



STATE OF MICHIGAN PROCUREMENT
 Department of Technology, Management, and Budget
 320 S. Walnut St., Lansing, Michigan 48933
 P.O. Box 30026, Lansing, Michigan 48909

Bidder Questions & Answers

Request for Proposal No. 26000001381

Drug Screening & Confirmation Testing for Michigan Department of Health and Human Services (MDHHS) Children’s Services Administration

Note to Bidders: The State of Michigan does not currently have an existing contract in place for these services. We are looking for bidders to clearly outline their capabilities and propose a solution that meets the requirements identified in the solicitation.

We expect vendors to apply their professional expertise, think creatively, and propose a solution based on the information available. This includes identifying approaches, methodologies, and service models that best address the State’s needs.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
1	N/A	N/A	Who is the incumbent provider for this contract?	The State has not had a contract for these services since 2024.
2	N/A	N/A	What is the MDHHS currently paying for the requested services?	This information is not applicable in supplying a competitive bid. As indicated in Schedule B, item 2. Price proposals must include all costs, including but not limited to, any one-time or set-up charges, fees, and potential costs that Contractor may charge the State (e.g., shipping and handling, per piece pricing, and palletizing)
3	N/A	N/A	What is the MDHHS' current positivity rate (by drug, if possible)?	Due to the State not having a contract for these services since 2024, the data that the

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				State has is outdated and not relevant.
4	N/A	N/A	How many in-court appearances have been required in the last 2 years? How many telephonic/web? How many litigation packs only?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
5	Proposal Instructions, RFP Timeline	1	What is the anticipated award date for this contract?	Per Proposal Instructions, RFP Timeline, the anticipated contract start date for this contract is July 20, 2026.
6	Proposal Instructions, RFP Timeline	1	Would the State consider a contract start date later than July 20, 2026 if necessary to allow new vendors time to implement their solution, or will this disqualify a vendor from award?	Bidder may propose what is needed to allow the vendor to implement their solution.
7	Schedule A SOW, 1.1.B	2	24 hours is a very short window to gather and review evidence and to also arrange for travel accommodations. 1) How often has the State provided only 24 hours notice for testimony? 2) Is this just to arrange travel after already requesting preparation, or is this truly the narrow window provided to gather all evidence and also appear? 3) What is the typical window the State provides? 4) Does the State worry about limiting competition to only labs within a short drivable distance with this requirement?	1.) Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant. 2.) Per Section 1.1 B of Schedule A, Statement of Work, The Contractor must Provide testimony and/or court appearances (to include hearings and appeals). This may include chain of custody and/or test procedures/results, as

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				<p>needed, and providing certified copies of drug screens, if requested, up to two years after screening for any location in the state. Testimony and court appearances may include, but are not limited to, in-person, telephone, live video or any other communication technology, as requested by the court. The Contractor must be available to testify per the court's instruction with a 24-hour notice.</p> <p>3.) Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.</p> <p>4.) No</p>
8	Schedule A SOW, 1.1.E	3	What "Departmental procedures" related to chain of custody would impact the Vendor's scope?	MDHHS does not currently have a departmental chain of custody procedure related to these services. This document will have to be developed by the awarded bidder in collaboration with the agency Program Manager.

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9	Schedule A SOW, 1.1.K	4	Can the State please outline: 1) how test requests are currently performed, e.g. are case workers entering info into specific fields on-screen in the portal or uploading a pdf, 2) what documentation is provided via the portal, and 3) what relevant documents are expected to be stored?	<p>Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.</p> <p>Bidder may propose what is needed to allow the vendor to implement their solution.</p> <p>Examples of relevant documents would be, referrals, test results, chain of custody documentation, etc. Bidders should detail their proposed solution's capabilities in their bid.</p>
10	Schedule A SOW, 1.1.K	4	If the documentation referenced above includes referrals, 1) can the State please provide a sample of what a referral currently looks like (including required fields), and 2) indicate whether this is always entered electronically into the State's own system or into the vendor's portal, or if the form is ever completed by hand with handwriting?	<p>To reiterate, the State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p> <p>To reiterate, the State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p> <p>The State asks bidders to thoroughly describe their proposed solution and explain how it fulfills the requirements established by the State.</p>

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				The bidder should also explain any additional capabilities that their proposed solution offers.
11	Schedule A SOW, 1.1.N	5	What is currently provided for these reports? How often are special reports requested?	Please refer to Section 5.3. Reporting of Schedule A - Statement of Work, for this information.
12	Schedule A SOW, 1.2.A	5	Please define what is meant by "Mobile Screeners." For example, does this entail a vendor going to an existing County office or other location for a full day multi-person testing event or is this something like a house visit for an individual?	Mobile Screeners are defined as an individual who meets the client at their location to conduct a test.
13	Schedule A SOW, 1.2.A	5	Would the State or individual DHHS offices consider having a vendor staff the State's office as an alternative to either brick-and-mortar or mobile screening options?	No, MDHHS County offices are currently utilizing onsite collectors. As specified in the Schedule A - Statement of Work, the State requires both brick-and-mortar TPAs and mobile TPAs in addition to the existing MDHHS staff sample collection at County offices.
14	Schedule A SOW, 1.2.A	5	What are the zip codes for the vendor's current Brick & Mortar locations? Do they currently fulfill the requirements as shown in Table 1?	The Vendor is responsible for providing brick and mortar TPAs based the requirements in Table 1 and the needs of each county. Contractor may subcontract

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				services as outlined in section 1.3.2. Provide Third Party Administrations (TPAs) of this Contract.
15	Schedule A SOW, 1.3.C	7	Are all of these drugs currently tested in oral fluid? Would the State consider any of these in urine as an alternative if not currently provided in oral fluid?	Yes, all listed substances are currently tested in oral fluid. The bidder must provide a more comprehensive list of substances they are capable of testing for both oral fluid and urine testing.
16	Schedule A SOW, 1.3.C	7	How often are each of these drugs requested annually on average? Please provide estimated volumes by drug.	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
17	Schedule A SOW, 1.3.N	10	What testing would be performed via MDHHS staff and private partners? How much of the overall testing is performed by MDHHS staff or private partners, volumewise and/or percentage of overall specimens?	Per the Schedule A - Statement of Work, MDHHS staff and private agency partners have the ability to administer saliva and oral fluid testing. The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.

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18	Schedule A SOW, 1.3.N	10	Would MDHHS personnel and partners be willing to utilize electronic collections process, for example a process that could be performed on a mobile phone or tablet?	The bidder should explain any additional capabilities that they offer within their bid.
19	Schedule A SOW, 1.3.N	10	When the State indicates that 7,634 requests were for alcohol, was this for ethanol or for EtG alcohol metabolite?	Ethanol
20	Schedule A SOW, 1.3.Y	13	Is the "referral authorization" a unique number provided on the referral? Is this currently on the chain of custody form itself, or just input into the portal as a reference point?	Bidders should include their proposed referral system within their bid.
21	Schedule A SOW, 1.3.Y	13	Are referrals and reauthorizations provided on a physical handwritten form or as pdfs and emailed or electronically attached through the portal?	A certain referral type is not required per the RFP. Each bidder should include their proposed referral system within their bid.
22	Schedule A SOW, 1.3.AA	13	1) What types of situations would entail these types of additional testing? 2) How frequently are these requested/how many and what kind of tests have been required in the last 2 years? 3) Why is the State requiring these at no additional cost? Would you consider purchasing rapid tests for each office for these purposes at a cost?	1 and 2.) The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant. 3.) The bidder may propose additional rates/variations to fit their proposed solution with their bid

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23	Schedule A SOW, 1.3.CC	14	Will the State allow vendors to charge for in-person testimony, as this requires travel time that takes a toxicologist away from the lab and interrupts working hours?	Per 1.3.CC of the Schedule A, Statement of Work, this service is to be provided to MDHHS at no additional charge. The bidder may propose additional rates/variations to fit their proposed solution with their bid
24	Schedule A SOW, 1.3.EE	14	Please verify that using a cloud provider that is FedRAMP certified is acceptable.	Correct, the FedRAMP and SOC II certifications are only required for the Cloud services provider of Contractor's proposed solution for a web-based portal. The Contractor is not required to possess these certifications unless they are hosting the proposed solution and/or they have a shared responsibility in support of the application with the Cloud services provider.
25	Schedule A SOW, 1.3.FF	14	Please provide more details as to what is required regarding the Architecture Diagram.	An updated Architecture Diagram does not need to be completed and submitted with bidders' proposal. If bidder is awarded a contract by the State, bidder will be required to work with the State to update the diagram.

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26	Schedule A SOW, 1.3.2.E.2	17	Is the web-based system currently provided through the MDHHS' site or through the contracted vendor's site?	The web-based system must be provided through the Vendor's site.
27	Schedule A SOW, 9.B	38	Is the State considering a split award for this contract?	At this time, the state is not considering a split award for this contract.
28	Schedule E Attachment 1, HIPAA Business Associate Agreement	N/A	Is this contract expected to include clinical testing, such as for purposes of diagnosing or treating a medical condition? If not, we respectfully request removal of this BAA as inapplicable to the scope of services covered under this contract.	This document has been provided for informational purposes only at this time. If a bidder has concerns about any portion of this document or believe certain items are not relevant to the contract, bidder may submit redlines for consideration.
29	Schedule B Pricing	2	Please clarify the split sections for Saliva and Urine Specimen Collection and Testing - should the first line in each be for collection by MDHHS or Private Partner only, and the second line in each be for collection by the TPA to better account for difference in price for the vendor-provided collection?	1st Row: Collection of Oral Fluid Swab by MDHHS, Private Agency Partner, or TPA – Proposed pricing (per unit) for Vendor's collection of each oral fluid sample taken by MDHHS, Private Partner or TPA. 2nd Row: Collection Fee to TPA – Proposed pricing for TPA collecting each oral fluid sample.

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				<p>3rd Row – Collection of Urine Specimen by TPA Only – Proposed pricing (per unit) for Vendor’s collection of each urine sample taken by TPA (urine screens shall be available through TPA testing only).</p> <p>4th Row: Collection Fee to TPA – Proposed pricing for TPA collecting each urine sample (urine screens shall be available through TPA testing only).</p>
30	Schedule B Pricing	2 & 3	For the Saliva and Urine Testing lines, are these for lab screens only? Will confirmation be only performed upon request using the "Re-Analysis Confirmation Testing" line? If so, how often are confirmations requested and under what circumstances?	<p>Yes.</p> <p>The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p>
31	Schedule B Pricing	2 & 3	Vendors may have to overprice the Saliva and Urine Testing line items to compensate for an unknown amount of confirmation testing, additional testing, and testimony. Would the State instead consider allowing vendors to enter a price for Re-Analysis Confirmation Testing, Additional Drugs, and Testimony costs?	Bidder may propose additional rates/variations to fit their proposed solution with their bid.

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32	Schedule B Pricing	2	Would the State consider allowing vendors to charge separate prices depending on the region served or the type of collection performed (e.g. Brick-and-Mortar vs. Mobile)?	Bidder may propose additional rates/variations to fit their proposed solution with their bid.
33	Schedule B Pricing	N/A	Would the State consider a separate pricing schedule provided by a vendor for consideration offering a different type of payment structure?	Bidder may propose additional rates/variations to fit their proposed solution with their bid.
34	Schedule D SLA for Hybrid Purchases	N/A	May vendors submit requests for changes to the SLA as part of their proposal or will they be disqualified?	The bidder may note exceptions to this requirement in the provided bidder box.
35	Schedule D SLA for Hybrid Purchases, 2.6.a	4	This contract requires services that include far more than just Hosted Services and Software. As such, the credits seem unduly high for 95% availability. Would the State consider striking this section or modifying the credit table?	Per Proposal Instructions, Section 1. RFP Structure and Documentation, Schedule D SLA for Hybrid Purchases is deemed accepted by the Bidder unless information required in the Evaluation Process section of this document is submitted by the proposal deadline.
36	Schedule D SLA for Hybrid Purchases, 3.1.d	4	Does the State truly require 24-7 online support for this contract, again considering that this contract is not for the direct and exclusive provision of software?	Per Proposal Instructions, Section 1. RFP Structure and Documentation, Schedule D SLA for Hybrid Purchases is deemed accepted by

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				the Bidder unless information required in the Evaluation Process section of this document is submitted by the proposal deadline.
37	Vendor Questions Worksheet	Proposal Instructions – RFP Structure and Documentation Table	Contract Terms, Schedule C, Schedule D, Schedule E (Data Security), and Schedule E (HIPAA BAA) all state they are “accepted by the bidder unless ... Evaluation Process section is submitted by deadline” – can you please clarify these instructions? The only instructions in the “ Evaluation Process ” section refer to Contract Terms. There are no instructions for how to propose changes to Schedule C, Schedule D, Schedule E (Data Security), or Schedule E (HIPAA BAA).	The bidder may propose changes to Schedule C, Schedule D, Schedule E (Data Security), and Schedule E (HIPAA BAA). in track changes (i.e., visible edits) with an explanation of the bidder’s need for each proposed change. Failure to include track changes with an explanation of the bidder’s need for the proposed change constitutes the bidder’s acceptance of the Contract Terms.
38	Schedule A – Statement of Work	Page 1	The Statement of Work says there were 46,890 10 panel tests in 2023. How many of those were urine tests?	Please refer to Section 1.3 N. Specifications/Work Deliverables of the Schedule A, Statement of work for this information.
39	Schedule A – Statement of Work – 1.2.A	Page 6	Entering a private residence is one of the highest risk situations for social workers, CPS investigators, and drug testing collectors. The following issues are documented in recent professional literature and legal	Current and complete referral details and risk assessments will not be provided. The requirements presented in the Schedule A – Statement of Work are

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			<p>analyses. Limited or outdated information greatly increases drug testing personal risk due to drug activity, mental health crises, or domestic violence inside the home.</p> <p>Will the DHHS provide <u>current and complete referral details and risk assessment</u> before mobile collectors are asked to visit each residence?</p>	<p>the minimum requirements. Bidders are encouraged to establish any additional education or experience requirements they believe are appropriate for successful service delivery.</p>
40	Schedule A – Statement of Work – 1.2.A	Page 6	<p>If the mobile collectors are to visit and enter homes, do they need to be qualified social service workers?</p>	<p>Please refer to Section 1.3.2 Provide Third Party Administrators (TPAs) E. 10. of Schedule A, Statement of Work for this information.</p> <p>The State requests that the bidder provide a comprehensive description of the training administered to all staff assigned to the “Mobile Collector” role.</p>
41	Schedule A – Statement of Work – 1.2.A	Page 6	<p>What type of education and experience are required for mobile collectors?</p>	<p>Please refer to Section 1.3.2 Provide Third Party Administrators (TPAs) E. 10. of Schedule A, Statement of Work for this information.</p> <p>The State requires, at a minimum, that individuals in the “Mobile Collector” role hold a high school diploma. However, bidders are</p>

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				encouraged to establish any additional education or experience requirements they believe are appropriate for successful service delivery.
42	Schedule A – Statement of Work – 1.2.A	Page 6	<p>9 of the counties listed that are asking for mobile collectors only are currently using community-based outreach brick and mortar collection entities. These same county community-based outreach facilities collected 9457 samples in 2025 (17% of the total DDHS samples in 2025).</p> <p>Are we interpreting the RFP correctly that those countries DO NOT want brick and mortar in those counties now and that the state wants to add mileage on top of the existing cost of collecting 17% of the DHHS samples.</p>	The information provided in Table 1 – State of Michigan County Requirements is accurate.
43	Schedule A – Statement of Work – 1.3.c Specifications/Work Deliverables	Page 7	1.3 C requires a comprehensive list of substances for oral fluid and urine. Will bidders receive more consideration if they have a larger list of substances than others?	Please refer to Proposal Instructions Section 7 Evaluation Process for this information.
44	Schedule A – Statement of Work – 1.3.c Specifications/Work Deliverables	Page 7	Since different labs have different / smaller drug lists, will there be a selected list by MDHHS	Bidder must have the capability to complete oral and urine testing for additional substances outside of what is included in a standard 11-panel test. Per Section 1.3 C. of

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				Schedule A, Statement of Work, the bidder must provide a more comprehensive list of substances they are capable of testing for via oral and urine testing.
45	Schedule A – Statement of Work – 1.3 Specifications/Work Deliverables	Page 7	1.3.D states “provide reports that state the minimum level necessary to detect the presence of each substance.” What level are you referring to?	Oral Fluid Screening Level and Urine Screening Level.
46	Schedule A – Statement of Work – Service to all 83 Counties in the State of Michigan	Page 8 (Table 2) Page 9 (Table 3)	Please confirm the cutoff levels. These are higher than the federal guidelines. Requirements “f” and “j” state to keep up to date with technology advances and provide lower screening/confirmation cut-off levels as technology advances. Lower cutoff levels are already available with current technology.	Approved cutoff levels have been defined in Section 1.3.(i) of the Schedule A - Statement of Work. Any variations must be pre-approved by Agency Program Manager. The bidder may propose alternate cut-off levels in their bid submission.
47	Schedule A – Statement of Work – Service to all 83 Counties in the State of Michigan	Page 8 (Table 2) Page 9 (Table 3)	Why are the Oral Fluid cutoff levels higher than some Federal workplace levels? Are you aware this will lower your detection of positive illicit drugs?	Approved cutoff levels have been defined in Section 1.3.(i) of the Schedule A, Statement of Work. Any variations must to be pre-approved by Agency Program Manager. The bidder may propose alternate cut-off levels in their bid submission.

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48	Schedule A – Statement of Work – 1.3 Specifications/Work Deliverables	Page 8 and 10	1.3 F and J state “keep up to date with technological advances and provide lower cutoff levels as technology advances.” If technology has already advanced lower than your requested cutoff levels, may we use those?	Approved cutoff levels have been defined in Section 1.3.(i) of the Schedule A, Statement of Work. Any variations must to be pre-approved by Agency Program Manager. The bidder may propose alternate cut-off levels in their bid submission.
49	Schedule A – Statement of Work – 1.2.J Specifications/Work Deliverables	Page 10	Requirement says to “ <i>Keep up to date with technological advances and provide lower confirmation cutoff levels as technology advances.</i> ” If our technological advances already exist allowing us to provide lower screening and confirmation cutoffs level to SAVE LIVES, would you like us to report at the lower cutoff levels?	Approved cutoff levels have been defined in Section 1.3.(i) of the Schedule A, Statement of Work. Any variations must to be pre-approved by Agency Program Manager. The bidder may propose alternate cut-off levels in their bid submission.
50	Schedule A – Statement of Work – 1.3 Specifications/Work Deliverables	Page 10	1.3 M states” guarantee MDHHS CSA Staff, private partners and TPAs the ability to administer saliva/oral fluids and urine (TPA’s only) testing. These results must also later be verified through laboratory testing as needed. What is this referring to? Are these Instant Tests?	This is referring to saliva/oral fluids and urine (TPA’s only) testing.
51	Schedule A – Statement of Work – 1.3.O Specifications/Work Deliverables	Page 11	1.3.O states “only the web-portal may be used for test results, not faxed, mailed or emailed to MDHHS staff.” Does this include Attorney’s also?	Yes.

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52	Schedule A – Statement of Work – 1.3.V Specifications/Work Deliverables	Page 12	How many postage paid mailers are expected each month? (Need cost for analysis)	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
53	Schedule A – Statement of Work – 1.3.V Specifications/Work Deliverables	Page 12	How many postage paid mailers were sent previously in a year?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
54	Schedule A – Statement of Work – 1.3.AA Specifications/Work Deliverables	Page 12	How many rapid/instant tests will be ordered every month? (Need cost for analysis)	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
55	Schedule A – Statement of Work – 1.3.CC Specifications/Work Deliverables	Page 14	How many court records requests and subpoenas were requested and provided in 2023, 2024 and 2025?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
56	Schedule A – Statement of Work – 1.3.CC Specifications/Work Deliverables	Page 14	Clarity: If Contractor receives 4 requests for in-person testimony, all on the same day, will the contractor be in violation of the contract if they cannot find enough Expert Witnesses? (this lab has received 6 to 8 subpoenas for one day)	A contractor must be available with 24-hour notice for requests for testimony. A contractor may work with the requestor to ensure that the testimony is provided in a timely and efficient manner.

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57	Schedule A – Statement of Work – 1.3.CC Specifications/Work Deliverables	Page 14	How many in-person testimonies are expected each year or were done in previous years? ((this is needed to evaluate cost of outside expert witnesses)	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
58	Schedule A – Statement of Work – 1.3.CC Specifications/Work Deliverables	Page 14	Is the expert witness expected to drive to the UP and Northern MI to testify in the winter when winter conditions make driving unsafe?	Contractors must provide any requested testimony and/or court appearances. Testimony/court appearance may include, but is not limited to, in-person, telephone, live video or any other technology as requested by the court.
59	Schedule A – Statement of Work – 1.3.2 Provide Third Party Administrators (TPAs)	Page 18 E.8.	Are mobile screeners/collectors expected to knock on DHHS participants’ front doors of their homes to obtain drug testing samples?	Mobile TPA’s must be flexible and have the capability of meeting a Client at their location, including their home.
60	Schedule A – Statement of Work – 1.3.2 Provide Third Party Administrators (TPAs)	Page 18 E.8.	Are mobile screeners/collectors expected to enter their homes?	Yes.
61	Schedule A – Statement of Work – 1.3.2 Provide Third Party Administrators (TPAs)	Page 18 E.8.	If mobile screeners/collectors are expected to enter their homes, are they expected to testify about the conditions of the homes?	Yes.

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62	Schedule A – Statement of Work – 1.3.2 Provide Third Party Administrators (TPAs)	Page 18 E.8.	Are mobile screeners/collectors expected to collect urine samples at these homes?	Yes.
63	Schedule A – Statement of Work – 1.3.2 Provide Third Party Administrators (TPAs)	Page 18 E.8.	Are mobile screeners/collectors expected to collect oral fluid samples?	Yes.
64	Schedule F – Transition In and Out	Schedule F – Transition In and Out	What time period will you give the new vendor to “ramp up” or be able to operate in all 83 counties?	The State requests the bidder detail their transition in and out plan as indicated in Schedule F.
65	Schedule A – Statement of Work	No page	Are companies who have settled lawsuits with the SOM for "Resolve False Claims Act Allegations Related to Drug Tests" able to bid on this contract?	Any qualified vendor can submit a bid.
66	Schedule A – Statement of Work – 1.3 Specifications/Work Deliverables	Page 10	"The immunoassay (screening) cutoff is 5 ng/mL which is required by Michigan Child Protective Services. This immunoassay is very specific for buprenorphine and even the metabolite norbuprenorphine does not cross react well. Why would a 0.5 ng/mL be required if the immunoassay can only detect down to 5 ng/mL specified by Michigan? No one would confirm a negative immunoassay for buprenorphine."	This is a typo and should be 5 ng/mL.

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67	Schedule A, Statement of Work, Section 1.2.2.a	17	Can the state please break down the number of collections per county in 2025?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
68	Schedule A, Statement of Work, Section 1.1.K.4	4	Could you elaborate on what documents should be able to be stored on the providers online portal? Does MDHHS staff anticipate the need to upload documents to the vendors online portal?	See previous response provided above.
69	Schedule A, Statement of Work, Section 1.1.N	5	Are the applicable reports referenced in this section all listed in Section 4.3. Reporting or does MDHHS anticipate additional reporting?	Please refer to D. in Section 4.3 Reporting for this information.
70			Please provide a list of the current TPA/brick and mortar locations, collection hours and collection fees.	A current list is not available.
71			Please provide a list of the current mobile collection providers, collection hours and collection fees.	A current list is not available.

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72			<p>Could you please share the number of tests by county including the number of MDHHS collected, Private Partner collected, and TPA collected tests and costs associated with each?</p>	<p>The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p>
73			<p>Please describe how mobile collections are scheduled with the provider. Who currently schedules collections for the mobile collections?</p>	<p>The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p>
74	<p>Schedule A, Statement of Work, Section 1.2.A</p>	<p>5</p>	<p>Are the brick-and-mortar locations listed in the solicitation fixed requirements, or may the specific sites be finalized in coordination with the Agency following contract award?</p>	<p>The State will work collaboratively with the awarded vendor to implement a solution that aligns with the State's requirements and effectively serves the interests of both parties.</p>
75	<p>Schedule A, Statement of Work, Section 1.3.AA</p>	<p>13</p>	<p>"AA. Provide additional substance abuse testing processes, as available, including but not limited to; additional drugs available to test, rapid/instant tests, and alcohol test strips. These types of tests may be necessary in certain situations to ensure child safety and be provided to MDHHS and private agency partners at no additional cost."</p> <p>Could you please confirm these supplies shall be billed for reimbursement following use?</p>	<p>These types of tests may be necessary in certain situations to ensure child safety and be provided to MDHHS and private agency partners at no additional cost.</p> <p>Bidder may propose additional rates/variations to fit their proposed solution with their bid.</p>

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76	Schedule A, Statement of Work, Section 1.3.AA	13	Could you please share the supply usage data for MDHHS, Private Agency Partners, and TPA's broken down by county?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
77	Schedule A, Statement of Work, Section 1.3.EE	14	Will FedRAMP certification from the host meet the vendor FedRAMP requirement?	The FedRAMP and SOC II certification are only required for the Cloud services provider of Contractor's proposed solution for a web-based portal. The Contractor is not required to possess these certifications unless they are hosting the proposed solution and/or they have a shared responsibility in support of the application with the Cloud provider.
78	Schedule A, Statement of Work, Section 1.3.EE	14	Does SOC 2 certification satisfy the RFP's FedRAMP requirement?	The FedRAMP and SOC II certification are only required for the Cloud services provider of Contractor's proposed solution for a web-based portal. The Contractor is not required to possess these certifications unless they are hosting the proposed solution and/or they have a shared responsibility in support of the application with the Cloud provider.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
79	Schedule A, Statement of Work, Section 1.3.N	10	May test ordering and the addition of substances be processed through the vendor's online portal in lieu of a paper order form?	Yes.
80	Schedule A, Statement of Work, Section 1.1.B	2	The solicitation requires the Contractor to be available for testimony with 24-hour notice. Given that expert witness testimony requires thorough review of case documentation, chain of custody records, and analytical data, will the Agency consider a minimum of 5 business days' notice to ensure the toxicologist is adequately prepared and testimony is defensible in court?	A contractor must be available with a 24-hour notice for requests for testimony. A contractor may work with the requestor to ensure that the testimony is provided in a timely and efficient manner.
81	Schedule A, Statement of Work, Section 1.1.E	3	Is a legally defensible electronic chain of custody acceptable to DHHS?	Bidder must provide a detailed description of the chain-of-custody for all lab testing from arrival to confirmation of test results.
82	Schedule A, Statement of Work, Section 1.6.5	22	Are bidders required to submit Information Technology Industry Council (ITIC) Voluntary Product Accessibility Template at the time of submission or following award?	Bidder must acknowledge their agreement with this section and provide details for how they will meet the requirements
83	Schedule A, Statement of Work, Section 1.11	25	Could you please confirm there is a Data Migration Sample provided to describe the migration process?	Data Migration Services may be necessary. A sample has not been provided at this time.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
84			Can bidders provide a price list of additional services available to DHHS?	Bidder may propose additional rates/variatioins to fit their proposed solution with their bid.
85			What are the top three goals MDHHS has for this contract period?	This information is not applicable in supplying a competitive bid.
86	Schedule A, Statement of Work, Section 1.3.I	9	Could you please share positivity rates for each drug individually?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
87	General		Who is the current incumbent provider(s), and how long have they held the contract?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
88	General		Can you provide a copy of the current project specifications and current pricing?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
89	General		Is MDHHS satisfied with the current program? If not, what specific gaps or performance improvements is the State seeking?	The State has not had a contract for these services since 2024.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
90	General		Are services currently being delivered as outlined in this RFP scope, or have there been deviations in practice?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
91	Scope / General Requirements 1.1 / A.	2	Can MDHHS clarify whether the program is intended to be laboratory-based screening as the primary testing methodology, or if point-of-care/instant (rapid) testing is expected? If hybrid, please provide estimated percentage distribution.	Laboratory-based screening.
92	Scope / Background	1	Can MDHHS confirm the approximate percentage breakdown of testing types based on historical volume (oral fluid lab screen vs oral fluid instant & urine lab vs urine instant)?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
93	Scope / Service 1.2 / A.	5	Can MDHHS provide historical testing volume by county specified by collection method? 1. Volume collected by Brick & Mortar by county 2. Volume collected by Mobile Screeners by County 3. Volume collected by MDHHS workers by County 4. Volume collected by Private Partners by County	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
94	Scope / Service 1.2 / A.	5	Of the approximately 46,890 tests conducted in 2023, what is the number of locations where collections are performed (MDHHS staff, brick-and-mortar TPA, mobile TPA)? This is requested to understand the number of locations specimens will be shipped from.	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
95	Scope / Service 1.2 / A.	5	For counties that are indicated in this table as needing mobile screeners, will MDHHS accept a brick & Mortar collection site if available?	No.
96	Scope / Specifications 1.3 / AA.	13	Can MDHHS provide historical volume and expected usage of instant/rapid testing devices, and confirm whether all instant test results are required to be confirmed by the laboratory? Or if only presumptive positive results are required to be confirmed by the laboratory.	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
97	Scope / Specifications 1.3 / I.	9	Can MDHHS confirm whether confirmation testing is automatically performed on all non-negative screening results or only upon request?	The Contractor must perform confirmation testing of all positive test samples submitted for drug testing which yield positive results in the initial screening process to substantially determine the validity of positive screen results.
98	Scope / Specifications 1.3 / I.	9	<p>Can MDHHS provide a historical positivity rate? Of these positive specimens what is the volume of samples requiring confirmation testing by each drug class?</p> <p>This is requested to understand the amount of additional testing services MDHHS is requesting to be performed beyond the standard panel at no additional cost.</p>	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
99	Scope / Specifications 1.3 / N.	11	The SOW states that “Special Request” testing must be provided at no additional cost. Can MDHHS clarify what is a “Special Request”? Is MDHHS looking to add substances to test on a chain of custody at no additional cost? Or is MDHHS asking for additional special testing services beyond the 10 panel to occur on a sample at no additional cost?	Per the Schedule A – Statement of Work, a Special Request would occur when MDHHS staff and Private-agency Partners request additional special testing beyond the standard 11 panel.
100	Scope / Specifications 1.3 / N.	10	Of the 10,063 special tests for additional testing, are these 10,063 tests additional to the 46,890 specimen volume? Or is this additional testing performed on 10,063 of the 46,890 samples?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
101	Scope / Specifications 1.3 / E. and I.	8,9	Will MDHHS accept equivalent or more sensitive laboratory-validated screening and confirmation cutoff levels where clinically appropriate?	Approved levels have been defined in Section 1.3.(i) of the Schedule A, Statement of Work. Any variations must to be pre-approved by Agency Program Manager. The bidder may propose alternate cut-off levels in their bid submission.
102	Scope / General Requirements 1.1 / C.	2	Can MDHHS confirm that LC-MS/MS is fully acceptable as a primary confirmation methodology across all analytes?	Yes, this is acceptable as a primary confirmation methodology.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
103	Scope / Specifications 1.3 / R.	11	Can MDHHS confirm whether the stated turnaround times assume automatic confirmation testing or request-based confirmation testing?	Automatic confirmation testing.
104	Scope / Specifications 1.3 / R.	11	Can MDHHS clarify expectations for turnaround times involving extended testing panels or specialty analytes?	This timeframe applies to all substances that the bidder has the capability of screening for. Any deviation from this timeframe would require approval from the agency Program Manager.
105	Scope / General Requirements 1.1 / B.	2	Can MDHHS provide historical annual volume of litigation packages, affidavit requests, expert testimony requests, including breakdown of in-person vs telephonic/video appearances?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
106	Scope / General Requirements 1.1 / B.	2	Can MDHHS clarify 24-hour expectations for testimony preparation timelines and whether telephonic/video testimony is acceptable as standard? Typically lead time (for full and complete preparation) for testimony is 7 days.	A contractor must be available with a 24-hour notice for requests for testimony. A contractor may work with the requestor to ensure that the testimony is provided in a timely and efficient manner. The Court will determine if in-person, telephone, or a Skype-style video conference testimony is required.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
107	Scope / Specifications 1.3 / T.	12	Can MDHHS provide average specimen volume per shipment and expected pickup frequency per location?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
108	Scope / Specifications 1.3 / T.	12	What courier services are currently utilized, and where is the incumbent laboratory located?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
109	Scope / General Requirements 1.1 / K.	4	Can MDHHS define the specific documentation required to be stored in the portal (e.g., results report, COC forms, litigation packets, reports)?	See previous response provided above.
110	Scope / General Requirements / 4.3 A. and B.	35	Can MDHHS provide examples of historically requested reports and clarify expectations for standard vs ad hoc reporting?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
111	Scope / Specifications 1.3 / DD.	14	Can MDHHS clarify requirements for the randomization system, including whether IVR, web-based, or mobile solutions are acceptable?	Bidder should detail the capabilities of their proposed randomization system in their bid.
112	Scope / Specifications 1.3 / DD.	14	Can MDHHS describe how randomization schedules are structured across different populations?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
113	Scope / Specifications 1.3 / Y.	13	Can MDHHS provide a sample chain-of-custody/referral form and describe the current referral workflow and timing?	The State requests that the Bidder include a sample of their current Chain of Custody form as an attachment to their bid submission documents.
114	Scope / Specifications 1.3.2 / H. 8.	19	For mobile collections, can MDHHS define expectations for contact attempts, wait times, and whether no-show events are billable?	Bidder should detail the capabilities of their proposed mobile collection service in their bid.
115	Scope / Specifications 1.3.2	16	Can MDHHS provide details regarding the incumbent TPA network and whether existing collection partners are expected to transition?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
116	Schedule B Pricing	2	Can MDHHS clarify the unit of measure of the 1000 listed under Education/Training? E.g. 1,000 hours, 1,000 sessions	Hours
117	Scope / 1.5 Training	20	Can MDHHS clarify the expected number of training sessions annually and whether regional or consolidated sessions are acceptable? Are virtual sessions acceptable for annual training?	Bidder should propose a number of training sessions for consideration and detail their training capabilities in their bid.
118	Scope / 1.1 General Requirements / M.	4	Can MDHHS define the training materials expected?	Please refer to Section 1.5 in the Schedule A, Statement of Work for this information. The State asks bidders to thoroughly describe their proposed training

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
				and any training materials that may be included.
119	Scope / 1.5 Training	20	Can MDHHS provide an estimate of the number of staff requiring training annually?	Approximately 3,600 individuals.
120	Scope / Specifications 1.3 / B.	7	Can MDHHS clarify what is expected on the individual result report? Is a chain of custody copy required to be with the result report? Or would reference to a unique chain of custody identifier on the result report be sufficient if MDHHS has access to the chain of custody documentation?	Please refer to Section 1.3.D of Schedule A, Statement of Work for this information. The State requests the bidder detail how they will comply with this requirement.
121	Scope / Specifications 1.3 / H.	9	Can MDHHS clarify if a 7 calendar day standard hold for negative samples be acceptable?	A Contractor must ensure all negative samples are retained by the laboratory for a minimum of 10 calendar days. A retention time extension may be required based upon need for any individual sample.
122	Scope / Specifications 1.3 / K.	10	Can MDHHS clarify if the frozen positive sample retention time is based on CONFIRMED positive and not presumptive positive?	A Contractor must ensure ALL positive samples are frozen and maintained for a minimum of 365 days by the laboratory. A retention time extension may be required based upon

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				need for any individual sample.
123	Scope / Specifications 1.3 / L.	10	Can MDHHS provide the approximate number of DvsLs required last year for urine? Can MDHHS provide the approximate number of DvsLs required last year for Oral Fluid? And is this additional specialty test upon request from MDHHS only?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
124	Scope / Specifications 1.3 /M.	10	Can MDHHS clarify the testing for MDHHS staff, private partners, and TPAs refer to rapid testing? If so, what is the historical volume of tests administered by staff, private partners, and TPAs?	Please refer to the Schedule A – Statement of Work, Section 1.3., subsections M and AA.
125	Scope / Specifications 1.3 / V.	12	Will MDHHS provide estimated volume of postage paid mailers used as alternative to courier services?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
126	Scope / Specifications 1.3 / Z.	13	What is the current process for MDHHS to submit referrals to the contractor? Is MDHHS open to a streamlined electronic process?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant. The State asks bidders to thoroughly describe their proposed solution and explain how it fulfills the requirements established by the State.

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				<p>The bidder should also explain any additional capabilities that their proposed solution offers.</p>
127	Scope / Specifications 1.3 / AA.	13	<p>Can MDHHS clarify the agency requests additional products and testing services to be provided at \$0? If so, can MDHHS please provide the approximate number of free products and testing services requested?</p>	<p>Our expectation is that the use of rapid tests will be infrequent; therefore, agency requests for these additional products and services are anticipated to be minimal. However, with the support of the contracted vendor, agency requests for these items will be monitored by the Agency Program Manager.</p> <p>The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.</p>
128	Scope / SLA / C.	39	<p>Can MDHHS provide the process around exceptions that prevent reporting in requested timeframes? For example, specimens that require exceptional testing, multiple confirmation testing, overly concentrated specimens requiring additional testing processes, etc.</p>	<p>The bidder may list exceptions to this requirement in the provided bidder box.</p>

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129	Scope / SLA / C.	40	Can MDHHS confirm the SLA for “accurate drug and alcohol test results” applies to confirmation results and not on presumptive results from a screening methodology?	All testing results should be accurate 95% of the time, at a minimum.
130	Scope / 1.10 Software	25	Can MDHHS please clarify the enforcement of Software descriptions as it relates to the services in the contract? Virtually all software today uses at least some open source libraries, including Microsoft Windows, so it is not possible to create a full list of Open Source solutions in use.	<p>This requirement is intended to ensure transparency regarding any open-source or third-party components that are intentionally incorporated into the proposed solution.</p> <p>For example, if a specific functionality relies on publicly available code, the bidder would be expected to disclose that usage, including details such as the name, version, type, and release number of the component.</p> <p>This information helps the State understand where the solution may rely on components outside the contractor’s direct control, which could affect long-term support, updates, or security. The State is not asking for a comprehensive inventory of all open-source elements embedded in standard</p>

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
				commercial software (such as operating systems), but rather any open-source or third-party tools the bidder intentionally selects and integrates as part of their proposed solution
131	Scope / Specifications 1.3.2 / A.	16	Can MDHHS clarify if the sample receipts can include a business card with the collection site address and phone number as supplemental to a specimen receipt?	Section 1.3.2. A. of the Schedule A, Statement of work outlines minimum sample receipt requirements.
132	Scope / 1.11 Migration	25	Can MDHHS provide details on volume, format, and timelines for data migration?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant. The State will provide additional details on volume, format, and timelines for data migration after the contract has been awarded.
133	Pricing		Would MDHHS consider alternative pricing structures (e.g., separating collection and lab testing or bundled program pricing) to better align with operational variability?	Bidder may propose additional rates/variations to fit their proposed solution with their bid.

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
134	Pricing		Can MDHHS confirm assumptions regarding shipment density (e.g., specimens per shipment) used in pricing expectations?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant.
135	Scope / General Requirements 1.1 / B.	2	Can MDHHS confirm whether the estimated 200 expert witness events are annual, and whether telephonic or video testimony is acceptable as the standard delivery method?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant. Each jurist throughout the state has a preferred testimony method. A vendor would need to be prepared for any and all types of testimony requested.
136	Pricing		Can MDHHS define the scope and limitations of “IT Development Time,” including whether this refers to configuration of existing functionality versus net-new development?	The State has not had a contract for these services since 2024, any data that the State has is outdated and not relevant. Thus, the State does not have any existing functionality.
137	Pricing		Can MDHHS clarify whether the listed “Optional Services” are required as part of the base contract or provided on an as-requested basis with defined limits?	These are required as part of the base contract as specified in the Schedule A – Statement of Work.

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138	Scope / TPA 1.3.2 / H. / 7.	18	Can MDHHS clarify how mobile collections are conducted today? Is it in all 83 counties, how often is this service used, what are the hot spot areas and confirm its only for Oral Fluid?	Due to the State not having a contract for these services since 2024, the data that the State has is outdated and not relevant.
139	Scope / TPA 1.3.2 / H. / 7.		Can MDHHS clarify if mobile collections is for oral fluid specimens only?	Correct, Oral Fluid Specimens only.
140	Scope	16	<p>In areas where only one physical collection site is available, and that site is unable to consistently provide both male and female collectors during standard weekday hours, can MDHHS clarify whether oral fluid (OF) collection may be utilized as an alternative in lieu of observed urine collections?</p> <p>Additionally, should such locations still be included in the bidder's proposed network with noted limitations regarding collector availability?</p>	<p>Please refer to 1.3.2. B. of Schedule A, Statement of Work for this information.</p> <p>The bidder may note exceptions to this requirement in the provided bidder box.</p>
141	Scope / TPA	18	Would MDHHS clearly define what an approved client location is? What are the limitations?	The State does not currently have a contract for these services. Mobile Screeners are defined as an individual who meets the client at their location to conduct a test. The bidder may propose their requested limitations

Q #	Document and Section	Page #	Bidder Question	Answer (to be completed by the State)
				for these services in their bid.
142	Scope / TPA Mileage	19	Will MDHHS clarify which entity will reimburse mileage for mobile collectors? Will MDHHS reimburse the mobile TPA?	The vendor will be responsible for any payments to Third Party and mobile TPAs.