



Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

State of West Virginia Master Agreement

Order Date: 11-18-2024

CORRECT ORDER NUMBER MUST
 APPEAR ON ALL PACKAGES, INVOICES,
 AND SHIPPING PAPERS. QUESTIONS
 CONCERNING THIS ORDER SHOULD BE
 DIRECTED TO THE DEPARTMENT
 CONTACT.

Order Number:	CMA 0603 8330 ADJ2500000004 1	Procurement Folder:	1529919
Document Name:	Medical Services for MCAS Cadets	Reason for Modification:	
Document Description:	Medical Services for MCAS 24MCAS-031		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2024-11-25
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-11-24

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: 000000200445 MONTGOMERY GENERAL HOSPITAL INC 401 6TH AVE MONTGOMERY WV 25136 US Vendor Contact Phone: 304-442-7424 Extension:	Requestor Name: Richard W Hensley Requestor Phone: 304-415-0723 Requestor Email: richard.w.hensley@wv.gov																				
Discount Details: <table border="1"> <thead> <tr> <th></th> <th>Discount Allowed</th> <th>Discount Percentage</th> <th>Discount Days</th> </tr> </thead> <tbody> <tr> <td>#1</td> <td>No</td> <td>0.0000</td> <td>0</td> </tr> <tr> <td>#2</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>#3</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>#4</td> <td>No</td> <td></td> <td></td> </tr> </tbody> </table>		Discount Allowed	Discount Percentage	Discount Days	#1	No	0.0000	0	#2	No			#3	No			#4	No			<div style="font-size: 48px; font-weight: bold;">2025</div> <div style="font-weight: bold;">FILE LOCATION _____</div>
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
STATE FINANCE ADJUTANT GENERALS OFFICE 1703 COONSKIN DR CHARLESTON WV 25311-1085 US	MOUNTAINEER CHALLENGE PROGRAM - SOUTH ADJUTANT GENERALS OFFICE 305 FAYETTE PIKE MONTGOMERY WV 25136 US

CR 12-5-24

Total Order Amount:	Open End
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Purchasing Division's File Copy

11/19/24
 PURCHASING DIVISION AUTHORIZATION
 DATE: *JA 12-5-24*
 ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM
 DATE: *John L. Gray*
 ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION
John L. Gray
 DATE: *12-9-24*
 ELECTRONIC SIGNATURE ON FILE

12/19/2024

Extended Description:

The Vendor, Montgomery General Hospital, Inc., agrees to enter with the West Virginia Adjutant General's Office into an open-end contract to provide to Cadet Medical Services at the Mountaineer Challenge Academy - South (Montgomery, WV), per the specifications, terms and conditions, bid requirements, and the Vendor's submitted and accepted bid dated 10/15/2024 incorporated herein by reference and made apart hereof.

See attached pricing page.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85121500			HOUR	24.000000
	Service From	Service To		Service Contract Amount	
	2024-11-25	2025-11-24		0.00	

Commodity Line Description: Cadet Medical Services
Nurse

Extended Description:

See attached Exhibit "A" Pricing page

Medical Services -
Nursing hourly rate

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	85121500			HOUR	50.000000
	Service From	Service To		Service Contract Amount	
	2024-11-25	2025-11-24		0.00	

Commodity Line Description: Cadet Medical Services
Physician

Extended Description:

See attached Exhibit "A" Pricing page

Medical Services -
Physician hourly rate

GENERAL TERMS AND CONDITIONS:

1. CONTRACTUAL AGREEMENT: Issuance of an Award Document signed by the Purchasing Division Director, or his designee, and approved as to form by the Attorney General's office constitutes acceptance by the State of this Contract made by and between the State of West Virginia and the Vendor. Vendor's signature on its bid, or on the Contract if the Contract is not the result of a bid solicitation, signifies Vendor's agreement to be bound by and accept the terms and conditions contained in this Contract.

2. DEFINITIONS: As used in this Solicitation/Contract, the following terms shall have the meanings attributed to them below. Additional definitions may be found in the specifications included with this Solicitation/Contract.

2.1. "Agency" or "Agencies" means the agency, board, commission, or other entity of the State of West Virginia that is identified on the first page of the Solicitation or any other public entity seeking to procure goods or services under this Contract.

2.2. "Bid" or "Proposal" means the vendors submitted response to this solicitation.

2.3. "Contract" means the binding agreement that is entered into between the State and the Vendor to provide the goods or services requested in the Solicitation.

2.4. "Director" means the Director of the West Virginia Department of Administration, Purchasing Division.

2.5. "Purchasing Division" means the West Virginia Department of Administration, Purchasing Division.

2.6. "Award Document" means the document signed by the Agency and the Purchasing Division, and approved as to form by the Attorney General, that identifies the Vendor as the contract holder.

2.7. "Solicitation" means the official notice of an opportunity to supply the State with goods or services that is published by the Purchasing Division.

2.8. "State" means the State of West Virginia and/or any of its agencies, commissions, boards, etc. as context requires.

2.9. "Vendor" or "Vendors" means any entity submitting a bid in response to the Solicitation, the entity that has been selected as the lowest responsible bidder, or the entity that has been awarded the Contract as context requires.

3. CONTRACT TERM; RENEWAL; EXTENSION: The term of this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below:

Term Contract

Initial Contract Term: The Initial Contract Term will be for a period of One (1) Year. The Initial Contract Term becomes effective on the effective start date listed on the first page of this Contract, identified as the State of West Virginia contract cover page containing the signatures of the Purchasing Division, Attorney General, and Encumbrance clerk (or another page identified as _____), and the Initial Contract Term ends on the effective end date also shown on the first page of this Contract.

Renewal Term: This Contract may be renewed upon the mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any request for renewal should be delivered to the Agency and then submitted to the Purchasing Division thirty (30) days prior to the expiration date of the initial contract term or appropriate renewal term. A Contract renewal shall be in accordance with the terms and conditions of the original contract. Unless otherwise specified below, renewal of this Contract is limited to THREE (3) successive one (1) year periods or multiple renewal periods of less than one year, provided that the multiple renewal periods do not exceed the total number of months available in all renewal years combined. Automatic renewal of this Contract is prohibited. Renewals must be approved by the Vendor, Agency, Purchasing Division and Attorney General's office (Attorney General approval is as to form only)

Alternate Renewal Term – This contract may be renewed for _____ successive _____ year periods or shorter periods provided that they do not exceed the total number of months contained in all available renewals. Automatic renewal of this Contract is prohibited. Renewals must be approved by the Vendor, Agency, Purchasing Division and Attorney General's office (Attorney General approval is as to form only)

Delivery Order Limitations: In the event that this contract permits delivery orders, a delivery order may only be issued during the time this Contract is in effect. Any delivery order issued within one year of the expiration of this Contract shall be effective for one year from the date the delivery order is issued. No delivery order may be extended beyond one year after this Contract has expired.

Fixed Period Contract: This Contract becomes effective upon Vendor's receipt of the notice to proceed and must be completed within _____ days.

Fixed Period Contract with Renewals: This Contract becomes effective upon Vendor's receipt of the notice to proceed and part of the Contract more fully described in the attached specifications must be completed within _____ days. Upon completion of the work covered by the preceding sentence, the vendor agrees that:

the contract will continue for _____ years;

the contract may be renewed for _____ successive _____ year periods or shorter periods provided that they do not exceed the total number of months contained in all available renewals. Automatic renewal of this Contract is prohibited. Renewals must be approved by the Vendor, Agency, Purchasing Division and Attorney General's Office (Attorney General approval is as to form only).

One-Time Purchase: The term of this Contract shall run from the issuance of the Award Document until all of the goods contracted for have been delivered, but in no event will this Contract extend for more than one fiscal year.

Construction/Project Oversight: This Contract becomes effective on the effective start date listed on the first page of this Contract, identified as the State of West Virginia contract cover page containing the signatures of the Purchasing Division, Attorney General, and Encumbrance clerk (or another page identified as _____), and continues until the project for which the vendor is providing oversight is complete.

Other: Contract Term specified in _____

4. AUTHORITY TO PROCEED: Vendor is authorized to begin performance of this contract on the date of encumbrance listed on the front page of the Award Document unless either the box for "Fixed Period Contract" or "Fixed Period Contract with Renewals" has been checked in Section 3 above. If either "Fixed Period Contract" or "Fixed Period Contract with Renewals" has been checked, Vendor must not begin work until it receives a separate notice to proceed from the State. The notice to proceed will then be incorporated into the Contract via change order to memorialize the official date that work commenced.

5. QUANTITIES: The quantities required under this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below.

Open End Contract: Quantities listed in this Solicitation/Award Document are approximations only, based on estimates supplied by the Agency. It is understood and agreed that the Contract shall cover the quantities actually ordered for delivery during the term of the Contract, whether more or less than the quantities shown.

Service: The scope of the service to be provided will be more clearly defined in the specifications included herewith.

Combined Service and Goods: The scope of the service and deliverable goods to be provided will be more clearly defined in the specifications included herewith.

One-Time Purchase: This Contract is for the purchase of a set quantity of goods that are identified in the specifications included herewith. Once those items have been delivered, no additional goods may be procured under this Contract without an appropriate change order approved by the Vendor, Agency, Purchasing Division, and Attorney General's office.

Construction: This Contract is for construction activity more fully defined in the specifications.

6. EMERGENCY PURCHASES: The Purchasing Division Director may authorize the Agency to purchase goods or services in the open market that Vendor would otherwise provide under this Contract if those goods or services are for immediate or expedited delivery in an emergency. Emergencies shall include, but are not limited to, delays in transportation or an unanticipated increase in the volume of work. An emergency purchase in the open market, approved by the Purchasing Division Director, shall not constitute of breach of this Contract and shall not entitle the Vendor to any form of compensation or damages. This provision does not excuse the State from fulfilling its obligations under a One-Time Purchase contract.

7. REQUIRED DOCUMENTS: All of the items checked in this section must be provided to the Purchasing Division by the Vendor as specified:

LICENSE(S) / CERTIFICATIONS / PERMITS: In addition to anything required under the Section of the General Terms and Conditions entitled Licensing, the apparent successful Vendor shall furnish proof of the following licenses, certifications, and/or permits upon request and in a form acceptable to the State. The request may be prior to or after contract award at the State's sole discretion.

The apparent successful Vendor shall also furnish proof of any additional licenses or certifications contained in the specifications regardless of whether or not that requirement is listed above.

8. INSURANCE: The apparent successful Vendor shall furnish proof of the insurance identified by a checkmark below prior to Contract award. The insurance coverages identified below must be maintained throughout the life of this contract. Thirty (30) days prior to the expiration of the insurance policies, Vendor shall provide the Agency with proof that the insurance mandated herein has been continued. Vendor must also provide Agency with immediate notice of any changes in its insurance policies, including but not limited to, policy cancelation, policy reduction, or change in insurers. The apparent successful Vendor shall also furnish proof of any additional insurance requirements contained in the specifications prior to Contract award regardless of whether that insurance requirement is listed in this section.

Vendor must maintain:

Commercial General Liability Insurance in at least an amount of: \$1,000,000.00 per occurrence.

Automobile Liability Insurance in at least an amount of: \$1,000,000.00 per occurrence.

Professional/Malpractice/Errors and Omission Insurance in at least an amount of: \$1,000,000.00 per occurrence. Notwithstanding the forgoing, Vendor's are not required to list the State as an additional insured for this type of policy.

Commercial Crime and Third Party Fidelity Insurance in an amount of: _____ per occurrence.

Cyber Liability Insurance in an amount of: _____ per occurrence.

Builders Risk Insurance in an amount equal to 100% of the amount of the Contract.

Pollution Insurance in an amount of: _____ per occurrence.

Aircraft Liability in an amount of: _____ per occurrence.

CONTRACT WILL START WHEN THE OTHER CONTRACT ENDS. START DATE IS NOVEMBER 1, 2024 OR ASAP.

9. WORKERS' COMPENSATION INSURANCE: Vendor shall comply with laws relating to workers compensation, shall maintain workers' compensation insurance when required, and shall furnish proof of workers' compensation insurance upon request.

10. VENUE: All legal actions for damages brought by Vendor against the State shall be brought in the West Virginia Claims Commission. Other causes of action must be brought in the West Virginia court authorized by statute to exercise jurisdiction over it.

11. LIQUIDATED DAMAGES: This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy. Vendor shall pay liquidated damages in the amount specified below or as described in the specifications:

_____ for _____.

Liquidated Damages Contained in the Specifications.

Liquidated Damages Are Not Included in this Contract.

12. ACCEPTANCE: Vendor's signature on its bid, or on the certification and signature page, constitutes an offer to the State that cannot be unilaterally withdrawn, signifies that the product or service proposed by vendor meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise indicated, and signifies acceptance of the terms and conditions contained in the Solicitation unless otherwise indicated.

13. PRICING: The pricing set forth herein is firm for the life of the Contract, unless specified elsewhere within this Solicitation/Contract by the State. A Vendor's inclusion of price adjustment provisions in its bid, without an express authorization from the State in the Solicitation to do so, may result in bid disqualification. Notwithstanding the foregoing, Vendor must extend any publicly advertised sale price to the State and invoice at the lower of the contract price or the publicly advertised sale price.

14. PAYMENT IN ARREARS: Payments for goods/services will be made in arrears only upon receipt of a proper invoice, detailing the goods/services provided or receipt of the goods/services, whichever is later. Notwithstanding the foregoing, payments for software maintenance, licenses, or subscriptions may be paid annually in advance.

15. PAYMENT METHODS: Vendor must accept payment by electronic funds transfer and P-Card. (The State of West Virginia's Purchasing Card program, administered under contract by a banking institution, processes payment for goods and services through state designated credit cards.)

16. TAXES: The Vendor shall pay any applicable sales, use, personal property or any other taxes arising out of this Contract and the transactions contemplated thereby. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.

17. ADDITIONAL FEES: Vendor is not permitted to charge additional fees or assess additional charges that were not either expressly provided for in the solicitation published by the State of West Virginia, included in the Contract, or included in the unit price or lump sum bid amount that Vendor is required by the solicitation to provide. Including such fees or charges as notes to the solicitation may result in rejection of vendor's bid. Requesting such fees or charges be paid after the contract has been awarded may result in cancellation of the contract.

18. FUNDING: This Contract shall continue for the term stated herein, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise made available, this Contract becomes void and of no effect beginning on July 1 of the fiscal year for which funding has not been appropriated or otherwise made available. If that occurs, the State may notify the Vendor that an alternative source of funding has been obtained and thereby avoid the automatic termination. Non-appropriation or non-funding shall not be considered an event of default.

19. CANCELLATION: The Purchasing Division Director reserves the right to cancel this Contract immediately upon written notice to the vendor if the materials or workmanship supplied do not conform to the specifications contained in the Contract. The Purchasing Division Director may also cancel any purchase or Contract upon 30 days written notice to the Vendor in accordance with West Virginia Code of State Rules § 148-1-5.2.b.

20. TIME: Time is of the essence regarding all matters of time and performance in this Contract.

21. APPLICABLE LAW: This Contract is governed by and interpreted under West Virginia law without giving effect to its choice of law principles. Any information provided in specification manuals, or any other source, verbal or written, which contradicts or violates the West Virginia Constitution, West Virginia Code, or West Virginia Code of State Rules is void and of no effect.

22. COMPLIANCE WITH LAWS: Vendor shall comply with all applicable federal, state, and local laws, regulations and ordinances. By submitting a bid, Vendor acknowledges that it has reviewed, understands, and will comply with all applicable laws, regulations, and ordinances.

SUBCONTRACTOR COMPLIANCE: Vendor shall notify all subcontractors providing commodities or services related to this Contract that as subcontractors, they too are required to comply with all applicable laws, regulations, and ordinances. Notification under this provision must occur prior to the performance of any work under the contract by the subcontractor.

23. ARBITRATION: Any references made to arbitration contained in this Contract, Vendor's bid, or in any American Institute of Architects documents pertaining to this Contract are hereby deleted, void, and of no effect.

24. MODIFICATIONS: This writing is the parties' final expression of intent. Notwithstanding anything contained in this Contract to the contrary no modification of this Contract shall be binding without mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any change to existing contracts that adds work or changes contract cost, and were not included in the original contract, must be approved by the Purchasing Division and the Attorney General's Office (as to form) prior to the implementation of the change or commencement of work affected by the change.

25. WAIVER: The failure of either party to insist upon a strict performance of any of the terms or provision of this Contract, or to exercise any option, right, or remedy herein contained, shall not be construed as a waiver or a relinquishment for the future of such term, provision, option, right, or remedy, but the same shall continue in full force and effect. Any waiver must be expressly stated in writing and signed by the waiving party.

26. SUBSEQUENT FORMS: The terms and conditions contained in this Contract shall supersede any and all subsequent terms and conditions which may appear on any form documents submitted by Vendor to the Agency or Purchasing Division such as price lists, order forms, invoices, sales agreements, or maintenance agreements, and includes internet websites or other electronic documents. Acceptance or use of Vendor's forms does not constitute acceptance of the terms and conditions contained thereon.

27. ASSIGNMENT: Neither this Contract nor any monies due, or to become due hereunder, may be assigned by the Vendor without the express written consent of the Agency, the Purchasing Division, the Attorney General's office (as to form only), and any other government agency or office that may be required to approve such assignments.

28. WARRANTY: The Vendor expressly warrants that the goods and/or services covered by this Contract will: (a) conform to the specifications, drawings, samples, or other description furnished or specified by the Agency; (b) be merchantable and fit for the purpose intended; and (c) be free from defect in material and workmanship.

29. STATE EMPLOYEES: State employees are not permitted to utilize this Contract for personal use and the Vendor is prohibited from permitting or facilitating the same.

30. PRIVACY, SECURITY, AND CONFIDENTIALITY: The Vendor agrees that it will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the Agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the Agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in www.state.wv.us/admin/purchase/privacy.

31. YOUR SUBMISSION IS A PUBLIC DOCUMENT: Vendor's entire response to the Solicitation and the resulting Contract are public documents. As public documents, they will be disclosed to the public following the bid/proposal opening or award of the contract, as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1 et seq., 5-22-1 et seq., and 5G-1-1 et seq. and the Freedom of Information Act West Virginia Code §§ 29B-1-1 et seq.

DO NOT SUBMIT MATERIAL YOU CONSIDER TO BE CONFIDENTIAL, A TRADE SECRET, OR OTHERWISE NOT SUBJECT TO PUBLIC DISCLOSURE.

Submission of any bid, proposal, or other document to the Purchasing Division constitutes your explicit consent to the subsequent public disclosure of the bid, proposal, or document. The Purchasing Division will disclose any document labeled "confidential," "proprietary," "trade secret," "private," or labeled with any other claim against public disclosure of the documents, to include any "trade secrets" as defined by West Virginia Code § 47-22-1 et seq. All submissions are subject to public disclosure without notice.

32. LICENSING: In accordance with West Virginia Code of State Rules § 148-1-6.1.e, Vendor must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agency or political subdivision. Obligations related to political subdivisions may include, but are not limited to, business licensing, business and occupation taxes, inspection compliance, permitting, etc. Upon request, the Vendor must provide all necessary releases to obtain information to enable the Purchasing Division Director or the Agency to verify that the Vendor is licensed and in good standing with the above entities.

SUBCONTRACTOR COMPLIANCE: Vendor shall notify all subcontractors providing commodities or services related to this Contract that as subcontractors, they too are required to be licensed, in good standing, and up-to-date on all state and local obligations as described in this section. Obligations related to political subdivisions may include, but are not limited to, business licensing, business and occupation taxes, inspection compliance, permitting, etc. Notification under this provision must occur prior to the performance of any work under the contract by the subcontractor.

33. ANTITRUST: In submitting a bid to, signing a contract with, or accepting a Award Document from any agency of the State of West Virginia, the Vendor agrees to convey, sell, assign, or transfer to the State of West Virginia all rights, title, and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to Vendor.

34. VENDOR NON-CONFLICT: Neither Vendor nor its representatives are permitted to have any interest, nor shall they acquire any interest, direct or indirect, which would compromise the performance of its services hereunder. Any such interests shall be promptly presented in detail to the Agency.

35. VENDOR RELATIONSHIP: The relationship of the Vendor to the State shall be that of an independent contractor and no principal-agent relationship or employer-employee relationship is contemplated or created by this Contract. The Vendor as an independent contractor is solely liable for the acts and omissions of its employees and agents. Vendor shall be responsible for selecting, supervising, and compensating any and all individuals employed pursuant to the terms of this Solicitation and resulting contract. Neither the Vendor, nor any employees or subcontractors of the Vendor, shall be deemed to be employees of the State for any purpose whatsoever. Vendor shall be exclusively responsible for payment of employees and contractors for all wages and salaries, taxes, withholding payments, penalties, fees, fringe benefits, professional liability insurance premiums, contributions to insurance and pension, or other deferred compensation plans, including but not limited to, Workers' Compensation and Social Security obligations, licensing fees, etc. and the filing of all necessary documents, forms, and returns pertinent to all of the foregoing.

Vendor shall hold harmless the State, and shall provide the State and Agency with a defense against any and all claims including, but not limited to, the foregoing payments, withholdings, contributions, taxes, Social Security taxes, and employer income tax returns.

36. INDEMNIFICATION: The Vendor agrees to indemnify, defend, and hold harmless the State and the Agency, their officers, and employees from and against: (1) Any claims or losses for services rendered by any subcontractor, person, or firm performing or supplying services, materials, or supplies in connection with the performance of the Contract; (2) Any claims or losses resulting to any person or entity injured or damaged by the Vendor, its officers, employees, or subcontractors by the publication, translation, reproduction, delivery, performance, use, or disposition of any data used under the Contract in a manner not authorized by the Contract, or by Federal or State statutes or regulations; and (3) Any failure of the Vendor, its officers, employees, or subcontractors to observe State and Federal laws including, but not limited to, labor and wage and hour laws.

37. NO DEBT CERTIFICATION: In accordance with West Virginia Code §§ 5A-3-10a and 5-22-1(i), the State is prohibited from awarding a contract to any bidder that owes a debt to the State or a political subdivision of the State. By submitting a bid, or entering into a contract with the State, Vendor is affirming that (1) for construction contracts, the Vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, neither the Vendor nor any related party owe a debt as defined above, and neither the Vendor nor any related party are in employer default as defined in the statute cited above unless the debt or employer default is permitted under the statute.

38. CONFLICT OF INTEREST: Vendor, its officers or members or employees, shall not presently have or acquire an interest, direct or indirect, which would conflict with or compromise the performance of its obligations hereunder. Vendor shall periodically inquire of its officers, members and employees to ensure that a conflict of interest does not arise. Any conflict of interest discovered shall be promptly presented in detail to the Agency.

39. REPORTS: Vendor shall provide the Agency and/or the Purchasing Division with the following reports identified by a checked box below:

Such reports as the Agency and/or the Purchasing Division may request. Requested reports may include, but are not limited to, quantities purchased, agencies utilizing the contract, total contract expenditures by agency, etc.

Quarterly reports detailing the total quantity of purchases in units and dollars, along with a listing of purchases by agency. Quarterly reports should be delivered to the Purchasing Division via email at purchasing.division@wv.gov.

40. BACKGROUND CHECK: In accordance with W. Va. Code § 15-2D-3, the State reserves the right to prohibit a service provider's employees from accessing sensitive or critical information or to be present at the Capitol complex based upon results addressed from a criminal background check. Service providers should contact the West Virginia Division of Protective Services by phone at (304) 558-9911 for more information.

41. PREFERENCE FOR USE OF DOMESTIC STEEL PRODUCTS: Except when authorized by the Director of the Purchasing Division pursuant to W. Va. Code § 5A-3-56, no contractor may use or supply steel products for a State Contract Project other than those steel products made in the United States. A contractor who uses steel products in violation of this section may be subject to civil penalties pursuant to W. Va. Code § 5A-3-56. As used in this section:

- a. "State Contract Project" means any erection or construction of, or any addition to, alteration of or other improvement to any building or structure, including, but not limited to, roads or highways, or the installation of any heating or cooling or ventilating plants or other equipment, or the supply of and materials for such projects, pursuant to a contract with the State of West Virginia for which bids were solicited on or after June 6, 2001.
- b. "Steel Products" means products rolled, formed, shaped, drawn, extruded, forged, cast, fabricated or otherwise similarly processed, or processed by a combination of two or more or such operations, from steel made by the open hearth, basic oxygen, electric furnace, Bessemer or other steel making process.
- c. The Purchasing Division Director may, in writing, authorize the use of foreign steel products if:
 1. The cost for each contract item used does not exceed one tenth of one percent (.1%) of the total contract cost or two thousand five hundred dollars (\$2,500.00), whichever is greater. For the purposes of this section, the cost is the value of the steel product as delivered to the project; or
 2. The Director of the Purchasing Division determines that specified steel materials are not produced in the United States in sufficient quantity or otherwise are not reasonably available to meet contract requirements.

42. PREFERENCE FOR USE OF DOMESTIC ALUMINUM, GLASS, AND STEEL: In Accordance with W. Va. Code § 5-19-1 et seq., and W. Va. CSR § 148-10-1 et seq., for every contract or subcontract, subject to the limitations contained herein, for the construction, reconstruction, alteration, repair, improvement or maintenance of public works or for the purchase of any item of machinery or equipment to be used at sites of public works, only domestic aluminum, glass or steel products shall be supplied unless the spending officer determines, in writing, after the receipt of offers or bids, (1) that the cost of domestic aluminum, glass or steel products is unreasonable or inconsistent with the public interest of the State of West Virginia, (2) that domestic aluminum, glass or steel products are not produced in sufficient quantities to meet the contract requirements, or (3) the available domestic aluminum, glass, or steel do not meet the contract specifications. This provision only applies to public works contracts awarded in an amount more than fifty thousand dollars (\$50,000) or public works contracts that require more than ten thousand pounds of steel products.

The cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than twenty percent (20%) of the bid or offered price for foreign made aluminum, glass, or steel products. If the domestic aluminum, glass or steel products to be supplied or produced in a “substantial labor surplus area”, as defined by the United States Department of Labor, the cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than thirty percent (30%) of the bid or offered price for foreign made aluminum, glass, or steel products. This preference shall be applied to an item of machinery or equipment, as indicated above, when the item is a single unit of equipment or machinery manufactured primarily of aluminum, glass or steel, is part of a public works contract and has the sole purpose or of being a permanent part of a single public works project. This provision does not apply to equipment or machinery purchased by a spending unit for use by that spending unit and not as part of a single public works project.

All bids and offers including domestic aluminum, glass or steel products that exceed bid or offer prices including foreign aluminum, glass or steel products after application of the preferences provided in this provision may be reduced to a price equal to or lower than the lowest bid or offer price for foreign aluminum, glass or steel products plus the applicable preference. If the reduced bid or offer prices are made in writing and supersede the prior bid or offer prices, all bids or offers, including the reduced bid or offer prices, will be reevaluated in accordance with this rule.

43. INTERESTED PARTY SUPPLEMENTAL DISCLOSURE: W. Va. Code § 6D-1-2 requires that for contracts with an actual or estimated value of at least \$1 million, the Vendor must submit to the Agency a disclosure of interested parties prior to beginning work under this Contract. Additionally, the Vendor must submit a supplemental disclosure of interested parties reflecting any new or differing interested parties to the contract, which were not included in the original pre-work interested party disclosure, within 30 days following the completion or termination of the contract. A copy of that form is included with this solicitation or can be obtained from the WV Ethics Commission. This requirement does not apply to publicly traded companies listed on a national or international stock exchange. A more detailed definition of interested parties can be obtained from the form referenced above.

44. PROHIBITION AGAINST USED OR REFURBISHED: Unless expressly permitted in the solicitation published by the State, Vendor must provide new, unused commodities, and is prohibited from supplying used or refurbished commodities, in fulfilling its responsibilities under this Contract.

45. VOID CONTRACT CLAUSES: This Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law.

46. ISRAEL BOYCOTT: Bidder understands and agrees that, pursuant to W. Va. Code § 5A-3-63, it is prohibited from engaging in a boycott of Israel during the term of this contract.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Printed Name and Title) Donna Raynes

(Address) PO Box 270 Montgomery WV 25136

(Phone Number) / (Fax Number) 304-442-7424 304-442-7494

(email address) draynes@mghwv.org

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation/Contract for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; that I am authorized by the Vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on Vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

Montgomery General Hospital
(Company)

(Signature of Authorized Representative)

Deborah Hill CEO 11/21/2024

(Printed Name and Title of Authorized Representative) (Date)

304-442-7400 304-442-7494

(Phone Number) (Fax Number)

dhill@mghwv.org

(Email Address)

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

SPECIFICATIONS

1. **PURPOSE AND SCOPE:** The West Virginia Purchasing Division is soliciting bids on behalf of the Mountaineer Challenge Academy SOUTH (MCA-South), a state program under the Adjutant General’s Department – West Virginia Military Authority, to establish a contract for a Medical Provider to give medical support for their residential student population. Students, called Cadets, are age 16-18, male and female residents of West Virginia who reside at 305 Fayette Pike, Montgomery, WV 25136. The required support periods are two (2) twenty-two-week periods each year generally mid-January to mid-June & mid-July to mid-December. The “next” class for the SOUTH location is scheduled to begin mid-January 2025. Subsequent academic years will begin & end on the general schedules as stated above.

2. **DEFINITIONS:** The terms listed below shall have the meanings assigned to them below. Additional definitions can be found in Section 2 of the General Terms and Conditions.
 - 2.1 **“Contract Services”** means providing professional medical care for Cadets attending the MCA-South. This will include, but is not limited to sick call on-site, reviewing patient history, evaluating, managing, and dispensing medications, physical examinations, immunizations, office calls at the provider’s location, referrals to specialists as needed, and evaluating/determining if Cadet is physically and mentally capable for program eligibility.

 - 2.2 **“Health Care Provider”** means a doctor, physician assistant, paramedic, nurse, or nurse practitioner at the vendor’s discretion, but must be under the insurance and supervision of a licensed physician.

 - 2.3 **“Medical Technician / Medical Assistant”** means an employee of the vendor who, under the insurance and supervision of a licensed physician, will manage Cadet medical records, coordinate, support, and supervise appointments, care, and medications with MCA-South Staff.

 - 2.4 **“Medical Forms”** means forms provided by the MCA-South for use by the vendor to document: Sick Call Form, Medication Administration Record, Physical Examination Form, and Medical History Review. These forms are attached hereto as Exhibit B.

 - 2.5 **“Pricing Page”** means the pages upon which Vendor should list its proposed price for the Contract Services. The Pricing Page is either included on the last page of this RFQ or attached hereto as Exhibit A.

 - 2.6 **Solicitation”** means the official notice of an opportunity to supply the State with goods or services that are published by the Purchasing Division.

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

3. **QUALIFICATIONS: VENDOR**, or Vendor’s staff if requirements are inherently limited to individuals rather than corporate entities, shall have the following minimum qualifications:

- 3.1. Vendor shall provide a professional medical continuum of care for the Cadets attending the MCA-South that follows the medical industry’s standards of care.
- 3.2. Vendor shall provide sufficient office support and hospital care as necessary.
- 3.3. Vendor shall be sensitive to gender issues of Cadets and shall provide a same gender support person when an exam is to be performed by a medical professional of a different gender.
- 3.4. Vendor shall provide “on-call” telephone support available to the MCA-South after regular office hours.
- 3.5. Vendor may employ health care providers that are doctors, physician assistants, paramedics, nurses, or nurse practitioners as long as those individuals are covered under the vendor’s insurance and are supervised by a licensed physician.
- 3.6. Vendor shall facilitate easy access to the vendor’s main office in instances when the environment and or time constraints of sick call prevent adequate care on-site. All efforts are to be made by the vendor to handle Cadet’s needs on-site to reduce the number of off-site medical visits and minimize “time out of the school day” for Cadets.
- 3.7. Vendor **must** have and **maintain physician privileges** at Montgomery General Hospital, Inc.
- 3.8. Vendor **must utilize** Montgomery General Hospital, Inc. for treatment and lab work when not available through their practice.
- 3.9. Vendor must have an office practice within a twenty (20) mile radius of MCA-South at 305 Fayette Pike, Montgomery WV, and in close proximity to Montgomery General Hospital, Inc., to reduce “time away from class” and to expedite treatment.

4. **MANDATORY REQUIREMENTS:**

4.1 Mandatory Contract Services Requirements and Deliverables: Contract Services must meet or exceed the mandatory requirements listed below.

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

4.1.1 Physical Exams (Bid Item #1 Insured by Cadets) Vendor shall conduct complete physical examinations on-site (MCA-South) for approximately 240 applicants on the first Monday, Tuesday, and Wednesday at the beginning of each class session. One sixth of the class on Monday morning, one sixth of the class on Monday afternoon, one sixth of the class on Tuesday morning, one sixth of the class Tuesday afternoon, one sixth of the class Wednesday morning, and one sixth of the class Wednesday afternoon. This rotation supports the MCA-South training schedule. The MCA-South will provide a completed medical history form and physical form for each applicant.

4.1.1.1 Vendor must provide all labor and materials required for examinations.

4.1.1.2 Physical exam must include a screening for color blindness.

4.1.1.3 Physical exam for females must include a pregnancy test prior to the Cadet receiving any immunizations.

4.1.1.4 Vendor will provide a full written review of all applicants following the physical exams. This review will include current diagnosis and medications, food allergies, limiting factors and/or concerns regarding the applicant's physical and mental ability to function in the program and identify any follow-up requirements.

4.1.1.5 Physical exams must include the determination of suitability for participation in the MCA-South 22-week program with concerns for physical and mental health. Vendor will identify any applicant they determine to be unable to participate for physical or mental health reasons in the full written review.

4.1.1.6 Upon completion of all physical exams, the vendor and MCA-South Staff will utilize the applicant reviews to discuss any Cadets who are not suitable for the program and those with follow-up requirements.

4.1.2 Immunization / Screening (Bid Item #2 Insured by Cadets) Vendor must provide and administer immunizations required. The MCA-South will

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

identify applicants who have shot records documenting previous immunization. These immunizations will not be duplicated for those applicants having proof of meeting the requirements.

- 4.1.3** Diphtheria-Tetanus (Adult) Booster (**Bid Item #3 Insured by Cadets**) must be administered to each Cadet, at the time of the physical examination, qualified to enter the program.
- 4.1.4** Tuberculosis Screening (Adult PPD) (**Bid Item #4 Insured by Cadets**) must be performed on all MCA Staff annually and each Cadet must be screened as well.
- 4.1.5** Meningococcal Vaccine or (Adult) (**Bid Item #5 Insured by Cadets**) **booster** as required for West Virginia high school enrollment, must be administered to each Cadet, at the time of physical examination, qualified to enter the program.
- 4.1.6 Sick Call / Triage (Bid Item #6 – Nurse & Physician Rates)** Vendor will provide a health care provider on-site (MCA-South) for sick call and triage, Monday through Friday of each cycle. Vendor will conduct sick call from 0700-0800 (Or longer if warranted by number of sick calls.) The MCA-South makes available to the vendor a small office suitable for conducting sick call examinations with easy access to a restroom. The MCA also provides a telephone, a computer with local area network access, and a vehicle for necessary medical support activities. The vendor will provide consumable/expendable items necessary for sick call: i.e. sample medications (to reduce Cadet's cost), bandages, disposal of all sharps, etc. The vendor will plan and maintain a well-stocked and sanitary exam/office location to facilitate on-site sick call.
- 4.1.6.1 Sick call** consists of diagnosing and treating minor medical problems and determining whether an off-site office visit or additional care is necessary.

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

4.1.6.2 Cadets will complete a “sick call” form identifying their medical complaints, durations, etc. The MCA-South Staff will provide comments and observations when available on the same form. The vendor will complete the form following the exam with instructions to the MCA-South Staff regarding medications, appointments, or future treatment and provide a copy to the MCA-South.

4.1.6.3 The vendor will use the MCA-South Medical Wristband Procedure to further identify Cadet’s limitations.

4.1.7 Care and Medication Management (Bid Item #7 Nurse & Physician Rates) Vendor will provide a medical technician or medical assistant operating under the insurance and supervision of the Provider to be on-site daily for approximately six (6) hours.

4.1.7.1 This individual will manage Cadet medical records. All charts, medications (ordering and dispensing), appointment coordination, insurance coordination, and medical records management are the responsibility of this individual.

4.1.7.2 This individual will be responsible for coordination of and transportation to cadet appointments and the organization of cadet care and medications with MCA Staff.

4.1.7.3 This individual will be responsible for dispensing and monitoring all medications for Cadets, whether it is brought from home or prescribed while attending the MCA-South. This individual will be responsible for calling in cadet prescriptions to the pharmacy, coordinating medication changes with the pharmacists, picking up prescriptions and over the counter needs from the pharmacy, recording all medication changes in the MCA-South Med Log and patient record. Medication management is to be performed on a daily basis with all medications dispensed by the provider at breakfast and lunch. All other medications will be packaged and labeled for evening (dinner and bedtime) and weekend (breakfast, lunch, dinner, bedtime) medication calls. All packaged medication will be receipted to the MCA-South Senior Squad Leader.

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Medical Services for MCAS

4.1.7.4 When medications / prescriptions are new or refilled at the local pharmacy, this individual is responsible for picking them up and working them into the system. The MCA-South provides a vehicle for transportation

4.1.8 Opening Day Registration Coordination (Bid Item #8 Nurse & Physician Rates) Opening Day for each cycle is held twice annually, mid-January and mid-July, on a Sunday at 305 Fayette Pike in Montgomery, WV. This will be the schedule for subsequent cycles.

4.1.8.1 The vendor will supply adequate staff to work three stations to collect and document the name and amount of medications brought with the Cadet on Opening Day.

4.1.8.2 The vendor will secure medications, prepare MCA-South Medication Log, and package medications for on-site distributions beginning with Opening Day evening meal, Opening Day bedtime, and morning medications for the following day.

4.1.8.3 The vendor will administer complete urinalysis as required for physical examination (sugar, protein, pregnancy test for females, etc.) to identify any Cadets that might need retesting during the physical examinations that will follow the next three days.

5. CONTRACT AWARD:

5.1 Contract Award: The Contract is intended to provide Agency with a purchase price for the Nursing & Physician Contract Services. The Contract shall be awarded to the Vendor that provides the Contract Services meeting the required specifications for the lowest overall total cost as shown on the Pricing Pages. The first 5 lines will be a total unit price for each (not to be the determining factor in the bid evaluation). The last 3 lines will be what will be used to determine the contract pricing for everything. We will have one billing rate for Nursing Services & one billing rate for Physician Services. The Nursing Services & Physician Services are the Rates that should be entered into Oasis Commodity Lines 1 & 2. **See Exhibit A Pricing Page.**

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

5.2 Pricing Page: Vendor should complete the Pricing Page by entering the unit price of the items as noted and extending that unit price by the estimated quantities provided and entering an extended line-item price where shown.

5.3 Vendor **MUST** complete the Pricing Page in full as failure to complete the Pricing Page in its entirety may result in Vendor's bid being disqualified.

Vendor should type or electronically enter the information into the Pricing Pages through wvOASIS, if available, or as an electronic document. In most cases, the Vendor can request an electronic copy of the Pricing Pages for bid purposes by sending an email request to the following address:

DAVID.H.PAULINE@WV.GOV

**PLEASE NOTE: THE UNIT PRICE FOR ITEM NO. 4.1.1 – 4.1.5 MUST BE A
UNIT PRICE OR PRICE PER EXAM AND IMMUNIZATION NOT AN
HOURLY RATE.**

**THE PRICE FOR ITEM NO. 4.1.6- 4.1.8 MUST BE AN HOURLY RATE FOR
THE NURSE & DOCTOR. THE HOURLY RATE FOR THESE 3 ITEMS WILL
BE THE SET PRICE ON THE CONTRACT. THIS IS WHAT WILL BE
ENTERED INTO OASIS AS YOUR HOURLY RATE FOR THE NURSING
RATES & THE PHYSICIAN RATES.**

Vendor should enter the grand total price at the bottom of the pricing page for the total Nursing hours X your rates along with the total Physician hours X your rates. Vendor **MUST** complete the Pricing Page in full as failure to complete the Pricing Page in its entirety may result in Vendor's bid being disqualified. What is entered in OASIS will overrule anything on the Exhibit "A".

Notwithstanding the foregoing, the Purchasing Division may correct errors as it deems appropriate. Vendor should type or electronically enter the information into the Pricing Page to prevent errors in the evaluation.

6. PERFORMANCE: Vendor and Agency shall agree upon a schedule for performance of Contract Services and Contract Services Deliverables, unless such a schedule is already included herein by Agency. In the event that this Contract is designated as an open-end contract, Vendor shall perform in accordance with the release orders that may be issued against this Contract.

7. PAYMENT: With the exception of the contract items noted below, financial compensation for this contract will be generated from patient billing not from the State of WV- MCA-South.

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

Vendor will be responsible for all billing issues for those Cadets with insurance and those who are uninsured. Vendor will coordinate with insurance providers when pre-authorization is necessary to facilitate the required or recommended treatment. The vendor is responsible for coordination of all off-site appointments with MCA-South, other service providers, and Cadet Families. The hourly rates of the Medical Technician/Medical Assistant, Physician Assistant, and Nurse Practitioner as they relate to on-site sick call coordination, medication dispensing, and opening day registration coordination will be invoiced to the Mountaineer Challenge Academy-South. Vendor shall accept payment in accordance with the payment procedures of the State of West Virginia.

8. TRAVEL:

Vendor shall be responsible for all mileage and travel costs, including travel time, associated with performance of this Contract. Any anticipated mileage or travel costs may be included in the flat fee or hourly rate listed on Vendor's bid, but such costs will not be paid by the Agency separately.

9. FACILITIES ACCESS: Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:

- 9.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
- 9.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
- 9.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
- 9.4. Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 9.5. Vendor shall inform all staff of Agency's security protocol and procedures.

REQUEST FOR QUOTATION – CRFQ ADJ25*27
Medical Services for MCAS

10. VENDOR DEFAULT:

10.1. The following shall be considered a vendor default under this Contract.

10.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.

10.1.2. Failure to comply with other specifications and requirements contained herein.

10.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

10.1.4. Failure to remedy deficient performance upon request.

10.2. The following remedies shall be available to Agency upon default.

10.2.1. Immediate cancellation of the Contract.

10.2.2. Immediate cancellation of one or more release orders issued under this Contract.

10.2.3. Any other remedies available in law or equity.

11. MISCELLANEOUS:

11.1. Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____



Mountaineer Challenge Academy

MEDICAL HISTORY REVIEW (page 1 of 2)

This review of the applicant's health history does NOT require a doctor's visit, well child appointment, or physical exam.

IDENTIFYING INFORMATION

Name: _____ DOB: _____ MCA Class # _____
 Address: _____ Age: _____ Responsible Adult: _____
 City/State/Zip: _____ Insurance _____

FAMILY HEALTH HISTORY

- PARENTS, SIBLINGS, GRANDPARENTS HAVE/HAD:**
- | | | |
|---|---|--|
| <input type="checkbox"/> HEART DISEASE | <input type="checkbox"/> SEIZURES | <input type="checkbox"/> MENTAL ILLNESS |
| <input type="checkbox"/> HIGH BLOOD PRESSURE | <input type="checkbox"/> TUBERCULOSIS | <input type="checkbox"/> MENTAL RETARDATION |
| <input type="checkbox"/> ELEVATED CHOLESTEROL | <input type="checkbox"/> ASTHMA | <input type="checkbox"/> SUICIDE |
| <input type="checkbox"/> KIDNEY PROBLEM | <input type="checkbox"/> THYROID PROBLEM | <input type="checkbox"/> EATING DISORDERS |
| <input type="checkbox"/> DIABETES | <input type="checkbox"/> EYE DISORDERS | <input type="checkbox"/> OBESITY |
| <input type="checkbox"/> CANCER | <input type="checkbox"/> EARLY USE OF GLASSES | <input type="checkbox"/> DRUG / ALCOHOL ABUSE |
| <input type="checkbox"/> BLOOD DISORDER | <input type="checkbox"/> ALLERGIES | <input type="checkbox"/> CIGARETTE / CIGAR USE |
| | | <input type="checkbox"/> SMOKELESS TOBACCO |

CHILD'S HEALTH HISTORY

- HAS CHILD HAD:**
- | | |
|--|--|
| <input type="checkbox"/> MEASLES | <input type="checkbox"/> PHYSICAL ABUSE / NEGLECT |
| <input type="checkbox"/> MUMPS | <input type="checkbox"/> EYE OR VISION PROBLEMS |
| <input type="checkbox"/> RUBELLA | <input type="checkbox"/> ROTAVIRUS (SUDDEN SEVERE DIARRHEA & VOMITING) |
| <input type="checkbox"/> CHICKEN POX | <input type="checkbox"/> URINARY TRACT INFECTION |
| <input type="checkbox"/> HEPATITIS | <input type="checkbox"/> FREQUENT CONSTIPATION |
| <input type="checkbox"/> MENINGITIS | <input type="checkbox"/> FREQUENT DIARRHEA |
| <input type="checkbox"/> EXPOSURE TO TB | <input type="checkbox"/> UPPER RESPIRATORY INFECTION |
| <input type="checkbox"/> HEART MURMUR _____ | <input type="checkbox"/> HIGH OR LOW BLOOD PRESSURE _____ |
| <input type="checkbox"/> RHEUMATIC FEVER | <input type="checkbox"/> ARTHRITIS, RHEUMATISM, BURSITIS _____ |
| <input type="checkbox"/> SEIZURE _____ | <input type="checkbox"/> GALL BLADDER TROUBLE OR STONES _____ |
| <input type="checkbox"/> ASTHMA _____ | <input type="checkbox"/> CHRONIC COUGH OR COLDS |
| <input type="checkbox"/> EAR INFECTION | <input type="checkbox"/> SHORTNESS OF BREATH |
| <input type="checkbox"/> STREP THROAT | <input type="checkbox"/> HIGH BLOOD LEAD LEVEL |
| <input type="checkbox"/> CONJUNCTIVITIS | <input type="checkbox"/> HEAD INJURY, FAINTING, MEMORY LOSS, CONCUSSION(S) _____ |
| <input type="checkbox"/> KIDNEY STONES | <input type="checkbox"/> RUPTURE OR HERNIA |
| <input type="checkbox"/> DIABETES _____ | <input type="checkbox"/> LOSS OF FINGERS OR TOES _____ |
| <input type="checkbox"/> SKIN DISEASE | <input type="checkbox"/> TUMOR, CYST, CANCER _____ |
| <input type="checkbox"/> SCARLET FEVER | <input type="checkbox"/> THYROID TROUBLE _____ |
| <input type="checkbox"/> MENSES | <input type="checkbox"/> PAIN (CIRCLE): FOOT ANKLE KNEE _____ |
| <input type="checkbox"/> STD | LEG HIP BACK WRIST ELBOW _____ |
| <input type="checkbox"/> CHILDREN OF OWN _____ | SHOULDER NECK _____ |
| <input type="checkbox"/> OTHER _____ | |

CHILD'S NUTRITIONAL HISTORY

ALLERGIES TO MEDICATION (List) _____
 ALLERGIES TO FOOD (List) _____
 ALLERGIES TO ENVIRONMENT (List) _____
 SPECIAL DIET/NUTRITIONAL NEEDS _____
 HISTORY OF EATING DISORDERS (List) _____



Mountaineer Challenge Academy

MEDICAL HISTORY REVIEW (page 2 of 2)

This review of the applicant's health history does NOT require a doctor's visit, well child appointment, or physical exam.

CHILD'S PSYCHOSOCIAL HISTORY

HAS CHILD HAD PROBLEM WITH:

- | | |
|---|--|
| <input type="checkbox"/> MOTOR SKILLS | <input type="checkbox"/> FIRE SETTING |
| <input type="checkbox"/> ACCIDENT PRONE | <input type="checkbox"/> DESTROYS PROPERTY |
| <input type="checkbox"/> SLEEPING | <input type="checkbox"/> TORTURES ANIMALS |
| <input type="checkbox"/> NIGHTMARES | <input type="checkbox"/> APPROPRIATE EXPRESSION OF ANGER |
| <input type="checkbox"/> BEDWETTING (AFTER 6 YEARS) | <input type="checkbox"/> GETTING ALONG WITH CHILDREN / PEERS |
| <input type="checkbox"/> SLEEPWALKING | <input type="checkbox"/> GETTING ALONG WITH SIBLINGS |
| <input type="checkbox"/> HEARING | <input type="checkbox"/> GETTING ALONG WITH PARENTS / ADULTS |
| <input type="checkbox"/> SUPPOSED TO USE HEARING AID | <input type="checkbox"/> SEXUAL ACTING OUT |
| <input type="checkbox"/> CURRENTLY USES HEARING DEVICE | <input type="checkbox"/> CONCENTRATION |
| <input type="checkbox"/> VISION | <input type="checkbox"/> HYPERACTIVITY |
| <input type="checkbox"/> SUPPOSED TO WEAR GLASSES _____ | <input type="checkbox"/> ISOLATION |
| <input type="checkbox"/> CURRENTLY USES GLASSES OR CONTACTS _____ | <input type="checkbox"/> LEARNING |
| <input type="checkbox"/> SPEECH | |

CHILD'S CURRENT HEALTH ASSESSMENT

DIAGNOSIS FROM EDUCATIONAL/PSYCHO-EDUCATION TESTING (EXAMPLES: ADD, ADHD, ODD, ETC):

CURRENTLY HAS I-E-P OR 504 PLAN _____

EVALUATED FOR SPECIAL EDUCATION SERVICES _____

PROFESSIONAL COUNSELING FOR _____

DEPRESSION DIAGNOSED: DATE _____

TREATED FOR DEPRESSION: DR _____

ATTEMPTED SUICIDE: DATE _____

TREATED FOR SUICIDE ATTEMPT: DR _____

NERVOUS TROUBLE OF ANY SORT _____

SMOKING/TOBACCO _____

DRUG / ALCOHOL USE _____

CHRONIC, ON-GOING ILLNESSES (LIST) _____

HISTORY OF HOSPITALIZATIONS (LIST ALL MEDICAL, MENTAL HEALTH, BEHAVIORAL)

SURGERIES (LIST) _____

BROKEN BONES (LIST) _____

HAS REGULAR DOCTOR: DR _____ DATE OF LAST SCREEN: _____

CURRENT HEALTH COMPLAINT(S) _____

CURRENT MEDICATION(S): _____

CURRENT HEALTH STATUS: GOOD FAIR POOR

NAME OF PARENT OR LEGAL GUARDIAN: _____ DATE: _____



Mountaineer Challenge Academy

SICK CALL FORM

Date: _____ Cadet: _____

Date Illness Started: _____ YES NO
Is this request because of an injury?
Was the injury obtained before coming to MCA?

List symptoms: (Be Specific) _____

2. MCA Staff Screening: _____

Staff _____ Vomiting # _____ Diarrhea # _____ Insomnia # _____

3. Medical On-Site Screening - Medical Personnel Only (Print On Reverse) _____

Height _____ Weight _____ B/P _____ O2 _____ Temp _____

Comments: _____

Limited Duty: _____
 Return to Full Duty _____

Name of Medical Staff

Referral to: _____ Appointment: _____

4. Cadet Review For Action: _____

Instructions Issued By: _____

Date _____ Time _____ Cadet Signature _____

Cadre Signature _____



Mountaineer Challenge Academy

PHYSICAL EXAMINATION FORM

Preston Memorial Physicians Center 150 Memorial Drive Kingwood WV 26537

CADET

DATE

ADDRESS

SSN

GENDER

RACE

DATE OF BIRTH

CLINICAL EVALUATION			Notes: Describe every abnormality in detail. Continue on reverse side if needed.		
NORMAL	Check each item in appropriate columns; enter "NE" if not evaluated	ABNORMAL	<p><u>SURGERIES</u></p> <hr/> <p><u>IMMUNIZATION RECORD</u></p>		
	HEAD, FACE, NECK AND SCALP				
	NOSE				
	SINUSES				
	MOUTH AND THROAT				
	EARS - GENERAL (Internal Canal)				
	DRUMS (Perforation)				
	EYES - GENERAL				
	OPHTHALMOSCOPIC				
	PUPILS (Equality and Reaction)				
	OCULAR MOTILITY				
	LUNGS AND CHEST (Include Breasts)				
	HEART (Throat, size, rhythm, sounds)				
	VASCULAR SYSTEM				
	ABDOMEN AND VISCERA (Include Hernia)				
	ANUS AND RECTUM (Hemorrhoids, Fistulae, Prostate, if indicated)				
	ENDOCRINE SYSTEM				
	G-U SYSTEM				
	UPPER EXTREMITIES (Strength, range of motion)				
	FEET				
	LOWER EXTREMITIES (Except feet) Strength, range of motion)				
	SPINE, OTHER MUSCULOSKELETAL				
	IDENTIFYING BODY MARKS, SCARS, TATOOS				
	SKIN, LYMPHATICS				
	NEUROLOGIC (Equilibrium tests)				
	DENTAL				
	PSYCHIATRIC (Specify any personal deviation)				
ALLERGIES					
CURRENT MEDICATIONS					

URINALYSIS		
	Cath Spec	
Hold for Possible Culture (Notify Within 4 Hours)		
	Color	
	Character	
	Glucose	
	Bilirubin	
	Ketones	
	Spec Gravity	
	Occult Blood	
	PH	
	Albumin	
	Urobilinogen	
	Nitrate	
	Leukocyte Esterase	
	Protein SSA	
Repeat	YES	NO
Pregnancy	Positive	Negative



Mountaineer Challenge Academy

PHYSICAL EXAMINATION FORM (page 2)

Height	Weight	Color Hair	Color Eyes	BUILD: Slender Medium Heavy Obese
BLOOD PRESSURE		TEMPERATURE		RESPIRATIONS
PULSE				
VISION	(R) 20/	(L) 20/	PUPILS	
	Corrected Y N	Corrected Y N	Color Vision	Yes No
	Eyeglasses Y N	Eyeglasses Y N	Depth Perception	
	Contacts Y N	Contacts Y N	Field of Vision	
HEARING R: 500HZ 1000HZ 2000HZ 4000HZ L: 500HZ 1000HZ 2000HZ 4000HZ				

ANTICIPATORY GUIDANCE: HANDOUTS GIVEN **BMI CHART IN FILE**
 Health and safe habits: nutrition, sleep, oral/dental care, risk behaviors, sexuality, injury and violence prevention, mental health, social competence, responsibility, school achievement, family relationships and community interaction, health care transition from adolescence to adulthood in the medical home.

REMARKS

CADET NAME:

	APPROVED FOR FULL PARTICIPATION
	FULL APPROVAL BUT NEEDS FURTHER EVALUATION FOR THE FOLLOWING
	LIMITED APPROVAL WITH THE FOLLOWING RESTRICTIONS
	NOT APPROVED FOR THE FOLLOWING REASONS

PRINTED NAME OF PHYSICIAN	SIGNATURE	DATE
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Mountaineer ChalleNGe Academy

Class 1-25 South Calendar

JANUARY						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

APRIL						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OPENING DAY

Sunday, January 19, 2025
By Appointment/MONTGOMERY
MCA FACILITY/MONTOMERY

FIRST LEAVE

FEBRUARY						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

MAY						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Begins: Fri, March 7, 2025
Ends: Tuesday, March 11, 2025
MCA Facility/Montgomery

SECOND LEAVE

Begins: Friday, May 23, 2025
Ends: Tuesday May 27, 2025
MCA/Facility/Montgomery

MARCH						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

JUNE						
Sun	Mon	Tues	Wed	Thurs	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

GRADUATION

Friday, June 20, 2025
10:00 am

Mountaineer Challenge Academy

Class 2-25 SOUTH Calendar

July							October							
Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	
		1	2	3	4	5				1	2	3	4	
6	7	8	9	10	11	12	OPENING DAY							12
13	14	15	16	17	18	19	Sunday July 20, 2025 Appointment Time Only							13
20	21	22	23	24	25	26	12	13	14	15	16	17	18	
27	28	29	30	31			19	20	21	22	23	24	25	
							26	27	28	29	30	31		
							First Leave							
August							November							
Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	
					1	2	Begins: Friday, Aug 29, 2025 Ends: Tuesday, Sept 2, 2025							1
3	4	5	6	7	8	9	2	3	4	5	6	7	8	
10	11	12	13	14	15	16	9	10	11	12	13	14	15	
17	18	19	20	21	22	23	Second Leave							16
24	25	26	27	28	29	30	16	17	18	19	20	21	22	
							23	24	25	26	27	28	29	
							MCA FACILITY/MONTGOMERY							19
September							December							
Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	
31	1	2	3	4	5	6	30	1	2	3	4	5	6	
7	8	9	10	11	12	13	GRADUATION							20
14	15	16	17	18	19	20	Friday, Dec 19, 2025 10:00 am Fayetteville, WV							21
21	22	23	24	25	26	27	7	8	9	10	11	12	13	
28	29	30					14	15	16	17	18	19	20	
							21	22	23	24	25	26	27	
							28	29	30	31				

ITEM NO.	DESCRIPTION	EST. QTY	UNIT PRICE	EXT TOTAL
Item No. 4.1.1	Physical Exams (Est. Qty per Class - 125) (Billed to Insured Cadets)		\$	138.00
Item No. 4.1.2 (Bid Item #2)	Immunization / Screening Diphtheria - Tetanus Immunization (Billed to Insured Cadets)		\$	10.00
Item No. 4.1.3	Tuberculosis Screening (Billed to Insured Cadets)		\$	10.00
Item No. 4.1.4	Meningococcal Immunization (Billed to Insured Cadets)		\$	10.00
Item No. 4.1.5	Tuberculosis Screening (MCA Staff)		\$	10.00
You can determine which provider to send (Nurse/Physician) for each.		EST. Hrs	See pricing on COM Line 1 & 2 in Oasis. Nurse/Physician Rates.	
Item No. 4.1.6	Sick Call/Triage (EST 20 Hrs/wk) (Bill Monthly in Arrears / Quarter-Hour Increments) On Site Sick Coordinator (Est. Hours per Week)			\$25.00 / \$ 114.00
Item No. 4.1.7	Care & Medication Management (EST 30 Hrs/wk) (Bill Monthly in Arrears / QuarterHour Increments) Technician / Assistant (Est. Hours per Week)			\$24.00 / \$50.00
Item No. 4.1.8	Opening Day Registration Opening Day Registration Coordination (Est. Hours per Employee for this Event)			\$ 25.00 / \$75.00
TOTAL				

\$74.00. / \$239.

Failure to use this form WILL result in disqualification

Vendor Information:	Oasis #200445
Name: Montgomery General Hospital	
Address: 401 6th Ave	
City, State, Zip: Montgomery WV 25136	
Phone: 304.442.5151	
Email: draynes@mghwv.org	
Authorized Signature: 	