

**REQUEST FOR PROPOSAL (RFP)  
FOR DRUG TESTING AND REPORTING SERVICES FOR  
ADDICTION, PREVENTION AND RECOVERY ADMINISTRATION (APRA)  
AND URINALYSIS/PHLEBOTOMY TESTING  
RM-16-RFP-028-BY4-MA**

**PART 1 - THE SCHEDULE**

**SECTION B**

**SUPPLIES OR SERVICES AND PRICE**

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## **SECTION B: CONTRACT TYPE, SUPPLIES OR SERVICES AND PRICE/COST**

### **B.1 PURPOSE OF CONTRACT**

The Government of the District of Columbia, Office of Contracting and Procurement supporting Department of Behavioral Health (DBH) is seeking an experienced, qualified and diversified Laboratory Services Contractor to provide Specimen Collection, Laboratory Testing and Drug Screening, Phlebotomy, Urinalysis and Results Reporting Services for DBH authorized Adults and Youth in the District of Columbia. Services shall Support DBH Direct and Indirect Clinicians to meet Consumer Diagnosis, Monitoring and Treatment requirements.

### **B.2 CONTRACT TYPE**

The District contemplates a Firm Fixed Price Contract with Indefinite Quantity Deliveries based on the Firm Fixed Unit Prices as outlined in the Schedule B Pricing Sheets on pages 4 through 6 of this RFP Contract.

**B.3 PERIOD OF PERFORMANCE**

Performance under this Contract shall be in accordance with the terms and conditions set forth herein and by any modifications made there to. The Period of Performance (POP) for this Contract shall be from Date of Award for One (1) Year with Four (4) One (1) Year Option Periods as specified in Section B.

**B.4 MANDATORY SUBCONTRACTING REQUIREMENT**

An Offeror submitting a response to this Procurement in excess of Two Hundred Fifty Thousand Dollars (\$250,000.00) must submit with a notarized statement detailing any subcontracting plan as required by law. For Contracts in excess of \$250,000.00, at least 35% of the dollar volume of the Contract shall be subcontracted in accordance with the instructions outlined in Section H of this Contract.

**B.5 INSTRUCTIONS FOR RESPONDING TO THIS REQUEST FOR PROPOSALS**

Response to this Request For Proposal (RFP) Firm Fixed Price Contract requires completion of the Section A (page 1) Boxes 14, 14A, 15 and 15A; the B.5 Schedule B Pricing Sheets (pages 4 through 18); Written response to the evaluation criteria in Section M and all must submitted as instructed in Section L; Two (2) copies of the Resume of each Laboratory Staff Person who shall provide the required Direct Lab and Consumer Services and completion of all required Compliance Documents (Tax Affidavit, EEO (Affirmative Action) Document, First Source Document and Bidder's/Offeror's Certification form. Please return all completed and signed documents to the following Contract Specialist:

Meredith Alexander, Contract Specialist  
Officer of Contracting and Procurement (OCP)  
Department of Behavioral Health (DBH)  
Contracts and Procurement Services (CPS)  
64 New York Avenue, NE - Suite 280  
Washington, DC 20002  
Main Number (202) 671-3171; Direct Number (202) 671-3173  
Fax Number (202) 671-3395  
Email: [Meredith.Alexander@dc.gov](mailto:Meredith.Alexander@dc.gov)

<b>B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS</b>					
<b>BASE YEAR</b>					
<b>Contract Line Item No. (CLIN)</b>	<b>Item Description</b>	<b>Estimated Quantity of Units per Year</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Extended Price</b>
	The District of Columbia Department of Behavioral Health (DBH) is seeking the Services of Highly Qualified and Experienced Diversified Contractor to provide Phlebotomy, Specimen Collection and Transportation, Testing/Screening and Results Reporting Services as specified in Section C of this Contract.				
	<b>Mental Health Services Division (MHSD) Services Required for DBH Clinic located at 35 K Street, NE Washington, DC 20002</b>				
<b>001</b>	Phlebotomy (Blood Collection) Services to Consumers at 35 K Street, NE for Three (3) Days per week on Monday, Tuesday and Thursday from 8:30 AM through 12:30 PM	852	Hours	\$_____	\$_____
<b>002</b>	Comprehensive Metabolic Panel + Lipid Panel (Albumin, A/G ratio, Alkaline Phosphatase, ALT, AST, BUN/Creatinine Ratio, Calcium, Carbon Dioxide, Chloride, Creatinine, Globulin, Glucose, Potassium, Sodium, Total Bilirubin, Total Protein, Urea Nitrogen, Total Cholesterol, HDL Cholesterol, LDL Cholesterol, Cholesterol/HDL Ratio, Triglycerides)	1050	Each	\$_____	\$_____
<b>003</b>	Complete Blood Count with Differential	529	Each	\$_____	\$_____
<b>004</b>	Thyroid-Stimulating Hormone (TSH)	413	Each	\$_____	\$_____
<b>005</b>	Viral Hepatitis Screen (Hepatitis A Antibody IgM, Hepatitis B Surface Antigen, Hepatitis B Core Antibody IgM and Hepatitis C Antibody)	210	Each	\$_____	\$_____
<b>006</b>	hCG Urine Qualitative	54	Each	\$_____	\$_____
<b>007</b>	Hemoglobin A1C	387	Each	\$_____	\$_____
<b>008</b>	T3 Total	68	Each	\$_____	\$_____
<b>009</b>	T4 Total	48	Each	\$_____	\$_____
<b>010</b>	T4 Free	92	Each	\$_____	\$_____
<b>011</b>	Vitamin B 12	190	Each	\$_____	\$_____

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS**  
**BASE YEAR**

012	Folate	181	Each	\$_____	\$_____
013	PSA	27	Each	\$_____	\$_____
014	Amylase	21	Each	\$_____	\$_____
015	Lipase	21	Each	\$_____	\$_____
016	Prolactin	92	Each	\$_____	\$_____
017	RpR	110	Each	\$_____	\$_____
018	Haloperidol	0	Each	\$_____	\$_____
019	Carbamazepine	3	Each	\$_____	\$_____
020	Lithium	28	Each	\$_____	\$_____
021	Clozapine	7	Each	\$_____	\$_____
022	Urine 8 Panel with Alcohol	129	Each	\$_____	\$_____
023	Valproic Acid	93	Each	\$_____	\$_____
024	Ferritin	3	Each	\$_____	\$_____
025	Other Approved Tests As Needed	208	Each	\$_____	\$_____
	<b>Services Required For Addiction Prevention and Recovery Administration (APRA) Provider Network Programs and The APRA Assessment And Referral Center (ARC)</b>				
026	<p>Urine Drug Screening:  Amphetamines: 1001 ng/ml and above;  Benzodiazepines: 201 ng/ml and above;  Cocaine: 151 ng/ml and above;  Methadone: 300 ng/ml and above;  Opiates: 301 ng/ml and above;  Phencyclidine (PCP): 26 ng/ml and above;  Marijuana (THC): 51/ng/ml and above;  Buprenorphine (Suboxone) 6 ng/ml and above;  6-acetylmorphine (Heroin metabolite): 11 ng/ml and above</p> <p>Services to include:  Specimen Collection, Transportation, Laboratory Testing and Drug Screening, Results Reporting, Ancillary Non-Drug Testing Services, Technical Support and Training Services, along with As Needed, Emergency/Court-Ordered Two (2) Hour Specimen Testing and Results Reporting Services</p>	18,344	Each	\$_____	<p>\$_____</p> <p><b>NOT TO EXCEED</b></p>

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS  
BASE YEAR**

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**Print Name**

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**Title**

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**Signature**

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**Date**

<b>B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS</b>					
<b>OPTION YEAR ONE (1)</b>					
<b>Contract Line Item No. (CLIN)</b>	<b>Item Description</b>	<b>Estimated Quantity of Units per Year</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Extended Price</b>
	The District of Columbia Department of Behavioral Health (DBH) is seeking the Services of Highly Qualified and Experienced Diversified Contractor to provide Phlebotomy, Specimen Collection and Transportation, Testing/Screening and Results Reporting Services as specified in Section C of this Contract.				
	<b>Mental Health Services Division (MHSD) Services Required for DBH Clinic located at 35 K Street, NE Washington, DC 20002</b>				
<b>001</b>	Phlebotomy (Blood Collection) Services to Consumers at 35 K Street, NE for Three (3) Days per week on Monday, Tuesday and Thursday from 8:30 AM through 12:30 PM	852	Hours	\$_____	\$_____
<b>002</b>	Comprehensive Metabolic Panel + Lipid Panel (Albumin, A/G ratio, Alkaline Phosphatase, ALT, AST, BUN/Creatinine Ratio, Calcium, Carbon Dioxide, Chloride, Creatinine, Globulin, Glucose, Potassium, Sodium, Total Bilirubin, Total Protein, Urea Nitrogen, Total Cholesterol, HDL Cholesterol, LDL Cholesterol, Cholesterol/HDL Ratio, Triglycerides)	1050	Each	\$_____	\$_____
<b>003</b>	Complete Blood Count with Differential	529	Each	\$_____	\$_____
<b>004</b>	Thyroid-Stimulating Hormone (TSH)	413	Each	\$_____	\$_____
<b>005</b>	Viral Hepatitis Screen (Hepatitis A Antibody IgM, Hepatitis B Surface Antigen, Hepatitis B Core Antibody IgM and Hepatitis C Antibody)	210	Each	\$_____	\$_____
<b>006</b>	hCG Urine Qualitative	54	Each	\$_____	\$_____
<b>007</b>	Hemoglobin A1C	387	Each	\$_____	\$_____
<b>008</b>	T3 Total	68	Each	\$_____	\$_____
<b>009</b>	T4 Total	48	Each	\$_____	\$_____
<b>010</b>	T4 Free	92	Each	\$_____	\$_____
<b>011</b>	Vitamin B 12	190	Each	\$_____	\$_____

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS**

**OPTION YEAR ONE (1)**

012	Folate	181	Each	\$_____	\$_____
013	PSA	27	Each	\$_____	\$_____
014	Amylase	21	Each	\$_____	\$_____
015	Lipase	21	Each	\$_____	\$_____
016	Prolactin	92	Each	\$_____	\$_____
017	RpR	110	Each	\$_____	\$_____
018	Haloperidol	0	Each	\$_____	\$_____
019	Carbamazepine	3	Each	\$_____	\$_____
020	Lithium	28	Each	\$_____	\$_____
021	Clozapine	7	Each	\$_____	\$_____
022	Urine 8 Panel with Alcohol	129	Each	\$_____	\$_____
023	Valproic Acid	93	Each	\$_____	\$_____
024	Ferritin	3	Each	\$_____	\$_____
025	Other Approved Tests As Needed	208	Each	\$_____	\$_____
	<b>Services Required For Addiction Prevention and Recovery Administration (APRA) Provider Network Programs and The APRA Assessment And Referral Center (ARC)</b>				
026	Urine Drug Screening: Amphetamines: 1001 ng/ml and above; Benzodiazepines: 201 ng/ml and above; Cocaine: 151 ng/ml and above; Methadone: 300 ng/ml and above; Opiates: 301 ng/ml and above; Phencyclidine (PCP): 26 ng/ml and above; Marijuana (THC): 51/ng/ml and above; Buprenorphine (Suboxone) 6 ng/ml and above; 6-acetylmorphine (Heroin metabolite:11 ng/ml and above  Services to include: Specimen Collection, Transportation, Laboratory Testing and Drug Screening, Results Reporting, Ancillary Non-Drug Testing Services, Technical Support and Training Services, along with As Needed, Emergency/Court-Ordered Two (2) Hour Specimen Testing and Results Reporting Services	18,344	Each	\$_____	\$_____  \$_____  <b>NOT TO EXCEED</b>

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS  
OPTION YEAR ONE (1)**

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Print Name

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Title

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Signature

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Date

<b>B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS</b>					
<b>OPTION YEAR TWO (2)</b>					
<b>Contract Line Item No. (CLIN)</b>	<b>Item Description</b>	<b>Estimated Quantity of Units per Year</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Extended Price</b>
	The District of Columbia Department of Behavioral Health (DBH) is seeking the Services of Highly Qualified and Experienced Diversified Contractor to provide Phlebotomy, Specimen Collection and Transportation, Testing/Screening and Results Reporting Services as specified in Section C of this Contract.				
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<b>006</b>	hCG Urine Qualitative	54	Each	\$_____	\$_____
<b>007</b>	Hemoglobin A1C	387	Each	\$_____	\$_____
<b>008</b>	T3 Total	68	Each	\$_____	\$_____
<b>009</b>	T4 Total	48	Each	\$_____	\$_____
<b>010</b>	T4 Free	92	Each	\$_____	\$_____
<b>011</b>	Vitamin B 12	190	Each	\$_____	\$_____

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS**

**OPTION YEAR TWO (2)**

012	Folate	181	Each	\$_____	\$_____
013	PSA	27	Each	\$_____	\$_____
014	Amylase	21	Each	\$_____	\$_____
015	Lipase	21	Each	\$_____	\$_____
016	Prolactin	92	Each	\$_____	\$_____
017	RpR	110	Each	\$_____	\$_____
018	Haloperidol	0	Each	\$_____	\$_____
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**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS  
OPTION YEAR TWO (2)**

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**Print Name**

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**Title**

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**Signature**

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**Date**

<b>B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS</b>					
<b>OPTION YEAR THREE (3)</b>					
<b>Contract Line Item No. (CLIN)</b>	<b>Item Description</b>	<b>Estimated Quantity of Units per Year</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Extended Price</b>
	The District of Columbia Department of Behavioral Health (DBH) is seeking the Services of Highly Qualified and Experienced Diversified Contractor to provide Phlebotomy, Specimen Collection and Transportation, Testing/Screening and Results Reporting Services as specified in Section C of this Contract.				
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<b>008</b>	T3 Total	68	Each	\$_____	\$_____
<b>009</b>	T4 Total	48	Each	\$_____	\$_____
<b>010</b>	T4 Free	92	Each	\$_____	\$_____
<b>011</b>	Vitamin B 12	190	Each	\$_____	\$_____

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS**

**OPTION YEAR THREE (3)**

012	Folate	181	Each	\$ _____	\$ _____
013	PSA	27	Each	\$ _____	\$ _____
014	Amylase	21	Each	\$ _____	\$ _____
015	Lipase	21	Each	\$ _____	\$ _____
016	Prolactin	92	Each	\$ _____	\$ _____
017	RpR	110	Each	\$ _____	\$ _____
018	Haloperidol	0	Each	\$ _____	\$ _____
019	Carbamazepine	3	Each	\$ _____	\$ _____
020	Lithium	28	Each	\$ _____	\$ _____
021	Clozapine	7	Each	\$ _____	\$ _____
022	Urine 8 Panel with Alcohol	129	Each	\$ _____	\$ _____
023	Valproic Acid	93	Each	\$ _____	\$ _____
024	Ferritin	3	Each	\$ _____	\$ _____
025	Other Approved Tests As Needed	208	Each	\$ _____	\$ _____
	<b>Services Required For Addiction Prevention and Recovery Administration (APRA) Provider Network Programs and The APRA Assessment And Referral Center (ARC)</b>				
026	<p>Urine Drug Screening:                      Amphetamines: 1001 ng/ml and above;                      Benzodiazepines: 201 ng/ml and above;                      Cocaine: 151 ng/ml and above;                      Methadone: 300 ng/ml and above;                      Opiates: 301 ng/ml and above;                      Phencyclidine (PCP): 26 ng/ml and above;                      Marijuana (THC): 51/ng/ml and above;                      Buprenorphine (Suboxone) 6 ng/ml and above;                      6-acetylmorphine (Heroin metabolite): 11 ng/ml and above</p> <p>Services to include:                      Specimen Collection, Transportation, Laboratory Testing and Drug Screening, Results Reporting, Ancillary Non-Drug Testing Services, Technical Support and Training Services, along with As Needed, Emergency/Court-Ordered Two (2) Hour Specimen Testing and Results Reporting Services</p>	18,344	Each	\$ _____	\$ _____  <b>NOT TO EXCEED</b>

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS  
OPTION YEAR THREE (3)**

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**Print Name**

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**Title**

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**Signature**

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**Date**

<b>B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS</b>					
<b>OPTION YEAR FOUR (4)</b>					
<b>Contract Line Item No. (CLIN)</b>	<b>Item Description</b>	<b>Estimated Quantity of Units per Year</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Extended Price</b>
	The District of Columbia Department of Behavioral Health (DBH) is seeking the Services of Highly Qualified and Experienced Diversified Contractor to provide Phlebotomy, Specimen Collection and Transportation, Testing/Screening and Results Reporting Services as specified in Section C of this Contract.				
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<b>003</b>	Complete Blood Count with Differential	529	Each	\$ _____	\$ _____
<b>004</b>	Thyroid-Stimulating Hormone (TSH)	413	Each	\$ _____	\$ _____
<b>005</b>	Viral Hepatitis Screen (Hepatitis A Antibody IgM, Hepatitis B Surface Antigen, Hepatitis B Core Antibody IgM and Hepatitis C Antibody)	210	Each	\$ _____	\$ _____
<b>006</b>	hCG Urine Qualitative	54	Each	\$ _____	\$ _____
<b>007</b>	Hemoglobin A1C	387	Each	\$ _____	\$ _____
<b>008</b>	T3 Total	68	Each	\$ _____	\$ _____
<b>009</b>	T4 Total	48	Each	\$ _____	\$ _____
<b>010</b>	T4 Free	92	Each	\$ _____	\$ _____
<b>011</b>	Vitamin B 12	190	Each	\$ _____	\$ _____

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS**

**OPTION YEAR FOUR (4)**

012	Folate	181	Each	\$ _____	\$ _____
013	PSA	27	Each	\$ _____	\$ _____
014	Amylase	21	Each	\$ _____	\$ _____
015	Lipase	21	Each	\$ _____	\$ _____
016	Prolactin	92	Each	\$ _____	\$ _____
017	RpR	110	Each	\$ _____	\$ _____
018	Haloperidol	0	Each	\$ _____	\$ _____
019	Carbamazepine	3	Each	\$ _____	\$ _____
020	Lithium	28	Each	\$ _____	\$ _____
021	Clozapine	7	Each	\$ _____	\$ _____
022	Urine 8 Panel with Alcohol	129	Each	\$ _____	\$ _____
023	Valproic Acid	93	Each	\$ _____	\$ _____
024	Ferritin	3	Each	\$ _____	\$ _____
025	Other Approved Tests As Needed	208	Each	\$ _____	\$ _____
	<b>Services Required For Addiction Prevention and Recovery Administration (APRA) Provider Network Programs and The APRA Assessment And Referral Center (ARC)</b>				
026	<p>Urine Drug Screening:                      Amphetamines: 1001 ng/ml and above;                      Benzodiazepines: 201 ng/ml and above;                      Cocaine: 151 ng/ml and above;                      Methadone: 300 ng/ml and above;                      Opiates: 301 ng/ml and above;                      Phencyclidine (PCP): 26 ng/ml and above;                      Marijuana (THC): 51/ng/ml and above;                      Buprenorphine (Suboxone) 6 ng/ml and above;                      6-acetylmorphine (Heroin metabolite): 11 ng/ml and above</p> <p>Services to include:                      Specimen Collection, Transportation, Laboratory Testing and Drug Screening, Results Reporting, Ancillary Non-Drug Testing Services, Technical Support and Training Services, along with As Needed, Emergency/Court-Ordered Two (2) Hour Specimen Testing and Results Reporting Services</p>	18,344	Each	\$ _____	\$ _____  <b>NOT TO EXCEED</b>

**B.4: SCHEDULE B PRICING: SUPPLIES, SERVICES AND PRICE/COSTS  
OPTION YEAR FOUR (4)**

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**Print Name**

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**Title**

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**Signature**

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**Date**

**\*\*\* END OF SECTION B \*\*\***