



# State of West Virginia Agency Master Agreement

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

Order Date: 2024-07-09

<b>Order Number:</b> AMA 0603 3926 ADJ2200000017 4	<b>Procurement Folder:</b> 1044316
<b>Document Name:</b> Nursing Services for MJCP	<b>Reason for Modification:</b> Change Order 2 to renew the contract at same price, terms & conditions as original contract.
<b>Document Description:</b> 23MJCP-001	
<b>Procurement Type:</b> Agency Master Agreement	
<b>Buyer Name:</b> Nancy C Baire	
<b>Telephone:</b> 304-561-6449	
<b>Email:</b> nancy.c.baire.nfg@army.mil	
<b>Shipping Method:</b> Best Way	<b>Effective Start Date:</b> 2022-07-01
<b>Free on Board:</b> FOB Dest, Freight Prepaid	<b>Effective End Date:</b> 2025-06-30

VENDOR	DEPARTMENT CONTACT																				
<b>Vendor Customer Code:</b> 000000172600 PRESTON MEMORIAL HOSPITAL CORPORATION 150 MEMORIAL DR  KINGWOOD WV 26537 US <b>Vendor Contact Phone:</b> 304-329-4703 <b>Extension:</b>  <b>Discount Details:</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 5%;">#</th> <th style="width: 15%;">Discount Allowed</th> <th style="width: 40%;">Discount Percentage</th> <th style="width: 40%;">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			<b>Requestor Name:</b> Nancy C Baire <b>Requestor Phone:</b> 304-561-6449 <b>Requestor Email:</b> Nancy.c.baire.nfg@army.mil
#	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 JOB CHALLENGE PROGRAM ADJUTANT GENERAL'S OFFICE  1001 ARMY ROAD  KINGWOOD WV 26537  US

<b>Total Order Amount:</b>	Open End
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BAIRE.NANCY.C  
 AROL.1573012  
 921

Digitally signed by  
 BAIRE.NANCY.CAROL.1573  
 012921  
 Date: 2024.07.09 14:35:20  
 .n4'nn'

**DEPARTMENT AUTHORIZED SIGNATURE**  
**SIGNED BY : Nancy C Baire**  
**DATE: 2024-07-09**  
**ELECTRONIC SIGNATURE ON FILE**

**Extended Description:**

The Vendor, Preston Memorial Hospital, agrees to enter with the WV Adjutant General's Office, into an open-end contract to provide Medical Services at the Mountaineer Job Challenge (MJCP) located at 1001 Army Road, Kingwood, WV, per the Agency Delegated Agreement, Agency Terms and conditions incorporated herein by reference and made apart hereof.

Life of Contract: July 1, 2022 - June 30, 2023. Can be renewed for 3 additional years with both parties agreement and a change order to the contract.

\*\*\*\*\*  
Change Order 2 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 July 1, 2024 through June 30, 2025. Renewal Years/Months Remaining: 1 years. No other changes.  
\*\*\*\*\*

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85121500			EA	\$19.00
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
	2022-07-01	2025-06-30		0.00	

**Commodity Line Description:** Medical Billing

**Extended Description:**

Nursing Services per the Agency Delegated Agreement (WV48)

	Document Phase	Document Description	Page
ADJ220000017	Final	23MJCP-001	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 25311-1026

Name:  
Preston Memorial Hospital Corporation  
Address: 150 Memorial Dr.  
Kingwood, WV 26537

Date: June 6, 2024  
Procurement Analyst: Nancy Baire  
Req. Number: AMA ADJ2200000017  
Change Order No. 2  
Phone: (304) 561-6449

Dear Ms. Lockwood :

Our current contract #AMA 0603 0603 ADJ2200000017 to provide nursing services for the WV Adjutant General (MJCP) is up for its second of three (3) renewal periods June 30, 2024.

If you are agreeable to renew the original contract prices according to all terms, conditions, and specifications contained in the original contract and all authorized change orders, for the period noted below, please sign and date at the bottom of this document.

Effective date of renewal: July 1, 2024 through June 30, 2025.

Renewals remaining: 1

*Melissa Lockwood*

Melissa Lockwood

Signature & Printed Name

07/03/2024

Date

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

Sincerely,

BAIRE.NANCY.CA Digitally signed by  
ROL.1573012921 BAIRE.NANCY.CA.CA.1573012921  
Date: 2024.06.06 08:47:51 -0400'

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

WV-48  
Approved / Revised 12/13/17

State of West Virginia  
Purchasing Division

# AGENCY DELEGATED AGREEMENT

Purchase Order # ADJ2 20 00017

WV OASIS Vendor/ Customer # 00000017 2600

I, Preston Memorial Hospital Corporation (PMH), agree to perform the following services

for WV Adjutant General's Offi. MJCP (Name and address) at 1001 Army Road, Kingwood, WV 26537

Nursing Services for MJCP (Agency) \*\*\*\*\* (Location) 23MJCP-001

(Detailed description of services to be performed)  
Nursing Services will be charged at \$19.00 per hour for the following services: Liaison between Job Challenge PMH for setting up appointments needed & triaging situations, pickup & organize medications for Pharmacy, loc. & complete medical charts. Svcs to be billed monthly X Hourly Rate.

Date(s) of Service: from July 1, 2022 to June 30, 2023

The rate of pay shall be \$19.00 per Hour not to exceed \$ \$50,000.00 (Open-end Contract 3 yr renewal) for the entire term of the contract.

NOTE: Any anticipated travel must be incorporated into the vendor's fee. No travel will be reimbursed by the State and is the sole responsibility of the vendor. The following certification must be completed and signed if the vendor is a full-time employee of the State of West Virginia.

Please check the appropriate box below:

- I am not currently a full-time employee of the State of West Virginia;
- I am currently a full-time employee of the State of West Virginia (complete certification below).

It is hereby certified that the services to be performed under this agreement will not interfere with or detract from the full-time duties of the employee and the amount of annual compensation received by \_\_\_\_\_ (above named vendor) from the State of West Virginia for full-time employment during the current fiscal year will be \$ \_\_\_\_\_. The vendor serves as \_\_\_\_\_ (Position) with the title of \_\_\_\_\_, certified by \_\_\_\_\_ (Supervisor's Signature)

**GENERAL TERMS AND CONDITIONS:** The General Terms and Conditions for Agency Delegated Master Terms and Conditions located on the Purchasing Division's website at <http://www.state.wv.us/admin/purchase/TCA.pdf>, ("Terms and Conditions") are hereby made a part of this agreement and are specifically incorporated herein by reference. By signing this agreement, Vendor certifies that it has reviewed the Terms and Conditions, fully understands them, and agrees to be bound by their provisions.

APPROVED BY:

Agency WV ADJ-GEN - Mountaineer Job Challenge Program  
  
(Authorized Signature of Agency)  
Procurement Manager  
5/31/2022  
(Date)

Vendor Preston Memorial Hospital Corporation  
Melina Lockwood  
(Vendor's Signature)  
Chief Administrative Officer  
5/31/22  
(Date)

**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.

\_\_\_\_\_  
(Name, Title)  
Melissa Lockwood, Chief Administrative Officer  
\_\_\_\_\_  
(Printed Name and Title)  
150 Memorial Dr, Kingwood, WV 26537  
\_\_\_\_\_  
(Address)  
304-329-4704 304-329-1378  
\_\_\_\_\_  
(Phone Number) / (Fax Number)  
\_\_\_\_\_  
(E-mail address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation 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 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 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.

Preston Memorial Hospital Corp  
\_\_\_\_\_  
(Company)

Melissa Lockwood, CAO  
\_\_\_\_\_  
(Authorized Signature) (Representative Name, Title)

Melissa Lockwood, Chief Administrative Officer  
\_\_\_\_\_  
(Printed Name and Title of Authorized Representative)

5/11/22  
\_\_\_\_\_  
(Date)

304-329-4704 / 304-329-1378  
\_\_\_\_\_  
(Phone Number) (Fax Number)