

INSURANCE TRANSMITTAL SHEET

DATE: May 26, 2020

TO: BOARD OF SUPERVISORS

CONTRACT: SR 20-2943 CFMG 3 month extension

The attached insurance documents have been reviewed and meet all of the contract insurance requirements.



Nick Poole, Risk Manager

The attached contract and insurance documents have been reviewed and are being returned to the originating department because:

General Liability Insurance

- Insurance certificate not provided
- Coverage does not meet contract requirements
- Additional insured endorsement required
- Other: _____

Auto Insurance

- Insurance certificate not provided
- Additional insured endorsement required
- Insurance is not business rated
- Other: _____

Workers' Compensation Insurance

- Insurance certificate not provided

Errors & Omissions/Professional Liability Insurance

- Insurance certificate not provided
- Other: _____

Please call me at 265-7196 if you have questions regarding insurance requirements.



ADDITIONAL REMARKS SCHEDULE

AGENCY Marsh USA, Inc.		NAMED INSURED Wellpath Holdings, Inc. 1283 Murfreesboro Road, Suite 500 Nashville, TN 37217	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance**

WORKERS COMPENSATION

CMGC PCs

American Zurich Insurance Company
Policy # WC0540754-00
10/13/19 - 10/01/20

Workers Compensation - Statutory

Employers Liability - 1M/1M/1M

Named Insureds Include:

- California Forensic Medical Group Inc
- Colorado Correctional Medical Group PLLC
- Southeast Correctional Medical Group PLLC
- Southwest Correctional Medical Group PLLC

CCS PCs

- Zurich American Insurance Company
- 01/01/20 - 01/01/21
- Workers Compensation - Statutory
- Employers Liability - 1M/1M/1M
- GRWC117119 - Grand Prairie Health Services, New York Correct Care Solutions Medical Services, CCS Kastre NV Medical Services
- MIWC128637 - Midwest Center, PC
- CAWC138666 - California Health and Recovery Solutions, PC (fka California CCS, PC)
- GRWC117120 - Great Peak Healthcare Services, PC
- MAWC128636 - Massachusetts Correction Healthcare Services, PC
- NEWC110771 - New Garden Healthcare PC, Emerald Healthcare Services
- OLWC107257 - Old Empire Dental, Great Peak Dental
- OLWC107258 - Old Empire Psychology, PC
- STWC139180 - Stringfellow Correctional Dental, PA

ADDITIONAL NAMED INSUREDS INCLUDE:

- CCS-CMGC Parent Holdings, LP
- CCS-CMGC Intermediate Holdings2, Inc.
- CCS-CMGC Intermediate Holdings, Inc.
- Wellpath Holdings, Inc
- CCS-CMGC Holdings, Inc.
- Wellpath Group Holdings, LLC
- Correct Care Solutions Group Holdings, LLC
- Wellpath CFMG, inc.
- CFMG Holdings Corp.
- Wellpath Management, Inc
- Correctional Medical Group Companies, Inc.
- California Forensic Management Group, Inc.
- Southwest Correctional Medical Group, Inc.
- Wellpath, LLC
- Correct Care Solutions, LLC
- Health Cost Solutions, LLC
- Correct Care Holdings, LLC



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- Wellpath Recovery Solutions, LLC
- Correct Care, LLC
- Correct Care of South Carolina, LLC
- Correct Care Australia Pty, Ltd (Australia)
- League Medical Concepts, LLC
- League Medical Concepts, LP
- Jessamine Healthcare, Inc.
- Conmed Healthcare Management, LLC
- Conmed, LLC
- Correctional Mental Health Services, LLC
- Correctional Healthcare Holding Company, LLC
- CHC Companies, LLC
- CHC Pharmacy Services, LLC
- Physicians Network Association, Inc
- Correctional Healthcare Companies, LLC
- Healthcare Professionals, LLC
- Wellpath Recovery Solutions of Alaska, Inc.
- Northwest Correctional Medical Group, PLLC
- California Health and Recovery Solutions, PC (fka California CCS, PC)
- Massachusetts Correction Healthcare Services, PC
- Old Empire Dental, PC
- Great Peak Dental, PC
- Grand Prairie Health Services, PC
- CCS Kastre Nevada Medical, PC
- New York Correct Care Solutions Medical Services, PC
- Midwest Center, PC
- Old Empire Psychology, PC
- Great Peak Healthcare Services, PC
- New Garden Healthcare, PC
- Stringfellow Correctional Dental, PA
- California Forensic Medical Group, Inc.
- Colorado Correctional Medical Group, PLLC
- Southeast Correctional Medical Group, LLC
- Southwest Correctional Medical Group, PLLC



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
- GARAGE COVERAGE FORM
- MOTOR CARRIER COVERAGE FORM
- TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

<p>Named Insured: WellPath Holdings, Inc.</p> <p>Endorsement Effective Date: 10/13/2019</p>

SCHEDULE

<p>Name(s) Of Person(s) Or Organization(s): ONLY THOSE PERSONS OF ORGANIZATIONS FOR WHOM YOU ARE REQUIRED TO WAIVE YOUR RIGHTS OF RECOVERY UNDER THE TERMS OF A WRITTEN CONTRACT.</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

The **Transfer Of Rights Of Recovery Against Others To Us** Condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.



**HEALTH CARE FACILITY LIABILITY POLICY
REIMBURSEMENT FORM
BLANKET ADDITIONAL INSURED ENDORSEMENT**

POLICYHOLDER: CCS-CMGC Parent Holdings, LP

**ENDORSEMENT
EFFECTIVE DATE:** 03/15/20

POLICY NUMBER: ES1866

THIS ENDORSEMENT MODIFIES THE GENERAL LIABILITY COVERAGE PART AND THE PROFESSIONAL LIABILITY COVERAGE PART OF THE **POLICY** TO ADD ONE OR MORE ADDITIONAL INSUREDS.

The above-numbered **policy** is hereby modified as follows:

Each of the following is included as an additional insured under the above-described Coverage Part(s) of the **policy**, but only with respect to the vicarious liability arising solely and entirely out of the operations of the **policyholder**:

ADDITIONAL INSUREDS

All persons or organizations required by valid written contract with the **policyholder** to be named as additional insureds.



**AMENDMENT #3 TO CONTRACT WITH
California Forensic Medical Group, Inc.**

THIS AMENDMENT is executed this 23rd day of June, 2020 by and between California Forensic Medical Group, Inc. and COUNTY OF NEVADA. Said Amendment will amend the prior agreement between the parties entitled Medical, mental health and dental services to the adult and juvenile correctional facilities in Nevada County executed on the 26th day of January 2016 by Resolution No. 16-046.

WHEREAS, the parties desire to amend their agreement to allow or provide for the extension of the existing contract; and

WHEREAS, the agreed-upon cost for the three-month extension shall not exceed \$688,731.09; and

WHEREAS, the amendment will reflect cost changes for the upcoming fiscal year; and

NOW, THEREFORE, the parties hereto agree as follows:

1. This amendment shall be effective as of July 1st, 2020
2. That §3, contract termination date shall be changed from June 30, 2020 to September 30, 2020.
3. That the Schedule of Charges and Payments, Exhibit "B" shall be amended by replacing with attached Exhibit "B".
4. That in all other respects the prior agreement of the parties shall remain in full force and effect except as amended herein.

APPROVED AS TO FORM:
COUNTY COUNSEL

COUNTY OF NEVADA

By: _____
Katharine L. Elliott
County Counsel

By: _____
Honorable Heidi Hall
Chair of the Board of Supervisors

ATTEST:

CONTRACTOR:

By: _____
Julie Patterson Hunter
Clerk of the Board of Supervisors

By: Cindy P. Watson

EXHIBIT "8"

SCHEDULE OF CHARGES AND PAYMENTS

(Paid by County)

In consideration for the services as set forth in Exhibit "A", above, County shall pay Contractor an amount not to exceed \$688,731.09 divided into 3 equal monthly payments \$229,577.93 for the period July 1, 2020 to September 30, 2020 based on the following:

1. Average daily population of 234 adults and 10 juveniles.
2. Hospitalization, Emergency Room and Specialty Services limitation of \$15,000.00 per medical episode.
3. \$15,000.00 annual aggregate cap for AIDS, HIV, Hep C, organ Transplant, cancer and neuromuscular disease medications.
4. Provision of the staffing pattern as outlined under Staffing Plan.
5. Per diem of \$4.17 per day for each inmate exceeding the quarterly average inmate population of 244 for adults and juveniles combined.
6. No coverage for psychiatric hospitalizations.