



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

EHP11162

PAGE

1

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER  
304-558-0067

\*311093429 877-208-7769  
OXFORD IMMUNOTEC INC  
2 MOUNT ROYAL AVE STE 100  
MARLBOROUGH MA 01752-1976

HEALTH AND HUMAN RESOURCES  
BPH - TUBERCULOSIS CONTROL  
350 CAPITOL STREET, ROOM 125  
CHARLESTON, WV  
25301-3715 304-558-3669

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
04/28/2011				

BID OPENING DATE:

06/14/2011

BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	800	EA		948-55	\$49.00	\$39,200.00
TESTING SERVICES FOR INTERFERON GAMMA RELEASE ASSAY						
REQUEST FOR QUOTATIONS						
TO PROVIDE AN OPEN END CONTRACT TO PERFORM INTERFERON GAMMA RELEASE ASSAY (AGRA) BLOOD TESTING SERVICES TO SCREEN FOR TUBERCULOSIS INFECTION/TUBERCULOSIS DISEASE STATEWIDE, PER THE ATTACHED SPECIFICATIONS.						
CONTRACT SHALL BEGIN UPON AWARD AND CONTINUE FOR A PERIOD OF ONE YEAR, WITH THE OPTION OF TWO (2), ONE (1) YEAR PERIODS.						
EXHIBIT 3						
LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON AWARD..... 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.						
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.						
RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR,						

RECEIVED

2011 MAY 18 AM 10:00

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE

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



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<p>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 FOR DELIVERY DURING THE TERM OF THE CONTRACT, WHETHER MORE OR LESS THAN THE QUANTITIES SHOWN.</p> <p>ORDERING PROCEDURE: SPENDING UNIT(S) SHALL ISSUE A WRITTEN STATE CONTRACT ORDER (FORM NUMBER WV-39) TO THE VENDOR FOR COMMODITIES COVERED BY THIS CONTRACT. THE ORIGINAL COPY OF THE WV-39 SHALL BE MAILED TO THE VENDOR AS AUTHORIZATION FOR SHIPMENT, A SECOND COPY MAILED TO THE PURCHASING DIVISION, AND A THIRD COPY RETAINED BY THE SPENDING UNIT.</p>						

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<p>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THE STATE MAY DEEM THE CONTRACT NULL AND VOID, AND TERMINATE SUCH CONTRACT 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. 05/26/2009</p> <p>INQUIRIES:</p> <p>WRITTEN QUESTIONS SHALL BE ACCEPTED THROUGH CLOSE OF BUSINESS ON 05/23/2011. QUESTIONS MAY BE SENT VIA USPS, FAX, COURIER OR E-MAIL. IN ORDER TO ASSURE NO VENDOR RECEIVES AN UNFAIR ADVANTAGE, NO SUBSTANTIVE QUESTIONS WILL BE ANSWERED ORALLY. IF POSSIBLE, E-MAIL QUESTIONS ARE PREFERRED. ADDRESS INQUIRIES TO:</p> <p>ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25311</p> <p>FAX: 304-558-4115 E-MAIL: ROBERTA.A.WAGNER@WV.GOV</p> <p>EXHIBIT 4</p> <p>LOCAL GOVERNMENT BODIES: UNLESS THE VENDOR INDICATES</p>						
SEE REVERSE SIDE FOR TERMS AND CONDITIONS						
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<p>ON THE BID HIS REFUSAL TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO COUNTY, SCHOOL, MUNICIPAL AND OTHER LOCAL GOVERNMENT BODIES, THE BID SHALL EXTEND TO POLITICAL SUBDIVISIONS OF THE STATE OF WEST VIRGINIA. IF THE VENDOR DOES NOT WISH TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO ALL POLITICAL SUBDIVISIONS OF THE STATE, THE VENDOR MUST CLEARLY INDICATE SUCH REFUSAL IN HIS BID. SUCH REFUSAL SHALL NOT PREJUDICE THE AWARD OF THIS CONTRACT IN ANY MANNER.</p> <p>REV. 3/88</p> <p>PURCHASING CARD ACCEPTANCE: THE STATE OF WEST VIRGINIA CURRENTLY UTILIZES A VISA PURCHASING CARD PROGRAM WHICH IS ISSUED THROUGH A BANK. THE SUCCESSFUL VENDOR MUST ACCEPT THE STATE OF WEST VIRGINIA VISA PURCHASING CARD FOR PAYMENT OF ALL ORDERS PLACED BY ANY STATE AGENCY AS A CONDITION OF AWARD.</p> <p>REV 07/16/2007</p> <p>VENDOR PREFERENCE CERTIFICATE</p> <p>THIS TEAM EXHIBIT HAS BEEN REPLACED BY THE ONLINE VERSION WHICH IS AVAILABLE HERE: <a href="http://www.state.wv.us/admin/purchase/vrc/venpref.pdf">HTTP://WWW.STATE.WV.US/ADMIN/PURCHASE/VRC/VENPREF.PDF</a></p> <p>NOTICE</p> <p>A SIGNED BID MUST BE SUBMITTED TO:</p> <p>DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST</p>						
SEE REVERSE SIDE FOR TERMS AND CONDITIONS						
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CHARLESTON, WV 25305-0130						
PLEASE NOTE: A CONVENIENCE COPY WOULD BE APPRECIATED.						
THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:						
SEALED BID						
BUYER:-----RW/FILE 22-----						
RFQ. NO.:-----EHP11162-----						
BID OPENING DATE:-----06/14/2011-----						
BID OPENING TIME:-----1:30 PM-----						
PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID:						
----- (508) 481 - 4672 -----						
CONTACT PERSON (PLEASE PRINT CLEARLY):						
----- Michael Dresner -----						

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**OPEN END CONTRACT**

**SCOPE**

The West Virginia Office of Epidemiology & Prevention Services, Division of Tuberculosis Elimination is seeking a qualified vendor to perform Interferon Gamma Release Assay (IGRA) blood testing services to screen for tuberculosis (TB) infection/TB disease statewide.

The contract shall extend for a period of one (1) year, with renewal provisions for two (2) one (1) year periods.

Contract will be awarded based on the lowest "grand total" cost meeting specifications.

All terms and conditions in the written specifications are absolute and cannot be waived. Mandatory terms are indicated by the use of the words shall, will, must, maximum or minimum.

IGRA blood testing must not boost responses measured by subsequent tests (boosting).

IGRA blood testing must not cross react with Bacillus Calmette-Guerin (BCG) vaccine.

Sample collection must be completed at the local health department. No special lab equipment will be required by local health department for collection; i.e., centrifuge, incubator.

Cost sheet must be completed. Bidders must complete the unit price and total cost. Award will be made to the lowest total cost, meeting specification. NOTE: As this is an open end contract, quantities listed are estimates only. It is understood that actual needs of the Agency will be met, whether they be greater than or less than estimates.

**Services Under this Contract**

1. Lab will provide in vitro blood testing.
2. Lab must use standard collection tubes that are not specialized.
3. Lab must provide to the health departments all blood collection supplies; i.e., tubes, packaging, materials, mailers needed to perform tests.

## **EHP11162 - Interferon Gamma Release Assay (IGRA)**

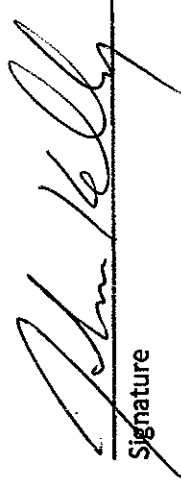
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4. Lab must report both qualitative interpretation and quantitative assay measurements to determine result interpretations; i.e., positive, negative.
5. Lab must report IGRA blood testing results to the local health departments within 36-72 hours of submission of specimen.
6. Bid must include supplies, shipping and handling and courier service. Courier service will pick up specimens at the local health departments. A list of the county health departments is attached.
7. Lab must provide training at no cost to local health department personnel for proper specimen collection, storing and shipping process.
8. Lab must be accredited by the Clinical Laboratory Improvements Act/Amendments (CLIA) and by the College of American Pathologists (CAP) to perform IGRA blood testing services. Tests must be FDA approved.

COST SHEET FOR EHP11162

Item #	Approx. Annual Usage	Description	Unit Price	Total Cost
	1 800 tests processed	Interferon Gamma Release Assay (IGRA) blood testing	\$49.00	\$39,200.00

Award will be made to vendor with the lowest overall cost who meets specifications.

 5/17/11  
Signature DATE:

Oxford Diagnostic Laboratories  
Vendor Name:



# WV COUNTY HEALTH DEPARTMENT LIST

**Barbour County Health Department**

23 Wabash Avenue  
Phillippi, West Virginia 26416

**Beckley-Raleigh Health Department**

1602 Harper Road  
Beckley, West Virginia 25801

**Berkeley County Health Department**

800 Emmett Rousch Drive  
Martinsburg, West Virginia 25401

**Boone County Health Department**

Post Office Box 209  
Madison, West Virginia 25130

**Braxton County Health Department**

495 Old Turnpike Road  
Sutton, West Virginia 26601

**Brooke County Health Department**

204 Courthouse Square  
Wellsburg, West Virginia 26070

**Cabell-Huntington Health Department**

703 7th Avenue  
Huntington, West Virginia 25701

**Clay County Health Department**

Post Office Box 36  
Clay, West Virginia 25043

**Doddridge County Health Department**

Route 2, Box 54  
West Union, West Virginia 26456

**Fayette County Health Department**

202 Church Street  
Fayetteville, West Virginia 25840

**Gilmer County Health Department**

809 Mineral Road  
Glennville, West Virginia 26351

**Grafton-Taylor Health Department**

Post Office Box 15  
Grafton, West Virginia 26354

**Grant County Health Department**

Post Office Box 608, Route 28  
Petersburg, West Virginia 26847

**Greenbrier County Health Department**

9207 Seneca Trail South  
Ronceverte, West Virginia 24970

**Hampshire County Health Department**

HC 71, Box 9  
Augusta, West Virginia 26704

**Hancock County Health Department**

Post Office Box 578  
New Cumberland, West Virginia 26047

**Hardy County Health Department**

411 Spring Avenue, Suite 101  
Moorefield, West Virginia 26836

**Harrison-Clarksburg Health Department**

330 West Main Street  
Clarksburg, West Virginia 26301

**Jackson County Health Department**

504 South Church Street  
Ripley, West Virginia 25271

**Jefferson County Health Department**

1948 Wiltshire Road, Suite 1  
Kearneysville, West Virginia 25430

**Kanawha-Charleston Health Department**

Post Office Box 927  
Charleston, West Virginia 25323

**Lewis County Health Department**

125 Court Avenue  
WESTON, West Virginia 26452

**Lincoln County Health Department**

Post Office Box 527  
Hamlin, West Virginia 25523

**Logan County Health Department**

300 Stratton Street, Room 203  
Logan, West Virginia 25601

**Marion County Health Department**

300 Second Street  
Fairmont, West Virginia 26554

**Marshall County Health Department**

Post Office Box 429  
Moundsville, West Virginia 26041

**Mason County Health Department**

216 Fifth Street  
Point Pleasant, West Virginia 25550

**McDowell County Health Department**

Post Office Box 218  
Wilcoe, West Virginia 24895

**Mercer County Health Department**

Route 2, Box 382  
Bluefield, West Virginia 24701

**Mid-Ohio Valley Health Department**

211 Sixth Street  
Parkersburg, West Virginia 26101

**Mineral County Health Department**

Route 3, Box 3045  
Keyser, West Virginia 26726

**Mingo County Health Department**

Post Office Box 1096  
Williamson, West Virginia 25661

**Monongalia County Health Department**

453 Van Voorhis Road  
Morgantown, West Virginia 26505

**Monroe County Health Department**

Post Office Box 590  
Union, West Virginia 24983

**Morgan County Health Department**

187 South Green Street, Suite 2  
Berkeley Springs, West Virginia 25411

**Nicholas County Health Department**

One Stevens Road  
Summersville, West Virginia 26651

**Pendleton County Health Department**

Post Office Box 520  
Franklin, West Virginia 26807

**Pocahontas County Health Department**

900 Tenth Avenue  
Martinton, West Virginia 24954

**Preston County Health Department**

106 West Main Street, Suite 203  
Kingwood, West Virginia 26537

**Putnam County Health Department**

1401 Hospital Drive, Suite 304  
Hurricane, West Virginia 25526

**Randolph County Health Department**

201 Henry Avenue  
Elkins, West Virginia 26241

**Summers County Health Department**

Post Office Box 898  
Hinton, West Virginia 25951

**Tucker County Health Department**

206 1/2 Third Street  
Parsons, West Virginia 26287

**Upshur-Buckhannon Health Department**

15 North Locust Street  
Buckhannon, West Virginia 26201

**Wayne County Health Department**

Post Office Box 368  
Wayne, West Virginia 25570

**Webster County Health Department**

112 Bell Street, Suite C  
Webster Springs, West Virginia 26288

**Wetzel-Tyler Health Department**

425 South Fourth Avenue  
Paden City, West Virginia 26159

**Wheeling-Ohio Health Department**

1500 Chapline Street  
Wheeling, West Virginia 26003

**Wyoming County Health Department**

Post Office Box 1679  
Pineville, West Virginia 248741679

Rev. 09/08

## State of West Virginia

# VENDOR PREFERENCE CERTIFICATE

Certification and application\* is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1. **Application is made for 2.5% resident vendor preference for the reason checked:**  
 \_\_\_\_\_ 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,  
 \_\_\_\_\_ Bidder is a partnership, association or corporation resident vendor and 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 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,  
 \_\_\_\_\_ Bidder is a 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; or,
2. **Application is made for 2.5% resident vendor preference for the reason checked:**  
 \_\_\_\_\_ 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; or,
3. **Application is made for 2.5% resident vendor preference for the reason checked:**  
 \_\_\_\_\_ 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 Bidder's affiliate's or 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; or,
4. **Application is made for 5% resident vendor preference for the reason checked:**  
 \_\_\_\_\_ Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**  
 \_\_\_\_\_ Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**  
 \_\_\_\_\_ Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.

Bidder understands if the Secretary of 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) reject the bid; 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.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of 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.

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.

Bidder: Oxford Diagnostic Laboratories

Signed: \_\_\_\_\_

Date: 5/17/11

Title: OPERATIONS DIRECTOR

\*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

RFQ No. \_\_\_\_\_

STATE OF WEST VIRGINIA  
Purchasing Division

## PURCHASING AFFIDAVIT

**West Virginia Code §5A-3-10a states:** 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 the debt owed is an amount greater than one thousand dollars in the aggregate.

**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.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "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.

**EXCEPTION:** The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this 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.

Under penalty of law for false swearing (*West Virginia Code §61-5-3*), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

**WITNESS THE FOLLOWING SIGNATURE**

Vendor's Name: Oxford Diagnostic Laboratories

Authorized Signature: John Kelly Date: 5/17/11

State of Massachusetts

County of Middlesex, to-wit:

Taken, subscribed, and sworn to before me this 17<sup>th</sup> day of May, 2011.

My Commission expires Nov 10, 2011.

**AFFIX SEAL HERE**

**NOTARY PUBLIC:** [Signature]