



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

Header 6

List View

General Information

Contact

Default Values

Discount

Document Information

Procurement Folder: 702547

Procurement Type: Central Master Agreement

Vendor ID: 000000207186

Legal Name: HEALTH RESEARCH SYSTEMS INC

Alias/DBA:

Total Bid: \$177,750.00

Response Date: 04/20/2020

Response Time: 10:02

SO Doc Code: CRFQ

SO Dept: 0506

SO Doc ID: HHR2000000006

Published Date: 4/13/20

Close Date: 4/20/20

Close Time: 13:30

Status: Closed

Solicitation Description: Addendum No.02 - Drug and Alcohol Testing Services

Total of Header Attachments: 6

Total of All Attachments: 6



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

State of West Virginia
Solicitation Response

Proc Folder : 702547

Solicitation Description : Addendum No.02 - Drug and Alcohol Testing Services

Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2020-04-20 13:30:00	SR 0506 ESR04202000000006071	1

VENDOR

000000207186

HEALTH RESEARCH SYSTEMS INC

Solicitation Number: CRFQ 0506 HHR2000000006

Total Bid : \$177,750.00

Response Date: 2020-04-20

Response Time: 10:02:13

Comments:

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham

(304) 558-0067

brittany.e.ingraham@wv.gov

Signature on File

FEIN #

DATE

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	All inclusive price drug & alcohol observed screening	3000.00000	EA	\$39.500000	\$118,500.00

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 4.1.1-4.1.19.
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	All inclusive price drug & alcohol unobserved screening	1500.00000	EA	\$39.500000	\$59,250.00

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 sharing results per specifications 4.1.1-4.1.19.
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Hourly rate for witness testimony by collection expert	100.00000	HOUR	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :	Hourly rate for witness testimony by collection expert in person. Spec section 4.1.21.1
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	Hourly rate for witness testimony by laboratory expert	50.00000	HOUR	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :	Hourly rate for witness testimony by laboratory expert in person. Spec section 4.1.21.2
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Hourly rate for witness testimony by MRO expert	25.00000	HOUR	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :	Hourly rate for witness testimony by MRO expert in person. Spec Section 4.1.21.3
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Commodity Line Removed	0.00000	EA		

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :	Commodity Line Removed
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
7	Commodity Line Removed	0.00000	EA		

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :	Commodity Line Removed
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Health Research Systems, Inc. (HRS) is pleased to submit this proposal to the Department of Health and Human Resources (DHHR), Office of Drug Control Policy (ODCP) **CRFQ 0506 HHR2000000006, Drug and Alcohol testing services.**

HRS is a vendor in good standing with the State of West Virginia and a long-time provider of services to various state agencies. HRS is also registered with the West Virginia Secretary of State's office and the State Purchasing Division.

At HRS we are aware of the requirement for DHHR to have a highly qualified provider that can ensure the delivery of all the required services in a timely and cost-effective manner. At HRS we have in place the systems and processes necessary to meet the state's requirement for an effective and efficient drug testing program.

Health Research Systems, Inc. (HRS) is a privately held West Virginia corporation based in Huntington, WV. HRS has been performing drug and alcohol testing for over twenty nine (29) years. The HRS Huntington and Columbus offices have expert personnel as well as the experience necessary to coordinate a program as intricate as the one proposed by DHHR. The Huntington, WV office will be responsible for the day-to-day operations of the program.

Mr. Michael Day, President and CEO of HRS, has twenty nine (29) years of experience coordinating specimen collection and laboratory services for health services testing. He is able to provide expert testimony on program administration that stands behind the specimens collected by HRS personnel. Mr. Day works to stay current on federal regulations relevant to the drug free workplace in order to provide collectors with the most up-to-date training possible, as well as keep our clients informed of any pertinent changes.

Mrs. Merilee Hutchinson, is HRS's current operations manager with 12 years of management experience and 5 years of experience in the health services industry. Mrs. Hutchinson previously help the Program Administrator position as well as a Collections Services Technician Trainer and Breath Alcohol Technician. HRS's professional staff currently oversees the operation of over 100 programs of this nature with approximately 10,000 covered employees involved in these programs. HRS collects over 30,000 drug and alcohol collections per year.

Mandatory Requirements

4.1.1 HRS has the capability to begin servicing DHHR within 14-28 days of the award.

4.1.2 HRS will provide all forms, collection kits and miscellaneous supplies for the collection, transportation and analyses of urine specimens.

4.1.3 HRS is keenly aware of all applicable medical standards; federal, state, and local government safety codes, laws and regulations relating to drug and alcohol testing.

4.1.4 HRS collectors' and contracted collection facilities personnel, follow the US Department of Transportation collection protocols.

4.1.5 HRS will provide for the collection of specimens to meet the requirements of 49 CFR Part 40 with respect to conducting and storing urine specimens, testing for drugs and alcohol, and ensuring confidentiality. HRS is proposing to utilize collection facilities to accommodate the DHHR testing needs. HRS is willing to utilize mobile collections if the need should arise that it would be a requirement.

4.1.6 HRS can provide scheduled service Monday through Friday, excluding West Virginia State Holidays. All of HRS locations and contracted locations are open, at minimum, 8:00 AM ET to 5:00 PM ET Monday-Friday.

4.1.7 HRS currently has an active mobile collection team who travels the State of West Virginia daily. HRS can arrive on location within four (4) hours of the request for testing.

4.1.8 HRS staff and contracted collection facilities are all trained in compliance with 49 CFR Part 40.

4.1.9 HRS has sites as well as subcontracted collection facilities that are within a maximum of 30 miles from every DHHR county office.

4.1.9.1 HRS understands that they are solely responsible for the satisfactory completion of the work.

4.1.9.2 HRS subcontractors will comply with all mandatory specifications listed in this solicitation.

4.1.9.3 HRS understands that all payments issued will be made to the contractual vendor.

4.1.9.4 HRS will schedule all appointments for testing, whether observed or not.

4.1.10 HRS has included a list of all collection sites for residents of all 55 counties with this bid.

4.1.10.1 HRS will notify DHHR if any changes need to be made to the subcontractor list during the life of the contract.

4.1.11 HRS utilizes FedEx for the transportation of all specimens to the testing laboratory in accordance with 49 CFR Part 40.

4.1.12 HRS, as well as all subcontracted facilities test in accordance with 49 CFR Part 40.

4.1.13 HRS utilizes Alere Toxicology and Clinical Reference Laboratory for their SAMHSA certified laboratories.

4.1.14 HRS will perform chemical analyses of urine specimens to determine whether the person from whom the specimen was taken has been using any of the drugs/alcohol listed in this solicitation.

4.1.15 HRS utilizes Dr. Stephen Kracht and Dr. Charles Moorefield as their Certified Medical Review Officers. Dr. Kracht and Dr. Moorefields' credentials are included in this bid submission.

4.1.16 HRS will provide confirmed test results, of both negative results and positive results for nonprescription drugs are made available, in writing, to Transition Agents or his/her designee via confidential means, immediately upon confirmation by the MRO, but not later than 72 hours of receipt of the specimen by the laboratory.

4.1.17 HRS ensures that all laboratory records are maintained for the appropriate period of time to comply with 40 CFR Part 40.

4.1.18 HRS is pleased to provide DHHR with an account manager to be available during normal business hours, Monday-Friday between 7:00 am EST and 5:00 pm EST to answer questions and resolve problems.

4.1.19 HRS will provide each Facility/Bureau/Office with a written recapitulation of the testing program activity on a monthly basis and provide by US mail a comprehensive listing within ten (10) calendar days to each respective thirty (30) Community Services Managers.

4.1.20 HRS will provide, upon written request, a litigation package within 120 hours of the request.

4.1.21 HRS will provide within seven (7) calendar days, upon request, expert witness testimony regarding the accuracy of specific client/applicant testing should the results and subsequent actions be challenged by client/applicant.

4.1.22 HRS will maintain records, documents, and other files directly related to the performance of work under this agreement in accordance with 49 CFR Part 40 and accepted professional practice and appropriate accounting procedures.

4.1.23 HRS will provide any or all records produced or held in execution of this agreement within 10 calendar days of written notice.

Medical Review Officer Certification Council

3231 S Halsted St, #167, Chicago, IL 60608 • 847-631-0599 • FAX 847-483-1282 Email: mrocc@mrocc.org



July 30, 2018

BOARD OF DIRECTORS

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Program Manager

Stephen J. Kracht, D.O.
Cynergy, P.A.
8140 Ward Parkway Suite 275
Kansas City, MO 64114

Certification Number: 18-12524

Valid from July 30, 2018 to July 30, 2023

Dr. Kracht:

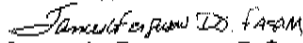
I am very pleased to confirm that you have successfully passed the MROCC certification examination. Your CME training plus the passing of this examination qualifies you for certification by the Medical Review Officer Certification Council as a Certified MRO.

An official verification of certification is available by logging into the MROCC website at <https://www.mrocc.org/login.cfm> and clicking on the Print Verification button. Once you are logged in, there is also an option to purchase a professionally-printed MROCC certificate, if you wish to do so.

Your listing is now available on the MROCC website. You may view your listing and make changes to it at the MROCC website at <https://www.mrocc.org/login.cfm>. It is important to keep your contact information updated by logging into your record on our website so that you receive any necessary updates and reminders during your certification cycle.

Again, my warmest congratulations!

Sincerely,


James L. Ferguson, D.O.
Chairman, MROCC Board of Directors

MROCC

Promoting and Preserving The Highest Quality of Standards Among MROs
www.mrocc.org



Currently Certified as a Medical Review Officer by MROCC

Name:	Stephen J. Kracht, D.O.
Certification Number:	18-12524
Certification Cycle:	July 30, 2018 to July 30, 2023
Company:	Cynergy, P.A.
Address Line 1:	8140 Ward Parkway Suite 275
Address Line 2:	
City:	Kansas City
State:	MO
Country:	
Email:	stephen.kracht@cynergymro.com
Date Printed:	May 04, 2018
Source:	MROCC website. The verification of certification using this web site meets primary source requirements as defined by JCAHO and NCQA.

This notice serves as verification that the above referenced physician is a certified Medical Review Officer (MRO) through the Medical Review Officer Certification Council (MROCC). MROCC certifies, through an eligibility process and written examination, licensed physicians who have had appropriate CME training and experience in performing the essential duties of the MRO. Certification is intended to ensure the public of quality services and the maintenance of ethical conduct by qualified physicians involved in drug and alcohol testing review.

MROCC's certification examination is annually reviewed and approved by the Department of Health and Human Services, and fulfills the requirement for certification of Medical Review Officers as established by the Department of Transportation in its Procedures for Transportation Workplace Drug and Alcohol Testing Programs 49 CFR Part 40 of the Federal Register.



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

American Association of Medical Review Officers

March 9, 2018

Verification of Certification for: Charles Moorefield, MD
1856 Lake Grove Lane
Orlando, FL 32806

Certification Number: 930207214

Current Certification Date: February 18, 2018

Certification Expiration Date: February 18, 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.
Chairman



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

American Association of Medical Review Officers

April 21, 2017

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

Certification Number: 20508284

Current Certification Date: April 20, 2017

Certification Expiration Date: April 20, 2022

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

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

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

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

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ HHR2000000006

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)

<input checked="" type="checkbox"/> Addendum No. 1	<input type="checkbox"/> Addendum No. 6
<input checked="" type="checkbox"/> Addendum No. 2	<input type="checkbox"/> Addendum No. 7
<input type="checkbox"/> Addendum No. 3	<input type="checkbox"/> Addendum No. 8
<input type="checkbox"/> Addendum No. 4	<input type="checkbox"/> Addendum No. 9
<input type="checkbox"/> Addendum No. 5	<input type="checkbox"/> 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.

Health Research Systems, Inc.

Company



Authorized Signature

4/17/2020

Date

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

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

Merilee Hutchinson, Operations Manager

(Name, Title)

Merilee Hutchinson, Operations Manager

(Printed Name and Title)

821 6th Avenue Huntington, WV 25701 P. O. Box 524 Huntington, WV 25710

(Address)

304-529-4453 866-945-9153

(Phone Number) / (Fax Number)

mhutchinson@healthresearchsystems.com

(email address)

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

Health Research Systems, Inc.

(Company)

Merilee Hutchinson

(Authorized Signature) (Representative Name, Title)

Merilee Hutchinson, Operations Manager

(Printed Name and Title of Authorized Representative)

04/17/2020

(Date)

304-529-4453 866-945-9153

(Phone Number) (Fax Number)

REQUEST FOR QUOTATION
CRFQ HHR2000000006 - **Drug and Alcohol Testing Services**

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: Merilee Hutchinson

Telephone Number: 304-521-1422

Fax Number: 866-945-9153

Email Address: mhutchinson@healthresearchsystems.com

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 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 plan or agreement and the vendor is not in default of any of the 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 § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered 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 exceeds 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. 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:

Vendor's Name: Health Research Systems, Inc.

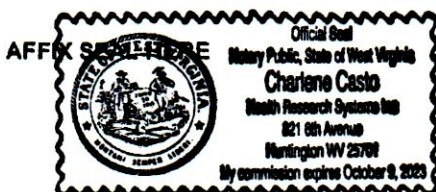
Authorized Signature: Meileo Hutchinson Date: 4/17/2020

State of West Virginia

County of Cabell to-wit:

Taken, subscribed, and sworn to before me this 17 day of April, 2020

My Commission expires October 9, 2023



NOTARY PUBLIC

Charlene Casto

Purchasing Affidavit (Revised 01/19/2018)

West Virginia Ethics Commission
Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Health Research Systems, Inc **Address:** 821 6th Avenue Huntington, WV 25701

Name of Authorized Agent: Merilee Hutchinson **Address:** 821 6th Avenue Huntington, WV 25701

Contract Number: _____ **Contract Description:** _____

Governmental agency awarding contract: _____

☐ Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

1. Subcontractors or other entities performing work or service under the Contract

☐ Check here if none, otherwise list entity/individual names below.

MedExpress, Alere, Braxton Co. Memorial Hospital, Roane General Hospital, Pivot Occupational, Grant Memorial Hospital, Ripley Family Care, Jefferson Urgent Care, Holzer, Safety 1st Drug Testing, Preston Memorial Urgent Care, EZ Care Walk-In Clinic, Clinical Reference Laboratory, Clearstar Logistics

2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)

☐ Check here if none, otherwise list entity/individual names below.

3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

☐ Check here if none, otherwise list entity/individual names below.

Signature: Merilee Hutchinson **Date Signed:** 4/17/2020

Notary Verification

State of West Virginia, County of Cabell:

I, Charlene Casto, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

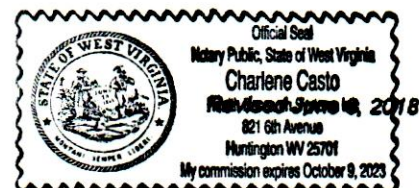
Taken, sworn to and subscribed before me this 17 day of April, 2020
Charlene Casto
Notary Public's Signature

To be completed by State Agency:

Date Received by State Agency: _____

Date submitted to Ethics Commission: _____

Governmental agency submitting Disclosure: _____



WV County	Collection Facility Name
Barbour County DHHR Office	MedExpress-Clarksburg
Berkeley County DHHR Office	MedExpress-Martinsburg
Boone County DHHR Office	MedExpress-So. Charleston
Braxton County DHHR Office	Braxton Co. Memorial Hospital
Brooke County DHHR Office	MedExpress-Weirton
Cabell County DHHR Office	Health Research Systems
Calhoun County DHHR Office	Roane General Hospital
Clay County DHHR Office	MedExpress-Summersville
Doddridge County DHHR Office	MedExpress-Clarksburg
Fayette County DHHR Office	MedExpress-Fayetteville
Gilmer County DHHR Office	Braxton Co. Memorial Hospital
Grant County DHHR Office	Grant Memorial Hospital
Greenbrier County DHHR Office	MedExpress-Lewisburg
Hampshire County DHHR Office	Pivot Occupational
Hancock County DHHR Office	MedExpress-Weirton
Hardy County DHHR Office	Grant Memorial Hospital
Harrison County DHHR Office	MedExpress-Clarksburg
Jackson County DHHR Office	Ripley Family Care
Jefferson County DHHR Office	Jefferson Urgent Care
Kanawha County DHHR Office	MedExpress-So. Charleston
Lewis County DHHR Office	MedExpress-Clarksburg
Lincoln County DHHR Office	Health Research Systems
Logan County DHHR Office	MedExpress-Logan
Marion County DHHR Office	MedExpress-Fairmont
Marshall County DHHR Office	MedExpress-Glendale
Mason County DHHR Office	Holzer
McDowell County DHHR Office	MedExpress-Bluefield, VA
Mercer County DHHR Office	MedExpress-Princeton
Mineral County DHHR Office	Pivot Occupational
Mingo County DHHR Office	Safety 1st Drug Testing
Monongalia County DHHR Office	MedExpress-Morgantown

Monroe County DHHR Office	MedExpress-Lewisburg
Morgan County DHHR Office	MedExpress-Martinsburg
Nicholas County DHHR Office	MedExpress-Summersville
Ohio County DHHR Office	MedExpress-Wheeling
Pendleton County DHHR Office	MedExpress-Harrisonburg, VA
Pleasants County DHHR Office	MedExpress-Parkersburg
Pocahontas County DHHR Office	MedExpress-Lewisburg
Preston County DHHR Office	Preston Memorial Urgent Care
Putnam County DHHR Office	MedExpress-Teays Valley
Raleigh County DHHR Office	MedExpress-Beckley
Randolph County DHHR Office	MedExpress-Elkins
Ritchie County DHHR Office	Mid-Ohio Valley Medical Center
Roane County DHHR Office	Roane General Hospital
Summers County DHHR Office	MedExpress-Beckley
Taylor County DHHR Office	MedExpress-Fairmont
Tucker County DHHR Office	MedExpress-Elkins
Tyler County DHHR Office	EZ Care Walkin In Medical Ctr
Upshur County DHHR Office	MedExpress-Clarksburg
Wayne County DHHR Office	Health Research Systems
Webster County DHHR Office	MedExpress-Summersville
Wetzel County DHHR Office	MedExpress-Wheeling
Wirt County DHHR Office	MedExpress-Parkersburg
Wood County DHHR Office	MedExpress-Parkersburg
Wyoming County DHHR Office	MedExpress-Princeton