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RN EXPERTISE

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214 Hickman Dr. Ste 102 Sanford, FL 32771 (407) 321-8611 FAX (407) 321-6166





To Brittany E Ingraham			From: Christine Steele		
Fax: (304)	558-3970		Pages	: 28 with cover	
Phone:		Date: 2 25 2020			
☐ Urgent	For Review	☐ Please Comment	Please Reply	☐ Please Recycle	
• Commen	ts:		1		
Response to	CRFQ 0506 HHR	20000000005 Drug and Alco	hol Testing Services	S	
Due Februar	y 25, 2020 @ 1:30	pm			

RECEIVED

2020 FEB 25 AM II: 54

WW FORWARDSING



# RN Expertise, Inc.

"For Convenient and Quality Service"

February 24, 2020

Department of Administration Purchasing Division Attn: Brittany Ingraham 2019 Washington Street East Charleston WV 25305

RE: CRFQ 0506 HHR2000000005

Dear Ms. Ingraham:

RN Expertise, Inc. is pleased to participate in the above referenced RFQ. RN Expertise, Inc. certifies that it has read the RFQ in its entirety and is able to meet all of the service requirements listed in the RFQ. All questions and answers have been reviewed. RN Expertise, Inc. has over 27 years experience in the drug testing industry and is very qualified to perform the drug and alcohol testing services required by the State of West Virginia.

RN Expertise, Inc. serves as a national third party administrator for drug testing programs for both private and governmental agencies. We provide DOT and non-DOT drug and alcohol testing services for over 1,200 clients and arrange off-site and on-site drug screen and breath alcohol testing services to meet the specific needs of each individual customer. RN Expertise, Inc. provides accurate and reliable services in a cost effective manner. RN Expertise, Inc. originated in 1993 and began performing paramedical exams and on-site drug testing. We began providing DOT drug testing services in 1995 when the Omnibus Transportation Testing Act of 1991 was implemented.

The President of RN Expertise, Inc. attended training offered by the individual Dr. Donna Smith who was one of the authors of CFR 49 Part 40 guidelines. Ms. Steele attended this training in 1994 and began implementing TPA services for Department of Transportation workplaces in the United States. We were one of the original TPA's who started providing these services when the program began. Ms. Steele served on the Board of the Drug and Alcohol Testing Industry Association during that time. She is a Certified Breath Alcohol Instructor and is certified by Intoximeter. Ms. Steele is also a Certified

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Department of Transportation Collector Trainer. She has trained hundreds of collectors and breath alcohol technicians over the years. Ms. Steele has attended DOT trainings throughout the years on any updates and changes in Federal guidelines. She also subscribed to the RED BOOK and receives all updates in Federal and state drug testing guidelines. The staff at RN Expertise is updated on any changes in guidelines.

RN Expertise, Inc. is a Women Business Enterprise and is 100% owned by Ms. Christine Steele, RN. RN Expertise, Inc. is a Subchapter S Corporation and is a small business. Our Federal Id Tax number is 59-3172603. The principal place of business is:

RN Expertise, Inc.
214 Hickman Dr Ste 102
Sanford, FL 32771
(407) 321-8611
Fax (407) 321-6166
Contact: Christine Steele, President
Rnexinc@aol.com

The president of RN Expertise, Inc. prepared this proposal and is available to answer any questions that may arise during evaluation. It is RN Expertise's goal to provide the most affordable, expedient and quality services possible. We strive for excellence. We have an excellent reputation in the industry and take pride in customer service. Our staff is always available to assist our clients. RN Expertise, Inc. provides 24 hour turn around on negative results and 48-72 hour turn around on positive results.

The administrative staff of RN Expertise has over 19 years experience with the company. They are well educated on federal drug testing guidelines. They provide data entry, statistical reporting, billing, MRO assistance, customer service, random generation, and communicate with Ms. Steele on any customer service issues. The administrative staff communicates with clients and serves as a liaison between the laboratory and the clients to assist with any questions that occur regarding the drug testing process. RN Expertise, Inc. utilizes the Medical Review Officer services of Dr. Emily Vives. She has 11 years experience as a Medical Review Officer and is certified by AAMRO.

RN Expertise, Inc. provides all services required by Federal, State, and non-regulated programs. We are very experienced in originating new programs and with arranging any form of drug alcohol testing services. We have national access to collection sites and have a 26 year relationship history with the major drug testing laboratories. RN Expertise also specializes in on-site testing and has a network of on-site testing partners located throughout the US.

As mentioned, we provide services for many different varieties of drug free workplaces. Some of our clients are: The Wackenhut Corporation, The Greater Orlando Aviation Authority, State of West Virginia DHHR, Trillium Driver Solutions, Louisiana State University Health Services/Hospitals, North Carolina Department of Public Safety/Corrections, NC Department of Administration, The State of Louisiana, etc. We

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provide services for Department of Transportation workplaces, State of Florida Drug Free workplaces and numerous non-Dot workplaces throughout the nation. It is our goal to provide an excellent turnkey drug and alcohol testing program for Workforce West Virginia.

We utilize the laboratory services of Abbott formerly Alere, a DHHS SAMHSA certified laboratory. Abbott(formerly Alere) has years of experience in forensic toxicology. All laboratory services for all drug test types and panels will be performed by Alere. We are contracted with Alere with a price agreement for services and the results are sent from the laboratory to our Medical Review Officers at RN Expertise, Inc.

RN Expertise appreciates the potential opportunity to provide services to the State of WV Jobs & Hope Program. If any questions arise during the evaluation period, I may be contacted at (407) 321-8611. It would be my pleasure to answer any questions and to assist you with the administration of your drug and alcohol testing requirements.

Sincerely,

Christine Steele

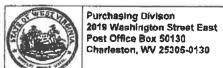
President RN Expertise, Inc. 214 Hickman Drive Ste 102

Sanford, FL 32771 (407) 321-8611

02/25/2020 11:48

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RN EXPERTISE



State of West Virginia Request for Quotation 26 — Medical

,	Proc Folder: 667021		
1	Doc Description: Adden	dum No.04 - Drug and Alcohol Testing Services	
	Proc Type: Central Maste	er Agreement	
Date Issued	Solicitation Closes	Solicitation No	Version

BURESEVINGUOSA CONHIBERT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

Vendor Name, Address and Telephone Number:

RN Expertise Fre

214 HICKMS Dn Ste. 15
SAN FRE SIMI 407-321-8611

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham

(304) 558-0067

brittany.e.ing aham@wv.gov

Signature X

FEIN# 59-317263

DATE ) -) 0-) 20

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

Page: 1

FORM ID: WV-PRC-CREQ-001

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Addendum No.04 - The purpose of this addendum is to:

- 1. Modify specification 4.1.6 and 4.1.18 per the attached.
- 2. Publish additional vendor questions and agency responses.

No other changes.

PURCHASING AGENT - 30	4-356-4802	PURCHASING AGENT - 30	04-356-4802
HEALTH AND HUMAN RES	SOURCES	HEALTH AND HUMAN RE	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
us		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	All inclusive price drug & alcohol observed screening	3000.00000	EA	34.33	103 990.00

Comm Code	Manufacturer	Specification	Model#	
85121810				

#### **Extended Description:**

Observed

All inclusive price drug and alcohol observed screening for each specimen to include, collection, supplies, transportation, screening, etc. and sharing results per specifications.

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

MVOIGE TO		A WEST PROPERTY.	
PURCHASING AGENT - 304-35		PURCHASING AGENT - 3	
HEALTH AND HUMAN RESOU	RCES	HEALTH AND HUMAN RE	ESOURCES
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702,
us		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	All Inclusive price drug & alcohol unobserved screening	1500.00000	EA	33,30	499500

Comm Code	Manufacturer	Specification	Model #	
85121810				

#### Extended Description :

Unobserved

All inclusive price drug and alcohol unobserved screening for each specimen to include, collection, supplies, transportation, screening, etc. and

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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RN EXPERTISE

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MANOJOE TO PURCHASING AGENT - 304-356-4802 PURCHASING AGENT - 304-356-4802 HEALTH AND HUMAN RESOURCES HEALTH AND HUMAN RESOURCES **BBH/HF BBH/HF** 350 CAPITOL ST, RM 350 350 CAPITOL ST, RM 350 CHARLESTON WV25301-3702 CHARLESTON WV 25301-3702 US U\$

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Cancellation fee ("no-show")	1500.00000	EA	NC	00

Comm Code	Manufacturer	Specification		
85121810	maria ayestol	Specification	Model #	-,-

#### **Extended Description:**

Cancellation fee ("no show") Spec section 4.2.6

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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PURCHASING AGENT - 304-356		PURCHASING AGENT - 304-3	The state of the s
HEALTH AND HUMAN RESOUR	CES	HEALTH AND HUMAN RESOL BBH/HF	JRCES
350 CAPITOL \$T, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
U\$		บร	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
ŀ	Hourly rate for witness testimony by collection expert	100.00000	HOUR	NC	හ

Comm Code	Manufacturer	Specification	Model #	
85121810			****	

#### Extended Description :

Hourly rate for witness testimony by collection expert Spec section 4,1,22.1

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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HENCHOLE TO કાર્યાન પ્રાથ PURCHASING AGENT - 304-356-4802 PURCHASING AGENT - 304-356-4802 **HEALTH AND HUMAN RESOURCES HEALTH AND HUMAN RESOURCES** BBH/HF BBH/HF 350 CAPITOL ST, RM 350 350 CAPITOL ST, RM 350 CHARLESTON WV25301-3702 CHARLESTON WV 25301-3702 US US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Hourly rate for witness testimony by laboratory expert	50.00000	HOUR	100	5,000.00

85121810	Model #	Specification	Manufacturer	Comm Code
	19/00/01 #			35121810
				0121010

#### **Extended Description:**

Hourly rate for witness testimony by laboratory expert Spec section 4.1.22.2

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the

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PURCHASING AGENT - 3	04-356-4802	PURCHASING AGENT -:	
HEALTH AND HUMAN RE	SOURCES	HEALTH AND HUMAN RI BBH/HF	1
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	0
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Hourly rate for witness testimony by MRO expert	25.00000	HOUR	NC	NC DD

Comm Code	Manufacturer	Specification	Model #	
85121810			WIGGET #	

#### **Extended Description:**

Hourly rate for witness testimony by MRO expert Spec section 4,1,22,3

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the

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RN EXPERTISE

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PURCHASING AGENT - 30 HEALTH AND HUMAN RES BBH/HF	4-356-4802	PURCHASING AGENT - 3 HEALTH AND HUMAN RE 88H/HF	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
us		us	

			Unit Price	Total Price
Hourly rate testimony expert in person	by collection 100.00000	HOUR	NC	00

Comm Code	Manufacturer	Canadia-41		
	11101010101	Specification	Model #	
5121810				

#### **Extended Description:**

Hourly rate testimony by collection expert in person at deposition Spec section 4.1.22.4

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

INVENCE TO			
PURCHASING AGENT - 30		PURCHASING AGENT - 3	
HEALTH AND HUMAN RES BBH/HF	SOURCES	HEALTH AND HUMAN RE	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
U\$		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Hourly rate testimony by laboratory expert at deposition	50.00000	HOUR	100	5 000.00

Comm Code	Manufacturer	Specification	Model #	
85121810			1414404 17	

#### **Extended Description**;

Hourly rate testimony by laboratory expert at deposition in person Spec section 4.1.22.5

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

02/25/2020 11:48

PURCHASING AGENT - 304-356-4802

HEALTH AND HUMAN RESOURCES

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RN EXPERTISE

ILVOIDENO: PURCHASING AGENT - 304-356-4602 HEALTH AND HUMAN RESOURCES BBH/HF

350 CAPITOL ST, RM 350 350 CAPITOL ST, RM 350

WV25301-3702 CHARLESTON

US

WV 25301-3702

US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Hourly rate testimony by MRO expert at deposition	25.00000	HOUR	15.0>	1875.00

Comm Code	Manufacturer	Specification	Model #	
85121810		**************************************	MODEL #	
	*			

#### **Extended Description:**

BBH/HF

CHARLESTON

Hourly rate testimony by MRO at expert in person at deposition Spec section 4.1.22.6

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

South Music Production					
<u>Line</u> 1	Event Question Deadline (10:00 AM ET)	Event Date 2020-02-04			

Received: 4078657993

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	Document Phase	Document Description	Page 7
HHR2000000005	Final	Addendum No.04 - Drug and Alcohol	of 7
		Testing Services	

### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

02/25/2020 11:48

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.

(Name, Title)

(Name, Title)

(Printed Name and Title)

(Address) 451-321-321 451 451-321-422

(Phone Number) (Pax Number)

(Phone Number) (Pax Number)

(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.

(Company)

(Authorized Signature) (Representative Name, Title)

(Authorized Signature) (Representative Name, Title)

(Printed Name and Title of Authorized Representative)

(Date)

(Date)

(Phone Number) (Fax Number)

### REQUEST FOR QUOTATION Drug and Alcohol Testing Services

protocol and procedures.

9.5. Vendor shall inform all staff of Agency's security protocol and procedures.

#### 10. VENDOR DEFAULT:

- 10.1. The following shall be considered a vendor default under this Contract.
  - 10.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.
  - 10.1.2. Failure to comply with other specifications and requirements contained herein
  - 10.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.
  - 10.1.4. Failure to remedy deficient performance upon request.
- 10.2. The following remedies shall be available to Agency upon default.
  - 10.2.1. Immediate cancellation of the Contract.
  - 10.2.2. Immediate cancellation of one or more release orders issued under this Contract
  - 10.2.3. Any other remedies available in law or equity.

#### 11. MISCELLANEOUS:

11.1. Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager:

Telephone Number:

Fax Number:

Email Address:

### WEST VIRGINIA COLLECTION SITE LIST IN ORDER BY ZIPCODE

Vendor Name	Address	Zip Code	Phone Number	Hours
Signature Drug Testing, LLC - Rochester	404 Adams SI, Rochester, PA	15074	724-775-9470	M-F 8:30-3:30
St Clair Occup Med Center - Bethel Park	2000 Oxford Dr Ste 100, Bethel Park, PA	15102	412-942-7115	M-F 8-12 & 1-4:30
Stobal Screening, LLC - Winchester	110 Featherbed Lane #6, Winchester, VA	22601	540-313-9046	M-F 9-5
/alley Health Urgent Care	607 E Jubal Early Drive Winchester VA	22601	540-536-2232	M-F 8-8
/alley Urgent Care	65 Riverton Commons Plaza Front Royal VA	22630	504-635-0722	M-F 8-8
/alley Urgent Care	33820 Old Valley Pike Strasburg VA	22657	540-459-1310	M-F 8-8
Arcpoint Labs of Satem	1627 E Main Street, Salem, VA	24153	540-524-2822	M-TH 8:30-5:30, F 8:30-5
C-Health, P.C Lebanon	495 East Main Street, Lebanon, VA	24266	276-889-3700	M 8-8, T 8-7:30, W F 8-5, TH 9-5 Sat 8-12
Bluefleld Regional Medical Center	500 Cherry St Bluefield WV	24701	304-327-1580	M-F 7-5 outpatient 2nd floor
McDowell County Day Report	109 Wyaming Street Wetch WV	24801	304-436-9009	M-F 8-4
Pocohontas County Day Report	300 2nd Ave Marlington WV	24954	304-799-4209	M-F 8-4p
COMPASS Occ Med	175 Smiley Dr St Albans WV	25177	681-217-7172	M-F 8-5
HIG	221 4th Avenue St Albans WV	25177	304-525-7111	M-F 8 to 4
Ripley Valley Family Care	512 A South Church St Ripley WV	25271	304-372-1033	M-F 8-4:30pm
Nyoming County Day Report	155 Park Street Pineville WV	24874	304-732-0028	M-F 9-3:30
COMPASS Occ Med	912 Quartier Street Charleston WV	25301	681-217-7172	M-F 8-5
COMPASS Occ Med	114 West Washington Str 2nd floor Charleston WV	25302	681-217-7172	M-F 8-5
/alley Urgent Care	97 Administrative Dr Martinsburg WV	25404	304-350-3200	M-F 8-8
/alley Urgent Care	1179 TJ Jackson Drive Ste B Falling Waters	25419	681-242-3713	M-F 8-8
alley Urgent Care	100 Oak Lee Dr Ranson WV	25438	304-930-0001	M-F 8-8
Quality Drug Testing	8 Airport Rd Chapmanville WV	25508	304-855-0058	M-F 9-5
coalfield Family Services	20824 Rt 52 Fort Gay WV	25514	304-648-7100	M-F 8-5
teliant Drug Test Solutions, LLC - Hurricane	3400-B Teays Valley Road, Hurricane, WV	25526	304-397-6551	M-Th 8-5, Fri 8-1
teliant Drug Test Solutions, LLC -	703 Ste A 22nd Street Point Pleasant WV	25550	304-593-7881	
T Mary's Occ Med	2827 5th Ave Huntingtion WV 25702	25702	304-736-8764	M-F 8-5 Filday 8-1 M-F 8-5
Quality Drug Testing	3136 Robert C. Byrd Drive Beckley WV	25801	681-207-7093	M-F 9-5
icholas County Day Report	603 Broad Street Summersville WV	25840	304-872-9643	M-F 8-4
ummers Count Day Report	120 Ballengee Street Ste 220 Hinton WV		304-309-5504	M-F 8-4p
octors Urgent Care	24 Homestead Rd Wheeling WV	1	304-232-1020	M-F 8-6 Sat-Sun 8-12
amilies Forward	4001/2 Market Street Parkersburg WV		304-482-6738	M-F 8-5 extended hours as needed
arkersburg Family Care	2610 Camden Ave Parkersburg WV		304-917-3733	M-F 8-430pm
oplin Health Systems	483 Court Street Elizabeth WV		304-275-3301	
innie Hamilton Hospital	186 Hospital Drive Grantsville WV		304-354-9244	M-F 8-4:30pm
iver Valley Family Care	606 Washington St Ravenswood WV		304-273-1033	M-F 8-8
istersville General Hospital - Sisterville	314 Wells St, Sisterville, WV	26175	304-273-1033	M-F 8-430
icker County Day Report	213 First Street Parsons WV			M-F 8-8, Sat Sun 8-2
ebster County Memorial Hospital	324 Miller Mountain DR Webster Springs WV		304-478-2833 304-847-5682	M-F 8-4
gether in Recovery	84 South Main Street Phillipi WV			M-F 8-4
oddridge County Day Report	123 West Main Street West Union WV		304-457-2691 304-873-3005	M-F 8-4
mesavers	109 Lawless Rd Morgantown WV			M-F 8-4
arion County Day Report	211 Adams Street Fairmont WV		304-381-2325	M-F 8-4
ality Drug Testing	11 Middlelown Rd White Hall WV		304-333-2445	M-F 8-5
neral County Day Report	130 N Main Street Keyser WV		681-404-5673	M-W 9-5 T-F 9-4
ant County Day Report	5 Highlands Ave Petersburg WV	26847	304-788-0593 304-257-4547	M-F 8-4 M-F 8-4

Akme Drug Testing - Ashland	1701 Central Ave, Ashland, KY	Jacob	T	
Doctors Urgent Care		41101	606-324-0404	M-TH 9-5, F 9-3
Greenbriar Day Report	51342 National RD St Clairsville, OH	43950	740-699-0940	M-F 8:30-5
	147 Main Street West Ronceverte WV	24970	304-647-1391ext2	M-F 830-4
Hampshire Hospital	363 Sunrise Blvd Romney wv	26757	304-822-4561	M-F dam-4pm
Williamson Memorial Hospital	859 Alderson St Williamson wv	25661	304-235-2500	24 hours
Primary Care Center	125 Center Street Clay WV	25043	304-587-7301	M-F 8am-4pm
Gilmer Primary Care	809 Mineral Rd Glenville WV	26351	304-462-7322	
St Joseph Hospital	1 Amalia Dr Buckanon WV	26201	304-472-2000	7:30-6pm
Roane General	200 Hospital Dr Spencer WV			7am-8pm
Braxton Memorial	100 Hoyiman Dr Gassaway WV	25276	304-927-4444	7am-9:30pm
Mountaineer Comm Hospital	783 Winchester Paw Paw WV	26624	800 997-0847	24 hours
Stonewall Jackson Hospital		25434	304-947-5563	8am-5pm
Grafton Hospital	230 Hospital Plaza Weston WV	26452	304-269-8080	24 hours
	Hospital Plaza Grafton WV	26354	304-265-0400	8am-5pm
Valley Urgent Care	119 B University Blvd Harrisonburg VA	22801	540-434-5709	8am-8pm closest to pendleton
Ritchei Regional Health care	135 South Penn Ave Harriswville WV	26362	304-643-4005	8am-5pm
Bridgeport Express Care	1370 Johnson Ave Bridgeport WV	26330	304-842-3330	
Preston Memorial Hospital	150 Memorial Dr Kingwood WV			8am-8pm
incoln County Primary Care	7400 Lynn Ave Hamlin WV	26537	304-329-1400	8am-4pm
Randolph Day report		25523	304-824-5806	8am-9pm
missiph Day topon	#5 Randolph Ave Ste 2 Elkins WV	26241	304=636-5273	8am -4pm

Monroe and Pocohantas clinics or hospitals will not perform drug testing. We can arrange a collector if necessary to go on site if the closest facility is not convenient These sites can also be changed

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# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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)

[:	<b>X</b> ]	Addendum No. 1	[	]	Addendum No. 6
[	J	Addendum No. 2	[	]	Addendum No. 7
[	J	Addendum No. 3	Į	J	Addendum No. 8
[	]	Addendum No. 4	ſ	]	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.

Authorized Signature

Date

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

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# SOLICITATION NUMBER: CRFQ 0506 HHR2000000005 Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR200000005 ("Solicitation") to reflect the change(s) identified and described below.

#### Applicable Addendum Category:

[V]	Modify bid opening date and time
[]	Modify specifications of product or service being sought
[]	Attachment of vendor questions and responses
[]	Attachment of pre-bid sign-in sheet
[]	Correction of error
11	Other

### Additional Documentation: The purpose of this addendum is to:

1. Modify the bid opening date as follows:

Bid opening WAS 02/12/2020 at 1:30 PM ET Bid opening IS NOW 02/14/2020 at 1:30 PM ET

Responses to vendor questions will be issued under separate addendum.

No other changes.

#### 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.

02/25/2020 11:48

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RN EXPERTISE



18/28



**Purchasing Divison** 2019 Weshington Street East Post Office Box 50130 Charleston, WV 25305-0130

State of West Virginia Request for Quotation 26 - Medical

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BID CLERK

DEPARTMENT OF ADMINISTRATION

**PURCHASING DIVISION** 

2019 WASHINGTON ST E

CHARLESTON

W

25305

US

The Hollman Dr Ste 102

Smford 5-311-8111

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham (304) 558-2157

brittany.e.ingraham@wv.gov

Signature

FEIN#

59-312603

DATE 2-24-2020

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

PAGE 19/28

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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)

	<b>X</b> .]	Addendum No. 1	[	]	Addendum No. 6
	<b>X</b> ]	Addendum No. 2	[	]	Addendum No. 7
[	]	Addendum No. 3	Į	J	Addendum No. 8
(	]	Addendum No. 4	ĺ	1	Addendum No. 9
C	]	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.

Authorized Signature

Date

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

PAGE 20/28

# SOLICITATION NUMBER: CRFQ 0506 HHR2000000005 Addendum Number: 3

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR2000000005 ("Solicitation") to reflect the change(s) identified and described below.

### Applicable Addendum Category:

[X]	Modify bid opening date and time
[]	Modify specifications of product or service being sought
[]	Attachment of vendor questions and responses
[]	Attachment of pre-bid sign-in sheet
[]	Correction of error
[]	Other

### Additional Documentation: The purpose of this addendum is to:

1. Modify the bid opening date as follows:

Bid opening WAS 02/21/2020 at 1:30 PM ET Bid opening IS NOW 02/25/2020 at 1:30 PM ET

No other changes.

#### 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.

PAGE 21/28

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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	ţ	]	Addendum No. 7
[X]	Addendum No. 3	[	1	Addendum No. 8
[ ]	Addendum No. 4	I	]	Addendum No. 9
[]	Addendum No. 5	[	1	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.

Authorized Signature

Date

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

PAGE 22/28

# SOLICITATION NUMBER: CRFQ 0506 HHR2000000005 Addendum Number: 4

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR200000005 ("Solicitation") to reflect the change(s) identified and described below.

#### Applicable Addendum Category:

[]	Modify bid opening date and time
(X)	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
ſl	Other

## Additional Documentation: The purpose of this addendum is to:

- 1. Modify specification 4.1.6 and 4.1.16 per the attached.
- 2. Publish additional vendor questions and agency responses.

No other changes.

#### 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.

PAGE 23/28

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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	Ţ	]	Addendum No. 6
[X]	Addendum No. 2	[	]	Addendum No. 7
[X]	Addendum No. 3	<b>{</b>	J	Addendum No. 8
[X]	Addendum No. 4	[	j	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.

Authorized Signature

Date

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

PAGE 24/28

# STATE OF WEST VIRGINIA Purchasing Division

## **PURCHASING AFFIDAVIT**

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owad is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plen or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

#### **DEFINITIONS:**

"Dabt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers fund or being in policy default, as defined in W. Va. Code § 23-20-2, failure to maintain mandatory workers' compensation coverage, or failure to into a repayment agreement with the insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

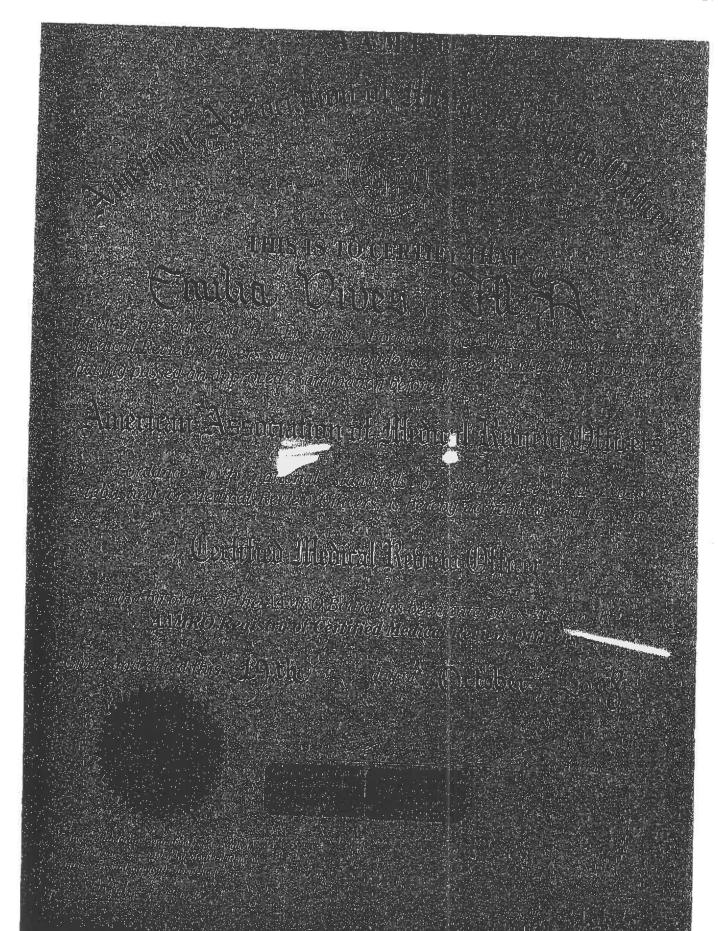
"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By algning this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:	
Vandor's Name: N Chefts, Inc	
Authorized Signature:	Date: 2-25-2020
State of Florida	
County of Semunole, to-wit:	
Taken, subscribed, and sworn to before me this 25 day of February	, 2070.
My Commission expires 4-20: 1513 .20_	_
AFFIX SEAL HERE	-aust
ANDY TERRY THOMAS  WY COMMISSION # QG 317971  EXPIRES: APRIL 20 2000	Purchasing Affidavit (Revised 01/19/2018)

02/25/2020

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RN EXPERTISE



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

# American Association of Medical Review Officers

February 26, 2018

Verification of Certification for:

Emilia Vives, M.D.

Sunny Medical

11183 S. Orange Blossom Trail

Orlando, FL 32825

Certification Number:

081019203

Current Certification Date:

February 26, 2018

Certification Expiration Date:

February 26, 2023

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 (<u>www.aamro.com</u>).

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

Chairman

LABOR/MATERIAL PAYMENT BOND: The apparent successful Vendor shall provide a labor/material payment bond in the amount of 100% of the Contract value. The labor/material payment bond must be delivered to the Purchasing Division prior to Contract award. In lieu of the Bid Bond, Performance Bond, and Labor/Material Payment Bond, the Vendor may provide certified checks, cashier's checks, or irrevocable letters of credit. Any certified check, cashier's check, or irrevocable letter of credit provided in lieu of a bond must be of the same amount and delivered on the same schedule as the bond it replaces. A letter of credit submitted in lieu of a performance and labor/material payment bond will only be allowed for projects under \$100,000. Personal or business checks are not acceptable. Notwithstanding the foregoing, West Virginia Code § 5-22-1 (d) mandates that a vendor provide a performance and labor/material payment bond for construction projects. Accordingly, substitutions for the performance and labor/material payment bonds for construction projects is not permitted. MAINTENANCE BOND: The apparent successful Vendor shall provide a two (2) year maintenance bond covering the roofing system. The maintenance bond must be issued and delivered to the Purchasing Division prior to Contract award. [ LICENSE(S) / CERTIFICATIONS / PERMITS: In addition to anything required under the Section of the General Terms and Conditions entitled Licensing, the apparent successful Vendor shall furnish proof of the following licenses, certifications, and/or permits upon request and in a form acceptable to the State. The request may be prior to or after contract award at the State's sole discretion. Vendor must provide proof that it is a qualified drug and alcohol testing vendor as required by Title 49 CFR Part 40, with a minimum of 5 years business experience in drug and alcohol testing. Vendor must provide proof of SAMHSA certification. ✓ Vendor must provide proof of MRO certification. П

The apparent successful Vendor shall also furnish proof of any additional licenses or certifications contained in the specifications regardless of whether or not that requirement is

listed above.

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Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines using Oral Fluid were first published in the Federal Register on October 25, 2019 (84 FR 57554) with an effective date of January 1, 2020.

The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100-71 and allowed urine drug testing only. The Mandatory Guidelines using Urine have since been revised, and new Mandatory Guidelines allowing for oral fluid drug testing have been published. The Mandatory Guidelines require strict standards that laboratories and ITFs must meet in order to conduct drug and specimen validity tests on specimens for federal agencies. HHS does not allow ITFs for oral fluid testing.

To become certified, an applicant laboratory or HTF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a laboratory or HTF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and IITFs in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines using Urine and/or Oral Fluid. An HHS-certified laboratory or IITF must bave its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA), which attests that the test facility has met minimum standards. HHS does not allow IITFs for oral fluid testing.

#### HHS-Certified Laboratories Certified To Conduct Oral Fluid Drug Testing

In accordance with the Mandatory Guidelines using Oral Fluid dated October 25, 2019 (84 FR 57554), the following HHS-certified laboratories meet the minimum standerds to conduct drug and specimen validity tests on oral fluid specimens:

At this time, there are no laboratories certified to conduct drug and specimen validity tests on oral fluid specimens.

#### HHS-Certified Instrumented Initial Testing Facilities Certified To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified ITFs meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Dynacare, 6628 50th Street NW, Edmonton, AB Canada T6B 2N7, 780– 784–1190, (Formerly: Gamma-Dynacare Medical Laboratories)

#### HHS-Certified Laboratories Certified To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified leboratories meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504-361-8989/800-433-3823, (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.), Alere Toxicology Services, 450 Southlake Blvd., Richmond, VA 23236, 804-378-9130, (Formerly: Kroll Laboratory Specialists, Inc., Scientific Testing Laboratories, Inc.; Kroll Scientific Testing Laboratories, Inc.)

Clinical Reference Laboratory, Inc., 8433 Quivira Road, Lenexa, KS 66215— 2802, 800-445-6917

Cordant Health Solutions, 2617 East L Street, Tacoma, WA 98421, 800-442-0438. (Formerly: STERLING Reference Laboratories)

Desert Tox, LLC, 10221 North 32nd Street Suite J, Phoenix, AZ 85028, 602-457-5411

DrugScan, Inc., 200 Precision Road, Suite 200, Horsham, PA 19044, 800— 235—4890

Dynacare \*, 245 Pall Mall Street, London, ONT, Canada N6A 1P4, 519-

Upon finding a Canadian laboratory to be qualified, HHS with recommend that DOT certify the laboratory (Federal Register, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the Federal Register on January 23, 2017 (62 FR 7920). After receiving DOT certification, the laboratory will be included in the mouthly list of HHS-cortified laboratories and participate in the NLCP certification maintenance program.

679–1630, (Formerly: Gamma-Dynacare Medical Laboratories) ElSohly Laboratories, Inc., 5 Industrial Park Drive, Oxford, MS 38655, 662– 236–2609

Laboratory Corporation of America Holdings, 7207 N Gessner Road, Houston, TX 77040, 713-856-8288/ 800-800-2387

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 908-526-2400/800-437-4986. (Formerly: Roche Biomedical Laboratories, Inc.)

Laboratory Corporation of America
Holdings, 1904 TW Alexander Drive,
Research Triengle Park, NC 27709,
919-572-6900/800-833-3984,
(Formerly: LabCorp Occupational
Testing Services, Inc., CompuChem
Laboratories, Inc., CompuChem
Laboratories, Inc., A Subsidiary of
Roche Biomedical Laboratory; Roche
CompuChem Laboratories, Inc., A
Member of the Roche Group)

Laboratory Corporation of America
Holdings, 1120 Main Street,
Southaven, MS 38671, 865-827-8042/
800-233-6339, (Formerly: LabCorp
Occupational Testing Services, Inc.;
MedExpress/National Laboratory
Center)

LabOne, Inc. d/b/a Quest Diagnostics, 10101 Renner Blvd., Lenexa, KS 66219, 913-888-3927/800-873-8845, (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.; Center for Laboratory Services, a Division of LabOne, Inc.)

Legacy Laboratory Scrvices Toxicology, 1225 NE 2nd Ave., Portland, OR 97232, 503—413—5295/800—950—5295, (Formerly: Legacy Laboratory Services—MetroLab)

MedTox Laboratories, Inc., 402 W County Road D, St. Paul, MN 55112, 651-636-7466/800-832-3244

Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Laboratory, 1 Veterans Drive, Minneapolis, MN 55417, 612-725-2088, Testing for Veterans Affairs (VA) Employees Only

Pacific Toxicology Laboratories, 9348
DeSoto Ave., Chatsworth, CA 91311,
800-328-6942, (Formerly: Centinela
Hospital Airport Toxicology
Laboratory)

Pathology Associates Medical Leboratories, 110 West Cliff Dr., Spokane, WA 99204, 509-755-8991/ 800-541-7891x7

Phamatech, Inc., 15175 Innovation Drive, San Diego, CA 92128, 886– 635–5840

Quest Diagnostics Incorporated, 1777 Montreal Circle, Tucker, GA 30084, 800–729–6432, (Formerly: SmithKline

<sup>\*</sup>The Standards Council of Canada (SCC) voted to and its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories cortified through that program were accredited to conduct forensis urine drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that data, the certification of those accredited Conadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HISS NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as

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RN EX

PAGE 01/28

214 Hickman Dr. Ste 102 Sanford, FL 32771 (407) 321-8611 FAX (407) 321-6166





To Brittany I	Brittany E Ingraham From: Christine Steele				
Fax: (304) 5	58-3970		Pages	28 with cover	
Phone:		Pate: 2 25 2020			
☐ Urgent	For Review	☐ Please Comment	Please Reply	☐ Please Recycle	
• Comment	<b>:</b> \$;		TIME!		

Response to CRFQ 0506 HHR2000000005 Drug and Alcohol Testing Services

Due February 25, 2020 @ 1:30pm

RN E>



# RN Expertise, Inc.

"For Convenient and Quality Service"

February 24, 2020

Department of Administration Purchasing Division Attn: Brittany Ingraham 2019 Washington Street East Charleston WV 25305

RE: CRFQ 0506 HHR2000000005

Dear Ms. Ingraham:

RN Expertise, Inc. is pleased to participate in the above referenced RFQ. RN Expertise, Inc. certifies that it has read the RFQ in its entirety and is able to meet all of the service requirements listed in the RFQ. All questions and answers have been reviewed. RN Expertise, Inc. has over 27 years experience in the drug testing industry and is very qualified to perform the drug and alcohol testing services required by the State of West Virginia.

RN Expertise, Inc. serves as a national third party administrator for drug testing programs for both private and governmental agencies. We provide DOT and non-DOT drug and alcohol testing services for over 1,200 clients and arrange off-site and on-site drug screen and breath alcohol testing services to meet the specific needs of each individual customer. RN Expertise, Inc. provides accurate and reliable services in a cost effective manner. RN Expertise, Inc. originated in 1993 and began performing paramedical exams and on-site drug testing. We began providing DOT drug testing services in 1995 when the Omnibus Transportation Testing Act of 1991 was implemented.

The President of RN Expertise, Inc. attended training offered by the individual Dr. Donna Smith who was one of the authors of CFR 49 Part 40 guidelines. Ms. Steele attended this training in 1994 and began implementing TPA services for Department of Transportation workplaces in the United States. We were one of the original TPA's who started providing these services when the program began. Ms. Steele served on the Board of the Drug and Alcohol Testing Industry Association during that time. She is a Certified Breath Alcohol Instructor and is certified by Intoximeter. Ms. Steele is also a Certified

PAGE 03/28

Department of Transportation Collector Trainer. She has trained hundreds of collectors and breath alcohol technicians over the years. Ms. Steele has attended DOT trainings throughout the years on any updates and changes in Federal guidelines. She also subscribed to the RED BOOK and receives all updates in Federal and state drug testing guidelines. The staff at RN Expertise is updated on any changes in guidelines.

RN Expertise, Inc. is a Women Business Enterprise and is 100% owned by Ms. Christine Steele, RN. RN Expertise, Inc. is a Subchapter S Corporation and is a small business. Our Federal Id Tax number is 59-3172603. The principal place of business is:

RN Expertise, Inc.
214 Hickman Dr Ste 102
Sanford, FL 32771
(407) 321-8611
Fax (407) 321-6166
Contact: Christine Steele, President
Rnexinc@aol.com

The president of RN Expertise, Inc. prepared this proposal and is available to answer any questions that may arise during evaluation. It is RN Expertise's goal to provide the most affordable, expedient and quality services possible. We strive for excellence. We have an excellent reputation in the industry and take pride in customer service. Our staff is always available to assist our clients. RN Expertise, Inc. provides 24 hour turn around on negative results and 48-72 hour turn around on positive results.

The administrative staff of RN Expertise has over 19 years experience with the company. They are well educated on federal drug testing guidelines. They provide data entry, statistical reporting, billing, MRO assistance, customer service, random generation, and communicate with Ms. Steele on any customer service issues. The administrative staff communicates with clients and serves as a liaison between the laboratory and the clients to assist with any questions that occur regarding the drug testing process. RN Expertise, Inc. utilizes the Medical Review Officer services of Dr. Emily Vives. She has 11 years experience as a Medical Review Officer and is certified by AAMRO.

RN Expertise, Inc. provides all services required by Federal, State, and non-regulated programs. We are very experienced in originating new programs and with arranging any form of drug alcohol testing services. We have national access to collection sites and have a 26 year relationship history with the major drug testing laboratories. RN Expertise also specializes in on-site testing and has a network of on-site testing partners located throughout the US.

As mentioned, we provide services for many different varieties of drug free workplaces. Some of our clients are: The Wackenhut Corporation, The Greater Orlando Aviation Authority, State of West Virginia DHHR, Trillium Driver Solutions, Louisiana State University Health Services/Hospitals, North Carolina Department of Public Safety/Corrections, NC Department of Administration, The State of Louisiana, etc. We

PAGE 04/28

provide services for Department of Transportation workplaces, State of Florida Drug Free workplaces and numerous non-Dot workplaces throughout the nation. It is our goal to provide an excellent turnkey drug and alcohol testing program for Workforce West Virginia.

We utilize the laboratory services of Abbott formerly Alere, a DHHS SAMHSA certified laboratory. Abbott(formerly Alere) has years of experience in forensic toxicology. All laboratory services for all drug test types and panels will be performed by Alere. We are contracted with Alere with a price agreement for services and the results are sent from the laboratory to our Medical Review Officers at RN Expertise, Inc.

RN Expertise appreciates the potential opportunity to provide services to the State of WV Jobs & Hope Program. If any questions arise during the evaluation period, I may be contacted at (407) 321-8611. It would be my pleasure to answer any questions and to assist you with the administration of your drug and alcohol testing requirements.

Sincerely,

Christine Steele

President RN Expertise, Inc. 214 Hickman Drive Ste 102

Sanford, FL 32771 (407) 321-8611 4078657993

RN EX

PAGE 05/3



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

State of West Virginia Request for Quotation 26 — Medical

P	Proc Folder: 667021		
0 P	roc Type: Central Maste	dum No.04 - Drug and Alcohol Testing Services	
Date Issued	Solicitation Closes	Solicitation No	Version

BID CLERK

DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

Vendor Name, Address and Telephone Number:

RN Expertise Fre

214 HICKMS Dn Stelon

Son Lord for 321-8611

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham (304) 558-0067

Signature x

brittany.e.ingraham@wv.gov

\_\_\_\_/

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

FEIN# 59-317263

DATE 7 -20-2020

RN EX

Leonnicus integral mont Addendum No.04 - The purpose of this addendum is to:

- 1. Modify specification 4.1.6 and 4.1,16 per the attached.
- 2. Publish additional vendor questions and agency responses,

No other changes.

CONTROLLO AGEINT 2 30	74-330-4402	PURCHASING AGENT - 3	04-356-4802
HEALTH AND HUMAN REBBH/HF	SOURCES	HEALTH AND HUMAN RE	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
us		US	

FINE	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	All inclusive price drug & alcohol observed screening	3000.00000	EA	36.33	103 990,00
Comm Code	9 Manufacturer	\$16			- 4

Comm Code	Manufacturer	Specification	Model #	
85121810			MODEL	

#### **Extended Description:**

Comm Ln Desc

Observed

Line

All inclusive price drug and alcohol observed screening for each specimen to include, collection, supplies, transportation, screening, etc. and sharing results per specifications.

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

US		US	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
HEALTH AND HUMAN RESC BBH/HF	PURCES	HEALTH AND HUMAN RE	SOURCES
PURCHASING AGENT - 304	356-4802	PURCHASING AGENT - 30	04-356-4802
PURCHASING AGENT - 304-	356-4802	PLICUACING ACENT OF	

Line	Comm Lri Desc	Qty	Unit Issue	Unit Price	Total Price
2	All inclusive price drug & alcohol unobserved screening	1500.00000	EA	33,30	49 950,0

Comm Code	Martufacturer	Specification	Model #	
85121810			1410001 #	

#### Extended Description:

Unobserved

All inclusive price drug and alcohol unobserved screening for each specimen to include, collection, supplies, transportation, screening, etc. and sharing results per specifications.

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

Feb 25 2020 11:46am

02/25/2020 13:03

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LIVE LO PURCHASING AGENT - 304-356-4802 -40 history PURCHASING AGENT - 304-356-4802 HEALTH AND HUMAN RESOURCES HEALTH AND HUMAN RESOURCES BBH/HF **BBH/HF** 350 CAPITOL ST, RM 350 350 CAPITOL ST, RM 350 CHARLESTON WV25301-3702 CHARLESTON WV 25301-3702 US US

18	Comm Ln Desc	Qtv			
3	0	with the same of t	Unit Issue	Unit Price	Total Price
	Cancellation fee ("no-show")	1500.00000	EA	11/	TOTAL FILE
				NC	$\cap$

Comm Code Manufacturer	0 10 10		
85121810	Specification	Model #	
55121010			
			1
Eviended Department			

#### ended Description :

Cancellation fee ("no show") Spec section 4.2.6

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the

MANGICE NO	Walter Strain Committee that Strain	Sale yo	William and the second of the
PURCHASING AGENT - 31 HEALTH AND HUMAN RE BBH/HF	04-356-4802	PURCHASING AGENT - 30 HEALTH AND HUMAN RE- BBH/HF	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	W 25301-3702	CHARLESTON	WV 25301-3702
US		US	

Line	Comm Ln Deac	Qtv	Unit issue	Help Deles	
4	Liberto nata formation and a state of	100 00000		Unit Price	Total Price
•	Hourly rate for witness testimony by collection expert	100.00000	HOUR	A16	- 0
	Collection expert			IVC	$\omega$

Comm Code	Manufacturer	G-o-Mo-M-		
85121810		Specification	Model #	
03121010				

### Extended Description :

Hourly rate for witness testimony by collection expert Spec section 4,1,22,1

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the

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PAGE 08/28

PURCHASING AGENT - 304-356-4802
HEALTH AND HUMAN RESOURCES
BBH/HF
350 CAPITOL ST, RM 350

CHARLESTON

WV 25301-3702

US

SAUS MO

PURCHASING AGENT - 304-356-4802
HEALTH AND HUMAN RESOURCES
BBH/HF
350 CAPITOL ST, RM 350

CHARLESTON

WV 25301-3702

US

Line	Comm Ln Desc	Qty	Unit leave	Unit Price	Total Price
5	Hourly rate for witness testimony by laboratory expert	50.00000	HOUR	100	5,000,00

Comm Code	Manufacturer	Specification	Model #	
35121810	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		MICHOL A	
0.12.070				

#### **Extended Description:**

Hourly rate for witness testimony by laboratory expert Spec section 4.1.22.2

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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PURCHASING AGENT - 304	1-356-4802	PURCHASING AGENT - 3	
HEALTH AND HUMAN RES	OURCES	HEALTH AND HUMAN RE	
350 CAPITOL ST, RM 350	à	350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
US		us	

Line	Comm Ln Desc	Qty	Unit lasue	Unit Price	Total Price
6	Hourly rate for witness testimony by	25.00000	HOUR	NIC	NIC. DO
	MRO expert			140	1000

Comm Code	Manufacturer	Specification	Model #	
35121810				

#### Extended Description :

Hourly rate for witness testimony by MRO expert Spec section 4.1.22.3

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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JUVOKUE TO SALE INC. PURCHASING AGENT - 304-356-4802 PURCHASING AGENT - 304-356-4802 HEALTH AND HUMAN RESOURCES HEALTH AND HUMAN RESOURCES BBH/HF BBH/HF 350 CAPITOL ST, RM 350 350 CAPITOL ST, RM 350 CHARLESTON WV25301-3702 CHARLESTON WV 25301-3702 U\$ US

ne Comm Ln Desc	Qty	Unit Jasue	Unit Price	Total Price
Hourly rate testimony by a expert in person	collection 100.00000	HOUR	NC	200

35121810 Manufacturer Specification Model #	
1/18/10	
TETO TO	

#### **Extended Description**;

Hourly rate testimony by collection expert in person at deposition Spec section 4.1.22.4

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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PURCHASING AGENT - 30		PURCHASING AGENT - 30	The state of the s
HEALTH AND HUMAN RES	SOURCES	HEALTH AND HUMAN REBH/HF	
350 CAPITOL ST, RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
US		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Hourly rate testimony by laboratory expert at deposition	50.00000	HOUR	100	5 000.00

Comm Code	Manufacturer	Specification	Model #	
85121810			7-7-04-01 W	

#### Extended Description :

Hourly rate testimony by laboratory expert at deposition in person Spec section 4.1.22.5

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

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PAGE 10/28

PURCHASING AGENT - 30 HEALTH AND HUMAN RES BBH/MF	1 000 Hdd2	PURCHASING AGENT - 3 HEALTH AND HUMAN RE BBH/HF	
350 CAPITOL ST. RM 350		350 CAPITOL ST, RM 350	
CHARLESTON	WV25301-3702	CHARLESTON	WV 25301-3702
us		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Hourly rate testimony by MRO expert at deposition	25,00000	HOUR	15.0	1975 @

Comm Code	Manufacturer	Specification	44 4 4 4 4	
85121810		observedioti	# Model	
0121010				

#### **Extended Description:**

Hourly rate testimony by MRO at expert in person at deposition Spec section 4,1,22.6

Please note that quantities are estimates only and that payment will be made based on the actual usage whether it be more or less than the estimate.

ECYETOT.		
<u>Line</u>	Event Question Deadline (10:00 AM ET)	Event Date 2020-02-04

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	Document Phase	Document Description	Page 7
HHR2000000005	Final	Addendum No.04 - Drug and Alcohol	of 7
		Testing Services	

#### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

RN EX

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administratof and the initial point of contact for matters relating to this Contract. Title (Phone Number) / (Fax Number) 10 and. (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.

(Authorized Signature) (Representative Name, Title Printed Name and Title of Authorized Representative (Date) 407 321-411 (Phone Number) (Fax Number)

## REQUEST FOR QUOTATION **Drug and Alcohol Testing Services**

protocol and procedures.

9.5. Vendor shall inform all staff of Agency's security protocol and procedures.

## 10. VENDOR DEFAULT:

- 10.1. The following shall be considered a vendor default under this Contract.
  - 10.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.
  - 10.1.2. Failure to comply with other specifications and requirements contained herein.
  - 10.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.
  - 10.1.4. Failure to remedy deficient performance upon request.
- 10.2. The following remedies shall be available to Agency upon default.
  - 10.2.1. Immediate cancellation of the Contract.
  - 10.2.2. Immediate cancellation of one or more release orders issued under this Contract.
  - 10.2.3. Any other remedies available in law or equity.

## 11. MISCELLANEOUS:

11.1. Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager:

Telephone Number: Fax Number:

Email Address:

Revised 10/27/2014

Vendor Name	Address	Zip Coo	de Phone Numbe	er House
Signature Drug Testing, LLC - Rochester	404 Adams St, Rochester, PA	15074	724-775-9470	
St Clair Occup Med Center - Bethel Park	2000 Oxford Dr Ste 100, Bethel Park, PA	15102	412-942-7115	M-F 6:30-3:30
Global Screening, LLC - Winchester	110 Featherbed Lane #6, Winchester, VA	22601	540-313-9046	M-F 8-12 & 1-4:30
Valley Health Urgent Care	607 E Jubal Early Drive Winchester VA	22601	540-536-2232	M-F 9-5
Valley Urgent Care	65 Riverton Commons Plaza Front Royal VA	22630	504-635-0722	M-F 8-8
Valley Urgent Care	33820 Old Valley Pike Strasburg VA	22657	540-459-1310	M-F 8-8
Arcpoint Labs of Salem	1627 E Main Street, Salem, VA	24153	540-524-2822	M-F 8-8
C-Health, P.C Lebanon	495 East Main Street, Lebanon, VA	24266	276-889-3700	M-TH 8:30-5:30, F 8:30-5
Bluefield Regional Medical Center	500 Cherry St Bluefield WV	24701	304-327-1580	M 8-8, T 8-7:30, W F 8-5, TH 9-5 Sat 8-12
McDowell County Day Report	109 Wyoming Street Welch WV	24801		M-F 7-5 outpatient 2nd floor
Pocohontas County Day Report	300 2nd Ave Marlington WV	24954	304-436-9009	M-F 8-4
COMPASS Occ Med	175 Smiley Dr St Albans WV		304-799-4209	M-F 8-4p
HHG	221 4th Avenue St Albans WV	25177	661-217-7172	M-F 8-5
Ripley Valley Family Care	512 A South Church St Riptey WV	25177	304-525-7111	M-F 8 to 4
Wyoming County Day Report	155 Park Street Pineville WV	25271	304-372-1033	M-F 8-4:30pm
COMPASS Occ Med	912 Quarrier Street Charleston WV	24874	304-732-0028	M-F 9-3:30
COMPASS Occ Med		25301	681-217-7172	M-F 8-5
Valley Urgent Care	114 West Washington Str 2nd floor Charleston WV	25302	681-217-7172	M-F 8-5
Valley Urgent Care	97 Administrative Dr Martinsburg WV	25404	304-350-3200	M-F 8-8
Valley Urgent Care	1179 TJ Jackson Drive Ste B Falling Waters	25419	681-242-3713	M-F 8-8
Quality Drug Testing	100 Oak Lee Dr Ranson WV	25438	304-930-0001	M-F 8-8
Coalifete Family Services	8 Airport Rd Chapmanville WV	25508	304-855-0058	M-F 9-5
Reliant Drug Test Solutions, LLC - Hurricane	20824 Rt 52 Fort Gay WV	25514	304-648-7100	M-F 8-5
Reliant Drug Test Solutions, LLC -	3400-B Teays Valley Road, Hurricane, WV	25526	304-397-6551	M-Th 8-5, Fri 8-1
ST Mary's Occ Med	703 Ste A 22nd Street Point Pleasant WV	25550	304-593-7881	M-F 8-5 Friday 8-1
Quality Drug Testing	2827 5th Ave Huntingtion WV 25702	25702	304-736-8764	M-F 8-5
Vicholas County Day Report	3136 Robert C. Byrd Drive Beckley WV	25801	681-207-7093	M-F 9 -5
Summers Count Day Report	603 Broad Street Summersville WV	25840	304-872-9643	M-F 8-4
Poctors Urgent Care	120 Bailengee Street Ste 220 Hinton WV	25951	304-309-5504	M-F 8-4p
amilies Forward	24 Homestead Rd Wheeling WV	26003	304-232-1020	M-F 8-6 Sal-Sun 8-12
Parkersburg Family Care	4001/2 Market Street Parkersburg WV	26101	304-482-6738	M-F 8-5 extended hours as needed
	2610 Camden Ave Parkersburg WV	26101	304-917-3733	M-F 8-430pm
Coplin Health Systems Illnnie Hamilton Hospital	483 Court Street Elizabeth WV	26143	304-275-3301	M-F 8-4:30pm
iver Valley Family Care	166 Hospital Drive Grantsville WV	26147	304-354-9244	M-F 8-8
	606 Washington St Ravenswood WV	26164	304-273-1033	M-F 8-430
istersville General Hospital - Sisterville	314 Wells St, Sisterville, WV	26175	304-447-2474	M-F 8-8, Sat Sun 8-2
ucker County Day Report	213 First Street Parsons WV	26287	304-478-2833	M-F 8-4
/ebster County Memorial Hospital	324 Miller Mountain DR Webster Springs WV	26288	304-847-5682	M-F 8-4
ogether in Recovery	84 South Main Street Phillipi WV	26416	304-457-2691	M-F 6-4
oddridge County Day Report	123 West Main Street West Union WV	26456	304-873-3005	M-F 8-4
mesavers	109 Lawless Rd Morgantown WV	26501	304-381-2325	M-F 8-4
arion County Day Report	211 Adams Street Fairmont WV	26554	304-333-2445	M-F 8-5
uality Drug Testing	11 Middletown Rd White Hall WV	26554	681-404-5673	M-W 9-5 T-F 9-4
ineral County Day Report	130 N Main Street Keyser WV	26726	304-788-0593	
ant County Day Report	5 Highlands Ave Petersburg WV	26847	304-257-4547	M-F 8-4 M-F 8-4

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Akme Drug Testing - Ashland	1701 Central Ave, Ashland, KY	41101	606-324-0404	M-TH 9-5, F 9-3
Doctors Urgent Care	51342 National RD St Clairsville, OH	43950	740-699-0940	M-F 8:30-5
Greenbriar Day Report	147 Main Street West Ronceverte WV	24970	304-647-1391ext2	M-F 830-4
Hampshire Hospital	363 Sunrise Blvd Romney wv	26757	304-822-4561	M-F 8am-4pm
Williamson Memorial Hospital	859 Alderson St Williamson wv	25661	304-235-2500	24 hours
Primary Care Center	125 Center Street Clay WV	25043	304-587-7301	M-F 8am-4pm
Gilmer Primary Care	809 Mineral Rd Glenville WV	26351	304-462-7322	7:30-6pm
St Joseph Hospital	1 Amalia Dr Buckanon WV	26201	304-472-2000	7а <b>m-</b> θpm
Roane General	200 Hospital Dr Spencer WV	25276	304-927-4444	7am-9:30pm
Braxton Memorial	100 Hoylman Dr Gassaway WV	26624	800 997-0847	24 hours
Mountaineer Comm Hospital	783 Winchester Paw Paw WV	25434	304-947-5563	8am-5pm
Stonewall Jackson Hospital	230 Hospital Plaza Weston WV	26452	304-269-8080	24 hours
Grafton Hespital	Hospital Plaza Grafton WV	26354	304-265-0400	8am-5pm
Valley Urgent Care	119 B University Blvd Harrisonburg VA	22801	540-434-5709	8am-8pm closest to pendleton
Ritchei Regional Health care	135 South Penn Ave Harriswville WV	26362	304-643-4005	8am-5pm
Bridgeport Express Care	1370 Johnson Ave Bridgeport WV	26330	304-842-3330	8am-8pm
Preston Memorial Hospital	150 Memorial Dr Kingwood WV	26537	304-329-1400	8am-4pm
Lincoln County Primary Care	7400 Lynn Ave Hamlin WV	25523	304-824-5806	8am-9pm
Randolph Day report	#5 Randolph Ave Ste 2 Elkins WV	26241	304=636-5273	8am -4pm

Monroe and Pocohantas clinics or hospitals will not perform drug testing. We can arrange a collector if necessary to go on site if the closest facility is not convenient These sites can also be changed

RN

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# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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	Ţ	]	Addendum No. 6
[	]	Addendum No. 2	[	J	Addendum No. 7
[	1	Addendum No. 3	E	)	Addendum No. 8
]	}	Addendum No. 4	[	]	Addendum No. 9
[	]	Addendum No. 5	ſ	1	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.

Authorized Signature

Date

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## SOLICITATION NUMBER: CRFQ 0506 HHR2000000005 Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR2000000005 ("Solicitation") to reflect the change(s) identified and described below.

#### Applicable Addendum Category:

[X]	Modify bid opening date and time
[]	Modify specifications of product or service being sought
[]	Attachment of vendor questions and responses
[]	Attachment of pre-bid sign-in sheet
[]	Correction of error
[]	Other

#### Additional Documentation: The purpose of this addendum is to:

1. Modify the bid opening date as follows:

Bid opening WAS 02/12/2020 at 1:30 PM ET Bid opening IS NOW 02/14/2020 at 1:30 PM ET

Responses to vendor questions will be issued under separate addendum.

No other changes.

#### 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.

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

State of West Virginia Request for Quotation 26 - Medical

F	Proc Folder: 667021		
τ	Doc Description: Adden	dum No.02 - Drug and Alcohol Testing Services	
F	Proc Type: Central Maste		
Date Issued	Solicitation Closes	Solicitation No	Version

BID CLERK DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 WASHINGTON ST E **CHARLESTON** W 25305 US

FOR INFORMATION CONTACT THE BUYER

Britlany E Ingraham (304) 558-2157

Signature

brittany.e.ingraham@wv.gov

3-302603

DATE 2-24-2020

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

RN EX

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## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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 J	Addendum No. 1	Ţ	]	Addendum No. 6
	X ]	Addendum No. 2	[	J	Addendum No. 7
[	]	Addendum No. 3	Į	}	Addendum No. 8
E	]	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.

Authorized Signature

Date

# SOLICITATION NUMBER: CRFQ 0506 HHR200000005 Addendum Number: 3

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR2000000005 ("Solicitation") to reflect the change(s) identified and described below.

#### Applicable Addendum Category;

[X]	Modify bid opening date and time
[]	Modify specifications of product or service being sought
[]	Attachment of vendor questions and responses
[]	Attachment of pre-bid sign-in sheet
[]	Correction of extor
	Other

#### Additional Documentation: The purpose of this addendum is to:

1. Modify the bid opening date as follows:

Bid opening WAS 02/21/2020 at 1:30 PM ET Bid opening IS NOW 02/25/2020 at 1:30 PM ET

No other changes.

#### 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.

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## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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	1	]	Addendum No. 6
[X]	Addendum No. 2	ſ	]	Addendum No. 7
(X)	Addendum No. 3	ſ	]	Addendum No. 8
[ ]	Addendum No. 4	ĺ	}	Addendum No. 9
[]	Addendum No. 5	ſ	1	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.

Authorized Signature

Date

## SOLICITATION NUMBER: CRFQ 0506 HHR2000000005 Addendum Number: 4

The purpose of this addendum is to modify the solicitation identified as CRFQ 0506 HHR2000000005 ("Solicitation") to reflect the change(s) identified and described below.

#### Applicable Addendum Category:

IJ	Modify bid opening date and time
(X)	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
[]	Other

#### Additional Documentation: The purpose of this addendum is to:

- 1. Modify specification 4.1.6 and 4.1.16 per the attached.
- 2. Publish additional vendor questions and agency responses.

No other changes.

#### 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.

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## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 HHR2000000005

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	[	1	Addendum No. 8
[X]	Addendum No. 4	[	1	Addendum No. 9
[ ]	Addendum No. 5	[	j	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.

Authorized Signature

Date

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## STATE OF WEST VIRGINIA Purchasing Division

## **PURCHASING AFFIDAVIT**

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(I), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter sleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has provisions of such plan or agreement.

#### DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers fund or being in policy default, as defined in W. Va. Code § 23-20-2, failure to maintain mandatory workers' compensation coverage, or failure to into a repayment agreement with the insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

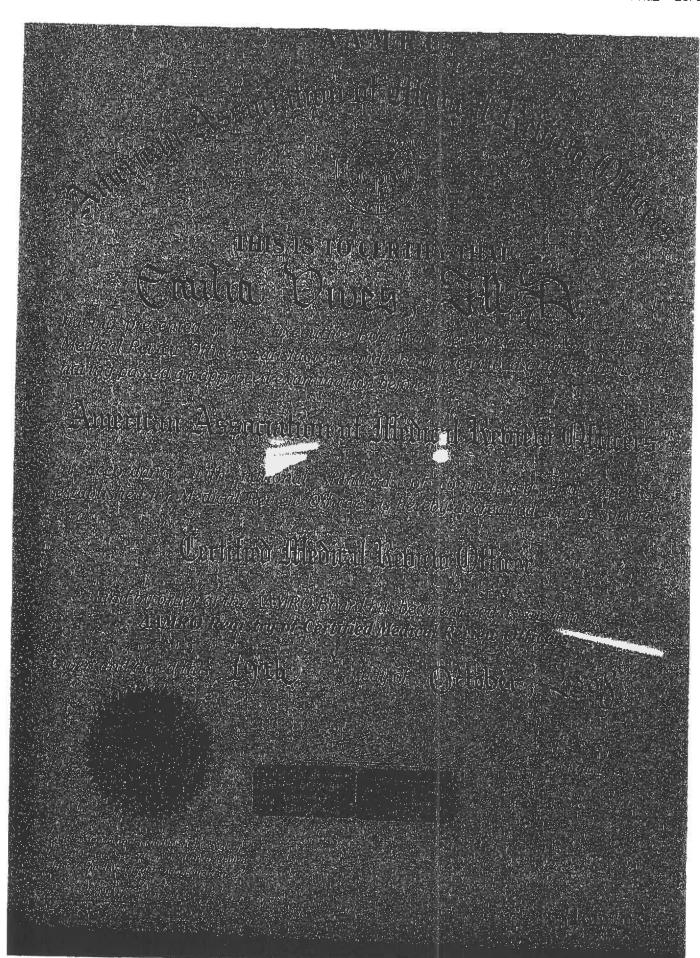
"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association of other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Vs. Code \$51-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITHESS THE FOLLOWING SIGNATURE		
Vendor's Name: N CALLASE, The		
Authorized Signature:	Date:	2-25-2020
state of Florida		
County of Seminole to-wit		
Taken, subscribed, and sworn to before me this 25 day of February	u	, 20 <u>70</u> .
My Commission expires 4: 201: 2523 , 20	7	
AFFIX SEAL HERE	:- BUS	I
ANDY TERRY THOMAS  MY COMMISSION # GG 317971  EXPIRES: APRIL 29, 2023	Pur	chesing Affidevit (Revised 01/19/2018)

RN EX

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RN EX



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

## American Association of Medical Review Officers

February 26, 2018

Verification of Certification for:

Emilia Vives, M.D.

Sunny Medical

11183 S. Orange Blossom Trail

Orlando, FL 32825

Certification Number:

081019203

Current Certification Date:

February 26, 2018

Certification Expiration Date:

February 26, 2023

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.

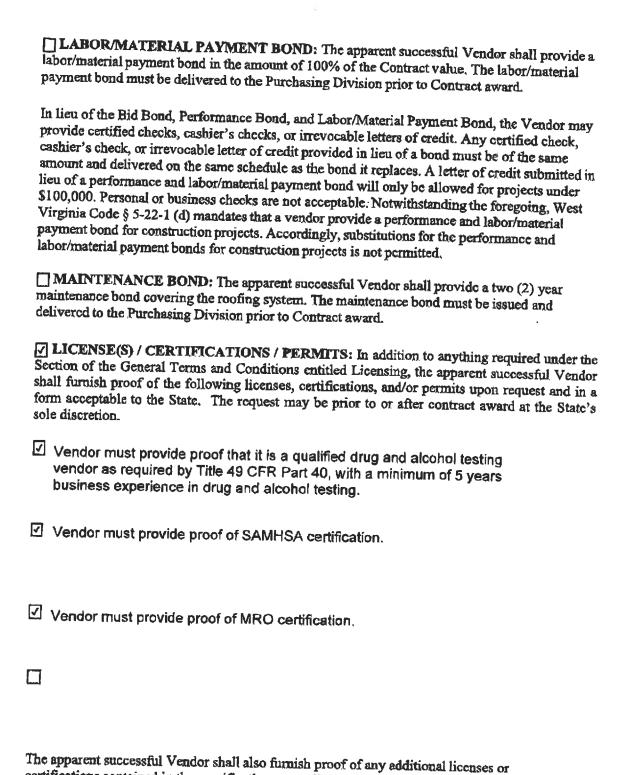
The referenced physician is listed in the AAMRO registry of Certified Medical Review Officers (www.aamro.com).

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

Throbon of Hufts

Chairman

02/25/2020 13:03 4078657993



certifications contained in the specifications regardless of whether or not that requirement is

listed above.

Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines using Oral Fluid were first published in the Federal Register on October 25, 2019 [84 FR 57554] with an effective date of

January 1, 2020.

The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100–71 and allowed urine drug testing only. The Mandatory Guidelines using Urine have since been revised, and new Mandatory Guidelines allowing for oral fluid drug testing have been published. The Mandatory Guidelines require strict standards that laboratories and IITFs must meet in order to conduct drug and specimen validity tests on specimens for federal agencies. HHS does not allow IITFs for oral fluid testing.

To become certified, an applicant laboratory or HTF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a laboratory or HTF must participate in a quarterly performance testing program plus undergo periodic,

on-site inspections.

Laboratories and IITFs in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines using Urine and/or Oral Fluid. An HHS-certified laboratory or IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA), which attests that the test facility has met minimum standards. HHS does not allow IITFs for oral fluid testing.

#### HHS-Certified Laboratories Certified To Conduct Oral Fluid Drug Testing

In accordance with the Mandatory Guidelines using Oral Fluid dated October 25, 2019 (84 FR 57554), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on oral fluid specimens:

At this time, there are no laboratories certified to conduct drug and specimen validity tests on oral fluid specimens.

#### HHS-Certified Instrumented Initial Testing Facilities Certified To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified IITFs meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Dynacare, 6628 50th Street NW, Edmonton, AB Canada T6B 2N7, 780– 784–1190. (Formerly: Gamma-Dynacare Medical Laboratories)

## HHS-Certified Laboratories Certified To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Alcre Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504-361-8969/800-433-3823, (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.)
Alere Toxicology Services, 450 Southlake Blvd., Richmond, VA 23236, 804-378-9130, (Formerly: Kroll Laboratory Specialists, Inc., Scientific Testing Laboratories, Inc.; Kroll Scientific Testing Laboratories, Inc.)

Clinical Reference Laboratory, Inc., 8433 Quivira Road, Lenexa, KS 66215— 2802, 800—445—6917

Cordant Health Solutions, 2617 East L Street, Tacome, WA 98421, 800—442— 0438, (Formerly: STERLING Reference Laboratories)

Desert Tox, LLC, 10221 North 32nd Street Suite J, Phoenix, AZ 85028, 602-457-5411

DrugScan, Inc., 200 Precision Road, Suite 200, Horsham, PA 19044, 800— 235—4690

Dynacare \*, 245 Pall Mall Street, London, ONT, Canada N6A 1P4, 519-

\* The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAFSA) effective May 12, 1988. Laboratories cartified through that program were accredited to conduct foronsic urtne drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HHS' NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

Upon finding a Canadian laboratory to be qualified. HHS will recommend that DOT certify the laboratory (Federal Register, July 18, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the Federal Register on January 23, 2017 (82 FR 7820). After receiving DOT certification, the laboratory will be included in the monthly list of HTS-certified laboratories and participate in the NLCP certification maintenance program.

679–1630, (Formerly: Gamma-Dynacare Medical Laboratories) ElSohly Laboratories, Inc., 5 Industrial Park Drive, Oxford, MS 38655, 662– 236–2609

Laboratory Corporation of America Holdings, 7207 N Gessner Road, Houston, TX 77040, 713-856-8288/ 800-800-2387

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 909-526-2400/800-437-4986, (Formerly: Roche Biomedical Laboratories, Inc.)

Leboratory Corporation of America
Holdings, 1904 TW Alexander Drive,
Research Triangle Park, NC 27709,
919-572-6900/800-833-3984,
(Formerly: LabCorp Occupational
Testing Services, Inc., CompuChem
Laboratories, Inc., CompuChem
Laboratories, Inc., A Subsidiary of
Roche Biomedical Laboratory; Roche
CompuChem Laboratories, Inc., A
Member of the Roche Group)

Laboratory Corporation of America Holdings, 1120 Main Street, Southaven, MS 38671, 866-827-8042/ 800-233-6339, (Formerly: LabCorp Occupational Testing Services, Inc.; MedExpress/National Laboratory Center)

LabOne, Inc. d/b/a Quest Diagnostics, 10101 Renner Blvd., Lenexa, KS 66219, 913-888-3927/800-873-8845, (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.: Center for Laboratory Services, a Division of LabOne, Inc.)

Legacy Laboratory Services Toxicology, 1225 NE 2nd Ave., Portland, OR 97232, 503-413-5295/800-950-5295, (Formerly: Legacy Laboratory Services—MetroLab)

MedTox Laboratories, Inc., 402 W County Road D. St. Paul, MN 55112, 651-636-7466/800-832-3244

Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Leboratory, 1 Veterans Drive, Minneapolis, MN 55417, 612–725– 2088, Testing for Veterans Affairs (VA) Employees Only

Pacific Toxicology Laboratories, 9348
DeSoto Ave., Chatsworth, CA 91311,
800-328-6942, (Formerly: Centinela
Hospital Airport Toxicology
Laboratory)

Pathology Associates Medical Laboratories, 110 West Cliff Dr., Spokane, WA 99204, 509-755-8991/ 800-541-7891x7

Phamatech, Inc.. 15175 Innovation Drive, San Diego, CA 92128, 888-635-5840

Quest Diagnostics Incorporated, 1777 Montreal Circle, Tucker, GA 30084, 800-729-6432, (Formerly: SmithKline