

Healthcare Behind Bars: Building Better RFPs to Improve Care and Outcomes

April 3, 2025
1-2:30pm ET

Tech Reminders


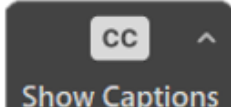
Questions/Chat

- Submit questions by typing them into the **Q&A pod** throughout the presentation.
- Use the **chat pod** to talk to interact with each other.

Recording

- This event is being recorded.
- The recording will be posted to the RFP Toolkit website.

Viewing Closed Captions

- Click the Captions  icon. You may need to tap the More icon first to see the option on the Zoom toolbar.
- Select English if prompted to choose a language. 

Today's Agenda

- Opening Remarks from the Field
- Project Team Introductions
- Why Focus on Correctional Healthcare?
- Overview of Project
- RFP Toolkit and Template Demonstration
- What's Next?
- Q&A

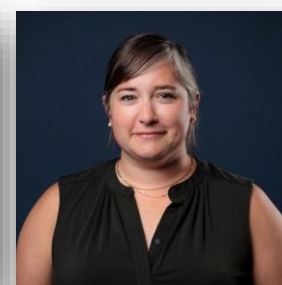
Opening Remarks

Michele Deitch, JD

- Distinguished Senior Lecturer
- Director, Prison and Jail Innovation Lab, LBJ School of Public Affairs, UT School of Law, The University of Texas at Austin



Project Team Introductions



- **Regina Huerter, MA, Ashley Krider, MS, and Lisa Maye, MSW**
 - Senior Project Associates, Policy Research Associates, Inc.

- **Marc F. Stern, MD, MPH**
 - American College of Correctional Physicians
 - U. Washington School of Public Health- Seattle

- **David Sinkman, JD**
 - Civil Rights Attorney
 - Former Assistant U.S. Attorney and the Opioid Coordinator and Civil Rights Coordinator for the U.S. Attorney's Office for the Eastern District of Louisiana

- **Barry Zack, MPH**
 - CEO, Corrections & Health, The Bridging Group





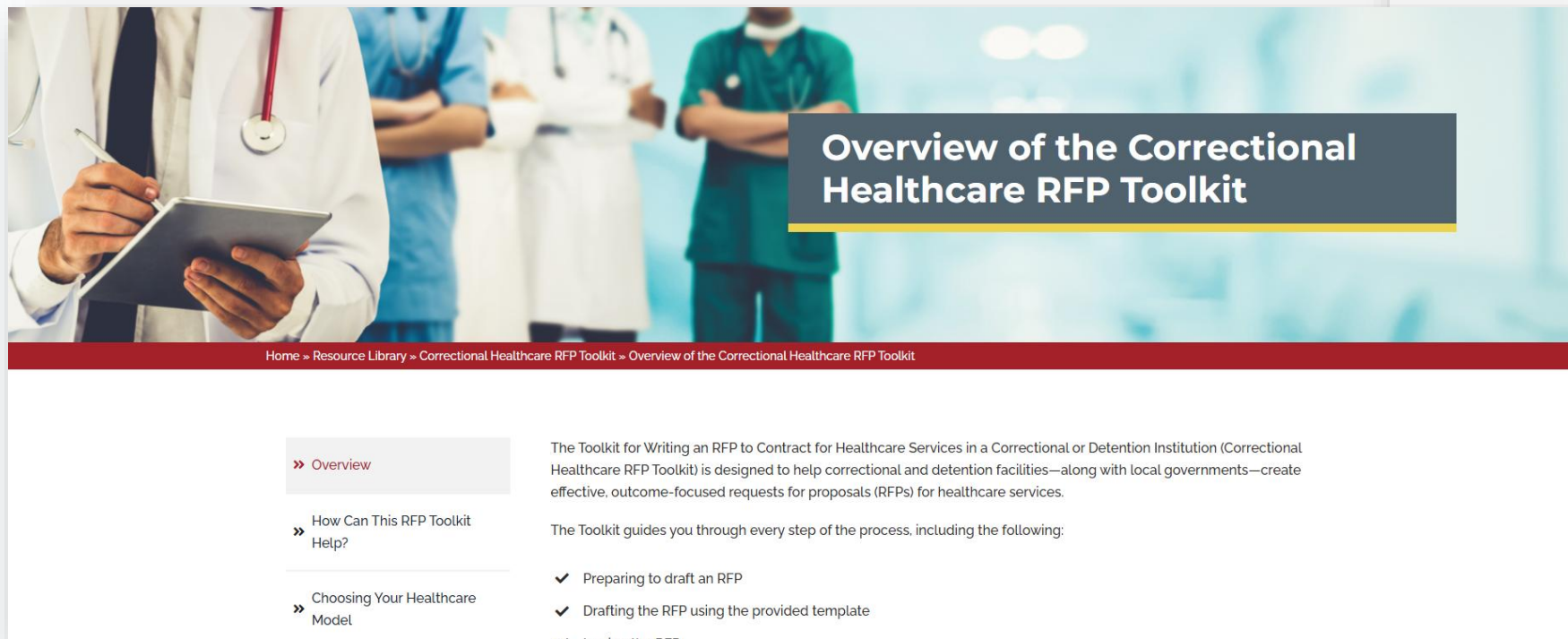
Poll: Who is Today's Audience?

Why Focus on Correctional Healthcare?

- People cycle through U.S. correctional/detention institutions more than 7M times each year.
- Medically complex population: higher rates of infectious and chronic diseases, mental illness, SUD, brain injury, and disabilities compared to the general population.
- Mass incarceration has shortened the overall U.S. life expectancy by almost 2 years.
 - People with an incarceration history less likely to receive preventative services.
- Unmet health/MH needs contribute to involvement (and repeat involvement) with the CJS.
 - Individuals who were arrested/booked >1x were over 3x more likely to have no health insurance than those with no arrests in the past year.
- Frequent headlines detail the challenges of providing constitutionally adequate health care.

Overview of Project

Toolkit for Writing an RFP to Contract for Healthcare Services in a Correctional or Detention Institution: RFP Template



Feedback incorporated from...



**NATIONAL COMMISSION
ON CORRECTIONAL HEALTH CARE**

**MacArthur
Foundation**



**NATIONAL SHERIFFS'
ASSOCIATION**

NIGP The Institute for
Public Procurement



BJA

Bureau of Justice Assistance
U.S. Department of Justice



National Voice for Local Corrections



**JAILS AND JUSTICE
SUPPORT CENTER**



Contents: *Toolkit for Writing an RFP to Contract for Health Care Services in a Correctional or Detention Institution*

- Instructions re: how to use the toolkit
 - From RFP draft to issuance; issuance to contract signing; managing the contract & amendments
- Vendor staffing
- Coordination, communication, & training
- Data & information sharing
- Cost modeling & billing
- Performance monitoring
- Scope of services: health, MH, dental, specialty care, women's health, SUD/MOUD, specific housing units, end-of-life care, medication, diet/nutrition, post-release care, etc.
- And more...



What's Next?

- Maintain as a living document
- Evaluation of use & potential research
- Feedback and requests for technical assistance



Access the RFP Toolkit & Template



<https://www.prainc.com/resource-library/correctional-healthcare-rfp-toolkit>



Q & A

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CREATING POSITIVE SOCIAL CHANGE

FOR PEOPLE AND COMMUNITIES THROUGH TECHNICAL
ASSISTANCE, RESEARCH, AND TRAINING



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