



State of West Virginia  
 Department of Administration  
 Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

# Request for Quotation

RFQ NUMBER  
**DPS0704**

PAGE  
**1**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**BUYER 32  
 304-558-0492**

VENDOR

RFQ COPY  
 TYPE NAME/ADDRESS HERE

Health Research Systems Inc  
 529 6th Ave  
 Huntington WV 25701

SHIP TO

WEST VIRGINIA STATE POLICE  
 4124 KANAWHA TURNPIKE  
 SOUTH CHARLESTON, WV  
 25309 304-746-2141

DATE PRINTED <b>09/14/2006</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
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BID OPENING DATE: **10/05/2006** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	LT		948-55		
<b>REQUEST FOR QUOTATION</b>  THE PURCHASING DIVISION IS SOLICITING BIDS FOR THE WEST VIRGINIA STATE POLICE TO PROVIDE AN OPEN-END CONTRACT FOR RANDOM DRUG TESTING PER THE ATTACHED SPECIFICATIONS.  ATTACHMENTS: 1. SPECIFICATIONS 2. AFFIDAVIT  3. BID FORM  <b>EXHIBIT 3</b>  LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON ..... AND EXTENDS FOR A PERIOD OF ONE (1) YEAR OR UNTIL SUCH "REASONABLE TIME" THEREAFTER AS IS NECESSARY TO OBTAIN A NEW CONTRACT OR RENEW THE ORIGINAL CONTRACT. THE "REASONABLE TIME" PERIOD SHALL NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE.						
RANDOM DRUG TESTING						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE *RCR* TELEPHONE **304-529-4453** DATE **10/5/06**  
 TITLE **OPS mgr.** FEIN **55-0703755** ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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ADDRESS CORRESPONDENCE TO ATTENTION OF:  
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**304-558-0492**

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**VENDOR**

**Health Research Systems Inc**  
**529 6th Ave**  
**Huntington WV 25701**

**SHIP TO**

**WEST VIRGINIA STATE POLICE**

**4124 KANAWHA TURNPIKE**  
**SOUTH CHARLESTON, WV**  
**25309 304-746-2141**

DATE PRINTED <b>09/14/2006</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
BID OPENING DATE: <b>10/05/2006</b>		BID OPENING TIME <b>01:30PM</b>		

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT.</p> <p>RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE (1) YEAR PERIODS.</p> <p>CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICES SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN.</p> <p>OPEN MARKET CLAUSE: THE DIRECTOR OF PURCHASING MAY AUTHORIZE A SPENDING UNIT TO PURCHASE ON THE OPEN MARKET, WITHOUT THE FILING OF A REQUISITION OR COST ESTIMATE, ITEMS SPECIFIED ON THIS CONTRACT FOR IMMEDIATE DELIVERY IN EMERGENCIES DUE TO UNFORESEEN CAUSES (INCLUDING BUT NOT LIMITED TO DELAYS IN TRANSPORTATION OR AN UNANTICIPATED INCREASE IN THE VOLUME OF WORK.)</p> <p>QUANTITIES: QUANTITIES LISTED IN THE REQUISITION ARE APPROXIMATIONS ONLY, BASED ON ESTIMATES SUPPLIED BY THE STATE SPENDING UNIT. IT IS UNDERSTOOD AND AGREED THAT THE CONTRACT SHALL COVER THE QUANTITIES ACTUALLY ORDERED DURING THE TERM OF THE CONTRACT.</p> <p>ORDERING PROCEDURE: SPENDING UNIT(S) SHALL ISSUE A</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE **RP** TELEPHONE **304-529-4453** DATE **10/5/06**

TITLE **ops mgr.** FEIN **55-0703755** ADDRESS CHANGES TO BE NOTED ABOVE

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Health Research Systems Inc  
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DATE PRINTED <b>09/14/2006</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
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BID OPENING DATE: **10/05/2006** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>WRITTEN STATE CONTRACT ORDER (FORM NUMBER WV-39) TO THE VENDOR FOR THE SERVICES COVERED BY THIS CONTRACT. THE ORIGINAL COPY OF THE WV-39 SHALL BE MAILED TO THE VENDOR AS AUTHORIZATION FOR AWARD, A SECOND COPY MAILED TO THE PURCHASING DIVISION, AND A THIRD COPY RETAINED BY THE SPENDING UNIT.</p> <p>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THIS CONTRACT IS AUTOMATICALLY NULL AND VOID, AND IS TERMINATED WITHOUT FURTHER ORDER.</p> <p>THE TERMS AND CONDITIONS CONTAINED IN THIS CONTRACT SHALL SUPERSEDE ANY AND ALL SUBSEQUENT TERMS AND CONDITIONS WHICH MAY APPEAR ON ANY ATTACHED PRINTED DOCUMENTS SUCH AS PRICE LISTS, ORDER FORMS, SALES AGREEMENTS OR MAINTENANCE AGREEMENTS, INCLUDING ANY ELECTRONIC MEDIUM SUCH AS CD-ROM.</p> <p>REV. 04/11/2001            VENDOR PREFERENCE CERTIFICATE</p> <p>CERTIFICATION AND APPLICATION* IS HEREBY MADE FOR PREFERENCE IN ACCORDANCE WITH WEST VIRGINIA CODE, 5A-3-37 (DOES NOT APPLY TO CONSTRUCTION CONTRACTS).</p> <p>A. APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE REASON CHECKED:</p> <p><input checked="" type="checkbox"/> BIDDER IS AN INDIVIDUAL RESIDENT VENDOR AND HAS RESIDED CONTINUOUSLY IN WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION; OR</p> <p><input type="checkbox"/> BIDDER IS A PARTNERSHIP, ASSOCIATION OR CORPORATION RESIDENT VENDOR AND HAS MAINTAINED ITS HEAD-</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE **RPS** TELEPHONE **304-529-4453** DATE **10/5/06**  
 TITLE **ops mgr** FEIN **55-0703755** ADDRESS CHANGES TO BE NOTED ABOVE

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ADDRESS CORRESPONDENCE TO ATTENTION OF  
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**304-558-0492**

**VENDOR**  
 RFQ COPY  
 TYPE NAME/ADDRESS HERE  
  
**Health Research Systems Inc**  
**529 6th Ave**  
**Huntington WV 25701**

**SHIP TO**  
**WEST VIRGINIA STATE POLICE**  
  
**4124 KANAWHA TURNPIKE**  
**SOUTH CHARLESTON, WV**  
**25309 304-746-2141**

DATE PRINTED <b>09/14/2006</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
BID OPENING DATE: <b>10/05/2006</b>		BID OPENING TIME <b>01:30PM</b>		

LINE	QUANTITY	UGP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>QUARTERS OR PRINCIPAL PLACE OF BUSINESS CONTINUOUSLY IN WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION; OR 80% OF THE OWNERSHIP INTEREST OF BIDDER IS HELD BY ANOTHER INDIVIDUAL, PARTNERSHIP, ASSOCIATION OR CORPORATION RESIDENT VENDOR WHO HAS MAINTAINED ITS HEADQUARTERS OR PRINCIPAL PLACE OF BUSINESS CONTINUOUSLY IN WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION; OR</p> <p>( ) BIDDER IS A CORPORATION NONRESIDENT VENDOR WHICH HAS AN AFFILIATE OR SUBSIDIARY WHICH EMPLOYS A MINIMUM OF ONE HUNDRED STATE RESIDENTS AND WHICH HAS MAINTAINED ITS HEADQUARTERS OR PRINCIPAL PLACE OF BUSINESS WITHIN WEST VIRGINIA CONTINUOUSLY FOR THE FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION.</p> <p>B. APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE REASON CHECKED:</p> <p>(X) BIDDER IS A RESIDENT VENDOR WHO CERTIFIES THAT, DURING THE LIFE OF THE CONTRACT, ON AVERAGE AT LEAST 75% OF THE EMPLOYEES WORKING ON THE PROJECT BEING BID ARE RESIDENTS OF WEST VIRGINIA WHO HAVE RESIDED IN THE STATE CONTINUOUSLY FOR THE TWO YEARS IMMEDIATELY PRECEDING SUBMISSION OF THIS BID;</p> <p>OR</p> <p>( ) BIDDER IS A NONRESIDENT VENDOR EMPLOYING A MINIMUM OF ONE HUNDRED STATE RESIDENTS OR IS A NONRESIDENT VENDOR WITH AN AFFILIATE OR SUBSIDIARY WHICH MAINTAINS ITS HEADQUARTERS OR PRINCIPAL PLACE OF BUSINESS WITHIN WEST VIRGINIA EMPLOYING A MINIMUM OF ONE HUNDRED STATE RESIDENTS WHO CERTIFIES THAT, DURING THE LIFE OF THE CONTRACT, ON AVERAGE AT LEAST 75% OF THE EMPLOYEES OR BIDDERS' AFFILIATE'S OR</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE **RPB** TELEPHONE **304-529-4453** DATE **10/5/06**  
 TITLE **ops mgr** FEIN **550703755** ADDRESS CHANGES TO BE NOTED ABOVE

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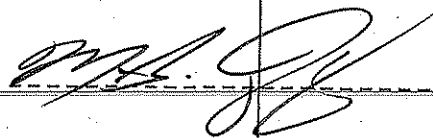
RFQ COPY  
 TYPE NAME/ADDRESS HERE

**Health Research Systems Inc  
 529 6th Ave  
 Huntington WV 25701**

SHIP TO

**WEST VIRGINIA STATE POLICE  
 4124 KANAWHA TURNPIKE  
 SOUTH CHARLESTON, WV  
 25309 304-746-2141**

DATE PRINTED <b>09/14/2006</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
BID OPENING DATE: <b>10/05/2006</b>		BID OPENING TIME <b>01:30PM</b>		

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>SUBSIDIARY'S EMPLOYEES ARE RESIDENTS OF WEST VIRGINIA WHO HAVE RESIDED IN THE STATE CONTINUOUSLY FOR THE TWO YEARS IMMEDIATELY PRECEDING SUBMISSION OF THIS BID.</p> <p>BIDDER UNDERSTANDS IF THE SECRETARY OF TAX &amp; REVENUE DETERMINES THAT A BIDDER RECEIVING PREFERENCE HAS FAILED TO CONTINUE TO MEET THE REQUIREMENTS FOR SUCH PREFERENCE, THE SECRETARY MAY ORDER THE DIRECTOR OF PURCHASING TO: (A) RESCIND THE CONTRACT OR PURCHASE ORDER ISSUED; OR (B) ASSESS A PENALTY AGAINST SUCH BIDDER IN AN AMOUNT NOT TO EXCEED 5% OF THE BID AMOUNT AND THAT SUCH PENALTY WILL BE PAID TO THE CONTRACTING AGENCY OR DEDUCTED FROM ANY UNPAID BALANCE ON THE CONTRACT OR PURCHASE ORDER.</p> <p>BY SUBMISSION OF THIS CERTIFICATE, BIDDER AGREES TO DISCLOSE ANY REASONABLY REQUESTED INFORMATION TO THE PURCHASING DIVISION AND AUTHORIZES THE DEPARTMENT OF TAX AND REVENUE TO DISCLOSE TO THE DIRECTOR OF PURCHASING APPROPRIATE INFORMATION VERIFYING THAT BIDDER HAS PAID THE REQUIRED BUSINESS TAXES, PROVIDED THAT SUCH INFORMATION DOES NOT CONTAIN THE AMOUNTS OF TAXES PAID NOR ANY OTHER INFORMATION DEEMED BY THE TAX COMMISSIONER TO BE CONFIDENTIAL.</p> <p>UNDER PENALTY OF LAW FOR FALSE SWEARING (WEST VIRGINIA CODE 61-5-3), BIDDER HEREBY CERTIFIES THAT THIS CERTIFICATE IS TRUE AND ACCURATE IN ALL RESPECTS; AND THAT IF A CONTRACT IS ISSUED TO BIDDER AND IF ANYTHING CONTAINED WITHIN THIS CERTIFICATE CHANGES DURING THE TERM OF THE CONTRACT, BIDDER WILL NOTIFY THE PURCHASING DIVISION IN WRITING IMMEDIATELY.</p> <p>BIDDER: </p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <b>RRP</b>	TELEPHONE <b>304-529-4453</b>	DATE <b>10/5/06</b>
TITLE <b>ops mgr</b>	FEIN <b>55-0703755</b>	ADDRESS CHANGES TO BE NOTED ABOVE

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RFQ COPY  
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VENDOR

Health Research Systems Inc  
 529 6th Ave  
 Huntington WV 25701

SHIP TO

WEST VIRGINIA STATE POLICE  
 4124 KANAWHA TURNPIKE  
 SOUTH CHARLESTON, WV  
 25309 304-746-2141

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
09/14/2006				

BID OPENING DATE: **10/05/2006** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
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DATE: 10-4-06  
 SIGNED: [Signature]  
 TITLE: President

\* CHECK ANY COMBINATION OF PREFERENCE CONSIDERATION(S) IN EITHER "A" OR "B", OR BOTH "A" AND "B" WHICH YOU ARE ENTITLED TO RECEIVE. YOU MAY REQUEST UP TO THE MAXIMUM 5% PREFERENCE FOR BOTH "A" AND "B". (REV. 12/00)

**NOTICE**

A SIGNED BID MUST BE SUBMITTED TO:

DEPARTMENT OF ADMINISTRATION  
 PURCHASING DIVISION  
 BUILDING 15  
 2019 WASHINGTON STREET, EAST  
 CHARLESTON, WV 25305-0130

THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:

SEALED BID

BUYER: RON PRICE

RFQ. NO.: DPS0704

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <u>RP</u>	TELEPHONE <u>304-529-4153</u>	DATE <u>10/5/06</u>
TITLE <u>ops mgr</u>	FEIN <u>55-0703755</u>	ADDRESS CHANGES TO BE NOTED ABOVE

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ADDRESS CORRESPONDENCE TO ATTENTION OF
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304-558-0492

VENDOR

RFQ COPY  
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Health Research Systems Inc  
 529 6th Ave  
 Huntington WV 25701

STATE

WEST VIRGINIA STATE POLICE

4124 KANAWHA TURNPIKE  
 SOUTH CHARLESTON, WV  
 25309 304-746-2141

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
09/14/2006				

BID OPENING DATE: 10/05/2006 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
BID OPENING DATE:				OCTOBER 5, 2006		
BID OPENING TIME:				1:30 PM		
PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID:						
				304-529-4459		
CONTACT PERSON (PLEASE PRINT CLEARLY):						
				Randy Pauley		
QUESTIONS: QUESTIONS WILL BE ACCEPTED THROUGH SEPTEMBER 29, 2006, 12:00 NOON; DIRECTED TO CAROLE WOODYARD AT (304) 746-2141						
***** THIS IS THE END OF RFQ DPS0704 ***** TOTAL: _____						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TELEPHONE	DATE
<i>RRP</i>	304-529-4453	10/5/06
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE
ops mgr	55-0703755	

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DPS0704

## SPECIFICATIONS

### General Information

Currently, the West Virginia State Police utilizes a random drug testing program. The object of this program is to insure that critical Agency employees are not abusing controlled substances, thereby jeopardizing the safety of themselves, other Agency personnel, and the general public.

In essence, the program consists of the random collection and analysis of urine samples from one-third of the designated employee pool over the course of each year, with samples collected on a monthly basis. The designated employee pool consists of both sworn and civilian personnel located throughout West Virginia (see attached listing).

The Agency Head (hereafter "*Superintendent*") may also direct individual for cause tests to be conducted on an incidental basis.

### Agency Responsibilities

The Agency will provide the successful Vendor with a listing of all personnel who are to be included within the testing pool, along with their geographic location, and any other relevant personal identifiers.

All samples will be collected at Agency facilities, with the exception of any personnel within the Agency pool whose post of duty is within a reasonable driving distance of any Vendor facility where collections take place on a routine basis.

Employees chosen at random by the Vendor will be made available to Vendor personnel, during normal working hours at either their assigned work location or a Vendor facility.

### Vendor Responsibilities

The successful Vendor is responsible for the following:

1. Generating a random list of personnel to be tested on a monthly basis.
  2. Collection of all samples, at Agency facilities throughout West Virginia, inclusive of any travel costs associated with the collection of these samples. (Any travel costs associated with sample collection are to be encompassed within the per test fee.)
  3. Conducting sample collection activity during normal working hours. (Normal working hours for the purposes of this contract are 8:00 AM to 5:00 PM, Monday through Friday, excluding any state or federal holidays, or special holidays declared by the Governor.)
-



### SPECIFICATIONS

4. **Standard Testing:** Shall consist of analyzing samples collected to ascertain the presence or absence of the following SIX (6) substances in the concentrations specified:

- a) Concentrations of a drug at or above the following levels shall be considered a positive test regarding the initial immunoassay drug-screening test:

1- Cocaine Metabolite	300 ng/ml
2 - Marijuana Metabolite	50 ng/ml
3 - Opiate Metabolite	300 ng/ml
4 - Amphetamines	1000 ng/ml
5 - Benzodiazepines	300 ng/ml
6 - OxyContin	300 ng/ml

- b) Concentrations of a drug at or above the following levels shall be considered a positive test regarding the confirmatory gas chromatography/mass spectrometry (GC/MS) test:

1- Cocaine Metabolite	150 ng/ml
2 - Marijuana Metabolite	15 ng/ml
3 - Opiate Metabolite	300 ng/ml
4 - Amphetamines	500 ng/ml
5 - Benzodiazepines	300 ng/ml
6 - OxyContin	300 ng/ml

**Note:** The *COST per Test Administered* referred to at the end of this request for quotations refers to testing for the above listed six (6) substances only.

Vendors are also required to provide pricing for additional OPTIONAL Testing for the substances listed within item number 5 below. This cost is to be quoted on a per substance, per test basis. It is estimated that this type of testing will not be required more than twenty times per year.

5. **Optional Testing:** On certain occasions, the Agency may wish to test for other substances in addition to the five listed above. Optional Testing shall consist of analyzing samples collected to ascertain the presence or absence of the following substances in the concentrations specified:

- a.) Concentrations of a drug at or above the following levels shall be considered a positive test regarding the initial immunoassay drug-screening test:

---

Barbiturates	300 ng/ml
PCP	25 ng/ml
Steroids	to be specified at time of test (may be one or more)

## SPECIFICATIONS

b.) Concentrations of a drug at or above the following levels shall be considered a positive test regarding the confirmatory gas chromatography/mass spectrometry (GC/MS) test:

Barbiturates	300 ng/ml
PCP	25 ng/ml
Steroids	to be specified at time of test (may be one or more)

6. Providing a written report to the Superintendent or his designee, on a monthly basis, which details the results of all tests.

Note: All reports provided by the Vendor will be addressed as follows:

Office of the Superintendent  
West Virginia State Police  
725 Jefferson Road  
South Charleston, WV 25309-1698

The exterior of the package containing the report will be conspicuously marked "CONFIDENTIAL" in large red letters on both the front and rear surfaces.

7. Insuring the security, integrity, and confidentiality of the program.
8. Complying with the analytical standards established for this program (see below).
9. Providing any follow-up testing or analysis required to either confirm a policy violation or eliminate a false positive. (The cost of such follow-up work to be included within the per test fee quoted pursuant to this contract.)
10. Providing any necessary expert testimony required at any deposition, disciplinary or judicial proceeding which arises as a result of this program.
11. All labor, materials, transportation, blind samples, and any other costs associated with operation of the program are to be covered by the basic, per test fee, inclusive of any one time administrative fee associated with establishing the program. The only separate costs which will be honored are those associated with Expert Testimony when required.
12. BLANK
-

## SPECIFICATIONS

13. The Vendor is to provide pricing which shall be inclusive of all necessary collection and identification supplies and sample transportation costs from the collection site to a laboratory certified by the Substance Abuse and Mental Health Services Administration (SAMHSA), National Institute of Drug Abuse (NIDA).
  14. The Vendor will conduct urine specimen collection under procedures issued by/through the U.S. Department of Transportation. This includes a 5-panel drug screen using current SAMHSA/NIDA acceptable laboratory methods. The split sample method of collection, handling and storage of the sample is to be utilized.
  15. The Vendor will provide for a split specimen/challenge drug testing process (at a different SAMHSA/NIDA approved lab if instructed to do so) upon the employee's request within 72 hours of receiving the request. The employee is to be billed for these services and charges will not be the fiscal responsibility of the Agency. The vendor is authorized by the agency to demand payment in advance for this test.
  16. The Vendor will retain positive specimens for one year by following the current SAMHSA/NIDA methodology, unless instructed otherwise by Agency.
  17. The Vendor will not charge for specimen adulteration assays.
  18. The Vendor will not charge for handling of rejected specimens or those otherwise unfit for testing.
  19. BLANK
  20. BLANK
  21. The Vendor will provide the Superintendent or his designee with notification of negative drug test results within the time frames established by the U.S. Department of Transportation/Federal Highway Administration. In the event of a positive preliminary test (immunoassay drug screen), the following requirements/time limits apply:
    - The secondary test (gas chromatography/mass spectrometry GC/MS) will be conducted within 48 hours.
    - If the secondary test is also positive, the case will immediately be referred to the Vendor's Medical Review Officer.
-

### SPECIFICATIONS

If the Medical Review Officer determines the tests to be true positive (i.e. there is no acceptable medical explanation for the presence of the substance) the final written report of the Medical Review Officer must be in the hands of the Superintendent or his/her designee within 5 business days. In addition, the Medical Review officer will also report his findings verbally to the Superintendent or his designee within 24 hours. (the Agency will provide an emergency telephone number and procedure to facilitate the verbal report.)

**NOTE: IF THE INDIVIDUAL TESTED OPTS TO DEMAND THE SPLIT SPECIMEN/CHALLENGE TEST, SUCH DEMAND DOES NOT AFFECT OR DELAY THE VENDORS REPORTING OBLIGATIONS AS SET FORTH ABOVE.**

22. The Vendor will ensure that strict rules of confidentiality, issued by or through the U.S. Department of Transportation, will be maintained at all times. All test results and material acquired will become the property of the Agency. Any test results shall not be released without prior express written consent of the West Virginia State Police.
23. The Vendor is to identify their subcontractor(s) and the portions of the program they intend to sub-contract; or, for those Vendors not having identified their subcontractors at the time of submitting their bid, the Vendor must state their desire to subcontract specific portions of the Drug Testing Program.
24. The Vendor shall provide the Superintendent or his designee with a written recapitulation of the testing program results on a monthly basis.
25. The Vendor shall provide all blind samples as required by U.S. Department of Transportation regulations (at no additional cost to the Agency).
26. The Vendor shall not use or disclose at any time during or after the termination of this contract, any information discovered or developed in the course of the performance of this contract without the express written consent of the West Virginia State Police. Any and all reports related to this contract shall be submitted to the Superintendent or his designee.
27. Quantities listed in this request for quotations are approximations only and are based upon estimates of yearly usage. It is understood and agreed that the contract will cover the quantities actually ordered for delivery during the term of the contract, whether more or less than the quantities shown.
28. The Vendor shall not assign, transfer, or delegate any interest in the contract whether by assignment, delegation or novation, without the prior written consent of the Agency.

**SPECIFICATIONS**

29. The Vendor will submit detailed, itemized invoices to the Accounting Section, West Virginia State Police, on a monthly basis and will be reimbursed pursuant to Standard State accounting procedures (in arrears). The invoice is to reflect all testing conducted during the respective calendar month. State law forbids payment of such invoices in advance of the services being rendered.
  30. The successful Vendor will be required to provide proof of liability insurance in the minimum amount of one million dollars (\$1,000,000) combined single limit per occurrence.
  31. The following parameters apply with regard to the rates quoted within the Vendor price Quotation section below:
    - a) The Vendor is responsible for providing Blind Specimens on an as needed basis in accordance with testing levels established pursuant to the above specifications.
    - b) Waiting Time will apply when collection at an Agency site is delayed from the originally scheduled start time or when a delay occurs during the course of a scheduled collection and the delay is not attributable to the Vendor. Waiting time will accrue in 15-minute intervals.
    - c) All sample collection will occur between 8:00 a.m. and 5:00 p.m., Monday through Friday, State and Federal holidays excluded.
  32. The Vendor will be paid for all "No Shows", which are defined as:
    - a) A donor arrives at a Vendor facility without appropriate identification, causing service not to take place.
    - b) A donor fails to appear for a scheduled collection without 24 hour advance cancellation notice.
    - c) Incomplete service due to the either of the following:
      - Donor is unable to void within three (3) hours
      - Donor refuses to provide urine specimen
-

## SPECIFICATIONS

- 33 The Superintendent may direct that for cause testing of an individual or individuals be conducted on an incidental basis. In the event this occurs, the prices quoted herein for random testing shall apply. In the case of for cause testing, the date, time and location of sample collection shall be agreed upon by the Agency and the Vendor on a case-by-case basis.
34. The Primary selection criteria will be price, computed according to the attached bid form.

Prior to award, the apparent successful Vendor will be required to provide the following information which is subject to verification by the Agency and the Purchasing Division. This information will be required in order to verify the Vendor's ability to perform under the terms and conditions of the contract.

- Proof of Liability Insurance(per the bid specifications)
- Proof of certification for the Laboratory Facility (i.e. that meets the standards established in the bid specification)
- The Credentials of the designated Medical Review Officer and a synopsis of his/her experience with a program(s) of this nature and scope (inclusive of testimony arising from litigation associated with such programs).
- A synopsis of the Vendor's experience with programs of this nature and scope (inclusive of testimony arising from litigation associated with such programs), to include:
  - Five (5) references (preferably current) for whom similar services are or have been performed.
  - The methodology for generating the random list of personnel to be tested.
  - The logistics, mechanism, and resources which will be utilized in order to collect samples on a statewide basis.

**Drug Testing Costs (Estimated Pool Size: 750 to 825 employees):**  
Prospective Bidders must utilize the attached bid form.

**Notes:** Other travel costs (meals, mileage, lodging) related to expert testimony will be reimbursed based upon actual expenditures, not to exceed the rates in effect pursuant to the current State of West Virginia Travel Regulations. Receipts for meals and lodging will be required.

The Agency recognizes that there are a multitude of steroid substances which are subject to abuse, and that an individual/specific test is required to positively identify each one which may have been abused. The price quotation requested above is the cost to test for one specific steroid (i.e. if the Agency requests that the Vendor test a sample for three steroids, the total cost will be three times the cost quoted above).

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## INTRODUCTION

Health Research Systems, Inc. (HRS) is pleased to submit this proposal to the West Virginia State Police for drug testing services.

At HRS we fully understand The need of the West Virginia State Police for 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:

- A corporate structure to support such a program
- Quality personnel to effectively perform all levels of service
- Rigorous training programs to ensure high- level performance
- An excellent quality assurance / control program to monitor the work performed

## HRS CORPORATE RESUME

Health Research Systems, Inc. is a locally owned and operated, privately- held corporation based in Huntington, WV. The HRS Huntington and Charleston, WV offices have expert personnel as well as the experience necessary to coordinate a program as complex as that required by the The West Virginia State Police.

Mr. Michael Day, President and owner of HRS in Huntington, WV, has fifteen (15) years experience coordinating specimen collection services for occupational health testing as well as the insurance industry. He is able to provide expert testimony on program administration that stands behind the specimens collected by the Huntington and Charleston, WV offices. Mr. Day works to stay current on Federal Regulations relevant to substance abuse testing in order to provide collectors with the most up-to-date training possible, as well as keep our clients informed of any pertinent changes. Mr. Day is also a Certified Breath Alcohol Technician trainer for the Alco-Sensor IV evidential breath testing device (EBT) as well as a Factory Authorized Calibration Technician and is able to provide expert testimony in this field as well.

Operations Manager Randy Pauley and the staff of HRS' Huntington, WV office will be responsible for the day-to-day operation of the The West Virginia State Police drug testing program. Our professional staff currently oversees the operation of 60 programs of this nature with approximately 6,000 covered employees involved in these programs.

HRS has provided drug and alcohol testing services for the WVDOT Division of Highways since 1994 when federal regulations went into effect mandating drug and alcohol testing for safety-sensitive employees. Since that time we have performed approximately 18,000 specimen collections for the WVDOT in all situations: random, pre-employment, reasonable cause, follow up and emergency testing. We have performed testing in each of the 55 counties in West Virginia for the WVDOT at approximately 150 different locations each year. We have worked with the WVDOT Program Coordinator whenever needed to streamline and simplify the WVDOT program to provide the best service available. We have shown that we are dependable as well as accurate and detail-minded, and that we have the experience necessary to provide delivery of the required services in a timely and professional manner.

The ability to maintain communication with clients is supported by state-of-the-art equipment in HRS's corporate headquarters and throughout the branch offices. Pier to Pier communication exists for various clients as well as other high tech computer access systems for several specific lines of service offered by the company. HRS also offers electronic mail communication via the Internet. The HRS web page can be located at [www.healthresearchsystems.com](http://www.healthresearchsystems.com).



## QUALITY ASSURANCE

### **Customer Service:**

The Customer Service Representative (“CSR”) is assigned to customers to act as the designated point of contact at the HRS corporate office. They have the ability to schedule mobile and clinic site collection services as well as in-office services. They also have the ability to coordinate the shipment of any necessary supplies.

The CSR is responsible for assisting the client in all service-related issues and the researching and resolution of any collection related problems. The CSR is available via an 800 telephone number, Monday through Friday 8:00am – 5:00pm EST, or via Internet email during the same hours. The CSR has a level of expertise that is a prerequisite in this industry and has the communication skills necessary to assist clients with any number of issues.

### **Quality Control**

HRS’s Quality Control staff is tasked with the responsibility of ensuring branch office compliance with HRS corporate policy and procedures, as well as our customers overall satisfaction and program compliance. HRS’s personnel update all client specification information and provide ongoing support to HRS branch office personnel via telephone, fax, email, and memorandums. Such support includes but is not limited to information regarding client-specific services, regulations, training, certification, and billing instructions. Identified below are the components of the Quality Control program:

- **Internal Audits:**

Collections are audited for accuracy and completeness by the branch office manager. The audit is conducted using evaluation forms that monitor and evaluate all aspects of a specimen collection from the physical location of the collection to the Collector knowledge and competency.

- **Rejected Specimens:**

If the Client or laboratory reports troubled and/or rejected specimens to the designated CSR these reports are sent to the Branch Manager. Upon receipt of this information several measures are taken to correct the error with the Collector and to coordinate a second specimen being collected. In addition, if troubled specimens can be salvaged by affidavit one is secured as soon as possible from the Collector and forwarded to the appropriate entity (i.e., laboratory, MRO, client). After immediate intervention has

occurred the information received is then used for error correction training that is formal and documented.

- Collector Resources:

Collectors/BATs are provided several tools to aid them in accomplishing specimen collection in accordance with individual client requirements:

1. A specification sheet with pertinent information is developed for each client prior to the initiation of service. These specification sheets outline key points of information which aid the collector/BAT in supply ordering, scheduling, collection testing guidelines, document preparation and completion, preparation of specimen for shipment to the laboratory, distribution of remaining copies of the Custody and Control (C.O.C.) forms and instructions for special circumstances. A similar sheet would be developed for the THE WEST VIRGINIA STATE POLICE.
2. Lending leadership and support to collectors and BATs are the management personnel located in our corporate headquarters in Huntington, WV who are knowledgeable of Federal requirements and have attained a level of expertise in developing and administering complex programs. This type of highly qualified support is instrumental in providing:
  - Complete accuracy in testing procedures and documentation.
  - Total confidentiality in handling of all collection related data.
  - Collectors and breath alcohol technicians with well-developed interpersonal skills, capable of displaying sensitivity with participants.
  - Accurate, detailed reporting of all collection and testing activity.
  - Total commitment to excellence to our clients

HRS offers this level of excellence. The commitment to providing quality service has distinguished HRS from other providers in the Substance Abuse Testing industry.



## SCOPE OF PROGRAM

**HRS, along with Corporate Support Systems, Inc. of Tennessee and Clinical Reference Laboratory** offers a total drug and alcohol testing package. This package is designed for The West Virginia State Police to meet the drug and alcohol testing situations required by the agency's policy.

- Specimen collection service performed in compliance with SAMHSA federal collection guidelines by local clinic medical facilities or by HRS's offices in Huntington or Dunbar WV or mobile collection at agency facilities by HRS's collectors.
- 24-hour emergency service for "For Cause" testing.
- Specimen testing by DHHS/SAMHSA certified laboratory for the drugs specified in the RFQ DPS0704 to include a standard panel consisting of: THC, Cocaine, Opiates, Amphetamines, Benzodiazepines, Oxycontin, and PCP, Barbiturates, and Steroids upon request. Specimen collections are conducted according to USDOT regulations and USDHHR specimen collection guidelines.
- Laboratory analysis of urine specimen by immunoassay technology for screening purposes and automatic gas chromatography / mass spectrometry (GC/MS) confirmation of any screened positive drug test results. Drug metabolites will be tested for according to agency requirements.
- Specimen adulteration assays performed by the laboratory free of charge.
- Medical Review Officer (MRO) services for reviewing and reporting all drug results.
- All necessary collection supplies to include overnight transportation of the specimen (according to laboratory specifications) back to the lab for testing.
- Unlimited toll-free phone access to expert help.
- Expert witness testimony.

HRS will provide all necessary services to comply with all requirements of RFQ DPS 0704.

HRS's Huntington branch office is located at 529 Sixth Avenue, Huntington, West Virginia 25701, and the toll-free phone number is 1-800-442-3926. The hours of operation are 8:00a.m. - 5:00p.m. Monday through Friday.

## **TEST LOCATIONS**

HRS will provide mobile testing services at agency facilities when required. In addition, upon approval of Agency Management, we may utilize local medical clinics nearby the agency facilities to provide collection services during normal business hours.

## **24 HOUR "FOR CAUSE" EMERGENCY SERVICE**

A staffed after hours toll-free number (800-442-EXAM) for use by HRS clients is in use throughout HRS's office network. Once emergency calls are received through the 800 number, the Emergency Coordinator in our headquarters is notified by pager. Then the Coordinator contacts the client to gain logistical information on the type of collection required and the collection location to be serviced. The Emergency Coordinator then contacts the appropriate collection personnel by pager and coordinates all details for the collection.

HRS's corporate office dedicates two key employees, who rotate primary and secondary beepers, to serve as the Emergency Response Coordinators for this system. They are accessible minute-by minute via beeper and cellular telephones. They are intimately familiar with the nature of emergency testing and the need for experience. HRS also maintains a minimum of two on-call personnel in all of its branch offices. These personnel are accessible by tone and digital beepers 24 hours a day, seven days a week.

## **OPERATING PLAN**

Lending support to the The West Virginia State Police testing program are HRS's management personnel who are fully knowledgeable of Federal requirements and have attained a level of expertise in developing and administering complex programs. This type of highly qualified support is necessary for programs such as that of the THE WEST VIRGINIA STATE POLICE due to the need for:

- Complete accuracy in testing procedures and documentation
- Total confidentiality in handling of all relevant data
- Collectors and breath alcohol technicians with well-developed interpersonal skills, capable of displaying sensitivity with client's employees
- Accurate, detailed reporting of all collection and testing activity
- Total commitment to excellence by its contracted organizations

HRS offers just such a level of excellence to THE WEST VIRGINIA STATE POLICE. Our corporate commitment to providing quality service has distinguished us from other service providers in both the paramedical and drug-free workplace industries. The following sections will give you further details.

## **CENTRALIZED SCHEDULING**

HRS operates a centralized scheduling department within its branch office in Huntington, WV. For the THE WEST VIRGINIA STATE POLICE, scheduling may be requested by contacting HRS's Huntington branch office at their toll-free phone number: 800-442-3926. The hours of operation are 8:00a.m. - 5:00p.m. Monday through Friday. The Huntington branch office will work with the THE WEST VIRGINIA STATE POLICE program coordinator to schedule any referral testing you require. For after hours testing please see the section entitled, "24-hour Emergency Services".

## **CONFIDENTIALITY**

HRS follows strict rules of confidentiality, required by the USDOT and SAMHSA, and this shall be maintained at all times. All test results and material acquired by the vendor in the course of performance of this contract shall become the property of the THE WEST VIRGINIA STATE POLICE. Except as required by Federal Regulations, HRS shall not use or disclose at any time during or after the termination

of this contract, any information discovered or developed in the course of the performance of this contract without the prior express written consent of the The West Virginia State Police.

## LABORATORY SERVICES

For laboratory services, HRS is pleased to provide The West Virginia State Police with the services of **Clinical Reference Lab (CRL)**. CRL is certified by SAMHSA and meets Federal regulations. The address for CRL is:

Clinical Reference Laboratory  
8433 Quivira Road  
Lenexa, Kansas 66215  
(800) 445-6917  
Hours: 7:30a.m. - 6:00p.m. (Central standard) Monday - Saturday

Laboratory specimen screening will be performed using immunoassay technology for the following requested Drug panels:

- THC (marijuana)
- Cocaine
- Benzodiazepines
- Opiates (expanded panel to include oxycodone)
- Amphetamines
- Oxycontin
- Barbituates
- PCP

All specimens are initially screened for the presence of the above drug metabolites utilizing immunoassay technology. All positive screens are automatically confirmed using gas chromatography / mass spectrometry (GC/MS) at no additional fees.

The laboratory performs any required specimen adulteration assays necessary at no extra charge.

The laboratory retains custody of any positive urine specimen under properly secured refrigerated conditions in accordance with established governmental regulations (at the least a minimum of one year). Any urine specimen that does not test positive upon confirmation is destroyed in accordance with governmental regulations.

## MRO SERVICES

HRS will utilize **Corporate Support Systems, Inc. (CSSI)** to fulfill your Medical Review Officer requirements. CSSI is fully devoted to Medical Review issues and we are pleased to provide you with their services. The certifications and other pertinent information for current MROs are enclosed. The address for CSSI is:

CSSI of Tennessee/Workforce Integrity Network  
P.O. Box 50575  
Knoxville, TN 37950  
Phone: (800) 229-8001 Fax: 865-558-9461

To facilitate random testing eligible employees are placed in a selection pool. The random selection is made according to testing rates established by the agency utilizing a scientifically sound random generator. Specifically, CSSI uses "Drug Pak" software to conduct random selections.

Within 24 hours of receipt of the specimen negative results are available to be downloaded from the laboratory computer to CSSI. Negative results will be downloaded to CSSI, sorted and reviewed, and available to the client via the internet within 48-72 hours.

All laboratory-positive results will be downloaded to CSSI for review. In the event of a laboratory positive the MRO will perform a telephonic interview with the donor to determine any "legitimate" causes (prescription medication, food sources, etc.). If necessary, the donor may be requested to provide proof of prescription, or medical records. The MRO may find it necessary to speak with the donor's pharmacy or physician to verify medical history.

Actual personal interview of donor is rarely necessary and is in fact discouraged by most MROs. About the only time an MRO may find it necessary for an actual physical examination is in the event of a positive laboratory test for opiates; i.e. heroin. If the donor's medical and personal history warrants the MRO may decide upon a physical examination for such drug use signs as "needle tracts," skin tone, etc. In that case the MRO would contact a physician licensed in the appropriate state to perform a physical examination on a contracted basis.

Laboratory test result information must first be matched with the MRO copy of the custody and control form (CCF) before results can be reported from the MRO to The West Virginia State Police. Once the review process has been completed these results are available in 48-72 hours.

CSSI adheres to strict rules of confidentiality. Test results for The West Virginia State Police will not be released without the prior consent of the agency's program coordinator.

## **REPORTING AND RECORD KEEPING**

HRS will provide copies of all necessary information related to testing to The West Virginia State Police. HRS maintains a backup of these records for the required number of years.

HRS centralizes billing activity in all HRS offices through the corporate headquarters in Huntington, WV.

## **INSURANCE**

HRS currently carries the following insurance coverage:

- \* **PUBLIC LIABILITY INSURANCE**  
General and Professional Liability insurance coverage as follows: \$2 million per incident, and \$3 million aggregate.
- \* **PROPERTY DAMAGE**  
Coverage meets or exceeds the limits set forth in the RFP.
- \* **AUTOMOBILE INSURANCE**  
Coverage meets or exceeds the limits set forth in the RFP.
- \* **EMPLOYEE DISHONESTY INSURANCE**  
Contractor only. Coverage meets or exceeds the limits set forth in the RFP.
- \* **WORKERS COMPENSATION INSURANCE**  
Contractor only per agent. Coverage meets or exceeds the requirements.
- \* **UMBRELLA LIABILITY INSURANCE**  
Contractor only. Coverage meets or exceeds the limits set forth in the RFP.
- \* **PROPERTY LOSS OR THEFT**  
Not applicable.



## REFERENCES

WVDOT / DOH

Contact: Jeff Black  
1900 Kanawha Blvd., Bldg 5, Room 949  
Charleston, WV 25305  
304-558-3111

WV Parkways Authority

Contact: Tyrone Gore  
PO Box 1469  
Charleston, WV 25325  
304-926-1900

The City of Huntington

Contact: Sherry Lewis  
PO Box 1659  
Huntington, WV 2517  
304-696-5979

The City of Charleston

Contact: Judy King  
PO Box 2749  
Charleston, WV 25330  
304-348-8015

Kanawha County Schools

Contact: George Beckett  
3300 Pennsylvania Ave.  
Charleston, WV 25302  
304-348-6616

**Exhibit I**

**Proof of Liability Insurance**

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/11/2005

**PRODUCER**  
GRAYHAWK INS & RISK MANAGEMENT SERVICES INC  
1740 N COLLINS BLVD SUITE 200  
RICHARDSON, TX 75080  
(888) 661-3938  
XW644 882

**INSURED**  
HEALTH RESEARCH SYSTEMS INC  
529 6TH AVENUE  
HUNTINGTON, WV 25701

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.**

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: THE TRAVELERS INDEMNITY COMPANY	
INSURER B: THE CHARTER OAK FIRE INSURANCE COMPANY	
INSURER C: THE TRAVELERS INDEMNITY COMPANY OF CONNECTICUT	
INSURER D:	
INSURER E:	

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR (ADD'L) LYR (INSD)	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
C	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	660-7369B638-05	02/25/2005	02/25/2006	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$100,000 MED EXP (ANY ONE PERSON) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP ARG \$2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS  <b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO  <b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$	810-0783Y426-05	05/05/2005	02/25/2006	COMBINED SINGLE LIMIT (EA ACCIDENT) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below  OTHER				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$


DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 FOR INFORMATIONAL PURPOSES ONLY

## CERTIFICATE HOLDER

HEALTH RESEARCH SYSTEMS INC  
529 6TH AVENUE  
HUNTINGTON, WV 25701

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE 

**Exhibit II**

**Proof of Laboratory Certification**

## State List of HHS Certified Laboratories

Updated: MAY 2, 2005

Department of Health and Human Services (HHS)  
Substance Abuse and Mental Health Services Administration (SAMHSA)

**Title: Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies**

HHS notifies Federal agencies of the laboratories that currently meet the standards in Subpart C of the Mandatory Guidelines for Federal Workplace Drug Testing Programs published in the **Federal Register** on April 13, 2004 (69 FR 19644). The notice listing all currently certified laboratories is published in the **Federal Register** during the first week of each month. If a laboratory's certification is suspended or revoked, the laboratory will be omitted from the list until it regains certification under the Guidelines.

**List of HHS Certified Laboratories (by State and in Canada):**  
**Arkansas**

Little Rock  
Baptist Medical Center, Toxicology Lab  
501-202-2783

### **Arizona**

Phoenix  
Southwest Labs  
602-438-8507  
800-279-0027

### **California**

Bakersfield  
National Toxicology Labs, Inc.  
805-322-4250  
800-350-3515

Chatsworth  
Pacific Toxicology Laboratories  
800-328-6942

San Diego  
Laboratory Corporation of America Holdings  
800-882-7272

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**Kansas**

Lenexa  
Clinical Reference Lab  
800-445-6917

Overland Park  
Physicians Reference Lab  
913-339-0372  
800-821-3627

Lenexa  
Lab One, Inc.  
913-888-3927  
800-728-4064

**Louisiana**

Gretna  
Kroll Laboratory Specialists, Inc.  
504-361-8989  
800-433-3823

**Maryland**

MILITARY USE ONLY  
Ft. Meade  
Army Forensic Drug Testing Lab  
301-677-7085

**Michigan**

Lansing  
Sparrow Health System, Toxicology Testing Center  
517-364-7400

**Minnesota**

Minneapolis  
Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Lab  
612-725-2088

St. Paul  
MedTox Labs, Inc.  
800-832-3244  
651-636-7466

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**EXHIBIT III**

**MRO CREDENTIALS**

1300 Old Weisgarber Rd.  
Knoxville TN 37909

Phone 865-584-2146  
Fax 865-588-8810

# Jeffrey A. McMichael MD

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**Experience**

January 2001 – present Partnering Physician, FamilyCare Specialists,  
1300 Old Weisgarber Rd, Knoxville TN 37909

October 1997 - December 2000. Physician, FamilyCare Specialists,  
1300 Old Weisgarber Rd, Knoxville TN 37909 865/584-2146

July 1993 – October 1997 Partnering Physician, Ft Sanders West Family  
Practice, 220 Ft Sanders West Blvd, Knoxville TN 37922

**Education**

June 1990 - May 1993 Florida Hospital, Orlando, FL, Family Practice  
Residency

May 1990 ETSU, James Quillen College of Medicine, MD

1986, University of Tennessee, Knoxville, BA

**Professional  
Societies**

American Academy of Family Physicians

American Medical Association

**Board  
Certification**

American Board of Family Practice

**Hospital  
Privileges**

Ft Sanders Regional Medical Center, Knoxville TN



1300 Old Weisgarber Rd.  
Knoxville TN 37909

Phone 865-584-2146  
Fax 865-588-8810

# James Stacy Hicks MD

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**Experience** April 1994 – present; FamilyCare Specialists, Knoxville TN; partnering physician  
August 1992 – April 1994; Village Oaks Family Practice, 1721-02 Ebenezer Rd Ste 115, Rock Hill SC, 803/324-7616

**Education** August 1988 - August 1990; Naval Hospital Charleston, Charleston SC, Family Practice Residency  
US Naval Construction Battalion One – August 1986 - 1988  
June 1985 – July 1986; Naval Hospital Charleston, Charleston SC, Family Practice Internship  
June 1981 - May 1985; Medical University of South Carolina, Charleston SC, MD  
August 1977 - May 1981; Wake Forrest University, BA (Cum Laude)

**Board Certification** American Board of Family Practice

**Hospital Privileges** Ft Sanders Regional Medical Center-Active

**Military** Active:  
September 1990 – August 1992; Naval Hospital Guam  
August 1988 – August 1990; Naval Hospital Charleston  
August 1986 – August 1988 – General Medical Officer; United States Naval Mobile Construction Battalion One  
June 1985 – July 1986; Naval Hospital Charleston  
Reserve:  
August 1981 – May 1985 –Student; Health Professions Scholarship Program

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1300 Old Weisgarber Rd.  
Knoxville TN 37909

Phone 865-584-2146  
Fax 865-588-8810

# Charles L Robinson DO

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## Education

1982 – Ohio University College of Osteopathic Medicine, Athens OH

1982 - 1983 – Youngstown Osteopathic, Youngstown OH, Family Practice Internship

1983 – 1984 – Doctors Hospital, Columbus OH, General Practice Residency

## Experience

August 1988 – present: FamilyCare Specialists; partnering physician.

April 1987 – August 1988: Chief of Staff, Charlton Memorial Hospital, Folkston, Georgia

September 1985 - 1988: Brantley County Medical Examiner, Folkston, Georgia. Performed most exams at the funeral homes.

August 1984 – July 1988: General/Family Practice, Folkston, Georgia – my practice encompassed all aspects of general and family practice with the exception of no obstetrics. I also was the team physician for two area high school athletic programs.

## Teaching Experience

East Tennessee State University – Quillen School of Medicine, Johnson City TN, part-time faculty, 1996 to present

Ohio University College of Osteopathic Medicine, resident volunteer faculty, 1983 – 1984

Hocking Technical College, Nelsonville OH, part-time faculty instructor, 11/78 – 5/78

University of Akron, Akron OH, Assistant Professor, 1977 – 1978

University of Akron, Akron OH, Biology teaching assistant, 1975 – 1977

## Hospital Privileges

Fort Sanders Regional Medical Center

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1300 Old Weisgarber Rd  
Knoxville TN 37909

Phone 865-584-2146  
Fax 865-588-8810

# Jack Howard Tarr MD

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## Work History

Jan 1986 – Present: Private Practice, FamilyCare Specialists;  
Knoxville TN; partnering physician

June 1983 - Dec 1985 Private practice, Whittier CA

Jan 1983 – June 1983 University of Tennessee Memphis, Associate, Family  
Practice Clinical Faculty

## Education

Jun 1972 Carson Newman College; BS

Aug 1972 – Dec 1975 University of Tennessee College of Health Sciences,  
Memphis TN; MD

Dec 1975 - Jan 1978 Naval Regional Medical Center, Jacksonville FL,  
Residency in Family Practice

Jan 1978 – Dec 1982 NRMC Millington TN; Staff Physician

## Board Certification

American Board of Family Practice

## Hospital Privileges

Ft. Sanders Regional Medical Center

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# MROCC

## Medical Review Officer Certification Council

Certifies that

**Jack H. Tarr, M.D.**

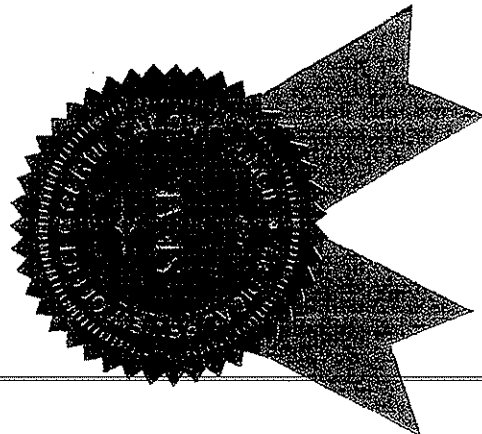
has successfully met all eligibility and examination criteria  
and is hereby designated a

**Certified Medical Review Officer**

This certification is valid for six years.

Effective this 18th day of October 20 05

Expires on 18th day of October 20 11



05-06673

*Elizabeth Quach MD Benjamin Arson MD*  
Chairman, Board of Directors      Secretary, Board of Directors

# AAMRO

## American Association of Medical Review Officers



**THIS IS TO CERTIFY THAT**

*Charles L. Robinson, D.O.*

*having presented to the Executive Board of the American Association of Medical Review Officers satisfactory evidence of prescribed qualifications and having passed an approved examination before the*

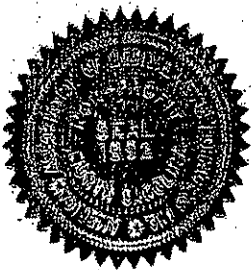
### American Association of Medical Review Officers

*in accordance with national standards of competency and expertise established for Medical Review Officers, is hereby accredited and designated as a*

### Certified Medical Review Officer

*and by order of the AAMRO Board has been entered as such in the AAMRO Registry of Certified Medical Review Officers*

*Given and dated this third day of March, 2005*



*Thomas J. Hunt* Chairman

*Countersigned and sealed with the Seal of the American Association of Medical Review Officers the day and date above written*

*Cindy Ferrell* Corporate Secretary

Certificate Number 050303200

# AAMRO

## American Association of Medical Review Officers



**THIS IS TO CERTIFY THAT**

**Jeffery McMichael, M.D.**

having presented to the Executive Board of the American Association of Medical Review Officers satisfactory evidence of prescribed qualifications and having passed an approved examination before the

**American Association of Medical Review Officers**

in accordance with national standards of competency and expertise established for Medical Review Officers, is hereby accredited and designated as a

**Certified Medical Review Officer**

and by order of the AAMRO Board has been entered as such in the AAMRO Registry of Certified Medical Review Officers

Given and dated this 23rd day of October, 2005



Theresa J. Hunt, MD Chairman

Countersigned and sealed with the Seal of the American Association of Medical Review Officers the day and date above written

Cindy Ferrell

Corporate Secretary

Certificate Number 051023106

# AAMRO

## American Association of Medical Review Officers



**THIS IS TO CERTIFY THAT**

**J. Stacy Hicks, M.D.**

*having presented to the Executive Board of the American Association of Medical Review Officers satisfactory evidence of prescribed qualifications and having passed an approved examination before the*

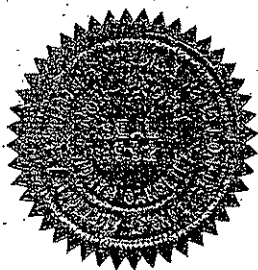
**American Association of Medical Review Officers**

*in accordance with national standards of competency and expertise established for Medical Review Officers, is hereby accredited and designated as a*

**Certified Medical Review Officer**

*and by order of the AAMRO Board has been entered as such in the*  
**AAMRO Registry of Certified Medical Review Officers**

*Given and dated this* 23<sup>rd</sup> *day of* October, 2005



*Theresa J. Hicks* Chairman

*Countersigned and sealed with the Seal of the American Association of Medical Review Officers the day and date above written*

*Cindy Ferrell* Corporate Secretary

Certificate Number 051023244

DPS0704 - OPEN-END CONTRACT FOR RANDOM DRUG TESTING - BID OPENING DATE: 10/5/2006, 1:30 PM

Item#	Description	Per Test / Hour	Cost Per Test / Hour	Estimated Usage	Extended Bid Price
1	Standard Test (Agency Facility)	Test	\$ 55.00	240	\$ 13,200 <sup>00</sup>
2	Standard Test (Vendor's Facility)	Test	\$ 46.00	40	\$ 1,840 <sup>00</sup>
3	Barbiturates	Test	\$ 46.00	10	\$ 460 <sup>90</sup>
4	PCP	Test	\$ 46.00	10	\$ 460 <sup>90</sup>
5	Steroids	Test	\$ 75.00	20	\$ 1,500 <sup>00</sup>
6	Waiting Time	Hour	\$ 0	4	\$ 0
7	Collector Testimony	Hour	\$ 0	4	\$ 0
8	Lab Personnel Testimony	Hour	\$ 0	4	\$ 0
9	Third Party Administrator Testimony	Hour	\$ 0	4	\$ 0
10	Medical Review Officer Testimony	Hour	\$ 0	4	\$ 0
11	Collector Deposition	Hour	\$ 0	4	\$ 0
12	Lab Personnel Deposition	Hour	\$ 0	4	\$ 0
13	Third Party Administrator Deposition	Hour	\$ 0	4	\$ 0
14	Medical Review Officer Deposition	Hour	\$ 0	4	\$ 0
15	Collector Travel	Hour	\$ 0	4	\$ 0
16	Lab Personnel Travel	Hour	\$ 0	4	\$ 0
17	Third Party Administrator Travel	Hour	\$ 0	4	\$ 0
18	Medical Review Officer Travel	Hour	\$ 0	4	\$ 0
				<b>Total</b>	\$ 17,460

**Bidder Information:**

Name: Health Research Systems, Inc.  
 Company name: Randy Pauley  
 Address: 529 6th ave  
Huntington, WV 25701  
 Phone#: 304-529-4453  
 Fax#: 304-529-4459  
 Email Address: \_\_\_\_\_