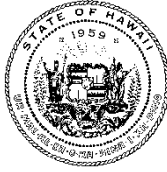


JOSH B. GREEN M.D.
GOVERNOR
KE KIA'ĀINA



BONNIE KAHAKUI
ADMINISTRATOR

**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

P.O. Box 119
Honolulu, Hawaii 96810-0119
Tel: (808) 586-0554
email: state.procurement.office@hawaii.gov
<http://spo.hawaii.gov>

August 12, 2025

TO: Executive Departments/Agencies
Department of Education
(Limited to CDL and BU10 Drug and Breath Alcohol Testing Programs)
University of Hawaii
Public Charter School Commission and Schools
Judiciary

FROM: Bonnie Kahakui, Administrator *Bonnie A. Kahakui*

SUBJECT: **NEW PRICE LIST**
SPO Price List Contract No. 25-19
**CDL AND NON-CDL DRUG AND BREATH ALCOHOL TESTING AND
MEDICAL REVIEW SERVICES FOR THE STATE EMPLOYEES DRUG AND
ALCOHOL TESTING PROGRAM**
IFB No. 25009
Expires: August 14, 2026

The new price list for CDL and Non-CDL Drug and Breath Alcohol Testing for the State Employees Drug and Alcohol Testing Program is effective August 15, 2025.

Note: Until the vendor is awarded for Medical Review Services (MRO) Services, agencies are advised to purchase MRO Services for the State Employees Drug and Alcohol Testing Program from best available source using an applicable method of procurement such as small purchases or competitive sealed bidding after August 14, 2025. If you have any questions about MRO services, please contact Byron Sasaki at DHRD/ECD/Safety & Return to Work Branch at (808) 587-2875, or email at byron.n.sasak@hawaii.gov.

The new price list contract is available on the SPO website: <http://spo.hawaii.gov>. Click on *Price & Vendor Lists Contracts* on the home page.

If you have any questions, please contact Alan Yeh at (808) 587-3355 or alan.a.yeh@hawaii.gov.

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**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

SPO Price List Contract No. 25-19
Replaces SPO Price List Contract 21-04
Effective: 08/15/2025

THIS SPO PRICE LIST CONTRACT IS FOR AUTHORIZED BUSINESS USE ONLY

**CDL AND NON-CDL DRUG AND BREATH ALCOHOL TESTING AND MEDICAL REVIEW
SERVICES FOR THE STATE EMPLOYEES DRUG AND ALCOHOL TESTING PROGRAM**

(IFB No. 25009)

August 15, 2025 to August 14, 2026

GENERAL INFORMATION. This price list is to provide drug and breath alcohol collection and testing which meet the requirements found in the Omnibus Transportation Employee Testing Act of 1991, the Federal Department of Transportation 49 CFR Part 40, and the Department of Health and Human Services Rules promulgated, thereunder, as amended and memorandum of agreement with employee associations.

PARTICIPATING JURISDICTIONS listed below have signed a cooperative agreement and/or a memorandum of agreement with the SPO and are authorized to utilize this vendor list contract.

Executive Departments/Agencies

Department of Education

(Limited to CDL and BU10 Drug and Breath Alcohol Testing Programs)

University of Hawaii

Public Charter School Commission and Schools

Judiciary

The participating jurisdictions are not required but may purchase from this vendor list contract, and requests for exceptions from the contract are not required. Participating jurisdictions are allowed to purchase from other contractors, however, HRS chapter 103D and the procurement rules apply to purchases using the applicable procurement method and its procedures, such as small purchases or competitive sealed bidding. The decision to use this contract or to solicit pricing from other sources will be at the discretion of the participating jurisdiction.

POINTS OF CONTACT. Questions regarding the services listed, ordering, pricing, status, and testing requirements should be directed to Jennifer Mori-Kelbey or Byron Sasaki, Department of Human Resources Development, Safety Office, at jennifer.mori-kelbey@hawaii.gov and byron.n.sasaki@hawaii.gov or (808) 587-0900.

Procurement questions or concerns may be directed as follows:

Jurisdiction	Name	Phone	Fax	E-mail
Executive	Alan Yeh	587-3355	586-0570	alan.a.yeh@hawaii.gov
DOE	Procurement Staff	675-0130	675-0133	G-OFS-DOE-Procurement@k12.hi.us
UH	Sarah Allen	956-2189	956-2093	Sarah-Jane.Allen@hawaii.edu
Public Charter School Commission and Schools	Danny Vasconcellos	586-3775	586-3776	danny.vasconcellos@spcsc.hawaii.gov
Judiciary	Tritia Cruz	538-5805	538-5802	tritia.l.cruz@courts.hawaii.gov

USE OF THIS LIST CONTRACT BY NONPROFIT ORGANIZATIONS. Pursuant to HRS §103D-804, nonprofit organizations with current purchase of service contracts (HRS chapter 103F) have been invited to participate in the SPO price and vendor list contracts.

A listing of these nonprofit organizations is available at the SPO website: <http://spo.hawaii.gov>. Click on *For Vendors > Non-Profits > Cooperative Purchasing Program > View the list of qualifying nonprofits eligible to participate in cooperative purchasing*.

If a nonprofit would like to purchase from an SPO price or vendor list contract, the nonprofit must obtain approval from each Contractor (participation must be mutually agreed upon, for example). A Contractor may choose to deny participation by a nonprofit. However, if a nonprofit and Contractor mutually agree to this arrangement, it is understood that the nonprofit will retain its right to purchase from other than an SPO price list contract vendor(s).

AUTHORIZED CONTRACTORS. Diagnostic Laboratory Services, Inc. (DLS) is the Contractor authorized to provide CDL and Non-CDL Drug and Breath Alcohol Collection and Testing Services.

MOLOKAI AND LANAI employees requiring services may report to Maui or Oahu collection sites or request on-site collection by Diagnostic Laboratory Services, at the discretion of the Director and/or Designated Employer Representative (DER) having jurisdiction over the employees.

UNIT PRICES include all costs for labor, equipment, supplies, transportation, applicable taxes, and any costs to provide the services ordered by the State at the rates specified, except the General Excise Tax (GET).

COLLECTION SITES for Diagnostic Laboratory Services are listed on pages 9-10.

DRUG TEST RESULTS. Diagnostic Laboratory Services, Inc. will submit written notification of drug test results within seventy-two (72) hours or in a timely manner from the time the specimen

is received in the laboratory. All reports shall be enclosed in envelopes, sealed, and addressed to the Medical Review Officer.

MEDICAL REVIEW OFFICER (MRO). The MRO will receive, review, and interpret the test results, make all reasonable effort to notify employees (or if unable to contact the employee, the DER) with positive test results, maintain all necessary records, and send test results to the DER, in accordance with DOT regulations.

COST FOR PRE-EMPLOYMENT TESTING shall be done by the applicant or as determined by the Director of DER.

COST FOR CONFIRMATION TESTS, if testing is done by other than the Contractor listed, shall be borne by the employee requesting the confirmation test be done other than the contractor.

FORMS. The contractor(s) shall use forms prescribed by 49CFR Part 40 or as mutually agreed upon by the contractor and the DHRD director.

VENDOR CODES for annotation on purchase orders are obtainable from the *Alphabetical Vendor Edit Table* available at your department's fiscal office. Agencies are cautioned that the remittance address on an invoice may be different from the address of the vendor code annotated on the purchase order.

COMPLIANCE PURSUANT TO HRS §103D-310(c). Prior to awarding this contract, the SPO verified compliance of the Contractor(s) named in the SPO Price List Contract No. 25-19. *No further compliance verification is required prior to issuing a contract, purchase order, or pCard payment when utilizing this contract.*

PURCHASING CARD (pCard). The State of Hawaii Purchasing Card (pCard) is required to be used by the Executive department/agencies, excluding the DOE, HHSC, OHA, SFA, and UH, for orders totaling less than \$2,500. For purchases of \$2,500 or more, agencies may use the pCard, subject to its credit limit, or issue a purchase order.

Note: Vendors may not impose a transaction fee-for pCard transactions.

PURCHASE ORDERS may be issued for purchases of \$2,500 or more and for vendors who either do not accept the pCard, or set minimum order requirements before accepting the pCard.

SPO PRICE LIST CONTRACT NO. 25-19 shall be typed on purchase orders and pCard purchases issued against this price list contract.

STATE GENERAL EXCISE TAX (GET) AND COUNTY SURCHARGE shall not exceed the following rates if the seller elects to pass on the charges to its customers. The GET is not applied to shipping or delivery charges.

County	County Surcharge Tax Rate	State GET	Max Pass-On Tax Rate	Expiration of Surcharge Tax Rate
C&C of Honolulu	0.50%	4.0%	4.7120%	12/31/2030
Hawaii	0.50%	4.0%	4.7120%	12/31/2030

County of Maui (including Molokai & Lanai)	0.50%	4.0%	4.7120%	12/31/2030
Kauai	0.50%	4.0%	4.7120%	12/31/2030

The GET or use tax and county surcharge may be added to the invoice as a separate line item and shall not exceed the current max pass-on tax rate(s) for each island.

County surcharges on State General Excise (GE) tax or Use Tax may be visibly passed on but are not required. For more information on county surcharges and the max pass-on tax rate, please visit the Department of Taxation's website at <http://tax.hawaii.gov/geninfo/countysurcharge>.

PAYMENTS are to be made to the Contractor(s) remittance address. HRS §103-10 provides that the State shall have thirty (30) calendar days after receipt of invoice or satisfactory completion of the contract to make payment. Payments may also be made via pCard.

VENDOR AND PRODUCT EVALUATION. Form SPO-012, Evaluation: Vendor or Product, to address concerns on this vendor list contract, is available to agencies at the SPO website: <http://spo.hawaii.gov>. Click on *Forms* on the home page.

PRICE OR VENDOR LIST CONTRACT AVAILABLE ON THE INTERNET at the SPO website: <http://spo.hawaii.gov>. Click on *Price & Vendor List Contracts* on the home page.



DIAGNOSTIC LABORATORY SERVICES, INC.

CDL and Non-CDL Drug and Breath Alcohol Collections Testing and Services

REMITTANCE ADDRESS

Diagnostic Laboratory Services, Inc.
99-589 Iwaiwa Street
Aiea, HI 96701

Phone (808) 589-5260

Fax: (808) 589-5264

Description		Pricing
SUBSTANCE ABUSE TESTS (BASIC FEE)		
1 Laboratory Test and collection for urine specimen(s) to include Screening Test and Confirmatory Test for Amphetamines, Cocaine Metabolites, Marijuana Metabolites, Opiate Metabolites, Phencyclidine, MDMA, and screening for 6-Acetylmorphine (6-AM) as specified in Specifications herein. Specimen Collection Service performed, Sunday through Saturday, at a Contractor's designated collection site during normal operational hours or at all times at a 24-hour facility. Collections shall be pursuant to 49 CFR Part 40.		
a	CDL Federal Certified Laboratory (5 panel, MDMA, 6-AM)	\$44.00
b	Non-CDL State Certified Laboratory (5 panel)	\$40.70
SPECIMEN TESTING COLLECTION SERVICES (SITE SUPPLEMENTAL FEE)		
2	Specimen Collection Service performed at Employer worksites, Monday through Friday, 7:00 a.m. through 5:00 p.m. Collections shall be pursuant to 49 CFR Part 40.	\$17.00
3	Specimen Collection Service performed at Employer worksites, other than Monday through Friday, 7:00 a.m. through 5:00 p.m. Collections shall be pursuant to 49 CFR Part 40.	\$20.00
4	Technician Hourly Rate at Employer worksite. (Insufficient specimens and collection delays due to facility operational requirements at Hawaii State Hospital or airline schedule at remote sites, such as Kalaupapa).	\$35.00

**SPECIMEN TESTING COLLECTION SERVICES
(DIRECT OBSERVATION)**

- | | |
|---|---------|
| 5 Technician or other laboratory staff performing specimen collection services under Direct Observation procedures. | \$65.00 |
|---|---------|

BREATH ALCOHOL TESTING (BASIC FEE)

- | | |
|---|---------|
| 6 Breath Alcohol Test performed at Contractor's site, Sunday through Saturday, at designated collection site during normal operational hours or at all times at a 24-hour facility. Evidential Breath Testing Device (EBT) shall be pursuant to 49 CFR Part 40. | \$25.00 |
|---|---------|

**BREATH ALCOHOL TESTING SERVICES
(SITE SUPPLEMENTAL FEE)**

- | | |
|---|---------|
| 7 Breath Alcohol Test performed at Employer worksites, Monday through Friday, 7:00 a.m. through 5:00 p.m. EBT shall be pursuant to 49 CFR Part 40. | \$17.00 |
| 8 Breath Alcohol Test performed at Employer worksites, other than Monday through Friday, 7:00 a.m. through 5:00 p.m. EBT shall be pursuant to 49 CFR Part 40. | \$25.00 |
| 9 Technician Hourly Rate at Employer worksite. (Insufficient specimens and collection delays due to facility operational requirements at Hawaii State Hospital or airline schedule at remote sites, such as Kalaupapa). | \$35.00 |

GROUP F - EXPERT TESTIMONY

- | | |
|---|------------|
| 10 Expert Testimony by Ph.D. or M.D. as specified in Specifications herein. | \$1,000.00 |
| 11 Expert Testimony by Technologist, as specified in Specifications herein. | \$500.00 |

GROUP G - RANDOM SELECTION PROCESS

- | | |
|---|--------|
| 12 Services to establish and maintain a scientific random selection process for random testing pools as required by agency jurisdiction with no more than 300 employees for random selection. | \$0.00 |
| 13 Services to establish and maintain a scientific random selection process for random testing pools as required by agency jurisdiction with over 300 employees for random selection. | \$0.00 |

DIAGNOSTIC LABORATORY SERVICES, INC. OAHU COLLECTION SITES



DIAGNOSTIC LABORATORY SERVICES DRUG COLLECTION SITES - OAHU

ALA MOANA

Ala Moana Building
1441 Kapiolani Blvd., Suite 508
Honolulu, HI 96814
Phone: (808) 945-3124
Fax: (808) 973-4639
Hours: M-F 7:00 am - 12:00 pm
(Closed: 1st Friday of the Month from
12:30 PM to 1:30 PM)

KAHALA

4211 Waialae Avenue, Suite 200
Honolulu, HI 96816
Phone: (808) 733-2410
Fax: (808) 733-2412
Hours: M-F 6:00 am - 4:00 pm
(Closed: 3rd Thursday of the Month from
12:30 PM to 1:30 PM)

KAHEKA

Kaheka Professional Center
1481 S. King Street, Rm. 104
Honolulu, HI 96814
Phone: (808) 973-3805
Fax: (808) 973-4637
Hours: M-F 6:00 am - 5:00 pm
(Closed: 1st Thursday of the Month from
12:30 PM to 1:30 PM)

KAILUA

(A)

Kailua Professional Center
30 Aulike Street, #105
Kailua, HI 96734
Phone: (808) 266-1222
Fax: (808) 266-1226
Hours: M-F 7:00 am - 5:00 pm
(Closed: 3rd Wednesday of the Month
from 12:30 PM to 1:30 PM)

AFTER HOURS

COLLECTIONS ONLY (A)

Queens Medical Center
1301 Punchbowl Street
Nalani Wing, 4th Floor Lab
Honolulu, HI 96813
Phone: (808) 356-7700
Fax: (808) 532-2330
Hours: *AFTER HOURS SITE ONLY

M-F Between 5:00 pm & 6:00 am
Sat 12:00 pm - Mon 6:00 am
24 hrs on Holidays

*NO "Pre-Employment" testing 12 am - 6 am

KALIHI

(A)

2153 N. King Street, Suite 100B
Honolulu, HI 96819
Phone: (808) 832-6468
Fax: (808) 832-6465
Hours: M-F 6:00 am - 4:00 pm
(Closed: 3rd Friday of the Month from
12:30 PM to 1:30 PM)

KANEOHE

Kaneohe Bay Shopping Center
46-047 Kamehameha Hwy., #12
Kaneohe, HI 96744
Phone: (808) 247-6888
Fax: (808) 247-7433
Hours: M-F 5:00 am - 12:00 pm

KAPOLEI

(A)

Market Place at Kapolei Shop. Ctr.
590 Farrington Highway
Kapolei, HI 96707
Phone: (808) 693-9905
Fax: (808) 693-9984
Hours: M-F 6:00 am - 3:00 pm
(Closed: 4th Wednesday of the Month
from 12:30 PM to 1:30 PM)

WAIPAHU

(A)

94-235 Hanawai Circle
Waipahu, HI 96797
Phone: (808) 671-4261
Fax: (808) 676-3603
Hours: M-F 7:30 am - 4:30 pm
(Closed: 1st Wednesday of the Month from
12:30 PM to 1:30 PM)

QPOB III

(A)

Queens Physician Office Bldg. III
550 S. Beretania St., #101
Honolulu, HI 96813
Phone: (808) 537-3100
Fax: (808) 537-3155
Hours: M-F 6:00 am - 5:00 pm
Saturday 6:00 am - 12:00 pm
(Closed: 4th Wednesday of the Month
from 12:30 PM to 1:30 PM)

MILILANI

Mililani Family Clinic
95-1249 Meheula Parkway Suite 133
Mililani, HI 96789
Phone: (808) 623-9211
Fax: (808) 623-3040
Hours: M-F 5:00 am - 4:00 pm
(Closed: 2nd Friday of the Month
from 12:30 PM to 1:30 PM)

PEARLRIDGE

98-211 Pali Momi St., #200B
Aiea, HI 96701
Phone: (808) 485-6538
Fax: (808) 483-2046
Hours: M-F 5:00 am - 3:00 pm
(Closed: 2nd Wednesday of the Month from
12:30 PM to 1:30 PM)

EMPLOYER / DONOR INSTRUCTIONS

Donor must provide:

- 1) An official photo ID with a unique number
- 2) Preprinted lab form for urine and/or breath alcohol
- 3) Be prepared to provide a urine specimen

*You must phone site in advance if an observed collection is required

(A) Designates Breath Alcohol Site

REV 10/30/2023

DIAGNOSTIC LABORATORY SERVICES, INC. NEIGHBOR ISLAND COLLECTION SITES



DIAGNOSTIC LABORATORY SERVICES DRUG COLLECTION SITES - Neighbor Islands

HAWAII

HILO (A)

Kinoole Medical
1248 Kinoole Street, Suite 102
Hilo, HI 96720
Phone: (808) 935-9290
Fax: (808) 969-8910
Hours: M-F 5:30 am - 4:30 pm
(Closed: 2nd Thursday of the Month from 12:30 PM to 1:30 PM)

KONA (A)

75-170 Hualalai Road
Suite B200-201
Kailua-Kona, HI 96740
Phone: (808) 329-1625
Fax: (808) 329-1620
Hours: M-F 7:00 am - 4:00 pm
(Closed: 3rd Thursday of the Month from 12:30 PM to 1:30 PM)

WAIMEA (A)

Hale Ola Pono Health Center
65-1267 Kawaihae Road
Kamuela, HI 96743
Ph: (808) 885-9020
Fax: (808) 885-0494
Hours: M-F 7:30 am - 12:00 Noon
1:30 pm - 3:00 pm

AFTER HOURS COLLECTIONS ONLY

North Hawaii Community Hospital
65-1123 Mamalahoa Hwy., Suite 116
Kamuela, HI 96743
Ph: (808) 881-4470
Fax: (808) 885-0494
Hours: *AFTER HOURS SITE ONLY
M-F Between 3:00 pm & 7:00 am
Sat/Sun/Holidays: 24 Hours
*NO "Pre-Employment" testing 11 pm - 7:00 am

KAUAI

LIHUE (A)

Kuhio Medical Clinic
3-3295 Kuhio Highway
Lihue, HI 96766
Phone: (808) 245-7130
Fax: (808) 246-1848
Hours: M-F 7:00 am - 1:30 pm
(Closed: 1st Thursday of the Month from 11:30 AM to 12:30 PM)

KALAHEO

2-2494 A Kaumualii Highway
Kalaheo, HI 96741
Phone: (808) 332-0283
Fax: (808) 332-0619
Hours: M-F 8:00 am - 11:00 am

MAUI

KAHULUI (A)

200 Kalepa Place, #202
Kahului, HI 96732
Phone: (808) 877-8033
Fax: (808) 877-3381
Hours: M-F 7:00 am - 4:30 pm
Closed: 4th Thursday of the Month from 12:00 PM to 1:15 PM

Temporarily Closed

WAILUKU

99 Market Street, #207
Wailuku, HI 96793
Phone: (808) 244-1399
Fax: (808) 242-5872
Hours: M-F 7:00 am - 12:00 pm
1:00 pm - 4:30 pm

MOLOKAI (A)

KAUNAKAKAI

Molokai General Hospital
Kaunakakai, HI 96748
Ph: (808) 553-3142
Fax (808) 553-3158
Hours: M-F 2:00 pm - 4:00 pm
Do not send more than 2 donors
at the same time

EMPLOYER / DONOR INSTRUCTIONS

Donor must provide:

- 1) An official photo ID with a unique number
- 2) Preprinted lab form for urine and/or breath alcohol
- 3) Be prepared to provide a urine specimen

(A) Designates Breath Alcohol Site

You must phone site in advance if an observed collection is required

Rev 07/05/2023