



Hidalgo County Purchasing Department
2812 S. Business Highway 281
New Administration Building
Edinburg, Texas 78539
(956) 318-2626/ Fax: (956) 318-2629

August 5, 2011

Paul Gross, District Sales Manager
Quest Diagnostics Incorporated
607 East Sonterra Blvd, Suite 306
San Antonio, Texas 78258
P (210) 352-4821 F (210) 579-6746 C (210) 823-8007

via email paul.igross@questdiagnostics.com

Re: **Sixty (60) Day Extension**
Contract# E-10-330-08-31 (C-08-196-09-30)-Laboratory Services - Hidalgo County

Dear Mr. Gross:

Commissioners' Court will take applicable action on (Tuesday, August 16, 2011) in connection with the Hidalgo County's option to exercise the Sixty (60) Day grace period as stated in the current contract in place while the procurement process is completed. (Commencing, October 1, 2011, Expiring November 29, 2011) or (upon completion of the procurement process which ever comes first) under the same rate, term and conditions.

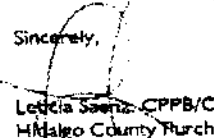
Please acknowledge receipt of this notice of extension by signing below and returning to the Purchasing Department by no later than, Tuesday, August 9, 2011, attn: Leticia Saenz, Contracts Mgr. to facsimile (956) 318-2629 or via email leticia.saenz@co.hidalgo.tx.us or rosio.villanueva@co.hidalgo.tx.us.

By: 
Paul Gross, District Sales Manager

Date: 8/8/11

Additionally, we are requesting your company provide an "Updated Certificate of Insurance" as required through Hidalgo County's Request for (Bids, Quotes, Proposals, Statement of Qualifications).

Should you have any questions or require additional information, please do not hesitate to contact me at 956-292-7000 extension 4861. Your cooperation in this matter is greatly appreciated and we hope your company continues its business relationship with Hidalgo County.

Sincerely,

Leticia Saenz, CPPB/Contracts Manager
Hidalgo County Purchasing Department

xc: file



Hidalgo County Purchasing Department
2812 S. Business Highway 281
New Administration Building
Edinburg, Texas 78539
(956) 318-2626 / Fax: (956) 318-2629

August 18, 2010

Quest Diagnostics Incorporated
Attn: Dr. Michael Peat, Ph.D.
4770 Regent Blvd
Irving, Texas 75063

Re: E-09-417-09-15 (C-08-196-09-30)
Laboratory Services - Hidalgo County

Dear Vendor:

Commissioners' Court will take applicable action (Tuesday September 01, 2010) in connection with Hidalgo County's option to renew/extend the second (2nd) year of the two (2) one (1) year term extensions as provided in the current extension/contract referenced above for: "Laboratory Services - Hidalgo County" under the same rates, terms and conditions. Renewal/Extension date effective as of September 30, 2010, terminating September 29, 1011.

Please acknowledge receipt of this notice of extension by signing below and returning to the Purchasing Department by Tuesday, August 24, 2010, 3:00 PM via facsimile to 956-292-7612 attn: Yvette Islas, Buyer III or by email: yvette.islas@co.hidalgo.tx.us.

Should you have any questions or require additional information, please do not hesitate to contact me at 956-292-7000 extension 4874. Your cooperation in this matter is greatly appreciated and we hope your company continues its business relationship with Hidalgo County.

By: _____
MICHAEL A. PEAT

Date: 8-24-10

Sincerely,

Yvette S. Islas
Hidalgo County Purchasing Department

cc: department
auditors

E-10-330-08-31



PURCHASING DEPARTMENT
County Of Hidalgo

September 01, 2009

Dr. Michael Peat, Ph.D
Quest Diagnostics Incorporated
4770 Regent Blvd.
Irving, Texas 75063

Re: *Renewal/Extension-C-08-196-09-30
Hidalgo County-Laboratory Services*

Dear Dr. Peat:

Commissioners' Court will take applicable action (Tuesday, September 15, 2009) in connection with Hidalgo County's option to renew/extend the first (1st) year of the additional two (2) one (1) year term extensions as provided in the current contract referenced above for: "Hidalgo County-Laboratory Services", under the same rates, terms and conditions. Renewal/Extension date effective as of September 30, 2009, terminating, September 29, 2010.

Please acknowledge receipt of this notice of extension by signing below and returning to the Purchasing Department by no later than, Wednesday, September 09, 2009, 3:00 P.M., via facsimile to (956) 958-292-7612, attn: Yvette S. Islas, Buyer II or by email: yvette.islas@co.hidalgo.tx.us

Should you have any questions or require additional information, please do not hesitate to contact me at (956) 292-7000-Extension 4874. Your cooperation in this matter is greatly appreciated and we hope your company continues its business relationship with Hidalgo County.

By: _____
[Signature]

Date: 9-11-09

Sincerely,

[Signature]

Yvette S. Islas, Buyer II
Hidalgo County Purchasing Department

xc: file



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/20/2010

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER MARSH USA INC. ATTN: JANET T. NORMAN 1166 AVENUE OF THE AMERICAS NEW YORK, NY 10036 37986-MAIN-10-11 xxx	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE	
INSURED QUEST DIAGNOSTICS INCORPORATED AND ITS WHOLLY OWNED SUBSIDIARIES 3 GIRALDA FARMS MADISON, NJ 07940	INSURER A: Quest Diagnostics Incorporated	NAIC #
	INSURER B: Travelers Prop. Casualty Co. Of America	25674
	INSURER C: The Travelers Indemnity Company	19437
	INSURER D: Lexington Insurance Company	19437
	INSURER E:	
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** NYC-004464998-24 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			"\$2,000,000 SELF INSURED RETENTION"	12/31/2010	12/31/2011	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$
							GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OP AGG	\$
								\$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			TC2JCAP-266T3603-TIL-10	12/31/2010	12/31/2011	COMBINED SINGLE LIMIT (Ea accident)	\$ 3,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
								\$
D	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$			35650717	12/31/2010	12/31/2011	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$
								\$
								\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER			TC2JUB-266T3523-TIL-10 (DED)	12/31/2010	12/31/2011		
C	<input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N/A			TRKUB-266T3535-IND-10 (RETRO)	12/31/2010	12/31/2011	E.L. EACH ACCIDENT	\$ 2,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 2,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 2,000,000
A	PROFESSIONAL LIAB. <input type="checkbox"/> CLAIMS MADE			SELF-INSURED RETENTION	12/31/2010	12/31/2011	\$5,000,000 (SIR)	

RECEIVED
 DEC 27 2010
 3:42

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 RE: 1221 E TENTH STREET, SUITE 101-A, WESLACO, TX 78596; 1201 E. RIDGE ROAD, SUITE A, McALLEN, TX 78503; 2723 W. TRENTON, EDINBURG, TX 78539; 302 LORENALY DRIVE, SUITE B, BROWNSVILLE, TX 78526.

CERTIFICATE HOLDER HIDALGO COUNTY HEALTH DEPARTMENT ATTN: MARTHA L. SALAZAR, CPPS 2812 SO. BUSINESS 261- NEW ADMIN BLDG EDINBURG, TX 78539	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Marla Nicholson <i>Marla Nicholson</i>
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THE STATE OF TEXAS §
 §
COUNTY OF HIDALGO §

SERVICE CONTRACT
C-08-196-09-30

THIS CONTRACT is made and entered into this 30th day of September, 2008, by and between the **County of Hidalgo, Texas "County"**, and **Quest Diagnostics Incorporated**, a New Jersey Corporation ("Company").

WHEREAS, Company responded to request for bids for "**Laboratory Services**"; and

WHEREAS, Company submitted a bid response to provide services in accordance with the specifications as bid, a copy of such specifications and bid response being attached hereto as Exhibits "A" (the "Services") and "B" respectively, and incorporated herein for all purposes (the "Specifications"); and

WHEREAS, in recognition of and in consideration of Company's agreement to perform the Services in accordance with Specifications, the Commissioners Court of County awarded the bid to Company.

NOW, THEREFORE, in mutual consideration of the foregoing and the further consideration of the following, the parties hereto agree as follows:

1. County and Company hereby agree that this Contract is entered into in order to provide the Services to locations within Hidalgo County. This Contract does not extend to any third parties any duties or benefits conferred in any manner hereunder or otherwise.
2. Company hereby promises and agrees to render and provide, during the term of this Contract, and shall be obligated to render and provide the Services in accordance with the Specifications within Hidalgo County following a request for Services by the County.

Company agrees in performing the Services that it will use proper professional standards, comply with any and all appropriate laws and regulations in providing the Services, and devote such time as is necessary to safely and efficiently provide the Services.

3. This Contract shall be for a period beginning September 30, 2008 and ending September 29, 2009 and may be extended at the sole discretion of County for an additional two (2) one (1) year terms. Hidalgo County reserves the right to continue this bid for an additional sixty (60) day grace period, under the same rates, terms, and conditions at the end of the contract term for unforeseen delay in award of new bid for the next contract term.

4. County and Company agree that either party may terminate this contract upon thirty (30) days written notice at any time for any reason or no reason at all.

5. As a condition of this Contract, Company shall hold and maintain throughout the term of this Contract all licenses and permits required, or which may be required by any authority during the term hereof to provide the Services.

6. All trucks or vehicles operated by the Company to perform the Services shall contain all equipment required by any authority to operate on streets and roads and all persons in the employ of Company who operate such trucks or vehicles shall have the required licenses, qualifications, skill and expertise to perform such Services and shall comply with all laws, rules and regulations prescribed by any agency or authority having jurisdiction with regard to the operation of such trucks or vehicles in providing the Services.

7. As consideration for rendering the Service provided for in this Contract, the County agrees to pay Company the amounts specified in Exhibit "B" payable against written invoice submitted by Company.

8. Company shall provide insurance in force on all its vehicles and all persons connected with providing the services under this Contract naming County as an additional insured (with the coverages and in the amounts described on Exhibit "C" attached hereto and incorporated herein at this point for all purposes), and shall furnish to County certificates of such insurance coverage.

9. Company shall provide a sufficient number of trucks, vehicles, personnel and equipment available to safely and efficiently provide the Services.

10. Company shall indemnify and hold harmless County, its elected officials, employees and agents from any and all claims, damages, losses, and expenses including attorney's fees for the defense of any action against County arising out of, resulting from, or connected with the provision of the Service by Company under this Contract. Said indemnity shall cover any act or failure to act by the Company, its agents or employees.

11. This Contract shall not be assignable in whole or in part by either party without prior written consent of the other party.

12. It is expressly agreed that this Contract and the performance by the parties hereunder does not create any agency relationship or master-servant relationship, that County has no supervision of the performance of the Services provided by Company, and that Company is an independent contractor under this Contract.

13. Any notice required or permitted to be given hereunder shall be in writing and shall be delivered personally or sent by certified mail, postage prepaid, as set forth below:

If to County: **The County of Hidalgo**
Attn: County Judge
100 E. Cano
Edinburg, Texas 78539

If to Company: **Quest Diagnostic Incorporated**
 Attn: C. Chris Hale
 4770 Regent Blvd
 Irving Texas 75063

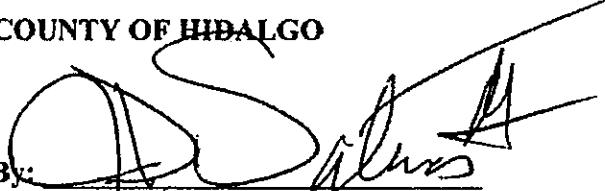
14. In case any one or more of the provisions contained in this Agreement shall for any reason be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provision thereof and this Agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained herein.

15 This Agreement shall be binding upon and inure to the benefit of and be enforceable by the parties hereto and their respective heirs, executors, administrators, legal representatives, successors, and assigns where permitted by this Agreement.

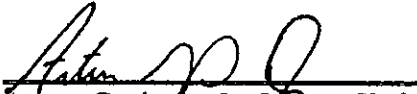
16. This Agreement shall be governed by and construed in accordance with the laws of the State of Texas and shall be performable in Hidalgo County.

WITNESS our hands in duplicate originals this _____ day of _____, 2008.

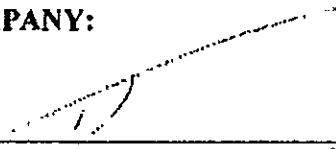
COUNTY OF HIDALGO

By: 
Juan D. Salinas, III, County Judge

ATTEST:


Arturo Guajardo, Jr. County Clerk

COMPANY:

By: 
Printed Name: MIGUEL A. PEÑA
Title: MANAGING DIRECTOR

Approved by Commissioners Court on, _____

APPROVED AS TO FORM:

Atlas & Hall, LLP

By: 

EXHIBIT "A"
SPECIFICATIONS

Exhibit "A"

**Hidalgo County
"LABORATORY SERVICES"
Bid No.: 2008-196-08-27-otm/ysi**

SPECIFICATIONS

1. Hidalgo County is seeking to contract with a qualified vendor(s) to furnish "Laboratory Services."
2. The following are the minimum requirements and/or specifications that will be acceptable to the Hidalgo County. These requirements and/or specifications must be **equal or better**, including, but not limited to, the following:

REQUIREMENTS, TERMS AND CONDITIONS

1. All costs and expenses associated with the preparation and submission of bids shall be the responsibility of the bidder and no reimbursement for such charges or expenses shall be passed onto Hidalgo County.
2. Hidalgo County Health Department has the authority to utilize State Contracts from its membership with their existing or new cooperatives when ever it is in the County's best interest to do so.
3. All services will be on an "**As Needed Basis**", there are no set quantities to be requested only approximations.
4. The initial contract term for this project will be for one (1) year with the County's option to extend for an additional two (2) one (1) year terms.
5. Hidalgo County reserves the right to continue this bid for an additional sixty (60) day grace period, under the same rates, terms and conditions at the end of the contract term for unforeseen delays in award of new bid for the next contract term.
6. Insurance requirements for this project to be maintained through out the contract term (Refer to limits on the Exhibit "C" for limits).
7. Hidalgo County reserves the right to award to one (1) or multiple vendors which ever is more valuable to the County.
8. All bid prices for items shall take into consideration shipping and handling costs and any other items mentioned on specifications as part of the fixed item price.

- 9 Hidalgo County reserves the right to add/delete items as it deems to be in the best interest of the County.
10. Specimens will be collected by Hidalgo County Staff.
- 11 Provide at least 1 (one) accessible lab location to refer patients for collection if specimen can not be collected by Hidalgo County staff (i.e. Edinburg). Laboratory will be responsible for delivery/processing of such specimens when necessary.
12. Electronic Lab results are required.
- 13 Lab must schedule and provide pick up services for all specimens from each facility listed below. Hidalgo County reserves the right to add or delete locations as it deems in the best interest of the County.
Current locations are as follows:
 - Judge Mario E. Ramirez, Jr. Juvenile Justice Center
1001 N Doolittle, Edinburg, TX 78541
 - Hidalgo County Jail
701EJ Cibolo Rd. - Edinburg, TX 78539
14. All certificates, licenses, etc. for laboratory to operate in the State of Texas are required and copies must be submitted with bid.
15. **All supplies must be provided to Hidalgo County for all required testing and results must be available and provided within 24 hours.**

Services required:

16. VDRL.
17. CBC w/ diff and platlets.
18. Cultures (wound and urine)
19. H & H.
20. Lithium levels.
21. H-pylori.
22. Chem 24.
23. UA.
24. Ocuult Blood.
25. Carbamazipine levels.
26. Valporic acid levels.

27. Dilantin levels.
28. TSH.
29. Hgal c
30. Liver enzyme panel.
31. Drug screens (serum and urine).
32. Acute Hepatitis Panel.
33. Basic Metabolic Panel.
34. Comp Metabolic Panel
35. Electrolyte Panel.
36. Hepatic Function Panel.
37. Lipid Panel.
38. Renal Function Panel.
39. CBC w Diff w Plt.
40. CBC w Diff w/o Plt.
41. CBC w/o Diff w Plt.
42. CBC w/o Diff w/o Plt.
43. Hematocrit.
44. Hemoglobin.
45. Platelet Count.
46. RBC Count.
47. WBC Count.
48. WBC Differential.
49. ABO and Rh.
50. Amylase.
51. Antinuclear Antibodies. *Results*
52. B₁₂ and Folate.

53. BUN.
54. CEA.
55. Cholesterol, Total.
56. Creatinine.
57. Digoxin.
58. FSH and LH.
59. Glucose, Plasma
60. hCG, Beta Subunit, Qual.
61. hCG, Beta Subunit, Quant.
62. Helicobacter pylori IgG.
63. Hemoglobin A1c w/MBG.
64. Hep B Surface Antibody.
65. Hep B Surface Antigen.
66. Hep C Antibody.
67. HIV-1 Antibodies.
68. Iron and IBC.
69. Magnesium.
70. Phenytoin.
71. Potassium.
72. PreGen-Plus.
73. Prolactin.
74. PSA.
75. Prothrombin Time (PT).
76. PTT Activated.
77. Rheumatoid Arthritis Factor.
78. RPR.

79. Rubella Antibodies, IgG.
80. Sed Rate, Westergren.
81. T₃ Uptake.
82. Thyroid Cascade Profile.
83. Thyroxine (T₄).
84. Testosterone.
85. TSH, 3rd generation.
86. Urinalysis (Microscopic on Positives).
87. Aerobic Bacterial Culture.
88. Chlamydia/GC DNA Probe w/confirmation on positives.
89. Chlamydia/GC DNA Probe w/out confirmation.
90. Genital Culture, Routine.
91. Group B Strep Colonization Detection Cult/DNA Probe.
92. Herpes Culture.
93. Ova & Parasites.
94. Stool Culture.
95. Throat, Beta-Hemolytic Strep Cult, Group A.
96. Upper Respiratory Culture, Routine.
97. Urine Culture, Routine.

ADDITIONAL INFORMATION:

Hidalgo County is requesting that any and all questions, inquiries and clarifications regarding quotes, bids, proposals or statements of qualifications be addressed to, Olga Montero, Buyer or Yvette Islas, Buyer, Physical: 2802 S. Business Hwy. 281 Postal/Mailing: 2812 S. Business Hwy. 281, New Administration Building, Edinburg, Texas 78539. **TELEPHONE INQUIRIES WILL NOT BE ACCEPTED.**

ALL WRITTEN INQUIRIES WILL BE ACCEPTED VIA FACSIMILE NO LATER THAN, Wednesday, August 20 2008 by 5:00 PM. Responses to said inquiries will be sent to all applicants via facsimile by no later than, Friday, August 22, 2008 by 5:00 p.m.

Hidalgo County
"LABORATORY SERVICES"
Bid No.: 2008-196-08-27-otm/ysi

- | | | |
|-----|---------------------------------|----------|
| 1. | VDRL. | \$ _____ |
| 2. | CBC w/ diff and platlets. | \$ _____ |
| 3. | Cultures (wound and urine). | \$ _____ |
| 4. | H & H. | \$ _____ |
| 5. | Lithium levels. | \$ _____ |
| 6. | H-pylori. | \$ _____ |
| 7. | Chem 24. | \$ _____ |
| 8. | UA. | \$ _____ |
| 9. | Ocuult Blood. | \$ _____ |
| 10. | Carbamazipine levels. | \$ _____ |
| 11. | Valporic acid levels. | \$ _____ |
| 12. | Dilantin levels. | \$ _____ |
| 13. | TSH. | \$ _____ |
| 14. | Hgal c. | \$ _____ |
| 15. | Liver enzyme panel. | \$ _____ |
| 16. | Drug screens (serum and urine). | \$ _____ |
| 17. | Acute Hepatitis Panel. | \$ _____ |
| 18. | Basic Metabolic Panel. | \$ _____ |
| 19. | Comp Metabolic Panel. | \$ _____ |
| 20. | Electrolyte Panel. | \$ _____ |

21	Hepatic Function Panel.	\$ _____
22	Lipid Panel.	\$ _____
23	Renal Function Panel	\$ _____
24.	CBC w Diff w Plt.	\$ _____
25.	CBC w Diff w/o Plt.	\$ _____
26.	CBC w/o Diff w Plt.	\$ _____
27.	CBC w/o Diff w/o Plt.	\$ _____
28.	Hematocrit.	\$ _____
29.	Hemoglobin.	\$ _____
30.	Platelet Count.	\$ _____
31.	RBC Count.	\$ _____
32.	WBC Count.	\$ _____
33.	WBC Differential.	\$ _____
34.	ABO and Rh.	\$ _____
35.	Amylase.	\$ _____
36.	Antinuclear Antibodies. <i>Results</i>	\$ _____
37.	B ₁₂ and Folate.	\$ _____
38.	BUN.	\$ _____
39.	CEA.	\$ _____
40	Cholesterol, Total.	\$ _____
41.	Creatinine.	\$ _____
42.	Digoxin.	\$ _____
43.	FSH and LH.	\$ _____
44.	Glucose, Plasma.	\$ _____

45.	hCG, Beta Subunit, Qual.	\$ _____
46.	hCG, Beta Subunit, Quant.	\$ _____
47.	Helicobacter pylori IgG.	\$ _____
48.	Hemoglobin A1c w/MBG.	\$ _____
49.	Hep B Surface Antibody.	\$ _____
50.	Hep B Surface Antigen.	\$ _____
51.	Hep C Antibody.	\$ _____
52.	HIV-1 Antibodies.	\$ _____
53.	Iron and IBC.	\$ _____
54.	Magnesium.	\$ _____
55.	Phenytoin.	\$ _____
56.	Potassium.	\$ _____
57.	PreGen-Plus.	\$ _____
58.	Prolactin.	\$ _____
59.	PSA.	\$ _____
60.	Prothrombin Time (PT).	\$ _____
61.	PTT Activated.	\$ _____
62.	Rheumatoid Arthritis Factor.	\$ _____
63.	RPR.	\$ _____
64.	Rubella Antibodies, IgG.	\$ _____
65.	Sed Rate, Westergren.	\$ _____
66.	T ₃ Uptake.	\$ _____
67.	Thyroid Cascade Profile.	\$ _____
68.	Thyroxine (T ₄).	\$ _____

- 69. Testosterone. \$ _____
- 70. TSH, 3rd generation. \$ _____
- 71. Urinalysis
(Microscopic on Positives). \$ _____
- 72. Aerobic Bacterial Culture. \$ _____
- 73. Chlamydia/GC DNA Probe
w/confirmation on positives. \$ _____
- 74. Chlamydia/GC DNA Probe
w/out confirmation. \$ _____
- 75. Genital Culture, Routine. \$ _____
- 76. Group B Strep Colonization
Detection Cult/DNA Probe. \$ _____
- 77. Herpes Culture. \$ _____
- 78. Ova & Parasites. \$ _____
- 79. Stool Culture. \$ _____
- 80. Throat, Beta-Hemolytic Strep Cult,
Group A. \$ _____
- 81. Upper Respiratory Culture, Routine. \$ _____
- 82. Urine Culture, Routine \$ _____

BIDDER/COMPANY NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NO/FAX NO: _____

E-MAIL ADDRESS: _____

AUTHORIZED SIGNATURE: _____

PRINT NAME: _____

TITLE: _____

EXHIBIT "B"

BID PAGE

QUEST DIAGNOSTICS
HIDALGO COUNTY PRICE PROPOSAL
39680

Service Name	Quest Service Code	Quest Service Name	Proposed Fee
VDRL	30509	VDRL, SERUM	\$12.00
CBC w/diff and platlets	6399	CBC (INCLUDES DIFF/PLT)	\$2.75
Cultures (urine)	395	CULTURE, URINE, ROUTINE	\$5.50
Cultures (wound)	4550	CULTURE, AEROBIC BACTERIA	\$15.00
H & H	7998	HEMOGLOBIN & HEMATOCRIT	\$4.14
Lithium Levels	613	LITHIUM	\$7.00
H-pylori	29407	HELICOBACTER PYLORI IGG ANTIBODY	\$12.00
Chem 24	10231	COMPREHENSIVE METABOLIC PANEL W/EGFR	\$2.67
UA	3020	URINALYSIS, COMPLETE W/REFLEX TO CULTURE	\$3.00
Occult Blood	35301	OCCULT BLOOD, STOOL - ONE SAMPLE	\$3.00
Carbamazepine levels	329	CARBAMAZEPINE, TOTAL	\$8.00
Valproic acid levels	916	VALPROIC ACID	\$10.50
Dilantin levels	713	PHENYTOIN	\$8.00
Dilantin levels	3189	PHENYTOIN, FREE	\$26.00
TSH	899	TSH	\$3.00
Hgal c	498	HEMOGLOBIN A1c	\$7.00
Liver enzyme panel	10256	HEPATIC FUNCTION PANEL	\$2.05
Drug screens (serum)	5229	DRUG SCREEN, COMPREHENSIVE (SERUM/PLASMA)	\$52.00
Drug screens (urine)	2126	DRUG ABUSE PANEL 10-50	\$15.00
Acute Hepatitis Panel	10306	HEPATITIS PANEL, ACUTE W/REFLEX	\$30.00
Basic Metabolic Panel	10185	BASIC METABOLIC PANEL W/EGFR	\$2.14
Comp Metabolic Panel	10231	COMPREHENSIVE METABOLIC PANEL W/EGFR	\$2.67
Electrolyte Panel	34392	ELECTROLYTE PANEL	\$1.78
Hepatic Function Panel	10256	HEPATIC FUNCTION PANEL	\$2.05
Lipid Panel	7600	LIPID PANEL	\$3.00
Renal Function Panel	10314	RENAL FUNCTION PANEL W/EGFR	\$2.32
CBC w Diff w Plt	6399	CBC (INCLUDES DIFF/PLT)	\$2.75
CBC w Diff w/o Plt	7210	HEMOGRAM & DIFF	\$7.50
CBC w/o Diff w Plt	1759	CBC (H/H, RBC, INDICES, WBC, PLT)	\$2.37
CBC w/o Diff w/o Plt	7008	HEMOGRAM	\$2.13
Hematocrit	509	HEMATOCRIT	\$2.06
Hemoglobin	510	HEMOGLOBIN	\$2.06
Platelet Count	723	PLATELET COUNT	\$1.45
RBC Count	795	ANTIBODY SCREEN, RBC W/REFL ID, TITER AND AG	\$1.00
WBC Count	937	WHITE BLOOD CELL COUNT	\$2.06
WBC Differential	7064	WHITE CELL COUNT & DIFF	\$7.50
ABO and Rh	7788	ABO GROUP & RH TYPE	\$1.75
Amylase	243	AMYLASE	\$6.00
Antinuclear Antibodies. Results	249	ANA SCREEN EIA W/REFL TITER IFA	\$3.00
B12 and Folate	7065	VITAMIN B12/FOLATE, SERUM PANEL	\$18.00
BUN	294	UREA NITROGEN (BUN)	\$1.56
CEA	978	CEA	\$9.00
Cholesterol, Total	334	CHOLESTEROL, TOTAL	\$1.00
Creatinine	375	CREATININE W/EGFR	\$1.56
Digoxin	418	DIGOXIN	\$6.00
FSH and LH	7137	FSH AND LH	\$32.00
Glucose, Plasma	484	GLUCOSE, FASTING (P)	\$3.00
hCG, Beta Subunit, Qual	8435	CHORIONIC GONADOTROPIN, QUALITATIVE	\$4.50
hCG, Beta Subunit, Quant	8396	CHORIONIC GONADOTROPIN	\$5.00
Helicobacter pylori IgG	29407	HELICOBACTER PYLORI IGG ANTIBODY	\$12.00
Hemoglobin A1c w/MBG	8181	HEMOGLOBIN A1C WITH MPG	\$7.00
Hep B Surface Antibody	4848	HEPATITIS B CORE IGM ANTIBODY	\$5.00
Hep B Surface Antigen	498	HEPATITIS B SURFACE ANTIGEN W/ CONFIRMATION	\$4.00
Hep C Antibody	8472	HEPATITIS C ANTIBODY	\$8.00
HIV-1 Antibodies	19728	HIV 1/2 EIA ANTIBODY SCREEN W/REFLEXES	\$12.00
Iron and IBC	7573	IRON AND TOTAL IRON BINDING CAPACITY	\$4.37
Magnesium	622	MAGNESIUM	\$6.00
Phenytoin	713	PHENYTOIN	\$8.00
Potassium	733	POTASSIUM	\$1.56

QUEST DIAGNOSTICS
HIDALGO COUNTY PRICE PROPOSAL
39680

Service Name	Quest Service Code	Quest Service Name	Proposed Fee
PreGen-Plus	16020	MATERNAL SCREEN 1ST TRIMESTER	\$65.00
Prolactin	746	PROLACTIN	\$6.00
PSA	5363	PSA, TOTAL	\$5.25
Prothrombin Time (PT)	8847	PROTHROMBIN TIME WITH INR	\$2.50
PTT Activated	763	PARTIAL THROMBOPLASTIN TIME, ACTIVATED	\$3.00
Rheumatoid Arthritis Factor	4418	RHEUMATOID FACTOR	\$4.50
RPR	799	RPR (MONITOR) W/REFL TITER	\$2.50
Rubella Antibodies, IgG	802	RUBELLA IMMUNE STATUS	\$1.00
Sed Rate, Westergren	809	SED RATE BY MODIFIED WESTERGREN	\$3.25
T ₃ Uptake	861	T-3 UPTAKE	\$2.00
Thyroid Cascade Profile	7020	THYROID PANEL	\$4.00
Throxine (T ₄)	866	T-4, FREE	\$5.00
Testosterone	873	TESTOSTERONE, TOTAL	\$9.00
TSH, 3 rd generation	899	TSH	\$3.00
Urinalysis (Microscopic on Positives)	7909	URINALYSIS, REFLEX	\$2.75
Aerobic Bacterial Culture	4550	CULTURE, AEROBIC BACTERIA	\$15.00
Chlamydia/GC DNA Probe w/confirmation on positives	6919	CHLAM/N.GONO PROBE W/REFL ENDOCX OR MALE UI	\$12.00
Chlamydia/GC DNA Probe w/out confirmation	6919	CHLAM/N.GONO PROBE W/REFL ENDOCX OR MALE UI	\$12.00
Genital Culture, Routine	4558	CULTURE, GENITAL	\$7.00
Group B Strep Colonization Detection Cult/DNA Probe	5617	STREPTOCOCCUS, GROUP B CULTURE	\$6.00
Herpes Culture	2692	CULTURE, HERPES SIMPLEX VIRUS, RAPID METHOD	\$16.00
Ova & Parasites	681	OVA AND PARASITES	\$11.00
Stool Culture	10045	CULTURE, STOOL (CAMPYLOBACTER, SALMONELLA/S	\$25.00
Throat, Beta-Hemolytic Strep Cult, Group A	4485	STREPTOCOCCUS, GROUP A CULTURE	\$6.00
Upper Respiratory Culture, Routine	4482	CULTURE, NP/NASAL	\$6.00
Urine Culture, Routine	395	CULTURE, URINE, ROUTINE	\$5.50

Client Signature _____

Date _____



Consultative Services

Quest Diagnostics has on staff Board Certified Anatomic and Clinical Pathologists and or Technical Scientific Staff to provide telephone consultation service at no additional fee, 24 hours and 7 days per week. Clients can call 1-800-824-6152.

GENE-INFO is a national call center dedicated to client service for genetic testing. It is staffed by three (3) genetics client services specialists from 8:30 AM to 7:30 PM EST. Clients can call **1-866-GENE-INFO (1-866-436-3463)** to obtain test codes, sample requirements, TATs, results, Maternal Serum Screen recalculations, or to reach a **Genetic Counselor**. We encourage clients and staff to use this resource for genetics-related questions or to inform us when sensitive samples are being shipped.

EXHIBIT "C"

CERTIFICATE OF INSURANCE

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
NYC-002877343-01

PRODUCER
MARSH USA INC.
ATTN: JANET T. NORMAN
1166 AVENUE OF THE AMERICAS, 8TH FL.
(P) 212/345-5029
(F) 212/345-7816
NEW YORK, NY 10036

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

- COMPANY
A QUEST DIAGNOSTICS INCORPORATED
- COMPANY
B Travelers Property Casualty Company Of America
- COMPANY
C N/A
- COMPANY
D Lexington Insurance Company

INSURED
QUEST DIAGNOSTICS INCORPORATED AND ITS WHOLLY OWNED SUBSIDIARIES
RISK MANAGEMENT DEPT.
3 GIRALDA FARMS
MADISON, NJ 07940

COVERAGES:

This certificate supersedes and replaces any previously issued certificate for the policy period noted below. THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNERS' & CONTRACTOR'S PROT	\$2,000,000 SELF INSURED RETENTION*	12/31/07	12/31/08	GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ PERSONAL & ADV INJURY \$ EACH OCCURRENCE \$ 2,000,000 PRE DAMAGE (Any one file) \$ MED EXP (Any one person) \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	TC2JCAP-266T3603-TIL-07	12/31/07	12/31/08	COMBINED SINGLE LIMIT \$ 3,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
D	EXCESS LIABILITY <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	8122778	12/31/07	12/31/08	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNER/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input type="checkbox"/> EXCL OTHER	TC2JUB-266T3523-07 (AOS) TRJUB-266T3535-07 (AZ, MA, OR, WI)	12/31/07 12/31/07	12/31/08 12/31/08	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ 2,000,000 EL DISEASE-POLICY LIMIT \$ 2,000,000 EL DISEASE-EACH EMPLOYEE \$ 2,000,000
A	PROFESSIONAL LIAB. CLAIMS MADE	SELF-INSURED RETENTION	12/31/07	12/31/08	\$5,000,000 (SIR)

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
HIDALGO COUNTY IS INCLUDED AS AN ADDITIONAL INSURED.

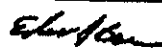
CERTIFICATE HOLDER:

HIDALGO COUNTY
ATTN: MARY
100 E. CANO
EDINBURG, TX 78539

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

AUTHORIZED REPRESENTATIVE
of Marsh USA Inc.
BY: Edward J. Basso



MMT(242)

VALID AS OF: 06/20/08



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/27/2010


PRODUCER MARSH USA INC. ATTN: JANET T. NORMAN 1166 AVENUE OF THE AMERICAS NEW YORK, NY 10036 37986 -MAIN--09-10 xxx	THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED QUEST DIAGNOSTICS INCORPORATED AND ITS WHOLLY OWNED SUBSIDIARIES 3 GIRALDA FARMS MADISON, NJ 07940	INSURER A: Quest Diagnostics Incorporated	
	INSURER B: Travelers Prop. Casualty Co. Of America.	25674
	INSURER C: N/A	N/A
	INSURER D: Lexington Insurance Company	19437
	INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GENERAL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	"\$2,000,000 SELF INSURED RETENTION"	12/31/2009	12/31/2010	EACH OCCURRENCE	\$ 2,000,000
					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COM/OP AGG	\$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	TC2JCAP-266T3603-TIL-09	12/31/2009	12/31/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 3,000,000
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
D	EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	8124655	12/31/2009	12/31/2010	EACH OCCURRENCE	\$ 5,000,000
					AGGREGATE	\$
						\$
						\$
						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y/N OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below	TC2JUB-266T3523-TIL-09 (DED)	12/31/2009	12/31/2010	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	
B		TRJUB-266T3535-TIL-09 (RETRO)	12/31/2009	12/31/2010	<input type="checkbox"/> OTHER	
					E.L. EACH ACCIDENT	\$ 2,000,000
					E.L. DISEASE - EA EMPLOYEE	\$ 2,000,000
				E.L. DISEASE - POLICY LIMIT	\$ 2,000,000	
A	OTHER PROFESSIONAL LIAB. CLAIMS MADE	SELF-INSURED RETENTION	12/31/2009	12/31/2010		\$5,000,000 (SIR)

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 RE: 1221 E TENTH STREET, SUITE 101-A, WESLACO, TX 78596; 1201 E. RIDGE ROAD, SUITE A, McALLEN, TX 78503; 2723 W. TRENTON, EDINBURG, TX 78539; 302 LORENALY DRIVE, SUITE B, BROWNSVILLE, TX 78526.

CERTIFICATE HOLDER NYC-003435339-23	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
HIDALGO COUNTY HEALTH DEPARTMENT ATTN: MARTHA L. SALAZAR, CPPS 2812 SO. BUSINESS 281- NEW ADMIN BLDG EDINBURG, TX 78539	AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Marla Nicholson 

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

This Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

AI-22668**11.F.**

**Requesting Approval of 1 Year Extension w/Quest Diagnostics
Incorporated for "Hidalgo County-Laboratory Services" for Hidalgo County
CC CONSENT**

Date: 08/31/2010
Submitted By: Yvette Islas, PURCHASING DEPT.
Submitted For: Marty Salazar
Department: PURCHASING DEPT.
Agenda Category: Purchasing Department

Information

CAPTION

Approval to exercise the second one (1) year extension as provided in the current contract E-09-417-09-15 for "Laboratory Services" for Hidalgo County under the same rates, terms, and conditions with Quest Diagnostics Incorporated effective September 30, 2010 through September 29, 2011.

BACKGROUND

ORIGINAL CONTRACT NO. C-08-196-09-30

Fiscal Impact

FISCAL YEAR: 2010 ACCT. #: 0-1100-423-21-280-002-0-331
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$55,671.25 available funding as of 08/27/10.

FISCAL YEAR: 2010 ACCT. #: 0-1100-423-32-330-001-0-331
FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$97.70 available funding in account as of 08/27/10.

Attachments

Link: [signed renewal quest diag.lab services 22668](#)
Link: [adult det quest renewal 22668](#)
Link: [jjs quest renewal 22668](#)
Link: [certificate of insurance](#)
Link: [intital contract dates](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Purchasing Department	Marty Salazar	08/26/2010 03:41 PM	APRV
2	Budget & Management	Erika Zamora	08/27/2010 07:56 AM	APRV
3	Rosalinda Cantu	Rosie Cantu	08/27/2010 11:39 AM	APRV
4	Auditor's Office		08/27/2010 05:21 PM	NEW

Form Started By: Yvette Islas Started On: 08/25/2010 09:06 AM
Final Approval Date: 08/27/2010

Location	Conditions Monitored	Monthly	Account Number
317 N. Closner Edinburg, TX	Burglar	\$15.00	0-1100-414-00-130-001-0-413

approved

8. Requesting authority to purchase a security system and execute required equipment purchase agreement (commercial) through our membership/participation with the Texas Association of School Boards Cooperative "Buyboard" awarded vendor Superior Alarms contract #'s 285-08 / 325-09 for the Elections Department (Warehouse) in the total amount of \$2,395.95 through requisition #179611;

approved

9. Requesting authority to extend into a 12-month the Element K Master Agreement with Element K Corporation for the District Attorney Office through requisition #180201 in the amount of \$644.00/year. Effective: 8/17/10 - 08/16/11

approved

F. AI-22668 Approval to exercise the second one (1) year extension as provided in the current contract E-09-417-09-15 for "Laboratory Services" for Hidalgo County under the same rates, terms, and conditions with Quest Diagnostics Incorporated effective September 30, 2010 through September 29, 2011.

approved

G. AI-22656 Approval of final construction contract (CC previously approved to award on 06-22-10) for C-CAP-10-177-06-22 Road & Drainage Construction for McKee Subdivision between Hidalgo County and H2O Construction Services, Inc. in the amount of \$117,805.55.

No Action

H. AI-22651 Requesting authority to exercise the one (1) year term extension as provided in the current contract for the project: Between Hidalgo County and Easy Access, Inc. for "Credit Card Payment Services - Hidalgo County", C-09-040-09-22--- Effective date: January 01, 2011.

August 31, 2010