

**QUOTATION OF SERVICES  
DRUG AND ALCOHOL TESTING**

**FOR: West Virginia Health and Human Resources DHHR Bureau for  
Behavioral Health & Health Facilities**

**RFQ# CRFQ 0506 HHR1700000006**

**BUYER: Charles D Barnette**

**BID OPENING DATE: April 25, 2017**

**BID OPENING TIME: 1:30 pm EST**

**LOCATION: State Of West Virginia**

**Purchasing Division**

**2019 Washington Street, East**

**Charleston, WV 25305-0130**

04/25/17 10:58:07  
Purchasing Division



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

State of West Virginia  
 Request for Quotation  
 23 - Laboratory

Proc Folder: 304711

Doc Description: OPEN END CONTRACT FOR DRUG AND ALCOHOL TESTING

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-04-03	2017-04-25 13:30:00	CRFQ 0506 HHR1700000006	1

**BID RECEIVING LOCATION**

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

**VENDOR**

Vendor Name, Address and Telephone Number:

Joe Boggs & Associates, Inc.  
 1703 Woodvale Drive  
 Charleston, WV 25314

**FOR INFORMATION CONTACT THE BUYER**

Charles D Barnette  
 (304) 558-2566  
 charles.d.barnette@wv.gov

Signature X

FEIN # 55-0664639

DATE 04-24-17

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

**Pricing Page - CRFQ HHR1700000006**

Any anticipated travel must be incorporated into the vendor's fee. No travel will be reimbursed by the State and is the sole responsibility of the vendor.

Vendor must include the cost of a certified Medical Review Officer (MRO) in the per test cost.

The vendor's quotation must include bids for the following information as outlined:

<b>Service</b>	<b>Qty</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Total Price</b>
1.1 A Pre-Employment Drug Testing - Laboratory Screen	765	tests	<u>92.00</u>	<u>70,380.00</u>
1.1 B Pre-Employment Alcohol Testing	765	tests	<u>3.00</u>	<u>2,295.00</u>
1.2 A Reasonable Suspicion Drug Testing - Preliminary On-Site Screen	185	tests	<u>60.00</u>	<u>11,100.00</u>
1.2 B Reasonable Suspicion Drug Testing - Laboratory Screen	185	tests	<u>92.00</u>	<u>17,020.00</u>
1.2 C Reasonable Suspicion Alcohol Testing	185	tests	<u>4.00</u>	<u>740.00</u>
1.3 A Post-Accident Drug Testing - Preliminary On-Site Screen	2	tests	<u>60.00</u>	<u>120.00</u>
1.3 B Post-Accident Drug Testing - Laboratory Screen	2	tests	<u>92.00</u>	<u>184.00</u>
1.3 C Post-Accident Alcohol Testing	2	tests	<u>4.00</u>	<u>8.00</u>
1.4 A Return to Work Drug Testing - Laboratory Screen	25	tests	<u>92.00</u>	<u>2,300.00</u>
1.4 B Return to Work Alcohol Testing	25	tests	<u>4.00</u>	<u>100.00</u>
4.1.1.17.1 Collection Expert Testimony	10	hours	<u>10.00</u>	<u>100.00</u>
4.1.1.17.2 Laboratory Expert Testimony	10	hours	<u>10.00</u>	<u>100.00</u>
4.1.1.17.3 MRO Expert Testimony	10	hours	<u>35.00</u>	<u>350.00</u>
4.1.1.17.4 Collection Expert Testimony at Deposition	10	hours	<u>10.00</u>	<u>100.00</u>
4.1.1.17.5 Laboratory Expert Testimony at Deposition	10	hours	<u>35.00</u>	<u>350.00</u>
4.1.1.17.6 MRO Expert Testimony at Deposition	10	hours	<u>35.00</u>	<u>350.00</u>
4.1.2.8 Blind Performance Tests (One Per Quarter)	4	tests	<u>50.00</u>	<u>200.00</u>
			<b>Total Bid</b>	<b><u>105,797.00</u></b>

**CONTACT INFORMATION**

Vendor Name:

Joe Boggs & Associates, Inc.

Vendor Address:

1703 Woodvale Drive

Charleston, WV 25314

Vendor Contact Name:

Ritchie Boggs

Vendor Phone Number:

304-345-1396

Vendor Fax Number:

304-345-8907

Vendor Email Address:

raboggs@suddenlinkmail.com

24-Hr Phone Number for Callback Services:

304-345-1396

Signature of Authorized Vendor Agent:



Date: 04-24-17

**ADDITIONAL INFORMATION:**

The West Virginia Purchasing Division is soliciting bids on behalf of the Department of Health and Human Resources to establish an open-end contract for drug and alcohol testing services for select pre-employment, reasonable suspicion/cause, post-accident, and return-to-duty/follow-up, as needed and requested by its agencies, per the attached documentation.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Pre-Employment Drug Testing - Laboratory Screen	765.00000	TEST	92.00	70,380.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Pre-Employment Drug Testing - Laboratory Screening - Section 1.1.A

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Pre-Employment Alcohol Testing	765.00000	TEST	3.00	2,295.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Pre-Employment Alcohol Testing Section 1.1 B

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Reasonable Suspicion Drug Testing - On-Site Screen	185.00000	TEST	60.00	11,100.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Reasonable Suspicion Drug Testing - On-Site Screen Section 1.2 A

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Reasonable Suspicion Drug Testing - Laboratory Screen	185.00000	TEST	92.00	17,020.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Reasonable Suspicion Drug Testing - Laboratory Screen Section 1.2 B

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Reasonable Suspicion Alcohol Testing	185.00000	TEST	4.00	740.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Reasonable Suspicion Alcohol Testing Section 1.2 C

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Post-Accident Drug Testing - On-Site Screen	2.00000	TEST	60.00	120.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Post-Accident Drug Testing - On-Site Screen Section 1.3.A

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Post-Accident Drug Testing - Laboratory Screen	2.00000	TEST	92.00	184.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Post-Accident Drug Testing - Laboratory Screen Section 1.3 B

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Post-Accident Alcohol Testing	2.00000	TEST	4.00	8.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
 Post-Accident Alcohol Testing Section 1.3 C

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400  CHARLESTON WV25301  US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400  CHARLESTON WV 25301  US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Return to Work Drug Testing -Laboratory Screen	25.00000	TEST	92.00	2,300.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
 Return to Work Drug Testing - Laboratory Screen Section 1.4 A

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400  CHARLESTON WV25301  US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400  CHARLESTON WV 25301  US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
10	Return to Work Alcohol Testing	25.00000	TEST	4.00	100.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
 Return to Work Alcohol Testing Section 1.4 B

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
11	Collection Expert Testimony	10.00000	HOUR	10.00	100.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Collection Expert Testimony Section 4.1.1.17.1

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
12	Laboratory Expert Testimony	10.00000	HOUR	10.00	100.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Laboratory Expert Testimony Section 4.1.1.17.2

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
13	MRO Expert Testimony	10.00000	HOUR	35.00	350.00



Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

MRO Expert Testimony Section 4.1.1.17.3

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
14	Collection Expert Testimony at Deposition	10.00000	HOUR	10.00	100.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Collection Expert Testimony at Deposition Section 4.1.1.17.4

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
15	Laboratory Expert Testimony at Deposition	10.00000	HOUR	35.00	350.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Laboratory Expert Testimony at Deposition Section 4.1.1.17.5

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
16	MRO Expert Testimony at Deposition	10.00000	HOUR	35.00	350.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
MRO Expert Testimony at Deposition Section 4.1.1.17.6

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
17	Blind Performance Tests (One per Quarter)	4.00000	TEST	50.00	200.00

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Blind Performance Tests (One per Quarter) Section 4.1.2.8

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	Technical Question Deadline-4:00PM	2017-04-12

<b>HHR1700000006</b>	<b>Document Phase</b> <i>Draft</i>	<b>Document Description</b> OPEN END CONTRACT FOR DRUG AND ALCOHOL TESTING	<b>Page 9</b> <b>of 9</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: HHR1700000006**

**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 type="checkbox"/> Addendum No. 1            | <input type="checkbox"/> Addendum No. 6  |
| <input type="checkbox"/> Addendum No. 2            | <input type="checkbox"/> Addendum No. 7  |
| <input checked="" 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 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.

Joe Boggs & Associates, Inc.

Company



Authorized Signature

04-24-2017

Date

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

Revised 6/8/2012



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

State of West Virginia  
 Request for Quotation  
 23 - Laboratory

Proc Folder: 304711

Doc Description: Addendum 1-OPEN END CONTRACT FOR DRUG AND ALCOHOL TESTING


Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-04-17	2017-04-25 13:30:00	CRFQ 0506 HHR1700000006	2

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

**Vendor Name, Address and Telephone Number:**

**FOR INFORMATION CONTACT THE BUYER**  
 Charles D Barnette  
 (304) 558-2566  
 charles.d.barnette@wv.gov

Signature  FEIN # 55-0664639 DATE 04-24-17

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

**ADDITIONAL INFORMATION:**

Addendum 1:

1) To respond to vendor questions

No other changes.

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Pre-Employment Drug Testing - Laboratory Screen	765.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Pre-Employment Drug Testing - Laboratory Screening - Section 1.1.A

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Pre-Employment Alcohol Testing	765.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Pre-Employment Alcohol Testing Section 1.1 B

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Reasonable Suspicion Drug Testing - On-Site Screen	185.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Reasonable Suspicion Drug Testing - On-Site Screen Section 1.2 A

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Reasonable Suspicion Drug Testing - Laboratory Screen	185.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Reasonable Suspicion Drug Testing - Laboratory Screen Section 1.2 B

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Reasonable Suspicion Alcohol Testing	185.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Reasonable Suspicion Alcohol Testing Section 1.2 C

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Post-Accident Drug Testing - On-Site Screen	2.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Post-Accident Drug Testing - On-Site Screen Section 1.3.A

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Post-Accident Drug Testing - Laboratory Screen	2.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Post-Accident Drug Testing - Laboratory Screen Section 1.3 B



INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Post-Accident Alcohol Testing	2.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :  
Post-Accident Alcohol Testing Section 1.3 C

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Return to Work Drug Testing -Laboratory Screen	25.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

Extended Description :  
Return to Work Drug Testing - Laboratory Screen Section 1.4 A

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
10	Return to Work Alcohol Testing	25.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Return to Work Alcohol Testing Section 1.4 B

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
11	Collection Expert Testimony	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Collection Expert Testimony Section 4.1.1.17.1

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
12	Laboratory Expert Testimony	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Laboratory Expert Testimony Section 4.1.1.17.2

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
13	MRO Expert Testimony	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
MRO Expert Testimony Section 4.1.1.17.3

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
14	Collection Expert Testimony at Deposition	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**  
Collection Expert Testimony at Deposition Section 4.1.1.17.4

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
15	Laboratory Expert Testimony at Deposition	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Laboratory Expert Testimony at Deposition Section 4.1.1.17.5

BUYER TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
16	MRO Expert Testimony at Deposition	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

MRO Expert Testimony at Deposition Section 4.1.1.17.6

BUYER TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF HUMAN RESOURCES MGMT ONE DAVIS SQUARE, STE 400 CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
17	Blind Performance Tests (One per Quarter)	4.00000	TEST		

Comm Code	Manufacturer	Specification	Model #
85121810			

**Extended Description :**

Blind Performance Tests (One per Quarter) Section 4.1.2.8

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	Technical Question Deadline-4:00PM	2017-04-12

HHR170000006	<b>Document Phase</b> Draft	<b>Document Description</b> Addendum 1-OPEN END CONTRACT FOR DRUG AND ALCOHOL TESTING	<b>Page 9</b> <b>of 9</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

**SOLICITATION NUMBER: CRFQ HHR1700000006**  
**Addendum Number: 1**

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

**Applicable Addendum Category:**

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

**Description of Modification to Solicitation:**

1) To respond to vendor questions

No other changes.

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

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

## Attachment A

**QUESTION 1: 1.2 A- Reasonable Suspicion Drug Testing-Preliminary On-Site Screen, is this for instant test, if positive then we would ship to lab?**

**RESPONSE: YES.** If the facility/bureau chooses to use instant testing, then confirmation testing for positive results must be done at a lab. It will be up to the facility/bureau to decide whether they want to use instant testing. Or they may choose to ship the samples to the lab for full testing with no on-site instant test results.

Which option the facility/bureau chooses will be up to them.

**QUESTION 2: 1.3 A- Post-Accident Drug Testing-Preliminary On-site Screen, is this for instant test, if positive then we would ship to lab?**

**RESPONSE: Yes.** If the facility/bureau chooses to use instant testing, then confirmation testing for positive results must be done at a lab. It will be up to the facility/bureau to decide whether they want to use instant testing. Or they may choose to ship the samples to the lab for full testing with no on-site instant test results.

Which option the facility/bureau chooses will be up to them.

AGREED:

WV Dept. of Health & Human Resources  
Name of Agency: \_\_\_\_\_

Name of Associate: Joe Boggs & Associates, Inc

Signature: [Handwritten Signature]

Signature: [Handwritten Signature]

Title: President

Title: President

Date: 04/24/17

Date: 04-24-17

Form - WVBA-012004  
Amended 08.28.2013

APPROVED AS TO FORM THIS 26th  
DAY OF July 20 17  
[Handwritten Signature]  
Patrick Moroney  
Attorney General



Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. PHI not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Associate: Joe Boggs & Associates, Inc.

Name of Agency: WV Dept. of Health & Human Resources

Describe the PHI (do not include any actual PHI). If not applicable, please indicate the same.

All (types of PHI listed on App. A) in electronic, verbal or any other form, including but not limited to: To the minimum extent necessary, the services contained within this agreement involving the transmission of protected health information required for the appropriate oversight and administration of health care services and may include, but is not limited to, data and information related to: treatment data, beneficiary eligibility, medical records, and/or billing information, in paper, electronic, or any other form.

# 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 Vendor Preference, if applicable.

1.  **Application is made for 2.5% 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;  
 Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; **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% 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% vendor preference for the reason checked:**  
 Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; **or,**
4.  **Application is made for 5% 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% 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% 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.
7.  **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.**  
 Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

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) rescind the contract or purchase order; 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.

**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: Joe Boggs & Associates, Inc.

Signed: 

Date: 04-24-17

Title: President

STATE OF WEST VIRGINIA  
Purchasing Division

**PURCHASING AFFIDAVIT**

**MANDATE:** 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 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: Joe Boggs & Associates, Inc.

Authorized Signature: [Signature] Date: 04-24-17

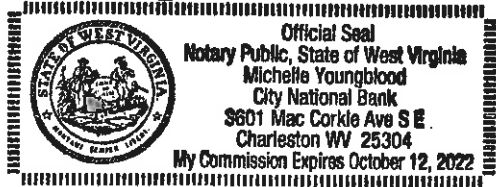
State of West Virginia

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 24<sup>th</sup> day of April, 2017.

My Commission expires October 12, 2022

**AFFIX SEAL HERE**



**NOTARY PUBLIC**

[Signature]  
*Purchasing Affidavit (Revised 08/01/2015)*