



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

Renewal 001

RFP NUMBER: OSCA 23-01792-10

**TITLE: Drug/Alcohol Testing Equipment,
Monitoring Equipment & Services**

ISSUE DATE: April 1, 2024

CONTACT: Trish Adamson

EMAIL: osca.contracts@courts.mo.gov

PHONE NO.: (573) 526-8818

DUE DATE: May 2, 2024

Proposal submission: Proposals may be sent electronically to osca.contracts@courts.mo.gov. 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
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: July 1, 2024 THROUGH JUNE 30, 2025

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.

SIGNATURE REQUIRED

AUTHORIZED SIGNATURE <i>Alexandra Russell</i>		Verified by pdfFiller 06/12/2024
PRINTED NAME Alexandra Russell		TITLE Owner
COMPANY NAME Integrated Monitoring Services, LLC		
MAILING ADDRESS PO Box 62		
CITY, STATE, ZIP Gooddard, KS 67052		
TELEPHONE NUMBER 316-776-4076	EMAIL ADDRESS alex@integratedmonitoringservices.com	

NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS: As submitted.		
CONTRACT NO. OSCA 24-01792-10		CONTRACT PERIOD July 1, 2024 through June 31, 2025
CONTRACTS SECTION /s/Trish Adamson	DATE 06/13/2024	DEPUTY STATE COURTS ADMINISTRATOR <i>R. Morrissey</i>

CONTRACT RENEWAL 001 to OSCA 23-01792-XX

TITLE: Drug/Alcohol Testing Equipment, Monitoring Equipment, & Services

Contract renewal period: July 1, 2024, through June 30, 2025

The Office of State Courts Administrator desires to renew the above referenced contract.

The Office of State Courts Administrator (OSCA) requests there not be any increase in cost for this contract period.

A completed Pricing Page must be returned with the completed and signed cover page of this renewal document prior to full execution by OSCA.

To be a contracted collector for the court(s), all individuals must adhere to the revised Missouri Collector Standards (Attachment 1)

Individuals who have submitted the Collector Guideline Acceptance Form under this contract do not need to submit another form at this time.

To be a contracted collector for the judiciary, all individuals must adhere to the Missouri Collector Standards, Attachment 1. Any individual providing collection services must have submitted an Exhibit A, Collector Guideline Acceptance Form, attached below, and all required supporting documents, prior to performing collection services under this contract. Exhibit A must only be submitted with this renewal document for new collectors.

By completing, signing and returning Exhibit A, you, as well as each collector, are verifying you have read and will abide by these Missouri Guidelines for Drug/Alcohol Collections.

Background Check Procedures are provided below as well at Attachment 2.

All other terms, conditions and provisions of the previous contract period shall remain the same and apply hereto.

PRICING PAGE

The offeror shall provide the firm, fixed pricing information for each product and/or service to be provided in accordance with the provisions and requirements specified herein. All costs associated with providing the products and/or services required herein shall be included in the prices.

PRICE: The offeror shall provide a listing of each product and/or service with a firm, fixed price for each product and/or service.

Effective Date: The effective date for contracts awarded as a result of this renewal shall be from date of award through June 30, 2025.

More lines/additional pages may be added, if needed.

OFFEROR NAME: Integrated Monitoring Services, LLC

<u>iSober- Portable Alcohol Monitoring</u>	Product/Service	\$ <u>7/ day</u>	firm, fixed price per each unit
<u>Smart Tag- GPS Monitoring</u>	Product/Service	\$ <u>8/ day</u>	firm, fixed price per each unit
<u>Alco Tag- Transdermal Alcohol and GPS Monitoring</u>	Product/Service	\$ <u>13/ day</u>	firm, fixed price per each unit
_____	Product/Service	\$ _____	firm, fixed price per each unit
_____	Product/Service	\$ _____	firm, fixed price per each unit
_____	Product/Service	\$ _____	firm, fixed price per each unit
_____	Product/Service	\$ _____	firm, fixed price per each unit

Electronic Monitoring

Pricing per participant

per day: iSober- \$7/ day.... Smart Tag- \$8/ day.... Alco Tag- \$13/day

per week: iSober- \$49/ week.... Smart Tag- \$56/ week.... Alco Tag- \$91/ week

per month: iSober- \$210/ month.... Smart Tag- \$240/ month.... Alco Tag- \$390/ month

Is there a minimum number of days? Yes _____ No x _____

If yes, please indicate number of days: _____

Deposit or Start Up fee required? Yes x No _____

If yes, what is the cost? If a local enrollment agent is needed for a program, a \$60 fee will be charged per participant (fee covers enrollment and removal service).

Please list system requirements, such as single land phone line, water resistance, range of coverage etc.:

A smart phone is required for the iSober device. Participants must have a reliable source of electricity to charge the Smart Tag and Alco Tag daily.

Please list counties for which you will provide this service: All counties.

Pricing Page, continued

COLLECTOR SERVICES PRICING

OFFEROR NAME: _____

The offeror should quote a price per hour or per test. Only one will be accepted.
The price shall not change during the contract period.

Firm, fixed price for collector services performed: \$_____per hour, or

\$_____per test

For the following county and circuit:

County:_____ Circuit: _____

County:_____ Circuit: _____

County:_____ Circuit: _____

County:_____ Circuit: _____

County:_____ Circuit: _____

County:_____ Circuit: _____

EXHIBIT A

OFFEROR NAME: _____

OSCA 23-01792

Collector Guideline Acceptance Form

Office of State Courts Administrator



I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

- ☐ I am a commissioned law enforcement officer by the state of Missouri.
- ☐ I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.
- ☐ I am not a commissioned officer.
- ☐ I have provided a completed background check, and
- ☐ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results

Collector Printed name

Signature

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the Judiciary shall be liable for their actions in performance of these duties.

Drug Court Judge/Coordinator

Circuit

Date

ATTACHMENT 2

Non-Commissioned Collector Background Checks and Family Care Safety Registry

The following are the procedures individuals must complete in order to be considered for a contract for collector services with OSCA and the court.

Any non-commissioned individual who collects specimens for testing **must** have completed **Criminal BackgroundChecks** as follows:

1. The Missouri Automated Criminal History System (MACHS) Fingerprint Search Portal allows any member of the public to schedule an appointment to be fingerprinted through Cogent, the state fingerprint services offeror, for a fingerprint-based criminal background check. Cogent will utilize electronic image capturing (also known as livescan) to capture an applicant's fingerprints electronically and transmit them to the MSHP for processing. Cogent does not receive or have access to criminal history records.
2. Print the Missouri State Highway Patrol Applicant Fingerprint Services of Missouri form below, form SHP-984 regarding fingerprinting and following the directions it contains. When completing the online information and when asked for a Registration Number, input 7236. This code **MUST** be used, or your background check will be sent to another agency and you will have to pay for your fingerprinting again!
3. Many questions regarding the fingerprinting process can be answered using the following website <https://www.machs.mo.gov/MACHSFP/faqMain.html>
4. A copy of the NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS is included below for your information as well.

ATTACHMENT 2, continued

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights, which are discussed below.

- You must be provided written notification (includes electronic notification, but excludes verbal notification) that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefits must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure, or standard established by the National Crime Prevention and Privacy Compact Council.

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.).

ATTACHMENT 2, continued

Family Care Safety Registry (FCSR)

Non-commissioned collectors must register with the Family Care Safety Registry and provide results of the background screening to OSCA. Contract renewals will not be processed without the FCSR documentation. The contractor's personal information must be entered into the various fields on the registration form (Name, DOB, SSN, etc.). FCSR screenings contain Missouri data only.

How to Register

A person may register two ways:

1. **Online Registration with the FCSR** is quick and easy. All an individual need is Internet access, their Social Security number and email address, and a valid credit or debit card for payment of the fee. Fees and online registration for the Family Care Safety Registry can be found at:

<http://health.mo.gov/safety/fcsr/index.php>
2. Mail a **Worker Registration Form**, a photocopy of the Social Security card, and a check or money order for the registration fee to the Missouri Department of Health and Senior Services, Fee Receipts Unit, P.O. Box 570, Jefferson City, MO, 65102. Mailed forms are processed in the order received. Registration forms can also be mailed using a fillable pdf version of the form, which can be found at:

<http://health.mo.gov/safety/fcsr/pdf/WorkerRegistration.pdf>

The registration form must be signed by the contractor in blue or black ink. The completed registration form, along with a photocopy of the contractor's Social Security card and payment, should be mailed to:

Missouri Department of Health and Senior Services
Family Care Safety Registry
P.O. Box 570
Jefferson City, MO 65102 – 0570

Requesting Background Information for Registered Individual

The FCSR maintains a toll-free call center to request background screenings for employment purposes. Registered collectors should contact the FCSR toll free at **1-866-422-6872** (8:00 a.m. - 3:00 p.m., M-F). The registered collector should request to be sent background screening results to an email address the collector provides. The results should be received by the collector in a few minutes and not more than 24 hours. These results should be sent to OSCA with the Exhibit A included herein. **Contract renewals will not be processed without this documentation.**

Registrant Responsibilities

It is the responsibility of the registrant to contact the FCSR with any name or address changes.