



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: 07-15-2026

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 0511 2518 HHR2500000002 3	Procurement Folder:	1620965
Document Name:	CERTIFIED PUBLIC ACCOUNTANTS FOR LTC REPORT EXAMINATIONS	Reason for Modification:	
Document Description:	CERTIFIED PUBLIC ACCOUNTANTS FOR LTC REPORT EXAMINATIONS	Change Order 2	
Procurement Type:	Central Master Agreement	TO RENEW CONTRACT	
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2025-01-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2027-09-14

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: VS0000048056 BDMP ASSURANCE LLP 2211 CONGRESS ST PORTLAND ME 04102 US Vendor Contact Phone: 2075412200 Extension: Discount Details: <table><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			Requestor Name: Barbara I Skeen Requestor Phone: (304) 558-7000 Requestor Email: bskeen@hcawv.org 2027 FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES FINANCE ONE DAVIS SQUARE, STE 300 CHARLESTON WV 25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES FINANCE ONE DAVIS SQUARE, STE 300 CHARLESTON WV 25301 US

CR 7-21-26

Total Order Amount: Open End

Purchasing Division's File Copy

CH 7/20/26

PURCHASING DIVISION AUTHORIZATION

DATE: 7/20/26
ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE: 7/29/26
ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION

DATE: 7-29-26
ELECTRONIC SIGNATURE ON FILE

Extended Description:

Change Order

Change Order No. 02 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 9/15/2026 through 9/14/2027.

Renewal Years Remaining: 1

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	93151607				0.000000
Service From		Service To	Service Contract Amount		
2025-01-01		2025-09-14	0.00		

Commodity Line Description: CPA Examination Small Facility (90 Beds or less) - Year 1

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,500.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	93151607				0.000000
Service From		Service To	Service Contract Amount		
2025-01-01		2025-09-14	0.00		

Commodity Line Description: CPA Examination Large Facility (91 Beds or more) - Year 1

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,750.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	93151607				0.000000
Service From		Service To	Service Contract Amount		
2025-09-15		2026-09-14	0.00		

Commodity Line Description: CPA Examination Small Facility (90 Beds or less) - Year 2

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,500.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	93151607				0.000000
Service From		Service To	Service Contract Amount		
2025-09-15		2026-09-14	0.00		

Commodity Line Description: CPA Examination Large Facility (91 Beds or more) - Year 2

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,750.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	93151607				0.000000
Service From		Service To	Service Contract Amount		
2026-09-15		2027-09-14	0.00		

Commodity Line Description: CPA Examination Small Facility (90 Beds or less) - Year 3

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,500.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
6	93151607				0.000000
Service From		Service To	Service Contract Amount		
2026-09-15		2027-09-14	0.00		

Commodity Line Description: CPA Examination Large Facility (91 Beds or more) - Year 3

Extended Description:

Certified Public Accountant examination of Long Term Care Financial and Statistical Reports from West Virginia Medicaid Providers, per the attached detailed specifications. Each engagement will include at least two (2) LTC-FASRs, or cost reports.

Unit Price: \$9,750.00

June 30, 2026

Philip M. Graham
Director, Division of Audits
Office of Shared Administration
West Virginia Departments of Health, Health Facilities and Human Services
Office of Accountability and Management Reporting
One Davis Square, Suite 304
Charleston, WV 25301

Re: Confirmation of Contract - HHR2500000002 (PF 1620976), Vendor VS0000048056

Dear Mr. Graham:

The purpose of this letter is to notify the West Virginia Department of Health, Health Facilities and Human Services of BDMP Assurance LLP's intent to renew the above referenced contract for Year 3.

We agree to a total contract amount for Year 3 which is 9/15/2026 to 9/14/2027, based upon the nursing homes listed in Attachment A, as follows:

Contract Year 3 < less than 90 beds	13 facilities	\$ 123,500
Contract Year 3 > more than 90 beds	4 facilities	<u>39,000</u>
Contract Year 3 Total		\$ 162,500

I have enclosed the updated Certificate of Insurance. If you need further documentation or if you have any questions, please contact me at 207.842.8025.

Sincerely,



Olga Gross-Balzano, CPA, PMP
Partner | BDMP Assurance, LLP

Enclosure: Certificate of Insurance

Agreed





SFY 2027 (Year 3)
Nursing Homes Selected for Audit

FASRs (01/01/2021-12/31/2025)

	County	File #	Facility	Chain	# beds	# cost reports	\$
1	Wood	A17	Parkersburg Center	Genesis HealthCare, LLC	66	6	\$9,500.00
2	Harrison	A6	Salem Center	Genesis HealthCare, LLC	88	6	\$9,500.00
3	Logan	L2	Logan Center	Genesis HealthCare, LLC	66	8	\$9,500.00
4	Monongalia	M1	Madison Center	Genesis HealthCare, LLC	62	8	\$9,500.00
5	Kanawha	M4	Marmet Center	Genesis HealthCare, LLC	90	8	\$9,500.00
6	Roane	M7	Miletree Center	Genesis HealthCare, LLC	62	8	\$9,500.00
7	Pocahontas	P6	Pocahontas Center	Genesis HealthCare, LLC	68	8	\$9,500.00
8	Jackson	R1	Ravenswood Center	Genesis HealthCare, LLC	62	8	\$9,500.00
9	Taylor	R4	Rosewood Center	Genesis HealthCare, LLC	69	8	\$9,500.00
10	Jefferson	S10	Shenandoah Center	Genesis HealthCare, LLC	78	6	\$9,500.00
11	Greenbrier	W3	White Sulphur Springs Center	Genesis HealthCare, LLC	68	7	\$9,500.00
12	Barbour	B7	Mansfield Place (Broadus Hospital)	Hospital	60	4	\$9,500.00
13	Buckhannon	S2	St. Joseph's Hospital of Buckhannon, Inc.	Hospital	16	6	\$9,500.00
			CONTRACT YEAR 3 90 beds or less			91	\$123,500.00
14	Kanawha	A2	Dunbar Center	Genesis HealthCare, LLC	120	6	\$9,750.00
15	Raleigh	A4	Pine Lodge Center	Genesis HealthCare, LLC	120	6	\$9,750.00
16	Putnam	A5	Putnam Center	Genesis HealthCare, LLC	120	6	\$9,750.00
17		V2	Valley Center	Genesis HealthCare, LLC	130	6	\$9,750.00
			CONTRACT YEAR 3 > 90 beds			24	\$39,000.00
17			CONTRACT YEAR 3 TOTAL			115	\$162,500.00



Arvin Singh, EdD, MBA, MPH, MS, FACHE
DH Cabinet Secretary



West Virginia
DEPARTMENT OF
Health Facilities

Michael J. Caruso
DHF Cabinet Secretary



WEST VIRGINIA DEPARTMENT OF

**HUMAN
SERVICES**

Alex J. Mayer, MSA, PMP
DoHS Cabinet Secretary

STATE OF WEST VIRGINIA
DEPARTMENTS OF HEALTH, HEALTH FACILITIES, AND HUMAN SERVICES

Office of Shared Administration
Office of Accountability and Management Reporting

June 10, 2026

Heather White
Procurement Specialist
Office of Shared Administration
West Virginia Departments of Health, Health Facilities and Human Services

Dear Ms. White:

This memo is to provide justification for renewing the OAMR contract HHR2500000002 With BDMP Assurance for audits of Financial and Statistical Reports. Per regulation, West Virginia Bureau for Medical Services (WV BMS) is required to provide assurances that State nursing facilities are submitting costs for reimbursement to WV BMS that are allowable. Due to the number of facilities that must be audited, this contract enables the Office of Accountability and Management Reporting to complete the necessary workload of audits in the required timeframes.

Sincerely,

Philip Graham

Director of Audit



COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>Crystal Husted</u> Date: <u>7/20/20</u> Solicitation No. <u>CMA HHR25*02</u>	Agency: WV Office of Shared Administration Procurement Officer Submitting Requisition: Heather White Requisition No. CMA HHR25*2 CO2 PF No.: 1620965
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This checklist **MUST** be completed by a state agency's designated procurement officer and submitted with the Purchase Requisition to the Purchasing Division. The purpose of the checklist is to verify that an agency procurement officer has obtained and included required documentation necessary for the Purchasing Division to process the requisition without future processing disruptions. At the agency's preference, the agency **MUST** either submit the checklist by attaching it to the requisition's Header **OR** by placing it in the requisition's Procurement Folder.

FOR ALL SOLICITATION TYPES:

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	☒	☐	☐	☐
2	Use of correct specification template	☒	☐	☐	☐
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	☒	☐	☐	☐
4	Use of most current terms and conditions (www.state.wv.us/admin/purchase/TCP.pdf)	☒	☐	☐	☐
5	Maximum budgeted amount in wvOASIS	☒	☐	☐	☐
6	Suggested vendors in wvOASIS	☒	☐	☐	☐
7	Capitol Building Commission pre-approval	☐	☐	☐	☐
8	Financing (Governor's Office) pre-approval	☐	☐	☐	☐
9	Fleet Management Division pre-approval	☐	☐	☐	☐

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
10	Insurance requirements				
	Commercial General Liability	☐	☐	☐	☐
	Automobile Liability	☐	☐	☐	☐
	Workers' Compensation/Employer's Liability	☐	☐	☐	☐
	Cyber Liability	☐	☐	☐	☐
	Builder's Risk/Installation Floater	☐	☐	☐	☐
	Professional Liability	☐	☐	☐	☐
	Other (specify)	☐	☐	☐	☐
11	Office of Technology CIO pre-approval	☐	☐	☐	☐
12	Treasurer's Office (banking) pre-approval	☐	☐	☐	☐

FOR CHANGE ORDERS/RENEWALS:

1	Two-party agreement	☒	☒	☐	☒
2	Standard change order language	☒	☒	☐	☒
3	Office of Technology CIO approval	☐	☐	☒	☐
4	Justification for price increases/backdating/other	☐	☒	☐	☐
5	Bond Rider (Construction)	☐	☐	☒	☐
6	Secretary of State Verification	☒	☒	☐	☒
7	State debarment verification	☒	☒	☐	☒
8	Federal debarment verification	☒	☒	☐	☒

*The items pre-checked are required before a Purchase Requisition may be submitted to the Purchasing Division. Failure to complete and verify this documentation may result in rejection of the requisition back to the agency. It is up to the agency procurement officer to determine if pre-approvals, insurance, or other documentation is needed for the purchase. The referenced information below may be used to make this determination.

For Purchasing Division Use Only:

I have reviewed the requisition identified above and find that it is sufficient to advertise publicly to the vendor community. My review does not preclude the possibility that the vendor community, or some other entity, will identify an area of concern; however, should such issues or concerns arise, they will be reviewed and addressed as may be appropriate.

Signature: _____

Christopher Husted



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Jun 26, 2026



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e.g. 1606N020Q02

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Simple Search

Search Editor

- ☐ Any Words 
- ☐ All Words 
- ☐ Exact Phrase 

e.g. 123456789, Smith Corp

"BDMP ASSURANCE LLP" 

Entity

Location

Status

- ☒ Active
- ☐ Inactive

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Entity Information 



All Entity Information

Entities

Disaster Response Registry

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Business Organization Detail

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BDMP ASSURANCE, LLP

Organization Information									
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason	
LLP Limited Liability Partnership	12/20/2024		12/20/2024	Foreign	Profit		12/20/2026		

Organization Information		
Business Purpose		Capital Stock
Charter County		Control Number 9BAFM
Charter State	ME	Excess Acres
At Will Term		Member Managed
At Will Term Years		Par Value
Authorized Shares		Young Entrepreneur Not Specified

Addresses	
Type	Address
Notice of Process Address	URA SERVICES, INC. 5098 WASHINGTON STREET W., SUITE 407 CHARLESTON, WV, 25313
Principal Office Address	2211 CONGRESS STREET PORTLAND, ME, 04102
Type	Address

Officers	
Type	Name/Address
General Partner	TODD J. DESJARDINS
Type	Name/Address

File Your Current Year Annual Report Online Here

For more information, please contact the Secretary of State's Office at 304-558-8000.

Monday, July 20, 2026 — 9:40 AM

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