

OFFICE OF STATE COURTS ADMINISTRATOR P.O. Box 104480 2112 Industrial Drive Jefferson City, MO 65110-4480

RFP NUMBER: OSCA 23-01792 TITLE: Drug/Alcohol Testing Equipment, Monitoring Equipment, & Services CONTACT: Russell W. Rottmann E-MAIL: osca.contracts@courts.mo.gov PHONE NO.: (573) 522-6766 Sup 7 DUE DATE: May 2, 2023

ISSUE DATE: April 11, 2023

**Proposal submission**: Proposals may be sent electronically to <u>osca.contracts@courts.mo.gov</u>. If you would like to submit a written proposal, please print or type the RFP number on the lower left hand corner of the envelope.

(U.S. Mail) Office of State Courts Administrator Attn: Contract Unit or PO Box 104480 Jefferson City, MO 65110 - 4480 (Courier Service) Office of State Courts Administrator Attn: Contract Unit 2112 Industrial Dr. Jefferson City, MO 65109

#### CONTRACT PERIOD: DATE OF AWARD THROUGH JUNE 30, 2024

#### DELIVER SUPPLIES/SERVICES FOB DESTINATION TO THE FOLLOWING ADDRESS:

#### VARIOUS TREATMENT COURTS THROUGHOUT THE STATE OF MISSOURI

The offeror hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (RFP). The offeror further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The offeror further agrees that upon receipt of an authorized purchase order from the Office of State Courts Administrator or when this RFP is countersigned by an authorized official of the Office of State Courts Administrator, a binding contract shall exist between the offeror and the Office of State Courts Administrator.

AUTHORIZED SIGNATURE	DATE
Markelant	May 31, 2023
PRINTED NAME	TTTLE
MartJohnson	CEO
COMPANY NAME	
Avertest uc dba Avert	valth.
MAILING ADDRESS	585
2916 W. Marshall Sta Sit	e A
CITY STATE ZIP	
Richmond, VA 23230	
TELEPHONE NUMBER.	E-MAIL ADDRESS
866-680-3106	mjohnson@averhealth.com

#### SIGNATURE REQUIRED

#### NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR A In its entirety as sub			
CONTRACT NO.		contrac	<b>T PERIOD</b>
OSCA 23-01792-21		July	7, 2023 through June 30, 2024
CONTRACTS SECTION	date	7/2023	DEPUTY STATE COURTS ADMINISTRATOR
Russell O. Lottmann	07/07		R. Morrisey
			0

### RFP # OSCA 23-01792

## Drug/Alcohol Testing Equipment, Monitoring Equipment & Services



Missouri Office of State Courts Administrator

June 7, 2023







Thomas Becher, APR Phone: (540) 580-5953 tbecher@averhealth.com averhealth.com

#### **EXHIBIT A: OFFEROR INFORMATION**

#### **OFFEROR NAME: Avertest, LLC, dba Averhealth**

A. Provide a brief company history, including the founding date and number of years in business as currently constituted.



Founded in 1995, Averhealth serves more than 2,700 agencies nationwide, touching the lives of over 550,000 active clients, including many through Missouri court programs that we have served for more than 20 years.

With over 600 employees – including 82 Missouri-based team members at our lab in St. Louis and operations professionals across the state – Averhealth integrates all substance

use collection and monitoring activities and equipment, including random selection, client notification, laboratory analysis, results reporting, and more.

Our sole focus is providing drug testing and substance use monitoring services to court systems, probation departments, and social service agencies. Every day, we strive to live our mission – to help reclaim lives, unite families, and strengthen communities – by providing comprehensive, one-source drug-testing solutions.

Every element of the Averhealth advantage incorporates 27 years of evidence-based practices, positioning your program and your clients for the best possible outcome. Dependable results, quick turnaround times, and a proven chain of custody will continue to help OSCA focus on what you do best – safeguarding your clients and your community.



Averhealth team members in our lab in St. Louis, Mo., stand ready to continue our support of Missouri courts.

#### B. Describe the nature of the offeror's business, type of services performed, etc.



#### One source. Many solutions.

Averhealth pioneered advancements and best practices for lab-based drug testing for treatment courts, probation departments and social service agencies nationwide. As the industry leader in providing single-source solutions, our team manages the entire testing process – from collections to lab screening and confirmation to results reporting. We do all the heavy lifting so Missouri's courts can do what they do best to support and safeguard communities.

We partner with programs nationwide, including courts throughout Missouri, to incorporate industry best practices that position both your program and clients for the best possible outcome. Averhealth seamlessly integrates every element of our customers' testing needs by harnessing the power of technology with the collaboration of a dedicated support staff that understands the importance of reclaiming lives, uniting families, and strengthening communities.

We are fully capable and willing to meet the needs of Missouri treatment courts, juvenile programs and approved judicial pre-trial services.



Missouri's courts already benefit from our services. They include:

#### Individualized Random Selection and Client Notification:



Court clients are randomly selected for testing based on program-specified test frequencies. Averhealth provides the ability to customize the testing frequency for each client individually while also supporting same-day, on-demand testing. Treatment court personnel may direct that a client to test at a fixed frequency, at a fluctuating frequency, or on-demand. Testing is not tied to court, supervision, or treatment appointments. Randomly selected clients have an equal probability of

testing on each day, including holidays and weekends. Clients call a multi-lingual notification line each day and enter a unique Personal Identification Number (PIN) to determine if they need to test or not. A Call Log tracks each client's call patterns and calculates a call-in compliance score for each client.

#### Directly Observed, Same-Gender Sample Collections:



Specimen collectors maintain direct line of sight when conducting a sample collection and use strict protocols to ensure no potential for substitution or adulteration. Averhealth currently provides collections services across Missouri, including Clayton, Hillsboro, Saint Charles, St. Louis, Troy, and Warrenton.

Specimens are shipped daily, via priority overnight, to our lab.

#### Nationally Certified Laboratory Testing:



One of the most exciting benefits for OSCA is Averhealth's own, in-house toxicology laboratory in St. Louis. The lab is CAP-FDT and CLIA accredited, and DEA licensed and conducts testing using liquid chromatography-tandem mass spectrometry (LC-MS/MS), a methodology exceeding (GC/MS) standards.

Testing at our lab is completed on an Olympus AU5400 Chemistry Immunoassay Analyzer, the same technology used by large hospital systems. Unlike traditional analyzers, they undergo rigorous checks daily and routine inspection, calibration, and preventive maintenance. Control samples are run daily.

Test results reported by Averhealth satisfy the Daubert and Frye rules of evidence, the legal standard regarding the admissibility of scientific evidence. Averhealth is one of only 30 U.S. laboratories with a CAP-FDT certification, illustrating that our focus is on forensic toxicology specifically applicable to your needs.

Laboratory Cartification(s)	CAP-FDT and CLIA
Laboratory Management Credentials	2 PhDs 2 Board Certified Toxicologists
Specimen Type(s)	Urine, Hair, Oral Fluid
Customer Footprint	Provides services nationally to more than 2,700 programs and over 550,000 clients





#### **Results Reporting:**



Results are reported on Aversys, our intuitive, web-based case management system that integrates random selection, client notification and compliance tracking, an electronic chain of custody, laboratory analysis, results reporting and more in a single, user-friendly application.

Aversys requires an Internet connection to access and provides a seamless link between your team, related/authorized agencies, and Averhealth, with as many logins as needed for every court.

C. Provide a list of, and a short summary of, information regarding the offeror's current contracts/clients. List, identify, and provide reasons for each contract/client gained and lost in the past 2 years.

Averhealth has been an indispensable tool for hundreds of courts and government agencies, both new customers and current ones that extend our partnership following a public bid. **We have not lost any Missouri customers in the past two years.** Here's just a sampling of the reliable service we've provided for Missouri courts over the past two years:

Contract	Summary of Work
11 <sup>th</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Adult Drug Court,
St. Charles County	Co-Occurring Court, DWI Court, Family Drug Court, Veterans Court and
	LDP Court.
12 <sup>th</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Drug Court, DWI
Mexico, Montgomery,	Court, Family Treatment Court and LDP Court.
Warren Counties	
16 <sup>th</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Drug Court,
Jackson County	Pretrial and Veterans Court
21 <sup>st</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Adult Drug Court,
	DWI Court, Family Drug Court, Mental Health Court, Veterans Court and LDP
	Court.
22 <sup>nd</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Drug Court,
	Veterans Court, and Family Court.
23 <sup>rd</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Adult Drug Court,
	DWI Court, Family Court, Veterans Court and LDP Court.

	Drug testing, laboratory analysis and results reporting for Adult Probation, DWI Court, Family Court and LDP Court.
45 <sup>th</sup> Judicial Circuit,	Drug testing, laboratory analysis and results reporting for Adult Drug Court,
Lincoln & Pike Counties	Co-Occurring Court, DWI Court, Family Treatment Court and LDP Court.

# D. Describe the structure of the organization including any board of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.

Averhealth is a privately owned small business. Its largest investor is Five Arrows Capital Partners, the North American corporate private equity arm of Rothschild & Co's Merchant Banking business. Five Arrows provides access to capital and strategic oversight focused on enhancing the services and capabilities offered by the company. Five Arrows focuses on companies in healthcare, business services, data and software, and technology-enabled services.

An organization chart appears in Exhibit D as requested. Below you will find our principal officers and board of directors:

#### **Principal Officers**



#### Mark Johnson, Chief Executive Officer

Mark Johnson serves as Averhealth's CEO, bringing three decades of management and healthcare industry experience to help people overcome the disease of addiction and achieve lasting recovery. Prior to joining Averhealth, Johnson spent five years as CEO of BetterMed Urgent Care,

where he led the company's rapid clinic expansion and launch of new service lines. He served for eight years in executive strategy, commercial and finance positions at MeadWestvaco and has held financial leadership roles with such global companies as GE, Pepsi-Cola Co., and Sara Lee. Now, he is focused on building upon Averhealth's strong track record of providing exceptional services for our customers and their clients. Mark earned an MBA in finance from the University of Chicago Booth School of Business and has a bachelor's degree in accounting from the University of Louisville. Mark has lived in Richmond, Va., for 16 years, and is married with three sons.

#### Dominique Delagnes, Chief Operating Officer



Dominique leads a nationwide team of managers and clinicians who ensure things run smoothly at Averhealth's laboratory and patient service centers across the United States. With more than 20 years of laboratory and substance-use experience, Dominique started her laboratory and substance-abuse testing experience with PharmChem. She served in senior management roles in operations, account management, and customer service. Dominique earned a bachelor's degree in business administration from Boston University with a concentration in operations management.



#### Vikram Menon, Chief Technology Officer

Vikram Menon is the Chief Technology Officer for Averhealth. He is an accomplished technology executive with over 20 years of experience leading high-performing teams and transforming organizations across multiple industries, including health and wellness, online education, digital advertising, and InsureTech.

#### **Board of Directors**

- Ari Benacerraf, Partner, Five Arrows Capital Partners
- Jeffrey Herr, co-founder, Averhealth
- JP Gautier, Five Arrows Capital Partners
- Mark Johnson, CEO, Averhealth
- Dr. Barry Karlin, founder and CEO of multiple successful companies
- Gen. Barry McCaffrey (ret.), decorated Army General and former director of the White House Office of National Drug Control Policy
- Tim Murphy, Chief Executive Officer, The Stepping Stones Group
- Mark Witkowski, Five Arrows Capital Partners

E. Provide a list summarizing pending litigation, any civil or criminal judgments, any bankruptcy proceedings, etc., that could affect the offeror's ability to perform. Failure to list such litigation may result in rejection of the proposal or in termination of any subsequent contract.

There is no pending litigation, criminal judgments, or any bankruptcy proceedings that could affect Averhealth's ability to perform required services for any Missouri court programs.

F. Document the offeror's financial solvency in a manner that is acceptable for public review. Audited financial statements for the last year will provide such documentation; however, the statements will become public information. If the offeror is a subsidiary, also provide the documentation for the parent company.



Averhealth is financially strong. We have served our customers without fail for 27 years, including courts throughout Missouri. Averhealth has no bank debt and is in good standing with vendors. As a privately owned company, Averhealth does not publish financial results for public review and only shares financial information with Averhealth's ownership and

board of directors.

Averhealth is happy to discuss our financial strength with OSCA, especially since you already know us. However, we cannot share our financial statements in this form as they will become public information.

#### EXHIBIT B

#### PRIOR EXPERIENCE REFERENCE

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror's and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

<b>Reference Information (Prior Services Performed For:)</b>		
Name of Reference Company:	21st Judicial Circuit, St. Louis County MO	
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	105 South Central Avenue Clayton, MO 63105	
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	Mary Davis, Court Administrator (314) 615-2678 mary.davis@courts.mo.gov	
Dates of Prior Services:	2007 - Present	
Dollar Value of Prior Services:		
Description of Prior Services Performed:	Drug/Alcohol Testing, Client Notification/Random Schedule Management, Laboratory Services, and more.	

As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:

Mary A. Davis JSignature of Reference Contact Person

06/01/2023 Date of Signature

#### EXHIBIT B

#### PRIOR EXPERIENCE REFERENCE

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror's and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

	Reference Information (Prior Services Performed For:)
Name of Reference Company:	St. Charles County Treatment Court
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	300 N. Second St., Suite 450 St. Charles, MO 63301
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	Gina Colaneri 636-949-7458 Gina.Colaneri@courts.mo.gov
Dates of Prior Services:	2003-present
Dollar Value of Prior Services:	
Description of Prior Services Performed:	Drug/Alcohol Testing, Client Notification/Random Schedule Management, Laboratory Services, and more.

As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above

Signature of Reference Contact Person

23 Date of Signature

#### OSCA 17-011 Drug/Alcohol Testing Equipment & Services

#### <u>EXHIBIT B</u>

#### PRIOR EXPERIENCE REFERENCE

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror's and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

	<b>Reference</b> Information (Prior Services Performed For:)
Name of Reference Company:	33rd Judicial Circuit Treatment Court and 34th Judicial Circuit Treatment Court (New Madrid County)
Address of Reference Company: Street Address City, State, Zip	131 S. Winehester. P.O. Box 256, Benton, MO 63736
Reference Contact Person Information: Name Phone # E-mail Address	Stephanie N. Lemmons, LMSW, LCSW, 573-427-0808, stephanie.lemmons@courts.mo.gov
Dates of Prior Services:	February 2017 to present
Dollar Value of Prior Services:	FY 2023 - Approximately \$47, 075
Description of Prior Services Performed:	Drug/Alcohol Testing, Client Notification/Random Schedule Management, Laboratory Services, and more.

As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:

Signature of Reference Contact Person

Le-1-23 Date of Signature

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#### EXHIBIT C PERSONNEL EXPERTISE SUMMARY

(Complete this Exhibit for personnel proposed. Resumes or summaries of key information should be provided)

#### OFFEROR NAME: Avertest, LLC, dba Averhealth

Per	sonnel	Background and Expertise of Personnel and Planned Duties
1.	Dominique Delagnes (Name) Chief Operating Officer (Title) Overall management (Proposed Role/Function)	With more than 20 years of experience in forensic toxicology. and certified in specimen collections and breath-alcohol, she oversees company operations, including our Missouri-based lab, quality control programs, and customer service.
2.	Nick Runge (Name) Director of Operations (Title) Oversees day-to-day contract management (Proposed Role/Function)	Experienced professional with extensive knowledge in operating statewide substance use testing and monitoring services. Nick manages Patient Care Centers and customer training and consults with customers about any issues.
3.	Michelle Glinn, PhD, D.A.B.F.T (Name) Laboratory Director (Title) Oversight over lab testing (Proposed Role/Function)	With more than 25 years of experience in forensic toxicology, Michelle manages laboratory operation, reviews quality control programs, evaluates analytical results, and maintains accreditation compliance. She is an expert witness and frequently provides testimony for courts.
4.	Amanda Sharp (Name) Regional Manager (Title) Day-to-day contract support (Proposed Role/Function)	Amanda serves as one of two regional managers for Missouri. She manages Patient Care Centers, conducts customer and employee training, and is always available for consultation in her role of day-to-day contract support.
5.	Kristi Dalton (Name) Regional Manager (Title) Day-to-day contract support (Proposed Role/Function)	With more than 14 years of substance-use management, Kristi serves as one of two regional managers for Missouri along with Amanda. She manages Patient Care Centers, conducts customer and employee training and is always available for consultation.
6.	Cynthia Ward (Name) Area Manager (Title) Day-to-day contract contact (Proposed Role/Function)	Cynthia will serve as your day-to-day contact to ensure Missouri courts have what they need from Averheaith to succeed. She coordinates with our customers and extensive support team with proactive service.

#### **EXHIBIT D: METHOD OF PERFORMANCE**

#### **OFFEROR NAME: Avertest, LLC, dba Averhealth**

1. Describe testing procedures, including but not limited to the following:

a. What is provided with which to collect each sample (cups, chain of custody forms, mailing packets)?



Averhealth provides Missouri treatment courts with sterile urine fluid sample collection kits that contain all the items necessary to conduct specimen collections and transport via overnight delivery while maintaining a legally defensible chain of custody (COC). If necessary, we also supply handwritten COC forms.

Collection kit supplies include a form with tamper-evident label, collection cup, shipping labels, and shipping materials (bag, insert, absorption napkin, etc.) – in short,

everything courts need to operate a drug-testing program that meets the highest industry standards.

#### b. Describe how the sample is transported to the testing laboratory (US Postal, Fed Ex, UPS, etc.).



Averhealth provides reliable and secure specimen pickups at any location on weekdays. We ship samples to our lab in St. Louis daily via UPS priority overnight, a process that has worked reliably for our customers across the country. We ship from approximately 1,100 locations nationwide daily, enabling our lab to provide results the next business day.

Here's what that process looks like for samples collected either by our Patient Care Technicians (PCTs) or court staff:



c. Describe the methods of testing which are employed (LC/MS/MS, GS/MS, LC/MS, and/or Immunoassay methods).



Averhealth's in-house accredited toxicology laboratory in St. Louis conducts testing using liquid chromatography-tandem mass spectrometry (LC-MS/MS), a methodology exceeding GC/MS standards. Testing at our lab is completed on an Olympus AU5400 Chemistry Immunoassay Analyzer, the same technology used by large hospital systems. Unlike traditional analyzers, they undergo rigorous checks daily and routine inspection, calibration, and preventive maintenance. Control

samples are run daily.

Test results reported by Averhealth satisfy the Daubert and Frye rules of evidence, the legal standard regarding the admissibility of scientific evidence.

Averhealth provides confirmation testing as requested and can report quantitative results based on preferences. Confirmation testing is conducted via an LC-MS/MS method that compares the reaction of an unknown compound to a reference (i.e., the actual substance) compound.

The LC-MS/MS confirmation method provides superior accuracy and reliability relative to traditional GC/MS confirmation methods, provides far greater compound coverage (e.g., GC/MS is limited to traditional substances, while LC-MS/MS allows for the detection of designer and synthetic substances), allows for lower cut-off levels, and allows for more timely panel expansion. Averhealth can tailor the screen and confirmation cut-off level for each compound to meet specifications provided by each treatment court, including the use of Limit of Detection (i.e., lowest detectable level).



The most effective way to ensure specimens are not adulterated is observed collection based on best practices to ensure specimens are not being tampered with and a device is not being used to adulterate results.

To be sure, Averhealth conducts validity testing via creatinine on every sample. Creatinine is a by-product of muscle metabolism. It is produced and filtered at a constant rate throughout the day and is only excreted via urine. Creatinine levels

can be accurately estimated at 95% confidence using age, sex, weight, and race.

Low creatinine levels may rarely be caused by certain medical conditions. However, low levels are not caused by controlled diabetes, exercise, high blood pressure, obesity, diet, pregnancy, menstrual cycles, working in the hot sun, or drinking fluids to hydrate. In other words, creatinine guards against adulteration.

Urine specimen dilution is the most common method used to avoid new drug and alcohol use detection. Dilution occurs when someone consumes an excessive amount of fluid (2-4 quarts) over a short period of time (90 minutes). Dilution significantly lowers the concentration of detectable drugs and alcohol in urine.

In many dilution cases, a client is following the instructions of a product that falsely claims to cleanse the body of drugs and alcohol. Fortunately, directly observed collections and validity testing – which Averhealth provides – reduce a client's ability to adulterate, substitute or dilute a specimen.

#### **Lab Certifications**

Averhealth's lab accreditations meet all specifications and requirements in section 2.3 of this RFP. They are included below:





DEA REGISTRATION	THIS REGISTRATION EXPIRES	FEE PAID	CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE
RA0488886	06-30-2023	\$296	DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 29537
SCHEDULES	BUSINESS ACTIVITY	45SLIE DATE	
1,2,2N, 3,3N,4,5	ANALYTICALLAB	07-04-2022	
AVERTEST, LLC AVERTEST 4709 LAGUARDIA SAINT LOUIS, MO			Sections 364 and 1009 (21 USC 824 and 958) of the Controlls Subblances Act of 1970, as amended, provide that the Alkone General may revelue or suspond a registration to menufactum distribute dispense, report or expond a controlled substance.
54911 20075, 200	03-54-1142		This certificate is not transperable on change o ownership, control, location, or pusiness active and it is not valid after the experation date.







Place: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Linda Wagner Jurata, Scientific Review Officer, The Center for Scientific Review, The National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 496–8032, *linda.jurata@nih.gov*.

Name of Committee: Integrative, Functional and Cognitive Neuroscience Integrated Review Group; Neurobiology of Motivated Behavior Study Section.

Date: June 22–23, 2023.

Time: 10:00 a.m. to 8:00 p.m.

Agenda: To review and evaluate grant applications.

*Place:* National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Janita N. Turchi, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 402–4005, turchij@mail.nih.gov.

Name of Committee: Endocrinology, Metabolism, Nutrition and Reproductive Sciences Integrated Review Group; Pregnancy and Neonatology Study Section.

Date: June 22–23, 2023.

*Time:* 10:00 a.m. to 8:00 p.m. *Agenda:* To review and evaluate grant

applications. *Place:* National Institutes of Health,

Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Andrew Maxwell Wolfe, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 6214, Bethesda, MD 20892, (301) 402–3019, andrew.wolfe@nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: May 25, 2023.

Tyeshia M. Roberson-Curtis,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2023–11647 Filed 5–31–23; 8:45 am] BILLING CODE 4140–01–P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Current List of HHS-Certified Laboratories and Instrumented Initial Testing Facilities Which Meet Minimum Standards To Engage in Urine and Oral Fluid Drug Testing for Federal Agencies

AGENCY: Substance Abuse and Mental Health Services Administration, HHS. ACTION: Notice.

**SUMMARY:** The Department of Health and Human Services (HHS) notifies federal

agencies of the laboratories and Instrumented Initial Testing Facilities (IITFs) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs using Urine or Oral Fluid (Mandatory Guidelines).

FOR FURTHER INFORMATION CONTACT: Anastasia Donovan, Division of Workplace Programs, SAMHSA/CSAP, 5600 Fishers Lane, Room 16N06B, Rockville, Maryland 20857; 240–276– 2600 (voice); Anastasia.Donovan@ samhsa.hhs.gov (email).

SUPPLEMENTARY INFORMATION: In accordance with section 9.19 of the Mandatory Guidelines, a notice listing all currently HHS-certified laboratories and IITFs is published in the Federal Register during the first week of each month. If any laboratory or IITF certification is suspended or revoked, the laboratory or IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines.

If any laboratory or IITF has withdrawn from the HHS National Laboratory Certification Program (NLCP) during the past month, it will be listed at the end and will be omitted from the monthly listing thereafter.

This notice is also available on the internet at https://www.samhsa.gov/ workplace/resources/drug-testing/ certified-lab-list.

The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and Instrumented Initial Testing Facilities (IITFs) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines) using Urine and of the laboratories currently certified to meet the standards of the Mandatory Guidelines using Oral Fluid.

The Mandatory Guidelines using Urine were first published in the Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (62 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2008 (73 FR 71858); December 10, 2008 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines using Oral Fluid were first published in the **Federal Register** on October 25, 2019 (84 FR 57554) with an effective date of January 1, 2020.

The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100–71 and allowed urine drug testing only. The Mandatory Guidelines using Urine have since been revised, and new Mandatory Guidelines allowing for oral fluid drug testing have been published. The Mandatory Guidelines require strict standards that laboratories and IITFs must meet in order to conduct drug and specimen validity tests on specimens for federal agencies. HHS does not allow IITFs to conduct oral fluid testing.

To become certified, an applicant laboratory or IITF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a laboratory or IITF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and IITFs in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines using Urine and/ or Oral Fluid. An HHS-certified laboratory or IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA), which attests that the test facility has met minimum standards. HHS does not allow IITFs to conduct oral fluid testing.

#### HHS-Certified Laboratories Approved To Conduct Oral Fluid Drug Testing

In accordance with the Mandatory Guidelines using Oral Fluid dated October 25, 2019 (84 FR 57554), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on oral fluid specimens:

At this time, there are no laboratories certified to conduct drug and specimen validity tests on oral fluid specimens.

#### HHS-Certified Instrumented Initial Testing Facilities Approved To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified IITFs meet the minimum standards to conduct drug and specimen validity tests on urine specimens: Dynacare, 6628 50th Street NW,

Edmonton, AB Canada T6B 2N7, 780– 784–1190, (Formerly: Gamma-Dynacare Medical Laboratories).

#### HHS-Certified Laboratories Approved To Conduct Urine Drug Testing

In accordance with the Mandatory Guidelines using Urine dated January 23, 2017 (82 FR 7920), the following HHS-certified laboratories meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

Alere Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504-361-8989/ 800–433–3823, (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.).

- Alere Toxicology Services, 450 Southlake Blvd., Richmond, VA 23236, 804–378–9130, (Formerly: Kroll Laboratory Specialists, Inc., Scientific Testing Laboratories, Inc.; Kroll Scientific Testing Laboratories, Inc.).
- Clinical Reference Laboratory, Inc., 8433 Quivira Road, Lenexa, KS 66215– 2802, 800–445–6917, Desert Tox, LLC, 5425 E Bell Rd., Suite 125, Scottsdale, AZ, 85254, 602–457–5411/623–748–5045
- DrugScan, Inc., 200 Precision Road, Suite 200, Horsham, PA 19044, 800– 235–4890
- Dynacare,\* 245 Pall Mall Street, London, ONT, Canada N6A 1P4, 519– 679–1630, (Formerly: Gamma-Dynacare Medical Laboratories)
- ElSohly Laboratories, Inc., 5 Industrial Park Drive, Oxford, MS 38655, 662– 236–2609
- Laboratory Corporation of America Holdings, 7207 N Gessner Road, Houston, TX 77040, 713–856–8288/ 800–800–2387
- Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 908–526–2400/800–437–4986, (Formerly: Roche Biomedical Laboratories, Inc.)
- Laboratory Corporation of America Holdings, 1904 TW Alexander Drive, Research Triangle Park, NC 27709, 919–572–6900/800–833–3984, (Formerly: LabCorp Occupational Testing Services, Inc., CompuChem Laboratories, Inc.; CompuChem Laboratories, Inc., A Subsidiary of Roche Biomedical Laboratory; Roche CompuChem Laboratories, Inc., A Member of the Roche Group)
- Laboratory Corporation of America Holdings, 1120 Main Street, Southaven, MS 38671, 866–827–8042/ 800–233–6339, (Formerly: LabCorp Occupational Testing Services, Inc.; MedExpress/National Laboratory Center)

- LabOne, Inc. d/b/a Quest Diagnostics, 10101 Renner Blvd., Lenexa, KS 66219, 913–888–3927/800–873–8845, (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.; Center for Laboratory Services, a Division of LabOne, Inc.)
- Legacy Laboratory Services Toxicology, 1225 NE 2nd Ave., Portland, OR 97232, 503-413-5295/800-950-5295
- MedTox Laboratories, Inc., 402 W County Road D, St. Paul, MN 55112, 651–636–7466/800–832–3244
- Minneapolis Veterans Affairs Medical Center, Forensic Toxicology Laboratory, 1 Veterans Drive, Minneapolis, MN 55417, 612–725– 2088. Testing for Veterans Affairs (VA) Employees Only
- Pacific Toxicology Laboratories, 9348 DeSoto Ave., Chatsworth, CA 91311, 800–328–6942. (Formerly: Centinela Hospital Airport Toxicology Laboratory)
- Phamatech, Inc., 15175 Innovation Drive, San Diego, CA 92128, 888– 635–5840
- Quest Diagnostics Incorporated, 400 Egypt Road, Norristown, PA 19403, 610–631–4600/877–642–2216, (Formerly: SmithKline Beecham Clinical Laboratories; SmithKline Bio-Science Laboratories)
- US Army Forensic Toxicology Drug Testing Laboratory, 2490 Wilson St., Fort George G. Meade, MD 20755– 5235, 301–677–7085. Testing for Department of Defense (DoD) Employees Only

Upon finding a Canadian laboratory to be qualified, HHS will recommend that DOT certify the laboratory (**Federal Register**, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the **Federal Register** on January 23, 2017 (82 FR 7920). After receiving DOT certification, the laboratory will be included in the monthly list of HHS-certified laboratories and participate in the NLCP certification maintenance program.

#### Anastasia Marie Donovan,

Public Health Advisor, Division of Workplace Programs.

[FR Doc. 2023–11650 Filed 5–31–23; 8:45 am] BILLING CODE 4162–20–P

#### DEPARTMENT OF THE INTERIOR

#### **Fish and Wildlife Service**

[Docket No. FWS-R6-ES-2020-0116; FF06E23000-234-FXES11140600000]

Endangered and Threatened Wildlife and Plants; Enhancement of Survival Permit Application; Candidate Conservation Agreement With Assurances and Categorical Exclusion for the Greater Sage-Grouse; Morgan, Rich, Summit, and Weber Counties, Utah

**AGENCY:** Fish and Wildlife Service, Interior.

**ACTION:** Notice of availability; request for comments.

SUMMARY: We, the U.S. Fish and Wildlife Service (Service), are announcing the availability of documents related to an application for an enhancement of survival permit (permit) under the Endangered Species Act. Farmland Reserve, Inc. (FRI) and AgReserves, Inc. (ARI) (collectively referred to as DLL) have applied for a permit associated with the implementation of a candidate conservation agreement with assurances (CCAA) for the greater sage-grouse (Centrocercus urophasianus) for the Deseret Land and Livestock (DLL Ranch) in Utah. The purpose of this CCAA is for the Service to join with the Utah Division of Wildlife Resources and DLL (collectively, the parties to this CCAA), to implement conservation measures for greater sage-grouse in a manner that is consistent with the Service's Policy on CCAAs and applicable Service regulations. The documents available for review and comment are the applicant's CCAA, which is part of the permit application, and our draft environmental action statement and low-effect screening form. which support a categorical exclusion under the National Environmental Policy Act. We invite comments from the public and Federal, Tribal, State, and local governments.

DATES: We will accept comments received or postmarked on or before July 3, 2023. Comments submitted online at https://www.regulations.gov (see ADDRESSES) must be received by 11:59 p.m. Eastern Time on July 3, 2023. ADDRESSES:

Obtaining Documents: The documents this notice announces, as well as any comments and other materials that we receive, will be available for public inspection online in Docket No. FWS-R6-ES-2020-0116 at https:// www.regulations.gov.

<sup>\*</sup> The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories certified through that program were accredited to conduct forensic urine drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSAaccredited laboratories was transferred to the U.S. HHS, with the HHS' NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

d. Provide the testing cutoff levels which are available (100ng/mL, 250ng/mL, 500ng/mL, 1000 ng/mL). What cutoff level is recommended to safeguard against incidental false positive? \_\_\_\_\_\_ng/mL

Averhealth uses the following cutoff levels for most courts. These cutoff levels are consistent with best practices for monitoring people with substance use disorders. We can modify the cutoff levels to meet specific court preferences and we work with each court and program to ensure cutoff levels are set in accordance with industry standards to prevent false positive results.

Assay	Specimen	Screen Cut-off	Confirmation Cut-off
Amphetamines	Urine	1000 ng/mL	100 ng/mL
MDA	Urine	N/A	50 ng/mL
MDEA	Urine	N/A	50 ng/mL
MDMA	Urine	N/A	50 ng/mL
Methamphetamine	Urine	N/A	100 ng/mL
Phentermine	Urine	N/A	50 ng/mL
Cannabinoids	Urine	20 ng/mL	5 ng/mL
Cocaine	Urine	300 ng/mL	50 ng/mL
Opiates	Urine	300 ng/mL	N/A
Heroin (6-MAM)	Urine	N/A	5 ng/mL
Codeine	Urine	N/A	50 ng/mL
Hydrocodone	Urine	N/A	50 ng/mL
Hydromorphone	Urine	N/A	50 ng/mL
Morphine	Urine	N/A	50 ng/mL
Oxycodone	Urine	N/A	50 ng/mL
Oxymorphone	Urine	N/A	50 ng/mL
РСР	Urine	25 ng/mL	12 ng/mL
Barbiturates	Urine	200 ng/mL	N/A
Butobarbital	Urine	N/A	100 ng/mL
Butalbital	Urine	N/A	100 ng/mL
Pentobarbital	Urine	N/A	100 ng/mL
Secobarbital	Urine	N/A	100 ng/mL
Benzodiazepines	Urine	200 ng/mL	N/A
Alprazolam	Urine	N/A	50 ng/mL
Clonazepam	Urine	N/A	50 ng/mL
Diazepam	Urine	N/A	50 ng/mL
Hydroxyalprazolam	Urine	N/A	50 ng/mL
Lorazepam	Urine	N/A	50 ng/mL
Nordiazepam	Urine	N/A	50 ng/mL
Oxazepam	Urine	N/A	50 ng/mL
Temazepam	Urine	N/A	50 ng/mL

Meperidine	Urine	200 ng/mL	N/A
Meperidine	Urine	N/A	50 ng/mL
Normeperidine	Urine	N/A	50 ng/mL
Methadone	Urine	300 ng/mL	25 ng/mL
EDDP	Urine	N/A	25 ng/mL
Methamphetamines	Urine	500 ng/mL	100 ng/mL
Ecstasy	Urine	500 ng/mL	100 ng/mL
Propoxyphene	Urine	300 ng/mL	25 ng/mL
Norpropoxyphene	Urine	N/A	25 ng/mL
EtG	Urine	500 ng/mL	300 ng/mL
EtS	Urine	N/A	100 ng/mL
Buprenorphine	Urine	5 ng/mL	5 ng/mL
Norbuprenorphine	Urine	N/A	50 ng/mL
SOMA	Urine	100 ng/mL	N/A
Carisoprodol	Urine	N/A	50 ng/mL
Meprobamate	Urine	N/A	50 ng/mL
Fentanyl	Urine	2 ng/mL	1 ng/mL
Vorfentanyl	Urine	N/A	1 ng/mL
Acetyl Fentanyl	Urine	N/A	1 ng/mL
Acryl Fentanyl	Urine	N/A	1 ng/mL
Alfentanil	Urine	N/A	1 ng/mL
Benzyl Carfentanil	Urine	N/A	1 ng/mL
beta-Hydroxy Fentanyl	Urine	N/A	1 ng/mL
Butyryl Fentanyl	Urine	N/A	1 ng/mL
Carfentanil	Urine	N/A	1 ng/mL
Cyclopropyl Fentanyl	Urine	N/A	1 ng/mL
Fluorobutyryl Fentanyl	Urine	N/A	1 ng/mL
Furan'll Fentanyl	Urine	N/A	1 ng/mL
Methoxyacetyl Fentanyl	Urine	N/A	1 ng/mL
Methylfentanyl	Urine	N/A	1 ng/mL
Thienyl Fentanyl	Urine	N/A	1 ng/mL
Fentanyl	Urine	N/A	1 ng/mL
Gabapentin	Urine	1.5ng/mL	100 ng/mL
Ketamine	Urine	100 ng/mL	50 ng/mL
Kratom	Urine	50 ng/mL	N/A
Mithramycin 1	Urine	N/A	5 ng/mL
7 Hydroxymitragynine 1	Urine	N/A	5 ng/mL
Tramadol	Urine	200 ng/mL	50 ng/mL
Zolpidem	Urine	20 ng/mL	10 ng/mL
Amphetamines Methamphetamines & Ecstasy	Hair	500 pg/mG	500 pg/mG

Cocaine	Hair	500 pg/mG	500 pg/mG
Opiates Codeine, Morphine, 6-MAM, Oxycodone, Hydrocodone, Hydromorphone	Hair	200 pg/mG	200 pg/mG
PCP	Hair	300pg/mG	300pg/mG
Cannabinoids	Hair	1pg/mG	0.1pg/mG
Amphetamines	Oral Fluid	50 ng/mL	10 ng/mL
Methamphetamine	Oral Fluid	N/A	10 ng/mL
MDA	Oral Fluid	N/A	10 ng/mL
MDMA	Oral Fluid	N/A	10 ng/mL
Benzodiazepines	Oral Fluid	20 ng/mL	N/A
Alprazolam	Oral Fluid	N/A	5 ng/mL
Diazepam	Oral Fluid	N/A	5 ng/mL
Nordiazepam	Oral Fluid	N/A	5 ng/mL
Lorazepam	Oral Fluid	N/A	5 ng/mL
Oxacepam	Oral Fluid	N/A	5 ng/mL
Temazepam	Oral Fluid	N/A	5 ng/mL
Clonazepam	Oral Fluid	N/A	5 ng/mL
Buprenorphine	Oral Fluid	5 ng/mL	5 ng/mL
Cocaine	Oral Fluid	20 ng/mL	5 ng/mL
Benzoylecgonine	Oral Fluid	N/A	5 ng/mL
Cannabinoids	Oral Fluid	8 ng/mL	2 ng/mL
Opiates	Oral Fluid	40 ng/mL	N/A
Codeine	Oral Fluid	N/A	5 ng/mL
Morphine	Oral Fluid	N/A	5 ng/mL
Hydrocodone	Oral Fluid	N/A	5 ng/mL
Hydromorphone	Oral Fluid	N/A	5 ng/mL
Oxycodone	Oral Fluid	N/A	5 ng/mL
Oxymorphone	Oral Fluid	N/A	5 ng/mL
Methadone	Oral Fluid	40 ng/mL	5 ng/mL
Methamphetamines	Oral Fluid	50 ng/mL	10 ng/mL
РСР	Oral Fluid	10 ng/mL	5 ng/mL
Breath Alcohol Test	Breath	0.00	0.00

pg/mG = picogram per milligram of hair ng/mL = nanogram per milliliter of urine

e. Describe the turnaround time for results.



Averhealth's laboratory testing is conducted in-house, so there is no need to ship specimens to another vendor, ensuring timely results. Samples are usually delivered to the Averhealth laboratory before 6 a.m. Central Time.

Averhealth starts the clock at the time of specimen collection and strives to provide **certified negative screen results within one business day** of sample collection for urine and oral fluid specimens.

Our turnaround time for **confirmed results is usually 24 hours to 48 hours** following the screen-positive result. Instrument processing time for some specialized panels (synthetic stimulants, synthetic cannabinoids, "street fentanyl," etc.) requires five days.

#### f. Describe how test results will be reported (telephone, fax, vendor portal or e-mail).



Test results are reported on Averhealth's proprietary information management system, Aversys, a a customized dashboard for each case manager who has caseload oversight. In addition, results can also be emailed to authorized individuals. This meets all requirements in section 2.7 of the RFP, including providing:

- The participant's full name
- Test results (including positive, negative, tampered, dilute, no shows and confirmations)
- Range of normal
- Indication of abnormal levels/values
- Chart number
- Treatment court type/location
- Date of specimen collection
- Date of specimen testing and
- Date of test result reporting.



Let's take a closer look at Aversys.

It's an intuitive, web-based case management system that integrates random selection, client notification and compliance tracking, an electronic chain of custody, laboratory analysis, results reporting and more in a single, user-friendly application.

Aversys requires an Internet connection to access and provides a seamless link between your team, related/authorized agencies, and Averhealth. As requested, we provide as many logins as needed for your team to access Aversys daily.



Averhealth developed Aversys based on 27 years of experience and feedback from courts, treatment providers, and social service agencies nationwide. Aversys is designed with a holistic perspective of the treatment and supervision process. It integrates testing, client, case, and program management in a single application. We include Aversys in our service offering, and features can be activated or deactivated based on your needs and preferences.

Aversys features and capabilities include:

- Secure Web Access: From any computer, tablet, or smartphone with an Internet connection, it's HIPAA compliant.
- ✓ **Client Identification:** Via client photo and date of birth, case number, etc.
- Stored client photo eliminates the need for government-issued identification. Collection sites may require a photo ID for each encounter due to a lack of cameras or refusal to take images.
- $\circ$  Specimen collectors only need to coordinate with you once to verify client identity,

#### ✓ Electronic Test Orders:

- Client-specific panel selection and rotation.
- o Ability to create a custom panel for each individual client.

#### ✓ Data, Information & Analytics:

- o No Call, Call Time, and Call Number or Notification Method (phone, text, web).
- Positive, Negative, or Dilute.
- No Show, Unable to Provide, Refusal to Provide, Excused (e.g., travel).
- o Days Sober.
- Medication Tracking.
- Client Surveys.
- Predictive Indicators.
- Import/Export Capabilities.

#### ✓ Customized Dashboard:

- Quick access to caseload(s).
- o Real-time program analytics and reports (e.g., Call-in Compliance, Test Results, etc.).
- Customizable email notification to ensure each officer/case manager is immediately alerted according to individual preferences.
- o Detailed and summarized on-demand reports.
- Analysis of client-specific data and trends for both counties.
- o User-specific permission controls.
- Electronic Chain of Custody: Averhealth's electronic chain of custody (COC) ensures legal defensibility and that a valid sample is collected, appropriately tested, and accurately reported.
- It captures who, when, what, and where information via the creation of sample-specific barcode labels.
- Bar codes provide a time-stamped audit trail that tracks samples from client check-in to sample collection to laboratory analysis to secure storage to sample destruction and all steps in between.

- Averhealth's COC reduces waiting time for clients and County staff while enhancing client privacy.
- o Improved accuracy due to reduced human error and no penmanship issues.

#### ✓ Reliability & Redundancy:

- Available when you need it.
- Delivered via secure and cloud architecture hosted in multiple enterprise-class data centers.
- Three notification means mitigate downstream availability issues (e.g., local carrier, client device) and provide built-in redundancy through independent configurations.
- Support by multiple disaster recovery layers, including instantaneous automatic failover server resources, frequent intraday differential backups, and full backups to secondary data-center location.

Below are a few of its many user-friendly reporting features:

- ✓ Client-Specific Data: Key data elements include positive, negative, dilute, no show, unable to provide, refusal to provide, no call, call time, call number, and days since the last positive test, among others. "No Shows" will be reported daily, shortly after the day's testing hours have concluded. Other available data include:
  - Detailed and summary results.
  - o Discern new use from residual use.
  - Call-in compliance score.
  - Individual test reports.
  - o Comprehensive client test history.
- ✓ Information Analytics: An overview of all testing activities.
  - Test results and related data segmented by program and case manager (i.e., probation officer).
  - Macro trend analysis while appropriately protecting client-specific information.
  - Standard and custom substance use reports.
  - o Export to Excel for further analysis or to printable PDF.
  - Detailed views of the historical and future testing calendars (for users with the correct permissions).

You can view this video for an overview of Aversys: https://bit.ly/3a65C9S

Here is what the Aversys Dashboard looks like:

	hhand -					-	esults >>						
Aversys Das	-	arch:				Get Y	lesults >>				_		
Patient Sc	cheduling & Notification	n (1042)									Actions 3	5	
Patient	v Program	Group	Order			Case Manager	Scheduled	Status	Called	Complian	ce 🔛	-	Ouick Access to
Erapples Bob	Honoles & Cosenty	1-2x per month	N/A			Amanda D'Arcy	12/17/2019	-	84	$O^{e_{\underline{6}}}$	-61	1	Case Load
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Akı. Tarry	Honolutu County	2-4x per month	N/A		-	Cindiloo Whee	12-16/2019		н	0%	a		
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		month 1-2x per											compliance
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Frapples Ech	Handula County	1-2x per month	NIA		,	Amanda O'Arcy	11/26/2019		5	0%	107	_	
II Non-Nega	tive Results (36)										Action 2	:	
Patient	Program		iuled v	Collected	Result	Case Manager			Positive Assay(s	5)	Action 2		Real-time
Patient AVASH, CHAPLES	Program Herefold County	08/0	8/2019	Collected 02/19/2020	UTP.	Amanda D'Arcy			N/A	5)	Action 2	-	Real-time test results
Patient AYASH, CHAPLES Maker, Alea	Program Heneloks Counter Honeloks County	08/0	8/2019 24/2019	02/19/2020	Excused	Amanda D'Arcy Kelly Stater			N/A N/A	5)	Action 2		
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Patient AYASH, CHAPLES Walter, Alex Walter, Alex Walter, Alex Erappias, Bob Pin, Giben	Program Herefuls County Honolulu County Nichigan St. Clair County Honolulu County	08/0 08/2 07/2 09/2 12/2	18/2019 24/2019 29/2019 25/2019 25/2019	02/19/2020 07/29/2019 02/22/2020 12/20/2019	Excused REFUSED	Amanda D'Arcy Kelly Stater Christian Fletcher Amanda D'Arcy			N/A N/A BAG N/A	5)	Action 2		
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Patient AYASH, CHAPLES Walter, Alwa Arner, Shale Erappias, Bob Pith, Silben Eimsy, Pat Molive, Paul	Program Hereik/la Counte Honolulu County Nichigan SJ, Clair, County Honolulu County Honolulu County Honolulu County	08/0 08/2 07/2 09/2 12/2 01/2 01/2	08/2019 24/2019 29/2019 25/2019 20/2019 26/2020	02/19/2020 07/29/2019 02/22/2020 12/20/2019	Excused REFUSED PO8 REJECTED	Amanda D'Arzy Kelly Stater Christian Fletcher Amanda D'Arzy Robert Machado Justin Manni			N/A N/A BAC N/A	5)	Action 2		
Patient AYASH, CHARLES Maker, Alwa Awes, Sheke Ecopoles, Bob Pits, Silbert Emely, Pati Molive, Pati OSbee, Seamus	Program Hereik/la Counte Ebosik/la County Hosoik/la County Nitchigan St. Clair County Hosoik/la County Hosoik/la County Hereik/la County	08/0 08/2 07/2 09/2 12/2 01:2 02:0 02:0	08/2019 24/2019 29/2019 25/2019 20/2019 26/2020 35/2020	02/19:2020 07/29:2019 02/22:2020 12:20:2019 01/28:2020	Excused REFUSED POS REJECTED	Amanda D'Arzy Keliy Slahn Christian Fletcher Amanda D'Arzy Robert Machado Justin Manni Amanda D'Arzy			N/A N/A BAC N/A N/A N/A	5)	Action 2		
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Patient AYASH, CHARLES Walser, Alexa Eraspias, Bob Pin, Silbert Erasy, Pati Molive, Paul OSbee, Saamus Eto, Gibert Schedulec	Program Hereitolis County Honolulu County Michigan SJ, Clair County Michigan SJ, Clair County Honolulu County Honolulu County Hereitulu County Hereitulu County Hereitulu County	08/0 08/2 07/2 09/2 12/2 01:2 02:0 02:0	08/2019 74/2019 99/2019 25/2019 76/2020 76/2020 77/2020	02/19:2020 07/29/2019 02/22/2020 12/20:2019 01/28:2020 02/11/2020	Excused REFUSED POB REJECTED No Show REFUSED POS Churdingi	Arranda D'Arcy Kolly Stain Christian Fletcher Arranda D'Arcy Robert Machado Justin Manni Arnanda D'Arcy Sean Shea	Review Date		N/A N/A BAC N/A N/A N/A N/A Barbiturates		Actions 2	•	
Patient AYASH, CHARLES Walser, Alexa Arrees, Shata Erappias, Bob Pits, Silbert Emely, Paul OShee, Saamus Pits, Gibert Schedulec Patient	Program Horeshile County Horeshile County Horeshile County Michigan St. Clair County Horeshile County	08:0 07/2 09:2 12:2 01:2 02:0 02:0 02:0 02:0 02:0	08/2019 74/2019 99/2019 25/2019 76/2020 76/2020 77/2020	02/19/2020 07/29/2019 02/22/2019 01/28/2020 01/28/2020 01/28/2020 02/07/2020 02/07/2020	Excused REFUSED POB REJECTED No Show REFUSED POS Churdingi	Arranda D'Arcy Kotiy Sister Christian Fletcher Arranda D'Arcy Robert Machado Justin Manni Arnanda D'Arcy Sean Shea Robert Machado	Review Date 11/14-20		N/A N/A BAC N/A N/A N/A N/A Barbiturates 04/01/2020		Actions 2	-	test results
Patient AYASH, CHAPLES Walter, Alex Erapplas, Bob Pin, Giber Ermy, Pat Molive, Paul OShee, Saanus Pin, Giber	Program Horeshile County	08:0 06:2 05:2 09:2 01:2 02:0 02:0 02:0 02:0 02:0 02:0 02	18/2019 19/2019 19/2019 19/2019 19/2019 19/2020 19/2020 17/	02/19/2020 07/29/2019 02/22/2019 01/28/2020 01/28/2020 01/28/2020 02/07/2020 02/07/2020	Excused REFUSED POS REJECTED No Show REFUSED POS (Fourth of Let	Arranda D'Arcy Kolly Slain Christian Flatcher Arnanda D'Arcy Robert Machado Justin Manm Arnanda D'Arcy Sean Shea Robert Machado		19 -	N/A N/A N/A BAC N/A N/A N/A N/A Barbiturates 04/01/2020 Review Nor		Actions 2	•	test results

Aversys reports are provided in electronic format to suit your needs. Here are some of the types of reports currently available in Aversys:

Results	Rep	orts
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Batch Results (Summary)

Batch Results (Detailed)

Individual Screening Report

Patient History Report (Summary)

Patient History Report (Detailed)

#### **Program Analytics and Administration**

Program Results Overview Testing Calendar Participant List Frequency Group Statistics Expiring Clinical Requisitions Program Demographic Overview Individualized Scheduling Statistics Non Negative Action Notification Compliance Drugs Of Choice Overview Voucher Statistics Case Manager Activity Call Log

Patient Clinical Requisition History

# 2. Describe the instruction or training provided to treatment court staff pertaining to properly collecting a sample and completing necessary documentation.



With Averhealth, Missouri courts have access to comprehensive implementation and ongoing training to make the most of your drug testing program while staying current on drug trends and testing best practices. And you'll be trained by local representatives who will do the heavy lifting for you.

From in-person, virtual, and self-directed training, we ensure that court and program staff are well-prepared to use Aversys to manage caseloads. Through our work with many

programs over the past 27 years, we recognize that drug testing is a challenging, time-consuming task that diverts time and energy away from professionals whose time is better spent working on helping your clients.

The initial training session covers all general collection and documentation topics and is used to introduce treatment court personnel to the Averhealth area manager, review collection and testing protocols, cover the basics of drug testing, show treatment court personnel how to use Aversys and answer general questions. These sessions typically require about one hour of time and we often conduct multiple training sessions to accommodate various schedules.

Averhealth's consultation and training services are included in our partnership. This includes access to **Averhealth Academy**, our online platform filled with tutorials and self-directed training to learn how to use Aversys along with updated information on current emerging drug trends, drug testing methodology, specimen options, collection procedures, understanding test results, adulterants, dilution, cross-reactions and more.

In support of ongoing training, we are also pleased to provide access to Averhealth Academy with content curated specifically for Averhealth customers who perform their own collections. Users will learn how to set up a testing calendar, check in a patient, how to prepare a shipment and many more topics.

Here is an overview of Averhealth Academy:



To learn more about the Averhealth Academy, please see this video: https://tinyurl.com/5bphhe9r

#### **Expert Testimony**

Averhealth also provides legal affidavits (e.g., Residual/New Use) and telephone/video expert testimony. The Court simply needs to notify our designated manager when such services are needed. Consistent with sections 2.4.7 of the RFP, we can participate in staffing sessions and provide expert, unbiased testimony for hearings on substituted samples, child custody, no-show, and violation of parole hearings, among other court procedures.

With our toxicology-focused and nationally accredited lab and proven chain of custody, Averhealth has experts and thought leaders who stand ready to provide testimony about test results in courts and administrative hearings.

3. Organizational Chart - The offeror should provide an organizational chart showing the staffing and lines of authority for the key personnel to be used. The organizational chart should include (1) The relationship of service personnel to management and support personnel, (2) The names of the personnel and the working titles of each, and (3) Any proposed subcontractors including management, supervisory, and other key personnel.

a. The organizational chart should outline the team proposed for this project and the relationship of those team members to each other and to the management structure of the offeror's organization.

No subcontractors are used to provide service to Missouri courts. Instead, you will continue to be served by a Missouri-based operations team as well as our St. Louis-based lab team. Averhealth's organizational chart is as follows:



#### Averhealth Organizational Chart

- **Customer surveys:** We ask our customers to participate in surveys and interviews. We also conduct an annual survey that addresses every element of our operations.
- **Routine Site Inspections:** Inspections are conducted by the Missouri-based Averhealth manager, members of the senior management team, and members of the Training team. Inspections cover adherence to procedures (e.g., check-in, sample collection, chain of custody, etc.), physical condition of the collection site, and all other collection site operations.
- **Corrective Action Training:** Averhealth has established checks and balances designed to proactively identify mistakes. In the rare instance when a collector or laboratory technician makes a mistake, we will promptly alert the Courts and, if feasible, correct the issue. Averhealth then conducts a root cause analysis and uses the mistake as a learning opportunity to prevent future occurrences.
- **Proficiency Testing:** On a monthly basis, the Averhealth laboratory receives blind samples from the College of American Pathologists ("CAP") to test, analyze and report on. We return the analytical results to CAP, who then grades our testing performance.
- **Personnel Testing:** On an annual basis, staff complete multiple internal and external tests to verify proficiency in the relevant subject matter.
- Secret Shoppers: Averhealth recruits, hires, and trains people to pose as participants while submitting a sample. Secret Shoppers are trained in the check-in, collection and chain of custody procedures and provide a report of their findings. Secret Shoppers are also trained in substitution and adulteration tactics (they use devices) and are provided with a large amount of cash to attempt to bribe collectors. The combination of a warning that accepting a bribe will result in criminal charges with the knowledge of the Secret Shopper program serves as an effective deterrent. Moreover, strong performing specimen collectors are recognized and awarded, while the few low performing specimen collectors undergo corrective action training. The presence of our Secret Shopper programs serves as a strong motivator for all Averhealth collectors.
- **Operational Reports:** Operational reports help Averhealth to monitor adherence to random testing requirements, participant wait time, how long it takes to report a test result, and other operational procedures.

Averhealth's quality management program ensures that:

- ✓ Specimens are completely accounted for throughout the testing process, and they are properly handled, tested, and stored.
- ✓ Correct tests are performed.
- Instruments and equipment used are in good working condition.
- Reagents and chemicals are of acceptable quality.
- ✓ Testing personnel are adequately trained.
- Results are accurate and that reported data are free from technical and administrative

errors.

✓ Procedures for reporting errors are established, and any errors or inconsistencies detected are corrected as quickly as practical.

b. Total Personnel Resources - The offeror should provide information that documents the depth of resources to ensure completion of all requirements on time and on target. If the offeror has other ongoing contracts that also require personnel resources, the offeror should document how sufficient resources will be provided to the state of Missouri.

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Averhealth currently employs more than 600 professionals dedicated to administering random schedules, collecting samples, and laboratory testing. Members of the team include certified specimen collectors; PhD and master's-level toxicologists; information management, real estate, and human

resource experts; and an experienced management team. This ensures we continue to serve you with reliable statewide service and renowned national expertise.

Missouri's courts will continue to be served by an Averhealth team based in Missouri providing dedicated customer service to the Courts. We are especially proud that our renowned lab is based in Missouri, providing an even greater level of statewide support.

5. Outside United States - If any products and/or services offered under this RFP are being manufactured or performed at sites outside the United States, the offeror MUST disclose such fact and provide details in the space below or on an attached page.

Are products and/or services being manufactured or performed at sites outside the United States.

NO.

Most of Averhealth's services performed for Missouri are completed within Missouri and all services are performed within the United States. Averhealth does not perform any services at sites outside the United States.

Averhealth currently adheres to the requirements of Attachments I and II, and will continue to do so.

#### **PRICING PAGE**

#### Avertest, dba Averhealth

Service	Price	Unit
Random Program Testing <sup>1</sup>	\$25.00	Per specimen collection
EtG Testing	\$25.00	Per specimen collection
Standard Urine Panel <sup>1</sup> + ETG	\$35.00	Per specimen collection
Specialty Urine Test <sup>2</sup>	\$15.00	Per Test
Standard Oral Fluid Panel <sup>3</sup>	\$35.00	Per specimen collection
Specialty Oral Fluid Test	\$18.50	Per Test
Synthetic Marijuana (K2, Spice, etc.)	\$25.00	Per specimen collection
Bath Salts	\$35.00	Per specimen collection
Synthetic Marijuana + Bath Salts	\$50.00	Per specimen collection
Xylazine	\$35.00	Per specimen collection
Breath Alcohol Test (only)	\$15.00	Per specimen collection
Hair Test	\$150.00	Per specimen collection
LC/MS/MS Confirmation	\$25.00	Per Test
Sample Pick-up/Delivery	No Charge	Not Applicable
Training Session	\$20.00	Per Trainee
GPS Monitoring	\$10.00	Per day per client
Continuous Alcohol Monitoring	\$15.00	Per day per client
Remote Breath	\$7.50	Per day per client
Electronic Monitoring Deposit or Start-up Fee 5	\$200.00	Perclient

- 1. Standard Panel generally tests for amphetamines (methamphetamines, ecstasy), benzodiazepines, cocaine, marijuana, and opiates (hydrocodone, hydromorphone, morphine, oxycodone). The Standard Panel can be tailored to fit the specific needs of each county and may also include barbiturates, methadone, methamphetamines, PCP, or propoxyphene.
- Specialty tests include Buprenorphine (Suboxone), Carisoprodol (SOMA), Cotinine, Demerol (Meperidine), ETG, Fentanyl, Gabapentin, Ketamine, Kratom, LSD, Tramadol, and Zolpidem, among about 1,500 other substances.
- 3. Standard Oral Fluid Panel is comprised of methamphetamines, benzodiazepines, cocaine, marijuana, and opiates. The Standard Oral Fluid Panel can be tailored to fit the specific needs of each county and may also include methadone and PCP.
- 4. Specialty Oral Fluid tests include Ethanol, Buprenorphine (Suboxone), Fentanyl, , Oxycodone, and Tramadol.
- 5. No minimum number of days.

#### System requirements for electronic monitoring:

As an authorized SCRAM service provider, Averhealth provides a full suite of devices and services, including continuous transdermal alcohol monitoring bracelets, remote breath devices, modems and related equipment in quantities required by this RFP – a minimum supply of 70 bracelets and five breath testing devices. Details of the equipment follow:

#### SCRAM CAM Bracelet

The SCRAM<sup>®</sup> CAM ankle bracelet continuously collects alcohol readings through a transdermal process that measures samples every 30 minutes, 24 hours a day. Transdermal testing measures the concentration of ingested alcohol present in insensible perspiration produced and emitted by the skin.

This device then automatically transmits the data to a central source for analysis – requiring no effort from the client or Court staff. SCRAM is the only transdermal alcohol detection device that used the Drager fuel cell to analyze insensible perspiration for ethyl alcohol and convert electrical impulses into equivalent blood alcohol content (BAT). Results are upheld in Missouri and other states as evidentiary admissibility.

The ankle bracelet is attached to the client with a durable and tamper-proof strap and is worn 24 hours a day for a period determined by the Court. The bracelet transmits data via a wireless signal to the SCRAM Base Station placed in the client's home. It can communicate via a standard telephone line, SCRAM wireless system, or through the internet using an ethernet port.

The bracelet and base station will store up to a month's worth of court-admissible alcohol data, equating to about 48 tests per day, or 1,440 per month. All messages are time-stamped and stored so messages are never lost and will remain even if battery life is depleted.

For clients living in areas with weak cellular reception or who do not have access to a landline telephone or ethernet connection, data can be downloaded at our locations via SCRAM's Direct Connect device. If clients choose this option, they are required to report to an office at least once per week to download the data.

#### **SCRAM Remote Breath**

Averhealth offers the SCRAM<sup>®</sup> Remote Breath (RB) device as an additional solution for low-risk clients or for those with sustained compliance on the ankle bracelet.

Remote Breath is a handheld, wireless breath alcohol monitoring device with Automated Facial Intelligence that provides a GPS location with both taken and missed tests. It scans and automatically matches the photo of the person taking the test with the photo taken at enrollment. Remote Breath automatically turns on and prompts clients for scheduled and on-demand tests, even when out of cellular coverage. It powers itself up during test windows and tracks its location at the time of the scheduled test. The device can provide a GPS location for each completed and missed test, providing supervisors with data to verify or refute a client's claim by comparing the GPS point on a missed test with the client's location at the time of a missed test. Notification is immediate for Breath Alcohol Content and positive client identification. Data is transmitted from the SCRAM RB device to SCRAMnet software, which collects, analyzes, and stores results in a central and secure location. The software will notify your staff of any alcohol readings, tamper alerts or equipment malfunctions so you can act quickly to address any problems with clients. SCRAMnet can provide a range of reports – from a snapshot of a single event to a comprehensive review of a client's behavior over time.

Averhealth partners with Alcohol Monitoring Systems to perform all equipment maintenance, including recalibration done once per year, to ensure devices are working properly. There is no charge to the Court for routine maintenance of monitoring equipment. In addition, SCRAM CAM and RB devices relay information via SCRAMnet to enable our team to manage equipment inventory and assess the status of equipment and systems.

Averhealth maintains insurance on electronic monitoring equipment. Should it be lost, stolen or destroyed, it can be recovered or replaced at no additional cost to the Court.

#### Please list counties for which you will provide this service:

Averhealth will consider providing the above services to all counties throughout Missouri.