

**COUNTY OF ROCKLAND**  
**Department of General Services**  
**Purchasing Division**

# Contract Award Notification

**Title:** **Lab Testing-Chlamydia and Gonorrhea Combination Testing**

**Contract Period:** September 1, 2020 through March 31, 2021 with 2 one-year options  
Extended through 3/31/2022 w/1 year option ext thru 3/31/23

**Original Date of Issue:** August 26, 2020

**Date of Revision:** 9/28/2022

**BID No:** **RFB-RC-2020-079**

**Catalog:** **Health & Hospitals**

**Authorized Users:** County Agencies

**Address Inquiries To:**

**Name:** Sabrina Samuels  
**Title:** Purchaser II  
**Phone:** 845-364-3807  
**Fax:** 845-364-3809  
**E-mail:** samuelss@co.rockland.ny.us

**Description**

**This contract is for lab testing of Chlamydia, HPV DNA, Gonorrhea and Herpes.**

Contract #	Vendor Number	Contractor & Address	Telephone No.
BID 20-079	0000011929	Center for Disease Detection 11603 Crosswinds Way, Ste 100 San Antonio, TX 78233 Contact: Mike Kossman mike.kossman@cddmedical.com	210-590-3033 Ext. 11482  <b>FAX:</b> 210-590-3121

<p style="text-align: center;"> COUNTY OF ROCKLAND  DGS – PURCHASING DEPARTMENT  BLDG. A, 6th FLOOR, 50 SANATORIUM ROAD  POMONA, NY 10970  TELEPHONE NO.: 845-364-3820  FAX NO.: 845-364-3809 </p>									
LINE NO.	DESCRIPTION	ITEM NUMBER	EST. ANNUAL QTY.	UNIT	TESTING METHOD	CPT CODE(S)	UNIT PRICE	EXTENDED PRICE	AWARD
<b>TO PROVIDE LAB TESTING FOR CHLAMYDIA, HPV DNA, GONORRHEA AND HERPES TESTING</b>									
1	CT/NG Testing, Chlamydia and Gonorrhea Combo, Testing Method: Aptima TMA, CPT Code: 87491/87591, including all costs of samples, pickup and results as specified in this bid or approved equal	94855000550	720	Each	Aptima, TMA	87491, 87591			<b>Do not use</b>
1A	CT/NG Testing, Chlamydia and Gonorrhea, Combo Testing Amplified, Rectal/Throat CPT Code: 87491/87591, including all costs of samples, pickup and results as specified in this bid or approved equal	94855000551		Each	Amplified, Rectal/Throat	87491, 87591	\$ 20.00		Center for Disease Detection

**COUNTY OF ROCKLAND - DGS-PURCHASING**  
BLDG. A., 6TH FLOOR, 50 SANATORIUM RD, POMONA, NY 10970  
TELEPHONE: 845-364-3820 / TELEFAX: 845-364-3809

**TITLE: Lab Testing- Chlamydia and Gonorrhea  
Combination Testing**

**RFB #: RFB-RC-2020-079**

## **SPECIFICATIONS**

### **1. SCOPE**

- 1.1. This bid is for the purpose of providing Laboratory Testing for Chlamydia and Gonorrhea Combination Testing by Aptima TMA to the County of Rockland and the Rockland County Health Department.

### **2. REQUIREMENTS**

- 2.1. Bidder shall provide Testing Services as required by the County of Rockland, Rockland County Health Department, Rockland County Correctional Center and any County of Rockland Department needing such services.
  - 2.1.1. Bidder shall provide individual account numbers to any County Department requiring these services.
- 2.2. Bidder shall perform work in conformance with Federal, State and Local laws and regulations.
- 2.3. Bidder shall perform work in conformance with all New York Department of Health and HIPAA regulations.
- 2.4. Bidder shall provide all supplies (Tubes, Swabs, Etc.), sample containers and lab slips required for testing specified in this bid. Cost of supplies shall be included in cost of testing.
- 2.5. Bidder's lab slip shall contain the following:
  - 2.5.1. Name of the test being performed on sample.
  - 2.5.2. Patient's name, address, date of birth, collection date & time, and clinic ID number.
- 2.6. Bidder shall pick up all samples to be tested between 6 pm and 7 pm every day, Monday through Friday (except Holidays) at the following location:
  - 2.6.1. Bidder shall pick up samples to be tested from the lock box located at the second-floor security desk at 50 Sanatorium Road, Building A, Pomona, NY 10970.
  - 2.6.2. Bidders shall pick up samples to be tested from the Rockland County Correctional Center, 53 New Hempstead Road, New City, NY 10956.
  - 2.6.3. Bidder shall pick up from any new department locations requiring these services in the County of Rockland when requested.

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2.6.4. Samples shall be picked up free of charge.

2.7. Bidder shall return results to the County of Rockland Health Department, Rockland County Correctional Center or any other County Department requiring these services within seven days of pick up.

2.7.1. The contact for these services are as follows:

2.7.1.1. Jouliana Petranker, Rockland County Correctional Center, 53 New Hempstead Road, New City, NY 10956. Phone number 845-638-5738.

2.7.1.2. Maria Souto, STI Clinic, Rockland County Health Department, 50 Sanatorium Road, Building D, Rm 118, Pomona, NY 10970. Phone number is 845-364-2663.

2.8. Bidder shall have to work with County to interface with County Departments currently utilizing eClinicalWorks (Department of Health) or CorEMR (Rockland County Correctional Center). Bidder shall interface with County at no cost to the County.

2.8.1. See attachment A for interface requirements for eClinicalWorks.

2.8.2. Any County Departments requiring these services that are not currently utilizing eClinicalWorks or CorEMR shall communicate through fax or HIPAA compliant internet lockbox.

2.8.3. County of Rockland Departments shall have the ability to contact vendor laboratory for any pertinent information.

2.9. Successful vendor shall be subject to a three – month evaluation period on both performance and medical results.

2.10. If requested, bidder shall provide a tour of his facility including the laboratory where test shall be performed to the authorized County of Rockland Representative.

2.10.1. The tour shall be scheduled within five working days of request and shall be conducted at time of day requested by the County of Rockland.

### **3. eCLINICALWORKS REQUIREMENTS**

3.1. Bidder shall be able to provide an interface to eClinicalWorks.

3.2. Bidder must be able to support a bi-directional HL7 interface to eClinicalWorks. Receiving orders in HL7 format and sending results to eClinicalWorks in the HL7 format (see Attachment A for HL7 interface requirements which include HL7 Rad Orders Specifications and HL7 Rad Results

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Specifications provided by eClinicalWorks (some fields identified in these documents are “required fields”, “optional fields” and not supported (fields).

- 3.3. Bidder shall be able to support communication via a Virtual Private Network (VPN).
- 3.4. Awarded Bidder shall work with the County of Rockland Information Technology Systems (ITS) Department with the implementation of interface.

#### **4. CorEMR (ELECTRONIC HEALTH INFORMATION SYSTEM)**

- 4.1. Any Information required for CorEMR Electronic Health Information System can be obtained by contacting Sabrina Samuels at 845-364-3807.

#### **5. TEST INFORMATION**

- 5.1. Bidder shall provide pricing for CT/NG Testing for Chlamydia and Gonorrhea Combination Test by Aptima TMA.

5.1.1. CPT Code to be used shall be 87491, 87591

#### **6. QUALIFICATIONS**

- 6.1. Bidder shall be licensed by the State of New York and be approved by the County of Rockland. All current licenses shall be included with the submitted bid.
- 6.2. Bidder shall submit the following with their bid:
  - 6.2.1. List of a minimum of three references on the reference page provided in this bid package, preferably contracts similar in nature with Government Health Departments.
  - 6.2.2. Provide information on any State or Federal litigation within the last two years (provide with bid on a separate page).

#### **7. PAYMENT**

- 7.1. The County of Rockland upon submission of properly executed invoices shall pay vendor, monthly, for all authorized tests.

#### **8. AWARD**

- 8.1. Bid shall be awarded to the lowest responsible bidder meeting the specifications of this bid.

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- 8.2. Quantities listed on this bid submission forms are estimates. Actual quantities required may be greater or less than the estimated amounts.

**DEPARTMENT OF GENERAL SERVICES, PURCHASING DIVISION**

Dr. Robert L. Yeager Health Center  
50 Sanatorium Rd, Building A  
Pomona, New York 10970  
Phone: (845) 364-3820 Fax: (845) 364-3809  
Email: purchasing@co.rockland.ny.us

**Paul Brennan, FNIGP, CPPO**  
*Director of Purchasing*

**ADDENDUM # 1**

**RFB-RC-2020-079**

**Lab Testing- Chlamydia and Gonorrhea Combination Testing**

The information in this addendum supersedes any contradictory information set forth in the contract documents. Acknowledge receipt of this addendum in the space provided on the signature page of the bid proposal. Failure to do so, may subject the bidder to disqualification. This addendum forms a part of the contract documents.

**Aptima Chlamydia and Gonorrhea Combination Testing shall be from Pharyngeal and/or Rectal sources.**

**SIGNED:**

*Paul J. Brennan*

**PAUL J. BRENNAN, FNIGP, CPPO**  
**DIRECTOR OF PURCHASING**

ADDENDUM

8/3/20