COB - BOSAIR FORM

09/04/2025 12:22 PM (MST)



NO

Welcome to the Board of Supervisors Agenda Item Report (BOSAIR) Form.

This form is used to submit agenda items for Board of Supervisors consideration, including contracts, awards, grants, amendments, and other official actions.

All fields are required. Enter N/A if not applicable. For number fields, enter 0 if not applicable.

Record Number: PO DCS PO2400003903

Award Type:

Contract

Requested Board Meeting Date:

09/16/2025

Signature Only:

Procurement Director Award /

Delegated Award:

N/A

Supplier / Customer / Grantor /

Subrecipient:

NaphCare, Inc.

Project Title / Description:

Correctional Health Services

Purpose:

Contract Amendment No.02 between Pima County and NaphCare, Inc. will renew the existing contract for an additional two (2) years and increase the contract funding by \$53,763,925.33. This amendment is made pursuant to A.R.S. § 36-511 to continue providing health care services for individuals booked at the Pima County Adult Detention Center (PCADC) and the Pima County Juvenile Detention Center (PCJDC).

Procurement Method:

Medical and Health Related Professional Services: Board of Supervisors Policy

D29.7.

Procurement Method Additional

Info:

Board of Supervisors Policy D29.7 - 1.4 (A)

Program Goals/Predicted

Outcomes:

Provision of comprehensive physical and mental health services to the populations of PCADC and PCJDC ensures compliance with the National Commission on Correctional Health Care (NCCHC) standards and allows Pima County to remain in compliance with A.R.S. 36-511.

Public Benefit and Impact:

Pima County has a legal responsibility to provide healthcare services to individuals held in detention.

Budget Pillar

N/A

Support of Prosperity Initiative:

N/A

Provide information that explains how this activity supports the selected Prosperity Initiative

N/A

TO: (03, 9-5-25(1) Vers 6

Metrics Available to Measure Performance:

The contract includes multiple Performance Indicators and Business Requirements that the County monitors and audits on a monthly basis.

R	0	tr	n	a	C	ti	V	e	
	•		•	o.	•				

NO

Amendment / Revised Award Information

All fields are required. Enter N/A if not applicable. For number fields, enter 0 if not applicable.

Record Number: PO DCS PO2400003903

Document Type:

PO

Department Code:

DCS

Contract Number:

PO2400003903

Amendment Number:

02

Commencement Date:

10/01/2025

Termination Date:

09/30/2027

Is the Termination Date new?

YES

NO

Classification:

Expense

Adjust Level:

Increase

Prior Contract Number (If

Applicable):

CT-BH-23*050

Amount This Amendment:

\$53,763,925.33

Funding Source(s) required:

General Funds

Funding from General Fund?

If Yes Provide Total General Funds:

\$53,763,925.33

Percent General Funds

100

Contract is fully or partially funded with Federal Funds?

Detainee and Crisis Systems

Name:

Department:

Paige Knott

Telephone:

520-724-7515

Department Director Signature:

Deputy County Administrator Signature:

Date: 9.4.2025

Date: 9.5025

Date: 915 | 2025

Pima County Department of Detainee and Crisis Systems

Project: Correctional Health Services

Contract No.: PO2400003903

Contract Amendment No.: 02

Orig. Contract Term: 10/01/2022-09/30/2025 Termination Date Prior Amendment: 09/30/2025 Termination Date This Amendment: 09/30/2027

 Orig. Amount:
 \$62,870,323.15

 Prior Amendments Amount:
 \$2,016,148.31

 This Amendment Amount:
 \$53,763,925.33

 Revised Total Amount:
 \$118,650,396.79

1

CONTRACT AMENDMENT

The parties agree to amend the above-referenced contract as follows:

- 1. Background and Purpose.
 - 1.1. <u>Background</u>. On October 1, 2022, County and Contractor entered into the above referenced agreement to provide Correctional Health Services.
 - 1.2. <u>Purpose</u>. County requires the continuation of health care services for individuals booked at the Pima County Adult Detention Center (PCADC) and Pima County Juvenile Detention Center (PCJDC) pursuant to A.R.S. § 36-511.
- 2. Term. The County is exercising the first extension option to renew the contract for two additional years commencing on October 1, 2025 and terminating on September 30, 2027. If the commencement date is before the Effective Date of this amendment, the parties will, for all purposes, deem the amendment to have been in effect as of the commencement date.
- 3. Maximum Payment Amount. The maximum amount the County will spend under this Contract, as set forth in Section 8., is increased by \$53,763,925.33. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$118,650,396.79.
- **Scope of Services.** The parties have revised Exhibit A: Scope of Services Part | Pima County Adult Detention Complex as follows:
 - 4.1 Replace Attachment A1-3: Staffing Commitment PCADC with a new Attachment A1-3 Staffing Commitment (6 pages) effective 10/01/2025.
- 5. Compensation and Payment. The parties have revised Exhibit B: Pricing and Compensation, Part 1: Terms and Conditions Applicable to Pricing and Compensation as follows:

Contract No.: PO2400003903 AM#02

- 5.1 Replace Attachment B1-1 Pricing: Pima County Adult Detention Complex (PCADC) with a new B1-1 Pricing: Pima County Adult Detention Complex (PCADC) (1 page) effective 10/01/2025.
- 5.2 Replace Attachment B1-2 Business Requirements PCADC with a new B1-2 Business Requirements PCADC (1 page) effective 10/01/2025.
- 5.3 Replace Attachment B1-3 Invoice for Health Services PCADC with a new B1-3 Invoice for Health Services PCADC (1 page) effective 10/01/2025.
- 5.4 Replace Attachment B1-4 Summary Schedule of Staffing Costs PCADC with a new Attachment B1-4 Summary Schedule of Staffing Costs PCADC (1 page) effective 10/01/2025.
- 5.5 Replace Attachment B2-1 Pricing: Pima County Juvenile Detention Complex (PCJDC) with a new B2-1 Pricing: Pima County Juvenile Detention Complex (PCJDC) (1 page) effective 10/01/2025.
- 5.6 Replace Attachment B3-1 Pricing: Psychological Services for the Pima County Sheriff's Department with a new B3-1 Pricing: Pricing: Psychological Services for the Pima County Sheriff's (1 page) effective 10/01/2025.
- **Compensation and Payment.** The parties have revised Exhibit B: Pricing and Compensation, Part 2: Compensation as follows:
 - 6.1 Pharmacy Costs

 County has identified certain medications as "outlier medications." Contractor acknowledges that the community standard of care regarding outlier medications is that these medications are prescribed only upon the recommendation of a specialist in infectious disease, or a specialist in diseases of the blood, in the case of the blood disorder medications.
 - 6.1.1 Outlier medications used by Contractor for treatment of detainees or youth will be the responsibility of Contractor up to \$25,000 per episode of detention or incarceration and any amount in excess of \$25,000 per episode will be the responsibility of the County, billed and paid in addition to the Basic Services Fee due for the month in which the outlier medication invoice is provided to County. For purposes of outlier medications, an episode of care begins upon detention and ends upon release from the PCADC or PCJDC. Any subsequent detentions will be considered a new episode of care. In the event Contractor does not utilize any outlier medication in a particular month, it is not required to submit documentation to County and County will not withhold the Basic Services Fee based on Contractor's failure to submit outlier medication documentation.
 - 6.1.2 Each outlier medication is subject to the \$25,000 cap per episode of detention or incarceration, and the \$25,000 cap does not apply to an aggregate of all medications prescribed to a detainee during an episode, except that medications that are designed to be administered as a "cocktail" to treat a single health condition shall be considered a

- single outlier medication if the "cocktail" cost exceeds the \$25,000 cap.
- 6.1.3 County requires that Contractor bill County for such outlier medications at Contractor's cost, which is defined as Contractor's actual acquisition cost for medications, determined by the acquisition price listed on the submitted invoice received from Contractor's pharmaceutical affiliate, plus any invoiced delivery or dispensing fees, and/or rebates.
- 6.1.4 Contractor's outlier medication invoice provided to the County for outlier medications that exceed \$25,000 per episode at the PCADC or PCJDC will detail the detainee or youth identification number, the specific medication and dosage, approval from the appropriate specialist, the dates such medications were received, and provide proof, such as Contractor paid invoices totaling or exceeding \$25,000, to permit the County to audit the medication invoices.
- 6.1.5 HIV and Hepatitis C medications will be passed through to Pima County. NaphCare will continue to be responsible for supplying and administering HIV and Hepatitis C medications. The quantity and cost of these medications will be verified through the monthly Pharmacy Utilization Report. Pima County will reimburse NaphCare on a monthly basis for these costs.

This reimbursement model will remain in place until the 340B Drug Pricing Program is implemented through an amendment to this contract.

7. Early Termination for Transition to County-Operated Services

- 7.1 In the event Pima County elects, at its sole discretion, to assume direct responsibility for the provision of correctional health services, in whole or in part, currently provided under this Agreement, the County reserves the right to terminate this Agreement, or portions of the agreement as assumed by County prior to the expiration of the five-year term. The County shall provide NaphCare with no less than one hundred twenty (120) days' written notice of its intent to terminate the Agreement under this provision.
- 7.2 Upon receipt of such notice, NaphCare agrees to cooperate fully with the County to facilitate an orderly and efficient transition of healthcare services. This cooperation shall include, but is not limited to:
 - Participation in transition planning meetings with County staff and/or designated representatives;
 - Providing access to relevant records, reports, and documentation as permitted by law;
 - Facilitating the transfer of medical equipment and supplies, if applicable and as mutually agreed upon;
 - Assisting in the transition of staff, if required;
 - Continuing to provide uninterrupted services until the effective date of termination.
- 7.3 The parties shall work collaboratively to develop and implement a written transition plan within thirty (30) days of the County's termination notice. The transition plan shall outline key milestones, responsibilities, and timelines to ensure continuity of care and compliance with all applicable laws and regulations.

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

PIMA COUNTY	CONTRACTOR
	DA Da
Chair, Board of Supervisors	Authorized Officer Signature
	Foradford M-Lune CED
Date	Printed Name and Title
	9/3/2025 Date
ATTEST	
Clerk of the Board	
Date	
APPROVED AS TO FORM	APPROVED AS TO CONTENT
	MH
Deputy Edunty Attorney	Department Head
Jonathan Pinkney	9/3/25
Print DCA Name	Date /
a13/2C	

ATTACHMENT A1-3 (6 pages) CONTRACTOR ONSITE STAFFING COMMITMENT EFFECTIVE DATE: 10/1/2025

				Total	Hours Pe	r Day					
PCADC Health Care Staffing Plan	Shift Hours	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total Hrs./Wk.	Annual Hours Committed	# FTEs (weekly / 40)
Main Jail Booking/Intake (24x7)											
Specify Position Title:											
RN Intake	1st Shift	24	24	24	24	24	24	24	168	8,736	4.2
LPN/EMT Intake	1st Shift	12	12	12	12	12	12	12	84	4,368	2.1
Master Level MH Prof - Licensed - Inlake	1st Shift	8	8	8	В	8	8	8	56	2,912	1.4
Master Level MH Prof - Licensed - Intake	2nd Shift	8	8	8	8	8	8	8	56	2,912	1.4
RN Intake	3rd Shift	24	24	24	24	24	24	24	168	8,736	4.2
LPN/EMT Intake	3rd Shift	12	12	12	12	12	12	12	84	4,368	2,1
Master Level MH Prof - Licensed - Intake	3rd Shift	8	8	8	8	8	8	8	56	2,912	1.4
NP/PA	10a-10p	. 12	12	12	12	12	12	12	84	4,368	2.1
Sub Total, this Functional Area	1	108	108	108	108	108	108	108	756	39,312	
Detox Unit (Male and Female)											
Specify Position Title:					·						
RN Detox Unit - Male and Female	1st Shift	12	12	12	12	12	12	12	84	4,368	2.1
RN Detox Unit - Male and Female	Shift	12	12	12	112	12	12	12	84	14,388	23
Sub Total, this Functional Area		24	24	24	24	24	24	24	168	8,736	4.2

Medication Assisted Treatment (MAT	Program)										
Specify Position Title:											
MAT LPN	1st Shift	24	24	24	24	24	24	24	168	8,736	4.2
MAT RN	1st Shift		8	8	8	8	8		40	2,080	1
MAT PAINP	1st Shift		8	В	8	8	8		40	2,080	1
Sub Total, this Functional Area		24	40	40	40	40	40	27	248	12896	6.2
Main Jail Medication Administration											
Specify Position Title:											
LPN Med Pass	1st Shift	40	40	40	40	40	40	40	280	14,560	7
LPN Med Pass	2nd Shift	40	40	40	40	40	40	40	280	14.560	7
Sub Total, this Functional Area		80	80	80	80	80	80	80	560	29,120	14
Specify Position Title: RN/Sick Call	1st Shift	12	12	12	12	12	12	12	84	4,368	2,1
RN Sick Call	Shift 3rd	12	12	12	12	12	12	12	84	4368	2.1
Physician Assistant / Nurse Practitioner - Sick	Shift 1st		Sec. Sec. Sec.						CONTRACTOR STATE		
Call/Triage/Chronic Care	Shift	8	8	16	16	16	8	8	80	4,160	2
Physician Assistant / Nurse Practitioner – Sick Call/Triage	2nd Shift	8	8			8	8	8	40	2,080	1
Medical Assistant – Phlebotomy – Sick Call/Triage	1st Shift		8	8	8	8	8		40	2,080	1
Sub Total, this Functional Area		40	48	48	48	56	40	40	328	17056	8.2
Infection Control											
Specify Position Title:								-		1	
Infection Preventionist	1st Shift		8	8	8	8	8		40	2,080	1
ID / Immunization MA	1st Shift		8	8	8	8	8		40	2,080	1
Sub Total, this Functional Area		0	16	16	16	16	16	0	80	4160	2

Main Jail Other Triage and Treatment							***************************************				
Specify Position Title:											
RN Supervisor	1st Shift	12	12	12	12	12	12	12	84	4,368	2.1
RN Supervisor	3rd Shift	12	12	12	12	12	12	12	84	4,368	2.1
RN Main Clinic	1st Shift	12	12	12	12	12	12	12	84	4.368	2.1
RN Main Clinic	3rd Shift	12	12	12	12	12	12	12	84	4,368	2.1
Physical Therapist	1st Shift						8		8	416	.2
NP / PA Women's Health	1st Shift		8	8	8	8	8		40	2,080	1
Sub Total, this Functional Area		48	56	56	56	56	64	48	384	19968	9.6
Main Jail Medical Observation Unit Ca	re										
Specify Position Title:											
RN Medical Observation Unit	16t Shift	12	12	12	12	12	12	12	84	4,368	2.1
LPN Medical Observation Unit	1st Shift	8	8	8	8	8	8	8	56	2,912	1.4
MA Medical Observation Unit / Unit 6	1st Shift	8	8	8	8	8	8	8	56	2,912	1.4
RN Medical Observation Unit	3rd Shift	12	12	12	12	12	12	12	84	4,368	2.1
Sub Total, this Functional Area		40	40	40	40	40	40	40	280	14560	7
Main Jail Mental Health ServicesGer	neral Popul	ation	1				T				
Specify Position Title:	4-1						-				
Psychiatric Nurse Practitioner	1st Shift		7	7	7	7	7		35	1,820	0.88
Master Level MH Prof - Licensed (Outpatient)	1st Shift		24	24	24	24	24		120	6,240	3
Master Level MH Prof - Licensed (Segregation)	1st Shift		8	8	8	8	8		40	2,080	1
Master Level MH Prof - Licensed (Outpatient)	2nd Shift		8	8	8	8	8		60	3,120	1
Bachelor Level MH Professional (BHT) Outpatient	1st Shift	8	В	8	В	8	8	8	56	2,912	1.4
Sub Total, this Functional Area		8	55	55	55	55	55	8	311	16172	7.28

	C MCMai I	lealth Uni	[
Specify Position Title:											
Psychiatrist - Mental Health Unit	1st Shift		5		5		5		15	780	0.38
Psychiatric Nurse Practitioner - Mental Health Unit	1st Shift	8	8	8	8	8	8	8	56	2,912	1.4
Master Level MH Prof - Licensed - Mental Health Unit	1st Shift	8	8	8	8	8	8	8	40	2.080	1.4
Bachelor Level MH Professional - Mental Health Unit	1st Shift	8	8	8	8	8	8	8	56	2,912	1.4
MH RN - Mental Health Unit	fat Shitt	12	12	12	12	12	12	12	84	4,368	2.1
Master Level MH Prof - Licensed - Mental Health Unit	2nd Shift		4	4	4	4	4		20	1,040	0.5
Bachelor Level MH Professional - Mental Health Unit	2nd Shift	8	8	8	8	8	8	8	56	2,912	1.4
MH RN - Mantali Health Unit	3rd Shift	12	12	12	12	12	12	12;	84	4 368	2,1
MH Clerk	1st Shift		24	24	24	24	24		120	G,240	3
Sub Total, this Functional Area		48	89	84	89	84	89	56	531	27,612	13.68
Main Jail Mental Health ServicesS Specify Position Title:	Sub-Acute	(Step dow	n) Ment	al Healt	h Unit						
	1st Shift	(Step dow	n) Ment	al Healt	h Unit	4	4		20	1,040	0.5
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute	1st Shift 1st Shift	(Step dow				4 8	4 8		20	1.040	0.5
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute	1st Shift 1st Shift 1st Shift	(Step dow	4	4	4						
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute	1st Shift 1st Shift 1st Shift 1st Shift 1st Shift	(Step dow	4 8	4 8	4 8	8	8	8	40	2,080	
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute	1st Shift 1st Shift 1st Shift 1st Shift 2nd Shift		8 8	4 8 8	4 8 8	8	8	8	40	2,080	
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute Master Level MH Prof - Licensed - Mental Health	1st Shift 1st Shift 1st Shift 1st Shift 2nd		4 8 8 8	4 8 8 8	4 8 8	8 8 8	8 8	8	40 40 56	2,080 2,080 2,912	1.
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub	1st Shift 1st Shift 1st Shift 1st Shift 2nd Shift 2nd	8	4 8 8 8 8	4 8 8 8	4 8 8 8 4	8 8 8	8 8 4		40 40 56 20	2,080 2,080 2,912 1,040	0.
Specify Position Title: Psychiatrist - Mental Health Unit - Sub Acute Psychiatric Nurse Practitioner - Mental Health Unit - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute Master Level MH Prof - Licensed - Mental Health Unit - Sub Acute Bachelor Level MH Professional - MHU - Sub Acute	1st Shift 1st Shift 1st Shift 2nd Shift 2nd Shift	8 8 16	4 8 8 8 4 8 40	4 8 8 8 4 8 40	4 8 8 8 4 8 40	8 8 8 4 8	8 8 8 4 8	8	40 40 56 20 56 232	2,080 2,080 2,912 1,040 2,912 12,064	1.

Psychiatrist - RTC Coordination and Tracking	1st Shift		4	4	4	4	4		20	1,040	0.5
Sub Total, this Functional Area		0	4	4	4	4	4	0	20	1,040	0.5
Dental Services											
Specify Position Title:											
Dentist	1st Shift		8	В	8	8	8	10	52	2,704	1.25
Dental Assistant	1st Shift		8	8	8	8	8	10	80	4,160	1.25
Dental Hygienist	1st Shift		8						8	416	0.2
Sub Total, this Functional Area		0	32	28	24	28	28	20	140	7,280	2.7
Imaging Services											
Specify Position Title:	1										
Radiology Tech	1st Shift		4	4	4	4	4		20	1.040	0.5
Sub Total, this Functional Area	Onit	0	4	4	4	4	4	0	20	1,040	0.5
Release Planning	1st Shift		8	8	8	В	8		40	2080	
Release Planning Supervisor Release Planners	1st Shift		40	40	40	40	40		200	10400	5
Subtotal this Functional Area	1St Smit		48	48	48	40	40		360	12480	6
Debter and I motional vivo				,,,			10	J	500	12 100	
Total Direct Patient Care Staff		436	676	663	668	671	668	464	4418	223496	106.55
Leadership Personnel											
Specify Position Title:					T	T	1	Γ			
Health Services Administrator	1st Shift		8	8	8	8	8		40	2,080	1
Director of Nursing	1st Shift	-	8	8	8	В	8		40	2,080	1
Assistant Director of Nursing/Educator	1º1 Shift		8	8	8	8	8		40	2080	
Medical Director	1st Shift		8	8	8	8			32	2,080	0.8
Director of Behavioral Health	1st Shift		8	В	8	8	8		40	2,080	1
Chief Psychiatrist	1st Shift		8	8	8	8	8		40	2,080	1
RN - Special Population Clinical Navigator	1st Shift		8	8	8	8	8		40	2,080	

Sub Total, this Functional Area		0	56	56	56	56	56	0	272	14560	6.80
Medical Records Management	and Support Staff	-								-	
Specify Position Title:					T						
Administrative Assistant	1st Shift		8	8	8	8	8		40	2,080	1
Offsite Coordinator and Schedular	1st Shift		В	8	8	8	8		40	2,080	1
LPN Pharmacy Coordinator	1st Shift	8	8	8	8	8	8	В	56	2,912	1.4
Sub Total, this Functional Area		8	24	24	24	24	24	8	136	7072	3.4
Total Leadership and Support	2	8	80	80	80	80	72	8	408	21632	10.2
GRAND TOTAL	10	444	756	743	748	751	740	472	4826	245128	116.75

Clinical Positions are highlighted in blue

Cost-neutral amendments may be made to this attachment with written approval from the Pima County Detainee and Crisis Systems Director

ATTACHMENT B1-1 (I pcge) PRICING: PIMA COUNTY ADULT DETENTION COMPLEX (PCADC) EFFECTIVE: OCTOBER 1, 2025

			Year 1		Year 2		Year 3 Revised (2 mon)	Year 3	Revised (18 mon)		Yeaf 4		Year 6			Totals
Line #	Expense Category	10/1/	22 - 9/3 D/23	1	BM123 - 9/30/24	_	10/1/24 - 9/30/25	12/	01/24 - 09/30/25	_1	0/1/25 - 09/30/26		10/1/26 - 09/30/27	_	10/1	122 - 9/30/27
1	On Sire Personnel, Based on Budgeled Staffling Commitment and Summary Schedule of Staffling Costs.	5	11,265,024.15	\$	11,602,974.88		\$ 1,991,844.02	s	11,786,900.98	s	15,275,823.67	\$	16,345,131.33		S	68,267,6 9 9.04
2	Relief Congensation	s	925,309 40	\$	953, 151 08		\$ 163,624 26	s	1,006,588.83	5	1,304,539.12	5	1.395,856 86		s	5,749,149.56
3	Medications and Pharmoceutical Services	S	1,881,431.25	S	1,937,874 19		S 332,668.40	s	1,563.342.01	\$	1,433,761 24	s	1,534,124 53		S	8,783,201 62
4	Offsite Services (inpatientand outpatient)	s	700,000.00	S	721,000.00		\$ 123,771 07	s	618,858 33	5	802,040.40	S	858,183 23		\$	3,823,853 63
5	Laboratory Costs	s	150,620 90	\$	165,439.53		\$ 28,440.45	s	142,002.26	s	184,034.93	s	196,917.37		\$	877,455.44
G	Other Medical Expenses (including imaging, supplies, etc.)	s	203,111.70	\$	209,205.06		\$ 35,913 53	s	179,567 67	s	232,719.70	s	249,01007		s	1,109,527 71
7	Slart Up Costs		NA		NA		NA		NA .		NA		NA			NA
8	IT Costs	s	159,300 00	s	164,079.00		\$ 28,166.89	s	140,834.48	S	182,521,48	5	195,297 98		s	670,199.83
9	Inswance Expense	s	506,92000	\$	522,127.60		\$ 89,63190	s	44B,150.53	s	1,289,908 92	1	1,380,202.55		s	4,236,950.50
10	Deloxitication Services	\$	24,000 00	s	24,720.00		\$ 4,243.60	s	21,218 00	\$	27,498.53	5	29,423 42		S	131,103.55
11	MAT Services	s	50,000,00	2	51,500.00		S 8,840.83	ş	44,204 17	s	57,288 60	1	61,29880		s	273.13240
														The second secon		
12	Subtotal Health Services Expenses	\$	15,875,797.41	\$	16,352,071.33		\$ 2,807,105.54	\$	16,051,676.24	5	20,790,136.59		\$ 22,245,446.15		\$	94,122,273.27
13	Administrative Expenses	[5	2,462,419.15	[\$	2,536,291.72		\$ 435,396.78	\$	2,176,983.73		2,021,370.92] [\$ 3,018,866.88]	[\$	13,451,329.15
14	Total Basic Service Fee for PCADC	5	18,338,218.56	[]	18,888,353,05		3,242,502.25	\$	18,228,669.97		23,611,607.51] [\$ 25,264,313.03]	ī	107,673,602.42

Note 1: This Worksheet should include pricing for all costs of detainees in the custody of the Sheriff's Department and housed at the Pirna County Adult Detail in Complex.

Note 2: MUST BE FIRM, FIXED, FULLY LOADED PRICE BASED CHALLIC OSTSFOR WHICH CONTRACTOR EXPECTS PAYMENT, WITHOUT EXCEPTION

ATTACHMENT B1-2 (1 page) BUSINESS REQUIREMENTS - PCADC EFFECTIVE: OCTOBER 1, 2025

Requirement #	Business Requirement	Threshold	Financial Consequences of not Meeting Business Requirement
1	Maintain NCCHC accreditation, if the cause for losing accreditation was within CONTRACTOR's control.	100%	\$50,000 upon losing accreditation and \$100,000 for each additional year in which PCADC is not accredited.
2	Notify the County's Correctional Health Quality Management Team of a death or Serious Adverse Event within 24 hours.	100%	\$5,000 per occurrence.
3	Notify the County of an inpatient admission within 24 hours of admission.	100%	\$2500 per occurrence and Contractor will be fully responsible for all costs that would otherwise have been paid by Medicaid when applicable.
4	Notify the County of an inpatient admission of an out-of-County RTC detainee within 8 hours of admission.	100%	Actual cost for hourly custody supervision and the actual claim amount.
5	No dismissals of Civil Commitment petitions due to untimely psychiatric evaluations or failure to appear to testify in Court hearings.	100%	\$1,000 per occurrence.
6	Acknowledge County notification of Quality Management deficiency within 3 business days and present an Action Plan to address deficiency within two weeks from receipt of notification from County.	100%	\$5,000 per deficiency - acknowledgement or Action Plan but not both.
7	Comply with the requirement in 15.13.16 in Exhibit A, Part I, to have at least one staff member in a leadership position for both medical and behavioral health present from 8 am to 5 pm Monday - Friday.	100%	\$5,000 per occurrence.
8	Notify Pima County Detainee and Crisis Systems within 24 hours of discovery of any lapse or expiration of or adverse action taken against any licensure or certification for any health staff member.	100%	\$1,000 per occurrence
9	Send to County notice of departure of Leadership Positions at least two weeks before the position becomes vacant or as soon as Contractor is aware of the vacancy if Contractor did not receive prior notice.	100%	\$1,000 per occurrence
10	Obtain written approval from PCADC Administration and Detainee and Crisis Systems prior to hiring any Leadership Position.	100%	\$5,000 per occurrence
11	Evaluating psychiatrist shall submit documentation of any court-ordered evaluation to the designated facility staff within five (5) calendar days of the evaluation."	100%	\$7,500 per occurrence

ATTACHMENT B1-3 (1 page) INVOICE FOR HEALTH SERVICES – PCADC EFFECTIVE: OCTOBER 1, 2025

Name of Contractor:

Date of Invoice: <INSERT DATE>

Reporting Period Beginning: <INSERT DATE> and Ending <INSERT DATE>

#	İtern	Basic Service Fee	Other Adjustments
1	Basic Service Payment (monthly contracted amount)		
2	Adjustment for Failure to Achieve Staffing Commitment (report showing actual staffing hours compared to budgeted staffing hours in format approved by the County must accompany this invoice)		
3	Adjustment for Claims paid on behalf of Contractor for offsite services (County will enter this line)		
4	Adjustment for liquidated damages from audit of performance indicators (County will enter this line)		0
5	Adjustment for meeting performance indicators and exceeding quality of care indicators (County will enter this line)		
6	Adjustment for liquidated damages from audit of business requirements (County will enter this line)		
7	Adjustment for outlier medications where the cost per episode of care exceeds \$25,000		
8	Adjustment for provision of Medication Assisted Treatment (MAT) Services		
9	Adjustment for provision of Detox services		
10	HEP C Pass Through	計畫學的	
11	HIV Pass Through		
12	Other:	第一次,	
13	Equals: Total Monthly Adjustments	E NOME	•

14	Grand Total Amount due for Reporting Period (Line	\$ -]		
		Original Contract/ Amended Amount	Previous Amounts Billed	Current Amount Billed	Remaining Contract Balance
15	Cumulative Monthly Usage Report			s .	s -

ATTACHMENT B1-4 (1 page) SUMMARY SCHEDULE OF STAFFING COSTS - PCADC EFFECTIVE: OCTOBER 1, 2025

Position Title	Yes	r 4 Salary B	enefits		Year 4 Rei	ef Compensation	Yes	r 5 Salary B	enefits		Year 5 Relie	ef Compensation
OG Contract	Hourly Budgeted Rate			Hourly rate		annual budgeted compensation		Paid FTEs		Hourly rate	annual hours	annual budgeted compensation
Ou contract										Service Control		STATE OF THE PARTY
Administrative Assistant	\$37.96	1.00	\$78,956	\$0.00		\$0	\$40.62	1.00	\$84,482	\$0.00		\$0
Bachelor's Mental Health	\$51.16	7.00	5744,871	\$51.16	1,400	\$71,622	\$54.74	7.00	\$797,012	\$54.74	1,120	\$61,309
Professional												
Behavioral Health	\$82.59	1.00	\$171,782	\$0.00		\$0	\$88.37	1.00	\$183,806	\$0.00	-	\$0
Director												
Chief Psychiatrist	\$310.85	1.00	\$646,559	\$0.00		\$0	\$332.60	1.00	5691,818	\$0.00		\$0
Certified Nursing	\$31.88	0.00	50	\$0,00		\$0	\$34.11	0.00	\$0	\$0.00		\$0
Assistant				531.88		\$7.369	(24.14	. 25	\$88,677	534.11	250	\$8,527
Dental Assistant	\$31.88	1.25	\$82,875	533.88	250	57,365	\$34.11	1.25	\$88,677	\$34.11	250	\$8,527
Dental Hygienist	\$53.67	0.20	\$2 2,326	\$53.67	40	\$2,147	\$57.42	0 20	\$23,889	\$57.42	40	\$2,297
Dentist	\$132.90	1.25	\$345,535	\$132.90	250	533,224	\$142.20	1.25	\$369,722	\$142.20	250	\$35,550
Director of Nursing	\$72.39	1.00	\$150,571	\$0.00		\$0	\$77.46	1.00	\$161,111	\$0.00		\$0
Discharge Planner Super	\$60.03	1.00	\$115,606	\$60.03	200	\$12,005	\$64.23	1.00	\$133,595	\$64.23	200	\$12,846
Discharge Planner	\$49.78	5.00	\$517,752	\$49.76	1,000	\$49,784	\$53.27	5.00	\$553,995	\$53.27	1,000	\$53,269
Health Services Administrator	\$90.24	1.00	\$187,701	\$0.00		\$0	\$96.56	1.00	\$200,840	\$0,00		\$0
IT Liaison	\$0.00	0.00	\$0	\$0.00		\$0	\$0.00	0.00	\$0	\$0.00		\$0
Licensed Practical Nurse	\$48.33	25.20	\$2,533,265	\$48,33	5,040	\$243,585	\$51.71	25.20	\$2,710,594	\$51.71	5,040	\$260,634
MAT LPN	\$47.30	0.00	\$0	50.00		\$0	\$50.62	0.00	\$0	\$0.00		\$0
LPN Med Pass	\$51.13	0.00	\$0	50.00		50	\$54.71	0.00	\$0	\$0.00		50
LPN Med Pass PM	\$53.34	0.00	\$0	\$0.00		\$0	\$57.08	0.00	\$0	\$0.00		\$0
Master's MHP Licensed	\$42.37	12.60	\$1,110,450	*\$42.37	2,520	\$106,774	\$45.34	12.60	\$1,188,181	\$45.34	2,620	\$118,782
NP/PA	\$77.27	7.10	\$1,141,136	\$77.27	1,420	5109,725	\$82.68	7.10	\$1,221,015	\$82.68	1,420	\$117,405
NP/PA Intake	\$63.41	0.00	\$0	\$0.00		şi	\$67.85	0.00	ŞC	\$0.00		\$0
NP/PA MAT	\$88.98	0.00	\$0	\$0.00		Şi	\$95.21	0.00	\$0	\$0.00		\$0
NP/PA Women's Health	\$93.30	0.00	\$0	50.00	Supplied to	SI SI	\$99.83	0.00	\$0	\$0.00		\$0
NP/PA Sick Call	\$95.74	0.00	\$0	\$0.00		SI	\$102.44	0.00	\$0	\$0.00		\$0
Medical Records Clerk/Offsite Coord	\$28 99	1.00	\$60,295	\$0.00		\$6	\$31.02	1.00	\$64,516	\$0.00		\$0
Medical Assistant	\$33.2	3.40	\$235,228	\$33.26	680	\$22,61	\$35.59	3.40	\$251,694	\$35.59	680	\$24,201
Medical Assistant -	\$30.93	0.00	\$0	\$0.00		Si	\$33.10	0.00	50	\$0.00	-	Şū
Medical Director	\$196.4	0.80	5326,919	\$0.00		S	\$210.22	0.80	\$349,803	\$0.00	-	\$0
Mental Health Clerk	\$33.2		\$207,553	\$33.26	600			3.00	\$222,08		600	The same of the sa
MH Registered Nurse	\$62.1	4.20	\$543,114	\$62.17	840			4.20	\$581,13		840	\$55,878
RN Intake	\$63.4	_	SO	\$0.00		5	\$67.89	0.00	Si			\$0
RN Intake	\$66.9	0.00	50	\$0,00		S	\$71.59	0.00	Si	\$0.0		\$6
OBGYN Clinician	\$0.0		\$0	\$0.00		ş		0.00	Şi	-		\$0
Psychiatric NP/PA	\$108.8	3.275	\$741,508	\$108 85	355	\$38,64	\$116.47	3.275	\$793,414	\$116.4	355	
Psychiatric NP/PA - GP	\$116.4	0.00	\$0	\$116.43	25	\$2,91	\$124.59	0.00	Si	\$124.5	25	
Psychiatric NP/PA - Acute	\$117.4	0.00	\$0	\$117.41	200	\$23,48	\$125.6	0.00	Şı	\$125,6	3 200	\$25,12
Psychiatrict NP/PA - Subacute	\$116.4	3 0.00	so	\$116.43	100	\$11,64	\$124.59	0.00	Si	\$124.5	100	\$12,45
Psychiatrist	\$286.4	5 1.375	\$819,242	\$286.45	275	\$78,77	\$306.5	1.375	\$876,58	\$306.5	275	\$84,28
Radiology Tech	\$44.1		\$45,913	\$44.15	100	The same of the sa		-	\$49,12			
Registered Nurse	\$62.1		\$3,646,620	562.17	5,640	\$350,63	\$66.5	-	\$3,901,88			\$375,18
RN Supervisor	\$67.6		\$591,159	\$67.67	840	\$56,84			\$632,54			
Substance Abuse Counselor	\$38.6		SD	\$0.00			\$41.3		\$	100000000000000000000000000000000000000	No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa	ş
Assistant Director of Nursing	69 0	7 1.00	\$143,657	\$0.00	200	s	\$73.9	1.00	\$153,71	3 \$0.0	0 -	5
Physical Therapy	63 4	1 0 20	\$26,377	\$0.00		\$	\$67.8	0.20	\$28,22	4 50.0		Ş
	63.4	116.75		30.00	21,97			116.75			21,59	
TOTALS		1 116.75	\$15,236,969		21,97	\$1,298,97	q	116.75	\$16,313,45	No. of the last of	21,59	\$1,379,11

ATTACHMENT B2-1 (1 page) PRICING: PIMA COUNTY JUVENILE DETENTION COMPLEX (PCJDC) Effective October 1, 2025

Expense Category		Year 1 10/1/2022 - 9/30/2023		Year2 10/1/2023 - 9/30/2024		Year 3 10/1/2024 - 9/30/2025		Year 4 10/1/2025 - 9/30/2026		Year 5 10/1/2026 - 9/30/2027			Totals 10/1/2022 - 9/30/27		
On Site Personnel. Based on Budgeled Staffing Commitment and Summary Schedule of Staffing Costs	\$	1,601,146.56		\$ 1,649,180.96		\$	1,698,656.39	\$ 1,834,548.90		\$	1,962,967.32		\$	8,746,500.14	
Relief Compensation	\$	121,922.40		\$ 125,580.07		\$	129,347.47	\$ 139,695.27		\$	149,473.94		\$	666,019.14	
Medications and Pharmaceutical Services	\$	17,875.00		\$ 18,411.25		\$	18,963.59	\$ 20,480.68		\$	21,914.32		\$	97,644.84	
Offsite Services (Inpatient and outpatient)	\$			\$.		\$		\$.		\$			\$		
Laboratory Costs	\$	12,648.00		\$ 13,027.4		\$	13,418.26	\$ 14,491.72		\$	15,506.14		\$	69,091.56	
Other Medical Expenses (including Imaging, supplies, etc.)	\$	55,858.00		\$ 57,533.74		\$	59,259.75	\$ 64,000.53		\$	68,480.57		\$	305,132.59	
Start Up Costs		NA		NA			NA	NA			NA			NA	
IT Costs	\$			\$.		\$		\$.		\$	-		\$		
Insurance Expense	\$			\$.		\$		\$.		\$			\$		
Subtotal Health Services Expenses	\$	1,809,450.00		\$ 1,863,733.4		\$	1,919,645.46	\$ 2,073,217.10		\$	2,218,342.29		\$	9,884,388.27	
Administrative Expenses	\$	156,233.04		\$ 160,920.0		\$	165,747.63	\$ 179,007.4		\$	191,537.96		\$	853,446.10	
Total Basic Services Feefor PCIDC	\$	1,965,683.00		\$ 2,024,653.4		\$	2,085,393.09	\$ 2,252,224.5		\$	2,409,880.25		\$	10,737,834.37	

ATTACHMENT B3-1 PRICING: PSYCHOLOGICAL SERVICES FOR THE PIMA COUNTY SHERIFF'S DEPARTMENT

Name of Contractor: NaphCare Arizona, LLC

	10/1/2025 - 9/30/2027
Rate per Applicant Interview/Evaluation	\$255.00
Rate per Return to Duty Interview/Evaluation	\$255.00
Hourly Rate for as required services performed by psychologist. Includes travel costs and	
incidentals.	\$85.00
Annual Dollar Cap for Service	\$113,000.00

Note 1: Evaluation rate assumes an average time required of 3 hours per evaluation. This Worksheet should include pricing for alt costs associated with conducting psychological evaluations for Applicants and Return to Duty for the Pima County Sheriff's Department

Note 2: Hourly rate corresponds to providing the ff Additional Psychological Services" Listed In #3 of the RFP Scope of Services, Part Ill

Note 3: MUST BE FIRM. FIXED, FULLY LOADED PRICE BASED ON ALL COSTS FOR WHICH CONTRACTOR EXPECTS PAYMENT, WITHOUT EXCEPTION