



The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at wvOASIS.gov. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at WVPurchasing.gov with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header @ 4

List View

General Information Contact Default Values Discount Document Information Clarification Request

Procurement Folder: 1897869

Procurement Type: Central Master Agreement

Vendor ID: VS0000049627

Legal Name: Star Nursing Inc.

Alias/DBA:

Total Bid: \$313,300.00

Response Date: 03/02/2026

Response Time: 15:32

Responded By User ID: StarNursing

First Name: Lindsey

Last Name: Provines

Email: lindsey@starnursing.com

Phone: 9168368432

SO Doc Code: CRFQ

SO Dept: 0403

SO Doc ID: DBS2600000009

Published Date: 2/19/26

Close Date: 3/3/26

Close Time: 13:30

Status: Closed

Solicitation Description: Nursing Services

Total of Header Attachments: 4

Total of All Attachments: 4

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	RN BSN Nursing Services - Day Shift (8:00am - 4:00pm) M-F	200.00000	EA	85.000000	17000.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Day Shift (8:00am - 4:00pm) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	RN BSN Nursing Services - Evening Shift (4:00pm - 12:00am)	200.00000	EA	88.000000	17600.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Evening Shift (4:00pm - 12:00am) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	RN BSN Nursing Services - Overnight (12:00am - 8:00am) M-F	200.00000	EA	88.000000	17600.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Overnight (12:00am - 8:00am) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	RN BSN Weekend Shift up to 12 hours Sat & Sun	200.00000	EA	88.000000	17600.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Weekend Shift (up to 12 hr shift) Saturday & Sunday.
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	RN BSN Nursing Services - Overtime	200.00000	EA	127.500000	25500.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:**Extended Description:**

Nursing Services - Overtime

Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	RN BSN Nursing Services - Holiday	200.00000	EA	132.000000	26400.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:**Extended Description:**

Nursing Services - Holiday

Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
7	RN Nursing Services - Day Shift (8:00am - 4:00pm)	200.00000	EA	76.000000	15200.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:**Extended Description:**

Nursing Services - Day Shift (8:00am - 4:00pm) M-F

Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
8	RN Nursing Services - Evening Shift (4:00pm - 12:00am)	200.00000	EA	79.000000	15800.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:**Extended Description:**

Nursing Services - Evening Shift (4:00pm - 12:00am) M-F

Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	RN Nursing Services - Overnight (12:00am - 8:00am) M-F	200.00000	EA	79.000000	15800.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:**Extended Description:**

Nursing Services - Overnight (12:00am - 8:00am) M-F

Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
10	RN Weekend Shift up to 12 hours Sat & Sun	200.00000	EA	79.000000	15800.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Weekend Shift (up to 12 hr shift) Saturday & Sunday.
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
11	RN Nursing Services - Overtime	200.00000	EA	114.000000	22800.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Overtime
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
12	RN Nursing Services - Holiday	200.00000	EA	118.500000	23700.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Holiday
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
13	LPN Nursing Services - Day Shift (8:00am - 4:00pm)	200.00000	EA	57.000000	11400.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Day Shift (8:00am - 4:00pm) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
14	LPN Nursing Services - Evening Shift (4:00pm - 12:00am)	200.00000	EA	60.000000	12000.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Evening Shift (4:00pm - 12:00am) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
15	LPN Nursing Services - Overnight (12:00am - 8:00am) M-F	200.00000	EA	60.000000	12000.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Overnight (12:00am - 8:00am) M-F
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
16	LPN Weekend Shift up to 12 hours Sat & Sun	200.00000	EA	60.000000	12000.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Weekend Shift (up to 12 hr shift) Saturday & Sunday.
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
17	LPN Nursing Services - Overtime	200.00000	EA	85.500000	17100.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Overtime
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
18	LPN Nursing Services - Holiday	200.00000	EA	90.000000	18000.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Nursing Services - Holiday
Hours are estimated quantities for bidding and evaluation purposes only. Hours are not guaranteed and may be more or less.



Account Summary

[My Account](#)

Primary Account Administrator

Name: Lindsey Provines
Email: lindsey@starnursing.com
Phone: 9168368432

Account Status

Vendor Code: VS0000049627
Vendor Status: Active
1099 Reportable: true

EFT Information

Account Level EFT Status: N/A
Address Level EFT Available: true

Prevent New Spending

Account Level: - not active

Prevent New Orders



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

State of West Virginia
 Centralized Request for Quote
 Medical

Proc Folder: 1897869			Reason for Modification:
Doc Description: Nursing Services			
Proc Type: Central Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	Version
2026-02-09	2026-03-03 13:30	CRFQ 0403 DBS2600000009	1

BID RECEIVING LOCATION

BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR

Vendor Customer Code: VS0000049627

Vendor Name : Star Nursing Inc.

Address : 2795

Street : E Bidwell St. #100-102

City : Folsom

State : CA **Country :** USA **Zip :** 95630

Principal Contact : Kimberly Joens, Senior VP of Operations

Vendor Contact Phone: (877) 687-7399 **Extension:** 106

FOR INFORMATION CONTACT THE BUYER
 James W Atkins
 (304) 558-0094
 james.w.atkins@wv.gov

Vendor Signature X **FEIN#** 20-0652660 **DATE** 2/12/2026

All offers subject to all terms and conditions contained in this solicitation

VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

1. **Application is made for 2.5% vendor preference for the reason checked:**
____ Bidder is an individual resident vendor and has resided continuously in West Virginia, or bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia, for four (4) years immediately preceding the date of this certification; **or**,
____ Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; **or**,
____ Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; **or**,
2. **Application is made for 2.5% vendor preference for the reason checked:**
____ Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; **or**,
3. **Application is made for 2.5% vendor preference for the reason checked:**
____ Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; **or**,
4. **Application is made for 5% vendor preference for the reason checked:**
____ Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; **or**,
5. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
____ Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; **or**,
6. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
____ Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with West Virginia Code §5A-3-59 and West Virginia Code of State Rules.**
____ Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.
8. **Application is made for reciprocal preference.**
____ Bidder is a West Virginia resident and is requesting reciprocal preference to the extent that it applies.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: _____ Signed: _____

Date: _____ Title: _____

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Star Nursing, Inc
Company

Authorized Signature

3/2/2026
Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.