EXHIBIT 1
LAKE HAVASU CITY PROFESSIONAL SERVICES CONTRACT
CONTRACT NO.: 500834
FOR ALCOHOL AND DRUG URINALYSIS TESTING SERVICES

A. Contractor shall perform the following services for Justice Involved Veterans participating in the Veterans Treatment Court. These courts aim to provide a more holistic therapeutic approach to justice, rather than relying solely on punitive measures.

1. **Information Management System (IMS)**: Provide access to a secure web-based HIPAA compliant IMS, that at a minimum allows the City to:

   a. Enroll clients in the alcohol and drug testing program;
   b. Enter custom test panels specific to each client;
   c. Order unscheduled tests for an individual client;
   d. Enter excused test periods for an individual client;
   e. Inactivate or activate clients;
   f. Track and review client test history;
   g. Enter specific client co-pay amounts;
   h. Designate vouchers for specific clients; and
   i. Track applicable client payments.

   The IMS shall include a dashboard view specific to each case manager that:

   a. Provides the supervising case manager quick access to each client;
   b. Provides a consolidated summary of all activity related to each client;
   c. Illustrates if a client is scheduled to test;
   d. Shows if a client has called the client notification system or not; and
   e. Provides a summary of recent positives, no shows, and other non-negative test results.

2. **Automated Random Selection Calendar**: Provide, support and maintain a secure automated random selection testing calendar that is configurable to City specified parameters and provides the ability to:

   a. Create default parameters that specify testing frequency and test panels, among other attributes;
   b. Schedule clients on an individual or group basis;
   c. Conduct testing services on any day of the year, including weekends and holidays;
   d. View past and future testing events via the IMS; and
   e. Manually order a one-time or unscheduled test for individual clients via the IMS.

3. **Client Notification:** Provide, support, and maintain a client notification system that notifies clients of the need to test. The client notification system must:
   a. Create a unique personal identification number (PIN) for each client;
   b. Record time, date and phone number of when clients call;
   c. At a minimum provide English and Spanish language options;
   d. Calculate a call-in compliance score for each client;
   e. Report if a client fails to contact the notification system;

f. Allow the supervising case manager to post custom text-to-speech messages for an individual client or group of clients;
g. Provide capacity adequate to efficiently handle the number of calls received during peak call-in times; and
h. Provide participants with text message and mobile application (when functionality is available) options over a call-in option.

4. **Supplies & Transportation**: Provide all necessary sample collection and transportation supplies and courier pick-up within 24 hours of notification for specimens collected by the City. Specimens will be shipped to the laboratory no more than five times per week to maintain the pricing included in Exhibit 5.

5. **Specimen Collections:** Conduct same-sex, directly observed urine collections and will also provide oral fluid and hair collection options. Contractor shall:
   a. Maintain and operate a Patient Care Center (PCC) for specimen collections.
   b. Operate the PCC for in alignment with the current City PCC hours on weekday and weekend/holiday testing days per the random selection process. The PCCs will be closed if random testing is not scheduled.
   c. Staff the PCCs with personnel that are vetted via a criminal background check and drug test, trained on how to collect various specimens, and provide instruction regarding the confidentiality of alcohol and drug testing information;
   d. Provide an incident report if a patient attempts to use a device, adulterate a sample, or substitute a sample;
   e. Conduct brief orientation sessions when each new patient reports for an initial test and on an as-needed basis. The orientation sessions will provide patients with the necessary information regarding the alcohol and drug testing process. For select patients, the orientation may include the explanation and execution of an City -approved Alcohol & Drug Testing agreement and the explanation and distribution of a list of acceptable over-the-counter medications for common symptoms;
   f. If applicable, collect patient payments prior to specimen collection. Clients may pay with cash, money orders, cashier's checks, debit cards, or credit cards. Debit card and credit card payments are subject to a transaction fee. Personal checks will not be accepted.

6. **Laboratory Testing**: Contractor shall:
   a. Operate a laboratory that is certified by the Department of Health and Human Services (DHHS), Clinical Laboratory Improvements Act (CLIA) and the College of American Pathologists – Forensic Drug Testing (CAP-FDT);
   b. Conduct a laboratory immunoassay screen on all samples;
   c. All positive immunoassay screens must be run a second time with a new aliquot of the specimen prior to reporting the positive specimen;
   d. Report negative test results for urine and oral fluid on the next business day and non-negatives within 3 business days. Test results for hair specimens shall be reported within five business days;
   e. Conduct confirmation via GC/MS or LC-MS/MS as requested by the City;
   f. Retain negative specimens for five (5) business days;

g. Store non-negative samples in a secure, frozen store for sixty (60) days;
h. Test assays at the cut-off levels listed in Table 1 below

Table 1 – SPECIMEN ASSAY CUTOFFS

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
Amphetamines	Urine		100 ng/mL
MDA	Urine	**1000 ng/mL**	50 ng/mL
MDEA	Urine	**or 500 ng/mL**	50 ng/mL
MDMA	Urine		50 ng/mL
Methamphetamine	Urine		100 ng/mL
Phentermine	Urine		50 ng/mL
Cannabinoids	Urine	**20 ng/mL**	5 ng/mL
Cocaine	Urine	**300 ng/mL or**	
Benzolecognine	Urine	**150 ng/mL**	50 ng/mL
Opiates	Urine		N/A
Heroin (6-MAM)	Urine		5 ng/mL
Codeine	Urine		50 ng/mL
Hydrocodone	Urine	**300 ng/mL**	50 ng/mL
Hydromorphone	Urine		50 ng/mL
Morphine	Urine		50 ng/mL
Oxycodone	Urine		50 ng/mL
Oxymorphone	Urine		50 ng/mL
PCP	Urine	**25 ng/mL**	12 ng/mL
Barbiturates	Urine		N/A
Butabarbital	Urine	**200 ng/mL**	100 ng/mL
Pentobarbital	Urine		100 ng/mL
Secobarbital	Urine		100 ng/mL
Benzodiazepines	Urine		N/A
Alprazolam	Urine		50 ng/mL

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
Clonazepam	Urine	**200 ng/mL**	50 ng/mL
Diazepam	Urine		50 ng/mL
Hydroxyalprazolam	Urine		50 ng/mL
Lorazepam	Urine		50 ng/mL
Nordiazepam	Urine		50 ng/mL
Oxazepam	Urine		50 ng/mL
7-Aminoclonazepam	Urine		50 ng/mL
Temazepam	Urine		50 ng/mL
Buprenorphine	Urine	**5 ng/mL**	5 ng/mL
Norbuprenorphine	Urine		50 ng/mL
Cotinine	Urine	**500 ng/mL**	N/A
Ecstasy	Urine	**500 ng/mL**	100 ng/mL
EtG	Urine	**500 ng/mL**	300 ng/mL
EtS	Urine		100 ng/mL
MDEA	Hair		200 pg/mG
Phentermine	Hair		200 pg/mG
Methamphetamines & Ecstasy	Hair		200 pg/mG
Cocaine	Hair		100 pg/mG
Benzoylecgonine	Hair		100 pg/mG
Opiates	Hair		100 pg/mG
Codeine, Morphine, Oxycodone, Oxymorphone, Hydrocodone, Hydromorphone	Hair		100 pg/mG
6MAM	Hair		20 pg/mL
PCP	Hair		300pg/mG
Cannabinoids	Hair		0.1pg/mG
Benzodiazepines	Hair		50 pg/mG

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
Alprazolam, Clonazepam, Diazepam, Lorazepam, Nordiazepam, Oxazepam, Temazepam	Hair		50 pg/mG
Amphetamines	Oral Fluid	**12.5 ng/mL**	10 ng/mL
Methamphetamine	Oral Fluid		10 ng/mL
MDA	Oral Fluid		10 ng/mL
MDEA	Oral Fluid		10 ng/mL
MDMA	Oral Fluid		10 ng/mL
Benzodiazepines	Oral Fluid	**5 ng/mL**	N/A
Alprazolam	Oral Fluid		5 ng/mL
Diazepam	Oral Fluid		5 ng/mL
Nordiazepam	Oral Fluid		5 ng/mL
Lorazepam	Oral Fluid		5 ng/mL
Oxazepam	Oral Fluid		5 ng/mL
Temazepam	Oral Fluid		5 ng/mL
Clonazepam	Oral Fluid		5 ng/mL
Buprenorphine	Oral Fluid	**1.25 ng/mL**	5 ng/mL
Norbuprenorphine	Oral Fluid		5 ng/mL
Cocaine	Oral Fluid	**5 ng/mL**	5 ng/mL
Benzoylecgonine	Oral Fluid		5 ng/mL
Cannabinoids	Oral Fluid	**2 ng/mL**	2 ng/mL
Ethanol	Oral Fluid	**0.04 g/dL**	0.01 g/dL
Fentanyl	Oral Fluid	**2 ng/mL**	0.5 ng/mL
Norfentanyl	Oral Fluid		0.5 ng/mL

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
Opiates	Oral Fluid		N/A
6-MAM	Oral Fluid		0.5 ng/mL
Codeine	Oral Fluid		5 ng/mL
Morphine	Oral Fluid	**10 ng/mL**	5 ng/mL
Hydrocodone	Oral Fluid		5 ng/mL
Hydromorphone	Oral Fluid		5 ng/mL
Oxycodone	Oral Fluid		5 ng/mL
Oxymorphone	Oral Fluid		5 ng/mL
Fentanyl	Urine		1 ng/mL
Norfentanyl	Urine		1 ng/mL
Acetyl Fentanyl	Urine		1 ng/mL
Acryl Fentanyl	Urine		1 ng/mL
Alfentanil	Urine		1 ng/mL
Benzyl Carfentanil	Urine		1 ng/mL
beta-Hydroxy Fentanyl	Urine		1 ng/mL
Butyryl Fentanyl	Urine		1 ng/mL
Carfentanil	Urine	**2 ng/mL**	1 ng/mL
Cyclopropyl Fentanyl	Urine		1 ng/mL
Fluorobutyryl Fentanyl	Urine		1 ng/mL
Furanyl Fentanyl	Urine		1 ng/mL
Methoxyacetyl Fentanyl	Urine		1 ng/mL
Methylfentanyl	Urine		1 ng/mL
Thienyl Fentanyl	Urine		1 ng/mL
Sufentanil	Urine		1 ng/mL
Gabapentin	Urine	**1.5ng/mL**	100 ng/mL
Ketamine	Urine	**100 ng/mL**	50 ng/mL
Kratom	Urine		N/A
Mitragynine	Urine	**50 ng/mL**	5 ng/mL
7 Hydroxymitragynine 1	Urine		5 ng/mL

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
LSD	Urine	**0.5 ng/mL**	0.5 ng/mL
Meperidine	Urine	**200 ng/mL**	N/A
Meperidine	Urine		50 ng/mL
Normeperidine	Urine		50 ng/mL
Methamphetamines	Urine	**500 ng/mL**	100 ng/mL
Methadone	Urine	**300 ng/mL**	25 ng/mL
EDDP	Urine		25 ng/mL
Methaqualone	Urine	**300 ng/mL**	N/A
Naloxone	Urine	**N/A**	50 ng/mL
Naltrexone	Urine	**N/A**	50 ng/mL
Propoxyphene	Urine	**300 ng/mL**	25 ng/mL
Norpropoxyphene	Urine		25 ng/mL
SOMA	Urine	**100 ng/mL**	N/A
Carisoprodol	Urine		50 ng/mL
Meprobamate	Urine		50 ng/mL
Synthetic Cannabinoids & Stimulants	Urine		10 ng/mL
Tramadol	Urine	**200 ng/mL**	50 ng/mL
O-Desmethyltramadol	Urine	**200 ng/mL**	25 ng/mL
Zolpidem	Urine	**20 ng/mL**	10 ng/mL
Xylazine	Urine		10 ng/mL
Amphetamines	Hair		200 pg/mG
Oxycodone	Oral Fluid	**10 ng/mL**	5 ng/mL
Oxymorphone	Oral Fluid		5 ng/mL
Methadone	Oral Fluid	**12.5 ng/mL**	5 ng/mL
EDDP	Oral Fluid		5 ng/mL
Methamphetamines	Oral Fluid	**12.5 ng/mL**	10 ng/mL
PCP	Oral Fluid	**2.5 ng/mL**	5 ng/mL
Tramadol	Oral Fluid	**10 ng/mL**	5 ng/mL

Name	Type	Immunoassay Cut-off	LC-MS/MS - Cut-off
Breath Alcohol Test	Breath	**0.02**	0.02
pg/mG = picogram per milligram of hair			
ng/mL = nanogram per milliliter of urine			

7. **Electronic Chain of Custody**: The IMS shall generate a legally defensible electronic chain of custody that fully integrates client demographic data (name, gender, age, case manager, etc.) and tracks the specimen during all phases of the testing process.

8. **Results Reporting**: Contractor shall report all test results and related information via the IMS. Specifically, the Contractor shall:
   a. Report negative test results for urine and oral fluid on the next business day and non-negatives within 3 business days. Test results for hair specimens shall be reported within five business days;
   b. Segment results and test data by Contractor's supervising case manager;
   c. Conduct data analysis on specimen results to discern new use from residual use;
   d. Assist with results interpretation; and
   e. Provide consultation and results interpretation in-person and/or via teleconference on an as needed basis.

9. **Information Reporting**: The IMS shall provide the City with program analytics that aid the City in data analysis and report generating functions. Reports shall be sortable by supervising officer and at a minimum shall include:
   a. Detailed and summary results;
   b. Individual test reports;
   c. Client test history;
   d. An overview of all testing activities; and
   e. Detailed views of the historic and future testing calendars, among others.

10. **Primary Contact:** Contractor will designate a primary contact. Such contact may be changed from time to time as communicated by Contractor.

11. **Expert Testimony**: Contractor shall provide legal affidavits and/or expert testimony upon request. The City will work with Contractor to provide as much advance notice as possible, preferably at least 2 weeks, for expert testimony needs.

12. **Newsletter**: Contractor shall provide a free electronic newsletter, published monthly that covers topics in the criminal justice and public safety markets, including topics on emerging trends in the

manufacturing and abuse of designer drugs and research and reporting on issues related to substance abuse.

13. **Training & Orientation Sessions:** Contractor will conduct training and orientation sessions for judges, attorneys, and City staff with respect to alcohol and drug testing process. Contractor will work with the City to mutually schedule the training and orientation sessions.

14. **Monthly Account Summary**: Contractor will track testing fees and client co-pays to provide a monthly account summary and invoice within the following month.

B. The maximum payment under this Contract, including expenses, is:
"Not To Exceed" amount of $30,000 annually as per rates listed in Exhibit 5.

C. City shall pay Contractor on the following basis:
City shall make payment to contractor within thirty (30) days from the time of invoice, provided the contractor submits an invoice that meets the City's accounting level standards pursuant to City requirements.

C. Contractor will bill City for the work as follows:**
Contractor shall provide an invoice for services completed during the latest monthly billing period. Invoice process will continue until services are completed and accepted and combined invoice amounts do not exceed the maximum payment pursuant to item B listed above.