GWINNETT COUNTY
DEPARTMENT OF FINANCIAL SERVICES
PURCHASING DIVISION

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November 5, 2026

Addendum #1
RP039-26
Provide Medical Examinations, Drug Screening and other Miscellaneous Job-Related Medical Screenings for Employees and Applicants on an Annual Contract

*****The proposal deadline has been postponed to 2:50 P.M. on November 12, 2026.*****

Revisions

- **Page 38, Sample Contract, 1. Term:** Strike "January 1, 2027." The contract term will begin February 1, 2027.

Questions

Q1. May the full scope be delivered through the service provider as the prime contractor using participating medical providers and clinics?

A1. The County intends to award this contract to one service provider, evaluating the proposal response, including references, for that service provider. If a service provider intends to subcontract any portion of this contract, that must be specifically detailed in the proposal response. The County reserves the right to accept or reject any subcontractors.

Q2. What documentation should be included for medical providers, including physician qualifications, backup coverage, and facility locations?

A2. Refer to section V, proposal evaluation item D.

Q3. Must physicians personally perform each physical examination, or are nurse practitioners with physician oversight acceptable?

A3. A nurse practitioner is acceptable.

Q4. Does the requirement for express in-house drug screening apply only to non-DOT testing, with DOT/FTA specimens sent directly to an HHS-certified laboratory?

A4. Correct.

Q5. May a service provider submit a proposal for drug and alcohol testing only, or must the proposal cover the entire medical-screening scope?

A5. The proposal must cover the entire medical screening scope.

Q6. If the entire scope is required, may the service provider partner with or subcontract to a qualified occupational-health provider? What qualifications must the prime contractor hold?

A6. See A1.

Q7. May an appropriately licensed nurse practitioner perform the required medical examinations and screenings as part of our team or as a subcontractor? Which services, including DOT physical examinations, require a physician or other specifically credentialed provider?

A7. See A1. It is the responsibility of the service provider to be knowledgeable of the laws requiring the applicable certifications for each service.

Q8. What does “express” testing mean within this solicitation, and what testing methods and turnaround times are required?

A8. “Express in-house drug testing” refers to a rapid drug screening method performed directly at an employer’s facility, staffing agency, or a private collection site, providing preliminary results within minutes.

Q9. What steps should a service provider take to receive all addenda and official responses to questions?

A9. All addenda and official responses will be sent to each service provider that submits a question or originally received the RFP directly from Gwinnett County. All addenda and official responses are also posted on the Gwinnett County website.

Q10. Does RP039-26 allow service providers to propose on the drug/alcohol testing scope only, the occupational medical examination scope only, or both?

A11. See A5.

Q12. If a service provider bid the drug/alcohol testing scope, may the 24/7 collection and testing services be performed through a subcontracted or partner laboratory while the service provider remains the prime contractor?

A12. See A1.

Q13. If the laboratory partner provides its own certified Medical Review Officer as part of its toxicology program, would that satisfy Gwinnett County’s MRO requirement, or must the prime contractor separately employ or contract with the MRO?

A13. Refer to Section III, A.1 (e).

Q14. Does Gwinnett County require a backup licensed physician/MRO in addition to the primary MRO?

A14. Yes. Refer to Section III, A.3 (h).

Q15. Does the current contract require the prime contractor itself to operate a 24/7 physical collection site, or may a qualified subcontracted or partner site fulfill the after-hours requirement?

A15. See A1.

Q16. What is the current estimated annual volume for the drug/alcohol testing scope, including approximate random, reasonable-suspicion, pre-employment, post-accident, and other testing volumes?

A16. This information is unavailable at this time. However, in 2025 there were approximately 1,800 visits.

Q17. Can the County provide the current or most recent pricing or award breakdown between the drug/alcohol testing services and the occupational medical examination services?

A17. For information regarding the previous solicitation, please submit an open records request through the Gwinnett County website.

Q18. For the occupational medical examination portion, may examinations be performed by a qualified APRN experienced in occupational medicine with physician collaboration, or must the examining provider personally be a physician?

A18. See A3.

Q19. Would a proposal built on on-site mobile services at Gwinnett County facilities, supplemented by a collection point in Gwinnett County through a partner clinic, receive full consideration under the facilities criteria, or is a fixed brick-and-mortar location in Gwinnett County required to score?

A19. A brick-and-mortar location is not required but is preferred.

Q20. Does the County require the NLCP certification to be held directly by the prime vendor, or is certification held by the performing laboratory acceptable?

A20. Yes. The NLCP certification should be held by the performing laboratory. Refer to Section III, B.1 (i).

Q21. What is the correct contract start date?

A21. The correct contract start date is 2/1/2027.

Q22. Please clarify whether the County accepts proposals for drug and alcohol testing services separately from medical examinations, or whether collection-only providers may participate as subcontractors?

A22. See A1.

Q23. Is there a current or previous contractor providing the drug screening, breath alcohol testing, random selection, or other services in this RFP? If so, please share the contractor's name, the contract number, the contract term, and the current pricing or annual contract value.

A23. For information regarding the previous solicitation, please submit an open records request through the Gwinnett County website.

Q24. Are any personnel performing work under the current contract covered by a Collective Bargaining Agreement?

A24. The County does not currently have any personnel covered by the Collective Bargaining Agreement.

Q25. Should TB screening be priced as a skin test or a blood test? The Specifications refer to a "TB skin test" and a chest X-ray "if positive TB Tine," while the fee schedule bundles list "TB Screening (Blood Test)" and item 17j lists "TB tine test (tuberculosis) - blood draw."

A25. Not all positions require TB Tine test. There are some positions that will go straight to TB Blood Test. If a position requires a TB blood test, the cost should reflect the price of the blood test including a chest x-ray, if positive.

Q26. The Specifications state that all tests are to be completed "express" (in-house), with non-negative results sent to an HHS-certified (NLCP) laboratory. Does this in-house instruction apply to DOT-regulated tests (fee items 1 and 24), or should DOT-regulated specimens go directly to an NLCP-certified laboratory as required under 49 CFR Part 40?

A26. Refer to Section A, item 1A in the RFP. Per federal regulation, DOR-regulated tests must go directly to the NLCP laboratory.

Q27. If the proposer is the prime contractor and names a licensed occupational health provider as a subcontractor to perform the clinical services, will that subcontractor's experience, medical staff, and client references count toward the Demonstrated Knowledge and Experience (D) and References (E) criteria?

A27. See A1.

Q28. Please confirm whether the MRO and examining physician may be provided through a contracted occupational medicine network and third-party administrator arrangement, with the physicians named in the proposal, or whether the County requires these physicians to be direct employees or contracted individually by the bidder.

A28. See A1.

Q29. Will the County consider a proposal limited to drug/alcohol testing, random-program administration, collection coordination, laboratory testing, and MRO services, or must one proposer perform the entire scope of occupational medical examinations as prime contractor?

A29. See A1.

Q30. May a proposing service provider identify and use Gwinnett County approved local clinical subcontractors for the examination and fitness-for-duty portions of the scope?

A30. See A1.

Q31. May the HHS-certified laboratory, MRO, and collection sites be furnished through contracted network partners, or must those resources be owned and directly employed by the proposer?

A31. See A1.

Q32. For the requirement that facilities be convenient to Gwinnett County and available 24/7, may a proposer satisfy this through named network collection facilities and after-hours arrangements in or near the County?

A32. See A1.

Q33. Please confirm whether proposals may be evaluated and awarded by service category or as a partial award.

A33. See A5.

Q34. Can the County provide annual historical volumes for each service category over the past three years, including:

- Pre-employment physicals
- DOT physicals
- Return-to-duty examinations
- Fitness-for-duty examinations
- Drug Testing (pre-employment, random, post-accident, reasonable suspicion, return-to-duty)
- Alcohol testing
- Specialty screenings

A34. The County is unable to provide this information at this time.

Q35. Is the County currently utilizing a single contractor for all services under this solicitation, or are services performed by multiple vendors? If so, who are they for each part of the scope of services?

A35. The County has 1 contractor that handles the full scope - Occupational Health Centers of Georgia, P.C. dba Concentra Medical Centers.

Q36. Are mobile collection services desired for post-accident, reasonable suspicion, or other testing events?

A36. If the service provider is offering these services, it will need to be included in the proposal including pricing and detail of the process for this.

Q37. Does the County anticipate requiring any on-site services at County facilities including:

- Flu clinics
- Physical examinations
- Vaccination programs
- Drug and alcohol collections
- Medical surveillance activities

A37. The County does not require any on-site services at this time, but the service provider will need to be able to perform these services at any location If needed.

Q38. Will the awarded service provider be responsible for administering the random selection program, including generating random pools and notifications, or only performing collections?

A38. Yes, the full process.

Q39. Approximately how many random drug and alcohol testing events are conducted annually by employee category?

A39. Four, conducted on an annual basis. Refer to Section III, A.1 (f).

Q40. Are there any required interfaces with existing County HR, occupational health, or risk management systems?

A40. No, not at this time.

Q41. Does the County require online portal access for managers or authorized County administrators?

A41. Yes.

Q42. Does Gwinnett County expect all MRO services to be included in proposed pricing, or may MRO reviews be priced separately?

A42. This needs to be included in the pricing.

Q43. Does Gwinnett County anticipate psychiatric/psychological fitness-for-duty evaluations as part of this contract?

A43. No.

Q44. Does Gwinnett County require 24/7 collection capability for post-accident and reasonable suspicion testing?

A44. Yes. Refer to Section III, A.3 (a).

Q45. Are there required response times for emergency testing situations?

A45. Response times should be immediate.

Q46 If a service provider transition occurs, what implementation timeline does Gwinnett County anticipate between award and go-live?

A46. Go-live will need to be the start of the contract which is 2/1/27.

Q47. Will historical employee records need to be migrated or made available to the awarded contractor?

A47. Historical medical records would not be migrated or made available. This will be housed with County HR.

Q48. The RFP references both telephone and in-person physician access. Please confirm whether physician consultations provided by telephone and/or in-person are to be billed separately on an as-needed basis or are expected to be included with the proposed examination pricing.

A48. Please include pricing for all services in the proposal.

Q49. May examination and medical screening required under this contract be performed by qualified Advanced Practice Providers (Nurse Practitioners and Physician Assistants), consistent with the applicable state regulations?

A49. Yes to both. See 3a.

Q50. The solicitation references chest X-ray services. Please confirm whether chest X-rays are only required when clinically indicated, such as following a positive tuberculosis screening result, rather than as a standard component of all examinations.

A50. Chest X-rays are only required when clinically indicated, rather than as a standard component of all examinations.

Q51. Please confirm if the NO BID form is required even if we are participating in the bidding process.

A51. Confirmed. The form only needs to be returned by service providers that are not responding to the RFP.

Q52. As the authorized signer and the proposal team are located in different locations/states, will you allow the use of electronic signatures through Adobe for the printed copies of the response?

A52. Electronic signatures using Adobe, DocuSign, or a similar program are acceptable.

Q53. Should all printed copies be submitted unbound?

A53. Copies may be bound. One original should be unbound.

Q54. Will Gwinnett County accept a proposal in which the pre-employment, fitness-for-duty, return-to-duty, and change-of-position examinations are performed by a licensed occupational medicine practice under subcontract to the service provider? If so, must the subcontractor and its physicians be named in the proposal, and must the subcontractor meet the same insurance requirements?

A54. See A1. Any County approved subtractor must also meet the requirements.

Q55. 49 CFR Part 40 does not permit point-of-collection (“Express”) screening for DOT/FTA-regulated tests. Please confirm that FTA-regulated specimens may be sent directly to the HHS/NLCP-certified laboratory.

A55. See A26.

Q56. For non-DOT safety-sensitive testing (items 2-3, ~1,000 test/year), will Gwinnett County accept lab-based oral fluid testing under its Drug and Alcohol-Free Workplace Policy? Will Gwinnett County accept rapid urine and/or oral saliva (express) tests for non-regulated employees?

A56. The County would be open to discuss these tests in addition to the required tests outlined in the RFP with the awarded service provider.

Q57. For the breath alcohol line item (approximately 200 per year), should the price include the confirmation test? Should after-hours or on-site call-out fees be priced as a separate line item?

A57. Pricing should be all inclusive and priced as outlined in the fee schedule. After-hours, on-site call out fees, and any other miscellaneous fees should be included in the individual unit prices.

Q58. Would the 24/7 requirement for random, post-accident, and reasonable suspicion testing be met if the service provider offers a fixed collection site open 24/7 in addition to mobile collections?

A58. Yes.

Q59. For components performed by outside providers (for example, outside laboratory panels or chest X-rays), should these be included in the fee schedule pricing, or may they be billed as pass-through charges at cost?

A59. These costs should be included in the unit pricing listed on the fee schedule.

Q60. Will Gwinnett County accept references from government agencies and court programs that provide similar services but are smaller than Gwinnett County's program?

A60. The references provided should be of similar size and scope of this solicitation.

Q61. Will there be an opportunity to interview the finalist(s)?

A61. Interviews are an optional part of the evaluation. The County will determine if interviews are necessary.

Q62. The RFP Indicates that results should be sent via email. Would results securely housed within the service provider's portal, where designated County personnel can securely log in to retrieve results upon email notification of completion satisfy this requirement?

A62. Yes.

Q63. The RFP requests a sample of annual review reporting. Could the County provide additional details regarding the information, metrics, or format that should be included in this report?

A63. Utilization reporting including, but not limited to, department and type of service.

Q64. Regarding the annual review reporting, would physical examination results reported as the following be a sufficient format?

a. May work without limitations
b. May work with limitations
c. Unable to meet physical requirements
d. Determination pending

A64. See A63.

Q65. The RFP states that all results must be reported as pass/fail. For drug testing, would results as negative/positive be acceptable?

A65. Yes.

Q66. For positive drug test results, would it be acceptable to post the results to a secure portal accessible by the Designated Employer Representative (DER), with an accompanying email notification, rather than proving notification via telephone?

A66. No. Per the RFP, a phone call and email are required.

Q67. Regarding the 24/7/365 service requirement: will the County describe how after-hours coverage is evaluated? Would an on-call response times from a contractor's network (rather than a continuously staffed physical location) satisfy the requirement?

A67. Service providers should detail the 24/7/365 coverage process in proposal response. The County will score based on how the process meets the County requirements.

Q68. Regarding the insurance requirements: does the County require the AM Best A-10 rating on the contractor's commercial auto liability policy specifically, or is it acceptable for the rating requirement to be met across the contractor's applicable coverage lines?

A68. The AM Best rating is a requirement for all lines of coverage except Worker's Compensation.

Q69. Regarding subcontracting: May a prime contractor name a certified laboratory/TPA Partner for the test and medical examination components, with the prime performing collecting and coordination? If so, what documentation of that relationship is required in the proposal?

A69. See A1.

Q70. Must the Medical Review Officer be an in-house license physician employed by the proposer, or may MRO services be provided through a contracted, license physician MRO?

A70. See A1.

Q71. Will the County accept mobile/on-site collection services as satisfying the requirement for facilities conveniently located in or accessible to the County, or is a fixed, staffed facility withing the County required?

A71. See A19.

This addendum should be signed in the space provided (page 23) in the original solicitation and returned with your proposal. Failure to do so may result in your quote being deemed non-responsive.

Sincerely,

Diana Turner

Diana Turner

Purchasing Associate II