



COMMONWEALTH OF VIRGINIA  
**County of Henrico**

DEPARTMENT OF FINANCE  
Oscar Knott, CPP, CPPO, VCO  
Purchasing Director

**RFP #22-2269-1KMW**  
**Alcohol & Drug Testing Services**  
**Questions and Answers**  
**January 26, 2022**

**Q1. Who is the incumbent contractor? Is the contract up for re-solicitation?**

A1. The current contractor is Averhealth, and the contract is up for re-solicitation.

**Q2. Who is responsible for the payment of testing? Does the County cover the cost or does the program participant pay for the testing?**

A2. Both. Probation clients pay a small fee for testing which reduces the amount that the County must pay for testing. For example, if testing is \$10 and the probationer pay \$5, then the County is only billed for the remaining \$5. Pretrial and Drug Court clients do not pay for testing.

**Q3. If the cost is covered by the program participant, does the annual spending by the County represent only the costs being charged to the County such as training, case management system, etc.?**

A3. See A2.

**Q4. What is the County being invoiced for on this contract?**

A4. Drug testing- see A2.

**Q5. How many staff members currently work across all shifts of the Patient Service Center?**

A5. Four (4).

**Q6. What are the current forms of payment being accepted at the Patient Service Center?**

A6. Cash, check and money orders.

**Q7. How much are donors currently paying for each test?**

A7. \$5

**Q8. On average, how many training sessions have been completed over the last three years?**

A8. We have not had any training sessions over the past three years, but would like for this to be an option, if needed.

**Q9. Which lab is currently providing support to this contract?**

A9. The current company uses their own lab.

**Q10. What is the current pricing?**

A10. \$9.50 per sample.

**Q11. Is the current contract available to view? If so, how may interested offerors obtain a copy.**

A11. Yes, please email Kennedy Williams at [wil203@henrico.us](mailto:wil203@henrico.us).

**Q12. Will any other County agencies be utilizing this contract?**

A12. No.

**Q13. Of the average 1,000 specimens collected each month from the Drug Court & Community Corrections participants combined, how many are: Urine, Oral Fluid, Hair, Blood and Transdermal?**

A13. Currently, we only use urine and oral. Last year the contractor collected 40 oral and 7,346 urine samples.

**Q14. Will the County please provide an opportunity for offerors to submit additional clarification questions after the County has responded to offerors' initial questions, in case offerors require clarification of the County's responses?**

A14. No, Offerors can list assumptions within their proposal response.

**Q15. What is the anticipated start date for the contracted services?**

A15. May 1, 2022.

**Q16. What is the positivity rate of the specimens? That is, out of the total number of specimens screened, how many are presumptively positive and require a confirmation test for at least one drug?**

A16. The County had approximately 70 confirmations conducted last year.

**Q17. Approximately how many instances of testimony have been required in the past year?**

A17. One (1).

**Q18. Approximately how many offeror provided collection locations are preferred under this RFP?**

A18. 1 location is preferred.

**Q19. Approximately how many patient service centers will the offeror be expected to staff within the County locations?**

A19. One (1).

**Q20. Approximately what portion of the samples will be collected for each option in the standard 5 drug with EtG panel: No sample collections, sample collection in county facility and sample collection in provider facility?**

A20. Sample collected in County facility 80%; Sample collection in provider facility 0%; No sample collection 20%.

**Q21. The costs for testing for specialty drugs can vary, for both screening and confirmation. May the offeror adjust the pricing table to reflect these varying charges?**

A21. Yes.

**Q22. In Section II. F, "Run all positive immunoassay screens a second time with a new aliquot of the specimen prior to reporting the positive specimen." Please clarify if this line item is referring to a sample to be screened twice or if this is meant to indicate the second aliquot of the sample is to be run by LC-MS/MS or GC/MS.**

A22. This line item refers to the sample being screened twice.

**Q23. If the offeror is able to provide lower confirmation cut offs and lower limits of quantitation than are listed on Table 1 in the RFP scope, would this be acceptable to the County?**

A23. Yes, it will be open for discussion.

**Q24. In Section II. F, “Report the screen results by the completion of the next business day following specimen collection.” Is reporting of results within 24 hours of receipt at the lab acceptable?**

A24. Yes.

**Q25. In Section II. F, “Operate a laboratory that is certified by the Department of Health and Human Services (DHHS), Clinical Laboratory Improvements Act (CLIA) and the College of American Pathologists - Forensic Drug Testing (CAP-FDT)”. Can the County confirm that the offeror must have all three of these certifications? Or is just one of these certifications acceptable?**

A25. All three certifications are required.

**Q26. Attachment F has a line for Standard Confirmation Test on the Pricing Sheet, confirmation costs typically vary by matrix (sample type) and testing type. Is it acceptable for offerors to add lines for the different confirmation prices?**

A26. Yes.

**Q27. For line item “Participation in Court Staff Sessions” on Attachment F, can the County please describe what is the expectation for this participation and how often this service will be utilized?**

A27. The County is asking the offeror to participate in court sessions as needed. We do not have a definite number for how often this service is utilized, it is on a case-by-case basis.

**Q28. May the offeror list NO BID for “BAC Only” in the pricing worksheet?**

A28. Yes.

**Q29. Please describe how the current donor co-pay operates today? What percentage of the co-pay is the donor's responsibility?**

A29. For drug court and pretrial, the program pays the fee. For probation, donors pay \$5 toward drug testing fees.

**Q30. The collection services of transdermal patches typically require specialized testing and pricing. May the offeror add a line item to describe transdermal application and collection pricing?**

A30. See Attachment F, there is already a line item for this testing.

**Q31. Could the County provide an example or sample of the newsletter you're currently receiving or anticipate from the Successful Offeror?**

A31. Yes, please see attached. (Exhibit A)

**Q32. There is no line item for blood testing within the pricing worksheet. Should the offeror add a line item to include blood pricing?**

A32. We do not need pricing for blood testing.

**Q33. According to Table 1, Buprenorphine lists a confirmation cut-off of 50/ng/mL. Is this a mistake/typo, and if so, what should the confirmation cut-off be?**

A33. No, this is the cut-off.

[REDACTED]

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It may be a new year but, sadly, the heartbreak continues.

Over 815,000 U.S. lives were lost to COVID-19 through the end of 2021. At the same time, another menace continued unabated – substance use and resulting drug overdoses.

Tragically, more than 100,000 people died of overdoses during a 12-month period ending in April 2021, up from 56,064 the year before, according to the Centers for Disease Control. [\[Learn More\]](#)

**Free Webinar Featuring Jermaine Galloway**

**High in Plain Sight:  
Current Drug Culture, Trends, and Identifiers**

**January 18, 2022 at 2:00 p.m. EST**

**Presented by Jermaine Galloway, Tall Cop**



This workshop will provide attendees with the ability, knowledge and confidence to help prevent and identify individuals who are abusing drugs and / or alcohol. Attendees will also be taught the strategies and different terms that are consistent with alcohol & drug abuse. There are several identifiers, logos and terms that are commonly related to drug (illegal and over the counter) and alcohol abuse, marijuana abuse, and drug concealment on school, home, and work property. These items, along with much more, will be discussed.

**Attendees of the High in Plain Sight webinar will be able to:**

- Quickly identify alcohol and drug use and abuse indicators of possible at-risk individuals, through products, stash compartments, clothing brands, lingo, music lyrics, etc.
- Recognize the current drug culture at first observation or interview, including Delta 8 and 10
- Identify concealment methods for alcohol and drugs in the classroom or workplace, including vaping
- Provide education for improved policy and procedures regarding current substance use disorder prevention and intervention



- Recognize area specific alcohol and drug abuse information and content in relation to trends, culture and identifiers

**Register Now!**

### Trainer Info

Tall Cop Says Stop is a national & international trainer who has trained over 500,000 people. Learn more: [www.tallcopsaysstop.com](http://www.tallcopsaysstop.com)



## Upcoming Conferences

### Averhealth is a Proud Corporate Member of APPA

We hope to see you in Atlanta for the APPA 2022 Winter Training Institute!

Come by the Averhealth booth (#115) to meet our team and to learn more about how you can partner with us for your substance use monitoring services.



## Industry News



## **Department of Justice Awards More Than \$300 Million to Fight Opioid and Stimulant Crisis and to Address Substance Use Disorders**

The Department of Justice’s Office of Justice Programs (OJP) today announced grant awards totaling more than \$300 million to help combat America’s substance use crisis, which has worsened during the coronavirus pandemic.

“Against the backdrop of the COVID-19 pandemic, the nation is experiencing a precipitous rise in opioid and stimulant misuse and overdoses,” said Attorney General Merrick B. Garland. “The Justice Department is committed to supporting programs aimed at addressing the substance use crisis that is devastating communities across the nation.”

[\[Learn More\]](#)



## **National Suicide Prevention Lifeline to Become a Three-digit Number**

The Substance Abuse and Mental Health Services Administration is helping to transition the National Suicide Prevention Lifeline to a three-digit number – 988.

According to a press release, Congress designated the updated dialing code in 2020 and the Department of Health and Human Services, through SAMHSA, is investing \$282 million for the transition. That funding comes from the American Rescue Plan Act of 2021 and the Biden administration's fiscal year 2022 budget.

The 988 number is scheduled to be available for calling, texting or chatting nationwide beginning in July. [\[Learn More\]](#)

**Let's Connect**

We want to connect with you on social media! Did you know Averhealth has a Facebook and LinkedIn account? By following our pages, you can make sure you never miss important Averhealth information again!

Click the icons below to follow us!



## Partner with Averhealth!

For more information on how you can partner with Averhealth for all of your testing and collections, please reach out to [sales@averhealth.com](mailto:sales@averhealth.com).

## Need a resource?

SAMHSA National Helpline: 1-800-662-HELP (4357) open 24/7

National Suicide Prevention Lifeline: 1-800-273-TALK (8255) open 24/7

CSG: [Creating a Relapse Prevention Plan](#)

[One Choice Prevention](#)

Averhealth, 2916 W. Marshall Street, Suite A, Richmond, VA 23230, 866.680.3106

[Unsubscribe](#)