

FORSYTH COUNTY
BOARD OF COMMISSIONERS

REVISED
ITEM

MEETING DATE: AUGUST 10, 2015 AGENDA ITEM NUMBER: 12

SUBJECT: RESOLUTION AUTHORIZING EXECUTION OF AMENDMENT ONE TO THE AGREEMENT BETWEEN FORSYTH COUNTY AND CORRECT CARE SOLUTIONS, LLC FOR LAW ENFORCEMENT DETENTION CENTER INMATE HEALTH CARE SERVICES (FORSYTH COUNTY SHERIFF'S OFFICE)

COUNTY MANAGER'S RECOMMENDATION OR COMMENTS: Recommend Approval

SUMMARY OF INFORMATION:

See attached

ATTACHMENTS: YES NO

SIGNATURE: *J. Dudley Curtis, Jr.* DATE: August 5, 2015
COUNTY MANAGER

**RESOLUTION AUTHORIZING EXECUTION OF AMENDMENT ONE
TO THE AGREEMENT BETWEEN FORSYTH COUNTY AND CORRECT
CARE SOLUTIONS, LLC FOR LAW ENFORCEMENT DETENTION CENTER
INMATE HEALTH CARE SERVICES
(FORSYTH COUNTY SHERIFF'S OFFICE)**

WHEREAS, on July 23, 2012, the Forsyth County Board of Commissioners adopted a Resolution Awarding a Contract for Inmate Health Care Services for the Law Enforcement Detention Center and the Forsyth County Youth Center; and

WHEREAS, the contract was awarded to Correct Care Solutions, LLC in the estimated amount of \$11,704,208 for the period September 1, 2012 through August 31, 2015; and

WHEREAS, the 2012 Resolution authorized the contract to be extended at the expiration of the initial three-year term in one-year increments for up to seven additional years and that the contract price may be adjusted beginning September 1, 2016 and each additional year by an amount not to exceed the Annual Consumer Price Index identified therein; and

WHEREAS, the Sheriff's Office staff recommends that the Agreement be extended from September 1, 2015 through August 31, 2016 at the original contract price;

NOW, THEREFORE, BE IT RESOLVED that the Forsyth County Board of Commissioners hereby authorizes an extension of the Agreement between Forsyth County and Correct Care Solutions, LLC for Law Enforcement Detention Center inmate health care services, for one year from September 1, 2015 through August 31, 2016.

BE IT FURTHER RESOLVED that the Chairman or County Manager and Clerk to the Board are hereby authorized to execute, on behalf of Forsyth County and its Sheriff's Office, the attached amended Agreement between Forsyth County and Correct Care Solutions, LLC for inmate health care services at the Law Enforcement Detention Center for the period September 1, 2015 through August 31, 2016, at the original contract price, subject to a pre-audit certificate thereon by the County Chief Financial Officer, where applicable, and approval as to form and legality by the County Attorney.

BE IT FURTHER RESOLVED by the Forsyth County Board of Commissioners that the County Manager is hereby authorized to execute, on behalf of Forsyth County, subsequent contracts or contract amendments for these services within budget appropriations in the current and future fiscal years through August 31, 2022.

Adopted this 10th day of August 2015.


Inmate Healthcare at a rate of 50% Company responsibility and 50% County Responsibility with ~~no ceiling limit as written in the request for proposal.~~ ^a The contract cost to the County for this sharing arrangement ^{is} \$429,614.00 for the period of 09/01/15 through 08/31/16 plus 50% of all costs associated with off-site inmate healthcare up to \$475,958 unless this Agreement is amended in writing by the County Manager, which amendment will not be unreasonably withheld.

iii. For the period 09/01/15 through 08/31/16, the Per Diem Rate for population exceeding 751 during a one month period shall be \$1.35 which annual amount will not exceed \$20,000 unless this Agreement is amended in writing by the County Manager, which amendment will not be unreasonably withheld.

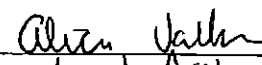
3. The terms and conditions of the original Contract, except as amended herein, shall remain in full force and effect.

IN WITNESS WHEREOF, the Company has caused this contract to be legally executed, in duplicate, each of which shall constitute an original, all as of the day and year first above written, with its County seal having been affixed hereto by its proper officers, all as provided by law.

CORRECT CARE SOLUTIONS, LLC

By: 
JORGE DOMINKIS
 (Printed Name)
 Title: President
 Date: 4.17.15


Attest

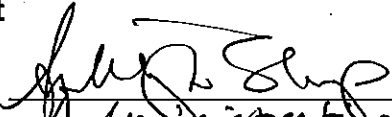
By: 
 Title: Legal Asst

(Forsyth County Signatures on Following Page)

IN WITNESS WHEREOF, the County has caused this contract to be legally executed, in duplicate, each of which shall constitute an original, all as of the day and year first above written, with its County seal having been affixed hereto by its proper officers, all as provided by law.

FORSYTH COUNTY SHERIFF'S OFFICE, NORTH CAROLINA

By: 
William T. Schatzman
(Printed Name)
Title: Sheriff
Date: 05/16/15

Attest
By: 
Title: Administrative Assistant

FORSYTH COUNTY, NORTH CAROLINA

By: _____

(Printed Name)
Title: County Manager
Date: _____

Attest
By: _____
Title: _____

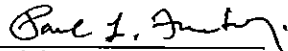
APPROVED AS TO FORM AND LEGALITY:

Assistant County Attorney

This instrument has been preaudited in the manner required by the Local Government Budget and Fiscal Control Act.

7/13/2015

Date


Director of Finance