

**Provide Medical Services, Alcohol, Drug Testing and Physicals for Staff, School Buses and Vehicle Drivers
Contract Summary / Pre-qualified Contractors
July 1, 2024 through June 30, 2025**

Item #	Description	All Day Medical Care Clinic	Briggs Chaney Walk-In Clinic, LLC	Medical Access PC	White Glove Drug & Alcohol Testing, Inc
1	Mobile collection testing for drugs plus MRO	\$ 55.00	\$ 60.00	N/A	\$ 54.00
2	Mobile collection testing for alcohol including EBT	\$ 40.00	\$ 75.00	N/A	\$ 27.00
3	Stationary collection service for drugs plus MRO	\$ 45.00	\$ 60.00	\$ 45.00	\$ 54.00
4	Collection Stationary for Drugs	\$ 27.00	\$ 40.00	\$ 28.00	Included in above charge
5	Collection Stationary for Alcohol/EBT	\$ 27.00	\$ 50.00	\$ 30.00	\$ 27.00
6	Post accident-hospital test	\$ 180.00	N/A	N/A	\$ 300.00
7	Basic Physical Exam	\$ 70.00	\$ 80.00	\$ 69.00	N/A
8	Lab testing of urine sample of drugs and MRO	\$ 45.00	\$ 60.00	\$ 42.00	Included in collection fee
9	Asbestos Physicals (exam, questionnaire, pulmonary function test, chest xray, qualitative fit test)	N/A	\$ 250.00	\$ 240.00	N/A
10	Respirator Fit Testing (Exam, Questionnaire, qualitative fit test) (OSHA 29-CFR-1910.1001)	N/A	\$ 75.00	\$ 69.00	N/A
11	Respirator Fit Testing (qualitative only) (OSHA 29-CRF-1910.134)	N/A	\$ 75.00	\$ 50.00	N/A
12	Respirator Physical (OSHA 29-CRF-1910.134)	N/A	\$ 80.00	\$ 75.00	N/A

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13	Respirator Physical (OSHA 29-CFR-1910.1001)	N/A	\$ 80.00	\$ 200.00	N/A
14	DOT Physical Recertification	\$ 75.00	\$ 80.00	\$ 69.00	N/A
15	Hepatitis B Virus Vaccination	\$ 110.00	\$ 135.00	\$ 105.00	N/A
16	Injury Care	\$ 95.00	\$ 240.00	\$ 296.76	N/A
17	Audio	N/A	N/A	\$ 25.00	N/A
18	Vision Titmus	N/A	\$ 10.00	\$ 12.00	N/A
19	Return to Work	\$ 100.00	\$ 80.00	\$ 80.00	N/A
20	On Site Fee (Hospital)	N/A	N/A	N/A	Included in post accident hospital fee
21	Collection Testing for Drugs	\$ 30.00	\$ 60.00	\$ 28.00	Included in MRO pricing
22	Physical Exam for Bus and Vehicle Drivers (Includes vision, hearing, vital signs, medical history, and physician examination)	\$ 70.00	\$ 80.00	\$ 69.00	N/A
23	Cost for follow up (if applicable) Assessment/Examinations	\$ 20.00	N/A	\$ 45.00	N/A
24	Cost for On-Site Physicals	\$ 75.00	N/A	\$85 - MIN 10 EMPLOYEES	N/A
25	After Hour Fee	N/A	N/A	N/A	Included in post accident hospital fee