to provide optima pharmacy services as specified in our response to the current RFP.

➤ Operational Efficiency:

- Facility Information: Correct Rx will not need to complete the facility assessment process that is required for all new start-ups because we are already providing services to all of the DDOC facilities and intimately familiar with the nuances of each facility.
- Medication Ordering: Correct Rx has an established interface with the current health service vendors electronic medical record. If a new medical vendor is awarded the contract, Correct Rx will collaborate with the vendor to establish an interface with the new electronic order entry system. Additionally, Correct Rx will offer a back-up medication order entry system using fax and fill.

Supplemental: Correct Rx is in the final testing stage with the EHR system that the DDOC will be using as of June 2014. This two way bi-directional interface with Correct Rx is anticipated to be completed in late May or early June and will ensure the accurate, safe and timely electronic transmission and confirmation of medication orders.

- Medication Delivery: Correct Rx is already familiar with the specific requirements necessary to successfully deliver medications inside all of the DDOC facilities to the specified medication rooms and infirmaries. Our MBE Certified Transportation Company already has a team of medication couriers who have DDOC clearance and credentials sufficient to maintain the current delivery schedule without delay (7 days a week 365 days a year to DDOC facilities).

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- Medication Check-In and Refills: The Correct Rx web based “Barcode” system for medication check-in and ordering refills was implemented over three years ago. It is currently being used at each of the DDOC facilities and would not interrupt a timely transition to the new contract.
- **Invoicing:** Correct Rx’s controller, Mr. Don Bossle, and accountant, Ms. Maria Swartz, have both been managing the billing process for this contract for the last four years.
- Regulatory Compliance: Correct Rx is compliant with State and Federal regulations and would continue this throughout the transition process. Our primary focus is providing continuity of care during the transition process. Regardless of the timetable, Correct Rx will ensure 100% regulatory compliance.

Devote the Necessary Time to the Planning Phase

Correct Rx’s management team understands the importance of devoting the necessary time and energy into the planning phase in order to ensure the success of the implementation phase. Our management team pays attention to every detail and nuance surrounding each facility. This level of understanding comes from years of direct experience. All facilities are not created equal and neither are all correctional pharmacies. Our clients know that we have the resources and the skills to successfully transition any project. Correct Rx is willing to put forth the effort up front to ensure great results.

Staff Orientation/Training: Implementation Handbook

Correct Rx has developed an “Implementation Handbook” to be utilized for startup in-service training. Each member of the healthcare team will be personally in-serviced by a Correct Rx professional regarding every aspect of the pharmacy system. The “Implementation Handbook” was designed as a training tool and a useful reference manual to be used at any time.

Our Transition Team will coordinate with the DDOC a suitable set of dates for on-site training utilizing the Correct Rx “Implementation Handbook”. This in-service manual will provide the necessary training so that every member of the healthcare team is familiar with the Correct Rx system. The “Implementation Handbook” and training covers issues related to ordering procedures, medication storage, medication accounting procedures, the MAR, inventory management and how and who to contact in Correct Rx in case of problems among other topics.

Follow Up Support and Additional Training

Correct Rx will provide additional training needed to augment the initial start up pre-service training. Most importantly, the Clinical Pharmacy Director will visit every medication room at least every quarter for onsite QA assessments and audits. During these visits, Correct Rx will be available to repeat the in-service for any new employees or for those who need additional training.

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- Correct Rx will need the assistance of the DDOC to coordinate institutional entry for all members of the transition team who will be coming onsite to complete the initial medication room inspections and the gathering of facility specific information. This assistance will also be needed to clear the Correct Rx transition team who will be on-site on the first day the contract starts to provide hands on assistance with utilizing pharmacy services.
- Correct Rx intends to provide same day medication delivery to all DDOC facilities. **The medication couriers will be delivering the medications inside the facilities directly to the medication rooms and infirmaries.** Also, Correct Rx will be assigning a DDOC Clinical Pharmacy Director to this contract. These individuals will require DDOC identification badges to ensure proper security clearance and facility access. Correct Rx will need DDOC assistance to ensure these badges are authorized and obtained properly.
- In order to use the Correct Rx bar code system for medication check-in and the electronic ordering of refills, each medication room (or close proximity) will need a computer terminal with internet access. Correct Rx will be responsible for installing the scan guns.
- Correct Rx will need the assistance of the DDOC in coordinating the participants for the start-up orientation training for custody, administrators and healthcare staff. Correct Rx will provide all necessary training materials and is quite comfortable utilizing whatever space is available. We are also cognizant of the need to provide these trainings at different times throughout the day to accommodate different shifts. Correct Rx will work in concert with the other vendors to provide collaborative start-up training and we will also be available for impromptu, informal and discipline specific trainings.

■ **Equipment and Inventory**

Correct Rx has identified 18 associates to be actively involved in the transition/implementation plan. They will each participate by performing specific tasks outlined in our transition plan. Our transition/implementation team will participate with the DDOC in State and individual facility level activities. The Correct Rx management team has years of experience in converting statewide correctional systems.

Numerous Correct Rx associates have worked with Dr. Yankellow and Mrs. Molofsky, RPh for many years. Correct Rx is a company filled with an experienced and stable work force committed to doing things the “Correct Way”. **Correct Rx has happy clients and happy employees.** Over 65% of our clients come from referrals and we are fortunate that many of our associates come to us by word of mouth.

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Whatever it Takes: Every member of the Correct Rx transition/implementation team from the owners to the Clinical Pharmacy Director will roll up their sleeves and do whatever it takes to ensure a smooth implementation. Correct Rx is known for our attention to detail and Dr. Yankellow's hands on approach.

Correct Rx will remain on-site, in the DDOC facilities, for as long as it takes to ensure all medical unit staff have had an opportunity to be trained by our transition/implementation team. In addition, our transition team members will be residing in Delaware hotels in close proximity to the Facilities.

Transfer of Pharmacy Data: There will be no need to do this task as the Correct Rx data base is already up to date with the offenders in this system since we are the current vendor. Our data is complete back to when we started as your pharmacy vendor in July 2010. Correct Rx utilizes CIPS software, which will allow the DDOC to transfer the current pharmacy data electronically. It is our expectation that there should be an easy electronic transfer of all patient data during the transition/implementation period. Correct Rx is proposing that an initial test transfer be made for each facility. This test transfer will allow Correct Rx's Vice President Jill Molofsky, RPh and our Technology Integration Specialists to ensure that the data did in fact transfer and that any potential problems are resolved. Then, the second and last transfer of data closer to contract implementation will ensure that all patient information is accurate and up to date for the start of the contract.

Supplemental: Correct Rx has already been working with the DDOC and the outgoing medical vendor to ensure there is a complete and accurate data transfer of patient medication profiles to include both the existing and historical orders. We have provided files and begun the testing phase with the new EHR system. If awarded, Correct Rx will be able to transition this contract without any disruption to patient care. The DDOC will also have redundancy protection, since the historical data will be available from Correct Rx for the past three years as well.

Inventory Gear Up - Internal and at the Wholesale Level: While we would not anticipate any major ordering changes with our wholesaler, given we are already providing medications for the DDOC, Correct Rx will assess future utilization needs for our wholesaler AmerisourceBergen.

Staff Training and Recruitment: Correct Rx currently has a full staff of associates, all of which are qualified and have embraced the "Correct Way" of conducting pharmacy operations. Correct Rx has taken special care when selecting the key members of our team to provide the administrative, operational and clinical responsibilities of the DDOC contract. Each associate was chosen to ensure that their skills and qualifications match the tasks associated with their specific job. All licensed and professional staff will be fully credentialed.

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Correct Rx is located in Anne Arundel County, Maryland, ten minutes from downtown Baltimore. Both Anne Arundel County and Baltimore are rich urban areas with an abundance of resources. Our ability to grow and meet the needs of the DDOC will not be **hampered by a shortage of skilled personnel. Correct Rx's continuous recruitment program** includes the following activities:

- Internal pharmacy technician training program approved by the Maryland Board of Pharmacy Professional association with the Maryland Pharmacists Association and Maryland Chapter - Association of Senior Care Pharmacists
- Professional Journals
- Newspaper ads in the Baltimore Washington Metropolitan area
- Local economic development programs in Anne Arundel County, Howard County, Baltimore City and County
- Internet advertisements
- Job fairs for health care workers
- New Graduates-University of Maryland School of Pharmacy

b. The Vendor must outline timetables and personnel that will be assigned to supervise and monitor the transition, and detailed plans, including offender medical file transfer, for the transition from the DDOC's system to the Vendor's system on an institution-by-institution basis which will include timetables for completion.

Since Correct Rx is the current pharmacy services provider, there will be less disruption to care than if the DDOC were changing pharmacy vendors. However, it would be a mistake to think the current vendor would not need a transition plan. Correct Rx fully understands that a transition plan is an absolute necessity for the following reasons:

1. Need to plan for the transition from the old contract versus the new contract;
2. Need to plan for the new service, staffing, billing reporting and training requirements;
3. Need to provide education regarding pharmacy services under the new contract for our employees, the DDOC, the BCHS, and our healthcare co-vendors;
 - a. Need to assist with the Medical Care contract transition. Correct will coordinate transition activities so that the new vendor is fully educated and trained on the services we provide and the optimal use of Correct Rx. Also, Correct Rx will need to ensure our employees are fully educated on **the new medical vendor's plan for the delivery of** health care for the offenders of the DDOC.

Continuity of Care: Correct Rx will focus all gear up and transition/implementation activities around continuity of care. Continuity of care is a process that provides for a seamless transition through reciprocal linkages between DDOC and Correct Rx. The focus of continuity of care is on the needs of the patient and requires an interdisciplinary approach to any well thought through transition plan.

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The timeline below is based upon a 30-day transition. It is designed to approximate the transition schedule, as the actual dates and activities will be coordinated with the DDOC to ensure it is designed to accommodate the needs of the DDOC and our co-vendors. While Correct Rx has provided a 30-day transition schedule, we are capable of transitioning contracts on different timelines as necessary. If there are extenuating circumstances that require an even quicker timeline, Correct Rx will work with the DDOC to accomplish this task. No matter what the parameters are, Correct Rx has the experience and knowledge of what a successful transition requires and we will partner with you to design a transition plan specifically designed to meet your needs. The following activities will guide the Correct Rx transition plan:

Transition Day 1 through Day 10

- ✓ Contract Signing
- ✓ Mobilize Transition Team
- ✓ Familiarize the Start up Team with the new contract and RFP specifics
- ✓ Begin collaboration efforts with DDOC and our co-vendors
- ✓ Coordinate Pre-service training date with DDOC, if necessary
- ✓ Planning for billing, clinical, and statistical reporting formats, templates and dashboard if necessary.
- ✓ Coordinate integration between our pharmacy software system and the EHR, if necessary **(Given that the EHR – Correct Rx interface is scheduled to go live by the end of June this should already be in place at the time of transition).**
- ✓ Initiate planning and preparation for the transfer of provider information, patient demographic information and the existing medication orders **(Given that the EHR – Correct Rx interface is scheduled to go live by the end of June this should already be in place at the time of transition).**

Day 5 through Day 30

- ✓ Correct Rx currently has a full staff of associates, all of whom are qualified and have familiarity with DDOC policy and procedures. We will coordinate the hiring, orientation and training activities for additional Correct Rx employees needed to fulfill the requirements of the DDOC contract.
- ✓ Many of our associates already have clearances to provide services in DDOC. Verify credentialing and background clearance information for Correct Rx transition team members, trainers, I.T., administrative and clinical pharmacists.
- ✓ Submit credentialing and background clearance information for any new Correct Rx clinical staff that will need on-going access (or ID Badges) to specifically identified facilities.
- ✓ Complete pre-requisite orientation and training
- ✓ Verify Facility Information Sheets
- ✓ Assessment of drugs on hand and rule out the need to provide additional medications for Start-up

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- ✓ Coordinate with the DDOC a continuity of care strategy regarding the quantity of patient specific and interim emergency medications dispensed leading up to the transition date to ensure that all orders do not expire on the last day of the previous contract
- ✓ Inventory pharmacy equipment including fax machines and bar code scanners.

Day 10 through Day 30

- ✓ Finalize pharmacy training activities and schedule for the DDOC
- ✓ Planning and development of billing, clinical, and statistical reporting formats, templates and dashboard.
- ✓ Development, programming and testing of the interface between our pharmacy operating system and the EHR and eMAR necessary **(Given that the EHR – Correct Rx interface is scheduled to go live by the end of June this should already be in place at the time of transition).**

Day 15 through Day 30

- ✓ Verify the facility DEA permits and all necessary pharmacy licenses
- ✓ Verify all authorized prescriber information including license and DEA numbers
- ✓ Review billing format, template and procedures with the DDOC
- ✓ Review clinical and statistical reporting formats, templates and procedures with the DDOC
- ✓ Confirm schedules for Quarterly P&T meetings
- ✓ Set schedules for Medication Room audits

Day 20 through Day 30

- ✓ Final development of billing, clinical, and statistical reporting formats, templates, and dashboard.
- ✓ Final transfer of provider information, patient demographic information and the existing medication orders from EHR to the pharmacy operating system necessary **(Given that the EHR – Correct Rx interface is scheduled to go live by the end of June this should already be in place at the time of transition).**
- ✓ Final programming and testing of the interface between our pharmacy operating system and the EHR and eMAR, necessary **(Given that the EHR – Correct Rx interface is scheduled to go live by the end of June this should already be in place at the time of transition).**
- ✓ Any additional equipment to perform our tasks will be delivered by our courier service
- ✓ Master Forms, Formularies, etc. delivered, if necessary
- ✓ Implementation Handbooks and forms delivered prior to the training schedule by the transition team , if necessary
- ✓ Bar Code Scanning Training Manuals delivered, if necessary

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Day 30 until DDOC is comfortable with the Correct Rx processes!

- ✓ Deploy transition team members into facilities to provide direct assistance with the transition and services startup training.
- ✓ Deploy transition team members at Correct Rx who will be providing supportive services via telephone, web conferencing and electronic communication to ensure all facilities have coverage.

Continuity of Care: All preparation and transition activities will be focused on continuity of care. Continuity of care is a process that provides for a seamless transition through reciprocal linkages between the current providers and Correct Rx. The focus of continuity of care is on the needs of the patient and requires an interdisciplinary approach to any well thought through transition plan.

Correct Rx has taken special care when selecting the key members of our team to provide the administrative, operational and clinical responsibilities of DDOC contract. Each associate was chosen to ensure that their skills and qualifications match the tasks associated with their specific job. All licensed and professional staff will be fully credentialed. Our ability to grow and meet the needs of DDOC will not be hampered by a shortage of skilled personnel.

Department Tasks: Correct Rx has already designated staff outlined below who will be responsible for tasks that will need to be completed for a seamless implementation of the pharmacy services program for DDOC.

■ **Administrative Tasks:** To be completed by John R. Nattans, Rachael Campbell, Don Bossle, Jim Tristani, RPh, Maria Swartz, and Charles Brogan

- Coordinate Transition Activities / Manage the timeline
- Print forms
- Upon DDOC approval, print and disseminate Implementation Handbooks
- Upon DDOC approval, print and disseminate Pharmacy Policies and Procedures
- Order and deploy equipment (e.g., medication carts, scanners, fax machines)
- Submit Correct Rx pharmacy licenses
- Assemble facility DEA permit
- Compile all authorized prescriber information including licenses and DEA numbers.
- Provision of Training

■ **Operational Tasks:** To be completed by Jill Molofsky, RPh; Joe DeMino, PD, Jaye Wexler, PharmD; Ellen Yankellow, PharmD; Martin Yankellow, JD; John R. Nattans, MC; Rachael Campbell, Kathy Kneiss, PharmD., Cathy Johnson

- Gather facility information via questionnaires and site visits.
- Set up Orientation and Training schedule for new staff.

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- Complete security training for on-site employees.
- Pre-package additional volumes of top drugs in preparation of contract start.
- Assign pharmacy facility codes and appropriate shipping containers and designations
- Identify overnight delivery service and perform test deliveries.
- Arrange through our national pharmacy benefit manager the backup emergency pharmacy. Assign facility specific group number and include the information regarding the emergency drug procurement process in the **facility specific “Implementation Handbook”**.
- Provision of Training

■ **Clinical Tasks: To be completed by Dr. Hui Seo, Dr. Valerie Barnes, Dr. Crosby Amoah, Dr. Jaime McGee, Dr. Janene Cornish**

- Coordinate Clinical Initiatives and Activities with the BCHS, Medical and Mental Health Co-Vendors;
- Format statistical reports specific to DDOC.
- Set schedules for Quarterly P&T Meetings.
- Set schedules for Medication Room audits.

■ **IT Tasks: To be completed by Peter Crosby, Jaye Wexler, Martin Yankellow, Kalos**

- Ensure facility accounts in the pharmacy operating system are fully operational
- Ensure facility accounts on the electronic fax server are fully operational
- Ensure the Correct Rx web based bar code scanning system for the DDOC facilities is fully functional
- Complete data transfer of existing provider information, patient information and active medication orders (as needed)
- Complete bi-directional interface with an electronic health record (and eMAR system if applicable)
- Provision of Training

Transfer of Pharmacy Data: Many aspects of continuity relate to the capacity to transfer accurate pharmaceutical information. Correct Rx’s pharmacy software system will accept data in HL-7 format that is commonly used healthcare systems. While our system is currently up to date with patient information, should the DDOC move to a new electronic health record system Correct Rx will assist with the transfer of data. Prior to implementation, Correct Rx is proposing to transfer the data electronically or input the current orders and offender information. This will ensure that all patient information is accurate and up to date for the start of the contract. Our internal I.T. department will work with DDOC, ERMA or identified EHR vendor, the Health Care Vendor and current pharmacy vendor to coordinate the data transfer and ensure seamless transition.

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Supplemental: Correct Rx has already been working with the DDOC and the outgoing medical vendor to ensure there is a complete and accurate data transfer of patient medication profiles to include both the existing and historical orders. We have provided files and begun the testing phase with the new EHR system. If awarded, Correct Rx will be able to transition this contract without any disruption to patient care. The DDOC will also have redundancy protection, since the historical data will be available from Correct Rx dating back to July 2010.

Bi-Directional Interface with the EHR and eMAR system:

Supplemental: Correct Rx is in the final testing stage with the EHR system that the DDOC will be using as of June 2014. This two way interface with Correct Rx is anticipated to be completed in late May or early June and will ensure the accurate, safe and timely electronic transmission and confirmation of medication orders. There will be no disruption to care or process as Correct will already be up and running with this system.

Correct Rx will create a bi-directional interface with the EHR and eMAR system utilized by the DDOC. Our transition activities will begin on day one of the transition to ensure there is proper time for the planning, development, programming, testing, and implementation of a fully functioning interface.

Correct Rx has developed two-way bi-directional interfaces with multiple electronic medical record systems, electronic medication administration and order entry systems (CorEMR, CorrectTek, NextGen, ERMA) and electronic medication dispensing systems and inmate management systems such as Lock and Track and ILeads. Our role has been to provide unbiased advice, create fully functional two-way interfaces and provide the necessary support and resources to ensure their successful implementation. As a result, we have interfaced with multiple vendors that have provided client specific solutions. **Each of our clients' unique requirements** has guided their selection and implementation of technology. We are proud of our ability to help our clients navigate through these complex issues and successfully fulfill our responsibilities in integration. Our team has worked with state, county and city facilities and has experienced common themes between facilities and unique state/local requirements.

Critical items we consider include correctional workflow, security needs, correctional requirements, reporting requirements and database management. We have performed **implementation in both clinic (med room) and "cart" or cell-side models**. Training for these systems and implementation will be done at the facility level. We understand how to handle issues that can arise and are always available to provide support.

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■ **Purchasing, Billing, Accounting, Returns Tasks: To be completed by Jim Tristani, R.Ph., Don Bossle, Maria Swartz, Charles Brogan, Lisa Jones, and Tonya Abner.**

- Purchasing Manager to work with wholesaler to increase pharmacy inventory to accommodate facilities' ordering patterns. Correct Rx will alert our wholesaler of the anticipated needs along with factoring in the assimilation of the existing inventory so they can be prepared for the increased volume.
- Establish billing format and template
- Finalize distribution recipients and schedule of billing
- Create Returns Accounts
- Provision of Training

Partnering with the DDOC

Correct Rx will work closely with the DDOC to ensure the transition is as seamless as possible, focused on continuity of care and mindful of the fact that we are but one small part of the totality of responsibilities under the charge of the DDOC. We look forward to sharing our expertise and implementing our thorough transition plan based upon the experience we have garnered over the years. In our attempts to complete this transition, we understand that it will take a collaborative effort.

We are committed to providing effective and clear communication and will spend a great deal of time listening and learning about the DDOC and our healthcare partners, so that our implementation activities will be congruent with your needs and performed effectively.

While our specific needs may change through this process, the following list provides basically what Correct Rx requires from the DDOC during implementation:

- ✓ Regularly scheduled multidisciplinary transition meetings to include Correct Rx, our healthcare partners, the DDOC and administration and any other key players;
- ✓ Clearance for specific Correct Rx transition team members to access specific DDOC facilities on specific dates for training purposes and for the first few days of the transition to provide onsite support services;
- ✓ Access to required facility training and the necessary background checks needed for clearance to DDOC facilities;
- ✓ Time and Space onsite to provide training and orientation to specified DDOC employees and our healthcare partners. Please note, this training will be coordinated with the healthcare vendor and is sometimes provided offsite.
- ✓ Coordination with DDOC facility representatives for the delivery of required equipment, fax machines, medication carts, etc.

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- ✓ Permission (if necessary) for internet access to the Correct Rx website at DDOC facilities so that they can access our on-line video trainings and web based barcode scanning system for medication check-in.
- ✓ Clearance for our on-site clinical pharmacists to perform the initial and ongoing med room audits;
- ✓ Coordination with the EHR vendor representative to allow for planning, programming and testing as Correct Rx creates an interface with the DDOC EHR and eMAR system and plans for the initial data transfer of existing provider information, patient information and active medication orders

Customer Service Triage Plan: Available During & After Contract Implementation

“Consultation Services” involve getting answers to your questions and being given assistance in resolving a problem or concern. Being responsive to our customers’ concerns is part of doing things the “Correct Way.” We have added this information here to assure DDOC that we understand the importance of providing the range of “consultation” services and are prepared to answer your questions and address your concerns. Capsules come in many colors, but Correct Rx knows the issue of customer service is black and white. The “Correct Way” means front door service. The following processes are in place to ensure that all concerns are handled properly:

- **Operational Calls:** Whether the call is concerning an order, locating a shipment or simply a question concerning pharmacy procedures, it will be handled immediately. The receptionist/technician will triage the call or problem to your facility specific technician, an experienced pharmacist or if needed to the Vice President of Program Management, John R. Nattans and or the Vice President of Operations, Joe DeMino, R.Ph.
 - Every phone call is personally answered by a qualified Correct Rx associate. You will not end up in an automated voice mail system unable to reach a real human being.
 - Once the call is answered, our staff is trained to listen carefully and then triage the call to the appropriate Correct Rx Associate.
- **Clinical Questions:** Therapeutic inquiries are referred to one of our doctoral trained pharmacists or directly to Dr. Valerie Barnes, Director of Clinical Pharmacy Programs or Dr. Hui Seo, Vice President of Clinical Services. Whether the question is about the formulary or regarding a complex medication regimen, the answers are thoroughly researched and are always based on sound medicine. Our clinical department is staffed by fully credentialed clinical pharmacists who are PharmDs and have completed at least one year of post doctoral training.

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- **Billing Questions:** Questions concerning invoices are triaged to the accounting department. Our billing specialists will actively work to resolve any questions. Correct Rx has identified Maria Schwartz, staff accountant, as the financial liaison for the DDOC contract. Maria has specific correctional pharmacy accounting and billing experience. If further assistance is needed our Controller, Don Bossle will be available to help.
- **Immediately Available:** When you contact Correct Rx we are immediately available. Everyone from your facility specific technician, to the Clinical Program Liaison, to any one of the owners is ready to meet and address any issues. Our reputation for follow through and integrity is well known.
- **Program Management:** Correct Rx has assigned John Nattans, MC, and Dr. Hui Seo, to act as the liaison between pharmacy operation's Vice President, Joe DeMino and DDOC. Mr. Nattans and Dr. Seo along with Joe DeMino will work to ensure that Correct Rx not only meets, but exceeds the expectations of DDOC. We are proud of our reputation for working successfully on multidisciplinary healthcare teams in corrections. DDOC will find that Correct Rx delivers exactly what we promise.
- **Facility Specific Technicians:** Correct Rx will dedicate specific pharmacy technicians to this contract. In this manner, when a DDOC health professional has a question about an order, an experienced technician familiar with your institution will respond.
- **On Site Presence:** Correct Rx understands and is excited that this RFP requires five (5) on-site clinical pharmacists. The DDOC will be well served by Correct Rx's years of experience providing onsite clinical services to include the DDOC facilities. There will be no learning curve. Others may claim to have the ability to provide onsite clinical services (or even suggest that these services could be delivered from offsite), but Correct Rx has a comprehensive and mature clinical offering that improves outcomes and reduces cost . . . and we now have the outcome data to prove it. The Correct Rx approach is to work as part of the medical team to achieve the best possible health outcomes and the most cost-effective treatments rather than simply filling prescriptions with the least expensive pills.
- **Audit Results:** The results of the medication room audit will be reviewed with the appropriate members of the facility healthcare staff. A copy of the written report will be provided to all designated personnel. Recommendations and Corrective Action will be documented and followed for compliance. Our reporting format provides immediate feedback at the specific site level, a summative narrative component that facilitates administrative monitoring and a COI component that tracks the progress of corrective action as needed. This multi-level approach provides a valuable tool for DDOC to ensure patient safety, employee accountability, institutional security and regulatory compliance.

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- **In-Service and Training:** Education and training of the staff are key components of a quality assurance program. Correct Rx provides expert trainers that help our staff use their resources to the fullest potential. Associates are encouraged to take time to learn and explore new ideas that they can bring back to the group discussions. Correct Rx believes that the outcome of education is a better product and service. If it is accurate, then it is Correct.
- **Clinical Expertise 24/7:** Correct Rx will provide an on call consultant pharmacist 24 hours a day, 7 days per week. After normal business hours, a pharmacist can be reached at all times via cellular telephone.
- **Quality Assurance:** Correct Rx has an extremely active QA program that incorporates all aspects of our operation. Each member of our team has embraced the Correct Way and understands the importance of consistent accuracy.
- **Accuracy:** Correct Rx monitors all discrepancy reports and calculates our discrepancy rate every month. This information will be shared with DDOC but more importantly alerts Joe DeMino, PD the Vice President of Operations of any significant trends.
- **Problem Resolution:** If any concern is unresolved or your facility staff is not satisfied with the resolution, the problem will be triaged to Ellen Yankellow, PharmD - President and Chief Executive Officer of Correct Rx.
- **Something Extra:** You can always expect something extra from Correct Rx. **Whether it's producing an accurate report, preparing or resending an order, or taking a call after business hours, we're happy to assist you.**

Whatever it Takes: Every member of the Correct Rx transition and implementation team from the owners to the Vice President of Program Management to the Clinical Program Liaison will roll up their sleeves and do whatever it takes to ensure a smooth implementation. Correct Rx is known for our attention to detail and Dr. Yankellow's hands on approach.

- c. If the Vendor is going to integrate the current Vendor's employees and/or subcontractors, the Vendor must specify how it intends to integrate them and obtain BCHS approval for each employee; specifically how the Vendor will ensure continued benefits for retained staff.*

All of the current on-site clinical pharmacists are dedicated to providing comprehensive clinical programs. Our Clinical Staffing requirement will be increasing from the three current clinical on-site pharmacists to the required five onsite pharmacists in the new contract. Our three current on-site pharmacists (Dr. Amoah, Dr. McGee and Dr. Cornish) will all be remaining. Upon award notification, Correct Rx will immediately begin active recruitment in Delaware to fill the remaining two (2) positions.

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There will be no time delay in getting our staff cleared, oriented, credentialed because this task is already complete. The two (2) new onsite clinical pharmacists would of course need to be approved and processed, but this would not prevent moving forward with an expedited transition timeline.

Clinical Programs: More importantly, our clinical programs have evolved over the past three and half years in the DDOC system. Most of the required functions and tasks of the current procurement are already in place and will simply need to be continued or expanded. For those clinical requirements that are new, Correct Rx will work closely with BCHS to implement our go live plan once approved in a thoughtful, expeditious, and clinically sound manner.

Supplemental: Correct Rx understands and is excited that this RFP requires two (2) additional on-site clinical pharmacists. We have been actively interviewing candidates for these positions since October 2013 and have already identified several qualified professionals. As the DDOC is aware, Correct Rx hires pharmacists that are highly credentialed to include completion of a post graduate residency. Upon award, Correct Rx will move quickly to make offers to these candidates. We are hopeful that these prospective candidates will join our team and that they will be paired with the three (3) onsite pharmacist who will be retained in their current positions.

The DDOC will be well served by Correct Rx's years of experience providing onsite clinical services to include the DDOC facilities. There will be no learning curve. Others may claim to have the ability to provide onsite clinical services (or even suggest that these services could be delivered from offsite), but Correct Rx has a comprehensive and mature clinical offering that improves outcomes and reduces cost . . . and we now have the outcome data to prove it.

d. The Vendor's plan must outline how it intends to transfer offender medical files. Contracts may be involuntarily extended, not more than 180 days, to provide these services.

As the current pharmacy services provider, transferring offender prescription files will not be necessary. Awarding a new contract to Correct Rx will ensure minimal disturbances to continuity of care for medication therapy. Our pharmacy system already contains the individual medication profiles for each offender.

Many aspects of continuity relate to the capacity to transfer accurate pharmaceutical information to a Health Record System. Correct Rx utilizes CIPS software, which will allow for a bi-directional interface. The DDOC will be able to transfer the current pharmacy data electronically to other health record systems.

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It is our expectation that there should be an easy electronic transfer of all patient data during the transition/implementation period if necessary. Correct Rx is proposing that an initial test transfer be made for each facility. This test transfer will allow Correct Rx's Vice President Jill Molofsky, RPh and our Technology Integration Specialists to ensure that the data did in fact transfer and that any potential problems are resolved. Then, the second and last transfer of data closer to contract implementation will ensure that all patient information is accurate and up to date for the start of the contract. Correct Rx has successfully transferred data between many electronic health record systems.

Supplemental: Correct Rx has already been working with the DDOC and the outgoing medical vendor to ensure there is a complete and accurate data transfer of patient medication profiles to include both the existing and historical orders. We have provided files and begun the testing phase with the new HER system. If awarded, Correct Rx will be able to transition this contract without any disruption to patient care. The DDOC will also have redundancy protection, since the historical data will be available from Correct Rx dating back to July 2010.

- e. The Vendor's plan must also summarize problems anticipated during the course of transferring the contract to a new vendor at the end of the Vendor's term, including any proposed solutions. The Vendor must provide resumes for the management staff expected to be hired by the Vendor at both Regional and Institutional levels.*

Correct Rx does not anticipate any problems during the transition of pharmacy services to provide continuity of care. Choosing your current vendor will ensure continuity of care for the offender patients in DDOC. Correct Rx will provide resumes for the management and clinical staff expected to be hired at both the Regional and Institutional levels.

Correct Rx values our partnership with the DDOC and we will present any intended new hires to the BCHS Bureau Chief and Medical Director for approval prior to assignment to this contract.

Chain of Command – Point of Contacts

Correct Rx will follow the guidance of the BCHS regarding DDOC facility representatives during implementation. Correct Rx is cognizant of the chain of command and working with our partners to ensure proper protocols are followed. We will also make sure that the DDOC knows the specific person from Correct Rx to communicate with regarding pharmacy issues.

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Correct Rx understands the importance of establishing effective and professional relationships with our custody partners. Under the guidance of the BCHS, we will maintain meaningful relationships with the appropriate DDOC facility representatives so that we can make sure the necessary people are aware of our services and receive training as requested. Further, these relationships are essential to assure that we are responsive to the specificities of each facility and to the changing needs over the course of time throughout the contract.

We appreciate the special nuances of providing healthcare services in a correctional environment. Correct Rx will collaborate with custody during the transition phase and throughout the term of the contract in a manner that is least disruptive to facility operations. We will be fully cognizant of **the Department's responsibility to ensure public safety**. We believe that our success is dependent upon the success of each vendor delivering healthcare services to the DDOC. Our definition of success does not include cutting corners or deception. Correct Rx is dedicated to full transparency. We constantly assess our own performance, seek the feedback of others and energize our process of continuous quality improvement.

Subject Matter Experts!

The key to a well-designed comprehensive pharmacy program is that all associates work in tandem to provide the highest level of patient care. First you must ensure that you hire staff with the best experience and impeccable credentials. It is equally important that you provide a corporate culture founded on caring and accuracy. **Correct Rx embraces the concept that what we do and how well we perform our job matters. We call it the "Correct Way". All new associates as part of their orientation are trained to understand the importance of providing safe and reliable pharmaceuticals.** Our associates are expected to do things the "Correct Way". You can always expect something extra from Correct Rx associates, whether that is producing an accurate CQI report, preparing or sending an order, or taking a call after business hours. Accuracy is core to the culture of Correct Rx.

Credentialing

Correct Rx knows that accuracy and reliability are essential when providing pharmacy services for the Delaware Department of Correction (DDOC). Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies and professional references. Correct Rx maintains a Quality Assurance credentialing spreadsheet used to monitor compliance and plan for license and certification renewal. This credentialing spreadsheet is reviewed monthly at the internal CQI meeting.

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Correct Rx is proud of our pharmacists. Dr. Yankellow serves as the Chair of the University of Maryland Board of Visitors and we take great pride in our relationship with the University Of Maryland School Of Pharmacy. In addition, Dr. Yankellow serves as a faculty clinical instructor for the School of Pharmacy. Correct Rx is also an approved practice site for Pharmacy Students. As preceptors and mentors to Pharmacy School interns we are able to not only teach them the mandatory requirements of proper dispensing, clinical interventions, checking for interactions but also the importance of being accurate. As a pharmacy owned and operated by pharmacists being accurate is core to the culture of Correct Rx.

Correct Rx extends this pledge of excellence to our sub-contractors whether it is our maintenance company, or our courier service they must attend the Correct Rx orientation and abide by our rules. Most importantly all employees and sub-contractors **must accept the “Correct Way” of doing things. We verify all sub-contractors’ credentials and business licenses. “If it’s the right way, it’s the Correct Way” is more than a tag line** it is a promise of excellence surrounding our entire program. Correct Rx will ensure through our credentialing process that all staff has the proper credentials and licenses required by law to provide the pharmacy services described in the RFP Specifications. Correct Rx is fully licensed as an institutional pharmacy. All of our pharmacists are licensed pharmacists and are all in good standing.

On the following page you will find a table of the DDOC~Correct Rx Team. However, Please refer to section “II.B.4.a Personnel” for a copy of our organizational chart and a thorough description of our Executive Leadership, Program Management, Operations, Corporate Clinical Team and on-site pharmacists. In that section you will find professional bios and resumes of key member of our team.

DDOC ~ Correct Rx Team	Title
Executive Leadership	
Ellen H. Yankellow, PharmD	President & CEO <i>Contract Liaison</i>
Jill R. Molofsky, RPh, CCHP	Vice President
James P. Tristani, RPh	Vice President Purchasing
Martin Yankellow, Esq.	Vice President Regulatory Affairs / <i>I.T. Oversight</i>
R. Donovan “Don” Bossle	Controller – Oversight of Billing Functions <i>Finance Director</i>

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DDOC ~ Correct Rx Team	Title
Robert Matthews, BS, MA	Director of Marketing <i>Customer Relations, Inclusion & Diversity</i>
Program Management and QA	
John Nattans, MC, LCPC, NCC	Vice President Programs & Quality Assurance
Rachael Campbell	Vice President Administrative Services
Operations	
Joe DeMino, PD	Vice President of Operations
Jaye Wexler, PharmD	General Manager of Operations <i>Director of Education Services</i>
Peter Crosby	Director of I.T. Systems
Corporate Clinical Support	
Hui Seo, PharmD, MBA, CCHP	Vice President Clinical Programs
Valerie Barnes, PharmD, MS	Director of Pharmacoeconomics Senior Clinical Pharmacist
Kareem Karara, PharmD	Clinical Pharmacist
Heather Hurley, PharmD	Senior Clinical Pharmacist
DDOC On-site Clinical Pharmacists	
Crosby Amoah, PharmD, R.N.	On-Site Clinical Pharmacist DDOC Clinical Coordinator
Jaime McGee, PharmD	On-Site Clinical Pharmacist
Janene Cornish, PharmD, MT (ASCP)	On-Site Clinical Pharmacist

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f. The Vendor must provide credentials for all medical providers performing consultative services as determined by BCHS.

Correct Rx understands that credentials for all medical providers performing consultative services as determined by BCHS must be provided. Currently, Correct Rx does not have a relationship with BCHS to provide consultative services for medical providers. Correct Rx has provided the credentials for clinical pharmacists who have provided services over the last three and half years in **the above section “II.B.4.a Personnel.”**

h. The Vendor will provide a similar transition plan at the end of a contractual period for transition to a new contract or a new Vendor.

Correct Rx will participate in transition planning and implementation at the end of the contract term. Thirty days prior to contract end Correct Rx will participate in the following activities as directed by BCHS:

- Correct Rx will participate in any contract-ending physical inventory.
- Correct Rx will provide access to our I.T. department to plan and provide transfer of prescription data.
- All required records, data, etc. will be made available. We will collaborate with the DDOC in any transition planning meetings.

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C. Detailed Requirements

- 1. The Vendor proposal must describe how their system will accomplish each of the tasks citing NCCHC, ACA standards and relevant DDOC policy (<http://www.doc.delaware.gov/information/policyManual6.shtml>). The proposal must indicate how the system meets the standard(s) and how it provides for efficient and effective offender care in all the following areas.*

Correct Rx has provided a proposal that will accomplish each RFP task in a manner that either meets or exceeds NCCHC, ACA standards and DDOC Policy. Not only does our proposal describe a system that meets (or exceeds) the standard(s) and how it provides for efficient and effective offender care in all areas covered by this RFP, but we have been demonstrating this for the past three and a half years as the pharmacy vendor for the DDOC.

Correct Rx has provided a table below that lists each policy from the ***DDOC Policy Manual Chapter 11 Health Services*** and cites the relevant NCCHC and ACA Standards. One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. If any relevant ACA or NCCHC Standard or corresponding DDOC Policy was inadvertently omitted, it was not a deliberate action by Correct Rx. Correct Rx will perform all aspects of our pharmacy program in compliance with ACA, NCCHC Standards and DDOC Policy.

These standards are actually expected practices that will produce the desired outcome of improved patient care. The goals, performance standards, outcome measures, expected practices, protocols and process indicators will be incorporated in the pharmaceutical services provided to the DOC.

A detailed description of how Correct Rx will accomplish each task is provided in ***Section II Scope of Work B General Requirements*** and ***Section II Scope of Work C Detailed Requirements***.

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Brown text indicates revisions to this chart

SECTION A – GOVERNANCE AND ADMINISTRATION – Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Access to Care	9/12/2013	11-A-01	P-A-01, J-A-01 (Essential) / 1-HC-1A-01 (Mandatory)
Responsible Health Authority	9/12/2013	11-A-02	P-A-02, J-A-02 (Essential) / 1-HC-2A-01 (Mandatory)
Medical Autonomy	12/11/13 (rev)	11-A-03	P-A-03, J-A-03 / 4-4381 (Essential)
Administrative Meetings and Reports	4/23/2010	11-A-04	P-A-04; J-A-04 / 4-4408, 4-4409 (Essential)
Staff Meetings	4/23/2010	11-A-04.1	P-A-04, J-A-04 / 4-4408, 4-4409 (Essential)
Health Services Reports	07/16/2010 (rev)	11-A-04.2	P-A-04, J-A-04 (Essential) / 1-HC-4A-02
Mental Health Services Reports	4/13/2009	11-A-04.3	P-A-04 / 4-4408, 4-4409 (Essential)
Policies and Procedures	12/09/2013 (rev)	11-A-05	P-A-05 (essential) / 1-HC-7A-03
Statewide Quality Improvement Program	12/11/2013 (rev)	11-A-06	P-A-06 / 4-4410, 4-4402, 4-9423 (Essential)
Emergency Response Plan	08/13/2010 (rev)	11-A-07	P-A-07, J-A-07 (Essential) / 1-HC-2A-13 (Mandatory)
Emergency Code 4, 7, 11 Response	12/17/2012	11-A-07.1	P-A-07, P-C-03 (Essential) / 1-H-2A-13, 1-HC-2A-14 (Mandatory)
Emergency Supplies Mass Casualties	7/16/2010	11-A-07.2	P-A-07, J-A-07 (Essential)
First Aid Kits	2/15/2014 (rev)	11-A-07.3	P-A-07 / 4-4388 (Essential)
Communication of Special Needs Patients	7/16/2010	11-A-08	P-A-08, J-A-08 (Essential) / 1-HC-3A-06
Privacy of Care	7/16/2010	11-A-09	P-A-09, J-A-09 (Important) / 1-HC-3A-10
Procedure in the Event of an Offender Death	7/16/2010	11-A-10	P-A-10, J-A-10 (Important) / 1-HC-7A-05
Mortality and Morbidity Review Committee- Administrative and Clinical	2/15/2014 (rev)	11-A-10.1	P-A-10, MH-A-10, J-A-10, J-A-06 / 04-4425 (Important)
Grievance Mechanism	7/16/2010	11-A-11	P-A-11, J-A-11 (Important) / 1-HC-3A-01
Inquiries, Complaints and Records Requests from Attorneys, Families or Advocacy Agencies Concerning Medical Care	1/18/2013	11-A-11.1	P-A-11

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SECTION B – MANAGING A SAFE AND HEALTHY ENVIRONMENT Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Infection Control Program	07/30/2010 (rev)	11-B-01	P-B-01, J-B-01 (Essential) / 1-HC-1A-11 (Mandatory)
Management of TB	4/05/2014 (rev)	11-B-01.1	P-B-01, J-B-01 (Essential) / 1-HC-1A-12 (Mandatory)
HIV Infected Offenders	07/30/2010 (rev)	11-B-01.2	P-B-01, J-B-01 (Essential) / 1-HC-1A-14 (Mandatory)
Management of HEP Infected Offenders	08/13/2010 (rev)	11-B-01.3	P-B-01, J-B-01 (Essential) / 1-HC-1A-13 (Mandatory)
Communicable Disease Practice	07/30/2010 (rev)	11-B-01.4	P-B-01, J-B-01 (Essential) / 1-HC-1A-11, 1-HC-1A-15 (Mandatory)
Offender BBP Exposure	07/30/2010 (rev)	11-B-01.5	P-B-01, J-B-01 (Essential) / 1-HC-1A-11 (Mandatory)
Patient Safety	4/23/2010	11-B-02	P-B-02, J-B-02 (Important)
Environmental Health and Safety	4/13/2009	11-B-02.1	P-B-02, J-B-02 (Important) / 1-HC-6A-12 (Mandatory)
Health Sanitation and Food Handlers	4/23/2010	11-B-02.2	P-B-02, J-B-02 (Important) / 4-4321, 4-4322 (Important)
Staff Safety	4/23/2010	11-B-03	P-B-03, J-B-03 (Important)
Federal Sexual Assault Reporting Regulations	07/30/2010 (rev)	11-B-04	P-B-04, J-B-04 (Important)
Procedure in the Event of Sexual Assault	10/04/2013 (rev)	11-B-05	P-B-04 (Important), P-B-05 (Important) / 4-4406; Prison Rape Elimination Act National Standards for Prisons and Jails 28 C.F.R. Part 115
SECTION C – PERSONNEL AND TRAINING Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Credentials, Privileging and Peer Review of Healthcare Providers	2/24/2014 (rev)	11-C-01 (rev)	P-C-01 (Essential), P-C-02 (Important)
Clinical Performance Enhancement	4/13/2009	11-C-02	P-C-02 / 4-4411 (Important)
Clinical Review for Mental Health	4/23/2010	11-C-02.1	P-C-02, J-C-02 / 4-4411 (Important)
Professional Development	4/13/2009	11-C-03	P-C-03 / 4-4087 (Essential)
Training for Correctional Officers	4/13/2009	11-C-04	P-C-04 / 4-4378 (Essential)
Medication Administration Training	09/09/2011 (rev)	11-C-05	P-C-05 (Essential)
Offender Workers	09/09/2011 (rev)	11-C-06	P-C-06 / 4-4393 (Essential)
Staffing Levels	4/13/2009	11-C-07	P-C-07 / 4-4412 (Important)
Orientation for Health Staff	4/23/2010	11-C-09	P-C-09, J-C-09 (Important)

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SECTION D (Continued) – HEALTH CARE SERVICES AND SUPPORT Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Pharmaceutical Operations	8/5/2013	11-D-01	P-D-01 (essential) / 4-4378, 4-4379
Medication Management	4/13/2009	11-D-02	P-D-02/4-4378, 4-4382 (Essential)
Temperature Sensitive Medications	4/23/2010	11-D-02.1	NCCHC Standard(s) M-D-02, P-D-02, J-D-02, P-A-08, J-A-08
Transcription of Medical & Telephone Orders	4/23/2010	11-D-02.2	P-D-02, J-D-02 / 4-4378, 4-4382 (Essential)
Medication Administration Record	4/23/2010	11-D-02.3	P-D-02, J-D-02 / 4-4378, 4-4382 (Essential)
Medication Errors	4/23/2010	11-D-02.4	P-D-02, J-D-02 / 4-4378, 4-4382 (Essential)
Psychotropic Meds	4/13/2009	11-D-02.5	P-D-02 / 4-4378, 4-4382 (Essential)
Monitoring Psychotropic Meds	4/23/2010	11-D-02.6	P-D-02, J-D-02 / 4-4378, 4-4382 (Essential)
Crushed Medications	2/16/2010	11-D-02.7	P-D-01, P-D-02 / 4-4378, 4-4382 (Essential)
Clinic Space, Equipment and Supplies	4/23/2010	11-D-03	P-D-03, J-D-03 / 4-4426, 4-4427 (Very Important)
Diagnostic Services	4/13/2009	11-D-04	P-D-04, 4-4427 (Important)
Specialized Ambulatory Care	4/23/2010	11-D-05	P-D-05, J-D-05 / 4-4348, 4-4351, 4-4414 (Important)
Specialized Mental Health Care	4/13/2009	11-D-05.1	P-D-05 / 4-4548, 4-4351, 4-4414
Hospital Care	4/13/2009	11-D-05.2	P-D-05 / 4-4348, 4-4349, 4-4414

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SECTION E – INMATE CARE AND TREATMENT Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Information on Health Services	4/13/2009	11-E-01	P-E-01/ 4-4331 (Essential)
Fee for Service(Co-Pay) Program	4/13/2009	11-E-01.1	P-A-01, P-E-01 / 4-4331 (Essential)
Receiving Screening-Intake	4/23/2010	11-E-02	P-E-03, J-E-03 / 4-4362, 4-4370 (Essential)
Transfer Screening	4/23/2010	11-E-03	P-E-03, J-E-03 / 4-4362, 4-4370 (Essential)
Health Assessment	09/09/2011 (rev)	11-E-04	P-E-04 / 4-4365 (Essential)
Periodic Health Assessment	4/13/2009	11-E-04.1	P-E-04 / 4-4367 (Essential)
Mental Health Screening and Evaluation	4/13/2009	11-E-05	P-E-05 / 4-4371, 4-4372 (Essential)
Oral Care	Incorporated into 11-A-01 Access to Care	11-E-06	P-E-06, J-E-06 / 4-4360 (Essential)
Non-Emergent Healthcare Requests Sick Call	4/23/2010	11-E-07	P-E-07, J-E-07 / 4-4346 (Essential)
Emergency Services	Incorporated into 11-A-01 Access to Care	11-E-08	P-E-08 / 4-4351 (Essential)
Segregated Offenders	5/5/2011	11-E-09	P-E-09 / 4-4400 (Essential)
Patient Escort	4/13/2009	11-E-10	P-E-10, 3-ALDF-4E-30 (Important)
Nursing Assessment Protocols	4/23/2010	11-E-11	P-E-11, J-E-11 / 4-4382 (Important)
Continuity of Care	4/23/2010	11-E-12	P-E-12, J-E-12 / 4-4347 (Essential)
Discharge Planning	1/6/2014 (rev)	11-E-13	P-E-13, J-E-13 / 4-4347 (Important)
Offender Medical Re-Entry	9/9/2011	11-E-13.01	P-E-12, J-E-12 / 4-4347
Treatment of Transgender Persons	9/9/2013	11-E-14	NCCHC: E-02 Receiving Screening (Essential) ACA: 4-4399, 4-4475, 4-4305, 4-4404, 4-4350 Special Needs and PREA: 115.15, 115.41, 115.42, 115.86

SECTION F – HEALTH PROMOTION AND DISEASE PREVENTION Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Healthy Lifestyle Promotion	4/23/2010	11-F-01	P-F-01, J-F-01 / 4-4363 (Important)
Nutrition and Medical Diets	1/27/2014 (rev)	11-F-02	P-F-02 / 4-4318 (Important)
Hunger Strike	5/24/2013	11-F-03	A-03; I-02; 4-ADLF-2A-53; 4-D-15
Use of Tobacco	1/27/2014 (rev)	11-F-03	P-F-03 (Important)

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SECTION G – SPECIAL NEEDS AND SERVICES Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Chronic Care	4/23/2010	11-G-01	P-G-01, J-G-01 / 4-4300 (Essential)
Special Needs Treatment Plan	4/23/2010	11-G-02	P-G-02, J-G-02 (Essential)
Mental Health Treatment Plan	4/13/2009	11-G-02.1	P-G-02 / 1-HC 1A-07
Infirmity Care	4/23/2010	11-G-03	P-G-03, J-G-03 / 4-4352 (Essential)
Mental Health Services	4/13/2009	11-G-04	P-G-04 / 4-4368 (Essential)
Special Needs Unit	4/13/2009	11-G-04.1	P-G-04 / 4-4368
Telepsychiatry	4/13/2009	11-G-04.2	P-G-04 (Essential)
Suicide Prevention, Policies and Procedures	9/29/2011	11-G-05	P-G-05, J-G-05, P-E-02, J-E-02, P-E-05, J-E-05, P-A-10, J-A-10 / 4-4373 (Essential)
Intoxication and Withdrawal	1/24/2011	11-G-06	P-G-06 / 4-4376 (Essential)
Methadone Treatment and Dispensing	2/28/2012	11-G-06.1	P-G-06, P-E-02 / 4-4376
Care of Pregnant Offender	4/13/2009	11-G-07	P-G-07 / 4-4353
Meritorious Goodtime for BCHS Substance Abuse Programs	08/13/2013 (rev)	11-G-08	P-G-08 / 4-4097; 1-TC-4A-31; 2-CO-1E-01 thru 06; 2-CO-1E-09
Pregnancy Counseling	Incorporated into 11-A-01 Access to Care	11-G-09	P-G-10, J-G-10 / 4-4353, 4-4436 (Important)
Aids to Impairment	4/23/2010	11-G-10	P-G-11, J-G-11 / 4-4358 (Important)
Care for the Terminally Ill	4/23/2010	11-G-11	P-G-12, J-G-12 / 4-4350 (Important)
SECTION H – HEALTH RECORDS Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Health Record Format and Contents	04/06/2011 (rev)	11-H-01	P-H-01 (Essential) / 1-HC-4A-06
DACS EHR Module Business Rules	04/05/2014	11-H-01.1	P-H-01 Health Records Format and Contents (Essential); 4-4396, 4-4413, 4-4414, 4-4415
Confidentiality of Health Records and Information	08/13/2010 (rev)	11-H-02	P-H-02 (Essential) / 1-HC-3A-03 (Mandatory)
Access to Custody Information	08/13/2010 (rev)	11-H-03	P-H-03 (Important)
Availability and Use of Health Records	08/13/2010 (rev)	11-H-04	P-H-04 (Important)
Offender Access to Health Records	4/13/2009	11-H-05	
SECTION I – MEDICAL–LEGAL ISSUES Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Clinically Ordered Seclusion	4/23/2010	11-I-01	P-I-01, J-I-01 / 4-4405 (Essential)
Use of Clinical Therapeutic Restraints	4/23/2010	11-I-1.1	P-I-01, J-I-01 / 4-4405 (Essential)
Use of Restraints for Pregnant Offenders	3/10/2010	11-I-1.2	
Emergency Psychotropic Medication	4/23/2010	11-I-02	P-I-02, J-I-02 / 4-4401 (Essential)
Non-Emergency Involuntary Medication Administration	4/13/2009	11-I-02.1	P-I-02 / 4-4342 (Essential)

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SECTION I – MEDICAL–LEGAL ISSUES (Continued) Confidential & Proprietary			
POLICY	DATE	SECTION	Related NCCHC / ACA Standard
Forensic Information	04/23/2010 (rev)	11-I-03	P-I-03, J-I-03 / 4-4342 (Important)
End of Life Decision	4/13/2009	11-I-04	P-I-04 (Important)
Informed Consent and Right to Refuse	Incorporated into 11-A-01 Access to Care	11-I-07	
Medical & Other Research	4/13/2009	11-I-06	P-I-06 / 4-4111, 4-4112, 4-4113, 4-4402 (Important)
Executions	4/13/2009	11-I-07	P-I-07 (Important)

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C. Detailed Requirements

2. NCCHC and ACA Accreditation

The Vendor is required to participate in obtaining and/or maintaining NCCHC and ACA accreditation for each and every current and future site in the DDOC, as applicable. DDOC intends to include specific liquidated damages in the contract between DDOC and the Vendor for any failure to attain and/or maintain such certifications and/or accreditations based upon pharmacy problems. The beginning and ending dates of the penalty will be governed by any written communication from the NCCHC or ACA. Any date within any calendar month will serve as the beginning and ending dates and each inclusive month, (first, intermediate, and last) of non-accreditation will be assessed the penalty. Any assessed liquidated damages will bear the appropriate legal relationship to the actual harm caused DDOC. Any liquidated damages shall not be the exclusive remedy for failure to achieve and/or maintain accreditation.

Correct Rx will participate in obtaining and/or maintaining NCCHC and ACA accreditation for each and every current and future site in the DDOC, as applicable. Correct Rx acknowledges that the DDOC intends to include specific liquidated damages in the contract between DDOC and the Vendor for any failure to attain and/or maintain such certifications and/or accreditations based upon pharmacy problems. Correct Rx understands that the beginning and ending dates of the penalty will be governed by any written communication from the NCCHC or ACA. Correct Rx further acknowledges that any date within any calendar month will serve as the beginning and ending dates and each inclusive month, (first, intermediate, and last) of non-accreditation will be assessed the penalty. Correct Rx understands that any assessed liquidated damages will bear the appropriate legal relationship to the actual harm caused DDOC and that any liquidated damages shall not be the exclusive remedy for failure to achieve and/or maintain accreditation.

Accreditation Experts

One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. Correct Rx Programs are all designed to meet or exceed NCCHC and ACA accreditation standards. Correct Rx has become known as correctional pharmacy accreditation specialists. Correct Rx will partner with our co-vendors and the DDOC to ensure that all DDOC facilities exceed the pharmacy standards, so that achieving and maintaining accreditation is never in question.

Compliance with NCCHC and ACA Standards

Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA). Correct Rx ensures that all pharmacy program services are compliant with NCCHC and ACA standards. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them.

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Education and training of the staff is a key component of a quality program. All training provided by our expert in-house and guest trainers that help staff use their resources to the fullest potential are provided in compliance and consistent with NCCHC and ACA standards and the local State Board of Pharmacy. Correct Rx believes the outcome of education is a better product and service. If it is Accurate, then it is Correct.

ACA Extra

Beyond the fact that Correct Rx has never failed an ACA audit and that we have assisted many facilities in their preparation to become accredited or maintain accreditation, Correct Rx is actively involved with ACA.

- Each year Correct Rx participates in the Congress of Correction and Winter Conferences hosted by the ACA.
- Correct Rx is the sponsor of the Health Care Welcome Reception at each conference.
- Our Clinical Team has presented many times over the years at these conferences.
- Dr. Ellen Yankellow and Mr. John R. Nattans, served on the host committee at the 143rd Congress of Correction held August 9-14, 2013.
- John R. Nattans is the current President of the Maryland Criminal Justice Association, a dual membership chapter of ACA. In this capacity, Mr. Nattans is a voting member of the Delegate Assembly and member of the Dual Membership Chapter, State and Geographical Affiliates Committee. Currently, Mr. Nattans is working on a special project with Dr. Betty Gondles to improve communication and grow membership in ACA.
- Correct Rx and BCHS co-authored **an article entitled “Diabetes Education: State and Pharmacy Partnership Goes Beyond Medication Treatment”**. **This article is appearing in ACA’s Corrections Today Healthcare Editions in November 2013.** This exciting article describes the benefits of pharmacist-directed group education diabetes classes at BWCI where a 1.6% reduction of A1c was obtained through nonpharmacological methods.

NCCHC Extra

Beyond the fact that Correct Rx has never failed an NCCHC audit and that we have assisted many facilities in their preparation to become accredited or maintain accreditation, Correct Rx is actively involved with NCCHC.

- Each year Correct Rx participates in the NCCHC Spring Conference on Correctional Care and the National Conference on Correctional Care.
- Our Clinical Team has presented many times over the years at these conferences.

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- Our Vice President of Operations, Jill Molofsky and our Vice President of Clinical Programs, Dr. Hui Seo are Certified Correctional Health Professionals through the NCCHC. This level of expertise ensures that all pharmacy services policies and procedures are compliant with NCCHC standards, which we will apply regardless of whether the institution is currently accredited. Recently, Correct Rx has incorporated this certification as a professional development goal for each of our clinical pharmacists.
 - From the NCCHC website (<http://www.ncchc.org/health-professional-certification>) **“Participation in NCCHC's Certified Correctional Health Professional program is an investment in your future that will give you a professional edge. Certification recognizes the mastery of national standards and the knowledge expected of leaders in this complex, specialized field. The CCHP credential is a symbol of achievement and leadership, and is highly valued not only by participants but also by employers.”**
- Correct Rx clinical team member have been selected to provide a number of educational seminars and poster presentations at national NCCHC conferences which include:
 - **“Polypharmacy: The Benefits of a Medication Therapy Management Program”** – presented at 2012 National Conference for the National Commission of Correctional Healthcare Professionals.
 - **“Chest Update: What it means for your Coumadin Clinic Management”** – Poster presentation presented at 2012 National Conference for the National Commission of Correctional Healthcare Professionals.
 - **“Managing Diabetes Associated Co-Morbidities in a correctional setting: How to impact ER visits and hospitalizations”** – Poster presentation presented at 2012 National Conference for the National Commission of Correctional Healthcare Professionals.
 - **“HIV and Mental Health: Special Treatment Considerations”** – presented at 2011 National Conference for the National Commission of Correctional Healthcare Professionals.

Policy Development

Correct Rx shall provide consultation on appropriate medication protocols. Correct Rx will continue to assist in the review, development and implementation of DDOC pharmaceutical policy, procedure, and protocols. Development of any new policy language shall be in conjunction with, and approved by the BCHS and the DDOC.

Medication Protocols

Correct Rx has established itself as a leader in correctional pharmacy services and partners with medical providers to ensure that the health services provided in the correctional setting meets or exceeds all standards of care.

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Correct Rx works closely with our clients to assist in the development of medication protocols in order to ensure compliance with all applicable standards of correctional health care. Our clinicians, managers and administrators have significant experience assisting with the development of policies that ensure patient safety, improve patient compliance, and decrease waste and diversion.

Also, Correct Rx has deliberately invested in the development of our clinical initiatives and programs and has built a team of highly credentialed clinical pharmacists. Our clinical pharmacists both onsite and in our corporate office will continue to partner with the DDOC, custody, and our healthcare co-vendors in the development and implementation of meaningful medication protocols and clinical guidelines. Correct Rx views the ongoing medication room audits, formulary management, non-formulary processes, Pharmacy & Therapeutics meetings and interpretation of the utilization data, as opportunities for our experts to inform our partners regarding policy and protocol decisions.

Policy and Procedure

Correct Rx recognizes that there is increased scrutiny to ensure compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring for the safety and welfare of the public. Correct Rx has worked closely with clients, including Statewide systems and national correctional healthcare providers, to design comprehensive Pharmacy Program Services policies, procedures and protocols. Well developed policy and procedures serve as a professional guide to pharmaceutical services for the correctional facility to:

- Enhance patient care and assure the safety of offenders receiving pharmaceutical services
- Promote consistency and continuity
- Communicate important policies
- Aid in personnel training
- Aid in evaluating performance
- Increase legal protection

Correct Rx will continue to review the policies, procedures, and protocols to ensure that they are aligned with ACA standards, NCCHC standards, and all applicable Delaware Statutes, regulations, policies, and guidelines.

Proven History

Correct has worked extensively with our clients to develop programs and protocols that cover a vast array of issues in correctional health care. They include medication administration procedures, medication administration documentation, medication self administration programs, accountability of controlled substances, storage and handling of medications. Notable and complex examples of guidance include:

II. Scope of Work

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- During the past year our DDOC on-site clinical pharmacists have helped reinforce policies and procedures for controlled substance documentation by providing staff education on proper controlled substance documentation and controlled substance documentation audits for the medical vendor. Correct Rx is also collaborating with the DDOC and the Medical Vendor to update the current Controlled Substance Policy.
- Our in-site DDOC clinical pharmacists have helped revise stock policy for the medication storage areas and pharmacies. Correct Rx collaborated with the Medical Vendor staff and the BCHS to determine appropriate par levels of each stock item and a maximum order quantity for each stock item at all DDOC sites to help eliminate unnecessary stock items and reduce costs.
- Correct Rx also collaborated with JTVCC infirmary staff to utilize OTCs from bulk stock bottles for housed infirmary patients to cut down on the amount of medications kept in the storage area due to limited space available and to reduce **waste of discontinued or expired medications**. **The pharmacist's clinical expertise** allows the Correct Rx on-site pharmacists to participate in developing site-specific procedures and guidelines/protocols.
- Currently, Correct Rx is working with several of our clients to implement policies and procedures regarding the use of the newly approved protease inhibitors boceprevir and telaprevir (triple therapy) in the treatment of Hepatitis C. Using our clinical expertise and applying pharmacoeconomic principles to the clinical outcomes research data that is currently available, we are assisting our clients in the development and implementation of policy that is mindful of clinical guidelines, outcomes, costs and the resources needed to implement the policy.
- In March 2011, with a short timetable Correct Rx dedicated countless hours of support to assist a client with developing the Policy and Procedure Manual to comply with the California Department of Corrections.
- **In May 2011, the Clinical Department developed our client's Pharmacy Policy and Procedure Manual** using correctional experience and intimate knowledge of their existing policy and procedures. Upon completion, Correct Rx orientated and trained each covered facility during our quarterly site visits.
- In 2009, Correct Rx developed a statewide protocol for the destruction and removal of unwanted, end-user Schedule II, III, IV, and V controlled substances on-site for the Delaware Department of Corrections. Correct Rx worked with the Bureau of Correctional Service, the local DEA Enforcement Agency and the Health Services Vendor to develop this policy and procedure. This protocol **incorporated the Office of National Drug Control Policy's methodology** for destruction and ensured compliance for the facilities with all state and federal regulations.

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- In 2008, Correct Rx coordinated the establishment of a Narcotic Treatment Program for the Maryland Department of Public Safety and Correctional Services. Correct Rx worked closely with the DEA, Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Corrections, Medical, Mental and Dental Services Vendor to develop the mandated policies and procedures to run the program, but also guided our client through myriad of federal and state regulatory hurdles associated with the development of a program of this magnitude.

Correct Rx will continue to work collaboratively with the BCHS Medical Director and our co-vendors to continuously improve the policies, procedures and protocols related to the delivery of health services and medication use within DDOC facilities. Correct Rx views all of our policies and procedures as a living document that should be frequently analyzed and updated to provide ongoing improved service to meet the needs and challenges of the DDOC. Our goal is to assist our clients in any manner to ensure that they stay at the forefront of correctional care. Our clinical and regulatory staffs are committed to assisting the DDOC in maintaining compliance with the ever changing medical and regulatory demands in correctional health care.

Regulatory Affairs

Supplemental: Regulatory Affairs

Correct Rx will not put the DDOC or our company in harm's way. There is increased scrutiny to ensure regulatory compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring **for the safety and welfare of the public.** **Correct Rx's commitment to promoting** strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division that monitors the laws, rules and regulations which govern institutional pharmacies and the clients we serve.

Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of Federal, State and local legislation. Observing State and Federal law should be the most basic condition required to provide service to the DDOC. Correct Rx finds it distasteful at best that some decide to misrepresent the law to potential clients in an attempt to win business. **A vendor's effort** to either intentionally mislead the DDOC or failure to comprehend the laws that govern pharmacy licensure cannot be left without correction as at the very least they have the potential to confound the evaluation process. Perhaps, this behavior is indicative of future behavior if awarded the contract.

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Supplemental: Regulatory Affairs (continued)

Correct Rx performs all work in compliance with all Federal, State, and contract specifications. Correct Rx customizes its facility policy and procedures to comply with law and institutional policies and directives as well as all regulatory and credentialing institutions (e.g., BOP, JC, NCCHC, ACA, DEA).

Correct Rx performs all work in compliance with all Federal, State, and contract specifications. Correct Rx customizes its facility policy and procedures to comply with law and institutional policies and directives as well as all regulatory and credentialing institutions (e.g., BOP, JC, NCCHC, ACA, DEA).

Correct Rx is licensed as an institutional pharmacy by the Maryland Board of Pharmacy and maintains a DEA license that allows for the dispensing of controlled substances. We are a licensed pharmacy provider in 48 States, including Delaware. There have not been any actions taken or any actions pending against our license in Maryland, Delaware or any other jurisdictions where Correct Rx is licensed.

Correct Rx is proud of the fact that we not had any liquidated damages or fines assessed by any client since our inception. Even further, we have not negotiated relief of any liquidated damages and or fines. Correct Rx ensures that all Federal and State licenses and certificates necessary to legally provide the pharmacy program or any of its sub-components in the name of DDOC are obtained and retained. Correct Rx prides ourselves on doing what the contract requires thus eliminating the potential for fines or assessments. Correct Rx has never settled a lawsuit since our inception nor is any pending. Correct Rx has never referred any client or patient to our insurance company.

Correct Rx works to keep our clients abreast of the community standards and National and State regulations. Some vendors attempt to muddy the waters surrounding licensure and create confusion in the correctional community surrounding which licenses are required by both the facility and the pharmacy to provide services and patient-specific and non-patient specific medications. Misleading statements either demonstrate a failure by the vendor to understand the applicable law or are an effort to intentionally misinform the DDOC. Vendors should realize that the DDOC is not well served by false statements and willful deception could result in technical disqualification.

Please refer to section IV. B. 1. “Supplemental: Regulatory Affairs” of our Response

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Correct Rx's commitment to promoting strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division. Our focus promotes and monitors the laws, rules and regulations that govern institutional pharmacies and the clients that we serve. Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of Federal, State and local legislation. While many organizations have failed to address the issue and view the matter as either unimportant or cost prohibitive, Correct Rx has developed a Regulatory Affairs Department.

The Vice President in charge of Correct Rx's Regulatory Affairs Division is a fully licensed attorney that is employed full-time and charged with overseeing compliance by working hand in hand with every level of management and operations. This undertaking has created a complete program for oversight that addresses the needs of each tier of our corporate structure. The result is a company that is in tune with industry-wide changes as well as state-specific regulations.

An added value of the Regulatory Affairs Department is the ongoing analysis of resource allocation, including leadership development and comprehensive continuing education. Our Regulatory Affairs Department implements a companywide staff development program designed to recognize potential compliance issues and promotes sound operational policies for the whole of Correct Rx. The DDOC receives the benefit of a company with policies and procedures that comply with the strictest standards of our industry and regulatory branches of government.

Correct Rx ensures that all work is performed in compliance with all Federal, State, and **contract specifications, or in their absence, the best practices of the trade.** Correct Rx's facility policy and procedures are customized to comply with institutional policies and directives and is already compliant with all regulatory and credentialing institutions (e.g., ACA, NCCHC, BOP, and DEA).

In addition, Correct Rx will assist the DDOC in updating protocols, policies and procedures. Correct Rx is proud of our services and our experienced management team. Dr. Yankellow actually developed many of the standard practices surrounding correctional pharmacy while working as the Vice President of Operations for Choice Drug Systems. Our standards produce the desired outcome of improved patient Care.

Credentialing

Correct Rx knows that accuracy and reliability are essential when providing pharmacy services for DDOC. Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies and professional references. Correct Rx maintains a Quality Assurance credentialing spreadsheet used to monitor compliance and plan for license and certification renewal. This credentialing spreadsheet is reviewed monthly at the internal CQI meeting.

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No Penalties, Sanctions, Liquidated Damages or Successful Law Suits

Correct Rx has not had any penalties or sanctions imposed for fraud or for any other offenses of any kind by any Federal, State or other regulatory agency against the corporation or its staff. Program Audits conducted by any of our clients have never resulted in less than superior ratings regarding Contract Requirements and Liquidated Damages have never been assessed against the company. We have never had any action taken by the CMS against our company or any of its employees or owners.

Correct Rx has had no judgments settled since its inception. Correct Rx has no ongoing litigation in any court. Correct Rx has not been directed not to disclose information by any court. Additionally, Correct Rx has no outstanding insurance or liability claims now or since our inception. **This is a strong statement for any health Care company to make particularly in the correctional pharmacy arena. We are proud of our clean record and are committed to maintaining the high standards that the DDOC expects form its vendors.**

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C. Detailed Requirements

3. *Prison Rape Elimination Act (PREA)*

The Vendor must adopt and comply with all PREA standards. In accordance with the Federal Prison Rape Elimination Act of 2003, and Delaware Department of Correction Policy Number 8.60 "Prison Rape Elimination Act", the Vendor must agree to report allegations of sexual misconduct promptly, fully cooperate with investigation inquiries and participate in training as directed by the Department of Correction, Employee Development Center, within thirty (30) days of entering into contract. The vendor, vendor staffs (including volunteers and subcontractors) agree to abide by Department of Correction Policy 8.60. The Vendor acknowledges that all allegations of staff sexual misconduct and/or harassment will be investigated and, if substantiated, will result in discipline up to and including termination. In addition, all substantiated cases will be referred to the Delaware Department of Justice for prosecution. Failure to report such misconduct, delays in reporting, or material omissions shall be grounds for termination. If the Department policy is modified, the Vendor will be notified and shall comply. See State of Delaware, Department of Correction Policy Number 8.60 "Prison Rape Elimination Act."

Prison Rape Elimination Act (PREA)

Correct Rx Pharmacy has adopted and currently complies with all PREA standards. **Additionally, Correct Rx shares the Department's policy of "zero tolerance" for the sexual abuse or sexual harassment of offenders.** We fully accept our responsibility to actively participate in the prevention, detection and reporting of prison rape and sexual activity. All Correct Rx clinical pharmacists who have offender contact have successfully **completed the Correct Rx's corporate PREA training module and the Department's online PREA training.** As part of Correct Rx's ongoing employee training and as a condition of employment, each clinical pharmacist shall successfully complete a refresher PREA training every 6 months in May and October. Correct Rx is committed to ensuring that existing efforts as well as new strategies to prevent, detect, and respond **to acts of sexual abuse and harassment complies with the Department's current PREA policy.**

Within thirty (30) days of entering into the new contract, Correct Rx will participate in PREA training as directed by the Department of Correction, Employee Development Center.

Correct Rx Policies Reinforce PREA Standards

Correct Rx requires that all employees acknowledge their understanding of and willingness to comply with our corporate sexual harassment policy. This policy extends to inappropriate behavior, sexual harassment or abuse as defined in PREA. Under no circumstance will Correct Rx tolerate inappropriate behavior in any form on the part of employees.

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Per our policy, sexual harassment or abuse between staff or a staff member and an offender will result in disciplinary action up to and including dismissal and may subject the offender to personal, legal and financial liability.

Reporting PREA Events and Cooperation with PREA Investigations

Correct Rx Pharmacy agrees to report allegations of sexual misconduct promptly and to fully cooperate with investigations or inquiries that may ensue. In fact, Correct Rx Pharmacy's PREA policy specifically addresses our responsibility to report potential PREA events immediately to the Department's PREA. Correct Rx's PREA policy clearly states that employees shall not:

1. Commit, participate in, support, or otherwise condone sexual misconduct;
2. Dissuade, advise, or discourage or attempt to dissuade, advise or discourage an individual from filing a complaint of sexual misconduct; or
3. Retaliate, threaten to retaliate, or attempt to retaliate against an individual who files a complaint or participates in the investigation or resolution of an allegation of sexual misconduct.

Correct Rx acknowledges and supports the reporting of all substantiated PREA cases involving Correct Rx employees to the Delaware Department of Justice for prosecution. **Correct Rx understands that violation of the Department's PREA policy by Correct Rx staff may result in class G felony charges pursuant to 11 Delaware Code, Chapter 5§1259.**

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C. Detailed Requirements

4. Prescription Services

a. Intake Services

- *As offenders undergo Intake Screening by a Registered Nurse their past medical history and current prescriptions are identified. In order to continue these prescriptions uninterrupted the nurse obtains a Release of Medical Information HIPAA form to contact the local pharmacies to verify these prescriptions. The Pharmacy Vendor must be able to facilitate this information gathering through any available central database of prescriptions to enable the Medical Vendors prescribers to "bridge" the prescriptions through a Stock Medicine Formulary until an individual offender prescription can be submitted to the Vendor.*
- *Each offender entering a DDOC facility through Receiving and Booking receives a skin test for Tuberculosis using PPD. Adequate supplies of this testing serum must be available.*

Delaware Health Information Network (DHIN)

Correct Rx Pharmacy believes that access to healthcare information, including prescription fill histories, in a timely and efficient manner will improve the quality of care for new intake offenders. As the pharmacy provider for the Department, Correct Rx will fully utilize existing central databases such as the Delaware Health Information Network (DHIN) to assist in prescription verification. Our expectation is that DHIN will create efficiencies for the contracted medical vendor, ensure continuity of care, and reduce the chance of error or patient harm encountered by prescribing without awareness of pertinent history that influence medical care and/or prescribing.

Upon the start of this contract, Correct Rx will request DHIN user access for the onsite **clinical pharmacist**. **Once authorized as a "need to know" healthcare professional, our clinical pharmacist will have access to DHINs searchable patient clinical history (including medications).** Correct Rx pharmacists are bound by HIPAA and will ensure the security and appropriate use of DHIN protected information.

Stock Medications

Correct Rx realizes that starter medications are necessary to ensure continuity of care until patient specific medications are obtained. Overstock of medication, however, can unnecessarily increase the financial burden on the Department; medications potentially may go unused and expire, thereby creating waste and regulatory concerns.

Correct Rx's operational staff have years of experience providing medications to correctional facilities. Our vast experience also allows us to make recommendations based on our willingness to provide solutions. We are flexible and will work with the Department to provide the best solution when it comes to quantity dispensed.

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Not all facilities or units within facilities are created equal and you will find our ability to accommodate your needs is quite different than most correctional pharmacies. At Correct Rx we feel we have a fiduciary responsibility to assist our clients in controlling excess medications and we will work with you to analyze the problem and arrive at agreeable solutions.

Correct Rx has the ability to customize the dispensed quantity based on any of the following criteria:

- Offender
- Type of medication (e.g. Psychotropics, Pain Medications)
- PRN vs. Chronic Medications
- Disease state
- Specific facilities e.g., Reception Centers or Mental Health Units or Infirmaries, etc.

Tuberculin Skin Testing

Tuberculosis (TB) is a contagious pulmonary disease that can greatly impact the overall health of offenders living in community type environments. As a public health precaution, offenders should receive TB screening upon intake at DDOC facilities to protect the health of TB infected individuals and the population as a whole. The Bureau of Prisons recommends screening for TB via skin testing with purified protein derivative (PPD) upon intake screening. This is a well establish protocol for most facilities and a compliance measure for accreditation bodies such as the National Commission of Correctional Health Care (NCCHC) and American Correctional Association (ACA).

Tuberculin Shortage

There have been two national shortages of PPD in 2013, both of which have disproportionately affected the correctional community. For many correctional systems, the PPD shortage has resulted in noncompliance with screening standards or increases in costs and resources due to the implementation of alternative TB screening methods. Correct Rx Pharmacy distinguishes our services from other vendors by our ability to forecast medication shortages and proactively strategize to maintain medication supplies for our clients. Our model for maintaining par level medication supplies requires a close working relationship between our Vice President of Purchasing and our clinical pharmacy department. For example, when faced with the most recent shortage of PPD, the following actions were taken:

1. VP of Purchasing preemptively notified our clinical department in June 2013 that there is would be a potential shortage of PPD on the horizon.
2. Dr. Valerie Barnes, clinical pharmacist, examines the six months utilization history of PPD in DDOC to determine the average monthly utilization.

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3. Simultaneously, our purchasing department “buys in”, expanding the net of where we can obtain PPD including:
 - a. Our wholesaler
 - b. Our group purchasing organization
 - c. Directly from the manufacturer
4. As a group, all of our clinical pharmacist determine what allocation method we would implement to ensure that our clients maintained their par supply of PPD. Our allocation stratification was based on several factors such as:
 - a. Population type
 - b. Historical utilization
 - c. Access to other, affordable methods of screening
5. Correct Rx allocated 5,000 doses of PPD for the Department on August 26th, an estimated 8 week supply, which has successfully ensured that DDOC offenders are appropriately and timely screened for TB via an uninterrupted supply of PPD.

This most recent **PPD example of Correct Rx’s proactive approach to ensuring the** availability of necessary medications and supplies is just one of many successful efforts made. In addition to the current PPD shortage, Correct Rx was able to also withstand the previous PPD, INH, and permethrin shortage without interruption to the Department or compromising individual patient or correctional population health.

b. Sick Call Services

• The Medical Vendor is required to provide Emergency Sick Call 7 days per week and such requires the availability of a Stock Medicine formulary to dispense short-term acute care medications as needed. The Stock Medicine formulary must be focused on the needs of the offenders rather than the desires of the offenders minimizing those items that should be carried in a DDOC Commissary.

Correct Rx Pharmacy understands that emergency sick call occurs seven days per week and that medications to treat acute conditions are needed urgently. The availability of formulary stock medications will be available as needed to assist in sick call treatment plans. Correct Rx will collaborate with BCHS and our co-vendors to establish a stock medication formulary that provides access to medications most often used by medical and mental health providers.

Correct Rx offers flexibility in the development and enforcement of medications available as stock. We understand that the needs of an infirmary or intake center differ from those of routine sick call or chronic care clinics. Our flexibility allows the Department, in collaboration with all health partners, to determine which medications should be available based on setting and offender needs, minimizing the potential for overutilization and unnecessary use of stock medications.

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Our close proximity to DDOC facilities and our same day delivery service should provide the Department with access to urgent medications on a timely basis and limit the need to have large quantities of stock medications onsite. Management of facility stock will be continually assessed during the monthly inspections by the onsite clinical pharmacists. Any indication that stock quantities are insufficient, over utilized, unnecessary or diverted will be promptly reported to the Department and onsite healthcare administration.

c. Chronic Illness Management and Convalescent Care

- *The DDOC is responsible for the medical care of many offenders with chronic medical conditions requiring chronic and convalescent care, who are physically handicapped, frail elderly, terminally ill, developmentally disabled, and mentally ill. The Medical, Mental Health and Pharmacy Vendors must work together to provide the services identified in the 789 individualized treatment care plans.*

Correct Rx Pharmacy distinguishes our pharmacy services by the robust and experienced clinical programs that we offer. Our clinical pharmacists provide medication expertise that specifically and positively impacts the care of patients who have special needs such as the elderly, terminally ill or disabled. We believe that the best approach to care involves an interdisciplinary team where each member contributes their knowledge to a customized holistic plan of care.

Correct has more than eight years of experience working in multivendor models where pharmacists collaborate closely with medical and mental health providers. Our ability to establish a positive rapport, mutual respect, and trust in our clinical recommendations has been vital to the success of our clinical programs. We are confident that our clinical pharmacists will continue to work well collaboratively with medical and mental health vendors to provide services in accordance to the 789 individualized treatment care plans.

- *Elderly Offenders - The elderly require special attention, including age and gender-specific care according to national guidelines, and particularly Hospice Care when appropriate.*

The population of inmates age 55 and older is rapidly rising and requires special attention and consideration of those conditions that disproportionately affect the elderly. Traditionally, correctional health care has concentrated its efforts on the needs of younger inmates centering on short-term treatment for acute injuries, infectious diseases or the early management of chronic disease. However, with the booming older inmate population, focus must shift towards management of chronic medical conditions that afflict older inmates.

II. Scope of Work

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Elderly offenders often have multiple chronic diseases such as hypertension, diabetes, chronic obstructive pulmonary disease, heart disease, and cancer that require multiple health care contacts and multiple medications. Elderly male inmates can also have prostate problems that can lead to catheterization and recurrent urinary tract infections. Elderly female inmates are more likely to develop osteoporosis, which can lead to pathological fractures and bone pain. In addition to these chronic medical conditions, older inmates are also subject to developing conditions related to the normal aging process, including sleep disturbances, impaired hearing, loss of vision, incontinence, mental confusion, and gastrointestinal disorders. Chronic pain is a common complaint of many elderly inmates due to old injuries, arthritis, and uncontrolled diabetes.

Medication management of multiple chronic disease states results in polypharmacy; a known risk factor for adverse medication events leading to injury or illness, death, and high cost of therapy. On the other hand, underuse of indicated medications can have similar results due to worsening of the medical conditions. Frequent medication regimen reviews (MRR) by a clinical pharmacist have been shown to help decrease adverse medication events through eliminating unnecessary polypharmacy, adverse drug reactions, and misuse of medications.

There are patients who are terminally ill or elderly who will require hospice services. Correct Rx encourages programs that promote compassionate end-of-life care and death with dignity. The management of patients requiring hospice is largely based on pharmacotherapy. Our onsite clinical pharmacists all have geriatric care experience where hospice care is often provided. Correct Rx will be available for palliative care consults to assist with the following:

1. Medication Use Evaluation
2. Consult with and provide education to interdisciplinary team
3. Monitor patient response to medication therapy
4. **Recommend medication regimen changes to improve patient's quality of life**
5. Ensure safe, legal disposal of all medications after death
6. Ensure compliance with regulatory and licensing agencies regarding medication therapy

Correct Rx will actively participate in the care of the elderly and those requiring hospice services. **The pharmacist's role** in patient care for this population has been well defined by the Centers for Medicaid and Medicare Services. Correct Rx is prepared and excited to collaborate with the Department to care for this special population.

• HIV/AIDS Treatment - The Pharmacy Vendor is responsible for providing prescription medications for offenders diagnosed with HIV/AIDS according to current treatment guidelines established by the National Institutes of Health (NIH). All staff performing any direct offender care services, licensed or unlicensed, shall participate in HIV/AIDS educational programs. These programs shall be developed by the Vendor and approved by the Bureau Chief. The Vendor will provide such education to all pharmacy staff.

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The Vendor shall provide the Bureau Chief with documentation of the PharmD's attendance and participation in the educational programs.

Correct Rx understands the clinical importance of providing timely medication delivery and direct patient care to patients with HIV/AIDS. The availability of highly active antiretroviral therapy has revolutionized the care of HIV and transformed the classification of HIV from a terminal illness to a chronic medical condition. While the treatment of HIV/AIDS is highly effective, medication therapy with ARV continues to carry adverse side effects and many drug-drug and drug-disease interactions. Medication therapy management for patients receiving ARV helps to minimize the risk of adverse events. Clinical pharmacists have the opportunity to ensure patient compliance with prescribed regimens, request labs to verify regimen effectiveness and monitor drug-interactions with other chronic care medications.

The Department of Health and Human Services (DHHS) publishes guidelines for the use of antiretroviral agents in HIV infected adults and adolescents that stratify various **ARV combination regimens based on clinical evidence**. “Preferred” combinations refer to regimens that have demonstrated superior efficacy and have acceptable tolerability and ease of use. Each year, the arsenal of medications for HIV/AIDS increases with the availability of newer medications that offer improved efficacy and better safety profiles. Correct Rx will ensure that our onsite clinical staff participates in HIV/AIDS education programs to remain current with treatment protocols established by that National Institute of Health. Documentation of our participation in such educational activities will be submitted to the Bureau Chief on an annual basis.

• Hepatitis - All offenders will be vaccinated against Hepatitis A and B unless previously vaccinated or who have positive serologic tests. Vaccination against Hepatitis A and B will be begun within a year of the first incarceration. Adequate supplies of these vaccinations must be available.

Correct Rx will continue to supply vaccinations against Hepatitis A and B infection as requested by Delaware DOC facilities. Our pharmacy consistently maintains sufficient inventory of Hepatitis A, Hepatitis B and combination Hepatitis A and B vaccines.

• Dialysis – There are offenders incarcerated with DDOC with chronic kidney failure which must be maintained by chronic hemodialysis or peritoneal dialysis. Currently, the dialysis chairs/beds are at the all-male James T. Vaughn Correctional Center. The Women's facility does not have dialysis facilities available but may be required to arrange for if a female offender is admitted. The Pharmacy Vendor must have the usual medicines for chronic dialysis patients available on the Formularies.

Correct Rx understands the importance of commonly used medications for dialysis being available without restriction for patient care. We commit to managing the availability of dialysis products through the quarterly Pharmacy and Therapeutics Committee meetings.

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Additionally, our **experiences at JTVCC's** dialysis clinics enforces our belief that appropriate dosing of medications in patients undergoing dialysis is enhanced when clinical pharmacist conduct a thorough medication regimen review to obtain drug-related allergy or toxicity information and identify concurrent medications. The **patient's weight and height, physical examination**, and laboratory data assessing renal function are also pertinent to determining appropriate dosing. On average, patients undergoing dialysis receive approximately 11 different medications and are three times more likely than patients with normal renal function to experience an adverse drug event. This exemplifies the importance of individualizing the medication therapy for each patient and appropriately dosing each medication.

- *Hospice Care – A number of offenders have life or long-term sentences complicated by chronic diseases such as cancer, heart, lung, kidney, or liver disease and have signed Advance Directives. The Pharmacy Vendor must have the usual medicines for Hospice Care patients available on the Formularies.*

Hospice care is truly a team-based approach as it often involves many healthcare practitioners. Hospice teams often consist of physicians, nurses, pharmacist, social workers, spiritual advisors or counselors. Although there is a large interdisciplinary of healthcare providers caring for the patient, pharmaceuticals and an appropriate medication care plan tends to be a significant component of hospice care in corrections. The overarching goal of hospice care remains compassionate comfort. **Correct Rx's** clinical pharmacists have a strong onsite presence in facilities where hospice care is provided. Our onsite clinical team will review medication regimens for patients in palliative/hospice care programs to ensure that the medication component of comfort care meets all expectations of the Department.

Correct Rx will work with the Department's Medical Director to ensure that medications most commonly utilized in the delivery of palliative/hospice care are easily accessible. Categories of these medications may include:

- Pain medications
- Laxatives
- Anticholinergics (treatment of excessive secretions)
- Antidiarrheals
- Wound management supplies
- Antihistamines

- *Mentally Ill Offenders - Offenders who have an active mental illness and, especially, offenders who have had an exacerbation of their mental illness, are newly diagnosed, unstable on medication or difficult to treat, or whose status has otherwise decompensated such that a more intense level of care is required, must be actively treated and closely monitored in coordination with the Mental Health Vendor. The Pharmacy Vendor must have the usual medicines for Mental Health patients available on the Formularies.*

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The Mental Health Formulary must be coordinated with the Mental Health Vendors, the Medical Director and Bureau Chief.

Correct Rx Pharmacy will collaborate with our Mental Health co-vendor, the **Department's Medical Director and Bureau Chief to ensure that commonly used mental health medications** are available without restriction for use in mentally ill offenders. Correct Rx agrees that better patient outcomes will occur by providing access to psychotropic medications in conjunction with the nonpharmacological programs and services provided by the Mental Health Vendor. We also recognize the danger that **“episodes of decompensation”** present for custody and vendor staff as well as the population in large. To minimize this risk, Correct Rx ensures that mental health medications will be available on the Formulary to provide appropriate and timely care.

d. Emergency Requests - The DDOC anticipates that on a rare occasion such as an influenza outbreak an order for medications and/or vaccines may be needed. The Pharmacy Vendor must be able to respond to these requests in a timely manner; including weekends and holidays as needed.

Emergency situations occur despite the best of planning. Correct Rx's ability to respond to these situations distinguishes us from other pharmacy vendors. We are strategically located in central Maryland which allows us to reach all DE DOC facilities within two hours. Correct Rx is available 24 hours a day, 7 days a week to assist the Department in obtaining emergency medications in a timely manner. Not only will we continue to offer STAT delivery services, we have examples where our proximity has already proven invaluable to the containment of outbreak and reduction in patient harm.

Example 1:

On **Sunday September 9th**, the DOC statewide Medical Director informed Correct Rx that a confirmed scabies outbreak has been identified at HRYCI. More than 110 patients were suspected to be exposed. In order to provide quick treatment and containment of the outbreak, Dr. Carr requested a STAT delivery of 120 tubes of Permethrin cream.

Correct Rx was able to process 120 Permethrin tubes, coordinate the STAT delivery, and contact onsite medical vendor staff to inform them of the large delivery which is unusual for a Sunday. Finally, we were able to close the loop with Dr. Carr to ensure him that within a few hours, the first Permethrin treatments could be administered.

Our clinical experience with large-scale scabies outbreak has taught us that prevention and education are vital to minimize panic and concern among inmates, medical staff and Custody. While further screening and treatment of patients were occurring, Correct **Rx's** onsite clinical pharmacist provided an educational in-service on scabies prevention, diagnosis, and treatment that was provided to the medical vendor to share with custody, medical staff, and others on Wednesday September 11th.

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5. Pre-Authorization System - The Pharmacy Vendor shall coordinate with the Medical Vendor a pre-authorization system that allows the Medical Vendor to prescribe a non- formulary medication to ensure availability of these medicines in isolated cases. The non- formulary medicine requested must be:

- Consistent with accepted clinical pathways established for evidence based care;*
- A more conservative acceptable approach;*
- Quickly redirected if acceptable, lower cost alternatives are available;*
- Physician/PharmD-driven such that only a physician or PharmD may determine requested medication to be medically unnecessary or inappropriate given the particular facts in the individual case;*
- Has direct physician/PharmD-to-prescriber discussion on any medication the review physician/PharmD feels may be medically inappropriate or should be redirected. If the prescriber agrees after discussion with the reviewer that the care is not appropriate or should be redirected, s/he must document that in the offender health record. If the prescriber does not agree with the reviewer, s/he must immediately initiate the appeal process;*
- Incorporates an appeals system that is time sensitive and that allows the prescriber to appeal a case to the DDOC Medical Director or DDOC Medical designee. The DDOC Medical Director or DDOC M designee will be the final arbiter in all cases.*

Correct Rx has left the old restrictive model of formulary management behind to develop a new and improved process providing full advantage of our clinical expertise. The days of burdening busy medical directors with making hasty non-formulary (NF) decisions just based upon the cost of the pill and a checklist are gone. We support the **DDOC's policy and position to provide access for medically necessary medications** whether they are formulary or NF. Our focus is to ensure that the selection process for medication treatment follows rational decision making based upon the best medical evidence available.

Correct Rx's unique clinical model looks at NF medication requests as an opportunity to provide a comprehensive review assessing the entire patient and not just the medication. This process will augment the clinical decisions made by the patient care **provider and the Health Services Vendor's Medical Director**. Our pharmacist driven program saves time for medical directors and staff and greatly enhances the NF review process. This policy will serve as a guide for prescribers and support staff to ensure optimal provision of cost-effective pharmaceutical care to patients. We have already successfully implemented these programs in other contract settings and have demonstrated considerable cost and time savings.

Correct Rx can accomplish this because we employ highly trained clinical pharmacist to review and authorize the use of NF medications using proprietary algorithms and clinical guidelines developed specifically for correctional systems. Prescribers complete a NF request form that provides pertinent patient information necessary for the determination for use of a NF medication.

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Correct Rx will utilize the onsite clinical pharmacists, in conjunction with our Corporate Clinical Department, to ensure this requirement is fully realized under the terms of the RFP.

The clinical pharmacist assists by evaluating factors that may have resulted in treatment failure of previously prescribed formulary medication(s) and reviews the NF requests. If necessary, the pharmacist contacts the prescribers to discuss matters such as utilization of similar formulary agents, necessary objective healthcare information, alternative strategies for treatment, cost and risks versus benefits of the requested medication. This **discussion is noted in the "Pharmacist's Comments" section on the NF request form. If** the clinical pharmacist and provider agree to utilize an alternative agent or other treatment strategy, the clinical pharmacist notes this outcome on the NF request form.

The clinical pharmacist forwards a copy of the reviewed NF request to the prescribers and the facilities' nurse managers. **The clinical pharmacist documents both approvals and denials as an addendum that can be included in the patient's medical record. There** is also a dispute resolution process built in for the requestors where the DDOC Medical Director or designee can override the decision of the clinical pharmacist. ***The DDOC Medical Director is informed prior to the dispensing of any approved NF medication expenditure that is over the set amount as mandated by DDOC.***

Correct Rx follows the normal procedures to dispense and deliver the requested NF medication. The clinical pharmacist maintains a copy of the reviewed NF request form on file. All NF drug requests are compiled, analyzed, and reported to the P&T Committee. The clinical pharmacist evaluates medical and scientific evidence relating to the safety and effectiveness of the requested non-formulary drugs with formulary drugs. This review will consider:

- Strength of the evidence
 - Experimental versus observational studies
 - Published in peer-review journals or on the Food and Drug Administration (FDA) website
 - Clinical versus surrogate/intermediate outcomes
 - Direct versus indirect comparisons
 - Average effects versus subgroup or individual effects
- Safety
 - Adverse drug reactions
 - Drug interactions
 - Known risk or potential risk for error
- Availability of alternative therapies
- Medication cost expenditure

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This new clinical paradigm includes: profile screening for patient-specific parameters such as allergies, age, weight, gender, disease states, contraindications, drug-drug and drug/food interactions, duplicate or unnecessary drug utilization, review of laboratory parameters and enforcement of established clinical pathways/protocols and guidelines as indicated in published medication literature and evidence-based therapy and the DDOC's **policy and procedures**.

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6. Telemedicine Support - As telemedicine becomes available; all Vendors shall support the use of telemedicine as required by the DDOC to reduce the incidence of offender travel. The Vendor may include a severable proposal for enhanced statewide telemedicine capability and usage which meets generally acceptable professional standards for the delivery of health care services. Such proposal shall include locations and areas in which telemedicine may be appropriately utilized, the anticipated usage of such technology, the necessary hardware and software to implement such a system, and a proposed timeframe for completion of all work necessary to fully implement the proposed system. The proposal must be consistent with Department of Technology and Information requirements.

Correct Rx will support DDOC, BCHS, the Health Services Vendor and Mental Health Services Vendor to expand telemedicine services to increase points of access, especially to specialty healthcare services. We currently use a telemedicine platform to provide clinical consultations on multidisciplinary teams to manage complex, high acuity patients including HIV, hepatitis C, poly-pharmacy cases and patients transitioning from acute care facilities.

Correct Rx will be using the infrastructure already in place, minimizing startup costs. Our corporate office uses Polycom VSX 7000 conferencing equipment which can bridge with most other equipment. Correct Rx used a centralized management model for other state and national clients to demonstrate significant value in using telemedicine to implement therapeutic interchange programs for Levemir to improve patient acceptance. Often inmate patients express suspicion when medications are changed and results in poor adherence. This novel paradigm was an efficient process to garner patient participation in cost-saving medication interchange programs. The success of this model was dependent on providing patients a consistent message directly from an independent drug expert to combat institutional suspicion towards correctional healthcare providers.

In DDOC, Correct Rx's onsite clinical pharmacists are strategically located to provide direct, in-person coverage and are well accepted by inmate patients. Direct contact with the patient and healthcare team is our preferred method of delivering quality healthcare services. However, there are opportunities when a multidisciplinary team approach maximizes the contributions of each healthcare discipline to provide comprehensive assessment, planning and coordination of care. This is especially true when offsite specialty care is involved or when movement of inmate patients can be minimized to reduce custody resources and security risks. Correct Rx proposes to expand clinical pharmacist consultations via telemedicine. On-site clinical pharmacist may be involved with coordinating care with off-site specialty care providers. We will work with the DDOC BCHS, the Department of Technology to receive approval of any telemedicine program prior to implementation.

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C. Detailed Requirements

7. On-site Pharmacy System Management (to be coordinated with the Medical Vendor)

a. Medication Ordering and Tracking - All medications ordered by a licensed provider shall be provided in accordance with an approved formulary, and a system for approval of Non-formulary medications. The Medical Vendor Nursing Services shall be responsible for staffing the Pharmacy with an appropriately trained pharmacy technician and dispensing medications to the offenders. Medications will be dispensed at all facilities. Coordination with the orders of other health care services, e.g. Mental Health and Dental providers to ensure the delivery of medications is mandatory.

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Correct Rx will provide prescriptions consistent with the available formulary or approved non-formulary medications.

Pharmaceuticals and Services

Correct Rx is a full service institutional pharmacy. Correct Rx currently provides full pharmaceutical services to over 390 correctional facilities with an average daily population of approximately 170,000 lives. As one of the largest correctional pharmacies in the industry Correct Rx has access to all medications and these will be available whether formulary or non-formulary to the DDOC.

The World of Drugs is Available to DDOC

Correct Rx has the ability and the resources to supply all medications formulary and non-formulary drugs, injectables, intravenous products, syringes, sundries and other over-the-counter products for DDOC. Correct Rx also has access to all specialty medications either through or wholesales Amerisource Bergen or through other alliances with Specialty Pharmacies for restricted medications.

Correct Rx prides ourselves on the value of the services that we provide. We are clear that DDOC is not just buying a commodity. Correct Rx will provide comprehensive Clinical, Operational and Program Management Services that are fully described throughout this RFP response. We know that the services that the vendor you select provides will make a big difference in the quality and cost of the pharmaceutical services contract but we are equally clear that the **pharmaceuticals need to be readily available when ordered.**

Dependable and Reliable Delivery Solves a Whole Host of Issues

Correct Rx's strategic location allows us to provide same day delivery for all new and refill orders transmitted electronically by 4pm EST Monday through Friday and 3pm on Saturday. This dependable delivery will eliminate any unnecessary delay in receiving all medications. We will also work with the medical vendor and DDOC to ensure that urgent formulary and non-formulary orders are received without interruption.

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Formulary and Non-Formulary Medications

Correct Rx's pharmacy operating software system allows us to identify whether a drug is formulary or non-formulary at the time the order is processed. We will simply input the specific DDOC Formulary into our system. This list can be updated at any time and may be customized per facility or even by specific locations within a facility (e.g., infirmary, population, mental health unit). Correct Rx will follow all procedures outlined in this RFP regarding the dispensing of Formulary and Non-Formulary medications, as well as adhering to all policies and procedures related to the approval, denial or alternate medication recommendation regarding the DDOC approved non-formulary request process.

Active Formulary Management

Correct Rx's management team has over 25 years of direct experience in developing and maintaining formularies specifically designed for Correctional Systems. Correct Rx has successfully implemented formulary guidelines that have assisted our clients in containing pharmaceutical costs. Our Medication Therapy Management department is headed by a CCHP (NCCHC certified correctional healthcare professional) certified, **Doctoral trained pharmacist who possesses her Master's in Pharmacoeconomics with years of correctional experience.** This department was created to supply information to our clients that helps them reduce medication cost while improving the quality of care. **This is achieved by the clinical pharmacist's assistance with formulary management** that is supported by documented research of alternate therapies, drug product selection, and other methods that result in lower cost. This department is vital for helping our clients provide the highest quality of care while being mindful of costs. Correct Rx will Provide notifications if non-formulary medications are not requested with the proper authorization.

Nonformulary Medication Management

Nonformulary medication management is a cornerstone service that Correct Rx provides for our clients. When comparable medications offer marginally improved therapeutic benefits, our clinical pharmacists can help to determine the cost-utility level **at which the additional expense is justified or not justified.** It is Correct Rx's policy to ensure all patients have access to necessary pharmaceuticals using evidence-based medicine for rational drug selection.

Correct Rx will develop standardized guidelines to expedite the processing of nonformulary drug requests as directed by DDOC. This policy will serve as a guide for prescribers and support staff to ensure optimal provision of cost-effective pharmaceutical care to patients.

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When a nonformulary medication is ordered, Correct Rx will follow the DDOC approved protocol for nonformulary approvals. This typically requires a prior authorization by the Corporate or Regional Medical Director designated by the healthcare vendor. Nonformulary medications will be processed only when there is proper authorization which includes an approved formulary exception form authorized by the appointed medical authority.

Unauthorized Non-Formulary Requests

If the nonformulary medication request has not received the proper authorization, Correct Rx will proactively communicate with the healthcare staff in the facilities to let **them know that additional steps are needed to successfully order the patient's medication.** This active engagement ensures optimal healthcare by ensuring continuity of care and reducing the risk that a patient's care will be disrupted.

At the beginning of each month, the healthcare authority at each facility will receive an itemized list of all nonformulary medications processed the previous month. In addition, the Correct Rx Clinical Team will review nonformulary utilization and provide recommendations if clinically appropriate at each Pharmacy and Therapeutics Committee meeting.

Delivery Manifest / Discrepancy Log

Additionally, with every medication delivery, Correct Rx provides a delivery manifest. This manifest includes all of the medications that were ordered and are in the box, as well as all the medications that were requested and were not dispensed. This portion of the **delivery manifest is called the "Discrepancy Log."**

Included on this list are all non-formulary medications that were requested by the facility, but did not receive the proper authorization and were therefore not filled. The **"Discrepancy Log"** serves as a secondary system to ensure the facility is well informed about all medication requests including non-formulary requests that were not processed and prompts the healthcare team at the facility that further action is required to ensure continuity of care. Correct Rx also provides access to the delivery manifest and discrepancy log online as part of our web based bar code medication inventory system.

Emergency Non-Formulary Medications

Emergency nonformulary medications are always available if requested. The priority is always patient care. All recommendations will be based on best practices and correctional standards. Correct Rx monitors short-term bridge authorizations in the **patient's pharmacy profile.** Thus the second bridge order for a patient will prompt notification to the facility

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Ordering/Delivery

Supplemental: Correct Rx is in the final testing stage with the EHR and eMAR proprietary system that the DDOC will be using as of June 2014. This two way bi-directional interface with Correct Rx is anticipated to be completed in late May or early June and will ensure the accurate, safe and timely electronic transmission and confirmation of medication orders.

Correct Rx has created a bi-directional interface with the EHR and eMAR system utilized by the DDOC. Further, Correct Rx will create a similar interface with any future EHR system the Department wishes to use in the future for electronic prescribing. Our transition activities will begin on day one of the transition to ensure there is proper time for the planning, development, programming, testing, and implementation of a fully functioning interface.

Bi-Directional or Two-Way Interface

Correct Rx has developed two-way bi-directional interfaces with multiple electronic medical record systems, electronic medication administration and order entry systems (CorEMR, CorrectTek, NextGen) and electronic medication dispensing systems and inmate management systems such as Lock and Track and ILeads, including the current system in place in Delaware. We are actively providing services to facilities utilizing this system. We receive orders electronically from their system, process those orders and then electronically transmit the processed orders back to those systems to ensure our pharmacy software system and the actual order in the EHR are uniform.

Our role has been to provide unbiased advice, create fully functional two-way interfaces and provide the necessary support and resources to ensure their successful implementation. As a result, we have interfaced with multiple vendors that have **provided client specific solutions. Each of our clients' unique requirements has guided** their selection and implementation of technology. We are proud of our ability to help our clients navigate through these complex issues and successfully fulfill our responsibilities in integration. Our team has worked with state, county and city facilities and has experienced common themes between facilities and unique state/local requirements.

It is important to note that there are key distinctions between simply being interfaced and having an established two-way **bidirectional interface. If a pharmacy's software** system has only developed a one-way interface where it receives orders, but does not transmit information back, there is a significant patient safety.

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For example, if after a pharmacist review is completed and a change is made to the order due to an incorrect strength or a contraindication, that information would not be transmitted back to the facility if there were only a one way interface. Therefore, the **corrected order would not appear in the patient's medical record or on their Medical Administration Record.**

This lack of congruency could jeopardize patient safety and at the very least would cause documentation problems. Instead of simply receiving orders, Correct Rx chooses to create a bidirectional interface, so that we are able to transmit information back to the medical staff at the facility and ensure patient safety.

This eliminates the possibility of medication administration errors by the medical staff, improves inventory control, reduces redundant data entry input, improves liability protection, improves and creates a consistent process that reduces training requirements, and provides enhanced quality of care while reducing overall cost. It also gives the advantage of the ability to double-check medications ordered against medication received and administered, thus allowing better safety, validation and compliance.

With a bidirectional interface, all actions relating to medication administration and care transfer are documented in a unified patient record. In addition, management features of the combined system allows medication orders to be discontinued in the Electronic Medical Record and to be stopped in the Electronic Medical Administration Record when the patient is released or transferred, or if an order is discontinued.

Emergency Back – Up System: Fax and Fill

As an emergency back-up system, Correct Rx has the capability to fill orders through the **“fax and fill” system.** We have designed forms that are individualized for each facility and allow for the ordering of patient specific, interim emergency medications and refills. Therefore, if the EHR system is experiencing a shut-down, there will always be a way to order medications. **The following is a list of features of the “fax and fill” back-up system.**

- **Toll Free Telephone & Fax Numbers:** [REDACTED]
- **High Speed Fax Server and Electronic Imaging of All Orders - NO BUSY SIGNALS:** Upon receipt at Correct Rx, our fax server will automatically transmit a verification receipt that the fax has been received. This verification will be sent to the transmitting fax machine.

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This removes the need for the sender to call the pharmacy to inquire if the order has been received. Correct Rx will contact the sender if there is an exception, missing page, duplicate page, missing information or unreadable text. Correct Rx has the capacity to accommodate all orders transmitted by the facility healthcare staff to be filled by Correct Rx.

- **Electronic Imaging/Easy Retrieval of Orders:** Received orders are routed directly to specified electronic folders making the overall process faster and **more robust**. **An electronic image of all orders is stored on the system's hard drive.** This allows for the easy retrieval of orders previously sent.

[Redacted]

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[REDACTED]

Discrepancy Reporting

At Correct Rx, accuracy holds the highest priority in our company. We constantly reinforce the importance of exactness to our staff, utilize the latest technology and have stringent review processes in place to monitor and improve our accuracy. In order to demonstrate our dedication to excellence, Correct Rx works diligently to ensure that all discrepancies are identified and reported. Furthermore, we use a broader definition of discrepancy than most companies, as we strive for perfection, not inflated statistics.

In order to ensure Continuous Quality Improvement, we must ensure that all pharmacy discrepancies are reported following the proper procedure allowing us to implement our internal CQI program. The purpose of the Correct Rx Internal CQI is to analyze all discrepancies from a systems approach. The attitude is not punitive, but educational, to implement a corrective action that improves the process to eliminate future occurrences. The ultimate goal is ensuring patient safety and we have demonstrated this with our commitment to excellence and an accuracy rate well above industry standards. The following chart provides the type of pharmacy discrepancies tracked by Correct Rx:

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Pharmacy Discrepancy	Description
[REDACTED]	[REDACTED]

Correct Rx requests that all discrepancies are reported by the on-site healthcare teams as soon as they are identified so that the proper steps are taken to resolve the issue. If a patient has received and taken the wrong medication, the patient should be evaluated by the appropriate healthcare provider.

A Correct Rx Pharmacist will provide information about the potential deleterious impact of taking the wrong medication and of missing the prescribed medication. A discrepancy report should be completed and returned to Correct Rx to allow for implementation of CQI and counseling. A photocopy of the front and back of the medication blister card should also be sent to Correct Rx with the discrepancy report.

For every reported discrepancy, Correct Rx is able to identify the pharmacy technician(s) and pharmacist(s) involved with each medication dispensed. Every discrepancy is addressed through 1:1 counseling that is provided to those involved with each incident. On a monthly basis, Correct Rx analyzes all discrepancies from a systems perspective in order to determine operational controls that may be implemented to ensure the highest level of safety for our clients.

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Correct Rx will calculate an accuracy rate based upon the number of prescriptions per month and the number of reported discrepancies per facility. A detailed report is provided to the appropriate personnel and will be presented at the Pharmacy & Therapeutics meetings and/or as instructed by the DDOC.

In-House I.T. Department

Correct Rx has a fully staffed in-house I.T. Department. Correct Rx's I.T. Department is under the direction of a knowledgeable I.T. manager who spearheads the implementation of corporate technology. The I.T. Department is responsible for the development, **implementation and integration of the company's business systems** infrastructure with our clients by positioning our company for the current and future needs of our clients. Correct Rx utilizes specialized correctional software that easily integrates with offender management and Electronic Medical Record systems.

Our ability to meet the technological demands of this proposal is enhanced by both the basis of their knowledge and their experience within our industry. Their previous efforts in regards to integrating our pharmacy software with other inmate management systems, electronic patient health records and electronic medical records, electronic medication administration records, and other software systems will prove to be invaluable. They are able to provide oversight and management as well as programming requirements.

Today, the term *information technology* has ballooned to encompass many aspects of computing and technology. Our IT professionals perform a variety of duties that range from installing applications to designing computer networks and information databases. A few of the duties that our I.T. professionals perform include data management, networking, computer hardware configuration and installation, database and software design, as well as the management and administration of entire systems.

b. Maintenance of the Medication Administration Record (MAR) – The Vendor Nursing Service will be responsible for documenting all medication dispensing on the Medication Administration Record and the bound (not spiral-bound) Controlled Dangerous Substance “Red Books”. The Vendor shall ensure that MARs are accurate and up to date and that the MARs are filed in the offender's charts monthly. An RN shall be responsible for maintaining the accuracy of the MAR each shift. LPN's may dispense medications. The RN on the following shift is responsible for ensuring that any inaccuracies on the MARs from the previous shift are corrected. The current MAR for each offender will be provided (or a photocopy of the current MAR) provided at each medical encounter for review by the Medical Provider.

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Correct Rx will assist DDOC to ensure proper documentation of medication administration occurs on both the Medication Administration Record (MAR) and the Controlled Dangerous Substance “Red Books”. The MAR can be either electronic or in hard-copy. **The MAR is an integral component of the patient’s healthcare record with broad administrative and clinical ramifications.**

Correct Rx provides extensive training and education on MAR documentation procedures. Our on-line library contains training for DDOC or co-vendors. The MAR documentation training includes a post-test to assess whether the training was effective.

Additionally, Correct Rx’s on-site pharmacists have assisted our co-vendors in assessing and monitoring appropriate documentation on the MAR and the bound Controlled Dangerous Substance “Red Books.” These criteria are routinely examined during the quarterly medication room inspections. The inspections also review whether appropriate licensed nurses are used to document on the MAR.

Seamless Transition of EHR and eMAR Systems

Correct Rx is interfaced with the system that DDOC is currently utilizing. It is important to note that there are key distinctions between simply being interfaced and having an established two-way **bidirectional interface**. **If a pharmacy’s software system has only developed a one-way interface where it receives orders, but does not transmit information back, there is a significant patient safety risk.** For example, if after a pharmacist review is completed and a change is made to the order due to an incorrect strength or a contraindication, that information would not be transmitted back to the facility if there were only a one way interface. Therefore, the corrected order would not **appear in the patient’s medical record or on their MAR**. This lack of congruency could jeopardize patient safety and at the very least would cause documentation problems. Instead of simply receiving orders, Correct Rx chooses to create a bidirectional interface, so that we are able to transmit information back to the medical staff at the facility and ensure patient safety.

This eliminates the possibility of medication administration errors by the medical staff, improves inventory control, reduces redundant data entry input, improves liability protection, improves and creates a consistent process that reduces training requirements, and provides enhanced quality of care while reducing overall cost. It also gives the advantage of the ability to double-check medications ordered against medication received and administered, thus allowing better safety, validation and compliance.

With a bidirectional interface, all actions relating to medication administration and care transfer are documented in a unified patient record. In addition, management features of the combined system allows medication orders to be discontinued in the Electronic Medical Record and to be stopped in the Electronic Medical Administration Record when the patient is released or transferred, or if an order is discontinued.

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HL7 Compliant Software

Our correctional specific software is HL7 compliant and as a result we have interfaced with multiple vendors including NextGen, CorrecTek, American Data, CorEMR and we are in the process of developing additional interfaces including eClinical Works. Additionally, our software vendor has established a fully functional interface with ERMA that is currently active with DDOC. We have experience with clients, including statewide systems that are utilizing EMR solutions that do not include an eMAR.

In those instances we are still able to receive patient information and orders and provide to our clients paper medication administration records monthly. For these systems this is their MAR record and for systems that utilize an eMAR there is a clearly established paper back-up system should it ever become necessary. In both instances the communication of data is transmitted real time.

Critical items that were considered included correctional workflow, security needs, correctional requirements, reporting requirements and database management. We have **performed implementation in both clinic (med room) and “cart” or cell-side models.**

Training for these systems and implementation will be done at the facility level. We understand how to handle issues that can arise and are always available to provide support.

Correct Rx will provide a bidirectional interface with the current EHR or any future EHR System used by the DDOC. **Correct Rx will fully cooperate with DDOC’s EHR vendor.** Our internal IT department and software specialists will work with DDOC, the healthcare vendor and EHR vendor to coordinate the data transfer and ensure seamless transition.

Our efforts will begin from day 1 of the transition to begin to develop the plan for the data transfer. Given that we have completed this task multiple times, it often requires very little programming on our end to accomplish this task.

Typically the programmers will coordinate their efforts with the vendor of the EHR to review the specification and test the data transfer. The actual transfer is then scheduled and performed as close to the time of transition as possible. This ensures that our pharmacy system is equipped with data that is current and accurate at the time of transition.

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Supplemental: Correct Rx has already been working with the DDOC and the outgoing medical vendor to ensure there is a complete and accurate data transfer of patient medication profiles to include both the existing and historical orders. We have provided files and begun the testing phase with the new EHR system. If awarded, Correct Rx will be able to transition this contract without any disruption to patient care. The DDOC will also have redundancy protection, since the historical data will be available from Correct Rx for the past three years as well.

Optional Monthly Pre-Printed MARs

Correct Rx can provide Medication Administration Records (MARs) on a monthly basis on approved forms, within the time parameters set forth by DDOC. New MARs are provided monthly and as needed for patients currently receiving medications that do not expire by the first day of the month as well as new patients who do not have a current MAR. Correct Rx takes great pride in making sure the information in the patient record is accurate. Therefore, the pre-printed MARs just need to be edited for any additions or deletions from the time they were printed by Correct Rx and delivered to the facility five days before the end of the month.

Correct Rx Pharmacy Services has greatly customized the monthly production of MARs. In fact, we are currently printing MARs on three different forms as requested by our clients. Facilities pick between two landscape and one portrait version. Each facility has also specified their preference of whether or not to include side effects on the MAR, or if they prefer to have separate patient specific education materials printed.

Although most facilities prefer MARs printed close to the 25th of each month, in order to efficiently turn over MARs each month, several sites have requested monthly MARs printed closer to the end of the month. Correct Rx Pharmacy Services has also **developed “Protocol MARs” which allow facilities to have MARs pre-printed with commonly used therapeutic protocols. The “Protocol MARs” are programmed as facility specific documents for use in patients admitted on alcohol detox, drug detox, sliding scale insulin regimens, or any other standard orders as requested.**

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C. Detailed Requirements

8. Discharge Planning

- a. *Discharge planning is a priority for the DDOC and is to be conducted pursuant to DDOC policy. Of greatest concern are offenders with chronic illnesses, serious mental illness, and/or HIV/AIDS as well as women who have delivered children while incarcerated or are pregnant. It is critical that the Vendor take every reasonable effort to ensure that offenders are connected to community-based services and have a sufficient supply of prescription medication upon discharge. The Medical Vendor has primary responsibility to begin the process six to nine months prior to release. The Mental Health Vendor shall ensure that a psychiatrist reviews all psychiatric medications prior to discharge. Within 30 days of release, if known, the Medical Vendor is required to provide a thorough written discharge plan. The offender is given a written Discharge Plan with 30-days supply of their prescription medication (but not O-T-Cs) and does not receive copies of their medical records at release. The Pharmacy Vendor must coordinate the Discharge Planning for the 30 days of prescription medicines and cardiac-associated aspirin for offenders who are being released.*

Correct Rx acknowledges that discharge planning is a priority for the DDOC and is to be conducted pursuant to DDOC policy. Correct Rx understands that the greatest concern is for offenders with chronic illnesses, serious mental illness, and/or HIV/AIDS as well as women who have delivered children while incarcerated or are pregnant. Correct Rx acknowledges that it is critical for the health care team to take every reasonable effort to ensure that offenders are connected to community-based services and have a sufficient supply of prescription medication upon discharge. Correct Rx will work with the Medical Vendor who has primary responsibility to begin the process six to nine months prior to release and the Mental Health Vendor who shall ensure that a psychiatrist reviews all psychiatric medications prior to discharge. Correct Rx understands that within 30 days of release, if known, the Medical Vendor is required to provide a thorough written discharge plan. Correct Rx acknowledges that the offender is given a written Discharge Plan with 30-days supply of their prescription medication (but not O-T-Cs) and does not receive copies of their medical records at release. Correct Rx will continue to coordinate the Discharge Planning for the 30 days of prescription medicines and cardiac-associated aspirin for offenders who are being released.

Discharge Medication

Correct Rx provides a thirty-day (30) supply of discharge medications as designated by the DDOC for offenders who have a need for chronic care, special medical and mental health needs leaving the DDOC. The medications are provided in a packaging format consistent with state pharmacy law, i.e., childproof, light resistant vials, etc. Packaging is approved by the DDOC and Bureau Chief. Correct Rx provides the specified day supply or the quantity requested. Discharge Medications are placed in a separate bag within the daily shipment clearly marked “DISCHARGE MEDS”.

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The segregation of these medications from the rest of the shipment will make it easier for the medication room nurse to check in the discharge medications and get them distributed to the offenders upon discharge.

Correct Rx's technicians and pharmacists are experienced with providing discharge medications to the DDOC and other statewide systems. Correct Rx will continue to comply with the needs of the DDOC regarding discharge medications.

Discharge Planning CQI

Over the past three and a half years Correct Rx has been working with the DDOC and our co-vendors to improve discharge planning. By working together collaboratively several obstacles have been identified and addressed.

- Correct Rx worked with the mental health and medical vendor to clarify and implement the ordering process for mental health patients. Along with our co-vendors and the BCHS auditors, we identified a problem in which both the mental health and medical vendors were ordering the discharge medications for the same patient. This issue was quickly resolved by reviewing the procedure that the medical vendor would be responsible for sending all discharge orders to Correct Rx. As an ongoing CQI project, Correct Rx provides a monthly report of all medications that are dispensed for discharge. One of the purposes of this report is to quickly identify and eradicate any duplicate ordering of discharge medications.
- The monthly report of all discharge medications also identified another issue in which OTC medications were being ordered outside of the accepted guidelines. This monthly report identifies the specific patient and provider, so that the specific individuals involved can receive the appropriate feedback. Since the implementation of this strategy this issue has been almost completely resolved.
- The BCHS audit team along with the medical and mental health vendors had also identified a problem in which discharge medications that had been dispensed were not being given to the patient prior to discharge. A multifaceted strategy was employed to address this issue that included ensuring that our custody partners were bringing the offenders to medical prior to discharge and to hold the onsite healthcare teams responsible for giving the patient the medications. The BCHS audit team continues to monitor this process onsite and Correct Rx assists, by providing a monthly report that documents all medications that were dispensed as discharge medication that have later been returned to Correct Rx. Since implementation of this initiative the number has dramatically reduced, however we will continue our collaborative effort until the issue is fully resolved.

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C. Detailed Requirements

9. Utilization Review

a. The Vendor shall provide integrated information concerning care – this allows effective monitoring of pharmacy management practices.

Medication Utilization Management

Correct Rx has built a successful partnership with BCHS and the Health Service Vendor to provide comprehensive medication utilization management reports. Correct Rx provides an analysis of medication utilization data each month. The analysis also presents performance indicators such as cost per patient and number of orders per patient. Medication expenditures are analyzed by chronic disease states such as asthma, hypertension and diabetes. The pharmacists track and trend the utilization data in order to identify changes in prescribing pattern or the patient population.

Correct Rx provides the following reports:

- Monthly medication utilization include: Formulary, Nonformulary, HIV, Hepatitis, Psychotropic, Controlled Substances and Tuberculosis Agents
- Total number of prescriptions that include: Formulary, Nonformulary, Stock, HIV, Hepatitis, Psychotropic, Controlled Substances and OTC
- Number of inmates on medications that include: Formulary, Nonformulary, HIV, Hepatitis, Psychotropic, Controlled Substances, Tuberculosis and OTC.
- Medication cost and fills by prescriber
- Patient drug allergy and drug interactions
- Detailed patient profiles
- Detailed list of returned medications
- Weekly 10 day stop report
- Active medication report for medical and mental health
- Heat risk medication report (Seasonal)
- Discharge medication report
- Cost Saving recommendations

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b. The Vendor must provide a Utilization Review Program that will include a monthly report, by prescriber to BCHS:

- *A list of delivered prescription medications and stock medications with costs;*
- *A separate list of returned prescription and stock medications;*
- *A separate list of psychotropic medications delivered;*
- *A separate list of HIV/AIDS medications delivered;*
- *A separate list of non-formulary medications delivered;*

Collaborative Collecting and Reporting of Data

Correct Rx works collaboratively with DDOC and the Health Services Vendors in the collecting and reporting of data and in the development of indicators to be measured and standard reports for management and administrative purposes. These will include, but not be limited to, reports monitoring provider prescription practices against the DDOC formulary, established by the P&T Committee, and any reports necessary for cost audit purposes. Correct Rx shall provide the DDOC BCHS, upon request, specific reports detailing medical information within one business day.

Correct Rx Clinical Pharmacists regularly tracks and trends the utilization data in order to assess and identify new patterns of medication use. As an example, in July of 2013 a 13% increase in number of prescriptions was quickly noted. Dr. Barnes performed an analysis which indicated the increase was due to duplicate ordering. As a result, an educational campaign was conducted to clarify proper ordering and profiling procedures for nursing and prescriber staff. Procedural changes were implemented between ERMA and Correct Rx's pharmacy system to prevent and monitor duplicate fills.

DDOC Approved Format

Correct Rx is responsible for the development and/or upkeep of electronic data tracking in a format approved by BCHS. Correct Rx is familiar with and has produced extensive utilization, billing, clinical and CQI reports in a myriad of formats designed to meet the individual and specific needs of the entire DDOC team. Correct Rx will continue to be able to respond to various electronic data requests as they arise and to provide the expert analysis and interpretation that best equips DDOC to manage the patients we serve together in a high quality and cost efficient manner.

Correct Rx provides professionally written reports that are informative, responsive and timely. All of the pharmacy reports discussed in this response and others as requested are provided by Correct Rx on a regular basis by the due date. Correct Rx has experience working with multiple disciplines in a collaborative manner so that data may be collected and reported in the development of indicators to be measured. These performance indicators are then utilized in a standardized reporting format that may be used for clinical, management and administrative purposes.

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Correct Rx provides reports that monitor provider prescription practices against the formulary and any reports necessary for cost audit purposes. In collaboration with prescribers, additional reports detailing medical information based upon the needs of BCHS are also provided as requested often the same day as requested.

Correct Rx utilizes software specifically designed for the correctional market. Correct Rx has the proven ability to produce dozens of standard and customized reports regarding **utilization. Correct Rx's clinical department** has spent years developing well designed statistical reports. These reports currently provide BCHS with detailed year to date statistical and utilization data sorted by month and facility.

Some of the more complex and detailed statistical reports are produced for BCHS to assist in the management of high acuity and high cost patients. All data is expressed in easily understood terms and ratios specifically designed for the correctional healthcare arena. Reports are provided in writing and are also augmented by verbal clarification if requested or needed. Listed below is a description of the information contained in **Correct Rx's Drug Utilization and Provider Usage Reports.**

Reports by Type

Correct Rx will accommodate BCHS when a different format is preferred or additional information not currently included in these reports is needed. Correct Rx maintains ongoing two-way communication with our clients to determine the addition or deletion of reports needed to manage the provision of optimal healthcare services. **Correct Rx is constantly working with our software vendor to refine and tailor the reporting capabilities. Our goal is to provide the most relevant data in the most user friendly format.**

Monthly Statistical Report

The monthly statistical report shows twelve (12) months of data by facility stating costs of Formulary versus Non-Formulary usage, HIV costs, Total number of prescriptions, Number of clients on meds, Number of prescriptions per client per month, Percentage of clients on meds, Cost Per-Client-Per Month. It also includes cost per disease state per month. The reports show trends in cost spending by facility and prescriber.

Utilization Review Reports

Correct Rx provides utilization review reports that include comprehensive patient drug use evaluations that permit the review of the patient medication profiles based on orders processed by the pharmacy. These utilization review reports will be included in the routine contents of the Pharmacy and Therapeutics Committee agenda.

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The report shall include, but not be limited to facility, service date, inmate, patient full name, patient date of birth, prescriber full name, identifier, Rx number, Rx start date, Rx stop date, generic name, strength, form, frequency, count, bill order quantity, price per unit, charges, directions, GPI#, and NDC#.

Monthly Chronic Disease Report

The monthly Chronic Disease Report lists by facility all utilization/statistical data for chronic diseases including Asthma, Hypertension, Hyperlipidemia, Seizures, Diabetes, HIV, HCV, Psych and Dialysis. This report shows the total cost of each disease category and the cost per client per month of each disease state.

This report includes the previous monthly so that a quick comparison can be made without searching for previous reports. DDOC can assess any trends or spikes in usage by facility, by disease state or by region.

Drug Utilization Report

This report is the most versatile report available for use by DDOC. It can be provided at anytime. It can be manipulated to show high levels of detail or just show a total. The report can list pricing or the pricing can be left off. It can show only brand name drugs, only generic drugs or both. Reports can be run to show only the information for a specific patient or a list of specific patients.

The reports can be broken down to show only the medications listed on the formulary or to show the non-formulary medications. The report can be manipulated to show all classes of narcotics or only specific classes. This report can also be transferred into an electronic format such as excel for easy manipulation as well as ease in delivery. Descriptions of the most commonly used versions of the Drug Utilization Report are listed below:

Utilization by Drug

This Drug Utilization Report can be processed to list each drug prescribed for a specified period of time. The medications appear in alphabetical order along with the number of fills, total quantity dispensed and if desired, the total cost for that particular medication. The report can be broadened to include all the medications used by the facility or narrowed to include only specific classes or groups of medications. This report can be used to gauge excessive usage of certain medications or find exact counts of pills being used. If looking at a specific group of medications, spikes in usage in a group such as Psychotropic Medications can indicate possible need for a reexamination of prescribing procedures or an in depth cost analysis.

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Utilization by Facility

This report tends to be a broader report in general, but can also be tailored to provide much needed information. This report is generally used when looking at multiple facilities in comparison activities.

The report when generalized can just show totals for each facility, specifically listing the number of fills, total quantity of medication dispensed and if desired, cost. The more detailed report can go so far as to list each person, medication, prescription number, order start and stop dates, number of fills, prescription quantity and if desired, cost.

Utilization by Doctor

This Drug Utilization Report provides a listing of each patient, medication description, prescription number, order start and stop dates, number of fills, medication quantity and if desired, cost for any specified period of time. This report is grouped by physician for easy reference. This report is useful in ensuring that any formulary in use is being followed. It can be very useful in cost analysis activities.

Utilization by Location

This report can only be used if patients have been assigned to different locations within the facility such as a segregated unit or the infirmary and the facility has notified Correct Rx of those locations. The report lists the location of the patient, patient name, medication description, prescription number, order start and stop dates, number of fills, quantity dispensed, and if desired, cost for the time period specified. Again this report is useful for cost analysis purposes as well as patient specific utilization purposes.

Patient Profile

This report is furnished upon request and has been used most effectively for researching an inmate complaint or in response to a call from a family member. Additionally, other healthcare contractors have requested this report in order to effectively respond to an ARP or provide administrative data needed to ensure policy compliance with their staff on site.

This is just one of the many ways Correct Rx works in a collaborative manner to ensure **success and to enhance patient continuity of care. The report provides the patient's name and ID#, where and when the medication was dispensed as well as the drug name, Rx number, start and stop dates, prescriber's name and directions.**

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Quarterly Chronic Disease Report

The Chronic Disease Report lists by facility and by quarter all utilization/statistical data for chronic diseases including Asthma, Hypertension, Hyperlipidemia, Seizures, Diabetes, HIV, HCV, Psych and Dialysis. The report shows the total cost of each disease category and the cost per client per month of each disease state. The report includes the **previous quarter's information so that a quick comparison can be made without searching for last quarter's report. BRRJA can assess any trends or spikes in usage by facility or by disease state.**

Annual Report

Correct Rx compiles a comprehensive annual report of all statistical utilization along with a narrative summary delineating the specific achievements of the Correct Rx Pharmacy Program during the contract year. This report will be a roll up of the monthly statistical and narrative reports.

The Pharmacy and Therapeutics meeting is a forum established and tailored to provide reduced medication costs and meet the need for continual monitoring of medication use, application of pharmacoeconomic principles, to develop a sound formulary, management of drug costs, and knowledge regarding standards of care. A Correct Rx consultant pharmacist will schedule a visit prior to each Pharmacy and Therapeutics Committee Meeting to assure that inspection reports can be shared at the meeting, issues can be discussed, and any necessary administrative can be actions taken.

Web-Based Reporting System

Correct Rx will provide an in internet secure web-based integrated reporting system for DDOC that provides **up-to-date date (previous day's orders shall be viewable) on all pharmaceutical ordered for DDOC utilization management.** Our system will provide reports by date, cost, facility, prescriber, offender, drug or drug category utilization or any combination thereof. Additionally, Correct Rx will provide DDOC the ability to run reports, including prescriptions needing to be refilled. Additionally, monthly reporting of drug returns, and prescription errors shall be provided.

II. Scope of Work

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[REDACTED]

Modern business analytics is a vital necessity when managing a healthcare system. However, information is only beneficial if it is current, accurate, and readily available. Executives and Managers need real time information that matters. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] We want to make you more effective by making information readily available, intuitive, interactive and easy to understand.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

II. Scope of Work

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Managers will find this system to be an essential management tool, as they will know exactly what is happening in each of their facilities. Each user will be assigned a user name and password with an assigned level of access to the dashboard from the executive, regional and site level.

Key Performance Indicators

[REDACTED]

Message Content

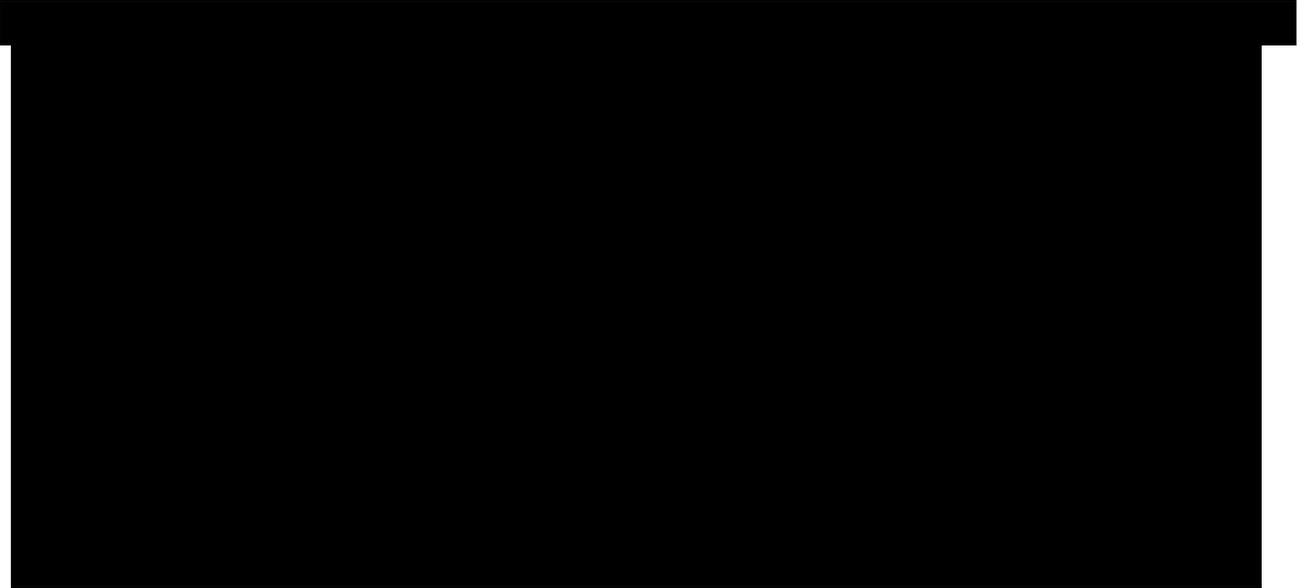
[REDACTED]

[REDACTED]

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Key Features of the Correct Rx Dashboard



Valuable Tool

Correct Rx believes that this tool will leverage DDOC to meet established medication use goals and manage overall healthcare costs within its facilities. The ability to measure and monitor performance is a vital step to achieving sustainable success.

Administrative and Clinical Data Management

The Correct Rx administrative and clinical management teams assigned to DDOC contract are ultimately responsible for the provision of data and reports that demonstrate a high level of accuracy, validity and integrity. We have gained a wealth of hands on correctional experience over the past 30 years. We have used this experience to gather data and design reports that are tailored to meet the specific needs of our clients and the individual healthcare teams at each facility. Our reporting system includes traditional written reports, an advanced **Dashboard Management Tool** and access to our **online Remote Reporting System**.

c. The Vendor will cooperate with and provide requested information to BCHS Utilization Review staff and Quality Assurance Staff in order to provide DDOC information on fiscal and operational efficiency of Vendor services.

Correct Rx cooperates with and provides requested information to BCHS Utilization Review staff and Quality Assurance Staff in order to provide DDOC information on fiscal and operational efficiency of our services.

II. Scope of Work

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The DDOC has experienced firsthand that we will deliver as promised specialty reports that assist the BCHS in providing oversight and contract management. Our reports are accurate and timely providing the DDOC confidence that the offenders are receiving the constitutional care required in this RFP in a manner that provides excellent healthcare outcomes and is fiscally responsible with the taxpayers' money.

We are proud to have provided DDOC with a range of options to manage pharmaceuticals with our robust reporting systems and the new dynamic web based dashboard reporting system that we have included with this proposal. We believe it will provide DDOC with instantaneous access to a full menu of reports which will provide valuable information and save the time by not having to manipulate raw data. Our written reports and participation in interdisciplinary meetings provides Correct Rx with the opportunity to consistently demonstrate our quality of service and dedication to focusing on the client value first, being customer friendly, being customer centered and always providing something extra. Understanding and meeting the needs of our clients is essential and always in the forefront of our operations.

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C. Detailed Requirements

10. Administration

a. Coordination and Communication with DDOC

• Although some communication requirements are specified in the RFP, the DDOC expects the Vendor to establish daily communication protocol with the DDOC BCHS and facility administrative staff that is approved by the Bureau Chief. The DDOC also expects that the Pharmacy Vendor's administrative staff have a single contact person available on a daily basis. The Vendor is responsible for informing DDOC of a change or substitution, whether temporary or permanent, of the single contact person in each facility. The Vendor must keep the DDOC administrative staff in each facility informed of issues and problems, their resolution, special needs and special medical circumstances as well as any other pertinent medical information.

Correct Rx understands that although some communication requirements are specified in the RFP, the DDOC expects Correct Rx to establish daily communication protocol with the DDOC, BCHS and facility administrative staff that is approved by the Bureau Chief. Correct Rx acknowledges that the DDOC also expects that the **Correct Rx's** administrative staff have a single contact person available on a daily basis. Correct Rx is responsible for informing DDOC of a change or substitution, whether temporary or permanent, of the single contact person in each facility. Correct Rx will keep the DDOC administrative staff in each facility informed of issues and problems, their resolution, special needs and special medical circumstances as well as any other pertinent medical information.

Correct Rx will work closely with the BCHS and facility administration to ensure our daily communication protocol as approved by the Bureau Chief are acceptable and meeting the needs of all involved. Dr. Crosby Amoah will serve as the responsible administrative single contact available on a daily basis. The Bureau will also always have access to Dr. Valerie Barnes our clinical manager assigned to this contract and Mr. John R. Nattans our administrative program manager assigned to this contract.

• Cooperative Interaction with Other Offender Health Services Vendors. – Each Vendor shall work cooperatively with any and all other health care Vendor(s) selected by the DDOC to provide comprehensive services to DDOC offenders such that access to care, continuity of care, and quality of care are maintained. Administrators and Clinicians will participate in such standing and ad hoc committees to coordinate Vendor activities as is determined necessary by the Bureau Chief.

Correct Rx embraces the opportunity and shall continue to work cooperatively with any and all other health care Vendor(s) selected by the DDOC to provide comprehensive services to DDOC offenders such that access to care, continuity of care, and quality of care are maintained.

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Correct Rx Administrators and Clinicians will participate in such standing and ad hoc committees to coordinate Vendor activities as is determined necessary by the Bureau Chief.

Multi-Vendor Model Success

Correct Rx is a strong advocate for the multi-vendor model, as we believe it provides the DDOC with the highest quality of healthcare services in the most cost effective manner for the citizens of Delaware.

Correct Rx's experience demonstrates that an essential element in the successful provision of health services in a multi-vendor model is effective communication. This has been one of our top priorities over our continued years of service. Correct Rx has built a reputation for keeping the DDOC and our co-vendors well-informed. Correct Rx submits all required reports in a professional manner. Our reports are not only timely and accurate, but are also frequently tailored to meet the specific need of the request. We are proud of our reputation and have detailed these efforts in section II.C.9 Utilization Review.

In addition to the required reports, Correct Rx is always available via telephone, video conference, e-mail and perhaps most importantly in-person for meetings, ad hoc committee participation or multi-vendor collaboration. In fact our response time has been recognized by Mr. Welch, Ms. Wilkins, Ms. Piccolo, Mr. Records, Deputy Bureau Chief Klein and many others throughout the BCHS and DDOC. Whenever the Department has a specific need from the pharmacy vendor, Correct Rx works diligently to address the request in a thoughtful, creative, collaborative, professional and timely manner.

Over the past three and half years, Correct Rx has a proven track record for working as a team player in the multi-vendor model. This level of open communication and transparency provides the DDOC and BCHS with a unique view of all healthcare services being delivered under the terms of the separate contracts. This is a much different system than having one primary vendor who gets to dictate what information will be shared with the State. In the multi-vendor model, the DDOC is well informed by each vendor and has an accurate assessment of how well each is performing. Further each vendor is keenly aware of this fact, which leads to a focus on meeting the terms of the contract; in essence there is no hiding.

Participation and collaboration is the only manner in which to succeed in the multi-vendor model. If one vendor is not performing or working cooperatively, it is easily identifiable, which facilitates corrective action.

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While each vendor has a specific service to deliver, all of the services are **interdependent**. **Correct Rx's pharmacy services are integral to multiple** departments within the DDOC and each of our co-vendors. The comprehensive pharmacy service program required by the Department is much more than simply dispensing medications, it includes program management, clinical programs, regulatory compliance, infectious disease control, emergency preparedness, information technology, and utilization management to name a few.

Correct Rx has worked diligently to establish effective relationships with the BCHS, DDOC, custody and facility administration personnel and our co-vendors to ensure the delivery of the best overall healthcare service. We are proud of our reputation for hard work, collaborative practice and a commitment to the success of all vendors. We understand the roles of our partners and more importantly have forged relationships with the specific people who fulfill these key roles. We firmly believe in working together with our co-vendors and the DDOC in a transparent manner and our actions demonstrate this truth.

b. DACS Data Entry Mandatory – The Delaware Automated Correctional System (DACS) is a web-based offender management system. DACS uses Oracle Database© and Oracle© tools to store and retrieve data. Use of the DACS medical module and all the components therein is a material requirement of any health care services contract. BCHS anticipates the implementation of an order-entry module early in the contract time-frame. Initial training on the system will be provided by DDOC staff. Follow up training to be provided by the Vendor.

Correct Rx understands that use of the DACS medical module and all the components therein is a material requirement of any health care services contract. Correct Rx acknowledges that the BCHS anticipates the implementation of an order-entry module early in the contract time-frame. Correct Rx understands that the initial training on the system will be provided by DDOC staff and that follow up training is to be provided by Correct Rx for its employees.

Each clinical pharmacist currently assigned to this contract has received training and currently uses DACS on a daily basis for report gathering in the Chronic Care and Mental Health Modules. While we currently do not enter information into the system, we are actively engaged in the evolution of DACS becoming the EMR for DDOC. Correct Rx will ensure that we are prepared to continue all the documentation we currently provide. Once DACS is ready, we will incorporate our clinical documentation in DACS.

We are confident that the availability of our clinical recommendations in DACS will greatly enhance the flow of information between providers and facilities. We look forward to continuing our active contributions in any system enhancements.

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c. Human Resources Management

• Recruitment and Retention – The Vendor is responsible for providing staff to the DDOC under this solicitation and must have a continuously active recruitment and retention operation designed to attract qualified health professionals and keep all positions filled, especially clinical positions. The plan must be in writing and accepted by the Bureau Chief.

Correct Rx understands that we will be responsible for providing staff to the DDOC under this solicitation and must have a continuously active recruitment and retention operation designed to attract qualified health professionals and keep all positions filled, especially clinical positions. The plan must be in writing and accepted by the Bureau Chief. Correct Rx has met and exceeded the staffing requirements over the previous contract term. In addition, we have corporate resources and clinical pharmacist that are licensed in Delaware. They would be mobilized if necessary to ensure that the staffing requirements are fully met.

Recruitment Plan

At Correct Rx we have adopted many of the principles presented by Geoff Smart and Randy Street in their *New York Times* best seller “*Who.*” We **have devised a hiring strategy or “blueprint” in which we very clearly define the specific roles for which we are hiring and the individual skill set needed to overachieve in these roles.** Then we go about the process of **finding and hiring these “A” players.** We embrace the concept of an ongoing recruitment strategy in which you generate a stream of top candidates. This approach has served Correct Rx quite well.

Correct Rx follows a continuous recruitment plan that ensures we have multiple levels of access to perspective recruits. In addition to placing ads via online job sites, local newspapers and clinical journals, Correct Rx has used professional recruiting firms and participated in various job fairs. Furthermore, our team of clinicians is active in the professional community, allowing us access to the most qualified candidates in the industry.

For example, Dr. Yankellow is the Chair of the University of Maryland, School of Pharmacy Board of Visitors and a preceptor for pharmacy interns. She is also the immediate past President of the American Society of Consultant Pharmacists. Our Vice President of Operations, Jill Molofsky is a member of the admissions committee at the University of Maryland, School of Pharmacy and the Rotary Club of Baltimore. Our General Manager of Operations, Dr. Jaye Wexler, is a preceptor for the **College of Notre Dame’s School of Pharmacy** and a member of the admissions committee.

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We believe our overall success is directly linked to the individual success of each employee. Correct Rx not only provides a competitive salary schedule but also is recognized for our excellent benefits. This combination along with our superior work environment make Correct Rx an organization that is considered one of the most desired companies to work for in Central Maryland.

Correct Rx always takes special care when selecting the key members of our team to provide the administrative, operational and clinical responsibilities of our contracts. In addition to verifying licensing and all requirements of credentialing specified in the RFP, our key Managers and onsite Clinical Pharmacists are selected based upon their experience, skills and qualifications ensuring that their strengths match the needs of the DDOC. We are fortunate at Correct Rx because our owners, managers, onsite pharmacists and key pharmacy staff have direct experience in providing excellent service in corrections.

Correct Rx will ensure that there is no interruption in services due to staff vacancies, vacations, trainings, or any other situation that may or may not make it appear that there are insufficient personnel to complete services named throughout this document. The Vice President of Program Services and Quality Assurance, John Nattans, is and will be responsible for maintaining monthly staffing schedules, weekly adjustments and any variations in staffing patterns due to vacancies, vacations, trainings or any other reason.

- *New Employee/Contractor Training and Unit Orientation*

- *Each Vendor responsible for providing staff under this solicitation must have a written New Employee Orientation and Training Plan and a system for quickly moving new employees through the training. The Vendor must work closely with the Bureau Chief to coordinate Vendor's orientation and training programs with DDOC mandatory new contractor training/orientation modules. In addition, the Vendor must have a system for privileging licensed pharmacy professionals that targets essential basics for safe offender care. DDOC-approved suicide prevention training is mandatory for all on-site Vendor employees.*

Correct Rx provides an extensive competency based new hire orientation program for all employees joining the Correct Rx Team. There are several components to our comprehensive program detailed below: 1) Correct Rx Personnel Orientation; 2) Correctional Facility Orientation; 3) Position Specific Orientation and 4) Site Specific Orientation.

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COMPETENCY BASED ORIENTATION

Correct Rx ensures that the New Hire orientation is competency based. Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies, professional references and ensures compliance with the DDOC Staff Credentialing requirements.

During the Personnel Orientation each employee reviews all Personnel Policies and Procedures, is afforded the opportunity to ask questions and is provided with a personal copy of this manual. The Correctional Facility Orientation phase provides a thorough review of **Correct Rx's Policies and Procedures** for Correctional facilities and the (Delaware) Department of Correction Policy Manual. Correct Rx also reviews policies and procedures as well as terms of the RFP during each monthly CQI meeting, which provides an opportunity to solidify learning.

The process of shadowing during the position specific orientation phase allows for a skills based assessment of competency under the guidance of a proven professional. This allows Correct Rx to identify individual strengths and weaknesses, which will inform scope of practice, staff development opportunities and areas of expertise. In addition to the annual peer review program and employee evaluation, each clinical pharmacist is required to participate in the monthly Clinical Roundtable. These sessions provide the opportunity for ongoing skill assessment and development as well as clinical practice updates.

The site specific orientation is outcome driven (e.g., issuance of the DOC ID Badge, documentation of successful completion of 40 hour pre-service orientation, 40 hours of annual training, continued **licensure requires professional CE's, annual CPR certification, etc.**).

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CORRECT RX PERSONNEL ORIENTATION

This phase of orientation is designed to provide our employees with the history and mission of Correct Rx, while acquainting new team members with our culture, rules, performance expectations and benefits. Each new employee meets with a member of our Senior Management Team and is walked through our operations and introduced personally to their new teammates. The individual also tours the administrative offices and is introduced to our billing, management and clinical teams. All new associates are personally introduced to the owners of the company setting the tone for our **“Open Door” Policy**. **At the monthly Correct Rx staff meeting for all employees, all new employees are recognized and welcomed to our team with a round of applause, which helps establish our belief in teamwork and accomplishment through hard work, integrity and acknowledgement.**

Each new employee participates in a scheduled orientation session **in which every page of our “Personnel Policies & Procedures Manual” is reviewed.** All employees are provided with their own personal copy of this manual and are required to sign an acknowledgement that the manual was received, reviewed and understood. The following list identifies the topics covered in this manual:

- The History of Our Company
- Our Mission Statement
- Employee Relations
- Business Policies and Guidelines
- Your Health and Safety
- Drug-Free Workplace Policy
- Integrity
- Compensation Package
- Employee Benefits
- Your Career with Correct Rx Pharmacy Services
- Acknowledgement to the Handbook

Correct Rx’s **belief that our employees are our strength and our investment in the future begins on day one.** All employees are engaged in designing their career path and goals as a part of the orientation process.

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CORRECT RX CORRECTIONAL FACILITY ORIENTATION

This phase of orientation is designed to introduce our new employees to the Policies and Procedures we have created for correctional facilities. Correct Rx has developed many pharmacy policy and procedure manuals for specific correctional facilities and statewide systems. These policies and procedures are intended to ensure compliance with all laws and regulations related to pharmacy operations. All Correct Rx employees participate in a **scheduled session in which every page of the “Correct Rx Policy and Procedure Manual for Correctional Facilities” is reviewed.** The purpose of this Policy and Procedure manual is to serve as a professional guide to pharmaceutical services for the correctional facility and to:

- Enhance patient care and assure the safety of offenders receiving pharmaceutical services
- Ensure regulatory compliance
- Promote consistency and continuity
- Communicate important policies
- Aid in personnel training
- Increase legal protection
- Aid in evaluating performance

POSITION SPECIFIC ORIENTATION

Correct Rx employees receive position specific orientation as well. This phase focuses on two key elements – understanding the job description and hands-on training by a more experienced team member. All positions at Correct Rx have well defined job **descriptions.** The importance of practicing within the scope of one’s responsibility and understanding the role of others is highlighted. Understanding the responsibilities of each member of the interdisciplinary team is important to ensuring the provision of competency based services. As our company continues to evolve over time, these descriptions are consistently updated to reinforce accuracy. As part of the annual performance evaluation, all employees are asked to provide a review of their job descriptions. At the time of hire, all new employees are given a copy of their job descriptions to review.

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In order to bring the description to life, Correct Rx has designed a shadowing program in which the new employee works alongside a more experienced employee performing the same or similar role. This personal approach affords the new employee with training and **guidance specific to the individual's need. Also, the length of this** personal orientation is based upon actual performance as observed by a supervisor or manager.

Additionally, Correct Rx has an active CQI committee that contributes to the orientation program. One of the responsibilities of the CQI committee is developing, revising, and maintaining **Correct Rx's Emergency Preparedness Plans.**

All new employees must review these plans with the supervisor of their department within the first 30 days of starting work to ensure they understand how these plans will be implemented and any responsibilities they may be asked to fulfill. Each employee reviews these plans on an annual basis.

SITE SPECIFIC ORIENTATION

This phase of orientation applies to specific site assignments. For example, in this contract any Correct Rx employee assigned to provide services in a DDOC facility will require the following:

1. Proper background clearance for entry into the facility and ID badge issuance;
2. Orientation and training regarding healthcare practices, security, and emergency preparedness;
3. 40 hours of pre-service training and orientation (in addition to the required 40 hours of annual training)
4. DDOC orientation regarding institutional operations;
5. Security Orientation with DDOC staff, refresher training and DDOC-wide and site specific policies and procedures;
6. DDOC Code of Ethics
7. Code of Conduct and drug-free workplace
8. DACS training

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9. Blood-Bourne Pathogens
10. Suicide Prevention Training and follow-up training.
11. PREA Training

• As part of the plan, the Vendor must provide basic orientation training and biennial updates to DDOC officers on the recognition of altered physical or mental states associated with medical conditions

Correct Rx shall as part of the plan, provide basic orientation training and biennial updates to DDOC officers on the recognition of altered physical or mental states associated with medical conditions. Correct Rx will work with our medical and mental health partners to provide necessary training for DDOC officers. We will also be available to provide or arrange additional trainings as directed by the BCHS and DDOC.

• The Vendor will be held accountable for providing monthly updates (electronically) on DDOC staff orientation and training including specific training/orientation by facility and the individuals involved.

Correct Rx acknowledges that we will be held be held accountable for providing monthly updates (electronically) on DDOC staff orientation and training including specific training/orientation by facility and the individuals involved. Correct Rx maintains orientation, credentialing and training documentation for all of our employees and will provide this information in any format the DDOC deems appropriate.

• Staffing

• DDOC has provided minimal staffing requirements as set forth in Appendix D (Vendor Staffing Requirements). Staffing volume and coverage are subject to change by BCHS based on subsequent analysis of staffing needs. DDOC will not pay staffing costs for positions that are not filled. DDOC will actively monitor vendors staffing levels on an ongoing basis and make a Management Fee price adjustment to the monthly invoiced amount to eliminate payments for unfilled positions. Any adjustments will be retroactive to the date when the position became vacant and will continue until the position is filled. The vendor may propose alternative methods for enforcing adequate staffing levels.

Correct Rx understands the minimal staffing requirements as set forth in Appendix D (Vendor Staffing Requirements). Correct Rx acknowledges that Staffing volume and coverage are subject to change by BCHS based on subsequent analysis of staffing needs.

II. Scope of Work

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Correct Rx understands that the DDOC will not pay staffing costs for positions that are not filled. Correct Rx acknowledges that the DDOC will actively monitor vendors staffing levels on an ongoing basis and make a Management Fee price adjustment to the monthly invoiced amount to eliminate payments for unfilled positions. Correct Rx understands that any adjustments will be retroactive to the date when the position became vacant and will continue until the position is filled. Correct Rx acknowledges that we may propose alternative methods for enforcing adequate staffing levels.

Supplemental: Correct Rx understands and is excited that this RFP requires two additional on-site clinical pharmacists. We have been actively interviewing candidates for these positions since October 2013 and have already identified several qualified professionals. As the DDOC is aware, Correct Rx hires pharmacists that are highly credentialed to include completion of a post graduate residency. Upon award, Correct Rx will move quickly to make offers to these candidates. We are hopeful that these prospective candidates will join our team and that they will be paired with the three onsite pharmacist who will be retained in their current positions.

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- *The Vendor will be required to provide service coverage at all facilities based on the services stipulated in this contract.*

Correct Rx understands that we will be required to provide service coverage at all facilities based on the services stipulated in this contract. The chart below identifies a schedule that Correct Rx is proposing to satisfy the requirements of this RFP. Correct Rx understands that the final staffing plan will be discussed with and authorized by the BCHS Medical Director and Bureau Chief.

Pharmacist	Monday	Tuesday	Wednesday	Thursday	Friday
Crosby Amoah	HRYCI	HRYCI	PCCC	HRYCI	HRYCI
Janene Cornish	JTVCC	JTVCC	JTVCC	JTVCC	Morris
Jaime McGee	JTVCC	JTVCC	CVOP	JTVCC	JTVCC
Additional Pharmacist #1	BWCI	HDP	BWCI	WEBB	BWCI
Additional Pharmacist #2	SCI	SCI	SCCC	SCI	SCI

- *Every staff position not filled will have a Management Fee price adjustment. Initial staff positions will be filled within 45 days of the contract start, and staff resignations will be filled within 45 days of the last day the staff member works. The Management Fee price adjustment will be based upon a per diem reduction of the position salary. The vendor may temporarily fill a PharmD position with a locum tenens without incurring a price adjustment.*

Correct Rx understands that every staff position not filled will have a Management Fee price adjustment. Correct Rx acknowledges that initial staff positions will be filled within 45 days of the contract start, and staff resignations will be filled within 45 days of the last day the staff member works. Correct Rx understands that the Management Fee price adjustment will be based upon a per diem reduction of the position salary. Correct Rx understands we may

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temporarily fill a PharmD position with a locum tenens without incurring a price adjustment.

d. Credentialing and Privileging of Professional Staff (initial and ongoing)

- *The Vendor responsible for providing staff under this solicitation shall have a system for credentialing and privileging staff that is approved by the Bureau Chief. Each off-site service requiring licensure and certification in the State of Delaware used by any Vendor shall have that licensure or certification on file and be in good standing without practice restrictions*

Correct Rx is responsible for providing staff under this solicitation and we have a system for credentialing and privileging staff that is and will be approved by the Bureau Chief. Correct Rx acknowledges that each off-site service requiring licensure and certification in the State of Delaware used by any Vendor shall have that licensure or certification on file and be in good standing without practice restrictions.

Subject Matter Experts!

The key to a well-designed comprehensive pharmacy program is that all associates work in tandem to provide the highest level of patient care. First you must ensure that you hire staff with the best experience and impeccable credentials. It is equally important that you provide a corporate culture founded on caring and accuracy. **Correct Rx embraces the concept that what we do and how well we perform our job matters. We call it the “Correct Way”. All new associates as part of their orientation are trained to understand the importance of providing safe and reliable pharmaceuticals.**

Our associates are expected to do things the “Correct Way”. You can always expect something extra from Correct Rx associates, whether that is producing an accurate CQI report, preparing or sending an order, or taking a call after business hours. Accuracy is core to the culture of Correct Rx.

Credentialing

Correct Rx knows that accuracy and reliability are essential when providing pharmacy services for the Delaware Department of Corrections (DDOC). Correct Rx only hires employees who are fully credentialed and licensed to perform their respective job functions. Prior to hire, Correct Rx verifies educational experience, licensure with the respective licensing bodies and professional references.

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Correct Rx maintains a Quality Assurance credentialing spreadsheet used to monitor compliance and plan for license and certification renewal. This credentialing spreadsheet is reviewed monthly at the internal COI meeting.

Correct Rx is proud of our pharmacists. Dr. Yankellow serves as the Chair of the University of Maryland Board of Visitors and we take great pride in our relationship with the University Of Maryland School Of Pharmacy. In addition, Dr. Yankellow serves as a faculty clinical instructor for the School of Pharmacy. Correct Rx is also an approved practice site for Pharmacy Students. As preceptors and mentors to Pharmacy School interns we are able to not only teach them the mandatory requirements of proper dispensing, clinical interventions, checking for interactions but also the importance of being accurate. As a pharmacy owned and operated by pharmacists being accurate is core to the culture of Correct Rx.

Correct Rx extends this pledge of excellence to our sub-contractors whether it is our maintenance company, or our courier service they must attend the Correct Rx orientation and abide by our rules. Most importantly all employees and sub-contractors must accept the **“Correct Way” of doing things**. We verify all sub-**contractors’ credentials and business licenses**. **“If it’s the right way, it’s the Correct Way” is more than a tag line it is a promise of excellence surrounding our entire program**. Correct Rx will ensure through our credentialing process that all staff has the proper credentials and licenses required by law to provide the pharmacy services described in the RFP Specifications. Correct Rx is fully licensed as an institutional pharmacy. All of our pharmacists are licensed pharmacists and are all in good standing.

• In addition, BCHS has a privileging process that reviews the credentials of each of the licensed providers and grants site-specific privileges to the provider.

Correct Rx will comply with the BCHS privileging process that reviews the credentials of the licensed providers and grants site-specific privileges of the provider.

Initial Screening and DOC ID Badge

Correct Rx has worked with the DDOC to ensure that our team of On-Site pharmacists and medication couriers receive and maintain DDOC clearance and identification cards. Correct Rx worked closely with the DDOC Human Resource point of contact Larry Klebart before his retirement in December 2011. DDOC was able to assist with a smooth transition as Stacy Shane replaced Mr. Klebart. Correct Rx works closely with Ms. Shane to obtain credentialing packets for new hires.

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Identification badges up for renewal are processed with the assistance of both Stacy Shane and Angela Holman. Renewal paperwork is processed through Internal Affairs, and once clearance has been re-determined either Ms. Shane or Ms. Holman contact Correct Rx with the list of pharmacist and/or medication couriers who need to obtain their new DDOC badge. Appointments are made with either Human Resource contact.

e. Work Hours Required On-Site

• Credit for filling a post is given when an individual reports for duty at the facility to provide clinical service. Travel time is not considered as time worked with regard to the staffing hours

Correct Rx understands that credit for filling a post is given when an individual reports for duty at the facility to provide clinical service. Correct Rx acknowledges that travel time is not considered as time worked with regard to the staffing hours. All of our clinical pharmacists are salaried professionals who understand the time requirements for these positions. In fact our commitment to patient care and treatment outcomes typically results in each pharmacist exceeding the standard requisite 40 hours per week (at no extra cost to the DDOC).

• All full-time hours shall be spent on-site at a facility, except as is otherwise expressly agreed to in writing by the Bureau Chief. Vendor must supply written documentation detailing schedules which are not consistent with the 40 hour week. Facility staffing work schedules may be modified only upon prior written agreement between the DDOC BCHS and the Vendor. The Vendor must obtain approval for any Vendor staff off-site training time. The maximum allowable training time per individual clinical staff member is 40 hours per year. Staff training planned for Vendor's non-clinical staff must be clearly presented in Vendor's response to this RFP. The DDOC will not count staff time in attendance at off-site meetings unless so authorized in advance by the DDOC BCHS.

Correct Rx acknowledges that all full-time hours shall be spent on-site at a facility, except as is otherwise expressly agreed to in writing by the Bureau Chief. Correct Rx must supply written documentation detailing schedules which are not consistent with the 40 hour week. Correct Rx understands that facility staffing work schedules may be modified only upon prior written agreement between the DDOC BCHS and the Correct Rx. Correct Rx acknowledges that we must obtain approval for any staff off-site training time. Correct Rx understands that the maximum allowable training time per individual clinical staff member is 40 hours per year.

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Correct Rx acknowledges that staff training planned for our non-clinical **staff must be clearly presented in Vendor's** response to this RFP. Correct Rx understands that the DDOC will not count staff time in attendance at off-site meetings unless so authorized in advance by the DDOC BCHS.

f. Policies, Procedures, and Guidelines/Protocols

• The Vendor will follow all DDOC, BOP, BCHS policies and procedures. The Vendor will develop site-specific procedures and guidelines/protocols for all facilities at the beginning of the contract. They must be submitted to the DDOC for approval within 90 days of contract award and must meet NCCHC, ACA, DE CRS and DEA standards and be consistent with DDOC policies and procedures. The Vendor will provide the DDOC with a sufficient number of copies of their policies, procedures, protocols and guidelines as is necessary to supply DDOC administrators. All changes/revisions shall be supplied 30 days prior to the intended initiation of such changes/revisions and be approved by the BCHS. All Vendor policies and procedures are subject to final approval by the DDOC.

Correct Rx will follow all DDOC, BOP, BCHS policies and procedures. Correct Rx will develop site-specific procedures and guidelines/protocols for all facilities at the beginning of the contract. Correct Rx understands that they must be submitted to the DDOC for approval within 90 days of contract award and must meet NCCHC, ACA, DE CRS and DEA standards and be consistent with DDOC policies and procedures. Correct Rx will provide the DDOC with a sufficient number of copies of their policies, procedures, protocols and guidelines as is necessary to supply DDOC administrators. Correct Rx understands that all changes/revisions shall be supplied 30 days prior to the intended initiation of such changes/revisions and be approved by the BCHS. Correct Rx acknowledges that all of our policies and procedures are subject to final approval by the DDOC.

As the current vendor, there will be no learning curve experienced by the DDOC as Correct Rx is already providing services according to procedures/guidelines approved by the DDOC.

Policy Development

Correct Rx shall provide consultation on appropriate medication protocols. Correct Rx will continue to assist in the review, development and implementation of DDOC pharmaceutical policy, procedure, and protocols. Development of any new policy language shall be in conjunction with, and approved by the BCHS and the DDOC.

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Medication Protocols

Correct Rx has established itself as a leader in correctional pharmacy services and partners with medical providers to ensure that the health services provided in the correctional setting meets or exceeds all standards of care. Correct Rx works closely with our clients to assist in the development of medication protocols in order to ensure compliance with all applicable standards of correctional health care. Our clinicians, managers and administrators have significant experience assisting with the development of policies that ensure patient safety, improve patient compliance, and decrease waste and diversion.

Also, Correct Rx has deliberately invested in the development of our clinical initiatives and programs and has built a team of highly credentialed clinical pharmacists. Our clinical pharmacists both onsite and in our corporate office will continue to partner with the DDOC, custody, and our healthcare co-vendors in the development and implementation of meaningful medication protocols and clinical guidelines. Correct Rx views the ongoing medication room audits, formulary management, non-formulary processes, Pharmacy & Therapeutics meetings and interpretation of the utilization data, as opportunities for our experts to inform our partners regarding policy and protocol decisions.

Policy and Procedure

Correct Rx recognizes that there is increased scrutiny to ensure compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and caring for the safety and welfare of the public. Correct Rx has worked closely with clients, including Statewide systems and national correctional healthcare providers, to design comprehensive Pharmacy Program Services policies, procedures and protocols.

Well developed policy and procedures serve as a professional guide to pharmaceutical services for the correctional facility to:

- Enhance patient care and assure the safety of offenders receiving pharmaceutical services
- Promote consistency and continuity
- Communicate important policies
- Aid in personnel training
- Aid in evaluating performance
- Increase legal protection

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Correct Rx will continue to review the policies, procedures, and protocols to ensure that they are aligned with ACA standards, NCCHC standards, and all applicable Delaware Statutes, regulations, policies, and guidelines.

Proven History

Correct has worked extensively with our clients to develop programs and protocols that cover a vast array of issues in correctional health care. They include medication administration procedures, medication administration documentation, medication self administration programs, accountability of controlled substances, storage and handling of medications. Notable and complex examples of guidance include:

- During the past year our DDOC on-site clinical pharmacists have helped reinforce policies and procedures for controlled substance documentation by providing staff education on proper controlled substance documentation and controlled substance documentation audits for the medical vendor. Correct Rx is also collaborating with the DDOC and the Medical Vendor to update the current Controlled Substance Policy.
- Our in-site DDOC clinical pharmacists have helped revise stock policy for the medication storage areas and pharmacies. Correct Rx collaborated with the Medical Vendor staff and the BCHS to determine appropriate par levels of each stock item and a maximum order quantity for each stock item at all DDOC sites to help eliminate unnecessary stock items and reduce costs.
- Correct Rx also collaborated with JTVCC infirmary staff to utilize OTCs from bulk stock bottles for housed infirmary patients to cut down on the amount of medications kept in the storage area due to limited space available and to reduce waste of discontinued or expired medications.

The pharmacist's clinical expertise allows the Correct Rx on-site pharmacists to participate in developing site-specific procedures and guidelines/protocols.

- Currently, Correct Rx is working with several of our clients to implement policies and procedures regarding the use of the newly approved protease inhibitors boceprevir and telaprevir (triple therapy) in the treatment of Hepatitis C.

II. Scope of Work

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Using our clinical expertise and applying pharmacoeconomic principles to the clinical outcomes research data that is currently available, we are assisting our clients in the development and implementation of policy that is mindful of clinical guidelines, outcomes, costs and the resources needed to implement the policy.

- In March 2011, with a short timetable Correct Rx dedicated countless hours of support to assist a client with developing the Policy and Procedure Manual to comply with the California Department of Corrections.
- **In May 2011, the Clinical Department developed our client's Pharmacy Policy and Procedure Manual** using correctional experience and intimate knowledge of their existing policy and procedures. Upon completion, Correct Rx orientated and trained each covered facility during our quarterly site visits.
- In 2009, Correct Rx developed a statewide protocol for the destruction and removal of unwanted, end-user Schedule II, III, IV, and V controlled substances on-site for the Delaware Department of Corrections. Correct Rx worked with the Bureau of Correctional Service, the local DEA Enforcement Agency and the Health Services Vendor to develop this policy and procedure. This protocol incorporated the Office of National Drug Control Policy's **methodology** for destruction and ensured compliance for the facilities with all state and federal regulations.
- In 2008, Correct Rx coordinated the establishment of a Narcotic Treatment Program for the Maryland Department of Public Safety and Correctional Services. Correct Rx worked closely with the DEA, Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Corrections, Medical, Mental and Dental Services Vendor to develop the mandated policies and procedures to run the program, but also guided our client through myriad of federal and state regulatory hurdles associated with the development of a program of this magnitude.

Correct Rx will continue to work collaboratively with the BCHS Medical Director and our co-vendors to continuously improve the policies, procedures and protocols related to the delivery of health services and medication use within DDOC facilities. Correct Rx views all of our policies and procedures as a living document that should be frequently analyzed and updated to provide ongoing improved service to meet the needs and challenges of the DDOC.

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Our goal is to assist our clients in any manner to ensure that they stay at the forefront of correctional care. Our clinical and regulatory staffs are committed to assisting the DDOC in maintaining compliance with the ever changing medical and regulatory demands in correctional health care.

g. Continuous Quality Improvement

• The Vendor shall have a written continuous quality improvement system showing the continuous emphasis on quality it dedicates to all programs and services provided. The program shall be evidence-based, i.e., it shall be supportable by data collected and compiled by the Vendor on all service areas it provides under this contract. While utilization plays a role in the efficiency of services provided, quality indicators in the form of Outcome Measures must be established in coordination with the DDOC to ensure both efficiency and quality. The Vendor will work with the DDOC through its quality committee to develop a common form, format, and schedule for quality improvement reporting to ensure a system and tools for monitoring Vendor's efficiency, effectiveness, and quality of services. Monthly reporting to the Bureau Chief is mandatory and must be received prior to the Vendor receiving payment for the reporting month. The goal is to ensure adequate access to care for offenders with serious medical illness, to improve offender outcomes, and to meet NCCHC standards.

Correct Rx has a written continuous quality improvement system showing the continuous emphasis on quality it dedicates to all programs and services provided. Correct Rx understands the program shall be evidence-based, i.e., it shall be supportable by data collected and compiled by the Vendor on all service areas it provides under this contract. Correct Rx acknowledges that while utilization plays a role in the efficiency of services provided, quality indicators in the form of Outcome Measures must be established in coordination with the DDOC to ensure both efficiency and quality. Correct Rx will work with the DDOC through its quality committee to develop a common form, format, and schedule for quality improvement reporting to ensure a system and tools for **monitoring Correct Rx's efficiency, effectiveness, and quality of services**. Correct Rx understands that monthly reporting to the Bureau Chief is mandatory and must be received prior to Correct Rx receiving payment for the reporting month. Correct Rx acknowledges that the goal is to ensure adequate access to care for offenders with serious medical illness, to improve offender outcomes, and to meet NCCHC standards.

BCHS Mission

Correct Rx embraces the BCHS Mission Statement "To ensure medical, mental health and substance abuse services are delivered to offenders, and services meet the quality standards as outlined by the NCCHC, ACA and other professional standards in the most cost-effective manner."

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Accreditation Experts

One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. Correct Rx Programs are all designed to meet or exceed NCCHC and ACA accreditation standards. Correct Rx has become known as correctional pharmacy accreditation specialists. Correct Rx will partner with our co-vendors and the DDOC to ensure that all DDOC facilities exceed the pharmacy standards, so that achieving and maintaining accreditation is never in question.

Compliance with NCCHC and ACA Standards

Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA). Correct Rx ensures that all pharmacy program services are compliant with NCCHC and ACA standards. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them.

Continuous Quality Improvement System

Correct Rx has implemented a comprehensive Continuous Quality Improvement (CQI) program, as set forth in ACA standards and according to the NCCHC essential Standard P-A-06 and J-A-06 (compliance indicators and definitions):

1. Includes a multidisciplinary improvement committee;
2. Monitors areas specified in the compliance indicators;
3. Provides an annual review of the effectiveness of the CQI Program itself;
4. Includes two process quality improvement studies and two outcome quality improvement programs; and
5. All studies identify areas in need of improvement and effect remedial actions or strategies.

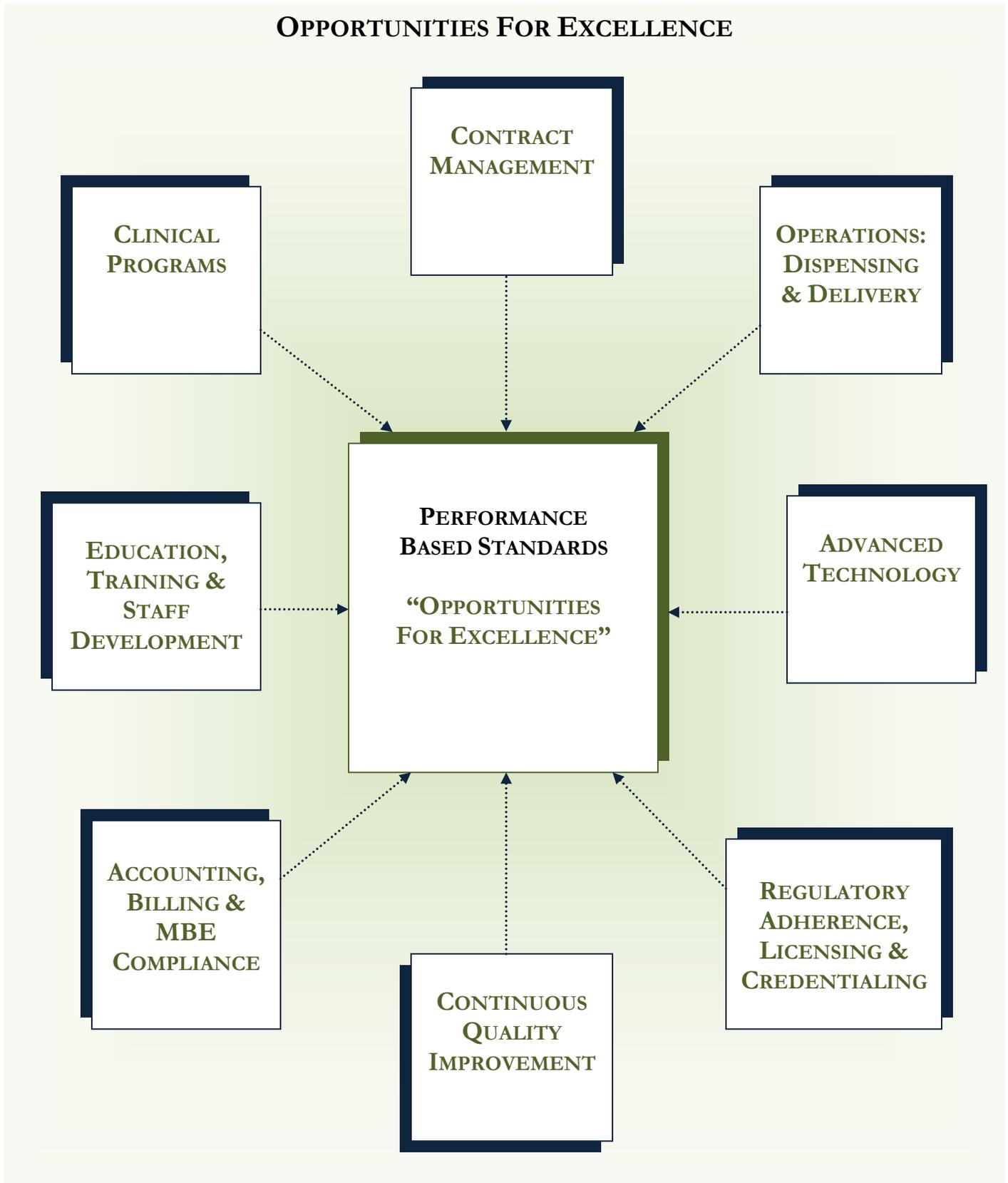
Correct Rx performs quality assurance measurements, conducts studies, compiles reports and monitors compliance both independently and as a cooperative and collaborative member of the multivendor interdisciplinary CQI teams. All goal statements, performance standards, compliance indicators, outcome measures, expected practices, policies, protocols and process indicators are formatted according to Healthcare Industry Standards. Correct Rx works collaboratively with the OPS to ensure that all reports are generated in an approved format and are submitted as required. Correct Rx ensures that all goals are clearly defined and driven by input from multiple internal and external sources. The outcomes are based upon service delivery, customer satisfaction, and derived from scientific data. Correct Rx assures that the outcomes are communicated effectively and utilized in future goal setting.

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OPPORTUNITIES FOR EXCELLENCE

Correct Rx has identified the following eight “Opportunities for Excellence” in the delivery of a comprehensive pharmacy services program: Contract Management, Operations, Advanced Technology, Clinical Programs, Accounting, Regulatory Adherence, Education, and Continuous Quality Improvement. In order to seize the opportunity, we believe in an unrelenting attention to detail, a system of ongoing assessment and feedback, industry experience, discipline expertise and a persistent commitment to provide the best patient care possible. While these eight opportunities of excellence are interdependent, Correct Rx monitors each independently for quality assurance and optimum performance.

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Eight Opportunities for Excellence

Opportunity	Description
Contract Management	Our commitment to 100% RFP and contract compliance
Operations: Dispensing and Delivery	All aspects of filling prescriptions and getting the orders to the facilities in a timely manner
Advanced Technology	The implementation of advanced technology to improve processes: electronic medical record interface, bar-code scanning, videoconferencing, fax server / document management system
Clinical Programs	Clinical Staffing, Clinical Initiatives, Infirmery Rounding, Formulary Management, Pharmacy and Therapeutics, Utilization Management
Accounting, Billing, and MBE Compliance	Includes all aspects from drug purchasing, invoice generation, credits, audit verification, budget projection, cost containment, MBE compliance and reporting
Regulatory Adherence, Licensing and Credentialing	Absolute assurance that Correct Rx complies with all NCCHC, ACA, DOJ, ACLU, State and Federal standards, laws, regulations and MOU's. Also, the maintenance of all facility licenses and certificates necessary to provide pharmacy services and compliance with designated staff credentialing folders.
Education, Training, and Staff Development	All aspects of training and development, including the training we provide for patients, staff and custody, as well as the required continuing education we receive.
Continuous Quality Improvement	Implementation of a Comprehensive Continuous Quality Improvement Program to monitor all aspects of pharmacy services – the Eight opportunities for Excellence. Participation on multidisciplinary CQI teams, meeting participation, reports and presentations.

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h. Morbidity and Mortality Review –

- *The Pharmacy Vendor providing consultation must participate in the DDOC Morbidity and Mortality Review Committee meetings consistent with DDOC Policy, NCCHC and ACA Standards.*

As per DDOC BCHS policy, Correct Rx and the members of the clinical pharmacy department will attend and provide any applicable information available in accordance with NCCHC and ACA standards. Prior to the meeting(s) our onsite clinical pharmacists complete a full chart review including the Medication Administration Record (MAR) and our pharmacist dispensing records. Our protocol for mortality and morbidity review serves to evaluate the medication history for offender in question looking for any drug related problems; drug-drug interactions, adverse drug reactions, medications without indication, untreated indications, inappropriate drug dosing or drug-disease interactions that may have contributed to the case at hand.

Correct Rx recognizes that the morbidity and mortality review process is an important part of ongoing quality improvement initiatives and identifying any need for system adjustments or staff education. Our onsite clinical pharmacist will participate in M&M committee review meetings to present any relevant pharmacy information and participate in the multidisciplinary discussion of the case.

i. Post-Critical Incident Review

- *The Vendor must participate in the DDOC post-critical incident review process as defined in DDOC policies.*

As with the morbidity and mortality reviews Correct Rx clinical pharmacist will participate in the post critical incident review process. Depending on the nature of the incident we will perform a detail chart review including the Medication Administration Record and our dispensing records to determine if there were any medication related issues that contributed to the situation at hand. Our onsite clinical staff will participate in discussions to help identify any necessary operational or educational enhancements necessary for the safety of all offenders in the care of DDOC.

j. Risk Management

- *Risk Management is an essential administrative adjunct component to a clinical CQI system. Data from CQI activities, Morbidity and Mortality Review, and Post-Incident Review must be analyzed to review issues and determine trends that would suggest opportunities for improvement. The Vendor shall work with the DDOC BCHS to develop and supply these reports. Reports should be free of individual offender identifiers and be used for the purpose of rapid problem identification and resolution following a business case scenario.*

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Risk Management

Correct Rx will facilitate the compilation of de-identified reports from all reports supplied for M&M or post critical incident reviews in a format that facilitates a systematic presentation of the applicable information, for problem analysis, identification potential solutions, evaluation of system capacity, implementation and monitoring.

m. Tool (Sharps and Equipment) Inventory and Security Clearances

- *Security/privileged information pertaining to the DDOC, institutional security, offender health care, or Vendor will only be released on a need-to-know basis after appropriate DDOC authorization or pursuant to law.*

Correct Rx understands that security/privileged information pertaining to the DDOC, institutional security, offender health care, or Correct Rx will only be released on a need-to-know basis after appropriate DDOC authorization or pursuant to law.

- *The Vendor will be responsible for ensuring that its personnel, including subcontractors, adhere to the DDOC's training, security and clearance procedures. Any Vendor personnel accessing DDOC and/or State information systems must adhere to all clearance procedures. Violations of information system clearance procedures may be subject to criminal or civil penalties. The Vendor and its personnel will be subject to and will comply with all DDOC and institution security operating policies and procedures. Violations may result in the employee being denied access to the institution. In this event, the Vendor will provide alternate personnel (subject to DDOC approval) to supply uninterrupted services.*

Correct Rx will be responsible for ensuring that its personnel, including subcontractors, adhere to the DDOC's training, security and clearance procedures. Correct Rx understands that any of our personnel accessing DDOC and/or State information systems must adhere to all clearance procedures. Correct Rx acknowledges that violations of information system clearance procedures may be subject to criminal or civil penalties. Correct Rx and our personnel will be subject to and will comply with all DDOC and institution security operating policies and procedures. Correct Rx understands that violations may result in the employee being denied access to the institution. In this event, Correct Rx will provide alternate personnel (subject to DDOC approval) to supply uninterrupted services.

Correct Rx and our personnel are committed to supporting the Mission of the DOC “Protect the public by supervising adult offenders through safe and humane services, programs and facilities.”

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We are ever mindful of the nuances and potential dangers involved in providing services for the offender population. We understand that all risks are minimized by strictly following the established institutional protocols, policies and procedures.

We are proud of our past performance with compliance and safety and will continue to be professional, courteous, and respectful in the provision of pharmacy services to the offender population.

• The Pharmacy Vendor must plan and implement a robust inventory management system involving formulary management and periodic inventory for stock medicines and offender prescriptions. This inventory system must also include a weekly inventory of controlled substances and destruction accountability.

Correct Rx has implemented (and in response to the needs of the BCCHS will continue to develop and implement) a robust inventory management system involving formulary management and periodic inventory for stock medicines and offender prescriptions. This inventory system must also include a weekly inventory of controlled substances and destruction accountability.

Active Formulary Management

Development, Enforcement, Management, and Expertise

Correct Rx's management team has over 25 years of direct experience in developing and maintaining formularies, nursing protocols for Over-the-Counter (OTC) programs and starter stock lists that are specifically designed for Correctional Systems. Correct Rx has successfully implemented formulary guidelines that have assisted our clients in containing pharmaceutical costs and has provided these services for the DDOC over the past three and a half years.

Our Medication Therapy Management department is headed by a CCHP (NCCHC certified correctional healthcare professional) certified Doctoral trained **pharmacist who possesses her Master's in Pharmacoeconomics with years of correctional experience.** This department was created to supply information to our clients that help them reduce medication cost while improving the quality of care. **This is achieved by the clinical pharmacist's assistance with formulary management** that is supported by documented research of alternate therapies, drug product selection, and other methods that result in lower cost. This department is vital for helping our clients provide the highest quality of care while being mindful of costs.

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Correct Rx offers an array of contemporary formulary management approaches. We first embraced the development of collaborative relationships with all stakeholders when addressing nonformulary utilization. Medical, mental health, dental providers and custody play a vital role when selecting formulary medications and we all understand that the DDOC Medical Director has the final authority.

Successful Formulary Management

Correct Rx has achieved great success in the implementation of clinical cost saving strategies. For example, through effective formulary management, the DDOC was well positioned to experience the full economic impact of a major **single source antipsychotic agent's generic availability**.

A pharmacist driven formulary management program allows for excellent quality of care, provider accountability, improved adherence, and greater cost savings. The following list provides a sampling of our successes and current initiatives:

- Correct Rx saved one client \$1,227,870 in FY09 by strategically placing risperidone (as opposed to Geodon) as the preferred second generation antipsychotic.
- Correct Rx estimates a savings of \$426,000 by reducing the inappropriate use and overuse of Proton Pump Inhibitors (PPIs).
- During a one-year pilot program of nonformulary review for one region of a statewide correctional system, we saved the state \$449,000 in medication cost.

Formulary and Non-Formulary Medications

Correct Rx provides prescriptions consistent with the DDOC approved formulary. **Correct Rx's pharmacy operating software system allows us to identify whether a drug is formulary or non-formulary at the time the order is processed.** The specific DDOC Formulary is uploaded into our system and is updated any time there is a formulary change. Of interest to the DDOC is that this formulary may be customized per facility or even by specific locations within a facility (e.g., infirmary, population, mental health unit) as an option to provide individualized attention within the DDOC system. Correct Rx is a small enough company that we are able to adjust the specific services offered to the DDOC without encountering the cumbersome process of passing things through the red tape of the home corporate office that is often experienced when dealing with larger companies. The DDOC is familiar with the agility, speed and customized services that Correct Rx provides specifically tailored to address the needs of the DDOC.

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We provide the DDOC with hands on attention from our CEO Dr. Ellen Yankellow, our Corporate Clinical leaders Dr. Hui Seo and Dr. Valerie Barnes and our Program Manager, John Nattans.

Correct Rx will follow all procedures outlined in this RFP regarding the dispensing of Formulary and Non-Formulary medications, as well as adhering to all policies and procedures related to the approval, denial or alternate medication recommendation regarding the DDOC approved non-formulary request process.

Inventory Accountability

Correct Rx appreciates the concerns associated with maintaining interim emergency medication (stock). Accountability is the key to minimizing potential over dispensation to the patient and possible diversion concerns. Correct Rx **dispenses all stock medication with an affixed “Stock Accountability” record. This** record is utilized to record accountability for each dose administered from the dispensed quantity. Proper documentation of the stock drug record is essential; it creates accountability. This system of accountability is developed to comply with all NCCHC and ACA guidelines. The completed Stock Accountability record should be returned to the pharmacy for reconciliation. This is in addition to and separate from the required documentation of the Medication Administration Record.

Barcoding System to Efficiently Check in Deliveries and Request Refills Online

Correct Rx has a web based electronic barcoding system that provides each facility with an easy way identify what has been ordered, track problem orders, verify medication shipment and initiate medication refills in a manner that improves both accountability and efficiency.

Scanning the Order into the Shipment Box at Correct Rx

Correct Rx’s proprietary Barcoding System is already in place and used in the DDOC facilities throughout Delaware. Correct Rx scans each dispensed medication as it is placed into the respective box for delivery to the DDOC facilities. A delivery report is run using the state-of-the art software program that compares each order scanned versus the medications that were ordered for that facility. If there are any discrepancies, they are immediately remedied to ensure that each facility will receive all medications as ordered with each shipment. Once an order is verified it is sealed for delivery and handed to the medication courier for delivery to the facility.

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Medication Check-in at the Facility-Time Savings and Accountability

Once the medication is received and signed for at the facility the order is ready to be checked-in using our user friendly web based electronic barcode system. The healthcare professional onsite simply logs in to our website (www.correctrxpharmacy.com) selects the shipment date and checks the order in using a standard barcode scanner. The check-in is fast and creates an additional layer of security to ensure that all ordered medications were received. In addition to providing heightened accountability and verification of receipt, shipment check-in time is reduced dramatically versus the manual process of checking orders against the paper packing list.

After scanning each medication in the delivery for that date, a report is run to ensure that all orders were received. Orders that were checked in properly will be highlighted with a green box, while any order that was not properly scanned in will be highlighted in a red box. If an item that was not properly scanned in is found it may be verified by simply clicking on the red highlighted box and the scanning the item. If there are any items that are missing, which is rare, the facility simply calls Correct Rx to ensure the medication is included with the next delivery.

The shipment records are archived on the website for 60 days providing managers and administrators with an extra layer of accountability. Key Managers and designated personnel from the Department and our co-vendors have access to the barcode system to review, which sites are using the system and which orders have been delivered into the facility. Medical providers and nurses concerned about whether an order has been delivered can log into the system at any time to confirm facility receipt of medication. Correct Rx conducts a monthly CQI survey to measure compliance with using the web based electronic check-in system.

Notification of Problem Orders

As a means to ensure patient safety and continuity of care, Correct Rx has a system to identify problem orders. In addition to the delivery manifest that identifies all medications that were successfully ordered and dispensed, our web based program also provides a daily discrepancy log (a hard copy of this report is also placed daily in the delivery box for each site). The discrepancy log lists all medications that were not successfully ordered and thus not dispensed and delivered.

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The purpose of the Discrepancy Log is to list every order the facility requested but that Correct Rx did not dispense on that day and more importantly why the order was not filled. For example, an order may have been filled the day before and a medication nurse accidentally requests that the order be filled again. The order will not be filled and the discrepancy log will note that the order is being requested **too soon**. It will also inform the facility of the date the order can be refilled. If a nonformulary is requested without proper authorization, this will be listed on the discrepancy log. If a refill is requested, but the order is expired, this will be listed on the discrepancy log.

While these are only a few examples, the importance of this report is that on a daily basis the facility is informed of medications that require follow-up in order to be dispensed. This provides a resource to the nurses and providers responsible for ensuring that patients receive their medications as prescribed in a timely and safe manner. This resource enhances continuity of care and provides a level of security that patients will not go without their medications.

Delivery Receipts

Our web-based program also allows the **medical staff to view what is being delivered in their package before it arrives**. There is no mystery if a particular medication is going to come. The nursing staff has access to their delivery manifests via our website that informs the medical staff of anticipated delivery items. We believe that this advancement in the use of technology provides significant time savings to our clients, and results in higher accuracy for our shipments. Correct Rx is dedicated to providing the right medication to the right patient in a timely fashion.

Monthly Medication Room Audits

Correct Rx considers the medication room audit as a valuable tool to measure quality indicators for the DDOC. The results of the medication room audit are reviewed with the designated healthcare staff at each respective facility as part of the exit report. The medication room audit is designed to meet all State and Federal regulations. In addition, adherence to this audit ensures compliance with DDOC, ACA, and NCCHC **standards. Correct Rx's role is to improve quality** initiatives that will exceed industry standards. A copy of the written report is left with the appropriate medical staff. Corrective actions are documented and followed for compliance. The following areas to be audited include but are not limited to:

- Medication Storage
- Medication Procedures
- Compliance with Regulations and Standards
- Compliance with Policies and Procedures

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- Records
- Controlled Medications
- Emergency Medication Box

The Correct Rx auditing pharmacist ensures that the pharmaceuticals stored within the facility are within the expiration date and have not been compromised through improper storage or other environmental variables such as temperature and humidity. Medications found to be out of date or compromised are removed from inventory.

Controlled Substances

In 2008, Correct Rx submitted a proposed procedure for the removal and destruction of unwanted end-user controlled substances that is consistent with FDA recommendations and compliant with DEA regulations, 21 CFR 1307.2. These procedures were approved by the Delaware Board of Pharmacy and subsequently adopted for use today. These procedures were developed to decrease risk for diversion and reduce the environmental impact on surface water contamination.

Currently, Correct Rx clinical pharmacists dispose of all unwanted end-user controlled substances at a minimum of every two weeks at all DDOC facilities. The destructions are performed onsite in the presence of one other licensed healthcare professional. The final waste is discarded as regular waste by facility staff which reduces the unnecessary financial burden of costly biohazardous waste management. This procedure was adapted from FDA guidelines for disposal of prescription medications.

The unwanted controlled substances are removed from the packaging, e.g., blister card or medication vial. Patient identification is removed from the packaging. The medications are rendered unidentifiable by crushing using a pill crusher or similar device. The resulting powder is wetted with water to form a slurry mixture. The slurry is then made unusable by mixing with an undesirable and absorbent substance like kitty litter or coffee grounds. The waste is contained within protective plastic to prevent leakage.

All destructions are documented on a destruction log that includes the following information: dispensing pharmacy, prescription number, name of medication, strength, dosage form, quantity, date of dispensing, and date of destruction. All witnesses sign and date the destruction log. Documentation of the disposal shall be done in a bound red book and maintained onsite for a minimum of five years.

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In many instances, the destruction process is triggered more often because of the **close coordination between pharmacists and healthcare services provider's nursing** staff. At BWCI where majority of pregnant females receive methadone to prevent or treat opioid withdrawal, there has been the need to frequently destroy controlled substances on a weekly basis and as needed due to the frequent changes in medication dosages.

Correct Rx has also provides destruction of personal property medications; this includes both controlled substances and non-controlled substances. These personal property medications are accompanied by a personal property form from the Medical Vendor with a description of the medication (name of medication is provided when possible) and the quantity. Each identified controlled substance is counted by the pharmacist and witnessed by licensed personnel from the Medical Vendor. Quantities are verified with the documentation on the personal property form and documented on the Correct Rx Controlled Substance Disposal Log. The unwanted medications are destroyed using the same policy as stated previously.

After each personal property medication is destroyed, the pharmacist documents the destruction on each personal property form and provides all the personal property forms with destruction documentation to the Medical Vendor in addition to a copy of the Correct Rx Pharmacy Controlled Substance Disposal Log.

Currently, destruction is scheduled every two weeks and may be completed ahead of that schedule **or “on demand,” if the facility has a specific identified need.** This timely destruction and removal of all unused controlled substances from storage areas in this manner, has greatly improved accountability and handling of controlled substance to reduce the risk of diversion and abuse at all DDOC facilities.

Correct Rx has implemented a robust inventory management system that provides accountability for both patient specific and non patient specific medications through Formulary Management, Stock Accountability, Medication Delivery & Check-In Accountability (Barcode System), monthly medication room audits and weekly destruction of controlled substances. We will work with the BCHS, DDOC, and our co-vendors to assess ongoing needs and the success of the inventory management system and to develop and improve process as needed. Correct Rx is committed to Continuous **Quality Improvement and the commitment to consistently “tweak” and improve** systems in the provision of constitutional healthcare in the DDOC.

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NOTE: All price terms are for evaluation purposes only and do not reflect any specific offer or acceptance until final negotiation of the contract.

Absolute transparency in contractor overhead

1. All Vendors providing on-site staffing must provide sufficient detail to their proposals so as to clearly identify all costs associated with contractual operations. Bids which do not contain the following items shall be deemed non-responsive;

a. Staffing costs by position type and count, by facility; aggregate subtotals by position type (count and cost) by facility, and then by statewide total by position type (count and cost), and Grand Total. Each position proposed must show the hourly rate per position.

On-Site Clinical Pharmacists:

Correct Rx will bill the DDOC for on-site clinical pharmacists at an annual rate of \$164,764 per pharmacist. The equivalent hourly rate is \$79.21 per hour. This rate includes the costs of recruiting, training and continuing education for these pharmacists. All other costs associated with administrative and clinical support are included in our administrative overhead listed below. Based on the required staffing level of 5.0 FTE pharmacists this equates to total annual cost of \$823,820.

Please see the chart below for the specific allocation of our 5.0 FTE DDOC On-site Clinical Pharmacists.

Position	Annual Rate	Per Hour Rate	Facility	FTE	Total
██████████	██████████	██████████	██████████	██████████	██████████
██████████	██████████	██████████	██████████	██████████	██████████
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██████████	██████████	██████████	██████████	██████████	██████████
DDOC Statewide Total for On-site Clinical Pharmacists				5.0	\$823,820.00

III. Pricing and Payment

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b. Other operating costs must be estimated for Durable Medical Goods and Medical Supplies.

New Information: Correct Rx is providing the projected FY 2014 annual cost for Durable Medical Goods and Medical Supplies using actual data through April 2014 annualized for the full fiscal year.

This information provides additional transparency for the DDOC as requested in this RFP. These costs are included in the PIPM Management fee and thus are not billed separately. These numbers reflect a 10.9% increase in the number of prescriptions filled in FY 2014 as compared to FY2013.

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Durable Medical Goods and Supplies:	TOTAL FY 2014
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]

c. The contract Administrative fee, while including the fixed profit percentage, must be separated out from the other costs.

New Information: Contract Administrative Fee

Correct Rx is providing the Contract Administrative Fee associated with the provision of services under this RFP as a means to provide transparency. The estimated annual costs below are not billed separately, but are included in the PIPM Management Fee. The numbers provided are the projected FY 2014 annual cost using actual data through April 2014 annualized for the full fiscal year.

Contract Administrative Fee Expenses	FY 2014 (Annualized)
ITEM Confidential & Proprietary	COST
[REDACTED]	[REDACTED]

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Contract Administrative Fee Expenses		FY 2014 (Annualized)
ITEM	Confidential & Proprietary	COST
	[REDACTED]	[REDACTED]

d. Each Vendor must provide information on the percentage profit they are proposing in their application.

Mandatory Schedule of Revenue and Expenses:

Confidential & Proprietary New Information: Mandatory Schedule of Revenue & Expenses [REDACTED] The dollars expended represent actual FY2014 (using actual data through April 2014 annualized) costs of providing our comprehensive services to the DDOC to ensure that we are in 100% compliance with all requirements of the contract.

REVENUES	
ITEM	TOTAL
Prescription Medication Cost	\$5,902,246
Emergency Bag Cost	\$96,140
Flu Vaccine Cost	\$1,154
Over The Counter Medication Cost	\$106,265
Emergency Back-up Pharmacy Cost	\$5,952
Credit Issued for Returned Medications	(\$541,514)
Billing for On-Site Pharmacists (3)	\$494,292
Management Fee (\$9.98 PIPM x 6,800 ADP for FY 2014)	814,368
Grand Total Billings To DDOC	\$6,878,903

EXPENSES – Confidential & Proprietary		
ITEM	CATEGORY	TOTAL
[REDACTED]	[REDACTED]	[REDACTED]

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covers all of these expenses and represents a fair reimbursement for the services that we provide to the DDOC and our co-vendors on this contract.

Other respondents to this RFP might offer lower management fees because they either do not fully comprehend what it costs to service this contract or they think that they can win the contract and then negotiate a more favorable reimbursement after the contract starts.

New Information: The reasonableness test is even more important now, since the RFP was re-opened. Other vendors, knowing they were not previously selected, may be tempted to offer unrealistic management fees in order to win and then either come back to the table for more money once selected or not assign the needed resources to ensure quality of care. We are confident that the DDOC will not be fooled by artificially low management fees that jeopardize service quality, healthcare outcomes and ultimately cost the taxpayers more.

We respectfully request that the selection committee review the financial data that we have submitted and determine if the proposed fees offered by other respondents pass the reasonableness test.

Other Considerations

As the selection committee reviews these figures please consider some important cost avoidance statistics that are reflected in these results:

1.) Emergency Back-Up Pharmacy Costs

New Information: Emergency Back-Up Pharmacy Costs

The total cost of back-up pharmacy for the year was \$5,952 or 0.09% of the total billing under this contract. This was made possible because our same day delivery and late cut-off times for both new & refill orders reduced the need to access back-up pharmacies while still ensuring continuity of care for the patients being served. Additionally Correct Rx has made many STAT deliveries of medications from our pharmacy for medications which are not carried in most retail pharmacies.

In fiscal year 2014 there were only 37 occasions (43 if annualized) where the back-up pharmacy had to be utilized to provide medications, including weekends and holidays. If you compare these numbers with the billings under contracts previous to Correct Rx in 2010, we are confident that they will show significant savings to the DDOC.

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2.) Over The Counter (OTC) Medication Costs

New Information: Over The Counter (OTC) Medication Costs

The total cost of OTC medications fiscal year 2014 using real data through April 2014 annualized for the full year is projected to be \$106,265. This represents 1.8% of total medication costs, while OTC orders accounted for 33.7% of total orders filled under the contract. The average cost of an OTC medication order in fiscal year 2014 is only \$1.28.

e. Any inflation factors intended to be used must be presented along with the justification for using them and methodology of their application.

New Information: The Per Inmate Per Month Management Fee will be increased by a rate of 2% on each anniversary of the contract commencement date. The justification for this is normal increases in the operating expenses of running our business including rent, utilities, insurance, telephone, operating supplies, freight, postage, administrative overhead, corporate income tax etc.

The billing rate for our Clinical On-site pharmacists will increase by a rate of 3% on each anniversary of the contract commencement date. The justification for this is normal increases in salaries, benefits including health insurance, payroll taxes, **professional liability insurance and worker's compensation insurance.**

f. Inventory control is a significant factor and how medicines that are returned are credited can impact the costs to the State. The proposal must include an explanation of how returned items will be credited.

Return & Credit Policy

Correct Rx recognizes the challenges of managing the economic and operational burden associated with storage of unused or overstocked medications. Correct Rx will assist the DDOC in realizing the economic benefit of returning medications by outlining standard procedures for the return of medication. Credit will be given for medications returned by the DDOC when following criteria have been met:

- The prescription medication did not leave the control of the registered professional nurse or licensed practical nurse responsible for the security, handling, and administration of that prescription drug and

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that the prescription drug did not come into the physical possession of the individual for whom it was prescribed.

- The labeling and packaging of the prescription drug are accurate, have not been altered, defaced, or tampered with, and include the identity, strength, expiration date, and lot number of the prescription drug.
- The prescription medication was dispensed in unit dose packaging or **original manufacturer's** packaging.
- The prescription medication is not:
 - A controlled substance
 - Expired
 - Damaged
 - Deteriorated
 - Contaminated

Clarification: Correct Rx provides credit for full and partial orders returned in with the stipulations outlined in this section.

There is no connection between unit dose packaging label requirements, return of **unwanted, unused or expired medication and a vendor's ability to provide credit** to a client. Credit is the simplest of the three issues to address. Neither the State of Delaware **nor the Federal Government legislate a private company's** business decision as to whether it chooses to offer credit on medications. There are State and Federal Laws guiding whether or not medications can be returned and re-used or re-dispensed, but there is no statute that even addresses the issue of providing credit.

Each pharmacy has at their option the ability to offer credit if it chooses to do so and under what terms and conditions it will do so, if it does. Thus, DDOC will see different **terms and conditions on nearly every vendor's policy** surrounding the issuance of credit for returned medications. The Federal Government imparts the responsibility upon the individual states to legislate the return of medication. Any other claims are an inaccurate representation of the law.

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The timely return of unused medications by the same drivers who deliver medication to the facility each day ensures that there are no wasted DDOC dollars sitting in the facilities waiting for shipping labels from the pharmacy vendor. This quick turn-around time on returns ensures that credit is issued to the DDOC in a timely manner.

All returned medications will be documented at the facility. The medications will be returned to Correct Rx by the same drivers who make the same day deliveries to each facility. The medications will then be electronically scanned at the pharmacy for documentation, accountability and for purposes of providing credit. Credit will be given on a monthly basis for all medications including half tabs that meet this criteria, comply with State and Federal regulations, have a value of at least \$2.00 and at least 90 days left prior to expiration. Credit will be issued in accordance with these regulations at Invoice Acquisition Cost, the same price that was charged for the medication when dispensed. **No charge will be assessed for re-stocking.** Note: DEA controlled medications cannot be returned to the pharmacy provider. Controlled substances shall be destroyed per State regulations and facility policies.

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g. The DDOC will consider incentives proposed by the Vendor for maintaining the quality of clinical outcomes based on measurable indicators. The Vendor must be specific on the methodology for collecting measuring the outcomes and the outcomes indicators must be based on standards acceptable to the Bureau Chief, Healthcare Services.

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[Redacted content]

Note: The State highly encourages modifications to this model if, and only if, there is a clear advantage to the State. The Vendors must propose any modifications to the proposal. For example; Vendors may submit pricing models that include discounts to the State for longer term contracts; models that include sharing rebates or volume discounts given by pharmaceutical manufacturers. Such models must have the same transparency as the pricing model above, including clear declaration of the costs and profit margins anticipated by the model.

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2. Vendor pricing shall be as follows: a. Total pricing shall include base cost (actual acquisition cost) of type of service to be provided plus management fee per offender per month. Separate proposals offering other pricing options of markup percentage (%) or service fee per offender or service may also be offered and are encouraged.

Correct Rx is proposing the following pricing formula for all medications provided to the Delaware Department of Correction:

MEDICATION BILLING:

All medications including prescription and over-the-counter medications will be invoiced at Invoice Acquisition Cost with no mark-up or dispensing fee. Correct Rx provides credit for full and partial orders returned in accordance with State and Federal Law as described in detail in *section f* above.

ACTUAL ACQUISITION COST

Invoice Acquisition Cost is the actual price invoiced to us by our supplier for the dispensed medication as of the end of each calendar month. Our computer system automatically updates our actual invoice acquisition cost each month and that cost is used to bill all medications provided during the month.

STAT DELIVERY:

STAT delivery of emergency medication orders will be completed at no additional cost to DDOC.

MANAGEMENT FEE:

Correct Rx will bill DDOC a monthly management fee of **\$9.98** per inmate per month (PIPM), which is the current DDOC rate. The billing will be based upon the **actual average daily population** provided by the DDOC for the preceding month.

ON-SITE CLINICAL PHARMACISTS:

Correct Rx will bill DDOC for on-site clinical pharmacists at an annual rate of \$164,764 per pharmacist. This rate includes the costs of recruiting, training and continuing education for these pharmacists. All other costs associated with administrative and clinical support are included in our administrative overhead listed below. Based on the required staffing level of 5.0 FTE pharmacists this equates to total annual cost of \$823,820.

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b. Alternative cost proposals may be offered in addition to the form and format required. DDOC also highly encourages proposals which allow for a price reduction in exchange for a long-term contract of various lengths.

Correct Rx is proposing the following Alternative Cost Proposal**MEDICATION BILLING: (Same as Primary Proposal)**

All medications including prescription and over-the-counter medications will be invoiced at Invoice Acquisition Cost with no mark-up or dispensing fee. Correct Rx provides credit for full and partial orders returned in accordance with State and Federal Law as described in detail in *section f* above.

ACTUAL ACQUISITION COST (Same as Primary Proposal)

Invoice Acquisition Cost is the actual price invoiced to us by our supplier for the dispensed medication as of the end of each calendar month. Our computer system automatically updates our actual invoice acquisition cost each month and that cost is used to bill all medications provided during the month.

STAT DELIVERY: (Same as Primary Proposal)

STAT delivery of emergency medication orders will be completed at no additional cost to DDOC.

DISPENSING FEE PER FILL:

Correct Rx will bill DDOC a dispensing fee of **\$3.05** per medication dispensed.

Correct Rx is proposing an alternative cost proposal based upon a dispensing fee per order. **The pharmacy provider's costs are directly related to the number of fills.** If the number goes down more work is performed and if the number goes down less work is performed. When using a PIPM model the pharmacy vendor must guard against upward fluctuation that may occur with dispensing patterns. When using the dispensing fee model the pharmacy vendor is actually paid in line with the work performed. Therefore we are able to make an even more competitive offer because this extra safeguard is in place. The Dispensing Fee simply replaces the PIPM Management Fee. All other components of our proposal are exactly the same.

ON-SITE CLINICAL PHARMACISTS: (Same as Primary Proposal)

Correct Rx will bill DDOC for on-site clinical pharmacists at an annual rate of \$164,764 per pharmacist. This includes all costs and services provided in the Primary Proposal.

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[REDACTED]

[REDACTED]

- [REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

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c. Management fee per offender per month – Management fee will include the cost of the entire program, e.g. equipment, overhead, distribution, labor, taxes. (All proposals must include this option).

Management Fee

Correct Rx will bill DDOC a monthly management fee of **\$9.98** per inmate per month (PIPM), which is the current DDOC rate. The billing will be based upon the **actual average daily population** provided by the DDOC for the preceding month.

Artificially Low Management Fees

We offer this information in order to assist the selection committee in your **review of responses o this RFP, and to ensure a “level playing field” between all respondents to this RFP.**

New Information: Artificially Low Management Fees /Hidden Profits

Some institutional pharmacies own licensed wholesalers and FDA registered re-packagers. Thus, the pharmacy, wholesalers and re-packagers are all commonly owned. All three (pharmacy, wholesalers and re-packagers) can purchase medications from a prime wholesaler (e.g., Amerisource, Cardinal, or McKesson) or Manufacturer or Secondary Generic Wholesaler. They then have the ability to resell these medications to themselves and ultimately back to their own pharmacy prior to selling to their clients e.g. DDOC.

These sales between commonly owned corporations are not arms length transactions. As a result a pharmacy can produce **“vendor” invoices from their captive wholesale companies or re-packagers either inflating or deflating their cost of goods, ultimately defeating transparency in acquisition pricing and adding in a significant layer of profit without their client’s knowledge.** Further, this allows the pharmacy vendor to propose an artificially low management fee because they are making a profit on the medications provided to DDOC with invoices that support their pricing.

Correct Rx neither owns a wholesaler nor a re-packager. All of our purchases are **“Arms-Length.”** DDOC receives the benefit of our purchasing power and the ability to audit our invoices free from manipulation.

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d. Mark-up percentage (%): Vendor, at its discretion may present sliding percentage based upon total annual net service expense and contract length.

Correct Rx has chosen not to propose a mark-up percentage option to this RFP. It has been our experience that proposals which base the pricing on a mark-up % over the actual acquisition cost of the drugs are less advantageous for the client because the management fee will increase as the cost of medications increase over time, even though the amount of service rendered may not change at the same rate or at all. This type of pricing scenario will not only lead to higher costs for DDOC, they are also difficult to forecast and budget each year.

Correct Rx's pricing model is based on the fixed monthly per inmate per month management fee because it does not have any of those disadvantages and provides not only the best value to DDOC but is also easily definable based on criteria which are relatively stable. The DDOC is further protected.

e. Vendor's price adjustments will be restricted to the base cost of the service provided. Price adjustments, if requested, will be supported by appropriate documentation. Price adjustments will not include the mark-up percentage for service fee or increase of management fee per offender unless originally specified as an annual escalator in a multi-year proposal.

Correct Rx understands that price adjustments will be restricted to the base cost of the service provided. Correct Rx acknowledges that price adjustments, if requested, will be supported by appropriate documentation. Correct Rx also understands that price adjustments will not include the mark-up percentage for service fee or increase of management fee per offender unless originally specified as an annual escalator in a multi-year proposal.

f. Alternative pricing models involving any rebates or discounts are highly encouraged and must be clearly identified as part of the pricing structure.

Chasing Rebates

Correct Rx has deliberately not included a pricing model involving rebates or discounts. Correct Rx has disclosed in our Mandatory Schedule of Revenue and Expenses the amounts of discounts and rebates that we received relating to this **contract. Correct Rx does not "chase" rebates by recommending drugs that do not** provide the most cost-effective medication to DDOC and our other clients. We always recommend the medication that provides the most cost-effective solution for our client.

The few drug rebates that are still available from manufacturers are only on expensive single source brand-name drugs. The number of drugs with rebate opportunities continues to decline each year and will most likely totally disappear

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as the Affordable Healthcare Act takes full effect. The rebates that do remain are inconsistent and cannot be counted on.

For these reasons Correct Rx is not proposing any pricing scenarios that are based on these elusive possibilities that are likely to be discontinued in the near future. We do not believe that chasing rebates provides any real advantage to our clients.

g. Vendor agrees to provide, as requested by DDOC, copies of actual invoices from any Vendor's providers or suppliers.

Correct Rx will provide, as requested by DDOC, copies of actual invoices from any of **Correct Rx's providers or suppliers.**

Arms Length Medication Pricing

Correct Rx purchases all of our medications from nationally recognized distributors and drug manufacturers. Our lead wholesaler is Amerisource Bergen Company, based in New Jersey. We also have a relationship with Innovatix, a national Group Purchase Organization (G.P.O) who negotiates the most favorable drug pricing to Correct Rx. All of the special contract prices that are negotiated through Innovatix are reflected in the Invoice Acquisition Price that we use to generate our drug pricing to DDOC.

New Information: Arms Length Medication Pricing

Correct Rx is licensed as a pharmacy to provide clinical pharmacy services and prescription medications to DDOC. No other licensure is required or permitted. Ownership of a wholesaler or a registered repackager in no manner enhances or enables a vendor to provide services to DDOC.

h. Vendor shall detail all on-going training, systems/equipment maintenance or other costs associated with this contract.

Correct Rx has included the cost for all on-going training, systems/equipment maintenance and other costs associated with this contract in our PIPM management fee. In order to provide transparency for the DDOC, Correct Rx detailed the costs associated with these services in our Mandatory Schedule of Revenue and Expenses Chart in Section 1.d of this pricing proposal.

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New Information: Interface

As clarified in question #12 of Addendum 15, “The DDOC is developing a proprietary system which is based on a standard HL7 interface transmission and will be available to the successful bidder.” **In fact Correct Rx is in the final testing stages of an interface with this system, which includes the EHR and eMAR. It is anticipated that this interface will be operational in June. Therefore, Correct Rx will already have a working interface and will not need any down time or need for an alternative order entry system (e.g., paper fax and fill) at the start of this contract.**

The costs associated for this interface are built into the PIPM Management Fee **(and our alternative pricing proposal’s dispensing fee)** and have been disclosed with full transparency in section II.1.C. above itemized as **“Non-Reimbursed Software Interface and I.T. Costs” at \$5,600 for FY14.** We are confident that the DDOC will ensure that other offerors have identified these costs in their respective proposals.

Correct Rx has been fully impressed with the talent and professionalism of the group hired by the DDOC to write the proprietary EHR and eMAR system that will be used in this contract. We are also excited about potential enhancements and future ideas to create a more advanced system (e.g., an electronic means for inventory control, bar code scanning, back-orders, credits, non-formulary processing, to name a few).

Correct Rx as demonstrated by our previous and current performance will continue to work under the direction of the DDOC to ensure these IT projects are completed in a timely manner and with full cooperation. We believe the DDOC is at the forefront of creating an electronic health record specifically for the nuances of correctional health. Correct Rx requests that as additional IT costs are identified for new services that we will negotiate reimbursement for these costs with the Department.

3. Service Fee per offender – Service fee will include the cost of the entire program, e.g. equipment, overhead, distribution, labor, taxes. Other costs may be proposed separate from the actual procurement of product and ongoing service of the contract (i.e. one-time start-up costs).

Correct Rx is choosing not to propose an alternative Service Fee proposal. Also, Correct Rx has chosen not to propose any separate one-time costs for this proposal (e.g., one time start-up costs).

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No Hidden Charges!!

Our price proposal includes all of these comprehensive services with no hidden costs:

- Same cut-off time for new and refill orders
- No charge for delivery including STAT deliveries
- No charge for fax machines
- No charge for Correct Rx Clinical Pharmacy Programs
- No charge for Web Based Bar Coding System
- No charge for Monthly Utilization Reports
- No charge for Dashboard Report
- No charge for Customized In-service Training and Educational Programs
- No charge for Web Based Drug Information Program: *Ask a Correct Rx Pharmacist.*
- No charge for New Enhanced Video Training Tools

Summary

Correct Rx has worked hard and learned a great deal during our three plus years as the pharmacy provider to DDOC. We have dedicated the necessary management and clinical resources to develop an outstanding pharmacy program that combines operational excellence with effective clinical pharmacy initiatives and programs to provide DDOC with the best possible value in pharmacy services. We have compiled the cost data and incorporated what we now know to develop this comprehensive pricing proposal for the new RFP. We know what it takes in terms of both manpower and cost to provide the best possible results to DDOC. We have transparently disclosed our financial results for this contract. Those results show a modest 3.0% profit margin.

Correct Rx has also stated that all of our medication purchases are made at an arm's length, again providing total transparency into the medication pricing that DDOC is billed on this contract. We do not hide profits by owning our own captive medication provider and artificially marking up the prices for the medication provided to DDOC.

Correct Rx is proud to have served the DDOC over the past three and half years. We look forward to building upon the successful pharmacy programs and leading edge clinical services that are now being delivered. We are confident that our partnership will continue to generate excellent results, improved outcomes for the patients that we serve and even more savings to DDOC.

This is the “Correct Way!”

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A. Minimum Requirements

1. Delaware business license: Provide evidence of a Delaware business license or evidence of an application to obtain the business license.

Correct Rx has a Delaware Business License Number 2010602117 as issued by the Delaware Division of Revenue. A copy of this license is included in Tab 7 Appendix.

Regulatory Compliance

Correct Rx is licensed as an institutional pharmacy by the Maryland Board of Pharmacy. Additionally, Correct Rx is a licensed distributor and maintains a DEA license that allows for the dispensing of controlled substances. We are also a licensed pharmacy provider in 48 states including Delaware. Listed below are licenses secured by Correct Rx relevant to the DDOC Pharmaceutical Services Contract:

License/Permit	License Number	Expiration Date
Maryland Board of Pharmacy Permit	PW0234	05/31/2016
Maryland Board of Pharmacy Wholesale Distributor Permit	D01558	12/31/2015
State of Maryland Controlled Dangerous Substances License	453433	03/31/2015
Delaware Non-Resident Pharmacy Permit	A9-0000486	09/30/2014
Delaware Business License	2010602117	12/31/2014
Delaware Certificate of Authority	7861523	
Delaware OMWBE Certification	DE10081369	
U.S. Department of Justice Drug Enforcement Administration Registration	BC8273120	08/31/2015

Further, Correct Rx ensures that all Federal and State licenses and certificates necessary to legally provide the pharmacy program or any of its sub-components in the name of the DDOC are obtained and retained under the terms of this contract.

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Supplemental: Approach to Diversity**MBE/WBE Certification**

Correct Rx is a woman-owned and operated business certified by the Delaware Office of Supplier Diversity (**OSD Certification Number:** DE14042152) and the Maryland Department of Transportation (Certification No. 03-440) In addition to being a woman-owned business, Correct Rx also employs a diverse work force; over 70% of our employees are classified as minorities.

Approach for Inclusion & Diversity

Correct Rx, as a certified MBE/WBE, understands the challenges and importance of providing opportunities to small businesses throughout the nation. As a result of this we always strive, wherever feasible, to include other small businesses and MBEs as our sub-contractors on contracts when required. 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.

We use a small Maryland MBE delivery company to provide delivery services to DDOC. We also use a Maryland MBE company for our office cleaning, stationery supplies and staffing requirements. Each of these businesses is a small business, and a certified MBE, as per the guidelines of the Maryland Department of Transportation.

Executive Order 44

On March 26, 2014 Delaware Governor Markell signed Executive Order 44 that **expanded the scope of the Governor's Supplier Diversity Council and the** commitment to expand small business opportunities with State procurement. As Michelle Morin, Executive Director of the Office of Supplier Diversity in the Office of Management and Budget stated it is their mission to assist the entire supplier diversity community in competing for the provision of public works, goods and services to state government.

Correct Rx is proud to be a women owned and operated company, but even more proud of the opportunities we have created for our diverse team of employees and other MBE businesses. We hope that DDOC shares our sense of pride through the opportunities that you have created by contracting with Correct Rx. The DDOC has not only met the guidelines of Executive Order 44 by contracting with an **OSD certified company, but the spirit of Governor Markell's Order through inclusion of a** diverse supplier community.

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2. Professional liability insurance: Provide evidence of professional liability insurance in the amount of \$5,000,000.00.

Professional Liability Insurance

Correct Rx has professional liability insurance, as well as general liability and umbrella liability insurance all issued by Cincinnati Insurance Company under policy #EPP0112805. The combination of our professional liability insurance is the amount of \$1,000,000 per incident / \$2,000,000 in aggregate along with our \$5,000,000 umbrella liability insurance gives us a total coverage of \$6,000,000 per incident and \$7,000,000 in aggregate. A copy of our Certificate of Insurance is included in Tab 7 Appendix.

Claims History

Since our inception Correct Rx has not settled any lawsuits nor have we turned over to our insurance company any lawsuits for settlement. Our period of coverage is from November 15, 2012 through November 14, 2013 with annual renewals. Our policy has no exclusions. This clean record demonstrates our commitment to a safe workplace, and to providing all of our clients with the highest level of service done the right way.

“Safety is no accident at Correct Rx”.

Our agent and broker for all property and casualty, general liability, professional liability, automobile, employee practices, fiduciary, and worker’s compensation insurance is Keller Stonebraker Insurance of Ellicott City, MD. Mr. Michael Kohlenstein, the President of Keller Stonebraker, has also been our agent for the last five years and personally handles all of our insurance matters. Please feel free to contact him for further information regarding our insurance coverage.

Insurance Agency: Keller Stonebraker Insurance, Inc.

President: Michael Kohlenstein, CPCU MSB

Phone: (410) 461-0700 Fax: (410) 465-8766

3. Vendors must demonstrate that they have had at least 3 years’ experience in multi-vendor state-wide correctional health care or 3 years’ experience in pharmaceutical service in Delaware.

Multi-Vendor Model Adeptness

Correct Rx understands and knows firsthand that the multi-vendor model in the delivery of correctional healthcare requires collaboration between various vendors, sub-contractors, custody and the Department overseeing the contract.

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We have demonstrated over the past ten years that we are dedicated to doing our part to ensure that the total health care needs of the individual are addressed in a timely, safe and holistic manner. Correct Rx is proud of the collegial relationships we have fostered and maintained with our multiple healthcare partners where we provide services.

Correct Rx has worked diligently to establish effective relationships with custody and facility administration personnel and our co-vendors to ensure the delivery of the best overall healthcare service. We are proud of our reputation for hard work, collaborative practice and a commitment to the success of all vendors. We understand the roles of our partners and more importantly have forged relationships with the specific people who fulfill these key roles. We firmly believe in working together with our co-vendors and the Department in a transparent manner and our actions demonstrate this truth.

Full Transparency

Correct Rx is dedicated to full transparency. We are constantly assessing our own performance, seeking the feedback of others and energizing our process of continuous quality improvement. This also applies to our co-vendors; Correct Rx provides open and honest feedback designed to improve the delivery of comprehensive healthcare services. Correct Rx has demonstrated our commitment to providing effective oral and written communication regarding the services we are providing. We have effectively communicated our successes and areas that have created challenges and pledge to continue in these efforts.

Communication & Collaboration

Correct Rx has a proven track record for working as a team player in the multi-vendor model. This level of open communication and transparency provides our clients with a unique view of all healthcare services being delivered under the terms of the separate contracts. This is a much different system than having one primary vendor who gets to dictate what information will be shared with the State. In the multi-vendor model, the DDOC is well informed by each vendor and has an accurate assessment of how well each is performing. Further each vendor is keenly aware of this fact, which leads to a focus on meeting the terms of the contract; in essence there is no hiding.

Participation and collaboration is the only manner in which to succeed in the multi-vendor model. If one vendor is not performing or working cooperatively, it is easily identifiable, which facilitates corrective action. While each vendor has a specific service **to deliver, all of the services are interdependent. Correct Rx's pharmacy services are** integral to multiple departments and each of our co-vendors. The comprehensive pharmacy service program required by this RFP is much more than simply dispensing medications, it includes program management, clinical programs, regulatory compliance, infectious disease control, emergency preparedness, information technology, and utilization management.

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Specific Experience

Correct Rx has been the pharmacy services provider to the Delaware Department of Correction since July 1, 2009. This has been a multi-vendor model in which Correct Rx has not only collaborated, but has worked as an integral part of the health care team serving the offenders in all DDOC facilities. We have also managed the activities and responsibilities of multiple on-site clinical pharmacists during this contract.

Additionally, Correct Rx has been the pharmacy provider for the Maryland DPSCS since July 1, 2005. This contract is also a multi-vendor model with multiple co-vendors handling medical, dental, mental health and utilization management. We have also experienced transition of the other vendors in this multi-vendor model during the term of this contract with no disruption in the quality of care provided during the transition. We have also managed the activities and responsibilities of multiple on-site clinical pharmacists for the entire term of this contract.

Correct Rx is the only institutional pharmacy in the United States that has been involved in two statewide correctional systems that were multi-vendor models and have on-site clinical pharmacists included in those contracts. This experience cannot be duplicated by other pharmacies which might say they can manage such activities but have not actually done it.

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B. General Evaluation Requirements

1. Corporate Experience: Company's overall related work experience which meets qualifications of the RFP, experience in providing correctional health care programs for offender populations up and exceeding 7,000 and current experience in providing them in facilities that are ACA, NCCHC, or JCAHO accredited or providing health care in Delaware experience in utilization management and in producing cost savings while maintaining appropriate offender outcomes. Experience should be demonstrated by providing information separately for infirmary and hospital care. If the Vendor has clinical experience in Delaware, the Vendor must provide the above based information on that clinical experience.

Corporate History and Background

Correct Rx Pharmacy Services, Inc. (Correct Rx) was established as a Maryland corporation in 2003. We are very strong in all areas of business and services. Ellen Yankellow, our President, has over 30 **years' experience** in all phases of our business but has concentrated on correctional pharmacy services. Jill Molofsky, RPh is our Vice President of Operations and has performed similar duties for over 30 years. Jim Tristani, RPh is head of Purchasing and has 35 years of business experience. Although we are ten years young, our stellar growth year over year, qualifications, cutting edge clinical programs and vast client list speaks for themselves.

Correct Rx has become a strong force in the Correctional Pharmacy Industry. Our ability to take on large pieces of business in an organized manner with no disruption to our clients and the patients they serve has been clearly documented. We have transitioned over 390 facilities in the past ten years. This includes statewide systems for the Delaware Department of Correction (7,300 offenders), the Maryland Department of Public Safety and Correctional Services, the Maryland Department of Juvenile Services, as well as large municipalities like the Philadelphia Prison System (9,000 inmates) and as a primary subcontractor for Correctional Healthcare Companies (46,000) and The GEO Group, Inc. (27,000).

“Over the past seven years, Correct Rx has taken the lead in several COI initiatives, updating clinical guidelines, and preparation for NCCHC. In fact, Correct Rx wrote the majority of the abstracts to NCCHC which were accepted for presentations.”

Dr. Sharon Baucom
Chief Medical Director
Maryland Department of Public
Safety & Correctional Services

We believe it is our years of correctional experience coupled with our attention to detail that have allowed Correct Rx to successfully transition correctional systems large and small. Our clients have been the beneficiary of this organized, experienced approach.

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There is no “generic” for experience. Correct Rx has the real thing. Company founders Ellen H. Yankellow, PharmD and Jill Molofsky, RPh brings years of unrivaled experience, honesty and professionalism to the correctional market. Dedication and training have led us to develop strategies that reduce costs without compromising patient care. Correct Rx has the resources, experience, integrity and commitment to exceed your service expectations. Correct Rx enjoys an excellent reputation for customized service and clinical programs that actually make a difference. Correct Rx even kept several facilities that changed their general medical management configuration but insisted on continuing with Correct Rx for pharmaceuticals because of their high level of satisfaction with our services.

Correct Rx currently provides institutional pharmacy services to over 170,000 lives in over 390 correctional facilities, dozens of juvenile facilities, many residential treatment programs and multiple assisted living and nursing home facilities from its pharmacy in Linthicum, MD.

Regulatory Adherence: Accreditation Services

One of the value added services that Correct Rx offers our clients is assistance with accreditation or re-accreditation processes. Correct Rx Programs are all designed to meet or exceed NCCHC and ACA accreditation standards. Correct Rx has become known as correctional pharmacy accreditation specialists. Correct Rx will partner with our co-vendors and the DDOC to ensure that all DDOC facilities exceed the pharmacy standards, so that achieving and maintaining accreditation is never in question.

Compliance with NCCHC and ACA Standards

Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC) and the American Correctional Association (ACA). Correct Rx ensures that all pharmacy program services are compliant with NCCHC and ACA standards. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them.

Education and training of the staff is a key component of a quality program. All training provided by our expert in-house and guest trainers that help staff use their resources to the fullest potential are provided in compliance and consistent with NCCHC and ACA standards and the local State Board of Pharmacy. Correct Rx believes the outcome of education is a better product and service. If it is Accurate, then it is Correct.

ACA

Beyond the fact that Correct Rx has never failed an ACA audit and that we have assisted many facilities in their preparation to become accredited or maintain accreditation, Correct Rx is actively involved with ACA.

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NCCHC

Beyond the fact that Correct Rx has never failed an NCCHC audit and that we have assisted many facilities in their preparation to become accredited or maintain accreditation, Correct Rx is actively involved with NCCHC.

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Supplemental: Regulatory Affairs

Correct Rx will not put the DDOC or our company in harm's way. There is increased scrutiny to ensure regulatory compliance, particularly with the unique responsibilities that govern health care, handling of controlled substances, and **caring for the safety and welfare of the public.** Correct Rx's commitment to promoting strong business ethics and accountability is manifest through its development of a Corporate Compliance and Regulatory Affairs Division that monitors the laws, rules and regulations which govern institutional pharmacies and the clients we serve.

Legal and regulatory expertise is critical for operational and clinical programs to comply with the intricate landscape of Federal, State and local legislation. Observing State and Federal law should be the most basic condition required to provide service to the DDOC. Correct Rx finds it distasteful at best that some decide to misrepresent the law to potential clients in an attempt to win business. A **vendor's effort** to either intentionally mislead the DDOC or failure to comprehend the laws that govern pharmacy licensure cannot be left without correction as at the very least they have the potential to confound the evaluation process.

Correct Rx performs all work in compliance with all Federal, State, and contract specifications. Correct Rx customizes its facility policy and procedures to comply with law and institutional policies and directives as well as all regulatory and credentialing institutions (e.g., BOP, JC, NCCHC, ACA, DEA).

Correct Rx is licensed as an institutional pharmacy by the Maryland Board of Pharmacy and maintains a DEA license that allows for the dispensing of controlled substances. We are a licensed pharmacy provider in 48 States, including Delaware. There have not been any actions taken or any actions pending against our license in Maryland, Delaware or any other jurisdictions where Correct Rx is licensed.

Correct Rx is proud of the fact that we not had any liquidated damages or fines assessed by any client since our inception. Even further, we have not negotiated relief of any liquidated damages and or fines. Correct Rx ensures that all Federal and State licenses and certificates necessary to legally provide the pharmacy

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Supplemental: Regulatory Affairs (continued)

program or any of its sub-components in the name of DDOC are obtained and retained. Correct Rx prides ourselves on doing what the contract requires thus eliminating the potential for fines or assessments. Correct Rx has never settled a lawsuit since our inception nor is any pending. Correct Rx has never referred any client or patient to our insurance company.

Correct Rx works to keep our clients abreast of the community standards and National and State regulations. Some vendors attempt to muddy the waters surrounding licensure and create confusion in the correctional community surrounding which licenses are required by both the facility and the pharmacy to provide services and patient-specific and non-patient specific medications. Misleading statements either demonstrate a failure by the vendor to understand the applicable law or are an effort to intentionally misinform the DDOC. Vendors should realize that the DDOC is not well served by false statements and willful deception could result in technical disqualification.

Correct Rx is providing below the Delaware State Board of Pharmacy and Federal Statutory authority that clearly delineates the necessary licensure required to perform services under this contract. **As with every service that we provide we are fully transparent as we believe that is the “Correct Way.”**

Specifically, the following statement is false and misleading:

... a pharmacy cannot legally dispense more than five percent (5%) of its sales as stock. Therefore, a bidder must be a Delaware-licensed wholesaler to distribute wholesale quantities of stock medications that **are greater than a ‘minimal amount’ into your state** to be in legal compliance with federal regulations.

This position is premised on the *assumption* that Correct Rx is “dispensing” more than five percent of its sales as stock and that a pharmacy that does “dispense” more than 5% of its sales as stock is required to be a licensed wholesaler. Neither statement is factual or an accurate reflection of Federal, Delaware or Maryland Law.

There is no set limit on dispensing non-patient specific medications by a pharmacy. The act of dispensing is providing medications pursuant to a valid prescription order.

Wholesalers do not dispense. Repackagers do not dispense. Only pharmacies dispense.

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Supplemental: Regulatory Affairs (continued)

Wholesalers and repackagers distribute medications. Distribution is the sale of medication in the absence of a prescription order. These entities are licensed to sell medications to other licensed entities in the absence of prescription orders. The use of the terms “dispensing” and “distributing” are not interchangeable. To do so either reflects a basic lack of understanding of pharmacy law or an intentional effort to confuse and deceive.

As a pharmacy, Correct Rx engages in the act of dispensing medications pursuant to valid prescription orders. We do not distribute medications. Further, Correct Rx primarily dispenses patient specific medications. Interestingly, Correct Rx dispenses well over 95% of its orders both nationally and in the State of Delaware as patient specific orders, so even if the misguided interpretation were applied, we are under the 5% threshold. But, this fact has no legal impact, since there is no statutory restriction to the amount of non-patient specific medication that may be dispensed. By interpreting the questions submitted to this RFP (e.g., questions 14-16 in Addendum 15), it appears that there is an intention to mislead the DDOC through falsehoods.

Outlined below are the statutes that apply in Delaware to Correct Rx’s service. Correct Rx is involved solely in dispensing, not distributing. From a legal view Correct Rx maintains substantial control over the direction of the correctional facilities medications and policies. As defined under both Federal and Delaware State law, Correct Rx and DDOC are not engaged in wholesale distribution and the most basic review of both Federal and State law would reveal this fact. Correct Rx does not provide medications to the DDOC without a valid prescription. Correct Rx does not distribute medications into any jurisdiction, including Delaware.

I. The Prescription Drug Marketing Act (“PDMA”)

A. Brief Overview

Congress passed the Prescription Drug Marketing Act of 1987 (“PDMA”), Pub. L. No. 100-293, 102 Stat. 95 (1988), because of a growing concern that consumers were being sold substandard, counterfeit or ineffective drugs. The PDMA was to shore up the drug distribution system against such drugs. The PDMA, as amended by the Prescription Drug Amendments of 1992, sets forth various requirements for the distribution of prescription drugs. The final regulations were published in 1999. **See** 21 C.F.R. Part 203. The PDMA established conditions, such as state licensing and pedigree requirements, for the drug wholesale industry in order to maintain the integrity of the prescription drug supply.

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The PDMA defines a “wholesale distributor” as “any person engaged in wholesale distribution of prescription drugs, including, but not limited to...retail pharmacies that conduct wholesale distributions.” 21 C.F.R. § 203.3(dd). The term “wholesale distribution” is defined as distribution of prescription drugs to persons other than a consumer or patient. 21 C.F.R. § 203.3(cc).

There are two important exemptions to the “wholesale distribution” definition under federal law in addition to the lawful dispensing pursuant to a prescription.¹ First, the definition does not include the “sale, purchase, or trade of a drug or an offer to sell, purchase, or trade a drug for emergency medical reasons.” 21 C.F.R. § 203.3(cc)(5). (emphasis added). Under the PDMA, the term “emergency medical reasons” is broadly defined as follows:

Emergency medical reasons include, but are not limited to, transfers of a prescription drug between health care entities or from a health care entity to a retail pharmacy to alleviate a temporary shortage of a prescription drug arising from delays in or interruption of regular distribution schedules; sales to nearby emergency medical services, i.e., ambulance companies and fire fighting organizations in the same State or same marketing or service area, or nearby licensed practitioners, of drugs for use in the treatment of acutely ill or injured persons; provision of minimal emergency supplies of drugs to nearby nursing homes for use in emergencies or during hours of the day when necessary drugs cannot be obtained; and transfers of prescription drugs by a retail pharmacy to another retail pharmacy to alleviate a temporary shortage; but do not include regular and systematic sales to licensed practitioners of prescription drugs that will be used for routine office procedures.²

21 C.F.R. § 203.3(m)

¹ All medications dispensed to DDOC are pursuant to a lawfully executed prescription order. Correct Rx does not dispense any medications to any client without an order from a licensed prescriber. Thus, in addition to statutory exemption under Federal law, pharmacies are not governed by wholesale distribution regulation when dispensing medications pursuant to a valid prescription. Wholesale distribution can only occur in the absence of prescription.

² The term “health care entity” expressly excludes from its definition “retail pharmacies.” 21 C.F.R. § 203.3(q).

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Second, the definition does not include the “sale of minimal quantities of drugs by retail pharmacies to licensed practitioners for office use.” 21 C.F.R. § 203.3(cc)(10). (emphasis added). This exemption is otherwise known as the “five percent” rule.

In the preamble to the proposed rule (59 FR 11842 at 11858), and reiterated in the final rule, the FDA outlined that there exists a legitimate need for retail pharmacies to supply prescription drugs to licensed practitioners for office use without the requirement of a State wholesale distributor’s license. *Id.* In this context, sales are considered “minimal” if the “total dollar volume of prescription drugs sold to licensed practitioners does not exceed 5 percent of the dollar volume of that retail pharmacy’s annual prescription drug sales.” *Id.* The FDA decided not to specifically codify the five percent rule because it was “adequately explained in the preamble to the proposal.” *Id.*

The FDA went on to explain that the “exemption was not created to confer a special benefit on retail pharmacies, but to meet the legitimate needs of licensed practitioners who, for example, “may not purchase enough prescription drugs to go through a wholesale distributor and thus may not otherwise be able to easily obtain drugs for office use.” *Id.*

Both Delaware and the Federal Government address and define who a Licensed Wholesaler *is* and *with whom* they may conduct business; neither is applicable to providing service to DDOC.

Controlling Federal Law 21 CFR § 205.3 defines Wholesale distribution and wholesale distribution as distribution of prescription drugs to persons other than a consumer or patient, but does not include the sale, purchase, or trade of a drug, an offer to sell, purchase, or trade a drug, or the dispensing of a drug pursuant to a prescription.

FDA Registered Repackager

Delaware law does not address FDA Registered Repackagers in any form as this entity is solely under the control and authority of the Federal Government. As 21 CFR § 210; 211 clearly delineates, these statutes do not apply to pharmacies. Further, repackagers are repackaging medications for resale by other distributors. Additionally, repackagers sell medications in the absence of a prescription order. They are distributing medications. Repackagers are not licensed to dispense. Pharmacies are not required to utilize repackagers to dispense medications. The requirements surrounding the use of repackagers are tied to distribution of

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Supplemental: Regulatory Affairs (continued)

medications in the absence of a prescription. This has no relationship to the act of dispensing by a pharmacy.

The DDOC is not engaged in the sale of medications. There is no intersection, correlation or requirement related to repackagers and patient specific or non-patient specific medication. This is simply a misstatement of controlling Federal Law. Further, a repackager is prohibited from selling medications to the DDOC as the DDOC is not a distributor or reseller of medications. To that end no vendor could offer to have a repackager supply medications to the DDOC, thus making the point moot. Any vendor stating that a repakager is necessary to fulfill the requirements in this RFP are confusing the issue and inaccurately interpreting the law.

By interchanging the terms “dispensing” for “distributing” any vendor is either woefully unclear of controlling law or intentionally attempting to confuse and mislead the DDOC. All medications are dispensed and administered to DDOC pursuant to a valid prescription.

II. Wholesale Distributing at the State Level

A. State Licensing of Wholesalers

States have broad authority over who may distribute drugs within their borders, including wholesalers, retailers and physicians. Every wholesale distributor in a state who engages in wholesale distributions of prescription drugs must be licensed by the state. 21 U.S.C. § 353(e)(2)(A); 21 C.F.R. § 205.4. The PDMA sets forth guidelines for state licensing of wholesale prescription drug distributors. 21 C.F.R. § 205. The same two exemptions discussed above (emergency medical reason and “minimal sales”) still apply. 21 C.F.R. § 205.3 (f)(5) and (10).

B. The Exemptions at the State Level

1. The National Associations of Boards of Pharmacy

The National Association of Boards of Pharmacy (“NABP”)³ adopted Resolution No. 09-2-13 outlining its position on the five percent rule. While, the NABP has expressed concern over the “exploitation” of the five percent rule, the Resolution urged boards of pharmacies “to revise their ‘five percent’ rules to allow the transfer,

⁴ NABP deems itself to be an independent, international, and impartial Association that assists member boards and jurisdictions in developing, implementing, and enforcing uniform standards for the purpose of protecting the public health.

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Supplemental: Regulatory Affairs (continued)

distribution, or sale of prescription drugs between pharmacies, or from pharmacies to practitioners, only for the purpose of dispensing or administration, but not for resale; and to prohibit the transfer, distribution, or sale of prescription drugs from **pharmacies to wholesalers for resale.**⁴ The Resolution also urged the boards, **“when revising their ‘five percent’ rules, to allow pharmacies to transfer, distribute, or sell medications for emergency medical reasons, including public health emergency declarations by federal or state officials, and individual patient needs.”**⁵

NABP’s Model Act also provides a suggested framework for states to follow.

2. Delaware Regulations
 - a. Emergency medical distribution exemption

Like the PDMA, Delaware defines a “wholesale distribution” as “the distribution of drugs to a person other than a consumer or patient.” Del. C. Title 24 § 2502(29).

The definition does not include:

- a. The distribution of drugs within a healthcare group-purchasing organization;
- b. the transfer of prescription drugs by a pharmacy to another pharmacy to alleviate a temporary shortage;
- c. the dispensing of a drug pursuant to a prescription; or
- d. the sale, purchase, or trade of a drug or an offer to sell, purchase, or trade a drug by a charitable organization to a non-profit affiliate of the charitable organization (§ 2502(29)(d)(1)), among hospitals or other healthcare entities which are under common control (§ 2502(29)(d)(2)), and for emergency medical reasons (§ 2502(29)(d)(3)).

Del. C. Title 24 § 2502(29).

⁴ The Resolution can be found at: <http://www.nabp.net/news/prescription-medication-distribution-the-five-percent-rule-for-resale-resolution-109-2-13>.

⁵ *Id.*

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Delaware does not specifically include the “sale of minimal quantities of drugs by retail pharmacies to licensed practitioners for office use” exemption, as seen under the PDMA. Del. C. Title 24 § 2502(29). Rather, the only mention of a “five percent rule” is under the “emergency medical distributions” exemption, which states:

Emergency medical distributions... may include, but is not limited to: transfers of a drug between a wholesale distributor and pharmacy to alleviate a temporary shortage of the drug arising from delays in or interruption of distribution schedules arranged in the ordinary course of business; or transfers of drugs by a licensed pharmacy or limited services permit holder to another licensed pharmacy or limited services permit holder. In all cases, transfers conducted pursuant to emergency medical reasons may be reviewed by the Board. Such transfers shall not exceed 5.0% of the total drug sales revenue of either the transferor or transferee pharmacy during any 12 consecutive month period.

24 Del. Admin. Code 2500-8.1.1.2.

Please note the specific use of the term distribution as opposed to dispensing. This Code is describing the provision of medications without a prescription.

Delaware’s Department of Correction also requires emergency medications to be stocked. See Policy Number D-01. Under Section (VI)(B)(2), “an adequate and proper supply of antidotes and other emergency medication shall be available in areas where medications are dispensed and administered...” The policy also provides that detentioners who are expected to be released within a short amount of time (e.g., within two weeks) “will have their medications dispensed from the Pharmacy Stock Supply.”⁶ Id. at Section VI(D)(3)(a). Policy No. D-02 provides that the facility “must ensure that medications prescribed for chronic conditions are

¹ Maryland has adopted a regulation regarding the dispensing of stock medications. It states:

A. A pharmacist may provide medication for use as stock medication for a licensed health care facility in accordance with applicable laws, if the pharmacy providing the medication also serves as the primary provider of patient specific medication for the facility.

B. A pharmacist may provide medication for use as stock medication for final dispensing or administration by an authorized prescriber who is permitted by law to administer or dispense medication if the pharmacist receives a written stock medication order from the authorized prescriber for each delivery of medication to the authorized prescriber.

COMAR 10.34.04.08.

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are never unintentionally disrupted or discontinued.” Policy D-02 at Section D-02.1(5).

Further, Correct Rx’s delivery of non-patient specific medications to a correctional facility is deemed to be dispensing as opposed to distributing. The PDMA, and most states including Delaware, excludes from the definition of “wholesale distribution” the dispensing of a drug pursuant to a prescription. *See, e.g.*, Del. C. Title 24 § 2502(29)(c).

Delaware does not require a patient’s name on a prescription. *See, e.g.*, Del. C. Title 24 § 1764A. Delaware defines a “prescription” or “prescription drug order” as the “lawful written or verbal order of a practitioner for a drug, but does not include an order for medication which is dispensed for immediate administration to the ultimate user, (*e.g.*, an order to dispense a drug to a bed patient for immediate administration in a hospital is not a prescription.” 24 Del. Admin. Code 2500-1.1. The term “dispensing” means “to furnish or deliver a drug to an ultimate user by or pursuant to the lawful order of a practitioner, including the preparation, packaging, labeling, or compounding necessary to prepare the drug for that delivery.” *Id.* (emphasis added). The term “delivery” means the transfer of a dispensed prescription to the ultimate user (patient) or his/her agent.” *Id.* (emphasis added).

Moreover, as stated above, Delaware defines “dispensing” to mean “to furnish or deliver a drug to an ultimate user...” The use of the term “an” is important because, when construing a statute, as it is an indefinite article. It means that you do not need to know the specific patient. The delivery of only patient specific medications in a correctional facility is unworkable. Inmates have lost their freedom and are akin to a ward of the state upon their detention. The State is responsible for taking care of an inmate’s health care needs that include the need to have non-patient specific medication on hand (which is based on a physician’s order) for specific patient care needs that may arise.

- b. Correct Rx Is Not Distributing because it has the Power to Direct the Control of Non-Patient Specific Medications at the Correctional Facility.

Excluded from the definition of “wholesale distributor” is the sale, purchase, or trade of a drug or an offer to sell, purchase, or trade a drug: among hospitals or other healthcare entities which are under common control. Del. C. Title 24 § 2502(29)(d)(2). “Common control” is defined in the regulations to mean “the power to direct or cause the direction of the management and policies of a person or an organization, whether by ownership of stock, voting rights, by contract, or otherwise.” 24 Del. Admin. Code 2500-8.1.1.1. (emphasis added).

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Supplemental: Regulatory Affairs (continued)

Correct Rx has the power to direct control over the non-patient specific medications at each Delaware correctional facility. Correct Rx has engaged in business with Delaware, pursuant to a written contract, to provide pharmacy services to **Delaware's correctional facilities**.

Moreover, Correct Rx exerts substantial control over the medications and policies that are in place at the correctional facility. Correct Rx has developed policies and procedures that have been approved by the correctional facility to include administrative matters, medication delivery, inventory control, packaging of medications, prescription processing, refills, medication dispensing and administration, formulary adherence, emergency medications, quality assurance and so forth.

The PDMA also recognizes the common control exception. The PDMA *perhaps complicates the analysis because it expressly excludes "retail pharmacies" from the definition of "health care entity."* 21 C.F.R. § 203.3(q). **By contrast, Delaware's pharmacy regulations do not define the term "health care entity."** It is noted, however, that Correct Rx is *not* a retail pharmacy.

Unit Dose Packaging Requirements and Returns and Credits

Questions surrounding Unit Dose Packaging, Return of Medications and Credits have to be addressed separately as they are not related. There is no connection between unit dose packaging label requirements, return of unwanted, unused or **expired medication and a vendor's ability to provide credit** to a client.

Credit is the simplest of the three issues to address. Neither the State of Delaware **nor the Federal Government legislate a private company's business decision as to** whether it chooses to offer credit on medications. There are State and Federal Laws guiding whether or not medications can be returned and re-used or re-dispensed, but there is no statute that even addresses the issue of providing credit.

Each pharmacy has at their option the ability to offer credit if it chooses to do so and under what terms and conditions it will do so, if it does. Thus, DDOC will see **different terms and conditions on nearly every vendor's policy surrounding the** issuance of credit for returned medications. The Federal Government imparts the responsibility upon the individual states to legislate the return of medication. Any other claims are an inaccurate representation of the law.

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The label requirements for blister packs are no different than for medication bottles or tubes. Any other statement is inaccurate. Under Federal and Delaware Labeling requirements there is no “each bubble” requirement. Again here, there seems to be confusion whether intentional or not surrounding terminology, unit dose versus unit of use. Information that must be present on every prescription includes drug name, strength, form, manufacturer, lot number and expiration date. These categories are used for identification of medication, particularly in instances of product recall. Obviously, all information must be accurate.

Further, it must be accurate for each and every individual pill, tablet, capsule, etc. Correct Rx does not mix medication lots in individual prescriptions. This information is uniform for every pill in each blister card. There is no need nor any legal requirement to label each bubble. Statements made otherwise are fictional.

Conclusion: Clear Understanding of Pharmacy Laws

It is incumbent upon your pharmacy vendor to have a clear understanding of pharmacy laws and regulations and its application to your facilities to avoid **regulatory violations that could seriously jeopardize DDOC**. DDOC’s pharmacy service provider must be a licensed pharmacy. No other licensure is required or permitted under State and Federal Law.

- The ability of your vendor to fully meet the needs of your facilities by providing patient specific medication and non-patient specific medication are fully covered under their pharmacy license.
- The ability of your vendor to issue credit for returned medications is not constricted by their pharmacy license.
- **A vendor’s possession of a wholesaler’s or repackager’s license in no way enhances their ability to provide service to DDOC.** In fact, wholesalers and repackagers may not sell medications directly to the DDOC.

Described above is a concise recitation of the most basic controlling regulations surrounding pharmacy practice as it relates to providing service to DDOC. Any conflicting statement is contrary to State and Federal law.

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Supplemental: Regulatory Affairs (continued)

Correct Rx has complete understanding of both applicable Federal and Delaware controlling law. It is incumbent upon your selected vendor that they have this understanding or they otherwise jeopardize the DDOC and the health and safety of the patients under your care. If Correct Rx is selected as your vendor we intend to fully comply with the law as outlined in the preceding paragraphs. We take exception to requirements that are illegal and not in comport with the laws of the State of Delaware and the Federal Government. It should be worrisome to the DDOC that a potential vendor has such confusion surrounding what laws govern the practice of pharmacy and the provision of service under this contract or alternatively that they are making

Clinical Expertise

Correct Rx has a breadth and depth of experience in providing clinical pharmacists as **part of the healthcare team that can't be matched by any of our competitors.** We have the infrastructure, intellectual know-how and the experience to provide patient directed pharmaceutical care programs unique to the correctional environment. Correct Rx is excited to continue our partnership with the Department to provide robust clinical pharmacy services. We have proof that these programs improve patient outcomes and reduce unnecessary costs. Our services not only focus on the drug spend, but also on offsite care costs by reducing avoidable hospitalizations through better disease state management.

Correct Rx has gained insightful experience working in DDOC facilities over the past three years. Each DDOC facility is unique with respect to their operations; however, each facility must adhere to the high standards of practice that BCHS seeks to maintain. Correct Rx endeavors to expand our clinical pharmacist consulting services in DDOC to increase our impact on the healthcare on a larger offender population. In collaboration with the Medical Director, BCHS, and co-vendor healthcare staff, Correct Rx will refine and improve our clinical offerings which include direct patient care, disease state management, infirmary rounding, medication reviews and patient education.

Cutting Edge Clinical Programs

Correct Rx's clinical programs have set the benchmark that others can only hope to copy. Our company was founded on the principal that by providing cutting edge clinical services and initiatives we would be able to improve our client's success in providing healthcare to the offenders under their custody.

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Innovation for the purpose of improving our client's results is the reason behind our investment in innovative clinical programs. Correct Rx maintains the opinion that improved outcomes means healthier patients, fewer complications and reduced overall costs to DDOC.

Correct Rx works collaboratively with the BCHS, DDOC and our co-vendors to collect, **analyze and communicate the impact of the DDOC's clinical pharmacy programs that** are focused on disease state and medication therapy management.

Clinical Pharmacists as Active Participants in the Correct Rx/DDOC Model

The impact of our comprehensive clinical programs is profound. In our model the clinical pharmacists are active participants on the healthcare team. The pharmacy is not simply dispensing and delivering medications, but is intimately involved in collaborating with the medical and mental health providers (e.g. infirmary rounding). That is why Correct Rx our clinical pharmacists dedicated to the DDOC contract is so valuable.

(Please see Scope of Work B. General Requirements – Response 1).

Operational Expertise

Correct Rx is identified with operational excellence including a reputation for accurate **and timely dispensing of medication orders. Correct Rx's status as one of the leading** correctional pharmacies in the industry was earned by consistently meeting the daily **needs of the facilities we service. Correct Rx's customization and flexibility when it** comes to operations sets us apart from our competition. Jill R. Molofsky, RPh, Vice President of Operations, has over 30 years of direct experience managing large institutional pharmacies and providing comprehensive services to hundreds of correctional facilities throughout the country. There is no substitute for skill; Jill along with her staff has years of first hand familiarity providing service to correctional facilities.

Correct Rx has cultivated a clinical pharmacy services program that coupled with fiscal conservative strategies provides savings to the overall healthcare spending for correctional facilities that is exponentially greater than the savings afforded by **employing competitive "price per pill" pricing models or weighting them equally. The** quantity and selection of medications throughout contract performance is the most determinative factor in the costs of pharmaceutical procurement. Superior contract performance and clinical pharmacy services result in reducing the quantity of medications purchased and influence the selection of medications to be most cost advantageous. All pharmacy service providers are not equal in their performance and provision of clinical programs. The direction of pharmacy services nationally is one of collaboration, education, therapy management all in an effort to improve outcomes while reducing short and long term costs.

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Internal Audit Department

Correct Rx established an internal audit department to ensure that all company policy and procedures are being followed. As part of our corporate audit committee, Correct Rx added the additional checks and balances of an internal auditor to ensure that we were adhering to the best practices in the industry. Our internal audit department is led by a Certified Public Accountant with more than 30 years of experience.

She has worked in both the private and public sector and reports directly to the President and CEO of Correct Rx. Her role is to audit our processes to ensure that we are following our written policies and procedures. The internal auditor monitors each department and then reports back to the President and Senior Management Team.

Current Contracts

Correct Rx currently provides institutional pharmacy services to over 170,000 lives in over 390 correctional facilities, dozens of juvenile facilities, many residential treatment programs and multiple assisted living and nursing home facilities from its pharmacy in Linthicum, MD (Maryland Pharmacy Permit No: PWO234 / Distributor Permit No: DO1558). The following list provides a more comprehensive list of our current contracts:

- Delaware Department of Correction
- Delaware Veterans Home
- Chimes Delaware
- Maryland Department of Public Safety and Correctional Services
- Maryland Department of Juvenile Services
- Michigan Department of Juvenile Justice
- Corizon – Philadelphia Prison System
- Correctional Healthcare Companies
- The GEO Group
- Conmed Healthcare Management
- Advanced Correctional Healthcare
- Badger Health
- Youth Services International
- Emerald Health Services
- Management and Training Corporation (MTC)
- Numerous independent contracts

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B. General Evaluation Requirements

2. Services: In addition, the Vendor should provide a brief description of current or past services similar to those proposed, indication success of those services and target population served by the Vendor. Include the number of offenders (offenders) served and a brief description of the types of services provided. Include a summary of the Vendor's current and recent history of past performance related to correctional or clinical health care including all contracts awarded in the past five years.

Correct Rx is licensed as an institutional pharmacy by the Maryland Board of Pharmacy. Additionally, Correct Rx is a licensed distributor and maintains a DEA license that allows for the dispensing of controlled substances. We are also a licensed pharmacy provider in 48 states including Delaware (Non-Resident Pharmacy Permit #22-02106). Correct Rx has become a strong force in the Correctional Pharmacy Industry. Our ability to take on large pieces of business in an organized manner with no disruption to our clients and the patients they serve has been clearly documented. We have transitioned over 390 facilities in the past ten (10) years. This includes statewide systems for the Delaware Department of Correction (7,300 offenders), the Maryland Department of Public Safety and Correctional Services, the Maryland Department of Juvenile Services, as well as large municipalities like the Philadelphia Prison System (9,000 inmates) and as a primary subcontractor for Correctional Healthcare Companies (46,000) and The GEO Group, Inc. (27,000).

We believe it is our years of correctional experience coupled with our attention to detail that have allowed Correct Rx to successfully transition correctional systems large and small. Our clients have been the beneficiary of this organized, experienced approach.

- *Indicate capacity to successfully manage proposed services.*

Correct Rx is proud of our record of saving clients' money through our clinical department's thoughtful recommendations and formulary guidance, our cost-saving pharmaceutical buying groups, and our lower overhead costs. Some of our achievements toward improving service to our clients are listed below. Correct Rx encourages the Delaware Department of Corrections (DDOC) to contact any of our contracts as we have built our client list by providing customers with excellent service and cost savings.

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Contract	Vendor Contact
<p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>
<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>
<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>

- *Specify corporate experience in providing correctional or clinical health care. Include in your discussion the number of employees in the firm, annualized dollars of payroll, and number of years in business.*

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Approach to Diversity

Maryland and Delaware MBE/DBE Certification

Correct Rx is a woman-owned and operated business certified by the Maryland Department of Transportation (Certification No. 03-440) and Delaware Office of Minority and Women Business Enterprise (Certification No. 14042152). In addition to being a woman-owned business, Correct Rx also employs a diverse work force; over 70% of our employees (100) are classified as minorities.

Inclusion & Diversity

Correct Rx, as a certified WBE, understands the challenges and importance of providing opportunities to small businesses throughout the nation. As a result of this we always strive, wherever feasible, to include other small businesses and MBEs as our sub-contractors on contracts when required.

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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.

In Delaware, we use a small MBE delivery company to provide delivery services to correctional and long-term care facilities throughout the state. We also use a Maryland MBE company for our office cleaning, stationery supplies and staffing requirements. Each of these businesses is a small business, and a certified MBE, as per the guidelines of the Maryland Department of Transportation.

In many states, we have partnered with small local pharmacies to provide emergency back-up pharmacy services to our contracted facilities. We utilize the services of small local delivery companies to facilitate the flow of medications to **our clients' sites**. We also contract with small local staffing agencies to provide staffing for facility audits and inspections.

Good Corporate Citizens – Core Value

Correct Rx is not only an institutional pharmacy recognized for professional excellence, but it is also a company that is committed to being good corporate citizens. Philanthropy is an integral part of our mission and we believe that this philosophy of giving has contributed to our success.

We have donated significant amounts of our revenue and time to organizations **such as the American Heart Association, the Alzheimer's Association, the Girl Scouts of Central Maryland, Network 2000, Special Olympics of Maryland and Texas, Kinder Louisiana Rotary Club, Maryland Chamber of Commerce, Greater Baltimore Committee, Rotary Club of Baltimore City, Baltimore Symphony Orchestra, The Chimes, The Maryland Food Bank** and countless other local organizations that work to improve the quality of life and health for the less fortunate members of our society.

Financial Stability

Ownership Type

Correct Rx is a privately held Corporation chartered in the State of Maryland where it is headquartered.

Federal Tax ID Number

75-3111495

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Corporate Location

Correct Rx Pharmacy Services, Inc.
803-A Barkwood Court
Linthicum, Maryland 21090

Telephone: 800-636-0501/ 410-636-9500 **Fax:** 410-636-9706

Correct Rx's healthy balance sheet and robust client list speak volumes. Correct Rx has been in business for 11 years. In that period of time Correct Rx has grown to a multi-million dollar corporation with no debt and sufficient resources to service any client. More importantly, all of this was accomplished without any funding from venture capitalists or outside funding. Correct Rx was immediately successful and profitable due to our years of correctional experience and the stellar reputation of the owners. We deliver exactly what we promise and our client list has grown exponentially as a result of our hard work, integrity and knowledge of the specific requirements of correctional facilities.

Officers/Directors

All of the owners and operators of Correct Rx are Licensed Pharmacists

President/Director Ellen H. Yankellow, PharmD
President and CEO



Secretary/Director Jill Molofsky, RPh
Vice President



Treasurer/Director James Tristani, RPh
Vice President of Purchasing



No Hidden Affiliations or Ownerships

Correct Rx Pharmacy Services, Inc. is not a subsidiary of any other corporation or an affiliate of another organization. Correct Rx is not currently nor has it ever been suspended, debarred or otherwise excluded from federal procurement and non-procurement programs. Correct Rx does not have an ownership position in or have an affiliation with any wholesalers or FDA Repackagers. Any and all discounts reflected in our pricing are actual reductions in our profit margin.

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Audited Financials

Our most recent fiscal year ended on December 31st. An accounting firm was retained to perform an independent audit of our results, and to issue an opinion on those financial results. [REDACTED]

[REDACTED] **A clean opinion with no qualifications has been issued since our inception.**

Accounting Firm: Hughes Dixon Goodman
Partner: Glenn A. Hollrah, CPA
Phone: (240) 403-3700
Fax: (240) 403-3701

Cash Position/Debt to Equity Ratio

[REDACTED]

Annualized Payroll

[REDACTED]

Internal Audit Department

Correct Rx established an internal audit department to ensure that all company policy and procedures are being followed. As part of our corporate audit committee, Correct Rx decided to add the additional checks and balances of an internal auditor to ensure that we were adhering to the best practices in the industry.

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Physical Inventory Count

[REDACTED]

Dun and Bradstreet Ratings

[REDACTED]

**Giant Sized Cost Savings through Group Purchasing
Buying Power / Strength in Volume**

[REDACTED]

Transparency

Correct Rx does not play games with our invoice costs. All savings passed on to Correct Rx will be extended to the DDOC. Our pricing is transparent. Correct Rx has lower overhead costs and extended buying power, usually reserved for the largest pharmacies, **we are able to negotiate the best prices on DDOC's behalf and pass along the resulting savings.**

Professional Liability Insurance

[REDACTED]

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[Redacted]

Claims History

[Redacted]

“Safety is no accident at Correct Rx”.

[Redacted]

- *Specify facilities that the Vendor operates that are currently accredited and non-accredited. Include the following information:*
 - *Name of facility, accrediting agency (e.g., ACA, NCCHC, JCAHO), and dates of re-accreditation. List any facilities that have lost accreditation and the reason why.*

Correct Rx does not service any facilities that lost ACA, NCCHC or JCAHO accreditation while we have been the pharmacy services provider. The following chart lists those facilities that we provide pharmacy services for that have current ACA, NCCHC and/or JC accreditation.

IV. REQUIRED INFORMATION

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Facility	City	State	Zip Code	ADP	Current Accreditation (s)
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██████████ ██████████	██████████	█	██████	█	█

Compliance with Healthcare Standards

Correct Rx will perform all work as a result of this RFP in compliance with all Federal and State regulations, or in their absence, the best practices of the trade, including the American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC). If at any time any license held by Correct Rx is terminated, qualified, suspended or in any other way detrimentally affected, Correct Rx shall immediately notify the DDOC.

NCCHC: Correct Rx is well versed in the health care standards of the National Commission on Correctional Health Care (NCCHC). Our Vice President of Operations, Jill Molofsky, our Vice President of Clinical Programs, Dr. Hui Seo and four of our Clinical Pharmacists are Certified Correctional Health Professionals (CCHP) through the NCCHC. This level of expertise ensures that all pharmacy services policies and procedures are compliant with NCCHC standards, which we will apply to the DDOC regardless of whether the institution is currently accredited.

- Correct Rx has demonstrated 100% compliance with all NCCHC Standards. In fact in our 10 year history, no facility where we were the pharmacy vendor has ever failed an ACA audit.
- Correct Rx has assisted many facilities with their first accreditation. Most recently the Chesapeake Detention Facility of the DDOC system passed its initial accreditation audit. There were no healthcare issues identified and the auditors even commented at the post audit meeting that this was indeed a rare occurrence.
- In 2013, the Delaware DOC facilities all received re-accreditation. There were no pharmacy issues identified and in fact at several of the facilities the auditors commented about the positive impact of the onsite pharmacists in the delivery of correctional healthcare services.

ACA: Correct Rx understands and is familiar with the health care standards of the American Correctional Association (ACA). Correct Rx ensures that all pharmacy program services are compliant with ACA standards, which we apply regardless of whether the institution is currently accredited. Our goal is to establish, maintain and even exceed standards in between accreditations - not just to prepare for them.

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- Correct Rx has demonstrated 100% compliance with all ACA Standards. In fact in our 10 year history, no facility where Correct Rx served as the pharmacy vendor has ever failed an ACA audit.
- Two specific examples of many are the D Ray James Prison in Georgia and the Western Correctional Institution in Maryland. Both received a perfect score on the healthcare standards and were re-accredited for the three year period.
- Our Vice President of Program Management and Quality Assurance, Mr. John R. Nattans, currently serves as the President of the Maryland Criminal Justice Association, which is a dual chapter membership of the American Correctional Association.

- *List all fines which exceed \$1,000, incurred under other contracts for non-performance of duties, in whole or in part, within the last three years.*

Correct Rx has incurred no fines that exceed \$1,000 (or of any amount) under other contracts (or this contract) for non-performance of duties, in whole or in part, within the last three years or during our entire ten year history as a company.

- *List all contracts on which you experienced a loss of funds due to fines, delay damages, liquidated damages, and/or forfeiture of performance or proposal bonds in whole or in part.*

Correct Rx has never experienced a loss of funds due to fines, delay damages, liquidated damages, and/or forfeiture of performance or proposal bonds in whole or in part during our entire ten year history as a company.

- *Submit the names, business addresses, telephone numbers, and fax numbers of at least five of your major suppliers and/or sub vendors in the last five years.*

Amerisource Bergen
PO Box 5195
New York, NY 10087-5195
800-562-2526 (Phone)
856-384-2194 (Fax)

Kalos, Inc.
3518-B SE 21st Street
Topeka, KS 66607
785-232-3606 (Phone)
785-232-4917 (Fax)

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Breniss Transportation
8408 Summit Avenue
Windsor Mill, MD 21244
410-655-1134 (Phone)
410-655-1233 (Fax)

MTS Medication Technologies
2003 Gandy Blvd.
Suite 800
St. Petersburg, FL 33702
727-571-1616 (Phone)
727-573-0507

UPS
P.O. Box 7247-0244
Philadelphia, PA 19170-0001
800-811-1648 (Phone)
301-604-4561

- o *Name of any facilities owned or operated by Vendor that are on probation.*

There are no facilities owned or operated by Correct Rx that are on probation.

- o *Provide the most recent NCCHC or another accreditation agency survey for all facilities.*

Correct Rx does not have copies of the agency surveys as these are typically provided to the facility administration and/or the medical vendor.

Legal Action

No Penalties, Sanctions, Liquidated Damages or Successful Law Suits

Correct Rx has not had any penalties or sanctions imposed for fraud or for any other offenses of any kind by any Federal, State or other regulatory agency against the corporation or its staff. Program Audits conducted by any of our clients have never resulted in less than superior ratings regarding Contract Requirements and Liquidated Damages have never been assessed against the company. We have never had any action taken by the CMS against our company or any of its employees or owners.

Correct Rx has had no judgments settled since its inception. Correct Rx has no ongoing litigation in any court. Correct Rx has not been directed not to disclose information by any court. Additionally, Correct Rx has no outstanding insurance or liability claims now or since our inception.

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This is a strong statement for any health care company to make particularly in the correctional pharmacy arena. We are proud of our clean record and the DDOC will be proud to have a relationship with such a high quality vendor.

There have not been any actions taken or any actions pending against our license in Maryland or any other jurisdictions where Correct Rx is licensed. Additionally, Correct Rx has not had any liquidated damages or fines assessed by any client since our inception. Further, we have not negotiated relief of any liquidated damages and or fines. There simply have not been any fines to address.

Correct Rx prides ourselves on doing what the contract requires thus eliminating the potential for fines or assessments. Also, Correct Rx has never settled a lawsuit since our inception nor is any pending. Finally, Correct Rx has never referred any client or patient to our insurance company.

Correct Rx works to keep our clients abreast of the community standards and national and State regulations. For example, some vendors attempt to muddy the waters surrounding licensure and create confusion in the correctional community surrounding which licenses are required by both the facility and the pharmacy to provide services and patient-specific and non-patient specific medications.

As with every service that we provide we are fully transparent as we believe that is the “Correct Way.”

Correct Rx will perform all work as a result of this RFP in compliance with all Federal and State regulations, or in their absence, the best practices of the trade, including the American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC). If at any time any license held by Correct Rx is terminated, qualified, suspended or in any other way detrimentally affected, Correct Rx shall immediately notify the DDOC.

May 30, 2014

B. General Evaluation Requirements

3. Quality of Response: Understanding of project requirements and ability to clearly describe how their program will meet RFP objectives. Implies judgment of evaluators on how reasonable the Vendor's plan is given particular requirements of the Delaware correctional system. In addition, pricing models will be considered.

Our proposal is reflective of our best thinking and delineates our compelling holistic methodology to improve patient outcomes while positively impacting your overall healthcare budget.

Correct Rx approached our response to this RFP as an opportunity to underscore the current services we provide to the Delaware Department of Correction (DDOC), but more importantly to showcase our revised cost structure, expanded clinical programs, dashboard reporting, State Health Care Innovation Plan (with support from CMMI-SIM) integration, and adaptation of the Affordable Healthcare Act along with active program management.

Correct Rx is proud to be your current pharmacy vendor and we embrace the opportunity of dialogue about our past and present accomplishments, the services we are currently providing and the new services we will be introducing in this proposal. We are pleased to advance our shared history, communicate our willingness to adjust to challenges facing DDOC and commit to leading edge innovations that are all designed to **accelerate DDOC's success. We define success as improved care for the patients under your custody resulting in decreased overall healthcare costs.** Correct Rx has put forth a proposal that builds on our history, meets the challenges of today and provides leading changes that are all designed to positively impact what DDOC spends on drugs and healthcare costs well into the future.

May 30, 2014

B. General Evaluation Requirements

Confidential & Proprietary

4. Corporate Capability: Financial stability as determined by review of financial information provided by the Vendor; perceived ability to start up and manage the program in the time required using the staff, structure and phase in required in the RFP. Financial stability should be demonstrated through production of balance sheets and income statements or other generally accepted business record for the last 3 years that includes the following: the Vendor's Earnings Before Interest & Taxes, Total Assets, Net Sales, Market Value of Equity, Total Liabilities, Current Assets, Current Liabilities, and Retained Earnings.

[Redacted]

[Redacted]

[Redacted]

[Redacted]

IV. REQUIRED INFORMATION

May 30, 2014

Confidential & Proprietary

All of the patient profiles and order histories are already resident in our computer system which again will facilitate a smooth transition from the previous contract to the new contract resulting from this RFP. These are all costs that a new pharmacy provider along with the department would have to incur if there were a change and which will be unnecessary if DDOC decides to continue with Correct Rx as your pharmacy provider.

- In addition to financial information, discuss any corporate reorganization or restructuring that has occurred within the last three years and discusses how the restructuring will impact the Vendor's ability to provide services proposed. Also disclose the existence of any related entities (sharing corporate structure or principal officers) doing business in the field of correctional health care. The DDOC reserves the right to terminate the contract, based upon merger or acquisition of the Vendor, during the course of the contract. Include a description of any current or anticipated business or financial obligations, which will coincide with the term of this contract.*

[Redacted]

[Redacted]

May 30, 2014

B. General Evaluation Requirements

6. References: Verified customer and subcontractors' references from similar operations 1254 based on the reported degree of satisfaction of services. Consider significance of reported 1255 performance against contract requirements and litigation, past and current, and success in 1256 obtaining and maintaining NCCHC or similar standards in correctional systems of similar 1257 scope.

RELEVANT OPERATIONAL EXPERIENCE *CORRECTIONAL PHARMACY, SIMILAR FACILITIES*

Correct Rx is a strong force in the Correctional Pharmacy Industry. Our ability to take on large pieces of business in an organized manner without disruption to our clients and the patients they serve is clearly documented. Correct Rx has transitioned over 400 correctional facilities in the past ten years, including multiple large correctional systems that were brought on with an expedited transition line. Even though Correct Rx is the current vendor, we have included in Section II. Scope of Work (Response#21) our detailed transition plan to ensure that the DDOC receive the cost savings associated with retaining their vendor and that Quality of Care is maintained irrespective of the other disciplines.

Correct Rx is proud of our **record of saving clients money** through our clinical department's thoughtful recommendations and formulary guidance, our cost-saving pharmaceutical buying groups and our low overhead costs. Correct Rx has never been sued, fined or assessed any liquidated damages. Some of our achievements toward improving service to our clients are listed below. **All of Correct Rx's Key Personnel have been intimately involved in each of the projects described below from start up through current operations.** Our clients are the beneficiary of this organized and experienced approach.

Comparable Facilities

Listed below are contract references and sample facilities serviced by Correct Rx many of which are similar in size, scope and complexity to those serviced by DDOC, along with a brief description of the breadth of services provided by Correct Rx and level of involvement of the key Correct Rx personnel.

IV. Required Information

May 30, 2014

Contract Name: Maryland Inmate Health Services/Pharmacy Services Contract

Procuring Agency: Maryland Department of Public Safety and
Correctional Services (MD DPSCS)
Office of Inmate Health Services

Contact: Mr. Gary Maynard, Secretary
300 East Joppa Road, Suite 1000
Towson, MD 21286-3020

[REDACTED]

Dr. Sharon L. Baucom, Director of Clinical Services
6776 Reisterstown Rd Suite 315
Baltimore, MD 21215-2342

[REDACTED]



Dates of Performance: July 1, 2005 to Date

Correct Rx holds the contract for Pharmacy Services for the Maryland Department of Public Safety and Correctional Services Pharmacy Contract for the entire state of Maryland. This contract serves over 25,000 inmates in 30+ facilities. Correct Rx established clinical initiatives that have improved patient outcomes. Improved outcomes mean healthier patients, fewer complications and reduced overall costs to the **MD DPSCS and the State of Maryland. The activity of Correct Rx's clinical program** provides the State of Maryland with medication management for specific disease states achieving the best in health care while reducing overall costs.

Essentially Correct Rx has implemented a pharmacy model that not only addresses every service requirement and additionally affords a mechanism to achieve improved patient care through accurate timely delivery of medications in collaboration with cutting edge clinical programs. Correct Rx offers an opportunity to, not only address day-to-day pharmacy operations, but to showcase a pharmacy program that will serve as **the industry's Gold Standard.** The Office of Inmate Health Services monitors this contract and was quite impressed with the flawless transition and immediate impact offered by Correct Rx.

Correct Rx began pharmacy contract services for the Maryland Department of Public Safety and Correctional Services on **July 1, 2005. This was Correct Rx's first statewide award.** Part of the contract requirements were strict standards devoted to contract compliance and the potential for liquidated damages and/or actual damages for non-compliance.

IV. Required Information

May 30, 2014

Liquidated damages are applied based on a set formula and can amount to up to \$150,000 per incidence. Many of the other co-venders have had fines and liquidated damages applied to their disciplines.

Going into the eighth year of the contract, Correct Rx is pleased to report that we have not been cited for any non-compliance issues or any liquidated damages. Correct Rx fills over 60,000 orders each month for the inmates covered by the MD DPSCS contract. Our Program Manager, with our VP of Operations, has worked in tandem to comply with each section of the contract and RFP from day one. Our Continuous Quality Improvement initiatives and our operational expertise have enabled Correct Rx to provide the highest level of service to this contract. It has afforded an opportunity to **develop a quality assurance “Model” that we are now applying in other programs across the country.**

IV. Required Information

May 30, 2014

Contract Name: The GEO Group, Inc. (GEO)

Contacts: Dr. Ada Rivera, Corporate Medical Director

[REDACTED]
[REDACTED]

Dave Donahue, Vice President

[REDACTED] [REDACTED]
[REDACTED]



Dates of Performance: May 27, 2003 to Date

GEO is a world leader in providing diversified services to government agencies around the globe. These services include Correctional Facilities, Detention Centers, Mental Health Services Facilities, Facility Design, Infrastructure Financing, Turnkey Construction, and other Government Services.

When Correct Rx opened in May of 2003, the GEO Group made the corporate decision to move their entire pharmacy services to Correct Rx Pharmacy Services, Inc. This decision was based on the superior service and pricing they knew to expect from Dr. Yankellow and Jill Molofsky, RPh, the owners of Correct Rx Pharmacy Services, Inc.

On May 27th, **2003, Correct Rx began service to The GEO Group's entire United States** account. This transition included 20 facilities serving over 21,000 inmates in 11 states. This is a very complex group of facilities from 200 bed juvenile units to 2,900 bed FBOP facilities. These sites mimic many of the same demographics and medical service requirements of the Florida Department of Corrections. Included are urban jail facilities with large intake centers, skilled infirmaries, dialysis units and special housing units. All of the medical units are nationally accredited either through ACA, NCCHC or JC.

The key to the success of the GEO project was our attention to detail and absolute knowledge of the correctional industry. Correct Rx has an experienced management team of owners and operators that is not new to pharmacy or to the industry. Our reputation for hard work and getting the job done right the first time has been consistently documented over the years time after time.

IV. Required Information

May 30, 2014

Contract Name: Corporate Pharmaceutical Service Provider

Procuring Agency: Correctional Healthcare Companies, Inc. (CHC)
6200 S. Syracuse Way, Suite 440
Greenwood Village, CO 80111



Contact: Don Houston, COO
[REDACTED]
[REDACTED]

Dates of Performance: November 1, 2012 to Date

CHC specializes in comprehensive, custom-tailored, quality health services to adults and youths held in 180 correctional facilities throughout the United States. Correct Rx provides comprehensive pharmacy services and clinical programs to approximately 49,000 offenders. These facilities include State Correctional Prisons, Federal Bureau of Prisons, County Jails and Immigration Intermediation Facilities. Each facility has different needs based on the size and type of the facility. Several are skilled infirmaries while others are less intensive. The services include daily delivery to each of the locations and on site visits by our clinical department. Medications are packaged and delivered in accordance with the needs of the facilities. Correct Rx has complied with all aspects of the contract, ACA, NCCHC, JC standards and State and Federal regulations.

May 30, 2014

Contract Name: Pharmacy Services Contract

Procuring Agency: Conmed Healthcare Management, Inc.

Contact: Dr. Stephen M. Goldberg
Chief Operating Officer
Conmed Healthcare Management, Inc.
7250 Parkway Drive, Suite 400
Hanover, MD 21076



Dates of Performance: July 1, 2005 to Date

Conmed Healthcare Management is a provider of comprehensive, full-service correctional healthcare. Conmed employs more than 1,400 medical, dental, and mental and behavioral health professionals providing services to county and municipal **correctional facilities across the country. Correct Rx was selected as Conmed's pharmacy partner** for several facilities in Maryland, Virginia, Washington, Texas, Kentucky, New Jersey and Arizona.

Correct Rx has a bi-directional electronic interface in place at many of Conmed's facilities. As a result, the nursing staff is relieved of the need to fax new orders to the pharmacy. This also provides medications in a more timely matter to the inmates. In addition, third party billing capability is provided to receive reimbursement for pharmacy services provided to U.S. Marshal Clients.

Drs. Hui Seo and Valerie Barnes are regularly onsite for the Pre-Service training and provide follow-up training for all medical staff during the quarterly pharmacy and therapeutics meetings. In addition, they have collaborated with the Medical Director to provide an effective list of starter medications to reduce the need and expense of utilizing the local back-up pharmacy.

IV. Required Information

May 30, 2014

Contract Name: Delaware Veteran's Home

Contact Name: Patricia Hildebrand, RN
Director of Nursing
100 Delaware Veterans Home Boulevard
Milford, DE 19963



Dates of Performance: July 1, 2012 to Date

Delaware Veterans Home is a 150 bed licensed Veterans Home consisting of 30 dementia beds and 120 skilled nursing beds located on a 24 acre campus in Milford Delaware. All residents of DVH are military veterans.

Correct Rx was selected to provide comprehensive pharmacy and clinical services as a result of a 2012 Request for Proposals. We provide comprehensive clinical services to DVH including on-site consultants, inspections, and resident education on a monthly basis, in addition to filling all of their medication orders which are delivered on the same day as ordered.

Residents at DVH also have insurance coverage through Delaware Medicaid, Medicare and private health insurance providers. Correct Rx has seamlessly incorporated each **patient's medical insurance information and is successfully billing prescription orders to all of these insurers. Delaware Veteran's Home is only billed for those medications not covered through other insurance providers.**

Prior to Correct Rx assuming responsibility for providing the pharmacy services DVH received an unsatisfactory survey by the State of Delaware that cited the previous pharmacy provider for breaches in the necessary documentation of medications dispensed for residents of DVH. Correct Rx performed a comprehensive review of every **resident's medical chart to ensure that all documentation was complete and accurate.** A subsequent re-survey determined that we are in 100% compliance of every aspect of our pharmacy services contract with DVH. There was also a recent survey conducted by the Veterans Administration at DVH, and that survey showed no deficiencies in the pharmacy services being provided by Correct Rx.

Correct Rx has also undertaken a project in collaboration with DVH to implement a computer interface between our computer system and the system at DVH. This project is progressing on target and will be operational within the next few months.

May 30, 2014

Chimes Maryland, Inc. and Intervals
4815 Seton Drive
Baltimore, MD 21215
Albert Bussone, Executive Vice President

Chimes of Delaware
Richelle Lawson, RN, Director of Health Services



Dates of Performance: August 1, 2007 to Date

Performance with Contract Terms and Description of Services: Chimes services over 350 adult developmentally disabled adults in individual group homes in Maryland and 150 in Delaware. Included in this contract is an Assisted Living facility for 33 developmental disabled adults who reside in the Curtis Hall facility located in Baltimore, Maryland. These residents have multiple medical conditions including neurological, psychological, mental health and dementia. There are many residents with Prader-Willi syndrome who are tube fed and require liquid medications.

The resident's medications are billed to multiple insurances including Medicaid, Medicare D and multiple private insurance. As with other programs our billing department has done a stellar job in coordinating all of the billing activities and making sure that the corporate office is only invoiced for those orders that cannot be paid by their third party payers.

Each resident is dispensed a 30 days' supply of routine medications in blister cards on a cycle system. All as needed medications and bulk items such as creams, ointments, inhalers and liquids are ordered by the staff as needed. Like many of our other clients, Correct Rx was selected by Chimes to provide pharmaceutical services because they were not getting the quality of pharmacy services they wanted from a large national vendor. The Chief Operating Officer, read about the stellar services provided by Correct Rx in the local newspaper and asked us to submit a proposal. They were very pleased with our hands on approach and the breadth of our experience.

Clinical Activities: Consulting services are provided by Correct Rx pharmacists. This includes chart reviews and staff in-services. Our clinical initiatives also include calculating and preparing special doses of medications for the special needs of this population including a large number of seniors who are not residing in Curtis Hall the assisted living facility.

Advanced Technology: Correct Rx installed Web-Connect an electronic order entry system for this client. This technology allows e-prescribing and viewing of patient profiles etc. We are providing Web-Connect at no charge. **Chimes Delaware has embraced this technology.**

IV. Required Information

May 30, 2014

We are including excerpts from a letter of recommendation that was written by Richelle Lawson, RN, Director of Health Services for Chimes of Delaware in 2013:

“The resident’s medications are billed to multiple insurances including Delaware Medicaid, Medicare D and multiple private insurance. As with other programs their billing department has done a stellar job in coordinating all of the billing activities.”

“I have found Correct Rx to be accurate, cooperative and hard working. They have a reassuring professional integrity that allows me to feel confident that they will do exactly what they say they are going to do. They have provided a pharmacy program that I believe could be the *Gold Standard* for the institutional pharmacy industry.”

“Dr. Yankellow along with Mrs. Jill Molofsky the owners of Correct Rx Pharmacy, in particular, lead by example both with respect to attitude and competence. I encourage you to closely consider utilizing the services of Correct Rx Pharmacy. They are more than just a pharmacy.”

Correct Rx is proud to receive this validation from the key contact person for Chimes of Delaware and we are also proud of the services that we provide to maintain and improve the quality of life for the residents of Chimes.