

**Bidder Question Responses
RFP #26-15**

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ADDENDUM NO. 1

COUNTY OF PUEBLO, COLORADO

**RFP No. 26-15 - In-Custody Medical & Mental Health Services
Date: 5/15/26**

What the Change is being done to the current RFP:

Question and Responses

The proposer shall permanently affix this Addendum No. 1 to the RFP packet so it will be submitted with the RFP.

The undersigned proposer acknowledges receipt of this Addendum No. 1.

Received by: _____

Firm Name: _____

Address: _____

Date: _____

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Please provide Average Daily Population (ADP) numbers for the past three (3) years.

2025 – 415

2024 – 427

2023 – 452

Are there any juveniles housed in the Facility?

NO

Please provide a breakdown of the overall incarcerated individual population by the following:

CDOC – 22 (snapshot)

USMS – No holds (snapshot)

ICE – Criminal charges, state law prohibits detainees

Work Release – 15 (labor crew)

Please provide a breakdown of the overall incarcerated individual population by the following:

Male – 339 (snapshot)

Female – 65 (snapshot)

Transgender – We assign housing by biological self

What is the average length of stay (ALOS) for Pueblo County’s inmates over the past three years (2023, 2024, 2025), and 2026 to date?

2025 30.4

2024 30.5

2023 27.8

When was the last NCCHC and/or ACA audit?

NCCHC 2023, probation until 2024

ACA 2022

Has the current provider been found with any accreditation (NCCHC or ACA) deficiencies since they’ve been contracted with Pueblo County?

NO, no longer on probation NCCHC

The “PROJECT REQUIREMENTS” section on page 4 of the RFP cites, “Maintain & Manage NCCHC Accreditation Standards”

The Pueblo County Detention Center is one of the few “Triple Crown Accredited facilities nationwide, which includes NCCHC, as well as ACA accreditation. Is it the responsibility of successful providers to meet and exceed ACA standards and ensure the detention center maintains accreditation, or will this responsibility lie with Pueblo County?

Contractor

Please provide a list of all medical and dental equipment that will be available to the new Contractor, including the model, age, and condition.

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Type of Equipment	Location	Owner
EKG Machine/Cart	Clinic - 2nd floor	Med Provider
EKG Machine/Cart	2nd floor	Med Provider
Scale (x3) - Pink	Med Carts	Med Provider
Scale - Lrg	Clinic - 2nd floor	Med Provider
Fetal Doppler	Clinic - 2nd floor	Med Provider
Vitals Machine	Clinic - 2nd floor	Med Provider
Vitals Machine	Judicial	Med Provider
Bariatric Medical Bed	Med Cell 3	Pueblo County
Medical Beds	Med Cells 1-2, 4	Pueblo County
Otoscope	Clinic - 2nd floor	Med Provider
Med Cart #1	2nd floor	Med Provider
Med Cart #2	2nd floor	Med Provider
Med Cart #3	2nd floor	Med Provider
MAT Cart	2nd floor	Med Provider
Sick Call Cart	2nd floor	Med Provider
Lab Cart	2nd floor	Med Provider
Wheelchairs	Intake Storage	Pueblo County
Walkers	Intake Storage	Pueblo County
O2 Concentrator - Sm. White (x3)	Intake Storage	
O2 Concentrator - Lrg Blk (x3)	Intake Storage	
Crutches	2 count	Pueblo County
Cane - Single Point	Intake Storage	Pueblo County
Cane - 4 Point	Intake Storage	Pueblo County
Med Cart (x3)	New Jail	Med Provider
Rolling/Standing Charting Podiums (x6)	New Jail	Med Provider
Shower Chairs	Intake Storage	Med Provider
Bed Side Commodes	Intake Storage	Med Provider
Blacklights (x5)	Med Carts, Judicial, Clinic - 2nd Floor	Med Provider
Oxygen Single Carts		Med Provider
O2 Push Cart - Holds 12 E tanks	Intake Storage	Med Provider

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Does the County manage the inmate co-pay program, including all payments for co-pays? If the provider is to manage, please provide as much detail as possible on how the co-payment program is currently managed.
[YES, invoice from Contractor to inmate accounts.](#)

Please provide last year's contract amendment, including the contract amount and staffing matrix.
[Previous contracts and amendments are public record. Send any CORA request to the Pueblo County Purchasing office](#)

If available, please provide any additional staffing matrix for the new facility developed by the County or the current healthcare vendor.
[Nothing available, staffing will adjust with new facility needs.](#)

Please provide the current JBBS budget broken down by category and any such budget developed for the new facility when it opens.
[Current JBBS budget consists of Substance Use Disorder \(SUDS\) & Mental Health](#)

Please provide the hourly rate for all nursing personnel.
[Information not available](#)

Please provide a list of all office/computer equipment that will be available to the new Contractor (e.g., computers, printers, fax machine, copier, etc.), including the model, age, and condition.
[This office provides space, desks, & phones.](#)
[Current vendor supplies all IT needs, workstations, and laptops](#)

How many AEDs are on site?

[Eight \(8\)](#)

Who is responsible for maintaining the AEDs – the County or the Contractor?

[County](#)

Equipment and Supplies, what equipment and supplies will the Contractor be responsible for?

[Med carts and treatment carts](#)

How many intakes are conducted on average per day, per month, and per year?

- Daily – [n/a](#)
- Weekly – [108](#)
- Monthly – [468](#)
- Annually – [5620](#)

When are PPDs implanted – during intake or during the 14-day health assessment?

[Screen only, volunteer when offered](#)

Please identify any on-site specialty clinics currently conducted on site, and frequency.

[Twice weekly, Infant Mortality \(Syphilis\)](#)

Please identify the following current providers:

Laboratory	LabCorp
STAT Labs	LabCorp
Hospitals	Parkview Medical Center and St. Mary-Corwin Medical Center
Ambulance	American Medical Response (AMR)
X-Ray	Mobile X (Trident)
Pharmacy	Diamond
Back-up Pharmacy	Walgreens, Pueblo Northside
Oxygen	Airgas
Medical Supplies	McKesson
Office Supplies	McKesson
Health Info Exchange	CoreEMR
Dental	DenTrust

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Are X-ray services provided using on-site equipment or through a mobile X-ray provider?
Mobile

If there is on-site X-ray equipment, is it film or digital?
NO

Who is responsible for biohazardous waste removal services – the County or the Contractor?
Contractor

Who is responsible for shredding services – the County or the Contractor?
County

Who is responsible for providing medical gas – the County or the Contractor?
Contractor

What telemedicine services are currently provided?
Contractor

Please provide frequency of each telemedicine clinic/consultation
Information unavailable

Is sick call conducted in the housing units or the medical unit?
Sick call is conducted in the clinic

Is med pass conducted in the housing units or the medical unit?
Med Pass is conducted in the housing units

Please provide statistical data for the past two (2) years regarding on-site services, including but not limited to:

- Intakes/Receiving Screenings
- Nurse sick call, Mid-level sick call, Physician sick call
- Incarcerated individual health assessments
- Number of incarcerated individuals evaluated by the psychiatric/mental health providers
- Number of chronic care visits by type
- Number of on-site clinic visits by type (e.g., OB/GYN, orthopedics, ophthalmology, cardiology, etc.)
- Labs
- X-rays
- Telemedicine encounters by specialty

All services must follow NCCHC guideline

Please provide the current staffing plan by position, credential, and shift.
Staffed per contract

Is the current staffing plan considered adequate for the facility?
YES, for old jail, will need to be modified for new jail.

Can more than one staffing option be provided in the RFP response?
YES, be cautious of cost coming into contract ½ way through year.

Does the facility currently use 12-hour or 8-hour shifts? Other?
Depends on the FTE hours and need.

Is the current staffing structure working well or is a new structure desired?
YES

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Are there any vacant positions at this time?

YES, NPs and MAT nurse have been of interest. We would like to no have so much PRN staff.

During the past two (2) years, what is the average number of individuals receiving dialysis treatments?

2

How much has been spent annually on dialysis over the past two (2) years?

Invoiced to county

Information unavailable

What are the average weekly number of treatments?

3/week

Are dialysis services provided on site or off site?

Off-Site

Please identify the on-site and/or off-site dialysis provider.

Local

Is there an existing backlog for dental services? (If so, please provide details)

None

How do the County and the current vendor currently manage inmates/detainees with Substance Use/Opioid Use Disorder (SUD/ODU)?

MAT program and detoxing in facility

Does the Facility currently provide continuation of FDA-approved medications (e.g., methadone, buprenorphine, naltrexone/Vivitrol) for individuals who were receiving them in the community prior to entry?

Yes we provide, but we also pick up community dosing from clinics. We would like this change in the future to avoid the extra clinic trips.

What percentage of incarcerated individuals are diagnosed with Opioid Use Disorder (OUD) at intake?

Persons in our custody showed the majority reported substance use or abuse, both male & female, various.

Is Pueblo County interested in staffing an MAT RN and/or an MAT Coordinator to work in conjunction with the MAT Provider?

Not at this time

Is Pueblo County accepting of a Nurse Practitioner to manage and support the MAT program?

Not at this time

What medication (e.g., methadone, buprenorphine, etc.) do you currently use for opioid-dependent pregnant patients?

As prescribed by the provider

Are injectable medications used for substance abuse treatment? (i.e. vivitrol, sublocade, etc.) If so, which ones? Do you have statistical data on the number of injections over the past 12 months to supply us?

Injectables are currently not used due to cost.

What is the average MAT census? How many MAT patients, per month, over the last year? Please separate the number of initiations and the number of continuations.

Census varies, snapshot 30, inductions also varies snapshot 6

Do you currently induct new patients into MAT at the Facility prior to discharge?

YES

If so, what medication(s) do you provide?

Naltrexone, Methadone, Suboxone

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How many patients are you inducting on average per month by medication?

Patients are inducted as requested and prioritized before release

If you are not currently inducting new patients into MAT, are you interested in providing induction service going forward?

YES, but cost is an issue, as well as furthering dependency with not positive assistance

Please provide the percentage of intakes who enter the Facility on a verified MAT program in the community.

Patients are continued as verified, varies

Do you work with a community provider/local clinic to provide methadone?

YES

If so, please provide methadone provider's name and contact information.

Elevate, Health Solutions, CTS, Crossroads

The "PROJECT REQUIREMENTS" section on page 4 (of 13) of the RFP cites "Methadone pick-up" services. Please explain, in as much detail as possible, the Methadone pick up services which are currently being provided by the current provider, and the county's expectation from the successful provider, specifically to these services.

Deputies currently pick-up from Methadone clinics. We would like to know options to not have to do this.

Do you have grant funding for MAT?

Limited

If so, please provide details.

Shared between the county JBBS and medical

What is your anticipated budget for MAT?

Varies on populations

Have you considered costs other than staffing, such as medications, drug screens, labs, supplies, and additional custody staff?

YES, we try to anticipate.

Do you want to establish a licensed and certified on-site opioid treatment program (OTP), which has its own associated costs?

YES, we are interested but cost.

Please provide the current mental health staffing by FTE count, day/shift and their credential/licensure. Do you consider this current mental health staffing adequate?

Staffed per contract

Is the current mental health staffing considered adequate?

YES

Is there a requirement for 24/7 on-call by Mental Health Professionals? If it is not required, who manages after hour releases of individuals on suicide watch to the community? If so, what hours?

YES, we would like MH onsite or available 24/7. However, finding licensures to do so is a challenge do to the hours. On-call is of interest.

What mental health services are currently being provided on site (i.e., specialized mental health units, group therapy services, etc.)? If yes to groups, how often are they currently provided and how many individuals are served?

Per NCCHC guidelines

Are group therapy services required?

If so, what types of groups are currently provided?

If so, please indicate the number of times per week each group is provided.

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Per NCCHC guidelines

Is the mental health team expected to manage discharge planning services or do you already have other personnel providing discharge planning services at your site?

YES

If so, please provide specific requirements.

Are there service agreements related to the timing of mental health evaluations and/or response to mental health referrals?

Per NCCHC guidelines

Is there a requirement for any court involvement by the mental health staff?

If so, please describe the required involvement?

YES, collaboration with competency

Are mental health staff responsible for coordinating trial competency examinations and transfers?

NO

What is the average wait time for patients pending transfer to the state hospital for competency restoration?

120+ days minimum

Do substance use treatment services offered to the incarcerated individuals at the facility?

YES

If so, is there a limit to the number of patients in the program?

We use community programs that have their own grant funding.

Is there any specialty housing available for incarcerated individuals with mental health issues?

YES

If so, please provide the number and capacity of mental health housing units.

One housing unit (males), 56 beds

What are the number and location of suicide watch cells?

Same housing unit (males), 7 cells with sub-dayroom.

Who conducts suicide watch –Correctional/Custody staff or the Contractor?

Correctional staff

What is the average number of incarcerated individuals in the restricted housing unit(s) at the Facility? How often are mental health professionals completing rounds in restricted housing each week?

Per NCCHC guidelines

What is the frequency of mental health staff rounds in restricted housing units per week?

Per NCCHC guidelines

Are any mental health services provided by a community services board (CSB) or private provider, other than those addressed in the RFP?

NO, unless competency based

Who is financially responsible for psychiatric emergencies and/or psychiatric hospitalizations –the County or the Contractor? Please identify the hospital used for psychiatric inpatient admissions.

County

Please identify the hospital used for mental health inpatient referrals.

Colorado Mental Health Institute

What are the requirements for mental health training for Correctional/Custody staff?

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Per NCCHC guidelines

Please provide the following information:

SEE ATTACHED EXCEL HEALTH SERVICES REPORT

How many med passes are conducted daily?

4

How many med carts are used per med pass?

3

How long does the average med pass take to complete?

3-4hours

Is there a Keep-on-Person (KOP) program at the facility?

NO

Do discharge medications include psychotropic medications?

No discharge with meds, prescription with local pharmacy

Who is responsible for the purchasing of the influenza vaccine: County or the Contractor? Has the health department provided the influenza vaccine in the past?

Contractor

Who is responsible for the purchasing of the covid 19 vaccine: the County or the Contractor? If the contractor, will the Contractor be reimbursed?

N/A

Please provide a 2-year breakdown utilization on vaccines provided by staff and inmates.

Based on population & staffing, NCCHC & ACA guidelines

Does the current EMR system provide any of the following interfaces? If yes, please identify interfacing vendor/agency.

Contractor

Will direct access to the JMS be available on clinical computers? If so, what are the requirements (installation, network, accounts)?

Yes, County IT permissions

Does the County or the current Contractor provide any wireless connectivity/access to medical? If so, which locations are covered?

YES, Contractor

Who is the Internet Service Provider and what bandwidth are they providing?

Segra at new jail site, bandwidth not known.

Who will be responsible for providing internet connectivity the County or the Contractor?

Contractor

If the County provides internet connectivity, what internet circuits will be available to the Contractor – dedicated circuit or delivered through the County's network? What is the bandwidth?

Dedicated Circuit

Are there sufficient network ports for connecting all of the equipment? If not, who is responsible for extending the network?

New facility, expansion should not be needed, but if so the Contractor.

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If the Contractor provides internet connectivity, are there any preferred/existing vendors that can be leveraged to provide this service?

NO

Will the successful proposer be expected to provide and manage its own network infrastructure (LAN/WAN/Wi-Fi/firewalls) required to support medical operations, or may they leverage PCSO's existing network infrastructure, including appropriate VLAN segmentation, to support connectivity?

YES

If the Contractor is responsible for its own network infrastructure, will the selected Contractor be allowed to use existing network drops?

YES

If the Contractor is responsible for its own network infrastructure, how many wiring closets service the PCs used by the Contractor? Will the Contractor be allowed to use existing fiber to interconnect wiring closets if required?

YES

If structured cabling is required, who is financially responsible—the County or the Contractor?

Contractor, if new cabling is required

Who is responsible for providing PC hardware and peripherals—the County or the Contractor? (If a mixed responsibility, please explain.)

Contractor

If the Contractor is required to provide Internet, networking, Wi-Fi, or end user equipment, are there any restrictions to the products used, or can the Contractor implement its standard design and equipment?

Info unavailable

Who is responsible for providing copiers—the County or the Contractor?

Contractor

If the County is responsible for copiers, what is the make and model number of the current copier?

N/A

Does the current Contractor provide time clocks?

YES

What is the process for requesting additional software from the County?

County will only provide to county offices

What is the process for requesting additional equipment from the County?

Submission through the Detention Operations Captain

Are the clinical computers currently managed on the County's Windows domain, the Contractor's?

NO

Has the current Contractor been assessed any penalties in the past two (2) years?

If so, please identify the penalty type and amount for each of the past two (2) years.

NO

As the contract transitions between vendors, it is important to migrate patient records from the current EHR to the new vendor's EHR. As patient records are the property of County, it is important for you to request the records from your current vendor and review them for completeness and

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accuracy, not only for the County's records for litigation purposes, but also to provide them to the new vendor for import into the new EHR. Does the County need assistance with the process from the new vendor? If so, please provide a count of all patients stored in the current EHR (including released patients).

[Information not available](#)

The County's RFP did not include a comprehensive Scope of Services section detailing the specific clinical, operational, and administrative services expected to be included within each proposal and ultimately supported by the awarded provider. A comprehensive Scope of services should include expectations and requirements specific to intake medical screening, chronic care management, mental health evaluations, medication administration, various ancillary services, including, but not limited to, dental, x-ray, laboratory, medical waste, dialysis, OBGYN, emergency/ambulatory/EMS services, suicide prevention, discharge planning, community-based services, etc.

[Please see Questionnaire](#)

The "EVALUATION" section on page 12 of the RFP cites, "The County will analyze information provided by all Proposers. Criteria considered by the County in ranking the proposed In-Custody Medical & Mental Health Services will be as follows:

1. Company Background/Accomplishments
2. Medical Services
3. Mental Health Services
4. Maintain & Manage NCCCHC Accreditation
5. MAT Services."

Price was not identified as a scored criterion within the RFP's "Evaluation" section; however, historical procurement practices and prior correctional healthcare contract awards within Pueblo County suggest that pricing has traditionally been a significant, if not primary, factor in the County's evaluation and selection process.

To ensure transparency, fairness, and consistency amongst all proposing vendors, please clarify the role pricing will play in the evaluation process, including whether cost proposals will be formally scored, weighted, or otherwise materially considered in the County's final award determination. Additionally, if pricing is a factor, please provide the corresponding evaluation methodology and weighting criteria applicable to cost.

[In 2026, Pueblo County is in a budget crisis. In the past, overall cost was a consideration when awarding contracts or services, but other considerations such as quality were also evaluated. This RFP is absolutely meant to provide the best medical care for those in custody based on medically required and necessary need.](#)

Please provide the current provider's staffing and coverage model, including licensure and the current compensation rates for each and every position.

- [Health Services Administrator](#)
- [Director of Nursing](#)
- [Medical Staff \(RN, LPN, EMT\) x 7](#)
- [Mental Health \(NP, Professional\) x 7](#)
- [Medical Providers x 4](#)
- [Dental \(Dentist & Assist\) x 4](#)
- [Office x 1](#)
- [Accreditation x 1](#)
- [PRN, varies](#)

The County's RFP does not include a standardized staffing and coverage model citing each, and every position by licensure (e.g., MD, Mid-Level provider(s), RNs, LPNs, EMTs, Mental Health Provider (MHP), Administrative Assistant (AA), Pharmacy Tech, and other support personnel) for any, and all proposers to utilize as a baseline in developing their submissions. The absence of a defined staffing and coverage matrix introduces significant

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variability in how providers structure their proposals, which in turn creates challenges for the county's evaluation committee in conducting a fair and objective "apples-to-apples" comparison across respondents.

To ensure consistency, transparency, and equitable evaluation, we respectfully request that the County provide a base-level staffing and coverage matrix that depicts coverage hours and scheduling expectations, which any and all proposers can use as a foundational framework in preparing their responses. This will help align assumptions, reduce variability in interpretation, and support a more accurate comparative analysis of cost, service delivery, and staffing models.

Jail Intake, Sun - Sat, 1 RN

Jail Med Staff, Sun - Sat, 3RN/LPN/EMT

Jail Charge, Sun - Fri, 1 RN

Sick Call, Mon - Fri, 1 RN

Clinical LPN, Mon - Fri, 1LPN

MAT, Sun - SAT, 1LPN

Med Provider, Mon - Sat, 1 NP (2 NP, Tues - Thurs)

Dental, Mon & Sat, 1 Dentist & 1 Assist

Xray, as needed

How many vacancies does the current provider have at the Pueblo County Detention Center? If staffing levels are not full, which positions are currently vacant, and how long have each of the positions been vacant?

2 Vacancies, medical RN & MH Prof. Open not long.

Has Pueblo County assessed any financial performance related to staffing and/or vacancy penalties to the current provider over the past three years (2023, 2024, 2025), and 2026 to date? If so, please state the factors for the performance or vacancy penalty(s), and the amount assessed for each occurrence.

NO

How are optometry services currently being managed and supported by the current provider? How many optometry patients has the detention center managed over the past three years (2023,2024,2025) and 2026 to date?

Patients are seen in clinic and sent to Optometrist as needed.

The "COMPANY OVERVIEW" section, item 7. on page 5 of the RFP requires, "Information pertaining to any lawsuits the company has had to defend concerning the provision of cash handling services."

This was an oversight for a previous unrelated RFP.

Three of the industry's largest providers of inmate healthcare have filed for bankruptcy since 2020. In addition to providing information regarding lawsuits, is Pueblo County requiring that all proposals include the provider's full and complete bankruptcy history, including any and all of their previous subsidiaries?

If these are not included in the proposal or questionnaire, bidders invited to presentation should expect this question.

The "BACKGROUND" section on page 6 of the RFP states, "The Pueblo County Detention Center is operated by the Pueblo County Sheriff's Office Detention Bureau. Currently, the Detention Bureau operates from the main detention facility, which is currently located at 909 Court St, Pueblo CO, 81003, and the Dennis Maes Judicial Center located at 501 N. Elizabeth Ave, Pueblo CO, 81003. The valid mailing address for the Detention Bureau is at 909 Court St."

The County currently manages and supports its intake and booking processes at the Dennis Maes Pueblo Judicial Building. A clear delineation of responsibilities between facilities is essential to ensure accurate staffing models, compliant clinical operations, and consistent proposal pricing across all respondents; therefore, please confirm whether all intakes and booking functions will be fully transitioned to and performed at the new detention center under this contract.

If so, please explicitly confirm that the successful provider will have NO RESPONSIBILITY for staffing, services, and/or operational support at the Dennis Maes Judicial Building.

All detention center operations will be at the new facility, other than court security, which there is no medical.

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*****END*****