



## Solicitation Information

July 28, 2021

**RFP #7651812**

**TITLE: Drug Testing Program – Adult Correctional Institutions – DOC**

**Submission Deadline: August 25, 2021 11:00 AM**

**PRE-BID/ PROPOSAL CONFERENCE: NO**

**MANDATORY:**

If YES, any Vendor who intends to submit a bid proposal in response to this solicitation must have its designated representative attend the mandatory Pre-Bid/ Proposal Conference. The representative must register at the Pre-Bid/ Proposal Conference and disclose the identity of the vendor whom he/she represents. A vendor's failure to attend and register at the mandatory Pre-Bid/ Proposal Conference shall result in disqualification of the vendor's bid proposals as non-responsive to the solicitation.

**DATE:**

**LOCATION:**

Questions concerning this solicitation must be received by the Division of Purchases at [doa.purquestions15@purchasing.ri.gov](mailto:doa.purquestions15@purchasing.ri.gov) no later than **August 11, 2021 @ 11:00 AM EST**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the **RFP #7651812** on all correspondence. Questions received, if any, will be posted on the Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

**BID SURETY BOND REQUIRED: NO**

**PAYMENT AND PERFORMANCE BOND REQUIRED: NO**

Robert DeAngelis, Senior Buyer

### **Note to Applicants:**

- Vendors must register in RIVIP at the Division of Purchases' website at <https://www.purchasing.ri.gov/RIVIP/VendorRegistration.aspx>.
- Proposals received without a completed RIVIP Vendor Certification Cover Form attached may result in disqualification.

**THIS PAGE IS NOT A RIVIP VENDOR CERTIFICATION COVER**

## **COVID-19 EMERGENCY PROTOCOL FOR BID OPENINGS**

Vendors and the public are advised that due to Covid-19 emergency social distancing requirements bid openings at the Division of Purchases shall be conducted via live streaming on the ZOOM website/application. Vendors and the public shall not be permitted to enter the Division of Purchases to attend bid openings. Vendors and the public who attend bid openings via live streaming shall be required to identify themselves and a record of all such attendees shall be maintained by the Division of Purchases. Vendor bid proposals shall be opened and read aloud at the date and time listed herein. The results of bid solicitations requiring a public copy for public works projects shall be posted on the Division of Purchases website as soon as possible after the bid opening. For RFP solicitations only vendor names shall be read aloud at the opening.

Vendors and the public are further advised that visitor access to the Powers Building at One Capitol Hill, Providence, RI requires pre-screening at the entrance to the building. In accordance with the Governor's Executive Order(s) and Department of Health emergency regulations all visitors to the Powers Building must wear a cloth mask which covers the nose and mouth. Vendors delivering bid proposals to the Division of Purchases should allow sufficient time for the pre-screening process. The Division of Purchases assumes no responsibility for delays caused by the screening process or any other reason. Vendors are solely responsible for on time delivery of bid proposals. The Division of Purchases shall not accept late bids for any reason.

### **BID OPENING ZOOM INFORMATION**

Division of Purchases is inviting you to a scheduled Zoom meeting.

Topic: 7651812

Time: Aug 25, 2021 11:00 AM Eastern Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/89361443621?pwd=d0tYWExzQVZGODhobUIINVNPeHFrdz09>

Meeting ID: 893 6144 3621

Passcode: 549242

One tap mobile

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Dial by your location

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+1 346 248 7799 US (Houston)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

888 788 0099 US Toll-free

833 548 0276 US Toll-free  
833 548 0282 US Toll-free  
877 853 5247 US Toll-free

Meeting ID: 893 6144 3621

Passcode: 549242

Find your local number: <https://us02web.zoom.us/j/89361443621>

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## SECTION 1: INTRODUCTION

The Rhode Island Department of Administration/Division of Purchases, on behalf of the Rhode Island Department of Corrections (RIDOC) is soliciting proposals from qualified firms to provide a complete testing system for drugs of abuse in accordance with the terms of this Request for Proposals (“RFP”) and the State’s General Conditions of Purchase, which may be obtained at the Division of Purchases’ website at [www.ridop.ri.gov](http://www.ridop.ri.gov).

The initial contract period will begin approximately January 1, 2022 and will be for a term of five years and expire on December 31,2026.

This is a Request for Proposals, not a Request for Quotes. Responses will be evaluated on the basis of the relative merits of the proposal, in addition to cost; there will be no public opening and reading of responses received by the Division of Purchases pursuant to this solicitation, other than to name those vendors who have submitted proposals.

### **Instructions and Notifications to Vendors**

1. Potential vendors are advised to review all sections of this RFP carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
2. Alternative approaches and/or methodologies to accomplish the desired or intended results of this RFP are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this RFP may be rejected as being non-responsive.
3. All costs associated with developing or submitting a proposal in response to this RFP or for providing oral or written clarification of its content, shall be borne by the vendor. The State assumes no responsibility for these costs even if the RFP is cancelled or continued.
4. Proposals are considered to be irrevocable for a period of not less than 180 days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
5. All pricing submitted will be considered to be firm and fixed unless otherwise indicated in the proposal.
6. It is intended that an award pursuant to this RFP will be made to a prime vendor, or prime vendors in the various categories, who will assume responsibility for all aspects of the work. Subcontracts are permitted, provided that their use is clearly indicated in the vendor’s proposal and the subcontractor(s) to be used is identified in the proposal.

7. The purchase of goods and/or services under an award made pursuant to this RFP will be contingent on the availability of appropriated funds.
8. Vendors are advised that all materials submitted to the Division of Purchases for consideration in response to this RFP may be considered to be public records as defined in R. I. Gen. Laws § 38-2-1, *et seq.* and may be released for inspection upon request once an award has been made.

Any information submitted in response to this RFP that a vendor believes are trade secrets or commercial or financial information which is of a privileged or confidential nature should be clearly marked as such. The vendor should provide a brief explanation as to why each portion of information that is marked should be withheld from public disclosure. Vendors are advised that the Division of Purchases may release records marked confidential by a vendor upon a public records request if the State determines the marked information does not fall within the category of trade secrets or commercial or financial information which is of a privileged or confidential nature.

9. Interested parties are instructed to peruse the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP.
10. By submission of proposals in response to this RFP vendors agree to comply with R. I. General Laws § 28-5.1-10 which mandates that vendors/subcontractors doing business with the State of Rhode Island exercise the same commitment to equal opportunity as prevails under Federal contracts controlled by Federal Executive Orders 11246, 11625 and 11375.

Vendors are required to ensure that they, and any subcontractors awarded a subcontract under this RFP, undertake or continue programs to ensure that minority group members, women, and persons with disabilities are afforded equal employment opportunities without discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability.

Vendors and subcontractors who do more than \$10,000 in government business in one year are prohibited from engaging in employment discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability, and are required to submit an “Affirmative Action Policy Statement.”

Vendors with 50 or more employees and \$50,000 or more in government contracts must prepare a written “Affirmative Action Plan” prior to issuance of a purchase order.

- a. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation.

- b. Vendors further agree, where applicable, to complete the “Contract Compliance Report”( <http://odeo.ri.gov/documents/odeo-eeo-contract-compliancereport.pdf>), as well as the “Certificate of Compliance” ( <http://odeo.ri.gov/documents/odeo-eeo-certificate-of-compliance.pdf>), and submit both documents, along with their Affirmative Action Plan or an Affirmative Action Policy Statement, prior to issuance of a purchase order.

For further information, contact the Rhode Island Equal Employment Opportunity Office via e-mail at [odeo.eeo@doa.ri.gov](mailto:odeo.eeo@doa.ri.gov).

11. In accordance with R. I. Gen. Laws § 7-1.2-1401 no foreign corporation has the right to transact business in Rhode Island until it has procured a certificate of authority so to do from the Secretary of State. This is a requirement only of the successful vendor(s). For further information, contact the Secretary of State at (401-222-3040).
12. In accordance with R. I. Gen. Laws §§ 37-14.1-1 and 37-2.2-1 it is the policy of the State to support the fullest possible participation of firms owned and controlled by minorities (MBEs) and women (WBEs) and to support the fullest possible participation of small disadvantaged businesses owned and controlled by persons with disabilities (Disability Business Enterprises a/k/a “DisBE”)(collectively, MBEs, WBEs, and DisBEs are referred to herein as ISBEs) in the performance of State procurements and projects. As part of the evaluation process, vendors will be scored and receive points based upon their proposed ISBE utilization rate in accordance with 150-RICR-90-10-1, “Regulations Governing Participation by Small Business Enterprises in State Purchases of Goods and Services and Public Works Projects”. As a condition of contract award vendors shall agree to meet or exceed their proposed ISBE utilization rate and that the rate shall apply to the total contract price, inclusive of all modifications and amendments. Vendors shall submit their ISBE participation rate on the enclosed form entitled “MBE, WBE and/or DisBE Plan Form”, which shall be submitted in a separate, sealed envelope as part of the proposal. ISBE participation credit will only be granted for ISBEs that are duly certified as MBEs or WBEs by the State of Rhode Island, Department of Administration, Office of Diversity, Equity and Opportunity or firms certified as DisBEs by the Governor’s Commission on Disabilities. The current directory of firms certified as MBEs or WBEs may be accessed at <http://odeo.ri.gov/offices/mbeco/mbe-wbe.php>. Information regarding DisBEs may be accessed at [www.gcd.ri.gov](http://www.gcd.ri.gov).

For further information, visit the Office of Diversity, Equity & Opportunity’s website, at <http://odeo.ri.gov> and see R.I. Gen. Laws Ch. 37-14.1, R.I. Gen. Laws Ch. 37-2.2, and 150-RICR-90-10-1. The Office of Diversity, Equity & Opportunity may be contacted at, (401) 574-8670 or via email [Dorinda.Keene@doa.ri.gov](mailto:Dorinda.Keene@doa.ri.gov)

13. In the RIVIP Vendor Certification Cover Form, Section 4, Question 11, bidders shall certify agreement to the State’s contract terms. However, in accordance with Section 220-RICR-30-00-13.3(C)(3) of the General Conditions, the Vendor may submit in their bid or proposal,

qualified or conditional offers which impose limitations of the Vendor’s liability or modify the requirements of the solicitation, offers for alternate specifications, or offers which are made subject to different terms and conditions, including form contracts, other than those specified by the State.” However, qualified or conditional offers “may be, at the sole discretion of the State Purchasing Agent:

- a. Rejected as being non-responsive; or,
- b. Set aside in favor of the requirements set forth in the solicitation (with the consent of the Vendor); or,
- c. Accepted, if the State Purchasing Agent determines in writing that such acceptance is in the best interest of the State.”

By submitting a conditional or qualified offer, the Vendor bears the risk of their bid or proposal being considered non-responsive. In the event the State receives a conditional or qualified offer, the State reserves the right to adjust evaluation points in an RFP procurement, conduct a best and final offer process offering the same terms to all vendors, and/or reject a qualified/conditional proposal as being non-responsive at any time during the review process. The Vendor should not assume that any further negotiation will occur upon selection.

14. **Insurance Requirements** – In accordance with this solicitation, or as outlined in Section 13.19 of the General Conditions of Purchase, found at <https://rules.sos.ri.gov/regulations/part/220-30-00-13> and General Conditions - Addendum A found at <https://www.ridop.ri.gov/documents/general-conditions-addendum-a.pdf>, the following insurance coverage shall be required of the awarded vendor(s):

***General Requirements:***

- 14a)  Liability - combined single limit of \$1,000,000 per occurrence, \$1,000,000 general aggregate and \$1,000,000 products/completed operations aggregate.
- 14b)  Workers compensation - \$100,000 each accident, \$100,000 disease or policy limit and \$100,000 each employee.
- 14c)  Automobile liability - \$1,000,000 each occurrence combined single limit.
- 14d)  Crime - \$500,000 per occurrence or 50% of contract amount, whichever is greater.

***Professional Services:***

- 14e)  Professional liability (“errors and omissions”) - \$2,000,000 per occurrence, \$2,000,000 annual aggregate.
- 14f)  Environmental/Pollution Liability when past, present or future hazard is possible - \$1,000,000 per occurrence and \$2,000,000 aggregate.



- 14g)  Working with Children, Elderly or Disabled Persons – Physical Abuse and Molestation Liability Insurance - \$1 Million per occurrence.

***Information Technology and/or Cyber/Privacy:***

- 14h)  Technology Errors and Omissions - Combined single limit per occurrence shall not be less than \$5,000,000. Annual aggregate limit shall not be less than \$5,000,000.

- 14i)  Information Technology Cyber/Privacy – minimum limits of \$5,000,000 per occurrence and \$5,000,000 annual aggregate. If Contract Party provides:
- a)  key back office services Contract Party shall have a minimum limit of \$10,000,000 per occurrence and \$10,000,000 annual aggregate.
  - b)  if Contract Party has access to Protected Health Information as defined in HIPAA and its implementing regulations, Personal Information as defined in in R.I. Gen. Laws § 11-49.3-1, et seq., or as otherwise defined in the Contract (together Confidential Information”), Contract Party shall have as a minimum the per occurrence, per annual aggregate, the total rounded product of projected number of persons data multiplied by \$25 per person breach response expense per occurrence; but no less than \$5,000,000 per occurrence, per annual aggregate; or,
  - c)  if the Contract Party provides or has access to mission critical services, network architecture and/or the totality of confidential data \$20,000,000 per occurrence and in the annual aggregate.

***Other:***

Specify insurance type and minimum coverage required, e.g. builder’s risk insurance, vessel operation (marine or aircraft):

- 14j)  Other - Specify insurance type and minimum coverage required

15. HIPAA - Under HIPAA, a “business associate” is a person or entity, other than a member of the workforce of a HIPAA covered entity, who performs functions or activities on behalf of, or provides certain services to, a HIPAA covered entity that involves access by the business associate to HIPAA protected health information. A “business associate” also is a subcontractor that creates, receives, maintains, or transmits HIPAA protected health information on behalf of another business associate. The HIPAA rules generally require that HIPAA covered entities and business associates enter into contracts with their business associates to ensure that the business associates will appropriately safeguard

HIPAA protected health information. Therefore, if a Vendor qualifies as a business associate, it will be required to sign a HIPAA business associate agreement.

## **SECTION 2: BACKGROUND**

The Rhode Island Department of Corrections (RIDOC) is a centralized, comprehensive correctional system for adult male and female offenders, located on the Pastore Complex in Cranston, R.I. There are approximately 2,300 sentenced and awaiting trial inmates housed on the Pastore Complex. These inmates are housed in six facilities, Minimum Security, Medium Security, Maximum Security, High Security, Intake Service Center, a Women's Facility plus a Home Confinement Unit. RIDOC requires testing of the inmate population on a random basis, through drug treatment programs, and for cause. It is the responsibility for RIDOC to deter drug usage or abuse in these facilities.

## **SECTION 2: SCOPE OF WORK REQUIREMENTS**

### **SCOPE:**

The Rhode Island Department of Corrections expects to enter into a five (5) year contract with a vendor to provide a complete testing system for drugs of abuse capable of supporting a program of up to 10,000 to 20,000 urine specimens per year.

This is to include one (1) new drugs of abuse analyzer capable of testing for up to ten drugs of abuse per specimen.

The selected vendor will provide and install all equipment, provide reagents, assays, calibrators and controls and control materials related to the operating the analyzer on a daily basis.

The selected vendor will also be responsible for providing training to staff responsible for the operation and maintenance of the drug testing analyzer.

### **REQUIREMENTS:**

#### **ANALYZER:**

- 1 (one) new Automated Drug Abuse Analyzer with reagents, assays, calibrators, controls, and ancillaries available from a single source. Drugs of abuse analyzer must be a new analyzer from an authorized instrument distributor or the direct manufacturer.

- Analyzer that is highly accurate with correlation results to GC/MS confirmation in excess of 98% and does not have a carryover affect from sample to sample in panel or random mode.
- A complete random-access instrument capable of performing 300 tests per hour. Based on the estimated usage of 1000 to 2000 urine specimens per month for up to ten (10) abused drugs per urine in a seven (7) hour workday in a five (5) day week.
- Run in excess of sixty (60) samples for ten (10) drugs of abuse without the need to initiate a new sample in panel or random mode to minimize operator intervention time.
- Allow the operator to utilize pre-coded bar code labels to program urine specimens into the analyzer.
- Does not require the operator to re-pour or re-pipette urine samples when changing assays.
- Analyzer must be able to run manufactured-produced assays currently available for Amphetamines, Barbiturates, Benzodiazepines, Cannabinoids, Cocaine, Methadone, Opiates, Buprenorphine, 6AM-Acetylmorphine, Fentanyl, ETG-Ethyl Glucuronide, Methadone, Propoxyphene on a regular basis.
- Analyzer is capable of programming and processing assays and reagents beyond those listed above.
- Drug of abuse analyzer must produce a printout which collates all test results for each urine sample. The identification number for all results on that urine must report “Detected/Not Detected” or “Positive/Negative” for each result.
- Drug of abuse analyzer must accept a pre-programmed identification number of 12 digits to guarantee a strict chain of custody for each specimen and its printed results. Analyzer must have bar-code reading capabilities.
- Produce up to 30 specimen results per hour on a ten (10) drug screening.
- Drug of abuse analyzer must accept a pre-programmed identification number of 12 digits or alternative characters to guarantee chain of custody for each specimen and its printed results. Analyzer must be able to have bar-code reading capabilities.
- Printout test results as they become available and when testing is completed.

## **REAGENTS**

- Vendor is responsible for ensuring that each lot of reagents is tested for all cross-reactives and interference’s list in package insert to assure proper

product integrity and quality control of reagents to mitigate liability considerations.

- The following assays must be available for immediate shipment from manufacturer, with required cut-off concentrations:

<u>Amphetamine</u>	<u>500ng/ml</u>
<u>Barbiturate Assay</u>	<u>200ng/ml</u>
<u>Benzodiazepine</u>	<u>200ng/ml</u>
<u>6AM-Acetylmorphine</u>	<u>10ng/ml</u>
<u>Buprenorphine</u>	<u>5ng/ml</u>
<u>Cannabinoid 50 ng Assay</u>	<u>50ng/ml</u>
<u>Cocaine Metabolite Assay</u>	<u>150ng/ml</u>
<u>Creatinine</u>	
<u>Ecstasy Assay</u>	<u>500ng/ml</u>
<u>Fentanyl</u>	<u>1ng/ml</u>
<u>Methadone Assay</u>	<u>300ng/ml</u>
<u>Opiate Assay</u>	<u>300ng/ml</u>
<u>Propoxyphene Assay</u>	<u>300ng/ml</u>
<u>ETG Alcohol</u>	<u>1000ng/ml</u>

- Requires Fentanyl assay to be sensitive to the main metabolite Norfentanyl detected at 15 ng/ml.
- Each drug of abuse assay must be calibrated through the use of a single spiked calibrator at the cut-off concentration automatically run in duplicate, compare and average the results so as to guarantee precision at the cut-off.
- The manufacturer must have proven reliability for the technology employed in testing for drugs of abuse in urine, as evidenced in scientific and legal literature and furnish such literature with RFP.
- All assays must have at least six-week stability when properly stored.

## **DATA MANAGEMENT**

- Vendor must be able to integrate new analyzer data with the current bar-code reader data management system processor and existing (SATS) Substance Abuse Treatment Services data base. SATS program contains pertinent information to the inmate population and establishes a strict chain of custody.

## **OTHER REQUIREMENTS**

- Price quote for this solicitation should include all installation and training as part of the proposal package.

- Support and service must be provided by an instrument manufacturer or authorized service representative. Vendor will provide all service and maintenance for analyzer, with a 24-hour response time, for the term of the contract. Repair time must not exceed 72 hours without a replacement analyzer in place.
- Analyzer will be installed by trained personnel and installed as per manufacturer's documented protocol and validation process.
- Analyzer will have manufacturer's parts for all preventative maintenance done on the analyzer and any needed service.
- Analyzer will receive all software upgrades and user updates issued by the manufacturer as soon as available.
- Vendor will offer 24 hour per day, 7 days a week technical support via toll free telephone number. Results of technical support must be faxed within 24 hours to user number along with vendor tracking number.
- Vendor must provide user with cross-reference drug of abuse listing for each assay.
- Cross-reference drug of abuse listing for each assay.
- Upon written notification of award, the vendor will install analyzer within 30 days and schedule training to coordinate with installation, including training RIDOC employees to be master trainers capable of certifying other RIDOC employees.
- Training must be done by the manufacturer or authorized distributor. If such training is held at a manufacturer's off-site training facility, manufacturer will provide training for at least two individuals per analyzer placed. Such training to include: all transportation (ground/air) to and from training site and customer facility, all lodging, all meals, and all training materials. If the manufacturer provides onsite training, a minimum of three individuals will be afforded the necessary training.

## SECTION 4: PROPOSAL

### A. Technical Proposal

Narrative and format: The proposal should address specifically each of the following elements:

#### **Staff Qualifications:**

Vendor should be an authorized instrument distributor or the direct manufacturer. Analyzer must be installed by trained personnel and installed as per manufacturer's protocol and validation process.

- Provide information to support above requirements.
- Describe qualifications and experience of key staff who will be involved in this project
- Provide qualifications for training RIDOC staff in the operation and maintenance of the drug testing analyzer.

**Capability, Capacity, and Qualifications of the Vendor:**

- Provide a detailed description of the vendor’s experience in providing a complete testing system for drugs of abuse. Response should also include information detailing three (3) similar projects undertaken and/or similar clients served in relation with testing of drugs of abuse.
- Provide evidence of proven reliability for the technology employed in testing for drugs of abuse in urine, as evidenced in scientific and legal literature and furnish such literature with RFP response.

**Work Plan:**

- Provide a detailed workplan for the provision, installation and training of the new testing analyzer and all related functions and capabilities.
- Provide details for the provision of reagents required for testing; calibrators, controls and consumables shall also be provided at no additional cost.
- Provide details for the provision of one (1) data management workstation with related equipment, software support and maintenance. Data management software must integrate with current management software utilized by Department of Corrections (SATS).

**Approach/Methodology:**

Provide the methodology and procedures to be used to provide a complete testing system for drugs of abuse. Include a project plan, timelines, and deliverables.

**B. Cost Proposal**

**Detailed Budget and Budget Narrative:**

Vendor responses should include a Budget Narrative. The Budget Narrative must explain the basis and rationale of the fee structure to support your cost proposal.

The cost proposal should be reflective of all costs to successfully implement the proposed complete testing system for drugs of abuse and include **costs for all years of the expected contract term.**

In addition, cost proposal to include the following required services:

**A. AUTOMATED DRUG ABUSE ANALYZER:**

As per requirements outlined in above Section 3

**B. REAGENT COST**

As per requirements outlined in above Section 3 and:

Cost per test = cost of reagent kit divided by the number of test that the kit will yield using proposed equipment. Bidders will provide documentation of the number of tests provided by their reagent test kits.

<b>Reagent</b>	<b>Reagent #</b>	<b>Cost of Reagent kit</b>	<b># Per Kit</b>	<b>Cost Per Test</b>
<b>6AM Heroin MTB.</b>		\$		\$
<b>Amphetamines</b>		\$		\$
<b>Barbiturates</b>		\$		\$
<b>Benzodiazepines</b>		\$		\$
<b>Buprenorphine</b>		\$		\$
<b>Cocaine</b>		\$		\$
<b>Creatinine</b>		\$		\$
<b>Ecstasy</b>		\$		\$
<b>Ethyl Alcohol</b>		\$		\$
<b>Fentanyl</b>		\$		\$
<b>Methadone</b>		\$		\$
<b>Opiates</b>		\$		\$
<b>Propoxyphene</b>		\$		\$
<b>THC 50</b>		\$		\$

**C. CALIBRATION AND CONTROL COST:**

Per test calibrator cost using all calibrators (negative, low and medium). Cost per calibration = cost of calibration kit divided by the number of calibrations that the kit will yield using proposed equipment. (Example: A kit costing \$1000.00 which yield 100 tests, 1000/100 or \$10.00 per cost per test). If calibration materials are included as part of the reagent kits, indicate “included above” in this section.

<b>Calibrator</b>	<b>Calibrator #</b>	<b>Cost of Calibration Kit</b>	<b># of Calibrators Per Kit</b>	<b>Cost Per calibration</b>
<b>6AM Heroin MTB.</b>		\$		\$
<b>Amphetamines</b>		\$		\$
<b>Barbiturates</b>		\$		\$
<b>Benzodiazepines</b>		\$		\$
<b>Buprenorphine</b>		\$		\$
<b>Cocaine</b>		\$		\$
<b>Creatinine</b>		\$		\$
<b>Ecstasy</b>		\$		\$
<b>Ethyl Alcohol</b>		\$		\$
<b>Fentanyl</b>		\$		\$
<b>Methadone</b>		\$		\$
<b>Opiates</b>		\$		\$
<b>Propoxyphene</b>		\$		\$
<b>THC 50</b>		\$		\$



### C. ISBE Proposal

See Appendix A for information and the MBE, WBE and/or Disability Business Enterprise Participation Plan form(s). Vendors are required to complete, sign and submit these form(s) with their overall proposal in a sealed envelope. Please complete separate form(s) for each MBE, WBE and/or Disability Business Enterprise subcontractor to be utilized on the solicitation.

## SECTION 5: EVALUATION AND SELECTION

Proposals shall be reviewed by a technical evaluation committee (“TEC”) comprised of staff from State agencies. The TEC first shall consider technical proposals.

Technical proposals must receive a minimum of 60 (80%) out of a maximum of 75 points to advance to the cost evaluation phase. Technical proposals scoring less than 60 points shall not have the accompanying cost or ISBE participation proposals opened or evaluated; such proposals shall not receive further consideration.

Technical proposals scoring 60 points or higher shall have the cost proposals evaluated and assigned up to a maximum of 25 points bringing the total potential evaluation score to 100 points. As total possible evaluation points are determined, vendor ISBE proposals shall be evaluated and assigned up to 6 bonus points for ISBE participation.

The Division of Purchases reserves the right to select the vendor(s) or firm(s) (“vendor”) that it deems to be most qualified to provide the goods and/or services as specified herein; and, conversely, reserves the right to cancel the solicitation in its entirety in its sole discretion.

Proposals shall be reviewed and scored based upon the following criteria:

<b>Criteria</b>	<b>Possible Points</b>
Staff Qualifications	15 Points
Capability, Capacity, and Qualifications of the Vendor	25 Points
Work Plan	20 Points
Approach/Methodology	15 Points
<b>Total Possible Technical Points</b>	<b>75 Points</b>
Cost proposal*	25 Points

<b>Total Possible Evaluation Points</b>	<b>100 Points</b>
ISBE Participation**	6 Bonus Points
<b>Total Possible Points</b>	<b>106 Points</b>

**\*Cost Proposal Evaluation:**

The vendor with the lowest cost proposal shall receive one hundred percent (100%) of the available points for cost. All other vendors shall be awarded cost points based upon the following formula:

$$(\text{lowest cost proposal} / \text{vendor's cost proposal}) \times \text{available points}$$

For example: If the vendor with the lowest cost proposal (Vendor A) bids \$65,000 and Vendor B bids \$100,000 for monthly costs and service fees and the total points available are thirty (30), Vendor B's cost points are calculated as follows:

$$\$65,000 / \$100,000 \times 30 = 19.5$$

**\*\*ISBE Participation Evaluation:**

**A. Calculation of ISBE Participation Rate**

1. **ISBE Participation Rate for Non-ISBE Vendors.** The ISBE participation rate for non-ISBE vendors shall be expressed as a percentage and shall be calculated by dividing the amount of non-ISBE vendor's total contract price that will be subcontracted to ISBEs by the non-ISBE vendor's total contract price. For example, if the non-ISBE's total contract price is \$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs, the non-ISBE's ISBE participation rate would be 12%.
2. **ISBE Participation Rate for ISBE Vendors.** The ISBE participation rate for ISBE vendors shall be expressed as a percentage and shall be calculated by dividing the amount of the ISBE vendor's total contract price that will be subcontracted to ISBEs and the amount that will be self-performed by the ISBE vendor by the ISBE vendor's total contract price. For example, if the ISBE vendor's total contract price is \$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs and will perform a total of \$8,000.00 of the work itself, the ISBE vendor's ISBE participation rate would be 20%.

**B. Points for ISBE Participation Rate:**

The vendor with the highest ISBE participation rate shall receive the maximum ISBE participation points. All other vendors shall receive ISBE participation points by applying the following formula:

$$(\text{Vendor's ISBE participation rate} \div \text{Highest ISBE participation rate}$$

$$\times \text{Maximum ISBE participation points})$$

For example, assuming the weight given by the RFP to ISBE participation is 6 points, if Vendor A has the highest ISBE participation rate at 20% and Vendor B's ISBE participation rate is 12%, Vendor A will receive the maximum 6 points and Vendor B will receive  $(12\% \div 20\%) \times 6$  which equals 3.6 points.

#### General Evaluation:

Points shall be assigned based on the vendor's clear demonstration of the ability to provide the requested goods and/or services. Vendors may be required to submit additional written information or be asked to make an oral presentation before the TEC to clarify statements made in the proposal.

### SECTION 6: QUESTIONS

Questions concerning this solicitation must be e-mailed to the Division of Purchases at [doa.purquestions15@purchasing.ri.gov](mailto:doa.purquestions15@purchasing.ri.gov) no later than the date and time indicated on page one of this solicitation. No other contact with State parties is permitted. Please reference **RFP #7651812** on all correspondence. Questions should be submitted in writing in a Microsoft Word attachment in a narrative format with no tables. Answers to questions received, if any, shall be posted on the Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to monitor the Division of Purchases website for any procurement related postings such as addenda. If technical assistance is required, call the Help Desk at (401) 574-8100.

### SECTION 7: PROPOSAL CONTENTS

Proposals shall include the following:

1. One completed and signed RIVIP Vendor Certification Cover Form (included in the original copy only) downloaded from the Division of Purchases website at [www.ridop.ri.gov](http://www.ridop.ri.gov). *Do not include any copies in the Technical or Cost proposals.*
2. Two (2) completed original and copy versions, signed and sealed Appendix A. MBE, WBE, and/or Disability Business Enterprise Participation Plan. Please complete separate forms for each MBE, WBE or Disability Business Enterprise subcontractor/vendor to be utilized on the solicitation. *Do not include any copies in the Technical or Cost proposals.*
3. Technical Proposal - describing the qualifications and background of the applicant and experience with and for similar projects, and all information described earlier in this solicitation. The technical proposal is limited to ten (10) pages (this excludes any appendices and as appropriate, resumes of key staff that will provide services covered by this request).
  - a. One (1) Electronic copy on a CD-R, marked "Technical Proposal – Original"

- b. One (1) printed paper copy, marked “Technical Proposal -Original” and signed.
  - c. Four (4) printed paper copies
- 4. Cost Proposal - A separate, signed and sealed cost proposal reflecting the hourly rate, or other fee structure, proposed to complete all of the requirements of this project.
  - a. One (1) Electronic copy on a CD-R, marked “Cost Proposal - Original
  - b. One (1) printed paper copy, marked “Cost Proposal -Original” and signed.
  - c. Four (4) printed paper copies

Formatting of proposal response contents should consist of the following:

- 1. Formatting of CD-Rs – Separate CD-Rs are required for the technical proposal and cost proposal. All CD-Rs submitted must be labeled with:
  - a. Vendor’s name
  - b. RFP #
  - c. RFP Title
  - d. Proposal type (e.g., technical proposal or cost proposal)
  - e. If file sizes require more than one CD-R, multiple CD-Rs are acceptable. Each CD-R must include the above labeling and additional labeling of how many CD-Rs should be accounted for (e.g., 3 CD-Rs are submitted for a technical proposal and each CD-R should have additional label of ‘1 of 3’ on first CD-R, ‘2 of 3’ on second CD-R, ‘3 of 3’ on third CD-R).

Vendors are responsible for testing their CD-Rs before submission as the Division of Purchase’s inability to open or read a CD-R may be grounds for rejection of a Vendor’s proposal. All files should be readable and readily accessible on the CD-Rs submitted with no instructions to download files from any external resource(s). If a file is partial, corrupt or unreadable, the Division of Purchases may consider it “non-responsive”. USB Drives or any other electronic media shall not be accepted. Please note that CD-Rs submitted, shall not be returned.

- 2. Formatting of written documents and printed copies:
  - a. For clarity, the technical proposal shall be typed. These documents shall be single-spaced with 1” margins on white 8.5”x 11” paper using a font of 12-point Calibri or 12-point Times New Roman.
  - b. All pages on the technical proposal are to be sequentially numbered in the footer, starting with number 1 on the first page of the narrative (this does not include the cover page or table of contents) through to the end, including all forms and attachments. The Vendor’s name should appear on every page, including attachments. Each attachment should be referenced appropriately within the

proposal section and the attachment title should reference the proposal section it is applicable to.

- c. If the solicitation includes a proposal template for vendor use, it shall be typed using the formatting provided in the template.
- d. Printed copies are to be only bound with removable binder clips.

## **SECTION 8: PROPOSAL SUBMISSION**

Interested vendors must submit proposals to provide the goods and/or services covered by this RFP on or before the date and time listed on the cover page of this solicitation. Responses received after this date and time, as registered by the official time clock in the reception area of the Division of Purchases, shall not be accepted.

Proposals should be mailed or hand-delivered in a sealed envelope marked **RFP #7651812** to:

RI Dept. of Administration  
Division of Purchases, 2nd floor  
One Capitol Hill  
Providence, RI 02908-5855

NOTE: Proposals received after the above-referenced due date and time shall not be accepted. Proposals misdirected to other State locations or those not presented to the Division of Purchases by the scheduled due date and time shall be determined to be late and shall not be accepted. Proposals faxed, or emailed, to the Division of Purchases shall not be accepted. The official time clock is in the reception area of the Division of Purchases.

## **SECTION 9: CONCLUDING STATEMENTS**

Notwithstanding the above, the Division of Purchases reserves the right to award on the basis of cost alone, to accept or reject any or all proposals, and to award in the State's best interest.

Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

If a Vendor is selected for an award, no work is to commence until a purchase order is issued by the Division of Purchases.

The State's General Conditions of Purchase shall be the contractual terms and conditions between the parties upon issuance of a Purchase Order by the Division of Purchases. The State's General Conditions of Purchase can be found at <https://rules.sos.ri.gov/regulations/part/220-30-00-13> and addenda can be found at <https://ridop.ri.gov/rules-regulations/>.

## **APPENDIX A. PROPOSER ISBE RESPONSIBILITIES AND MBE, WBE, AND/OR DISABILITY BUSINESS ENTERPRISE PARTICIPATION FORM**

### **A. Proposer's ISBE Responsibilities (from 150-RICR-90-10-1.7.E)**

1. Proposal of ISBE Participation Rate. Unless otherwise indicated in the RFP, a Proposer must submit its proposed ISBE Participation Rate in a sealed envelope or via sealed electronic submission at the time it submits its proposed total contract price. The Proposer shall be responsible for completing and submitting all standard forms adopted pursuant to 105-RICR-90-10-1.9 and submitting all substantiating documentation as reasonably requested by either the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to the names and contact information of all proposed subcontractors and the dollar amounts that correspond with each proposed subcontract.
2. Failure to Submit ISBE Participation Rate. Any Proposer that fails to submit a proposed ISBE Participation Rate or any requested substantiating documentation in a timely manner shall receive zero (0) ISBE participation points.
3. Execution of Proposed ISBE Participation Rate. Proposers shall be evaluated and scored based on the amounts and rates submitted in their proposals. If awarded the contract, Proposers shall be required to achieve their proposed ISBE Participation Rates. During the life of the contract, the Proposer shall be responsible for submitting all substantiating documentation as reasonably requested by the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to copies of purchase orders, subcontracts, and cancelled checks.
4. Change Orders. If during the life of the contract, a change order is issued by the Division, the Proposer shall notify the ODEO of the change as soon as reasonably possible. Proposers are required to achieve their proposed ISBE Participation Rates on any change order amounts.
5. Notice of Change to Proposed ISBE Participation Rate. If during the life of the contract, the Proposer becomes aware that it will be unable to achieve its proposed ISBE Participation Rate, it must notify the Division and ODEO as soon as reasonably possible. The Division, in consultation with ODEO and Governor's Commission on Disabilities, and the Proposer may agree to a modified ISBE Participation Rate provided that the change in circumstances was beyond the control of the Proposer or the direct result of an unanticipated reduction in the overall total project cost.

### **B. MBE, WBE, AND/OR Disability Business Enterprise Participation Plan Form:**

Attached is the MBE, WBE, and/or Disability Business Enterprise Participation Plan form. Vendors are required to complete, sign and submit with their overall proposal in a sealed envelope. Please complete separate forms for each MBE, WBE and/or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.

**MBE, WBE, and/or DISABILITY BUSINESS ENTERPRISE PARTICIPATION PLAN**

Vendor's Name:

Vendor's Address:

Point of Contact:

Telephone:

Email:

Solicitation No.:

Project Name:

This form is intended to capture commitments between the prime contractor/vendor and MBE/WBE and/or Disability Business Enterprise subcontractors and suppliers, including a description of the work to be performed and the percentage of the work as submitted to the prime contractor/vendor. Please note that all MBE/WBE subcontractors/suppliers must be certified by the Office of Diversity, Equity and Opportunity MBE Compliance Office and all Disability Business Enterprises must be certified by the Governor's Commission on Disabilities at time of bid, and that MBE/WBE and Disability Business Enterprise subcontractors must self-perform 100% of the work or subcontract to another RI certified MBE in order to receive participation credit. Vendors may count 60% of expenditures for materials and supplies obtained from an MBE certified as a regular dealer/supplier, and 100% of such expenditures obtained from an MBE certified as a manufacturer. This form must be completed in its entirety and submitted at time of bid. **Please complete separate forms for each MBE/WBE or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.**

Name of Subcontractor/Supplier:				
Type of RI Certification:	<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Disability Business Enterprise			
Address:				
Point of Contact:				
Telephone:				
Email:				
Detailed Description of Work To Be Performed by Subcontractor or Materials to be Supplied by Supplier:				
Total Contract Value (\$):		Subcontract Value (\$):		ISBE Participation Rate (%):
Anticipated Date of Performance:				

I certify under penalty of perjury that the forgoing statements are true and correct.

<b>Prime Contractor/Vendor Signature</b>		<b>Title</b>	<b>Date</b>
<b>Subcontractor/Supplier Signature</b>		<b>Title</b>	<b>Date</b>