



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: 02-21-2024

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

<b>Order Number:</b>	CMA 0603 8230 ADJ2100000008 4	<b>Procurement Folder:</b>	829644
<b>Document Name:</b>	Medical Support Services for MCA North	<b>Reason for Modification:</b>	
<b>Document Description:</b>	Change Order 3	Change Order 3 To renew contract	
<b>Procurement Type:</b>	Central Master Agreement		
<b>Buyer Name:</b>			
<b>Telephone:</b>			
<b>Email:</b>			
<b>Shipping Method:</b>	Best Way	<b>Effective Start Date:</b>	2021-03-01
<b>Free on Board:</b>	FOB Dest, Freight Prepaid	<b>Effective End Date:</b>	2025-02-28

VENDOR				DEPARTMENT CONTACT	
<b>Vendor Customer Code:</b>	000000172600			<b>Requestor Name:</b>	Nancy C Baire
PRESTON MEMORIAL HOSPITAL CORPORATION				<b>Requestor Phone:</b>	304-561-6449
150 MEMORIAL DR				<b>Requestor Email:</b>	Nancy.c.baire.nfg@mail.mil
KINGWOOD	WV	26537			
US					
<b>Vendor Contact Phone:</b>	304-329-4703	<b>Extension:</b>			
<b>Discount Details:</b>					
	<b>Discount Allowed</b>	<b>Discount Percentage</b>	<b>Discount Days</b>		
#1	No	0.0000	0		
#2	No				
#3	No				
#4	No				

INVOICE TO			SHIP TO		
STATE FINANCE			MOUNTAINEER CHALLENGE PROGRAM		
ADJUTANT GENERALS OFFICE			ADJUTANT GENERALS OFFICE		
1703 COONSKIN DR			1001 ARMY RD		
CHARLESTON	WV 25311-1085		KINGWOOD	WV 26537	
US			US		

**Total Order Amount:** Open End

**PURCHASING DIVISION AUTHORIZATION**  
 DATE:  
 ELECTRONIC SIGNATURE ON FILE

**ATTORNEY GENERAL APPROVAL AS TO FORM**  
 DATE:  
 ELECTRONIC SIGNATURE ON FILE

**ENCUMBRANCE CERTIFICATION**  
 DATE:  
 ELECTRONIC SIGNATURE ON FILE

**Extended Description:**

Change Order No. 3

Change Order No. 3 is issued to renew the original contract according to all terms, conditions, prices, and specifications contained in the original contract, including all authorized change orders.

Effective date of renewal February 29, 2024, through February 28, 2025.

Renewals Remaining: 0

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85121500			EA	0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Medical Support Services

**Extended Description:**

Medical Support Services

See attached pricing pages

	Document Phase	Document Description	Page
ADJ210000008	Pending	Change Order 3	3

**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions



DEPARTMENT OF THE ARMY  
 ADJUTANT GENERAL'S OFFICE  
 JOINT FORCES HEADQUARTERS WEST VIRGINIA  
 1707 COONSKIN DRIVE  
 CHARLESTON, WEST VIRGINIA 25311-1028

Dianna Trickett  
 MCAN – Director  
 1001 Army Road  
 Kingwood, WV 26537

February 2, 2024

Please see attached the renewal request for Preston Memorial Hospital Corporation for medical support services for your facility. The renewal is for Change Order # 2 on AMA ADJ2100000008. This will be the second of its renewals and will make it effective from February 29, 2024 through February 28, 2025. If they would like to renew at the same price, they just need to sign below & send it back in to proceed with this renewal. Please have the Vendor to sign it first & then you will sign afterwards.

Once this is completed, please return to me for the change order to be processed.

Dianna Trickett  
 Print Name - Director  
 Mountaineer Challenge Academy

Dianna L. Trickett 02-15-2024  
 Sign Name & Date

Preston Memorial Hospital Corporation  
 Vendor Name

Melissa Lockwood, Chief Administrative Officer  
Melissa Lockwood 2/15/2024  
 Print Name, Sign Name, & Date

If you have any questions regarding this request for documentation, please contact me.

Sincerely,

BAIRE.NANCY.CA  
 ROL:1573012921

Nancy C. Baird  
 Procurement Analyst  
 WV ADJ GEN/WVARNG  
 304-561-6449

## Exhibit A

## CRFQ 0603 ADJ21000000032 - WV ADJUTANT GENERAL MOUNTAINEER CHALLENGE ACADEMY -NORTH

## PRICING PAGE

ITEM NO.	DESCRIPTION	EST QTY	UNIT PRICE	TOTAL (EST QTY x Unit Price)
Item No. 4.1.1 (Bid Item #1)	<b>Physical Exams</b> (Est. Qty per Class- 140)	250	\$ 180.00	\$ 45,000.00
Item No. 4.1.2 (Bid Item #2)	<b>Immunization / Screening</b> Diphtheria - Tetanus Immunization (Insured Cadets)	125	\$ 45.00	\$ 5,625.00
	Tuberculosis Screening (Insured Cadets)	125	\$ 45.00	\$ 5,625.00
	Meningococcal Immunization (Insured Cadets)	125	\$ 135.00	\$ 16,875.00
	Tuberculosis Screening (MCA Staff) [to be billed to MCA]	75	\$ 45.00	\$ 3,375.00
Item No. 4.1.3 (Bid Item #3)	<b>Sick Call / Triage</b> (Bill Monthly in Arrears / Quarter-Hour Increments) On-Site Sick Coordinator (Est. Hours per Week)	10	\$ 25.00	\$ 250.00
Item No. 4.1.4 (Bid Item #4)	<b>Care and Medication Management</b> (Bill Monthly in Arrears / Quarter-Hour Increments) Technician / Assistant (Est. Hours per Week)	30	\$ 25.00	\$ 750.00
Item No. 4.1.5 (Bid Item #5)	<b>Opening Day Registration</b> Opening Day Registration Coordination (Est. Hours per Employee for this Event)	24	\$ 25.00	\$ 600.00
Failure to use this form may result in disqualification		<b>GRAND TOTAL</b>		\$ 78,100.00

Bidder / Vendor Information: **Preston Memorial Hospital Corp**Name: **Melissa Lockwood, CAO**Address: **150 Memorial Drive, Kingwood, WV 26537**Phone: **304-329-4704**Fax: **304-329-1378**E-mail Address: **mlockwood@prestonmemorial.org**

Authorized Signature:

*Melissa Lockwood*

REQUEST FOR QUOTATION  
CRFQ# 0603 ADJ210000032 - MCA-NORTH Medical Support Services

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**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.

10.1.5. Failure to maintain physician privileges at Preston Memorial Hospital.

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

10.2.1. Cancellation of the Contract.

10.2.2. 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: Tamara Newsome  
Telephone Number: 304-329-1400 x2110  
Fax Number: 304-329-  
Email Address: tnewsome@prestonmemorial.org