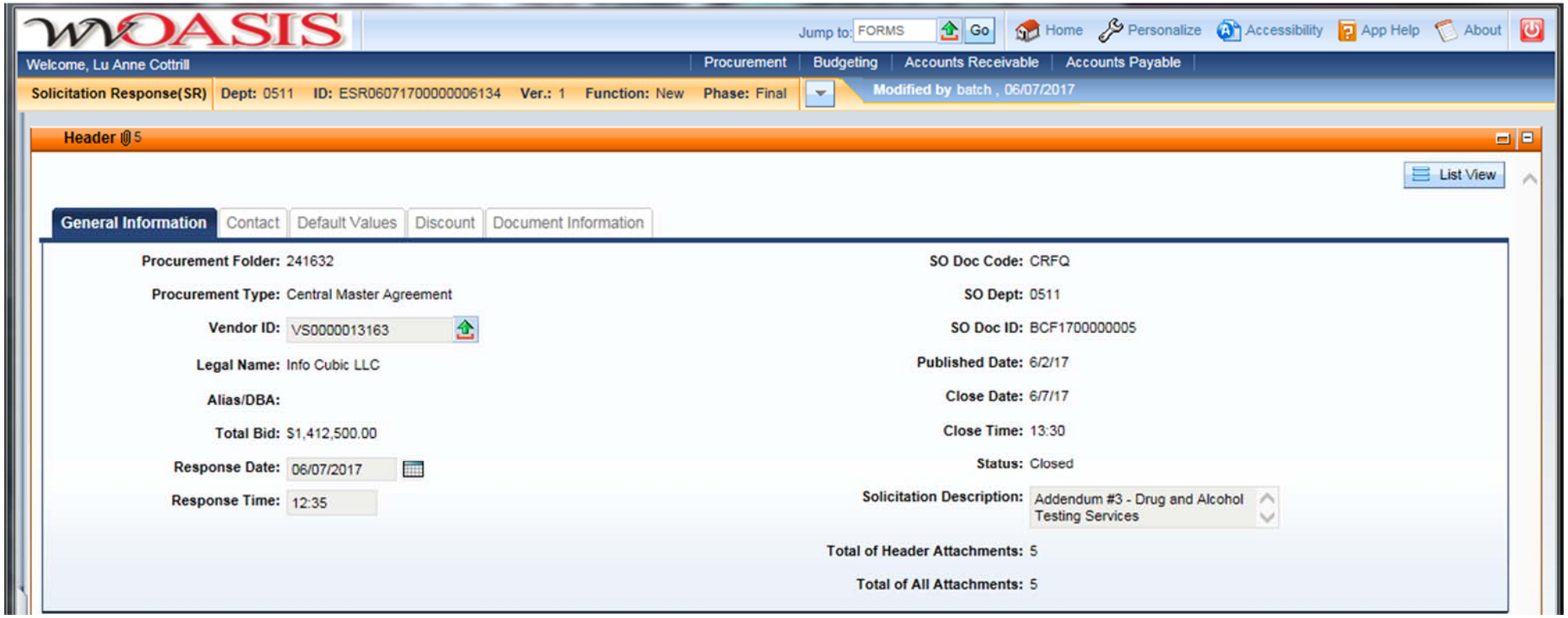
The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.


WVOASIS
Jump to: FORMS Go
Home
Personalize
Accessibility
App Help
About
Welcome, Lu Anne Cottrill
Procurement
Budgeting
Accounts Receivable
Accounts Payable
Solicitation Response(SR) Dept: 0511 ID: ESR06071700000006134 Ver.: 1 Function: New Phase: Final
Modified by batch , 06/07/2017
Header 5
List View
General Information
Contact
Default Values
Discount
Document Information
Procurement Folder: 241632
Procurement Type: Central Master Agreement
Vendor ID: VS0000013163
Legal Name: Info Cubic LLC
Alias/DBA:
Total Bid: $1,412,500.00
Response Date: 06/07/2017
Response Time: 12:35
SO Doc Code: CRFQ
SO Dept: 0511
SO Doc ID: BCF1700000005
Published Date: 6/2/17
Close Date: 6/7/17
Close Time: 13:30
Status: Closed
Solicitation Description: Addendum #3 - Drug and Alcohol Testing Services
Total of Header Attachments: 5
Total of All Attachments: 5

Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Solicitation Response

Proc Folder : 241632

Solicitation Description : Addendum #3 - Drug and Alcohol Testing Services

Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2017-06-07 13:30:00	SR 0511 ESR06071700000006134	1

VENDOR

VS0000013163

Info Cubic LLC

Solicitation Number: CRFQ 0511 BCF1700000005

Total Bid : $1,412,500.00 **Response Date:** 2017-06-07 **Response Time:** 12:35:18

Comments:

FOR INFORMATION CONTACT THE BUYER

April Battle

(304) 558-0067
april.e.battle@wv.gov

Signature on File **FEIN #** **DATE**

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Collection Expert Witness Testimony	10.00000	HOUR	$250.000000	$2,500.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.1 Collection Expert Witness Testimony

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	Laboratory Expert Witness Testimony	10.00000	HOUR	$500.000000	$5,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.2 Laboratory Expert Witness Testimony

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	MRO Expert Witness Testimony	10.00000	HOUR	$275.000000	$2,750.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.3 MRO Expert Witness Testimony

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Collection Expert Witness Testimony at Deposition	10.00000	HOUR	$250.000000	$2,500.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.4 Collection Expert Witness Testimony at Deposition

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
7	Laboratory Expert Witness Testimony at Deposition	10.00000	HOUR	$500.000000	$5,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.5 Laboratory Expert Witness Testimony at Deposition

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
8	MRO Expert Witness Testimony at Deposition	10.00000	HOUR	$275.000000	$2,750.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : 4.1.19.6 MRO Expert Witness Testimony at Deposition

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	Selected TANF Clients Drug Testing	5000.00000	TEST	$30.000000	$150,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : Selected TANF Clients Drug Testing

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
10	Selected TANF Clients Alcohol Testing	1000.00000	TEST	$32.000000	$32,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : Selected TANF Clients Alcohol Testing

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
11	Selected Other Clients Drug Testing	35000.00000	TEST	$30.000000	$1,050,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : Selected Other Clients Drug Testing

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
12	Selected Other Clients Alcohol Testing	5000.00000	TEST	$32.000000	$160,000.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description : Selected Other Clients Alcohol Testing

MROCC

Medical Review Officer Certification Council

Certifies that

STEPHEN J. KRACHT, D.O.

has successfully met all eligibility and examination criteria

and is hereby designated a

Certified Medical Review Officer

Effective this **30th** day of **JULY** **2013**

Expires on **30th** day of **JULY** **2018**

Certificate No.

[redacted]

Elizabeth Gresch MD
Chairman, Board of Directors

Michael D. Holland MD
Secretary, Board of Directors

Certificate of Accreditation

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

The Substance Abuse and Mental Health Services Administration

certifies that

Alere Toxicology Services, Inc.

Gretna, LA

NLCP Laboratory Number: 0083

has successfully completed the requirements
of the National Laboratory Certification Program for urine laboratories in accordance
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

Effective June 26, 1989

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

Frances M. Harding
Director
Center for Substance Abuse Prevention

Theodore F. Shults, MS, JD
Chairman
(919) 489-5407

Enclosures

American Association of Medical Review Officers

April 21, 2017

Verification of Certification for: Stephen J. Kracht, D.O.
Cynergy P.A.
8140 Ward Parkway
Kansas City MO 64114

Certification Number: [redacted]

Current Certification Date: April 20, 2017

Certification Expiration Date: **April 20, 2022**

This notice serves as verification that the above-referenced physician has been certified as a Medical Review Officer (MRO) through the American Association of Medical Review Officers (AAMRO).

For all physicians certified or recertified by AAMRO after October 1, 2010 will have to attend an MRO training program and take the exam. Recertification is required every five years to remain in good standing.

The referenced physician is listed in the AAMRO registry of Certified Medical Review Officers (www.aamro.com).

Theodore F. Shults, J.D., M.S.
Chairman

LabCorp
Laboratory Corporation of America

OCCUPATIONAL TESTING SERVICE

CERTIFICATIONS / LICENSURES

JULY 2016

1904 ALEXANDER DRIVE
RTP, NC 27709

Responsible Person (RP) – Phyllis Chandler
Michael Bachmann

CERTIFICATIONS / LICENSURES

Certificate of Accreditation

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

The Substance Abuse and Mental Health
Services Administration
certifies that

Laboratory Corporation of America Holdings

Research Triangle Park, NC
NLCP Laboratory Number: 0077

has successfully completed the requirements
of the National Laboratory Certification Program for urine laboratories in accordance
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

Effective December 7, 1988

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

DEPARTMENT OF HEALTH & HUMAN SERVICES • USA

Frances M. Harding
Director
Center for Substance Abuse Prevention

COLLEGE of AMERICAN PATHOLOGISTS

cap ACCREDITED®

The College of American Pathologists certifies that the laboratory named below

Laboratory Corporation of America
Clinical Toxicology
Durham, North Carolina
Michael R. Fox, MD

CAP Number: 7191443
AU-ID: 1431904
CLIA Number: 34D0877242

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to November 17, 2017 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

CENTERS FOR MEDICARE & MEDICAID SERVICES

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

LABORATORY CORPORATION OF AMERICA HOLD
1904 T W ALEXANDER DRIVE
RESEARCH TRIANGLE PARK, NC 27709

CLIA ID NUMBER

34D0877242

EFFECTIVE DATE

01/03/2016

LABORATORY DIRECTOR

MICHAEL R FOX M.D.

EXPIRATION DATE

01/02/2018

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

59 Certs2_120815

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)	EFFECTIVE DATE	LAB CERTIFICATION (CODE)	EFFECTIVE DATE
TOXICOLOGY (340)	01/03/2006		

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA
OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

100165573 - 1/0005396

1:14:371/956

LABORATORY CORPORATION
SELINA IHEANACHOR, QC MANAGER
1904 ALEXANDER DRIVE
RESEARCH TRIAN PARK, NC 27709-0000

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
RC0214510	03-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
1,2, 3,3N,4,5,	ANALYTICAL LAB	03-02-2016

LABORATORY CORPORATION
OF AMERICA HOLDINGS
SELINA IHEANACHOR, QC MANAGER
1904 ALEXANDER DRIVE
RESEARCH TRIAN PARK, NC 27709-0000

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
RC0214510	03-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
1,2, 3,3N,4,5,	ANALYTICAL LAB	03-02-2016

LABORATORY CORPORATION
OF AMERICA HOLDINGS
SELINA IHEANACHOR, QC MANAGER
1904 ALEXANDER DRIVE
RESEARCH TRIAN PARK, NC 27709-0000

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (4/07)

NORTH CAROLINA CONTROLLED SUBSTANCES REGISTRATION CERTIFICATE

Department of Health and Human Services

Raleigh, North Carolina

THE N.C. Controlled Substances Act of 1971 reads in part as follows:

90-103(a): A registration under G.S. 90-102 to manufacture, distribute, or dispense a controlled substance, may be suspended or revoked by the Commission upon a finding that the registrant:

(1) has furnished false or fraudulent information in any application filed under this Article;

(2) has been convicted of a felony under any State or federal law relating to any controlled substance; or

(3) has had his federal registration suspended or revoked to manufacure, distribute or dispose controlled substances.

DHHS Registration Number	This Registration Expires
NC-PC 0000 0574	10/31/2016

Schedules	Business Activity	Date Issued
1, 2, 2N, 3, 3N, 4, 5, 6	Lab	12/3/2015

Form DHHS-223

Department of Health and Human Services

Laboratory Corporation of America Holdings
Attn: Selina Iheanachor
1904 Alexander Drive
RTP NC 27709

This registration is not transferable on change of ownership, control, location or business activity

CERTIFICATE #: 294

LICENSE #: 5

State of Florida

AGENCY FOR HEALTH CARE ADMINISTRATION
DIVISION OF HEALTH QUALITY ASSURANCE

Forensic Toxicology Laboratory

This is to confirm that LABORATORY CORPORATION OF AMERICA HOLDINGS has complied with the applicable portions of s. 112.0455, laws of the State of Florida and with 59A-24, Rules of the State of Florida and is authorized to operate the following:

LABORATORY CORPORATION OF AMERICA HOLDINGS
1904 Tw Alexander Dr
Rtp, NC 27709-0153

Using the following specimen types: Blood, Urine

EFFECTIVE DATE: 10/01/2015

EXPIRATION DATE: 09/30/2017

Deputy Secretary, Division of Health Quality Assurance

New York State Department of Health

Clinical Laboratory Permit

PFI: 3747 CLIA: 34D0877242

Laboratory Corporation of America Holdings

1904 I W Alexander Dr

Research Triangle Pk NC 27709

Director:
Ntei Abudu Ph.D.

Owner:
Laboratory Corporation of America Holdings

is hereby authorized to perform laboratory procedures at the above location in the following categories in accordance with Article 5, Title V, Section 575 of the Public Health Law. This permit shall become void upon a change in the director, owner or location of the laboratory, and an application for a new permit shall be made to the Department.

Toxicology
Clinical Toxicology-Comprehensive
Forensic Toxicology-Comprehensive

Renewal
Effective Date: July 1, 2016
Expiration Date: June 30, 2017

Subject to Revocation
Permit Not Transferable

POST CONSPICUOUSLY

Serial: LAP 90897

DAVID Y. IGE
GOVERNOR OF HAWAII

VIRGINIA PRESSLER, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
STATE LABORATORIES DIVISION
2725 WAIMANO HOME ROAD
PEARL CITY, HAWAII 96782-1496

In reply, please refer to:
File: SLD/EHASB-DUI/SAT

June 29, 2016

Dr. Ntei Abudu
Laboratory Corporation of America Holdings
1904 T.W. Alexander Dr.
Research Triangle Park, N.C. 27709

Dear Dr. Abudu:

I am pleased to inform you that Laboratory Corporation of America Holdings, located at 1904 T.W. Alexander Dr., Research Triangle Park, N.C. 27709, is approved to do the following substance abuse testing of samples from the State of Hawaii:

1. Screening: Marijuana, Cocaine, Amphetamines, Opiates, Phencyclidine, Barbiturates, Methaqualone, Benzodiazepines, Propoxyphene, Methadone, and Alcohol.

2. Confirmation: Marijuana, Cocaine, Amphetamines, Opiates, Phencyclidine, Barbiturates, Methaqualone, Benzodiazepines, Propoxyphene, Methadone, and Alcohol.

The effective date is July 1, 2016, and the approval is valid until June 30, 2017, subject to the following stipulations:

1. Your laboratory remains certified by SAMHSA, U.S. Department of Health and Human Services;

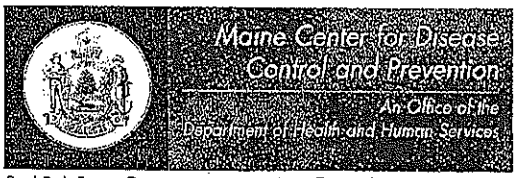
2. Your laboratory uses the same methodologies for samples from Hawaii, as used for SAMHSA samples; and,

3. Your laboratory follows Hawaii Administrative Rules 11-113, "Substance Abuse Testing by Laboratories" for testing samples from Hawaii, including the listed cut-off levels.

Sincerely,

A. Christian Whelen

A. Christian Whelen, Ph.D.
for Director of Health



Paul R. LePage, Governor Mary C. Mayhew, Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
Health and Environmental Testing Laboratory
221 State Street
12 State House Station
Augusta, Maine 04333-0012
Tel. (207) 287-2727; Fax (207) 287-6832; TTY (800) 606-0215

January 6, 2016

Ntei Abuda, Ph.D.
Laboratory Corporation of America Holdings
1904 Alexander Drive
PO Box 12652
Research Triangle Park, North Carolina 27709

Dear Dr. Abuda:

I am pleased to report to you that, Laboratory Corporation of America Holdings, has been relicensed by the Maine Department of Human Services as a **Substance Abuse Testing Laboratory** effective 01/10/16. This license qualifies Laboratory Corporation of America Holdings to perform workplace substance of abuse testing under the provisions of Title 26, MRSA, sub-chapter III-A.

This license is subject to renewal annually, and is subject to satisfactory performance in proficiency testing as defined in regulations under the above mentioned law. Certified copies of the proficiency test reports must be filed with this office within ten days of receipt. This department must also be notified of any changes in personnel, particularly the Director and Certifying Officer(s).

Under such time as a license form is printed and issued to you, this letter will serve to demonstrate your status under Maine law.

Please feel free to contact this office should you have any questions.

Sincerely,

Kenneth G. Pote, PhD
Chief, Lab Operations
Health & Environmental Testing Laboratory

License # SA002

Cc Christopher P. Montagna
Labor Standards

MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER
BLAND BRYANT BUILDING
55 WADE AVENUE
CATONSVILLE, MD 21228-4663

MEDICAL LABORATORY PERMIT

NUMBER: 444 EFFECTIVE PERIOD: 07/01/2014 - 06/30/2016

Pursuant to the provisions of TITLE 17, subtitle 2, Health-General Article § 17-201 et seq., Annotated Code of Maryland, this permit is issued to:

LABORATORY CORPORATION OF AMERICA
1904 T W ALEXANDER DRIVE
DURHAM, NC 27709

Director: MICHAEL FOX
Owner: LABORATORY CORPORATION OF AMERICA HOLDINGS

For the performance of Medical Laboratory Tests in the following disciplines:

Forensic Toxicology - Job Related Testi
Blood Drug Confirmation by GC/MS; GC/MS/MS; OR MS/MS, Blood Drug Screen - Single Use Test Device, Hair Drug Confirmation by GC/MS; GC/MS/MS; OR MS/MS, Hair Drug Screen - Single Use Test Device, Urine Drug Confirmation by GC/MS; GC/MS/MS; OR MS/MS, Urine Drug Screen - Single Use Test Device

Chemistry:
Toxicology - Drug of Abuse Level

CONTROL: 57259

Patricia Tomko May MD
Director

Falsification of a license shall subject the perpetrator to criminal prosecution and the impostition of civil fines.

STATE OF OKLAHOMA

Oklahoma State Department of Health

This is to certify that

Laboratory Corporation of America Holdings

Is Hereby Licensed to Conduct and Maintain a

Workplace Drug and Alcohol Testing Facility

Under the Name of

Laboratory Corporation of America Holdings

Located At:

1904 Alexander Drive

Research Triangle Park, NC 27709

Effective Date: 05/01/2016 Expiration Date: 04/30/2017

☑ Initial Drug Screening

☑ Urine ☐ Hair ☐ Saliva ☐ Blood

☑ Confirmatory Drug Testing

☑ Initial Alcohol Screening

☐ Breath ☑ Blood ☐ Saliva

☑ Confirmatory Alcohol Testing

This license is issued pursuant to the provisions of the Oklahoma Statutes and of the rules and regulations adopted by the State Board of Health. It is issued only for the premises named above and is not transferable or assignable.

License No. 8031

Licensuer Official

Terry Cline, Ph.D.

Terry Cline, Ph.D.
Commissioner

CLINICAL LABORATORY PERMIT

pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 020512A

Name and Director of Laboratory:

LABCORP OCCUPATIONAL TESTING SER
JAY M GEHLHAUSEN, PHD
1904 ALEXANDER DRIVE PO BOX 12652
RESEARCH TRIANGLE PARK, NC 27709

AUTHORIZED CATEGORIES:

CLINICAL CHEMISTRY
TOXICOLOGY - DRUGS URINE CONFIRMATORY
TOXICOLOGY - DRUGS URINE SCREENING

Owner:

LAB CORP OF AMERICA HOLDINGS

ISSUE DATE: August 15, 2015

DATE EXPIRES: August 15, 2016

Karen M. Murphy, PhD, RN

Karen M. Murphy Ph.D. RN
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

State of Rhode Island and Providence Plantations
DEPARTMENT OF HEALTH
OFFICE OF FACILITIES REGULATION

This is to certify that LABCORP OCCUPATIONAL TESTING SERVICES INC
1904 T.W. ALEXANDER DRIVE RESEARCH TRIANGLE PARK NC 27709
License Number: LCO00246

is hereby authorized to conduct and maintain an Out of State Clinical Laboratory in conformity with RIGL C23-16.2 and the standards, rules and regulations prescribed thereunder. This license is subject to biennial renewal unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please call (401) 222-2566 for more information.

APPROVED SPECIALTY (IES)

CHEMISTRY, Toxicology,

Seema Dixit, MS, MPH
Chief, Center for Health Facilities Regulations

Nicole Alexander-Scott, MD, MPH
Director of Health

Expires: 12/30/2017

Issued: 07/01/1999

VERMONT
DEPARTMENT OF HEALTH

State of Vermont Department of Health

The Vermont Department of Health has designated

Laboratory Corporation of America Holdings
Research Triangle Park, NC

to analyze the body fluids or materials listed below for drugs, in accordance with 21 V.S.A. Chapter 5, Subchapter 11, §514-16, 518, 520, for a period of one year from the date shown below.

URINE

Commissioner of Health

Laboratory Director

January 1, 2016
Date of Approval

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY | CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Dear Laboratory Director:

Attached below is your clinical laboratory license.
Your license is void after the expiration date below.

Expiration Date: November 11, 2016

LABORATORY CORPORATION OF AMERICA
1904 ALEXANDER DRIVE
RESEARCH TRIANGLE PARK NC 27709

DISPLAY:
State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:
State law requires that the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors. **YOUR LICENSE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE.**
You must submit a completed application for a new clinical laboratory license or registration within those 30 days or cease engaging in clinical laboratory practice. Mail written notification and/or application to the address indicated below.

California Department of Public Health
Laboratory Field Services, Facility Licensing Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Lab 142 Labclin (11-12)

Tear Here

Tear Here

State of California Department of Public Health

CLINICAL LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address or other site(s) on file with the department.

LABORATORY CORPORATION OF AMERICA
1904 ALEXANDER DRIVE
RESEARCH TRIANGLE PARK NC 27709

OWNER(S):
LABORATORY CORPORATION OF AMERICA

DIRECTOR(S):
MICHAEL R FOX MD

Lab ID Number: COS 00800256
Effective Date: November 13, 2015
Valid Until: November 11, 2016
CLIA Number: 34D0877242

Beatrice O'Keefe
Beatrice R. O'Keefe, Division Chief
Laboratory Field Services

Drugs of Abuse Certificate

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
LABORATORY IMPROVEMENT PROGRAM

This laboratory has been found to be in substantial compliance with all parts of KAR 28-33-12, and is approved to perform Drugs of Abuse testing in the State of Kansas.

LABORATORY CORPORATION OF AMERICA HOLDINGS, INC.
1904 Alexander Drive
Research Triangle Park, NC 27709

RODERICK L. BREMBY
Secretary
Department of Health and Environment

RICHARD HOWARD
Chief, Laboratory Improvement Program
Division of Health and Environmental Laboratories

69 FIRST AVENUE (1 ROCHE DR) RARITAN, NJ 08869

Responsible Person (RP) - Ajai Saini

CERTIFICATIONS / LICENSURES

Certificate of Accreditation

SAMHSA

The Substance Abuse and Mental Health
Services Administration
certifies that

Laboratory Corporation of America Holdings

Raritan, NJ
NLCP Laboratory Number: 0153

has successfully completed the requirements
of the National Laboratory Certification Program for urine laboratories in accordance
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

Effective July 23, 1990

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

Frances M. Harding
Director
Center for Substance Abuse Prevention

Advancing Excellence

Accredited Laboratory

The College of American Pathologists

certifies that the laboratory named below

Laboratory Corporation of America
Laboratory
Raritan, New Jersey
Araceli O. Borbon-Reyes, MD

CAP Number: 1216801
AU-ID: 1177560
CLIA Number: 31D0125232

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to September 15, 2016 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

CENTERS FOR MEDICARE & MEDICAID SERVICES

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

LABORATORY CORPORATION OF AMERICA HOLD
69 FIRST AVE
RARITAN, NJ 08869-1810

CLIA ID NUMBER

31D0125232

EFFECTIVE DATE

02/28/2015

LABORATORY DIRECTOR

ARACELI B REYES M.D.

EXPIRATION DATE

02/27/2017

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

165 Certs2_020315

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
BACTERIOLOGY (110)	07/27/1995
MYCOBACTERIOLOGY (115)	07/27/1995
MYCOLOGY (120)	07/27/1995
PARASITOLOGY (130)	07/27/1995
VIROLOGY (140)	07/27/1995
SYPHILIS SEROLOGY (210)	07/27/1995
GENERAL IMMUNOLOGY (220)	07/27/1995
ROUTINE CHEMISTRY (310)	07/27/1995
URINALYSIS (320)	07/27/1995
ENDOCRINOLOGY (330)	07/27/1995
TOXICOLOGY (340)	03/29/2003
HEMATOLOGY (400)	07/27/1995
ABO & RH GROUP (510)	07/27/1995

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
ANTIBODY TRANSFUSION (520)	08/29/2008
ANTIBODY NON-TRANSFUSION (530)	07/27/1995
ANTIBODY IDENTIFICATION (540)	08/29/2008
HISTOPATHOLOGY (610)	11/16/1998
ORAL PATHOLOGY (620)	09/20/2011
CYTOLOGY (630)	11/16/1998

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA
OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

New York State Department of Health

Clinical Laboratory Permit

PFI: 3208 CLIA: 31D0125232

Laboratory Corporation of America Holdings
69 First Avenue
Raritan NJ 08869

Director:
Araceli Borbon-Reyes, M.D.

Owner:
Laboratory Corporation of America Holdings

is hereby authorized to perform laboratory procedures at the above location in the following categories in accordance with Article 5, Title V, Section 575 of the Public Health Law. This permit shall become void upon a change in the director, owner or location of the laboratory, and an application for a new permit shall be made to the Department.

Andrology
(limited to semen analysis)
Bacteriology
Comprehensive
Cellular Immunology
Non-Malignant Leukocyte Immunophenotyping
Clinical Chemistry
Cytopathology
Gynecological Testing
Non-gynecological Testing
Diagnostic Immunology
Diagnostic Services Serology
Endocrinology
Hematology
Cellular Hematology
Coagulation
Cytohematology Diagnostic
Histopathology
General
Immunohematology
Mycobacteriology
Mycology
Oncology
Human Papillomavirus (HPV) Testing
Soluble Tumor Markers
Parasitology
Toxicology
Blood Lead-Comprehensive
Clinical Toxicology-Comprehensive
Forensic Toxicology-Comprehensive
Ther. Sub. Mon./Quant. Tox.
Virology

Renewal
Effective Date: July 1, 2016
Expiration Date: June 30, 2017

Subject to Revocation
Permit Not Transferable

POST CONSPICUOUSLY

Serial: LAP 90766

New Jersey Department of Health
DIVISION OF PUBLIC HEALTH AND ENVIRONMENTAL LABORATORIES

CLINICAL LABORATORY LICENSE

No. **00037905**

The following, pursuant to Chapter 166, P.L. of 1975, is hereby authorized to perform the below indicated services:

LABORATORY CORPORATION OF AMERICA -
69 FIRST AVE
RARITAN, NJ 08869

CLIS ID: **0000742**
Effective: 01/01/2016
To: 12/31/2016

AUTHORIZED SERVICES

- [x] Urinalysis
- [x] Bacteriology
  - [ ] Limited
- [x] Mycobacteriology
  - [ ] Class I
  - [ ] Class II
  - [x] Class III
  - [ ] Class IV
- [x] Parasitology
  - [ ] Limited
- [x] Mycology
  - [ ] Class I
  - [ ] Class III
  - [ ] Class II
  - [x] Class IV
- [x] Virology
- [x] Diagnostic Immunology
  - [x] Syphilis Serology
  - [x] General Immunology
- [x] Hematology
  - [ ] Limited
- [x] Immunohematology
  - [ ] Group and Type Only
- [x] Chemistry
  - [ ] Limited
- [x] Endocrinology
- [x] Toxicology
- [x] Cytology
- [ ] Collection Station Only
- [ ] Cytogenetics and/or Tissue Typing
- [ ] Collection Station Performing Waived Tests Only
- [ ] Other
  - [ ] Limited

TO BE CONSPICUOUSLY DISPLAYED AT LABORATORY

COMMISSIONER OF HEALTH

MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER
BLAND BRYANT BUILDING
55 WADE AVENUE
CATONSVILLE, MD 21228-4663

MEDICAL LABORATORY PERMIT

NUMBER: 474 EFFECTIVE PERIOD: 07/01/2014 - 06/30/2016

Pursuant to the provisions of TITLE 17, subtitle 2, Health-General Article § 17-201, et seq., Annotated Code of Maryland, this permit is issued to:

LABORATORY CORPORATION OF AMERICA
69 First Avenue
RARITAN, NJ 08869

Director: ARACELI BORBON-REYES
Owner: LABORATORY CORPORATION OF AMERICA HOLDINGS

For the performance of Medical Laboratory Tests in the following disciplines:

Microbiology
AFB Smear, Bacteriology Test, Blood Cultures, Campylobacter Culture, Chlamydia Antigen, Antibody, Clostridium Toxin, Cryptosporidium/Cyclospora, Cyclosporidium Ag, Dermatophyte Screen, DNA Probe CGT, Fecal Fat, GBS screen, GC Culture, Genital Culture, Giardia Antigen, Gram Stain, Group A Strep Screen (culture), Group A Strep Screen (non-culture), Group B Strep Culture, H. pylori Ag, non-urease, Influenza Antigen (nasal or throat swab), KOH Preparation, Mycobacteriology Test, Mycology Test, Occult Blood, Occult blood, gastric, Ova And Parasite, Parasite Identification, Parasitology Test, Pinworm Prep, Rapid Chlamydia, Rapid screen for Bacterial Vaginosis, RSV, Salmonella/Shigella Screen, Sensitivity Testing, Stool Culture, Synovial Fluid Culture, TB Sensitivity, TB/AFB Culture, Throat Culture, Viral Cultures, Virology Test, Wet Mount, Wound Culture

Forensic Toxicology - Job Related Tests
Urine Drug Confirmation by GC/MS, GC/MS/MS, OR MS/MS, Urine Drug Screen - Single Use Test Device

CONTROL: 57264

Director

Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.

CLINICAL LABORATORY PERMIT

pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 001088A

Name and Director of Laboratory:

LABCORP OF AMERICA HOLDINGS
ARACELI O BORBON REYES, MD
69 FIRST AVENUE PO BOX 500
RARITAN, NJ 08869

Owner:

LABCORP OF AMERICA HOLDINGS

ISSUE DATE: August 15, 2015

DATE EXPIRES: August 15, 2016

AUTHORIZED CATEGORIES:

BACTERIOLOGY
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
IMMUNOHEMATOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
PARASITOLOGY
SYPHILIS SEROLOGY
TISSUE PATHOLOGY
TOXICOLOGY - ALCOHOL BLOOD
TOXICOLOGY - ALCOHOL SERUM / PLASMA
TOXICOLOGY - BLOOD LEAD
TOXICOLOGY - DRUGS URINE CONFIRMATORY
TOXICOLOGY - DRUGS URINE SCREENING
TOXICOLOGY - ERYTHROCYTE PROTOPORPHYRIN
URINALYSIS

Karen M. Murphy Ph.D. RN
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

State of Rhode Island and Providence Plantations
DEPARTMENT OF HEALTH
OFFICE OF FACILITIES REGULATION

This is to certify that LABORATORY CORPORATION OF AMERICA 4
69 FIRST AVENUE ATTN: QA DEPT RARITAN NJ 08869
License Number: LCO00186

is hereby authorized to conduct and maintain an Out of State Clinical Laboratory in conformity with RIGL C23-16.2 and the standards, rules and regulations prescribed thereunder. This license is subject to biennial renewal unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please call (401) 222-2566 for more information.

APPROVED SPECIALTY (IES)

MICROBIOLOGY, Bacteriology,Mycobacteriology, Mycology, Parasitology, Virology, DIAGNOSTIC IMMUNOLOGY, Syphilis Serology, General Immunology, CHEMISTRY, Routine Chemistry, Urinalysis, Endocrinology, Toxicology, HEMATOLOGY, IMMUNOHEMATOLOGY, ABO Group/Rh Type, Antibody Det. Non-Transfusion, Antibody Ident., PATHOLOGY, Histopathology, Oral Pathology, Cytology,

Seema Dixit, MS, MPH
Chief, Center for Health Facilities Regulations

Expires: 12/30/2017

Nicole Alexander-Scott, MD, MPH
Director of Health

Issued: 06/10/1999

VERMONT
DEPARTMENT OF HEALTH

State of Vermont Department of Health

The Vermont Department of Health has designated

Laboratory Corporation of America Holdings
Raritan, NJ

to analyze the body fluids or materials listed below for drugs, in accordance with 21 V.S.A. Chapter 5, Subchapter 11, §514-16, 518, 520, for a period of one year from the date shown below.

URINE

Commissioner of Health

Laboratory Director

January 1, 2016
Date of Approval

7207 N. GESSNER
HOUSTON, TX 77040

Responsible Person (RP) – Prabhakaran Koteel, Ph.D.

CERTIFICATIONS / LICENSURES

Certificate of Accreditation

Substance Abuse and Mental Health Services Administration

SAMHSA

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

The Substance Abuse and Mental Health
Services Administration
certifies that

Laboratory Corporation of America Holdings

Houston, TX
NLCP Laboratory Number: 0355

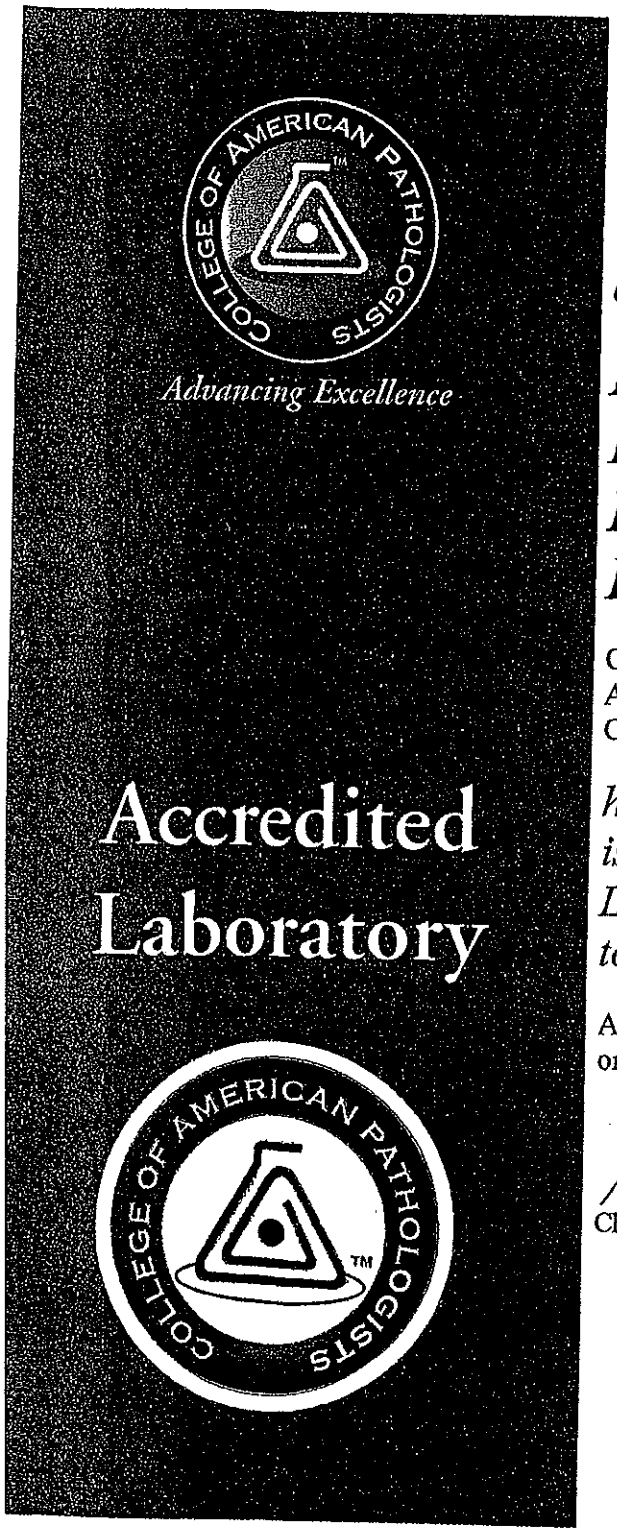
has successfully completed the requirements
of the National Laboratory Certification Program for urine laboratories in accordance
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

Effective August 31, 2000

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

DEPARTMENT OF HEALTH & HUMAN SERVICES • USA

Frances M. Harding
Director
Center for Substance Abuse Prevention



The College of American Pathologists

certifies that the laboratory named below

Laboratory Corporation of America
Laboratory
Houston, Texas
Kyle L. Eskue, MD

CAP Number: 2106901
AU-ID: 1185960
CLIA Number: 45D0663318

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to September 24, 2016 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

CENTERS FOR MEDICARE & MEDICAID SERVICES

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

LABORATORY CORPORATION OF AMERICA
7207 NORTH GESSNER
HOUSTON, TX 77040

CLIA ID NUMBER

45D0663318

EFFECTIVE DATE

02/09/2015

EXPIRATION DATE

02/08/2017

LABORATORY DIRECTOR

KYLE L ESKUE

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

847 Certs2_011315

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
BACTERIOLOGY (110)	07/27/1995
MYCOLOGY (120)	07/27/1995
PARASITOLOGY (130)	07/27/1995
VIROLOGY (140)	06/16/2003
SYPHILIS SEROLOGY (210)	06/01/2004
GENERAL IMMUNOLOGY (220)	06/04/2002
ROUTINE CHEMISTRY (310)	07/27/1995
URINALYSIS (320)	07/27/1995
ENDOCRINOLOGY (330)	07/27/1995
TOXICOLOGY (340)	03/29/2003
HEMATOLOGY (400)	07/27/1995
ABO & RH GROUP (510)	06/04/2002
ANTIBODY NON-TRANSFUSION (530)	06/04/2002

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
ANTIBODY IDENTIFICATION (540)	02/23/2009
HISTOPATHOLOGY (610)	07/27/1995
ORAL PATHOLOGY (620)	07/27/1995
CYTOLOGY (630)	06/13/2003

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA
OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
RR0162672	03-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
1,2,2N 3,3N,4,5	ANALYTICAL LAB	03-30-2016

LABORATORY CORPORATION OF
AMERICA HOLDINGS
7207 NORTH GESSNER
HOUSTON, TX 77040

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C. 20537

Sections 304 and 1008 (21 U.S.C. 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C, 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
RR0162672	03-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
1,2,2N 3,3N,4,5	ANALYTICAL LAB	03-30-2016

LABORATORY CORPORATION OF
AMERICA HOLDINGS
7207 NORTH GESSNER
HOUSTON, TX 77040

Sections 304 and 1008 (21 U.S.C. 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (05/04)

TEXAS CONTROLLED SUBSTANCES REGISTRATION CERTIFICATE

TEXAS DEPARTMENT OF PUBLIC SAFETY
REGULATORY SERVICES DIVISION, LICENSING AND REGISTRATION SERVICE
CONTROLLED SUBSTANCES REGISTRATION, PO BOX 4087, AUSTIN, TEXAS 78773

DPS REGISTRATION NUMBER	DATE EXPIRED	FEE PAID
C0062191	08/31/2016	YES

SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
1, 2, 2N, 3, 3N, 4, 5	ANALYST OR ANALYTICAL LAB	06/01/2016

REGISTERED NAME AND ADDRESS

LABORATORY CORPORATION
OF AMERICAN HOLDINGS
7207 NORTH GESSNER
HOUSTON, TX 77040

THE TEXAS CONTROLLED SUBSTANCES ACT, CHAPTER 481 OF THE HEALTH AND SAFETY CODE, PROVIDES THAT THE TEXAS DEPARTMENT OF PUBLIC SAFETY MAY DENY A CONTROLLED SUBSTANCES REGISTRATION OR THAT A CONTROLLED SUBSTANCES REGISTRATION MAY BE SUSPENDED OR REVOKED.

THIS REGISTRATION IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY AND NOT VALID AFTER THE EXPIRATION DATE.

NAR-79 (6-10) CERTIFICATE MUST BE READILY RETRIEVABLE AT ALL TIMES

TEXAS DEPARTMENT OF PUBLIC SAFETY

DPS REGISTRATION NUMBER
C0062191

DATE EXPIRED
08/31/2016

SCHEDULES
1, 2, 2N, 3, 3N, 4, 5

REGISTERED NAME AND ADDRESS
LABORATORY CORPORATION
OF AMERICAN HOLDINGS
7207 NORTH GESSNER
HOUSTON, TX 77040

STATE OF OKLAHOMA

Oklahoma State Department of Health

This is to certify that

Laboratory Corporation of America

Is Hereby Licensed to Conduct and Maintain a

Workplace Drug and Alcohol Testing Facility

Under the Name of

Laboratory Corporation of America

Located At:

7207 North Gessner

Houston, TX 77040

Effective Date: 01/01/2016 Expiration Date: 12/31/2016

- ☑ Initial Drug Screening
  - ☑ Urine ☐ Hair ☐ Saliva
- ☑ Confirmatory Drug Testing
- ☑ Initial Alcohol Screening
  - ☑ Breath ☐ Blood
- ☑ Confirmatory Alcohol Testing

This license is issued pursuant to the provisions of the Oklahoma Statutes and of the rules and regulations adopted by the State Board of Health. It is issued only for the premises named above and is not transferable or assignable.

License No. 8377

Licensuer Official

Terry Cline, Ph.D.
Commissioner

Drugs of Abuse Certificate

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
LABORATORY IMPROVEMENT PROGRAM

This laboratory has been found to be in substantial compliance with all parts of KAR 28-33-12, and is approved to perform Drugs of Abuse testing in the State of Kansas.

Laboratory Corporation of America
7207 North Gessner
Houston, TX 77040

RODERICK L. BREMBY
Secretary,
Department of Health and Environment

RICHARD HOWARD
Chief, Laboratory Improvement Program
Division of Health and Environment Laboratories

1120 MAIN STREET
SOUTHAVEN, MS 38671

Responsible Person (RP) – Lance Presley Ph.D.

CERTIFICATIONS / LICENSURES

Certificate of Accreditation

SAMHSA

The Substance Abuse and Mental Health Services Administration

certifies that

Laboratory Corporation of America Holdings

Southaven, MS

NLCP Laboratory Number 0249

has successfully completed the requirements of the National Laboratory Certification Program for urine laboratories in accordance with the Mandatory Guidelines for Federal Workplace Drug Testing Programs

Effective December 27, 1989

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

Frances M. Harding
Director
Center for Substance Abuse Prevention

Advancing Excellence

Accredited Laboratory

The College of American Pathologists

certifies that the laboratory named below

Laboratory Corporation of America Holdings
LabCorp OTS Southaven
Southaven, Mississippi
Lance Presley, PhD

CAP Number: 4185502
AU-ID: 1195389
CLIA Number: 25D0984103

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to July 22, 2017 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

CENTERS FOR MEDICARE & MEDICAID SERVICES

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

LABORATORY CORPORATION OF AMERICAN HOL
1120 MAIN STREET
SOUTHAVEN, MS 38671

CLIA ID NUMBER

25D0984103

EFFECTIVE DATE

05/08/2015

LABORATORY DIRECTOR

LANCE C PRESLEY Ph.D.

EXPIRATION DATE

05/07/2017

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

164 Certs2_051215

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)	EFFECTIVE DATE	LAB CERTIFICATION (CODE)	EFFECTIVE DATE
TOXICOLOGY (340)	09/24/2003		

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

CERTIFICATE #: 291

LICENSE #: 52

State of Florida

AGENCY FOR HEALTH CARE ADMINISTRATION
DIVISION OF HEALTH QUALITY ASSURANCE

Forensic Toxicology Laboratory

This is to confirm that LABORATORY CORPORATION OF AMERICA HOLDINGS has complied with the applicable portions of s. 112.0455, laws of the State of Florida and with 59A-24, Rules of the State of Florida and is authorized to operate the following:

LABORATORY CORPORATION OF AMERICA HOLDINGS
1120 Main St
Southaven, MS 38671

Using the following specimen types: Blood, Urine

EFFECTIVE DATE: 06/25/2015

EXPIRATION DATE: 06/24/2017

Deputy Secretary, Division of Health Quality Assurance

New York State Department of Health

PFI: 4125

Clinical Laboratory Permit

CLIA: 25D0984103

Lab Corp Southaven
1120 Main St
Southaven MS 38671

Director:
Lance C. Presley, Ph.D.

Owner:
Laboratory Corp of America Holdings Inc

is hereby authorized to perform laboratory procedures at the above location in the following categories in accordance with Article 5, Title V, Section 575 of the Public Health Law. This permit shall become void upon a change in the director, owner or location of the laboratory, and an application for a new permit shall be made to the Department.

Toxicology
Clinical Toxicology-Comprehensive
Forensic Toxicology-Comprehensive

Renewal
Effective Date: July 1, 2016
Expiration Date: June 30, 2017

Subject to Revocation
Permit Not Transferable

POST CONSPICUOUSLY

Serial: LAP 90916

CLINICAL LABORATORY PERMIT

pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 021306A

Name and Director of Laboratory:

LAB CORP OCCUPATIONAL TEST SRVCS
LANCE C. PRESLEY, PHD
1120 STATELINE ROAD WEST
SOUTHAVEN, MS 38671

AUTHORIZED CATEGORIES:

CLINICAL CHEMISTRY
TOXICOLOGY - DRUGS URINE CONFIRMATORY
TOXICOLOGY - DRUGS URINE SCREENING

Owner:

LAB CORP OF AMERICA HOLDINGS INC

ISSUE DATE: August 15, 2015

DATE EXPIRES: August 15, 2016

Karen M. Murphy, PhD, RN

Karen M. Murphy Ph.D. RN
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

Drugs of Abuse Certificate

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
LABORATORY IMPROVEMENT PROGRAM

This laboratory has been found to be in substantial compliance with all parts of KAR 28-33-12, and is approved to perform Drugs of Abuse testing in the State of Kansas.

LABORATORY CORPORATION OF AMERICA HOLDINGS, INC.
1120 Main Street
Southaven, MS 38671

RODERICK L. BREMBY
Secretary

RICHARD HOWARD
Chief, Laboratory Improvement Program

49 Grees 460

LITHO. IN U.S.A.

402 WEST COUNTY ROAD D
SAINT PAUL, MN 55112

Responsible Person (RP) – Jennifer Collins, Ph.D.
Mitch Lebard

CERTIFICATIONS / LICENSURES

Certificate of Accreditation

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

The Substance Abuse and Mental Health Services Administration

certifies that

MedTox Laboratories, Inc.

St. Paul, MN

NLCP Laboratory Number: 0094

has successfully completed the requirements
of the National Laboratory Certification Program for urine laboratories in accordance
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

Effective December 7, 1988

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

DEPARTMENT OF HEALTH & HUMAN SERVICES • USA

Frances M. Harding
Director
Center for Substance Abuse Prevention

Advancing Excellence

Accredited Laboratory

The College of American Pathologists

certifies that the laboratory named below

MedTox Laboratories Inc
Main Laboratory
Saint Paul, Minnesota
Mark G. Catlin, MD

CAP Number: 3039201
AU-ID: 1189554
CLIA Number: 24D0665278

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to February 4, 2017 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

Advancing Excellence

Accredited Laboratory

The College of American Pathologists

certifies that the laboratory named below

MEDTOX Laboratories, Inc
Saint Paul, Minnesota
Jennifer Collins, PhD
Mark G. Catlin, MD

CAP Number: 3039202
AU-ID: 1192042

has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Forensic Drug Testing Accreditation Program. Reinspection should occur prior to February 4, 2017 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
PM0235780	01-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
1,2,2N 3,3N,4,5	ANALYTICAL LAB	12-08-2015

MEDTOX LABORATORIES INC
LABCORP SPECIALTY TESTING GROUP
402 WEST COUNTY ROAD D
SAINT PAUL, MN 55112 3522

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C, 20537

Sections 304 and 1008 (21 U.S.C. 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C, 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
PM0235780	01-31-2017	$244

SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
1,2,2N 3,3N,4,5	ANALYTICAL LAB	12-08-2015

MEDTOX LABORATORIES INC
LABCORP SPECIALTY TESTING GROUP
402 WEST COUNTY ROAD D
SAINT PAUL, MN 55112 3522

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Form DEA-223 (05/04)

CENTERS FOR MEDICARE & MEDICAID SERVICES

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

MEDTOX LABORATORIES
402 W COUNTY RD D
SAINT PAUL, MN 55112-3522

CLIA ID NUMBER

24D0665278

EFFECTIVE DATE

08/03/2015

LABORATORY DIRECTOR

DR MARK CATLIN

EXPIRATION DATE

08/02/2017

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

181 Certs2_070715

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
BACTERIOLOGY (110)	06/13/2008
MYCOLOGY (120)	06/13/2008
PARASITOLOGY (130)	06/13/2008
VIROLOGY (140)	06/13/2008
SYPHILIS SEROLOGY (210)	08/03/1999
GENERAL IMMUNOLOGY (220)	10/13/2000
ROUTINE CHEMISTRY (310)	08/03/1999
URINALYSIS (320)	08/03/1999
ENDOCRINOLOGY (330)	08/03/1999
TOXICOLOGY (340)	04/03/2003
HEMATOLOGY (400)	08/03/1999
ABO & RH GROUP (510)	08/23/2010
ANTIBODY NON-TRANSFUSION (530)	08/23/2010

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
HISTOPATHOLOGY (610)	06/13/2008
ORAL PATHOLOGY (620)	06/13/2008
CYTOLOGY (630)	06/13/2008

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

CERTIFICATE #: 295

LICENSE #: 19

State of Florida

AGENCY FOR HEALTH CARE ADMINISTRATION
DIVISION OF HEALTH QUALITY ASSURANCE

Forensic Toxicology Laboratory

This is to confirm that MEDTOX LABORATORIES INC has complied with the applicable portions of s. 112.0455, laws of the State of Florida and with 59A-24, Rules of the State of Florida and is authorized to operate the following:

MEDTOX LABORATORIES INC
402 County Road D W
Saint Paul, MN 55112-3522

Using the following specimen types: Blood, Urine

EFFECTIVE DATE: 10/01/2015

EXPIRATION DATE: 09/30/2017

Deputy Secretary, Division of Health Quality Assurance

CERTIFICATE #: 101070

LICENSE #: 800026142

State of Florida

AGENCY FOR HEALTH CARE ADMINISTRATION
DIVISION OF HEALTH QUALITY ASSURANCE

CLINICAL LABORATORY

Licensed

This is to confirm that MEDTOX LABORATORIES INC has complied with Chapter 483, Part I, Florida Statutes, and with Chapter 59A-7, Florida Administrative Code, and is authorized to operate the following laboratory in the specialties or subspecialties of:

ABO Rh, Bacteriology, Cytology, Endocrinology, General Immunology, Hematology, Mycology, Parasitology, Routine Chemistry, Syphilis Serology, Toxicology, Urinalysis, Virology

MEDTOX LABORATORIES INC
402 W County Rd D
Saint Paul, MN 55112-3522

EFFECTIVE DATE: 07/28/2015

EXPIRATION DATE: 07/27/2017

Molly McKinstry

Deputy Secretary, Division of Health Quality Assurance

DAVID Y. IGE
GOVERNOR OF HAWAII

VIRGINIA PRESSLER, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
STATE LABORATORIES DIVISION
2725 WAIMANO HOME ROAD
PEARL CITY, HAWAII 96782-1496

In reply, please refer to:
File: SLD/EHASB-DUI/SAT

June 27, 2016

Dr. Jennifer Collins
MedTox Laboratories
402 West County Road D
St Paul, MN 55112

Dear Dr. Collins,

I am pleased to inform you that MedTox Laboratories, located at 402 West County Road D, St Paul, MN 55112 is approved to do the following substance abuse testing of samples from the State of Hawaii:

1. Screening: Marijuana, Cocaine, Amphetamines, Opiates, Phencyclidine, Barbiturates, Methaqualone, Benzodiazepines, Propoxyphene, Methadone, Alcohol, ETG/ETS, Tramadol, Buprenorphine, Meperidine and Oxycodone.

2. Confirmation: Marijuana, Cocaine, Amphetamines, Opiates, Phencyclidine, Barbiturates, Methaqualone, Benzodiazepines, Propoxyphene, Methadone, Alcohol, ETG/ETS, Tramadol, Buprenorphine, Meperidine and Oxycodone.

The effective date is July 1, 2016, and the approval is valid until June 30, 2017, subject to the following stipulations:

1. Your laboratory remains certified by SAMHSA, U.S. Department of Health and Human Services;

2. Your laboratory uses the same methodologies for samples from Hawaii, as used for SAMHSA samples; and,

3. Your laboratory follows Hawaii Administrative Rules 11-113, "Substance Abuse Testing by Laboratories" for testing samples from Hawaii, including the listed cut-off levels.

Sincerely,

A. Christian Whelen

A. Christian Whelen, Ph.D.
for Director of Health

Paul R. LePage, Governor Mary C. Mayhew, Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
Health and Environmental Testing Laboratory
221 State Street
12 State House Station
Augusta, Maine 04333-0012
Tel. (207) 287-2727; Fax (207) 287-6832; TTY (800) 606-0215

February 26, 2016

Jennifer Collins, Ph.D
MEDTOX Laboratories, Inc.
402 West County Road D
Saint Paul, Minnesota 55112

Dear Dr. Collins:

I am pleased to report to you that MEDTOX Laboratories, Inc. has been relicensed by the Maine Department of Human Services as a **Substance Abuse Testing Laboratory** effective 03/01/16. This license qualifies MEDTOX Laboratories, Inc. to perform workplace substance of abuse testing under the provisions of Title 26, MRSA, sub-chapter III-A.

This license is subject to renewal annually, and is subject to satisfactory performance in proficiency testing as defined in regulations under the above mentioned law. Certified copies of the proficiency test reports must be filed with this office within ten days of receipt. This department must also be notified of any changes in personnel, particularly the Director and Certifying Officer(s).

Under such time as a license form is printed and issued to you, this letter will serve to demonstrate your status under Maine law.

Please feel free to contact this office should you have any questions.

Sincerely,

Kenneth G. Pote

Kenneth G. Pote, PhD
Chief, Lab Operations
Health & Environmental Testing Laboratory

License # SA121

Cc Christopher P. Montagna
Labor Standards

MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER
BLAND BRYANT BUILDING
55 WADE AVENUE
CATONSVILLE, MD 21228-4663

MEDICAL LABORATORY PERMIT

NUMBER: 486 EFFECTIVE PERIOD: 07/01/2014 - 06/30/2016

Pursuant to the provisions of TITLE 17, subtitle 2, Health-General Article § 17-201 et seq., Annotated Code of Maryland, this permit is issued to:

MEDTOX LABORATORIES, INC.
402 West County Road D
SAINT PAUL, MN 55112

Director: Dr MARK CATLIN
Owner: LABORATORY CORP OF AMERICA HOLDINGS

For the performance of Medical Laboratory Tests in the following disciplines:

Microbiology:

Blood Cultures, Campylobacter Culture, Clostridium Toxin, Dermatophyte Screen, GBS screen, GC Culture, Genital Culture, Giardia Antigen, Gram Stain, Group A Strep Screen (culture), Group A Strep Screen (non-culture), Influenza Antigen (nasal or throat swab), Ova And Parasite, Parasite Identification, Pinworm Prep, RSV, Sensitivity Testing, Stool Culture, Synovial Fluid Culture, Throat Culture, Urine Culture, Wound Culture

Forensic Toxicology - Job Related Testi

Blood Drug Confirmation by GC/MS; GC/MS/MS; OR MS/MS, Screening method other than Single Use Test Device, Urine Drug Screen - Single Use Test Device

Immunology:

ABO Grouping, Antibody Screen, AntiHAV, AntiHBc, Anti-nuclear Antibody, Apolipoprotein, ASO, Beta 2 Microglobulin, Complement, C-reactive Protein, Cystatin C, EBV, H.pylori,stool, HBeAb, HBeAg, HBsAb, HBsAg, HCV, Herpes Ab, Highly Sensitive CRP, HIV Antibody testing, Homocysteine, IgE, Immunoglobins, Lyme Antibody Test, Quantiferon TB, Rheumatoid Factor, RPR/Syphillis Serology, Rubella, Rubeola, Serum Pregnancy, Urine Pregnancy Test

CONTROL: **57129**

Patricia Tomsko May, MD
Director

Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.

New York State Department of Health

Clinical Laboratory Permit

PFI: 3813 CLIA: 24D0665278

MEDTOX Laboratories Inc
402 West County Road D
Saint Paul MN 55112

Director:
Mark G. Catlin, M.D.

Owner:
Medtox Scientific Inc

is hereby authorized to perform laboratory procedures at the above location in the following categories in accordance with Article 5, Title V, Section 575 of the Public Health Law. This permit shall become void upon a change in the director, owner or location of the laboratory, and an application for a new permit shall be made to the Department.

Bacteriology
Comprehensive
Clinical Chemistry
Cytopathology
Gynecological Testing
Non-gynecological Testing
Diagnostic Immunology
Diagnostic Services Serology
Endocrinology

Hematology
Cellular Hematology
Coagulation
Cytohematology Diagnostic
Histopathology
General
Immunohematology
(limited to ABO/Rh)
Mycology
Oncology
Human Papillomavirus (HPV) Testing
Soluble Tumor Markers

Parasitology
Toxicology
Blood Lead-Comprehensive
Clinical Toxicology-Comprehensive
Forensic Toxicology-Comprehensive
Trace Elements
Ther. Sub. Mon./Quant. Tox.
Virology
(limited to antigen detection and molecular techniques)

Renewal
Effective Date: July 1, 2016
Expiration Date: June 30, 2017

Subject to Revocation
Permit Not Transferable

POST CONSPICUOUSLY

Serial: LAP 90906

OHIO DEPARTMENT OF HEALTH

246 North High Street
Columbus, Ohio 43215

614/466-3543
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

AUG 19 2015

Kelli McClary, QA Manager-Region
MedTox Laboratories, Inc.
402 West County Road D
St. Paul, MN 55112

RE: Clinical Lead Laboratory Approval Number C10059

Dear Kelli McClary:

The Ohio Department of Health (ODH) Lead Poisoning Prevention Program has reviewed your Clinical Lead Laboratory application. Your laboratory has met all of the criteria for approval as specified in Chapter 3701-82 of the Ohio Administrative Code (O.A.C.). Your laboratory approval number is C10059. The approval will expire on 9/10/2016.

O.A.C. 3701-82-02 (G) requires you to notify ODH within twenty four hours if for any reason your Clinical Laboratory Improvement Amendment (CLIA) accreditation is denied, revoked, suspended or limited. Additionally, you shall notify ODH within five business days each time the laboratory's CLIA accreditation as a clinical laboratory is renewed or modified. O.A.C. 3701-32-14 (B) requires you to submit a copy of your tri-annual lead proficiency testing results to ODH within five business days of receiving the results.

Please submit the above required information by one of the following methods; first class mail to the address listed below, electronic mail at lead@odh.ohio.gov, or facsimile to 614-564-2479.

Ohio Department of Health
DQA, Lead Poisoning Prevention Program
246 North High Street
Columbus, OH 43215

In addition, you are required to comply with the electronic reporting requirements outlined in O.A.C. 3701-30-05. Questions regarding this reporting should be directed to the Surveillance Coordinator for the Childhood Lead Poisoning Prevention Program at (800) 532-3723.

In accordance with Chapter 119. of the Revised Code and O.A.C. 3701-82-02 (K). I may propose to refuse to issue or revoke the approval of any Clinical Lead Laboratory if at any time the laboratory does not meet the requirements of the O.A.C. or Chapter 3742. of the Revised Code.

If you have any questions about this approval letter, please contact Mark Needham at (877) 668-5323.

Sincerely,

Richard Hodges, MPA
Director of Health

STATE OF OKLAHOMA

Oklahoma State Department of Health

This is to Certify that

MEDTOX Laboratories Inc.

Is Hereby Licensed to Conduct and Maintain a

Workplace Drug and Alcohol Testing Facility

Under the Name of

MEDTOX Laboratories, Inc.

Located at

402 County Road D West
St. Paul, MN 55112

Effective Date: 11/01/2015

Expiration Date: 10/31/2016

This license is issued pursuant to the provisions of the Oklahoma Statutes and of the rules and regulations adopted by the State Board of Health. It is issued only for the premises named above and is not transferable or assignable.

License No. 8057

Licensure Official

Terry Cline, Ph.D.
Commissioner

THIS LICENSE MUST BE POSTED IN A CONSPICUOUS PLACE

CLINICAL LABORATORY PERMIT

pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 005574A

Name and Director of Laboratory:

MEDTOX LABORATORIES INC
MARK G CATLIN, MD
402 COUNTY ROAD D WEST
ST PAUL, MN 55112

Owner:

LABORATORY CORPORATION OF AMERICA HOLDINGS

ISSUE DATE: August 15, 2015

DATE EXPIRES: August 15, 2016

AUTHORIZED CATEGORIES:

CLINICAL CHEMISTRY
TOXICOLOGY - ALCOHOL BLOOD
TOXICOLOGY - ALCOHOL SERUM / PLASMA
TOXICOLOGY - BLOOD LEAD
TOXICOLOGY - DRUGS BLOOD CONFIRMATORY
TOXICOLOGY - DRUGS BLOOD SCREENING
TOXICOLOGY - DRUGS SERUM CONFIRMATORY
TOXICOLOGY - DRUGS SERUM SCREENING
TOXICOLOGY - DRUGS URINE CONFIRMATORY
TOXICOLOGY - DRUGS URINE SCREENING
TOXICOLOGY - ERYTHROCYTE PROTOPORPHYRIN

Karen M. Murphy, PhD, RN

Karen M. Murphy Ph.D. RN
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

State of Rhode Island and Providence Plantations
DEPARTMENT OF HEALTH
OFFICE OF FACILITIES REGULATION

This is to certify that MEDTOX LABORATORIES INC
402 WEST COUNTY ROAD D SAINT PAUL MN 55112
License Number: LCO00716

is hereby authorized to conduct and maintain an Out of State Clinical Laboratory in conformity with RIGL C23-16.2 and the standards, rules and regulations prescribed thereunder. This license is subject to biennial renewal unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please call (401) 222-2566 for more information.

APPROVED SPECIALTY (IES)

DIAGNOSTIC IMMUNOLOGY, Syphilis Serology, General Immunology,
CHEMISTRY, Routine Chemistry, Urinalysis, Endocrinology, Toxicology, HEMATOLOGY,
IMMUNOHEMATOLOGY, ABO Group/Rh Type, Antibody Det. Non-Transfusion,

Seema Dixit, MS, MPH
Chief, Center for Health Facilities Regulations

Nicole Alexander-Scott, MD, MPH
Director of Health

Expires: 12/30/2017

Issued: 09/14/2012

State of Minnesota

BOARD OF PHARMACY
2829 UNIVERSITY AVE SE #530
MINNEAPOLIS, MN 55414-3251

HAS ISSUED

WHOLESALE DISTRIBUTOR LICENSE NUMBER: 362768
(ACTIVE)

To:

LABCORP/MEDTOX LABORATORIES
402 WEST COUNTY ROAD D
ST PAUL MN 55112

EFFECTIVE DATE	EXPIRATION DATE
04/11/2016	05/31/2017

TEXAS DEPARTMENT OF PUBLIC SAFETY

STEVEN C. MCCRAW
DIRECTOR
DAVID G. BAKER
ROBERT J. BODISCH, Sr.
DEPUTY DIRECTORS

Crime Laboratory Service
5800 Guadalupe
Austin, Texas 78752
512-424-2105
Fax: 512-424-5645
e-mail: wil.young@dps.texas.gov

DPS ACCREDITATION

April 1, 2015

Dr. Jennifer A. Collins
MEDTOX Laboratories, Inc.
402 West County Road D
St. Paul, Minnesota 55112

RE: Application for DPS Accreditation under Title 37, Texas Administrative Code, Chapter 28, Subchapter I

Dear Dr. Jennifer A. Collins:

With some exceptions, Code of Criminal Procedure, Article 38.35, requires Department of Public Safety (DPS) accreditation as a predicate to the admission of the forensic analysis of physical evidence and expert testimony relating to the evidence in a criminal case.

As the designee of the Director of the Department of Public Safety, I have considered your application based on your national accreditation from CAP and grant Full DPS Accreditation to MEDTOX Laboratories, Inc. for the following disciplines:

Toxicology

There are no limitations imposed on these accredited disciplines.

The term of CAP accreditation is from 2/4/2015 to 2/4/2017 unless they have extended their accreditation as part of a routine renewal process.

The term of DPS accreditation is from 4/1/2015 until such time that the accreditation from CAP is no longer current.

DPS Accreditation is contingent upon compliance with Title 37, Texas Administrative Code, Chapter 28, Subchapter I, including requirements of reporting correspondence, reports or communication between the laboratory and the accrediting body. DPS accreditation will be automatically rescinded at the same date and time as CAP withdraws your laboratory accreditation.

Yours Truly,

Brady W. Mills
Deputy Assistant Director, Crime Laboratory Service

CC: CAP

VERMONT
DEPARTMENT OF HEALTH

State of Vermont Department of Health

The Vermont Department of Health has designated

MedTox Laboratories, Inc.
St. Paul, MN

to analyze the body fluids or materials listed below for drugs, in accordance with 21 V.S.A. Chapter 5, Subchapter 11, §514-16, 518, 520, for a period of one year from the date shown below.

URINE

Commissioner of Health

Laboratory Director

January 1, 2016
Date of Approval

State of California Department of Public Health

CLINICAL LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address or other site(s) on file with the department.

MEDTOX LABORATORIES, INC
402 WEST COUNTY ROAD D W
ST PAUL MN 55112

OWNER(S):
LABORATORY CORPORATION OF AMERICA HOLDINGS

DIRECTOR(S):
CATLIN MARK G MD

Lab ID Number: COS 00800020
Effective Date: July 31, 2015
Valid Until: July 29, 2016
CLIA Number: 24D0665278

Beatrice O'Keefe

Beatrice R. O'Keefe, Division Chief
Laboratory Field Services

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH

METHADONE DRUG ANALYSIS LABORATORY LICENSE

In accordance with the provisions of Sections 1160 through 1196 of the regulations contained in Title 17 of the California Code of Regulations, the laboratory named below is hereby licensed to operate as a Methadone Drug Analysis Laboratory at the indicated address.

MEDTOX LABORATORIES, INC.
402 West County Road D
St. Paul, MN 55112

License Number: 1713

Date License Issued: July 1, 2016

Expiration Date: June 30, 2017

Fee: $530.43

Owner or Administrator: Jeff Rowinski, Administrator

Person responsible for the operation of
this Methadone Drug Analysis Laboratory: Jennifer A. Collins, Ph.D.

This license expires June 30, 2017. Application for renewal shall be submitted by April 1 of that year to:
California Department of Public Health, Food And Drug Laboratory Branch,
850 Marina Bay Parkway, G-365, Richmond, CA 94804-6403

CRFQ 0511 BCF1700000005

The State of West Virginia
Drug and Alcohol Testing Services

Imagine…working with people who LOVE what they do!

INFO CUBIC
BACKGROUND CHECKS

Contents

*Executive Summary

June 5, 2017

State of West Virginia
Department of Administration, Purchasing Division
2019 Washington Street East
Charleston, WV 25305

To whom it may concern,

Info Cubic appreciates the opportunity to State of West Virginia with this RFP response.

We are delighted at the prospect of partnering with the State of West Virginia to enhance your drug and health screening program. We understand your desire to identify a partner who is reliable, experienced and dedicated to continuous process improvement. This includes quick turnaround, award winning customer service with dedicated Account Management, reporting and applicant services.

Our solution will meet your current needs while being flexible enough to support your future business initiatives. We promise to keep you current on changing regulations and will deliver the latest technology available.

Our proposed solution is customized based on your objectives and includes:

- Expedient turnaround for all employment screening services
- ISO 9001:2008 certified quality control processes
- Measured accuracy rate of 99.9%
- Dedicated team assigned to the State of West Virginia
- All provided by a NABPS Accredited Company
- Members of Drug & Alcohol Industry Association (DATIA)
- Customized collection site network

Info Cubic is here to help. We are proud to be accredited through the National Association of Professional Background Screeners (NAPBS) and back-to-back winners of HRO Today Baker's Dozen award for customer service. In addition, we are an ISO 9001:2008 certified

company that is continually striving for improvement in everything we do. Our company is a fun and exciting place to work and we are looking forward to sharing why we believe you will enjoy having us as your screening partner.

1. About Info Cubic

Headquartered in Denver, CO, Info Cubic is a privately held and certified DBE minority-owned, one-stop, employment screening company with over 50 employees. Our Account Managers (also known as Customer Service Ninjas) are staffed to support the current hours of our client base. Our current hours are 6:00am – 5:00pm MST.

Our ISO standard is to answer the phone with a live, knowledgeable person within 3 rings. Our Customer Service Ninjas are all FCRA-certified and take tremendous pride in providing excellent customer service. Info Cubic prides itself on providing every client, regardless of size, with the fastest and most accurate drug and alcohol screening reports in the industry.

We help more than 800 clients, with their drug and alcohol screening needs. Info Cubic provides the reports you need to help make more educated hiring decisions, helping to assist individuals in living full, and productive lives.

Info Cubic was founded in 2002 with the goal of providing world-class customer service, industry-leading turnaround times and accurate results. Our web-based ordering system makes ordering Drug Testing, and Occupational Health Services simple. Should questions arise, your dedicated account manager answers your call or e-mail, usually instantly, but always within four business hours.

We also hold the rare distinction of being one of just a handful of companies that are ISO certified, NAPBS Accredited and Winner of HRO Magazines “Bakers Dozen” for Employment screening providers.

Dan Mayer – Vice President
Info Cubic Employment Screening
9250 E Costilla Ave. Ste 525
Greenwood Village, CO 80112
303-220-0170 Phone
303-220-0171 Fax

2. Service Requirements

We confirm that Info Cubic is able to fulfill all service requirements laid out in the Invitation Request for CRFQ 0511 BCF1700000005.

Info Cubic is a leading provider of drug and alcohol testing along with occupational health services for pre and post-employment purposes providing expert and dependable testing, where you want it, when you need it.

Services consist of but not limited to:

- Urine Testing (DOT and/or NON DOT)
- Breath Alcohol

Turnaround times:

- Urine – 24-48 hours for Non-Negatives, 48-72 hours for Positives
- Breath Alcohol – 4 hours from time collection completed

Additional workplace substance abuse testing solutions:

- Collection Site Management
- Reasonable Suspicion
- Pre-employment
- Post-employment
- Account Management
- Monthly report management

Our drug and alcohol testing offers you the latest in technology, allowing you and your candidates to have the best experience with this technology. Info Cubic has 15 years of experience in providing specific services, and has a team of ninjas who has knowledge of drug and alcohol testing. Within that team Info Cubic has a Drug Screen Business Coordinator that is a subject matter expert with 8 years of expertise in Drug and Alcohol Testing, Occupational Health, DOT and Non-DOT regulations, state and local laws. Our Drug Screen Business Coordinator is also Certified Designated Employer Representative for Info Cubic.

We offer you:

- Scheduling functionality, which creates the Electronic Chain of Custody form.
- You can track the entire screening process from the time the sample was collected, received at lab until it gets reported out to your users.
- This function also allows you to see status updates, if the candidate is a no-show to shy bladder, etc.
- Provide solutions to your drug and alcohol program and procedures.
- Billing Identifiers to help users identify which location a candidate is testing for and easy to locate on monthly invoices.
- Provide expert testimonies if needed, for Collection, Lab and MRO.
- Your own designated account manager

Collection Site Info

We currently provide access to over 4,000 active collection locations spread throughout the United States. We also offer emergency collection services on a 24/7 basis to support both federally regulated and non-regulated. In addition, we also offer both on-site and mobile collection services throughout the U.S., where available.

With our electronic scheduling system we eliminate the need for out-of-network (3rd party) charges and overnight mailing of forms, chain of custody forms, and associated costs. If out-of-network (3rd party) collection sites are needed we can manage that by performing a site match. All collection sites are required to adhere to our collection protocols that meet and exceed federal collection standards. Collectors must be properly trained and, for those who are collecting under DOT regulations, must be federally certified.

Info Cubic will only use Certified Laboratory Services:

- Urine testing laboratories that are certified by HHS/SAMHSA in the National Laboratory Certification Program (NLCP).
- The collection sites we utilize are all certified collectors and licensed doctors for all services required.
- Info Cubic instructs the MRO office to send blind samples to each lab that we utilize to test their performance and there instruments. The amount varies depending on volume we will insure it meets the DOT regulation.

Collection site performance is based on many variables. We monitor performance based on collector documentation and procedural errors, professionalism during collections, willingness and availability to meet client needs, and customer service. We maintain a documentation log for each interaction with a collection site, whether administrative or for a performance issue. We monitor collector errors and immediately remove sites from our network if either performance or service levels are not kept at our required high standards.

Medical Review Office (MRO)

Medical Review Officers conduct telephonic interviews with candidates, when they are positive for one or more drugs tested. In addition, MROs conduct interviews with candidates when their urine samples are reported by our partner laboratories as being adulterated, substituted or invalid.

In the event the lab sends the MRO a positive result the MRO team looks on the CCF to obtain the donor's phone number to contact him/her. If the donor is reached the MRO team member will transfer the donor to the MRO Doctor to start the MRO review process. If they aren't able to reach the donor they will leave a message and mark the case as awaiting call from donor. Info Cubic helps this process by employing a Designated Employer Representative (DER) who is also a subject matter expert in the Drug and Alcohol industry. This individual monitors the MRO system for statuses that show "need DER call in", and "awaiting donor call".

- In the event the status is "need DER call in" – Info Cubic's DER will call the MRO to see what additional information they are needing. In most cases, it is a different phone number for the donor. The DER will then contact that client to let them know whatever additional information is needed.
- In the event the status is "awaiting donor call", Info Cubic's DER will in turn contact the client so they can advise the donor to call into the MRO office to help speed up the process. Once the donor calls in the MRO office the MRO review process will begin.

If the result is to remain as a positive it will be reported as such and indicate what was positive in our system and on the PDF report along with the MRO Doctor's signature. It will be at that time the client can make the determination of what actions to take and what is indicated in there drug and alcohol company policy. If client needs further assistance they can call into Info Cubic's Answer Desk (staffed by Customer Service Ninjas) or they can contact their Account Manager.

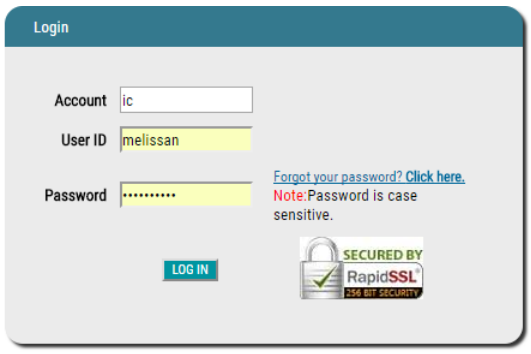
In order to protect both the client and their employee/applicant, the MRO service we utilize helps ensure that test results are both scientifically sound and legally defensible. No interviews are

conducted by an MRO until acceptable collection documentation has been reviewed both by MRO staff and the interviewing MRO. If the collection is improperly documented and cannot be recovered through a signed collector statement (or there is a fatal flaw as defined under federal regulations for federally required urine tests), the test is canceled by the MRO without conducting an applicant interview.

Assuming acceptable documentation, all non-negative donors are given the opportunity to provide an acceptable medical explanation for the result to a qualified MRO (a physician). No interviews are conducted by staff members or non-MROs. The MRO conducts an investigation into whether a positive result was the result of a legitimate prescribed medicine dated prior to the drug screen collection.

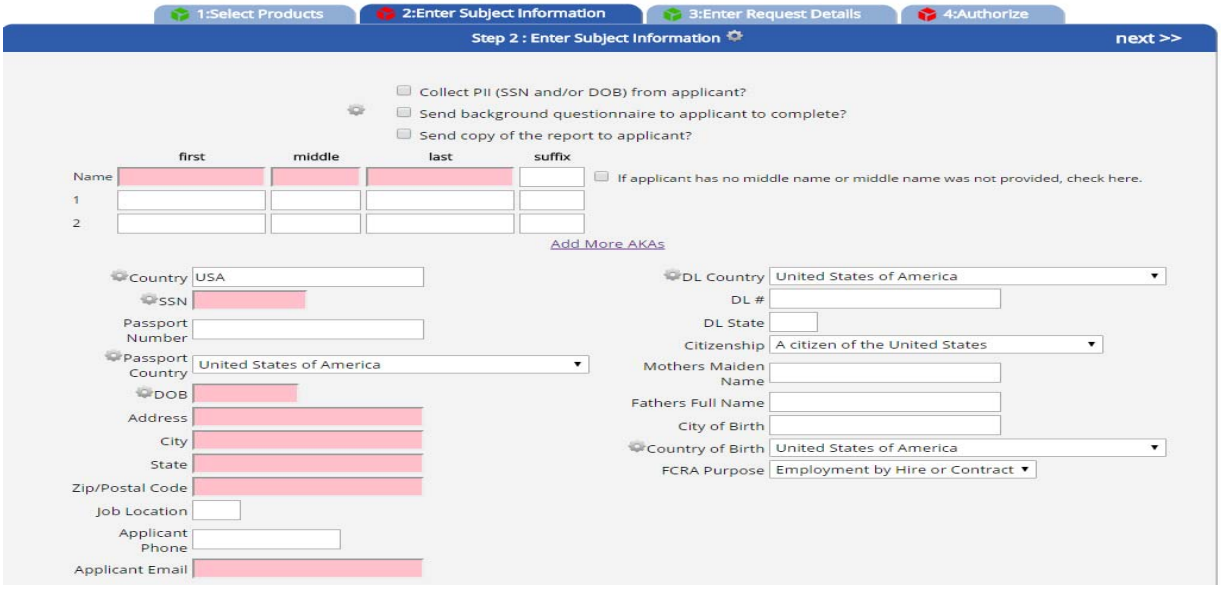
3. Ordering Urine Drug Screen Process

Your authorized users will receive a unique username and password to access the electronic ordering process in our platform we call The Cube found at www.infocubic.com:



Once logged in users would select the screen or package they need from a drop down menu:

The next step is to provide the applicant's required information, which will be highlighted in pink.

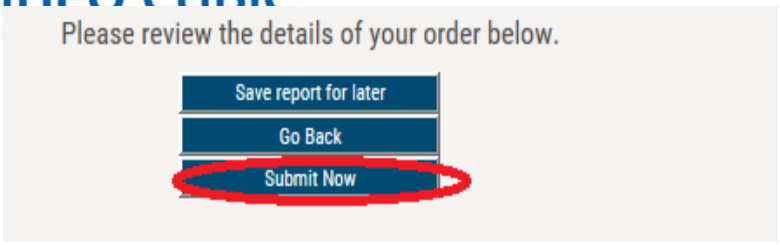


Please note: The applicant's email address is required for the system to email a scheduling link for them to choose their collection site.

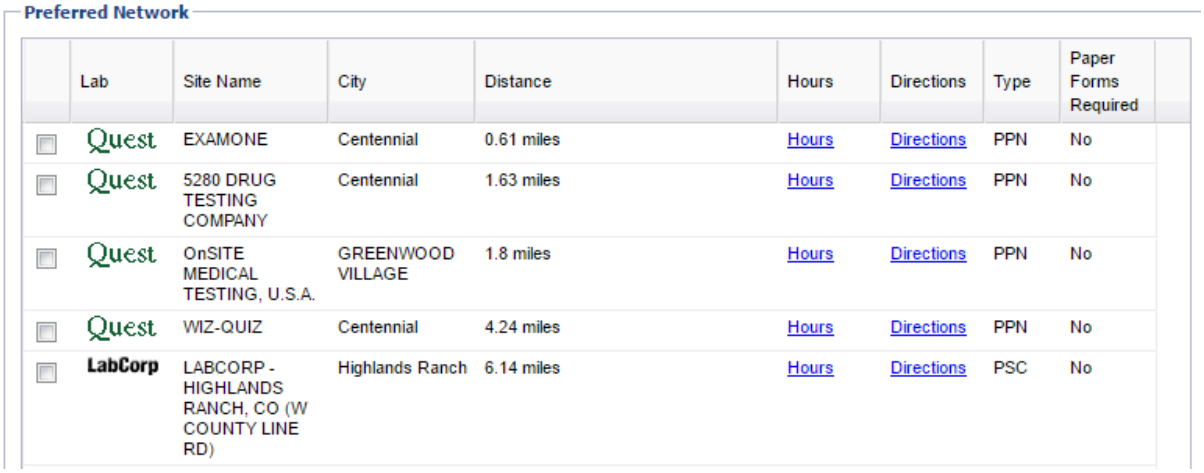
Once "next" is clicked they will need to put a check mark saying "client has obtained applicant authorization", for compliance purposes:

Once all required fields are completed, the red cubes will turn green. Once all the cubes have turned green you will be able to continue to the final step of submitting the order. The system will not allow you to submit an order if any required info is missing or provided in an improper format (such as the SSN not having enough digits).

After clicking on "Continue to Next Step" you will be taken to a final confirmation page providing order details including the cost. If everything looks good you'd click on "Submit Now" and you are done!



The applicant will now receive an emailed scheduling link to select a collection site from a list of pre-populated sites based on their current address.



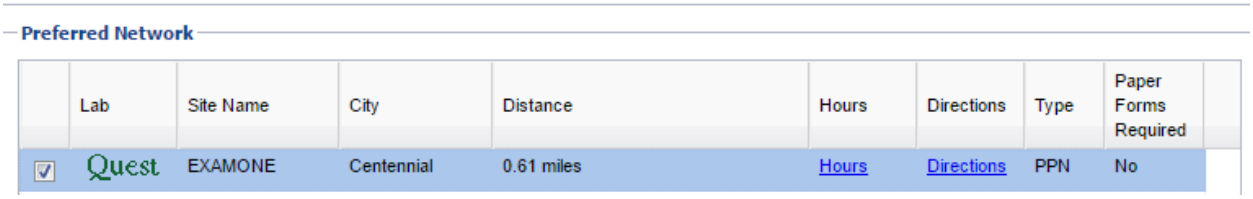
Preferred Network

	Lab	Site Name	City	Distance	Hours	Directions	Type	Paper Forms Required
☐	Quest	EXAMONE	Centennial	0.61 miles	Hours	Directions	PPN	No
☐	Quest	5280 DRUG TESTING COMPANY	Centennial	1.63 miles	Hours	Directions	PPN	No
☐	Quest	OnSITE MEDICAL TESTING, U.S.A.	GREENWOOD VILLAGE	1.8 miles	Hours	Directions	PPN	No
☐	Quest	WIZ-QUIZ	Centennial	4.24 miles	Hours	Directions	PPN	No
☐	LabCorp	LABCORP - HIGHLANDS RANCH, CO (W COUNTY LINE RD)	Highlands Ranch	6.14 miles	Hours	Directions	PSC	No

If the candidate isn't close to their current address it's a simple process to type in a new address or zip code to see a new collection of sites local to their current location.

The different locations will provide maps, hours of operation and contact information should the applicant need to contact them.

The candidate would choose their preferred collection site by clicking on it, which make it turn blue.

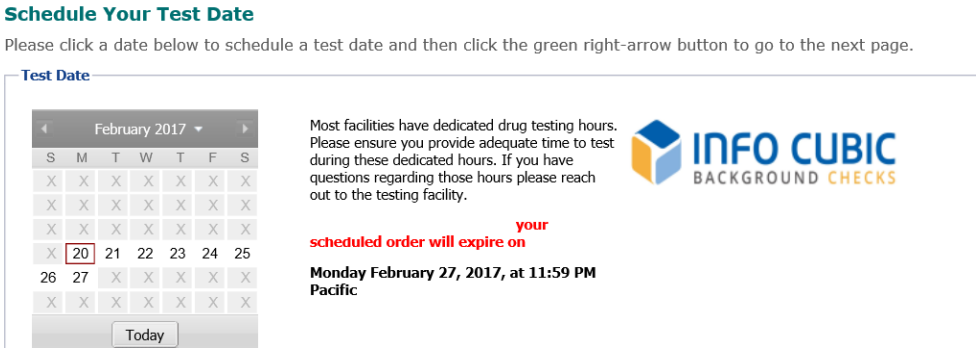


Preferred Network

	Lab	Site Name	City	Distance	Hours	Directions	Type	Paper Forms Required
☑	Quest	EXAMONE	Centennial	0.61 miles	Hours	Directions	PPN	No

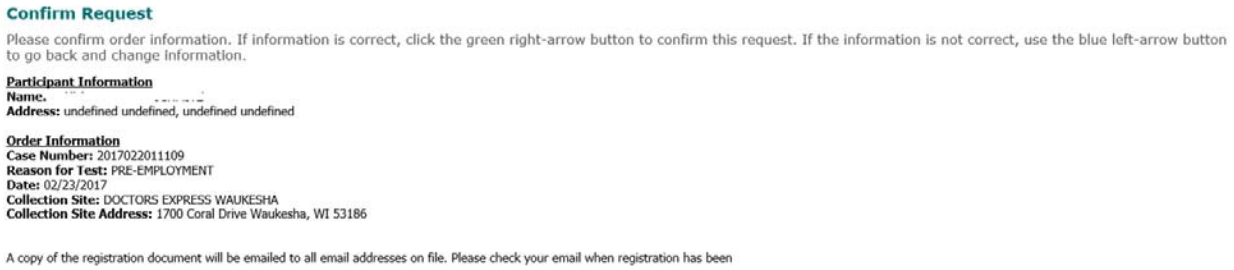
On the very bottom of the screen there would be a green arrow that they would click on to proceed to the next screen.

The next screen is to Schedule Your Test Date. This doesn't actually "schedule" the drug test, it is mainly used to make sure the candidate takes the test before the drug screen expires (most clients will limit the number of days that they can take the drug screen).



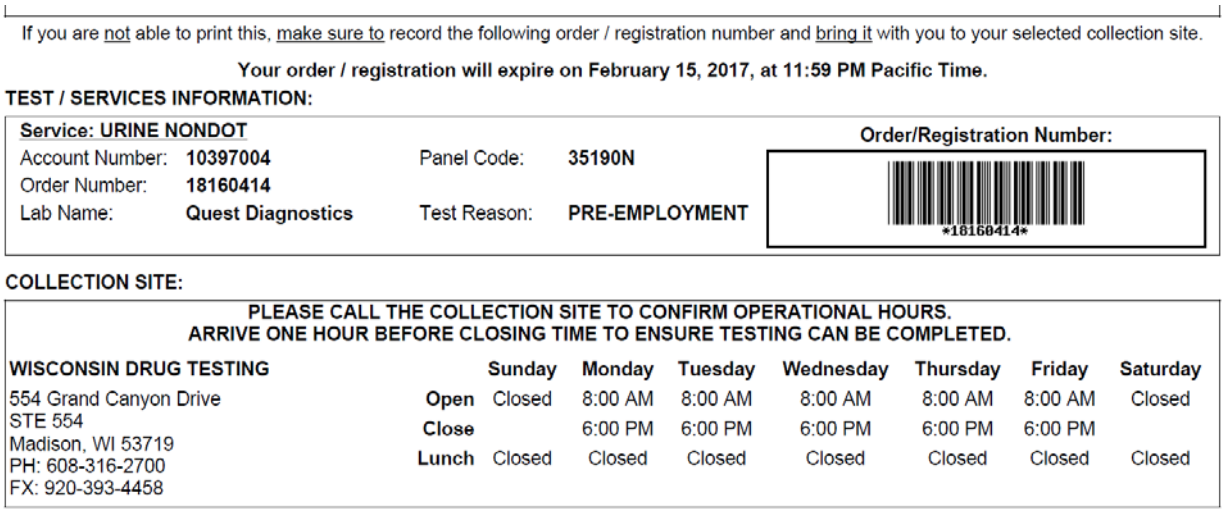
Once they choose a valid date they will then proceed to the bottom to the next green arrow.

This screen is the final confirmation screen. This will give the client/applicant one last chance to verify that everything looks correct.



By clicking on the green arrow one last time you will be taken to the electronic donor pass, which will populate with the order number that the collection site needs to pull the candidate up in the system. The candidate can print off the passport or can use their smart

phone to bring up the attachment that was emailed to them when they get to the facility. The most important thing they will need is the order number from the donor pass.



If you are not able to print this, make sure to record the following order / registration number and bring it with you to your selected collection site.

Your order / registration will expire on February 15, 2017, at 11:59 PM Pacific Time.

TEST / SERVICES INFORMATION:

Service: URINE NONDOT

Account Number: **10397004**
Order Number: **18160414**
Lab Name: **Quest Diagnostics**
Panel Code: **35190N**
Test Reason: **PRE-EMPLOYMENT**

Order/Registration Number:

18160414

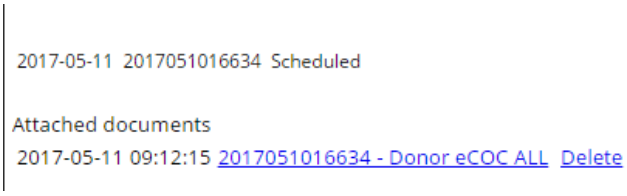
COLLECTION SITE:

PLEASE CALL THE COLLECTION SITE TO CONFIRM OPERATIONAL HOURS.
ARRIVE ONE HOUR BEFORE CLOSING TIME TO ENSURE TESTING CAN BE COMPLETED.

WISCONSIN DRUG TESTING
554 Grand Canyon Drive
STE 554
Madison, WI 53719
PH: 608-316-2700
FX: 920-393-4458

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	Closed	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	Closed
Close		6:00 PM	6:00 PM	6:00 PM	6:00 PM	6:00 PM	
Lunch	Closed	Closed	Closed	Closed	Closed	Closed	Closed

Once the applicant completes this process you will be able to see the donor pass in the order and that it is has been scheduled. Throughout the rest of the process there will be status updates automatically showing when scheduled, when collected, when received at lab, and when lab testing is completed.



2017-05-11 2017051016634 Scheduled

Attached documents
2017-05-11 09:12:15 2017051016634 - Donor eCOC ALL Delete

4. Ordering Breath Alcohol Process

The same steps will be taken as the ordering process in number 3. The only difference instead the donor pass saying Urine NonDot it will say Service: BREATH NONDOT.

If you are not able to print this, make sure to record the following order / registration number and bring it with you to your selected collection site.

Your order / registration will expire on June 13, 2017, at 11:59 PM Pacific Time.

TEST / SERVICES INFORMATION:

Service: BREATH NONDOT

Account Number:

Order Number: **2017060612744**

Lab Name: **i3screen**

Panel Code: **NDOT BREATH**

Test Reason: **PRE-EMPLOYMENT**

Order/Registration Number:

2017060612744

COLLECTION SITE:

PLEASE CALL THE COLLECTION SITE TO CONFIRM OPERATIONAL HOURS.
ARRIVE ONE HOUR BEFORE CLOSING TIME TO ENSURE TESTING CAN BE COMPLETED.

MEDEXPRESS URGENT CARE - ELM
10 Elm Grove Crossing Mall
Wheeling, WV 26003
PH: 304-242-4228
FX: 304-242-4256

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	Closed
Close	8:00 PM	8:00 PM	8:00 PM	8:00 PM	8:00 PM	8:00 PM	
Lunch	Closed	Closed	Closed	Closed	Closed	Closed	Closed

DONOR / PARTICIPANT INFORMATION:

testm testm - ***5555

CLIENT / EMPLOYER INFORMATION:

INFO CUBIC EMPLOYMENT SCREENING.
INFO CUBIC
9250 East Costilla Avenue
Greenwood Village, CO 80112
Phone: 1-877-360-4636
Account #:

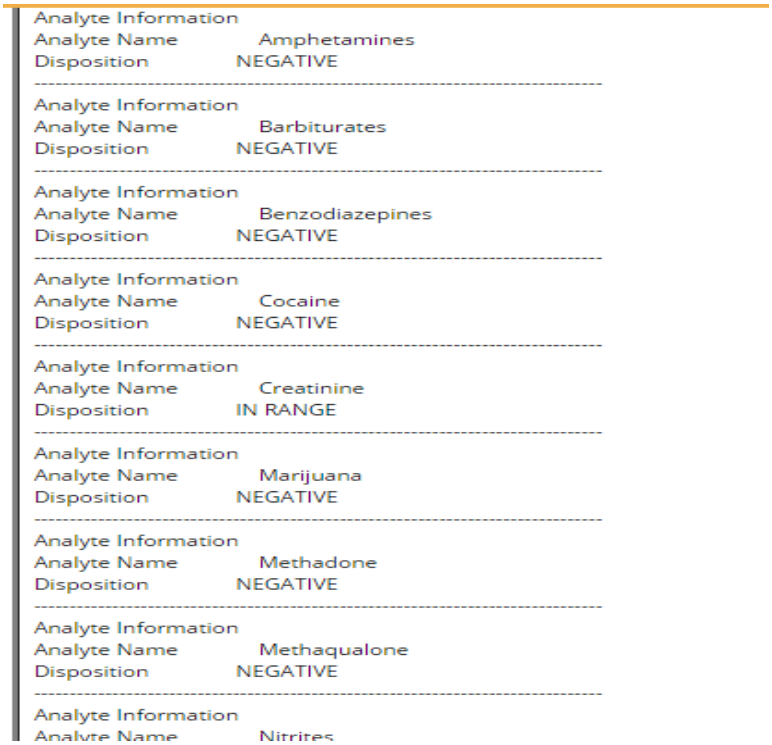
MRO INFORMATION:

David Nahin M.D.
I3SCREEN
9501 Northfield Blvd.
Denver, CO 80238
Phone: 877-585-7366 Fax: 855-253-5666

5. Reviewing Results

When Urine results are available they will automatically post back into the order that you had created in our system. This is all done electronically from our MRO's system. All documents related to the test will be supplied as well as the breakdown of the actual result.

The results can be emailed to your users as well as always be available online. The MRO Doctor signs off on every result with their signature being located on every PDF as seen below:



Analyte Information
Analyte Name Amphetamines
Disposition NEGATIVE

Analyte Information
Analyte Name Barbiturates
Disposition NEGATIVE

Analyte Information
Analyte Name Benzodiazepines
Disposition NEGATIVE

Analyte Information
Analyte Name Cocaine
Disposition NEGATIVE

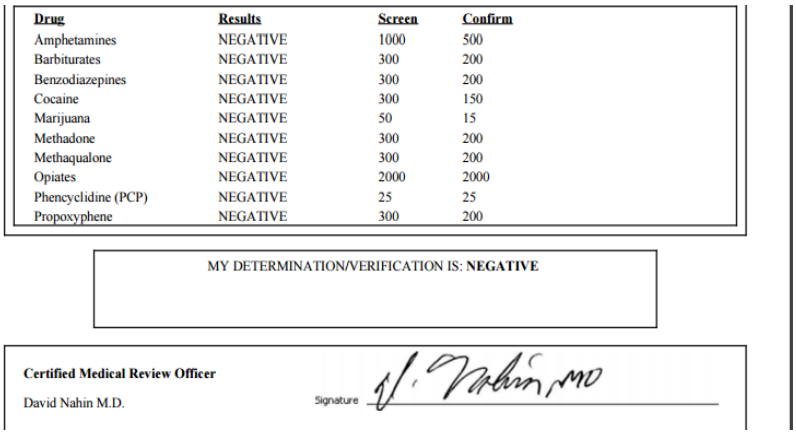
Analyte Information
Analyte Name Creatinine
Disposition IN RANGE

Analyte Information
Analyte Name Marijuana
Disposition NEGATIVE

Analyte Information
Analyte Name Methadone
Disposition NEGATIVE

Analyte Information
Analyte Name Methaqualone
Disposition NEGATIVE

Analyte Information
Analyte Name Nitrites



Drug	Results	Screen	Confirm
Amphetamines	NEGATIVE	1000	500
Barbiturates	NEGATIVE	300	200
Benzodiazepines	NEGATIVE	300	200
Cocaine	NEGATIVE	300	150
Marijuana	NEGATIVE	50	15
Methadone	NEGATIVE	300	200
Methaqualone	NEGATIVE	300	200
Opiates	NEGATIVE	2000	2000
Phencyclidine (PCP)	NEGATIVE	25	25
Propoxyphene	NEGATIVE	300	200

MY DETERMINATION/VERIFICATION IS: **NEGATIVE**

Certified Medical Review Officer

David Nahin M.D.

Signature

All documents can be printed if they need to be placed in a separate employee file:

Attached documents View all combined
2017-04-24 16:17:00 2017042113900 - Donor eCOC ALL Delete
2017-04-27 07:50:26 2017042113900 - MRO ALL Delete

When Breath Alcohol results are available they will automatically post back into the order that you had created in our system. This is all done electronically from our MRO's system. All documents related to the test will be supplied as well as the breakdown of the actual result.

The results can be emailed to your users as well as always be available online. The MRO Doctor signs off on every result.

Test Type D2BATI3F8NONDOTBREATHALCOHOL
Test Package
Donor Name [redacted]
Phone Number
SSN XXX-XX[redacted]
Other ID 5092625
DOB
Reason For Test [redacted]
Collection Date 2017-05-04
Specimen Id BAT0504201739979998
Lab Name i3screen
Lab Account 10473410
Location Code 226025
Reference ID 2017050513592
Combined Result NEGATIVE

MRO Information
Name

Analyte Information
Analyte Name Breath Alcohol
Disposition NEGATIVE

Test Results

Panel - NONDOT BAT NONDOTBREATHALCOHOL

Drug	Results	Screen	Confirm	Levels
Breath Alcohol	NEGATIVE			

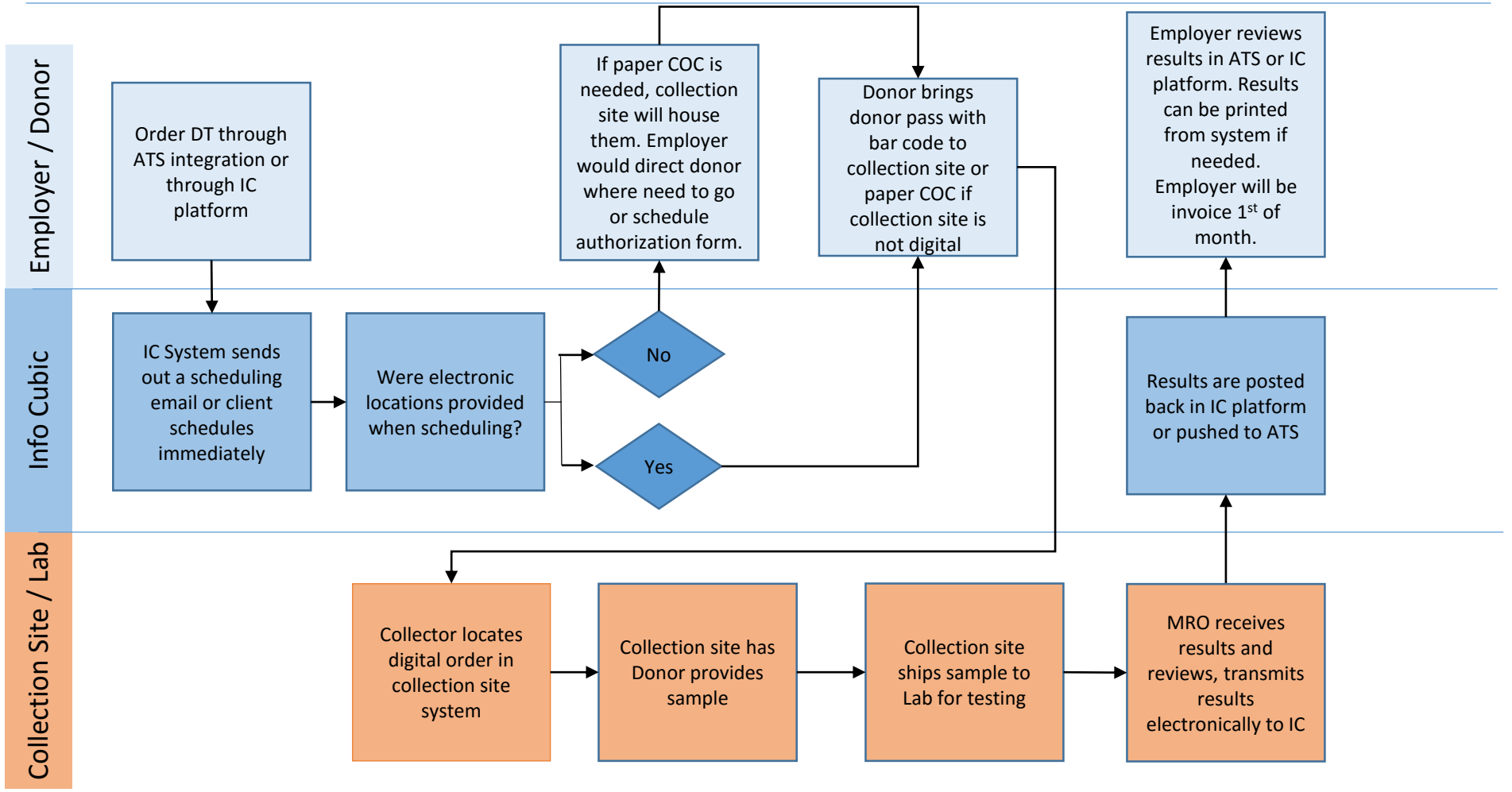
NEGATIVE

All documents can be printed if they need to be placed in a separate employee file:

6. Collection site:

Info Cubic has several solutions to your collection site locations and we have relationships with 300 locations within WV State, for the services you are inquiring about. Info Cubic can work with any collection site, and ensure they all comply with all modality regulations as well as state and local laws.

Info Cubic Drug Testing Process Flow



SOLICITATION NUMBER: CRFQ BCF1700000005

The purpose of this addendum is to modify the solicitation identified as CRFQ BCF1700000005 ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

[ ] Modify bid opening date and time

[ ] Modify specifications of product or service being sought

[X] Attachment of vendor questions and responses

[ ] Attachment of pre-bid sign-in sheet

[ ] Correction of error

[X] Other

Description of Modification to Solicitation:

1. **Provide a response to vendor questions**
2. **Provide a revised Exhibit A – Pricing Page**

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.

2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ADDENDUM #1 TO RESPOND TO VENDOR QUESTIONS

Vendor Question #1
We have one quick question we hope you will grant us an answer to as soon as possible, to allow us to properly configure our response to your RFP. We noticed that your RFP requires SAMHSA licensing for responding laboratories and wish to inquire whether you will consider CLIA as an equal, acceptable license.

The biggest difference between the licensures is that SAMHSA licensure is specifically meant to regulate workplace drug testing for only 5 drugs—Amphetamines/Methamphetamines, Cocaine, Opiates, PCP, and Marijuana (THC)—and now Ecstasy (MDMA) (a sub-group under amphetamines) and Heroin (6-MAM) (under the opiates class). As your agency focuses on the family sector as opposed to workplace or employment testing, SAMHSA licensure and practices may not be quite as appropriate or necessary. Moreover, it appears that your agency is interested in testing for additional non-SAMHSA regulated drugs (such as Barbiturates, Benzodiazepines, Methadone, Propoxyphene) which are not regulated under SAMHSA.

As such, we would like your agency to consider laboratories with CLIA licensure to be on equal—or better—footing with SAMHSA laboratories.

Agency Response to Vendor Question #1
Yes, we will accept Clinical Laboratory Improvement Amendments (CLIA) certification as a substitute for Substance Abuse and Mental Health Services Administration (SAMHSA) licensing.

Vendor Question #2
Is this the first time for this bid.

Agency Response to Vendor Question #2
Yes.

Vendor Question #3
Will this be a instant test, if positive ship to lab for confirmation?

Agency Response to Vendor Question #3
All tests will require lab to confirm.

Vendor Question #4
Is the testing done by appointment?

Agency Response to Vendor Question #4
Testing can be by appointment or walk-in.

Vendor Question #5
Can we use the urgent care facilities for the 10 locations throughout the state?

Agency Response to Vendor Question #5
Yes, the successful vendor can use any location.

Vendor Question #6
Regarding Collectors: Is the vendor required to employ train, and pay collectors at each center? Does the collector need to be on site every day or is there a schedule of certain days per week?

Agency Response to Vendor Question #6
Yes, vendors will employ, train, and pay collectors at each center. The site should be open at least Monday thru Friday 7:00am to 5:00pm EST.

Vendor Question #7
How will the reports be delivered? Will you require an electronic report or a hard copy report?

Agency Response to Vendor Question #7
A hard copy of the report is required. Please see section 4.1.17 of the specifications for more details.

Vendor Question #8
Is the standard test requirements for screen and confirmation of both negative and positive test results?

Agency Response to Vendor Question #8
Both negative and positive test results are required. Please see section 4.1.14 for more details.

Vendor Question #9
Will alcohol be standard with each test? Is separate pricing for the alcohol test required?

Agency Response to Vendor Question #9
Alcohol and Drug testing will be two separate tests with separate pricing. A revised Exhibit A – Pricing Page will be included to allow for separate pricing.

Vendor Question #10
What was the pricing on all items from the previous contract?

Agency Response to Vendor Question #10
There is no current or previous contract. This is the first solicitation for these services.

Vendor Question #11
Please provide the current contract and all attachments, modifications, and addendums attached thereto.

Agency Response to Vendor Question #11
There is no current contract. This is the first solicitation for these services.

Vendor Question #12
What is the standard means of billing on the current contract and all addendums since its original awarding?

Agency Response to Vendor Question #12
There is no current or previous contract. This is the first solicitation for these services.

Vendor Question #13
How many collection locations are under contract currently outside of the requirement of the vendor?

Agency Response to Vendor Question #13
There is no current or previous contract. This is the first solicitation for these services.

Vendor Question #14
In collection sites not controlled by the vendor, is the vendor still responsible for "expert collection procedures?"

Agency Response to Vendor Question #14
Yes, the vendor is responsible for all collection procedures.

Vendor Question #15
How many counties does the current vendor have actual collection sites established in?

Agency Response to Vendor Question #15
There is no current or previous contract. This is the first solicitation for these services.

Vendor Question #16
What are those locations and where are those collections sites?

Agency Response to Vendor Question #16
There is no current or previous contract. This is the first solicitation for these services.

Vendor Question #17
How will the vendor receive knowledge of a client's referral for drug testing and what tests are ordered?

Agency Response to Vendor Question #17
The client's referral will be called into the vendor to process the request.

Vendor Question #18
What documentation of the referral does the vendor need to have to submit for payment for testing upon successful completion of testing and reporting?

Agency Response to Vendor Question #18
Invoice must be submitted monthly and include on a separate page(s) detail referrals by DHHR location.

Vendor Question #19
To whom does the vendor submit request for payment?

Agency Response to Vendor Question #19
Vendor can submit monthly invoices, in arrears, to Bureau for Children and Families, 350 Capitol Street, Room 730, Charleston, WV 25301. Please see section 7. PAYMENT of the specifications.

Vendor Question #20
What is the turnaround time for payment once invoiced?

Agency Response to Vendor Question #20
Average turnaround time is about thirty (30) days.

Vendor Question #21
In reference to section 1 of Specifications, to establish an open-end contract for drug and alcohol testing services for selected Temporary Assistance for Needy Families (TANF) and other clients/applicants as needed and requested, what differentiates these 2 tests? What is the difference between the 40,000 tests and the 6,000 tests?

Agency Response to Vendor Question #21
The tests themselves are the same. The differences is the programs the client applicants fall under.

Vendor Question #22
What is meant by Reasonable Suspicion or other reason for test?

Agency Response to Vendor Question #22
DHHR will make the determination when a test is required.

Vendor Question #23
In reference to 4.1.4, under what circumstances do you see a mobile collection being performed? Also, what is the estimated amount of mobile collections to be performed?

Agency Response to Vendor Question #23
This is at the vendor's discretion as long as they can serve the entire state of West Virginia. The estimated amount of mobile collections is 10%.

Vendor Question #24
In reference to 4.1.4, is DHHR intention to do most of these tests in clinics/Dr. Offices?

Agency Response to Vendor Question #24
This is at the vendor's discretion as long as they can serve the entire state of West Virginia.

Vendor Question #25
In reference to 4.1.5, are you aware that the majority of clinics and doctor's offices that do collections are not open until 8:00 am? Is it possible for the hours of operation to be changed from 7:00 am-5:00 pm to 8:00 am-5:00 pm?

Agency Response to Vendor Question #25
No, the hours must be from 7:00am to 5:00pm EST as listed in section 4.1.5 of the specifications.

Vendor Question #26
In reference to 4.1.11, DOT is changing their requirements at the end of the year regarding Blind Specimens as a mandatory requirement. Will this solicitation follow suit with DOT or still require blind specimens to be submitted?

Agency Response to Vendor Question #26
This solicitation will follow suit with DOT.

Vendor Question #27
In reference to 4.1.12, when is a breath alcohol test required?

Agency Response to Vendor Question #27
DHHR will determine when the breath alcohol test is required.

Vendor Question #28
In reference to 4.1.13, does the MRO need to be a WV domiciled? Does the MRO need to be licensed to practice in the state of WV?

Agency Response to Vendor Question #28
No, the MRO does not need to be WV domiciled. Yes, the MRO needs to be licensed to practice in the state of West Virginia.

Vendor Question #29
In reference to 4.1.14, according to 49 CFR Part 40, the guideline states that the MRO has 10 days for donors to respond before it is ruled no contact positive. How does this affect the 72 hour stipulation in the solicitation?

Agency Response to Vendor Question #29
As section 4.1.14 of the specifications state, if turnaround time exceeds 72 hours the state agency must be contacted.

Vendor Question #30
In reference to 4.1.14, is an MRO confidential result webpage sufficient for results reporting or do the results need to be sent manually?

Agency Response to Vendor Question #30
An MRO confidential result webpage can be provided, however the results must still be sent in writing.

Vendor Question #31
In reference to 4.1.15, why would the vendor be required to keep the laboratory records vs. the MRO results?

Agency Response to Vendor Question #31
All laboratory specimens and records must be maintained for the appropriate period of time to comply with 49 CFR.

Vendor Question #32
How will these tests be invoiced? Will it be by name, social, or a state issued number such as a unique identifying number?

Agency Response to Vendor Question #32
Invoice must be submitted monthly and include on a separate page(s) detail referrals by DHHR location.

Vendor Question #33
How did you arrive at the quantity of tests requested? What is the difference between the 40,000 tests and the 6,000 tests? How will that be determined? Is the 40,000 tests over a period of all 3 years or 1 year?

Agency Response to Vendor Question #33
The tests themselves are the same. The differences is the programs the client applicants fall under. The number of tests listed are for 1 year.

Vendor Question #34
What do you anticipate being the total number of participants subject to testing?

Agency Response to Vendor Question #34
Estimated at 46,000 a year.

Vendor Question #35
Please show a detailed flow chart of how and when a drug test is to be performed. Please see attached example.

Agency Response to Vendor Question #35
The example that was included with Vendor Question #35 is attached as DHHR Workflow Example.xls. Drug testing should flow as follows: DHHR will make a referral to the vendor > Vendor collects specimen > Specimen is sent to the lab > Lab results are sent to DHHR.

Vendor Question #36
Are all applicants for any cash assistance going to be drug tested?

Agency Response to Vendor Question #36
No, DHHR will determine when a test is required.

Vendor Question #37
In reference to Section 7 Payment, What documentation will need to be submitted with the invoice to determine the dates, type of test, and cost per test? Are you asking for a copy of the Chain of Custody, or a copy of results? Can you be more specific on what proper documentation refers to?

Agency Response to Vendor Question #37
Invoice must be submitted monthly and include on a separate page(s) detail referrals by DHHR location. A copy of the Chain of Custody or results are not required to be sent in with the invoice. Invoice must be submitted monthly and include on a separate page(s) detail referrals by DHHR location, including the date of collection, applicants name, type of test performed, and itemized list of charges.

Vendor Question #38
Will the donor's be responsible for taking the Chain of Custody to the collection site or will the collection site be responsible for stocking the Chain of Custody?

Agency Response to Vendor Question #38
The collection site will be responsible for stocking the Chain of Custody.

Vendor Question #39
Are electronic Custody and Control forms permissible?

Agency Response to Vendor Question #39
Custody and Control forms must be compliant with 49 CFR.

Vendor Question #40
What departments of the State do the drug tests include?

Agency Response to Vendor Question #40
DHHR Bureau for Children and Families.

Vendor Question #41
Who is the current vendor?

Agency Response to Vendor Question #41
There is no current vendor. This is the first solicitation for these services.

Vendor Question #42
What is the current cost per drug test including MRO fee, drug test and collection?

Agency Response to Vendor Question #42
There is no current cost. This is the first solicitation for these services.

Vendor Question #43
Are any tests conducted on site and if so where are the locations and departments?

Agency Response to Vendor Question #43
No tests will be conducted on site.

Vendor Question #44
What departments are required to have alcohol tests and how many per year?

Agency Response to Vendor Question #44
DHHR will determine how many tests will be performed on a case by case basis.

Vendor Question #45
What is the cost for breath alcohol testing?

Agency Response to Vendor Question #45
There is no current cost. This is the first solicitation for these services.

Vendor Question #46
How many drug tests were conducted under this contract last year?

Agency Response to Vendor Question #46
No drug tests were conducted under this contract last year. This is the first solicitation for these services.

Vendor Question #47
How many alcohol tests were conducted under this contract last year?

Agency Response to Vendor Question #47
No alcohol tests were conducted under this contract last year. This is the first solicitation for these services.

Vendor Question #48
Who are the departments that include the 40,000 tests??

Agency Response to Vendor Question #48
DHHR Bureau for Children and Families.

Vendor Question #49
Is it correct that DCF does 6,000 drug tests per year?

Agency Response to Vendor Question #49
6,000 is the estimated number of TANF client to be tested.

Vendor Question #50
Do all DCF clients get a drug and alcohol test with each testing?

Agency Response to Vendor Question #50
No, DHHR will determine which drug test will be required.

Vendor Question #51
What types of alcohol testing is allowed. Is it only breath?

Agency Response to Vendor Question #51
Breath and saliva testing are allowed. Please see section 4.1.12 for details, which includes a link to all the approved alcohol testing devices.

Vendor Question #52
Can saliva alcohol be used or blood alcohol?

Agency Response to Vendor Question #52
Breath and saliva testing are allowed. Please see section 4.1.12 for details, which includes a link to all the approved alcohol testing devices.

Vendor Question #53
Who is the current lab performing the test?

Agency Response to Vendor Question #53
There is no current vendor. This is the first solicitation for these services.

Vendor Question #54
Can the State be more specific in regards to the requirement for on-site testing?
How many tests at time are required and for what departments?

Agency Response to Vendor Question #54
Vendor must be able to provide services statewide. 46,000 is the estimated number of tests per year for DHHR Bureau of Children and Families.

Vendor Question #55
Are any tests for US DOT employees?

Agency Response to Vendor Question #55
No.

Vendor Question #56
Are the onsite tests for randoms?

Agency Response to Vendor Question #56
No, DHHR will determine when a test is required.

Vendor Question #57
How many times were MRO in person testimony required last year?

Agency Response to Vendor Question #57
There is no current or past vendor. This is the first solicitation for these services.

Vendor Question #58
Do all drug tests require the listed 9 panel plus expanded opiates?

Agency Response to Vendor Question #58
Yes.

Vendor Question #59
Who is the current vendor for the drug and alcohol testing services?

Agency Response to Vendor Question #59
There is no current vendor. This is the first solicitation for these services.

Vendor Question #60
What are the fees the DHHR currently pays for drug and alcohol testing services?

Agency Response to Vendor Question #60
Drug and alcohol testing is currently not being done for these services. This is the first solicitation for these services.

Vendor Question #61
Is the current contract available for examination? If so, how should interested Proposers go about obtaining a copy?

Agency Response to Vendor Question #61
There is no current contract. This is the first solicitation for these services.

Vendor Question #62
What is the date by which the DHHR expects to issue an award?

Agency Response to Vendor Question #62
As soon as possible after bid closing and bid evaluation.

Vendor Question #63
What is the date by which the DHHR expects services to launch?

Agency Response to Vendor Question #63
As soon as the contract has been awarded.

Vendor Question #64
Section 4.1.19 Page 26 Would testimony via phone or web-conference (e.g., Skype) be permitted under any circumstances?

Agency Response to Vendor Question #64
Only if permitted by the court.

Vendor Question #65
What is the positivity rate of the specimens?

Agency Response to Vendor Question #65
None.

Vendor Question #66
How many positive tests in 2016?

Agency Response to Vendor Question #66
None.

Vendor Question #67
What are the specific responsibilities of the Medical Review officer (MRO)?

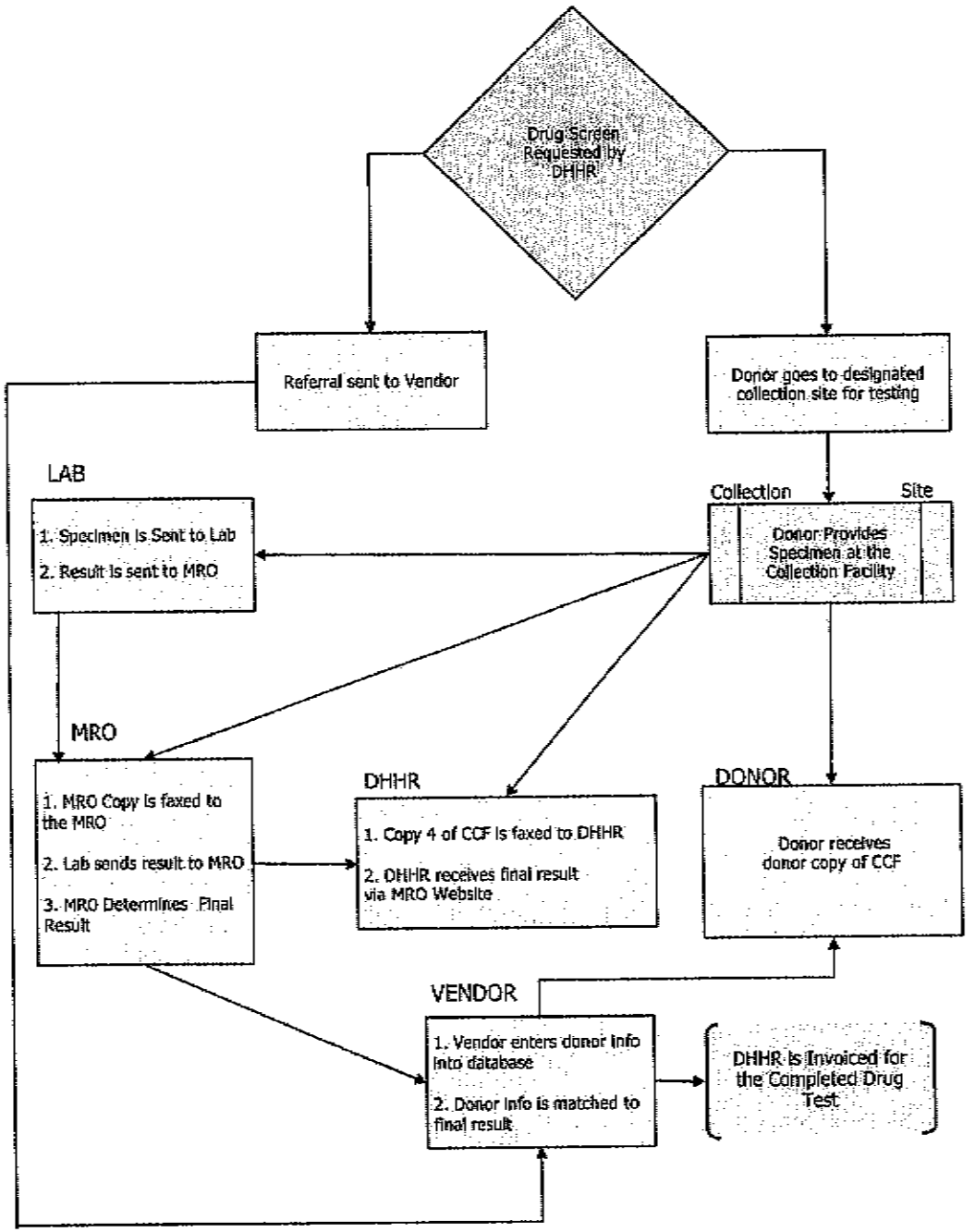
Agency Response to Vendor Question #67
Please see section 4.1.13 of the specifications.

Vendor Question #68
Does the MOR have to review every case?

Agency Response to Vendor Question #68
Yes, please see section 4.1.13 of the specifications for more details.

Vendor Question #69
Does the MRO have to be the Chief Medical officer of the testing laboratory?

Agency Response to Vendor Question #69
No, please see section 4.1.13 of the specifications for more details.


Drug Screen Requested by DHHR
Referral sent to Vendor
Donor goes to designated collection site for testing
LAB
1. Specimen is Sent to Lab
2. Result is sent to MRO
Collection Site
Donor Provides Specimen at the Collection Facility
MRO
1. MRO Copy is faxed to the MRO
2. Lab sends result to MRO
3. MRO Determines Final Result
DHHR
1. Copy 4 of CCF is faxed to DHHR
2. DHHR receives final result via MRO Website
DONOR
Donor receives donor copy of CCF
VENDOR
1. Vendor enters donor info into database
2. Donor info is matched to final result
DHHR is Invoiced for the Completed Drug Test

	Service	Estimated Qty	Unit	Cost	Extension
4.1	Selected TANF clients Drug Testing	5000	tests	$30.00	$150,00 0
4.1	Selected TANF clients Alcohol Testing	1000	tests	$32.00	$ 32,000
4.1	Selected Other clients Drug Testing	35000	tests	$30.00	$1,050,00 0
4.1	Selected Other clients Alcohol Testing	5000	tests	$32.00	$160,00 0
4.1.19.1	Collection Expert Witness Testimony	10	hours	$250.00	$2,50 0
4.1.19.2	Laboratory Expert Witness Testimony	10	hours	$500 per package	$50 0
4.1.19.3	MRO Expert Witness Testimony	10	hours	$275.00	$ 2,75 0
4.1.19.4	Collection Expert Testimony at Deposition	10	hours	$250.00	$ 2,50 0
4.1.19.5	Laboratory Expert Testimony at Deposition	10	hours	$500 per package	$50 0
4.1.19.6	MRO Expert Testimony at Deposition	10	hours	$275.00	$2,75 0

Total Bid $1,603.50 0

CONTACT INFORMATION

Vendor Name: Info Cubic

Vendor Address: 9250 E. Costilla Ave Ste 525
Greenwood Village CO 80112

Vendor Contact Name: Dan Mayer

Vendor Phone Number: 877-360-4636

Vendor Fax Number: 303-220-0171

Vendor Email Address: danmayer@infocubic.com

Signature of Authorized Vendor Agent: [signature] Date: 6/6/17

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ BCF1700000005

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:
(Check the box next to each addendum received)

[X]	Addendum No. 1	[ ]	Addendum No. 6
[X]	Addendum No. 2	[ ]	Addendum No. 7
[X]	Addendum No. 3	[ ]	Addendum No. 8
[ ]	Addendum No. 4	[ ]	Addendum No. 9
[ ]	Addendum No. 5	[ ]	Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Info Cubic
Company

Authorized Signature

6/6/17
Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Dan Mayer EVP

(Name, Title)

Daniel Mayer Executive Vice President

(Printed Name and Title)

9250 E. Costilla Ave Ste 525 Greenwood Village CO 80112

(Address)

877-360-4636 303-220-0171

(Phone Number) / (Fax Number)

danmayer@infocubic.com

(email address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Info Cubic

(Company)

DM EVP

(Authorized Signature) (Representative Name, Title)

Daniel Mayer Executive Vice President

(Printed Name and Title of Authorized Representative)

6/6/17

(Date)

877-360-4636 303-220-0171

(Phone Number) (Fax Number)

INFO CUBIC
BACKGROUND CHECKS

June 7, 2017

State of West Virginia

Department of Administration, Purchasing Division

2019 Washington Street East

Charleston, WV 25305

RE: CRFQ 0511 BCF1700000005

To whom it may concern;

This proposal is submitted in response to The State of West Virginia for Drug and Alcohol Testing Services. Our proposal is completed in accordance with the format and instructional requirements of the CRFQ. Info Cubic takes no exceptions to the Scope of Work, specifications and/or terms and conditions described within the CRFQ. Info Cubic agrees to and accepts the general terms and conditions of this proposal.

The contact person and information provided below is duly authorized to bind Info Cubic to the terms and conditions provided in our proposal and as laid out in the CRFQ.

Thanks for your time and consideration.

Sincerely,

Dan Mayer – Executive Vice President
Info Cubic Employment Screening
9250 E Costilla Ave. Ste 525
Greenwood Village, CO 80112
303-220-0170 Phone
303-220-0171 Fax
danmayer@infocubic.com