



*Delaware Health  
And Social Services*

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**DIVISION OF MANAGEMENT SERVICES**

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PROCUREMENT

DATE: APRIL 18, 2008

PSC#816

LABORATORY SERVICES

FOR

DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH

Date Due: MAY 30, 2008  
11:00 AM

ADDENDUM # 1

**PLEASE NOTE: THE DUE DATE HAS BEEN CHANGED TO  
MAY 30, 2008 11:00AM DUE TO  
THE DELAY IN DISTRIBUTING THE  
QUESTIONS/ANSWERS**

THE ATTACHED SHEETS HEREBY BECOME A PART OF THE  
ABOVE MENTIONED BID.

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## Questions and Answers

1. What is the current price of a drug test?  
\$6.00 FOR Screen 7 and \$7.00 for Screen 10
2. Who is the current laboratory?  
Redwood Toxicology is the drug screen vendor  
Labcorp is the vendor for the Delaware Psychiatric Center  
Labcorp and Quest Diagnostics provide services for the  
Community Mental Health Clinics
3. How many positive drug tests are there per month/year?  
Unknown
4. Who is the current courier provider?  
DHL is contracted by Redwood Toxicology
5. What certification is required?  
Current lab uses NIDA cut-offs for determining positive from  
negative - Lab is in compliance with regulations governing  
clinical laboratories as mandated by the California State  
Department of Health and CLIA '88
6. On page 21 and 22 there is a list of clinical tests that  
pricing is being requested for in addition to the urine drug  
screen panels, however there is no mention of the predicted  
volume of these tests. Can you provide an estimate of the  
frequency of the various tests listed?  
We do not have any predictions on volume as there has never  
been a consolidated contract to provide services throughout  
our agencies.
7. Can you provide a general percentage or annual number of  
specimens tested in the last year that were positive  
utilizing either custom drug panel (i.e., requiring  
confirmation?).  
Unknown
8. Can a vendor substitute a more sensitive method than TLC for  
confirmatory testing?  
The vendor can substitute a more sensitive method than TLC  
for confirmatory providing they give information on the  
method and show validity and how it will impact cost factor
9. What storage conditions (refrigerated, frozen, etc) are  
required for the positive specimens which must be stored for  
a minimum of three months at the testing facility?  
Refrigeration for a minimum of 3 months
10. On page 9 of the request, there is an indication that upon  
client's request, laboratories will be required to perform  
additional testing to reconfirm any positive result using  
GC/MS. Is pricing for this to be provided by the vendor  
separate from the custom panels or inclusive in the custom  
panel testing? Currently how many GC/MS tests are requested  
annually or predicted to be requested annually?  
Additional testing to reconfirm any positives using GC/MS  
price should be separate (we have the consumer pay in  
advance for additional testing)

11. Is the urine screening testing only rfp? As there is some confusion which needs to be cleared. On page 7 you mention anticipated volume to be 6,000 from 4 community mental health centers and 38 from Delaware Psychiatric Center which adds up to 44,000 tests per year while on npage 8 you mention 25,000 + 16,000=41,000 urine test panels. You also mention on page 7 that we need to provide phlebotomist in certain conditions. So is the 44,000 volume is the blood testing or urine panels. If these are blood testing samples than are these 44,000 patients' samples with more than one test requested or are these 44,000 tests in which case which tests are those? One page 19 and 20 you have given 10 locations from where the urine screen samples will be picked up while earlier in the rfp you mention only 4 locations.

No, this is a consolidated drug testing and routine laboratory testing rfp. We have multiple agencies in our Division and we are issuing this rfp for all of the agencies to use. The numbers in the rfp reflect the separate agencies. Community Mental Health Centers 6,000 would be for routine labs, Delaware Psychiatric Center, 38,000 would be routine labs, and we are anticipating 44,000 urine drug tests.

12. Also, you have asked pricing for some tests on page 20 and 21 without giving any volume. Please provide the volume for these tests.

We do not have volumes of the individual tests available to us as there are multiple lab vendors currently providing the service.

13. Who is the current contract and what is the last date of existing contract and award amount for the same.

We do not have contracts at this time. They expired during the preparation of this RFP. The award amount of those contracts would not be useful here as this will consolidate both routine labs and drug screens for the first time.

14. Page 9 of the contract states that positive results should be confirmed by (TLC) thin layer chromatography. This technology is outdated is not used by very many agencies. The industry practice is to have an initial screening using Enzyme Multiple Immunoassay (EMIT) technology, and follow that up with GC/MS for confirmation. Will the department accept EMIT Screening followed by GC/MS if confirmation is necessary?

Vendor may accept EMIT technology followed by GC/MC for confirmation if this is normal practice for initial screening at no additional cost to vendor prior to releasing initial test results. Detailed information on EMIT vs TLC should be included in the submitted proposals verifying it being outdated and showing EMIT as being the current technology.

15. Who is/are the current vendor(s)/laboratories providing the department with each of these services.

See Q#2

1. Drugs of Abuse screening
2. Drugs of Abuse confirmation
3. Courier Service
4. Clinical Testing
5. Shipping

16. With regard to Sexion XIV Business Proposal Requirements; Can a proposal be put in for Drugs of Abuse Services only and not the clinical portion? Will this be acceptable? We would prefer to have one vendor perform all services but we will accept proposals for separate services.
17. What is the unit price the department currently pays for urinalysis drug screening?  
See Q#1
18. What is the unit price the department currently pays for urinalysis drug confirmation?  
Information not available at this time
19. Is there a certain format the department would like us to use with regard to the price sheet?  
All formats showing test and price will be acceptable
20. Does the laboratory send electronic files for payment and for encounter/utilization data collection?  
The urine test results are forwarded to all agencies electronically thru a web based approach - all billing is sent via paper trail on a monthly basis. The new CCIS program and the required HL7 interface with the awarded lab vendor will change this process.
21. Will the laboratory be required to submit a claim form in the current electronic format? Will all client encounter data include members with dual eligibility?  
The new CCIS program and the required HL7 interface will capture client encounter data. Billings will be done in paper format and submitted monthly.
22. Is there an estimated increase for testing for 2009?  
Unknown
23. Please provide the following information to calculate the cost of phlebotomy to be included in the rate.  
Unknown
24. Is a capitation plan or will vary with utilization of services?  
This is not a capitation plan.
25. Would you consider separate laboratories for the urine drug testing and blood testing? Ex bidding on urine drug testing only?  
See Q#16
26. Also, could you provide more information regarding the type of software program required?

A26 The vendor's software must be capable of sending and receiving HL7 transactions. The only direct requirement for the Lab provider software program is the HL7 interface described in the RFP. At the present time, DHSS expects to send Admission, Discharge, Transfer (ADT) and Lab Orders to the Lab using a standard HL7 interface. DHSS expects back a Lab Order Result, also using the HL7 interface. The specific requirements are in the RFP. Following is the RFP language that describes this requirement.

"As part of this system, we are seeking to contract with one or more laboratory services providers to provide services across the various service components and have the CCIS program interface with the laboratory service provider's system to electronically transmit the lab orders and the results to and from that program. The interface requirements are listed under this RFP on our website."

The specifications are available on the website as separate documents.

**NOTE: Due to the delay in distributing the questions/answers, the submission deadline has been extended to ON OR BEFORE 11:00AM ON MAY 30, 2008. PROPOSALS RECEIVED AFTER 11:00AM WILL BE REJECTED.**