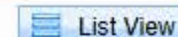




The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency 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 9

 List View

General Information

Contact

Default Values

Discount

Document Information

Clarification Request

Procurement Folder: 2029895

Procurement Type: Central Master Agreement

Vendor ID: VS0000047252 

Legal Name: Saratoga Medical Center, Inc.

Alias/DBA: Saratoga Medical Center, Inc.

Total Bid: \$720,415.50

Response Date: 08/25/2026 

Response Time: 19:03

Responded By User ID: Saratoga22 

First Name: Saleena

Last Name: Sidhu

Email: ssidhu@saratogamed.com

Phone: 917 957 0191

SO Doc Code: CRFQ

SO Dept: 0613

SO Doc ID: VNF2700000001

Published Date: 8/19/26

Close Date: 8/26/26

Close Time: 13:30

Status: Closed

Solicitation Description: Direct Care Staffing Services

Total of Header Attachments: 9

Total of All Attachments: 9



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

State of West Virginia
Solicitation Response

Proc Folder: 2029895
Solicitation Description: Direct Care Staffing Services
Proc Type: Central Master Agreement

Solicitation Closes	Solicitation Response	Version
2026-08-26 13:30	SR 0613 ESR08252600000001378	1

VENDOR
VS0000047252
Saratoga Medical Center, Inc.

Solicitation Number: CRFQ 0613 VNF2700000001
Total Bid: 720415.5 **Response Date:** 2026-08-25 **Response Time:** 19:03:24
Comments:

FOR INFORMATION CONTACT THE BUYER
Jessica L Riley
304-558-0246
jessica.l.riley@wv.gov

Vendor **FEIN#** **DATE**
Signature X

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Direct Care Staffing Services				720415.50

Comm Code	Manufacturer	Specification	Model #
85101601			

Commodity Line Comments:

Extended Description:

Open-end contract for Direct Care Staffing Services

EVIDENCE OF AT LEAST 12 MONTHS OF DIRECT CARE STAFFING EXPERIENCE

SARATOGA ASCEND BEGINNINGS

In 1984, Saratoga Medical Center Inc. (dba Saratoga Ascend) started as a medical staffing company providing healthcare staffing and laboratory testing services for the military. Four decades later, Saratoga Ascend has expanded service to workforce and program management, technology and call center solutions, scientific research, and healthcare support for federal and state agencies.

We recruit and place physicians, nurses, behavioral health professionals, allied health personnel, non-medical case managers, medical assistants, and technical specialists with intensive surge capacity proven through subcontract support on the Defense Health Agency Medical Q-Coded task orders. Our workforce supports healthcare delivery, mission readiness, case management, public health initiatives, research programs, and operational requirements across civilian and defense environments. As customer requirements expanded, we expanded alongside them, investing in the people, processes, and technologies that allow us to deliver integrated solutions instead of individual services.

Today, Saratoga Ascend combines experienced professionals with disciplined program management and technology that improves visibility, accountability, and operational performance. Our capabilities include workforce management, call center operations, AI-enabled workforce technologies, data analytics, scientific and healthcare research, and enterprise program support.

BEGINNINGS

ESTABLISHED 1984

VIRGINIA & NEW YORK

VIRGINIA

NEW YORK

SARATOGA ASCEND

is a woman-owned small business holds the Joint Commission Gold Seal for Quality, Safety, and Compliance in Healthcare Staffing and Services certification.

\$24 MILLION IN ANNUAL REVENUE

SERVING STATES: NY, VA, FL, KS, AZ, CA

SERVING FEDERAL AGENCIES: DHA, DoD, Coast Guard, Navy, Air Force, NIH

JOINT VENTURES:

- Advent Saratoga Joint Venture (ASJV)
- Nomic Federal Health Joint Venture (Nomic)

QUALITY • SAFETY • COMPLIANCE • INTEGRITY • SERVICE

Whether customers need a single provider or an integrated solution spanning multiple disciplines, we deliver responsive support that adapts to changing mission priorities while maintaining continuity, compliance, and quality from contract award through closeout.

SARATOGA MISSION: Ascending federal and state agencies toward better outcomes through innovative workforce, program management, healthcare, and technology solutions grounded in transparency, agility, and battle tested practices.

VALUES: Saratoga operates through communication, trust, honesty, curiosity, dedication, quality, and transparency.

VALUE PROPOSITION: Saratoga delivers Ascended Solutions for better customer outcomes through transparent and compliant practices, innovation and technology, battle-tested execution, organizational agility, and a strong talent and culture foundation. Saratoga prioritizes open communication, honesty, and dedication in every partnership to ensure mission success, accountability, and measurable results for the customers it serves.

Our mission, values, and value proposition align closely with federal and state agency missions to

LEGAL STRUCTURE & REGISTRATION

	COMPANY NAME: Saratoga Medical Center Inc. dba Saratoga Ascend		SAM.GOV: Active and Current
	HEADQUARTERS: 12 E 32nd St, 7th Fl, New York, NY 10016		UEI: HL5LXSGKZXL9
	PHONE NUMBER: 212 – 213 – 2520		CAGE CODE: 01CH8
	WEBSITE: Saratogaascend.com		DUNS NUMBER: 144992658
			FACILITY CLEARANCE: TS-SCI

QUALITY • SAFETY • COMPLIANCE • INTEGRITY • SERVICE

ensure quality,

Legal Structure and Registrations

Saratoga Ascend maintains the corporate registrations, security credentials, and federal acquisition records necessary to support contracts across civilian, defense, and healthcare agencies. Saratoga is CMMC Phase 2 compliant. As an active SAM-registered contractor with a

current Unique Entity Identifier (UEI), CAGE Code, and TS-SCI Facility Clearance, we provide customers with an established contracting foundation that supports rapid contract execution,



B U S I N E S S

CERTIFICATIONS

Trusted credentials that reflect our commitment to quality, compliance, and mission success.

- THE JOINT COMMISSION
GOLD SEAL OF APPROVAL
- WOMAN-OWNED SMALL BUSINESS
(WOSB), SBA CERTIFIED
- VA SWAM
- NATIONAL MINORITY SUPPLIER
DEVELOPMENT COUNCIL (NMSDC)
- JOINT COMMISSION HEALTHCARE
STAFFING CERTIFICATION
- CMMC LEVEL 2 CERTIFIED

**CERTIFIED STANDARDS.
RELIABLE PERFORMANCE.
PROVEN RESULTS.**

regulatory compliance, and secure program delivery. Our headquarters in New York, combined with nationwide operations, enables us to support customers across the United States while maintaining the organizational infrastructure required for complex federal and state programs.

These registrations represent more than administrative requirements. They reflect Saratoga's commitment to maintaining the operational readiness, governance, and accountability expected of a long-term government partner. By sustaining active federal registrations, security credentials, and nationally recognized quality standards, we reduce acquisition risk, streamline onboarding, and provide agencies with confidence that we are prepared to transition quickly from contract award to full operational performance while maintaining compliance, transparency, and continuity throughout the period of performance. We maintain certifications, ever ascending for better outcomes in processes, systems, security, and quality, providing customers with consistent service.

Recruitment and Retention Services

Customers receive premium recruitment and retention services, finding our process often exceeds expectations as we utilize experienced, expert recruiters, reliable tools and AI human-in-the-loop technology. Saratoga Ascend recruits through a multi-channel sourcing model that gives customers continuous access to talent across every labor category we support. We maintain an extensive database of personnel pre-qualified and available for immediate deployment, post positions through ADP Workforce Now with syndication across major online platforms, and run in-house digital marketing campaigns tailored for LinkedIn, Facebook, Instagram, and X, reaching a following that exceeds 22,000. Salesforce Marketing Cloud extends that reach through targeted SMS and email outreach and database filtering that places each opening in front of the candidates who match it, while our recruiters source directly through LinkedIn, Indeed, Reddit, CareerBuilder, and professional networks built over four decades, working each requirement until the position is filled. Candidates with active licensure and relevant experience move first, with qualifications verified prior to interview, and our data tracking tools monitor source-to-hire conversion rates, enabling real-time adjustments that hold fill timelines and maintain efficiency.

Our military-first recruiting philosophy gives preference to Veterans, transitioning Service members, and military spouses whenever qualifications are substantially equal, and we reach them through TRP, Marine for Life, Veteran Service Organizations, military spouse networks, TAP resources, and programs such as Military OneSource. Four decades of Military Treatment Facility support give our recruiters working fluency in Defense Health Agency credentialing and privileging requirements, allowing us to move candidates through credentialing and onboarding quickly. Customers receive qualified candidates within 48 hours when the mission demands it and consistently between 5 and 30 days, sustaining workforce continuity and patient care through every transition. Saratoga Ascend manages 235 deployed Full-Time Equivalents today and has placed more than 635 Full-Time Equivalents over the last five years, scaling through the surge capacity proven on the MQS CONUS task orders as customer requirements expand.

We fill the positions customers find hardest to staff. Our Radiation Oncology support places Medical Physicists, Dosimetrists, and Radiation Therapists at installations including Keesler Air Force Base, Brooke Army Medical Center, located in Fort Sam Houston, drawing on specialty networks and credentialing knowledge developed across years of performance. In scientific and healthcare research, we recruit clinical research coordinators, research associates, laboratory scientists, data managers, and analysts who bring protocol experience and regulatory understanding to research programs from the first day of performance. Our technology recruiting reaches data analysts, systems and application administrators, call center operations staff, and cleared technical specialists, supported by a TS-SCI Facility Clearance for programs requiring cleared personnel. Behavioral health, allied health, and non-medical case management

assignments in remote and hard-to-reach locations receive the same targeted sourcing, giving



customers a single source for requirements that ordinarily span several vendors.

PrecisionMatch, our internally developed recruitment platform, compares candidate resumes against Performance Work Statement requirements with an accuracy rating exceeding 90 percent, and expert recruiters review every result so human judgment governs each submission decision. Working from that shortlist, we conduct detailed resume review, structured recruiter interviews, role-specific skills assessments, reference checks, and credential verification for specialized clinical, scientific, and technical roles, then submit qualified resumes within three business days of a staffing request, formatted or redacted to customer preference. Saratoga Ascend completes background checks at our own expense. Candidates for patient-facing and beneficiary-facing assignments receive additional screening for emotional intelligence, professionalism, communication judgment, and the compassion required to serve wounded, ill, and injured Service members, Veterans, caregivers, and family members through long outreach cycles.

We match every candidate to the role by skill, experience, and work environment fit, which drives reliability and longevity across the assignment. Employees build careers through mentorship, continuing education, and competency training they complete in Healthcare Staffing Hire and Relias, and we cover the credentials and licensure renewals our missions require. We offer incentives where appropriate such as quarterly or annual performance-based bonuses. Our program managers check in on a set schedule, answer employees directly, and settle concerns early, and our leadership listens when a workforce raises a concern at scale, as our team did in the Great Lakes town hall that changed pending contract terms and lifted morale across more

than 60 incoming employees. Our people stay because they see the mission, the support, and the path forward.

Recruitment and Program Management Areas



CLINICAL & MEDICAL STAFFING

DELIVERING QUALIFIED CLINICAL PROFESSIONALS
ACROSS THE CONTINUUM OF CARE.



BEHAVIORAL HEALTH & HUMAN SERVICES

SUPPORTING RESILIENCE, WELLNESS,
AND MISSION READINESS.



PROVIDER NETWORK & CONTACT CENTER OPERATIONS

CONNECTING PATIENTS, PROVIDERS,
AND PROGRAMS THROUGH RESPONSIVE ENGAGEMENT.



IT, CYBERSECURITY & DATA ANALYTICS

TRANSFORMING HEALTHCARE DATA
INTO SECURE OPERATIONAL INSIGHT.



Current Contracts

CONTRACT	SERVICES
DHA Prime, HT0050-18-D-0012	Physician and Ancillary
DHA Subcontract, HT0011-21-C-0014	Healthcare Risk Management
DHA <u>MaxMed</u> Saratoga JV, W81K00-21-C-3001	Therapeutic Medical Physicists
NIH Subcontract, 5N95021D00011	Scientific and Technical Consulting
VA ICSP 36C10X23Q0083 (subcontract)	Medical Staffing



Testimonial

“Saratoga Medical Center flew a team of leadership out to Great Lakes and listened to the legitimate concerns of over 60 future employees in a town hall setting. They took those real concerns back to their HQ and they made changes in the pending contracts that resulted in increased morale within that group of employees immediately. Thank you for listening!”

— M. Gilberts, DDS, Dentist at Great Lakes, IL

Call and Contact Center Operations

Saratoga Ascend operates call center and contact center programs in AWS Amazon Connect, a cloud environment our teams scale from a handful of agents to full program volume within a single business day. Our agents work voice, chat, email, SMS, and web inquiries from one queue, and our supervisors route each contact through interactive voice response, skills-based routing, and escalation workflows built to customer business rules. We hire agents nationwide and onboard them remotely, which supports extended hours, holiday coverage, and surge windows without added facility cost. Customers receive service level reporting, call quality monitoring, and operational dashboards drawn from Amazon Connect and Microsoft Power BI or Tableau throughout the period of performance.

Federal and state customers carry the strictest security requirements we encounter, and we build every contact center to that line. We run our federal and state programs in the AWS GovCloud (US) Regions, where AWS holds FedRAMP High authorization for Amazon Connect covering Controlled Unclassified Information that includes patient records, financial and tax data, and law enforcement data. Amazon Connect operates as a HIPAA eligible service under a Business Associate Agreement, and we encrypt recordings, transcripts, and contact trace records at rest through AWS Key Management Service and in transit through TLS. Our agents authenticate through multi-factor authentication under least privilege role-based access, capture payment and sensitive identifiers through encrypted DTMF, and generate a full audit trail through CloudTrail logging. Saratoga Ascend completes background checks on every agent at our own expense, holds a TS SCI Facility Clearance for cleared requirements, and accommodates accessibility and language access needs on every line we staff. Commercial customers receive this same federal standard, which exceeds the security posture commercial programs require.

Our healthcare and CMS contact center staff answer beneficiary and provider inquiries across eligibility, enrollment, claims status, appeals and grievances intake, appointment scheduling, referral coordination, and prior authorization status. Agents follow customer scripts, privacy protocols, and quality standards on every contact, and they document each interaction in the customer system of record. We place licensed clinicians on the line when a program requires clinical judgment, including nurses for triage level questions, health education outreach, and follow up on care plan adherence. Customers receive first contact resolution rates, abandonment rates, average speed of answer, and quality scores in reporting cycles they define.

Our military health experience carries directly into contact center work. We staff appointment lines, referral management desks, medical readiness outreach, case management follow up, and family member support for Military Treatment Facilities and Service member programs, drawing on the same Defense Health Agency knowledge our recruiters use. Veterans, transitioning Service members, and military spouses hold many of these seats, and they bring cultural fluency that shortens every call. Our agents reach Service members, Veterans, caregivers, and family members through the channel each person prefers, and they log every outreach attempt for continuity across the assigned case team.

Behavioral health lines demand additional discipline, and we build for it. Our behavioral health staff include licensed counselors, social workers, and non-medical case managers who conduct sustained outreach to wounded, ill, and injured Service members, Veterans, caregivers, and family members. We screen every candidate for emotional intelligence, professionalism, communication judgment, active listening, and the compassion these calls require, then train them on documented escalation protocols that move a caller in distress to a licensed clinician or crisis resource through warm transfer. Our supervisors review recorded contacts, coach agents on findings, and hold escalation timelines that customers can audit.

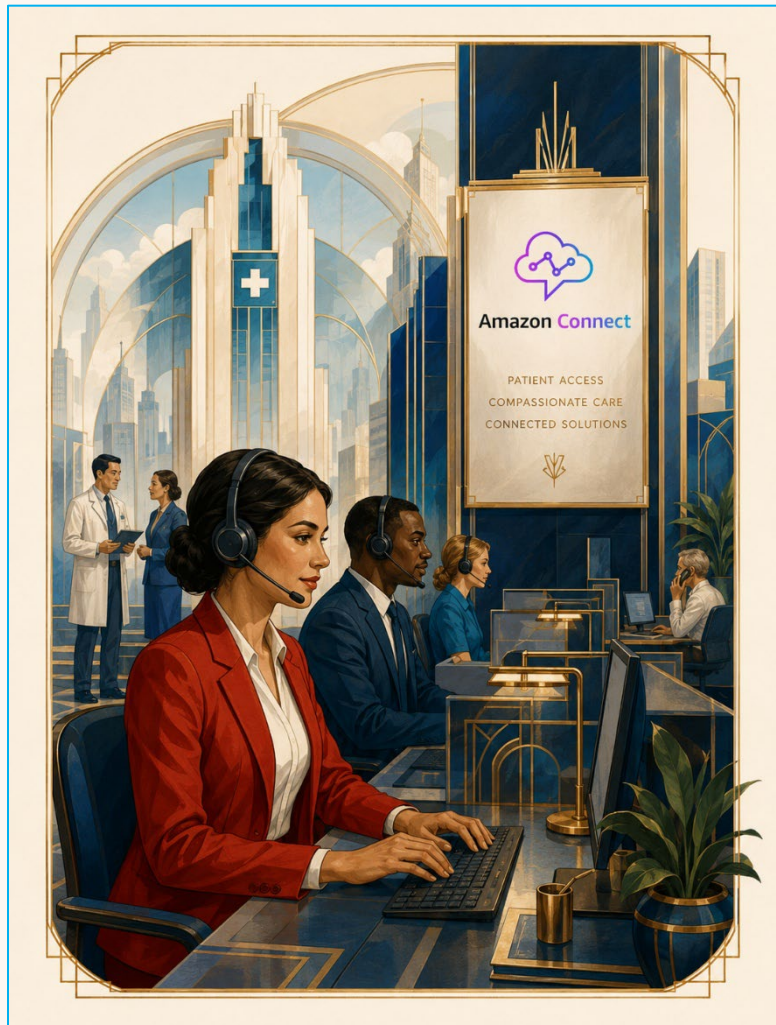


Figure 1. We integrate federally compliant call center solutions with advanced technology capable of integrating with numerous systems as well as human first contact for behavioral health and military support services.

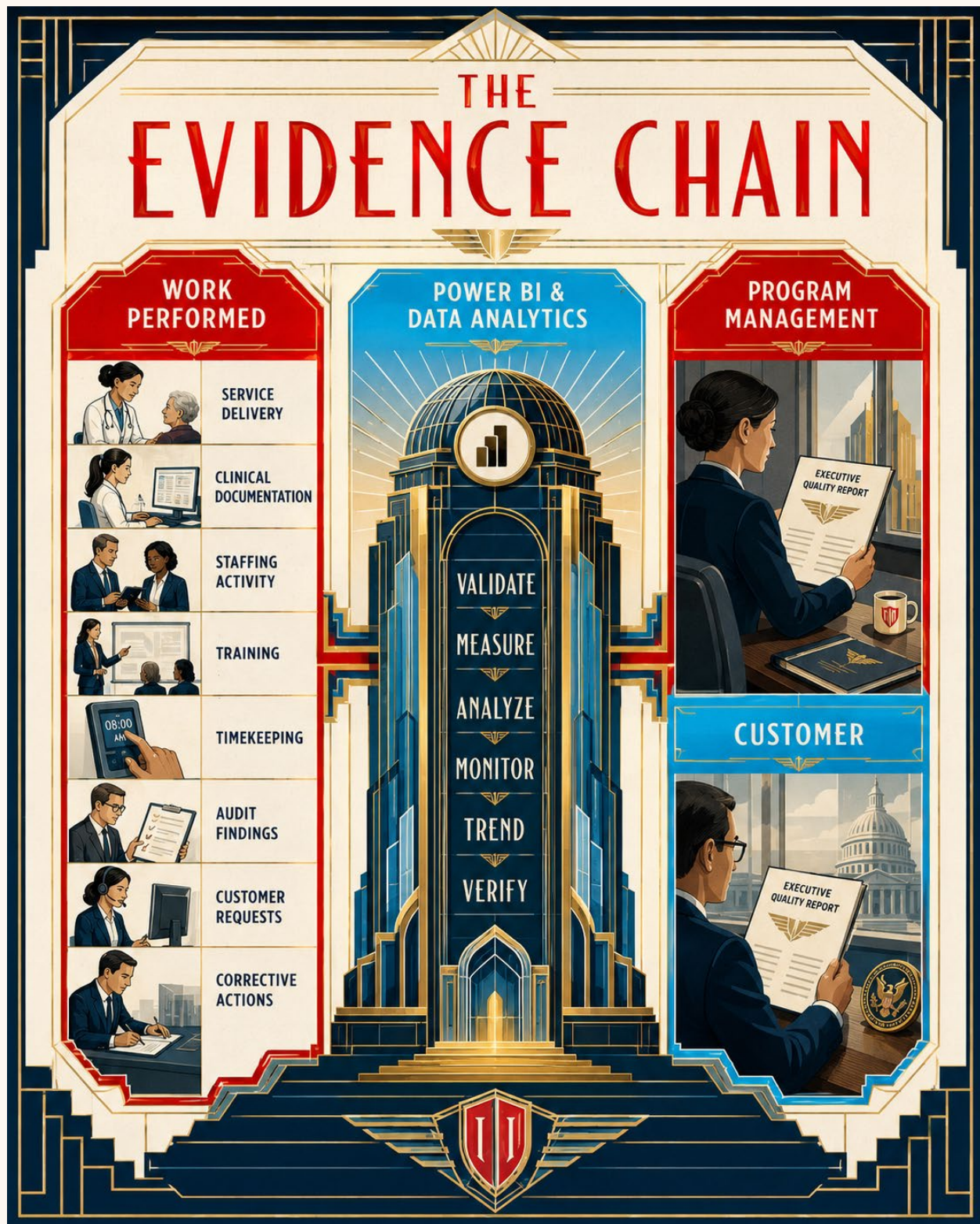
Our technology and program support staff run tier one and tier two help desk services covering password resets, account provisioning, application support, ticket triage, and documented resolution in the customer ticketing system. Our program managers forecast volume, schedule to service level targets, validate attendance and adherence in Connecteam, review contact quality daily, and publish performance in Power BI. For call center, scheduling is done directly in the AWS program. Salesforce CRM connects contact records, work orders, staffing pipelines, and reporting in one operational hub, and Salesforce Government Cloud provides a FedRAMP High authorized environment for regulated federal operations. Customers receive one accountable team delivering visibility, compliance, and continuity from contract award through closeout.

Quality Control and Performance Measurement

Behind every metric we report sits a patient waiting for care, a Service member cleared for duty, or a caller who needs an answer today, and that is the reason we hold quality as tightly as we do. Saratoga Ascend controls quality at three points: the person we hire, the service delivered each day, and the contract as a whole. Our Quality Control Manager performs the audits, sampling, and evidence-based data analytics that hold all three to standard, working from a Quality Control Plan we write before the first employee reports. That plan maps every performance objective to the customer Quality Assurance Surveillance Plan and carries a measurable standard, an acceptable quality level, a monitoring method, and a corrective action path for each objective, built on ISO 9001 quality management methods and the plan, do, check, act discipline that keeps improvement continuous. Customers receive documented evidence of performance from the first month forward, drawn from the record of the work itself.

Quality begins with the people we place, because they carry our name into the customer environment every morning. We hold the Joint Commission Gold Seal in Health Care Staffing Services, and we verify licensure, certification, education, and work history at the primary source before any candidate reaches a customer. Our Quality Control Manager validates competency against the position description and the Performance Work Statement, and every employee completes orientation, role specific competency assessment, and continuing education that keeps their skills current. Supervisors evaluate performance and document observed practice on a defined schedule, and they stay close enough to their people to catch a struggle early and coach through it. We track credential expiration dates and renew ahead of them, keeping every deployed employee current, competent, and confident in the work they do.

Our Quality Control Manager audits every service line on a scheduled cycle, covering medical services, behavioral health services, information technology support, program management, and call center operations. Audits sample service delivery, documentation, staffing activity, training completion, timekeeping, and customer feedback against the standards in the Quality Control Plan, and each sample traces back to a source record the customer can open and read. When an audit surfaces a finding, we treat it as useful information rather than a failure, and we identify the root cause, assign an owner and a due date, correct the condition, and measure again before closing the record, so every closure rests on evidence. Preventive action carries the same discipline, so a lesson learned on one task order reaches every other program we operate. Our leadership reviews findings, trends, and customer feedback in management review, and we bring the difficult items to our customers ourselves.



Our evidence comes from the record of the work. Our Quality Control Manager draws data from customer tools and systems of record, combined with our own operational systems, into Microsoft Power BI dashboards configured for the contract, which turns daily activity into performance evidence rather than a narrative written after the fact. Customers monitor fill rate, time to fill, credential compliance, training completion, documentation timeliness, service delivery against

standard, incident counts, and corrective action closure, and call center programs add average speed of answer, abandonment rate, first contact resolution, and quality monitoring scores. The customer and our team watch the same dashboard at the same time, so both sides work from one set of numbers in every conversation. Every measure carries a threshold, and a metric drifting toward its limit reaches our Quality Control Manager and Program Manager the day it moves, while the fix is still small and the customer feels none of it. Customers receive monthly and quarterly performance reports, ad hoc analysis on request, and standing dashboard access showing quality, compliance, and continuity as the work happens.

Tools and Technology

PrecisionMatch. AI assisted resume evaluation and candidate alignment analysis against Performance Work Statement requirements, with recruiter review of every result.

Salesforce CRM. Central operational hub for recruiting pipeline, task order and work order management, customer engagement, and reporting.

Salesforce Marketing Cloud. Recruitment marketing, targeted SMS and email outreach, database filtering, and workforce engagement campaigns.

ADP Workforce Now. Position posting with syndication across major job boards.

Healthcare Staffing Hire. New hire training and assessment.

Relias. Healthcare compliance training, continuing education, and competency management.

Connecteam. Workforce scheduling, attendance validation, geofenced clock in, and mobile coordination. Real time availability for call ins or surge.

Microsoft Teams. Virtual onboarding, remote interviews, workforce collaboration, and customer coordination.

Slack. Real time staff communication, AI search, and SharePoint access.

ADP. Payroll processing, workforce administration, tax documentation, and benefits coordination.

Unanet. Labor tracking, timekeeping, contract level workforce reporting, and DCAA compliance.

AWS Amazon Connect. Cloud contact center, interactive voice response, escalation workflows, and workforce communications.

Microsoft Power BI. Contract dashboards built from customer systems of record, internal platforms, and the record of work, reviewed by the Quality Control Manager and the COR in real time or on a scheduled cadence.

Salesforce Government Cloud. FedRAMP High authorized operational environment for regulated federal programs.

REQUEST FOR QUOTATION
Type text here

CRFQ VNF27*01

DIRECT CARE STAFFING SERVICES

11. MISCELLANEOUS:

- 11.1. Manager:** Vendors must designate and maintain a primary manager responsible for overseeing Vendor's responsibilities under the Agreement. The manager must be available during normal business hours to address any customer service or other issues related to the agreement. Vendor shall supply its Manager contact information upon request.
- 11.2. Emergency Contact:** Vendors must designate and maintain an emergency contact responsible for any staffing issues that may arise outside of normal business hours. The emergency contact number must be answered or responded to within 2 hours on any given day or time, including weekends or holidays. Vendors shall supply its emergency contact information upon request.

Contract Manager: Saleena Sidhu

Office Manager: Hanny Gomez

Cell Number: (917) 957-0191

Fax Number: N/A

Email Address: ssidhu@saratogamed.com

Exhibit A - Pricing Page
Direct Care Staffing Services

Registered Nurse (RN)

for the time period of:
September 14, 2026 through September 13, 2027

Item No.	Description Of Services	Estimated Hours*	Hourly Rate	Subtotal
1	Weekday Regular Rate	1,950	\$58.89	\$ 114,835.50 -
2	Weekend Regular Rate	750	\$62.61	\$ 46,957.50 -
			Grand Total	\$ 161,793.00 -

*Estimated number of hours is not guaranteed. There may be multiple awards and estimated hours may be dispersed amongst multiple vendors. See the Specifications for additional information.

- Actual number of hours needed will be sent separately, to lowest bidder first, then next lowest, etc.
- Vendor must complete, sign and return this Pricing Page.
- Pertinent Pricing information:
 - Shift Differential - see Section 2.22 (extra \$1 per hour worked between 3:00 p.m. and 7:00 a.m)
 - Weekend - see Section 2.26 (hours between Saturday at 12:01 a.m. and Sunday at midnight)
 - Work Week - see Section 2.27 (the 7 day period beginning Saturday at 12:01 a.m. and ending the following Friday at midnight)
 - Vendor Accessibility - see Section 3.2 (Vendor shall be accessible 24/7, including weekends and holidays)
 - Multiple Awards - see Section 4.1
 - Staff qualifications - see Section 4 (entire section)
 - Unpaid staff training - see Section 4.10.2 (if staff does not work after training, the time in training will not be paid)
 - Holiday Pay - see Section 4.30 (will be 2 times the regular rate for up to 8 hours)
 - Other Important Dates - see Section 4.32 (will be 1.5 times the regular rate for up to 8 hours)
 - Overtime - see Section 4.34 (paid at 1.5 times the regular rate only after 40 hours worked in a work week)

Vendor Information			
Vendor:	Saratoga Medical Center, Inc.	*Printed Name	Saleena Sidhu
Address:	12 East 32nd Street 7th Floor NY,	Title	President
	NY10016	*Signature	<i>Saleena Sidhu</i>
Office Phone:	(212) 213-2520 X 101	*I hereby certify I am authorized by the Vendor to sign this document.	
Cell Phone	(917) 957-0191		
Fax	N/A	Email:	ssidhu@saratogamed.com

Exhibit A - Pricing Page
Direct Care Staffing Services
Licensed Practical Nurse (LPN)

for the time period of:
September 14, 2026 through September 13, 2027

Item No.	Description Of Services	Estimated Hours*	Hourly Rate	Subtotal
1	Weekday Regular Rate	5,500	\$41.52	\$ 228,360.00 -
2	Weekend Regular Rate	2,250	\$45.25	\$ 101,812.50 -
			Grand Total	\$ 330,172.50 -

*Estimated number of hours is not guaranteed. There may be multiple awards and estimated hours may be dispersed amongst multiple vendors. See the Specifications for additional information.

- Actual number of hours needed will be sent separately, to lowest bidder first, then next lowest, etc.
- Vendor must complete, sign and return this Pricing Page.
- Pertinent Pricing information:
 - Shift Differential - see Section 2.22 (extra \$1 per hour worked between 3:00 p.m. and 7:00 a.m)
 - Weekend - see Section 2.26 (hours between Saturday at 12:01 a.m. and Sunday at midnight)
 - Work Week - see Section 2.27 (the 7 day period beginning Saturday at 12:01 a.m. and ending the following Friday at midnight)
 - Vendor Accessibility - see Section 3.2 (Vendor shall be accessible 24/7, including weekends and holidays)
 - Multiple Awards - see Section 4.1
 - Staff qualifications - see Section 4 (entire section)
 - Unpaid staff training - see Section 4.10.2 (if staff does not work after training, the time in training will not be paid)
 - Holiday Pay - see Section 4.30 (will be 2 times the regular rate for up to 8 hours)
 - Other Important Dates - see Section 4.32 (will be 1.5 times the regular rate for up to 8 hours)
 - Overtime - see Section 4.34 (paid at 1.5 times the regular rate only after 40 hours worked in a work week)

Vendor Information			
Vendor:	Saratoga Medical Center, Inc.	*Printed Name	Saleena Sidhu
Address:	12 East 32nd Street 7th Floor NY,	Title	President
	NY10016	*Signature	<i>Saleena Sidhu</i>
Office Phone:	(212) 213-2520 X 101	*I hereby certify I am authorized by the Vendor to sign this document.	
Cell Phone	(917) 957-0191		
Fax	N/A	Email:	ssidhu@saratogamed.com

Exhibit A - Pricing Page
Direct Care Staffing Services
Health Service Worker (HSW)

for the time period of:
September 14, 2026 through September 13, 2027

Item No.	Description Of Services	Estimated Hours*	Hourly Rate	Subtotal
1	Weekday Regular Rate	6,250	\$25.40	\$ 158,750.00 -
2	Weekend Regular Rate	2,500	\$27.88	\$ 69,700.00 -
			Grand Total	\$ 228,450.00 -

*Estimated number of hours is not guaranteed. There may be multiple awards and estimated hours may be dispersed amongst multiple vendors. See the Specifications for additional information.

- Actual number of hours needed will be sent separately, to lowest bidder first, then next lowest, etc.
- Vendor must complete, sign and return this Pricing Page.
- Pertinent Pricing information:
 - Shift Differential - see Section 2.22 (extra \$1 per hour worked between 3:00 p.m. and 7:00 a.m.)
 - Weekend - see Section 2.26 (hours between Saturday at 12:01 a.m. and Sunday at midnight)
 - Work Week - see Section 2.27 (the 7 day period beginning Saturday at 12:01 a.m. and ending the following Friday at midnight)
 - Vendor Accessibility - see Section 3.2 (Vendor shall be accessible 24/7, including weekends and holidays)
 - Multiple Awards - see Section 4.1
 - Staff qualifications - see Section 4 (entire section)
 - Unpaid staff training - see Section 4.10.2 (if staff does not work after training, the time in training will not be paid)
 - Holiday Pay - see Section 4.30 (will be 2 times the regular rate for up to 8 hours)
 - Other Important Dates - see Section 4.32 (will be 1.5 times the regular rate for up to 8 hours)
 - Overtime - see Section 4.34 (paid at 1.5 times the regular rate only after 40 hours worked in a work week)

Vendor Information			
Vendor:	Saratoga Medical Center, Inc.	*Printed Name	Saleena Sidhu
Address:	12 East 32nd Street 7th Floor NY, NY10016	Title	President
Office Phone:	(212) 213-2520 X 101	*Signature	<i>Saleena Sidhu</i>
Cell Phone	(917) 957-0191	*I hereby certify I am authorized by the Vendor to sign this document.	
Fax	N/A	Email:	ssidhu@saratogamed.com



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
CRFQ 0613 VNF2700000001
Shift Coverage & Recruiting Plans

Executive Summary

Company Name	Saratoga Medical (dba Saratoga Ascend)
UEI (Unique Entity ID)	HL5LXSGKZXL9
CAGE Code	01CH8
Address	12 E 32 nd St. 7 th FL, New York, NY 10016 PO Box 220150, Chantilly, VA 20153
Contact Name / Title / Email	Saleena Sidhu, President, ssidhu@saratogamed.com
Telephone	212-213-2520
Business Type	Incorporation
Socio-Economic Categories	Women-owned small business
Certifications	Join Commission Gold Seal for Quality, Safety, and Compliance in Healthcare Staffing and Services
VA SWAM certification	Certification Number: 834586
NMSDC certificate	See attached document; Issued 12/4/25

The West Virginia Veterans Nursing Facility is committed to providing eligible West Virginia Veterans with high-quality, comprehensive long-term care in an environment that recognizes and respects their unique needs and experiences. At its 120-bed Clarksburg facility, including a 20-bed Alzheimer's and dementia care unit, WVVNF carries that mission forward every day through around-the-clock nursing and resident support. Dependable staffing is essential to that mission; the quality and continuity of care residents receive depends on having qualified caregivers in place when and where they are needed.

Saratoga Medical Center, Inc. dba Saratoga Ascend (Saratoga) understands that helping WVVNF fulfill its mission means making sure qualified caregivers are always present when Veterans need them. Reliable staffing is not an administrative outcome; it is what allows medication administration, bedside care, activities-of-daily-living support, resident monitoring, documentation, family communication, dementia-care routines, and emergency response to continue without interruption. WVVNF's operational need is straightforward but critical: maintain safe, continuous resident care with enough qualified RNs, LPNs, and HSWs/CNAs to meet routine, weekend, holiday, call-off, vacation, and changing staffing requirements.

That mission is especially important in an environment where the Facility has reported that approximately **85–90% of its workforce is supplied by staffing agencies**. The reliability of temporary personnel directly affects WVVNF's ability to maintain continuity of care. The Facility has also identified its current staffing challenges plainly: **call-offs, no-call/no-shows, and schedule changes that are not communicated to the Facility**. Saratoga's solution is designed



specifically around those realities—predictable coverage, immediate communication, qualified replacement capacity, and a recruiting pipeline built to sustain the workforce as needs change.

Saratoga is pleased to provide its Shift Coverage Plan and Recruiting Plan in response to **Technical Specifications §3.6.1 and §3.6.2 of CRFQ 0613 VNF2700000001**. Together, the plans operate as one workforce system: recruit for both the schedule and the license; build coverage with redundancy; communicate changes immediately; and maintain replacement capacity before it is needed.

Evidence of at least 12 months staffing experience

Saratoga brings more than 40 years of healthcare staffing experience to this requirement. Founded in 1984 supporting military healthcare missions, Saratoga today manages approximately 235 deployed Full-Time Equivalents (FTEs) and has placed more than 635 FTEs during the past five years. Our recruiting organization supports physicians, nurses, behavioral health professionals, allied health personnel, medical assistants, and other clinical personnel in highly regulated healthcare environments. Saratoga also holds The Joint Commission Gold Seal for Health Care Staffing Services, reflecting established controls for credentialing, competency, workforce quality, and performance improvement.

Our experience is directly relevant to the workforce risks WVVNF must manage. Under Defense Health Agency healthcare programs, Saratoga manages multi-shift CNA and other patient-care workforces, including a 35-FTE CNA workforce at Camp Lejeune and another 66.5-FTE healthcare workforce that includes 38.5 CNAs. At Carl R. Darnall Army Medical Center, Saratoga sustained a CNA workforce for more than five years and expanded it from 33 to 44 FTEs while managing changing requirements, absences, credentialing, schedule changes, surge requirements, and continuity of care. These are the same operational disciplines required to maintain dependable RN, LPN, and HSW/CNA coverage at WVVNF.

Saratoga combines that experience with a scalable recruiting and workforce-management infrastructure. Our multi-channel recruiting model integrates an extensive candidate database; ADP Workforce Now job distribution; recruiter-led sourcing through professional networks and major recruiting platforms; targeted SMS and email campaigns through Salesforce Marketing Cloud; and Saratoga's internally developed PrecisionMatch technology, which aligns candidates to position requirements before expert recruiters make the final submission decision. Patient-facing candidates receive additional screening for professionalism, communication judgment, emotional intelligence, and compassion—qualities particularly important when serving Veterans, residents requiring long-term care, and individuals with Alzheimer's or dementia.

Once personnel enter the workforce, Saratoga's integrated technology and quality controls help turn recruiting into reliable coverage. Salesforce, Connecteam, Healthcare Staffing Hire, Relias, and Power BI provide visibility into recruiting, attendance, training, availability, and performance, while



Saratoga's Program Manager, recruiters, staffing personnel, and Quality Control Manager remain accountable for communication, corrective action, and workforce performance.

Converting Staffing Requirement to Resident-Care Continuity

WVVNF NEED	SARATOGA RESPONSE
DEPENDABLE COVERAGE ACROSS REQUIRED SHIFTS	Three-layer Committed Core / Ready Reserve / Recruiting Surge model
CALL-OFFS, NO-CALL/NO-SHOWS, AND SCHEDULE CHANGES	No Silent Schedule Changes process: communicate immediately while activating replacement coverage
DIFFICULT RN/LPN/CNA RECRUITING ENVIRONMENT	Local-first Clarksburg strategy backed by North-Central WV, statewide, regional, NLC, and national recruiting depth
QUALIFIED STAFF WHO ACTUALLY REPORT AND REMAIN	PrecisionMatch + recruiter review + credential verification + WVVNF-specific Candidate Commitment Gate
WEEKEND, HOLIDAY, VACATION, AND PRN CONTINUITY	Availability confirmed before submission and backup capacity maintained by discipline and shift
CHANGING FUTURE REQUIREMENTS	Continuous pipeline management, performance trending, Quality Control review, and proactive rebalancing of recruiting and reserve capacity

Saratoga's proposed solution does not measure success by the number of resumes submitted. Success means qualified personnel complete the readiness process, commit to the assignment, report when scheduled, remain engaged, and provide WVVNF with dependable coverage as resident-care needs change. Our Shift Coverage and Recruiting Plans describe how Saratoga will translate four decades of healthcare staffing experience, proven military healthcare workforce management, disciplined recruiting, technology-enabled visibility, and closed-loop quality controls into a stable workforce for West Virginia's Veterans.

Our commitment is straightforward: find the right people, confirm the commitment, prepare them correctly, keep them engaged, maintain replacement capacity, and never leave the Facility guessing about the status of its coverage.



SHIFT COVERAGE PLAN

CONTRACT REQUIREMENT - SHIFT COVERAGE PLAN

Specifications §3.6.1: Plan for coverage of all shifts requested including weekends, holidays, call offs, and vacations.
Addendum No. 1 Q&A Q130 repeats this requirement verbatim.

1. Understanding the Coverage Mission

RFP / Q&A Alignment: Specifications §3.6.1; Addendum No. 1 Q&A Q8, Q14, and Q130.

At WVNVF, agency staffing reliability directly affects continuity of care across a 120-bed, 24/7 environment, including specialized Alzheimer's and dementia care. With approximately 85–90% of the workforce supplied by staffing agencies, missed or uncommunicated shifts create immediate operational risk for bedside care, medication administration, resident monitoring, documentation, and other functions that cannot be postponed.

The Facility has identified its present concerns plainly: call-offs, no-call/no-shows, and schedule changes that are not communicated to the Facility. Saratoga Ascend has designed its coverage approach around three objectives: predictable coverage, immediate communication, and built-in replacement capacity.

Saratoga brings directly relevant experience managing this workforce risk. Under Defense Health Agency healthcare contracts, Saratoga manages multi-shift CNA and other healthcare workforces at Camp Lejeune; and at Carl R. Darnall Army Medical Center CAN, we have sustained a workforce for more than five years and expanded it from 33 to 44 FTEs. Saratoga currently manages 235 deployed FTEs, has placed more than 635 FTEs over the last five years, and applies Joint Commission Gold Seal staffing controls for qualification, competency, credential currency, performance monitoring, and corrective action.

How Saratoga turns experience into coverage: Saratoga combines experienced program management with an integrated recruiting and workforce-management stack. The technology supports - rather than replaces - accountable human decision-making, allowing the team to see candidate status, employee availability, attendance risk, training readiness, and emerging coverage gaps before they become resident-care disruptions.

2. Saratoga's Three-Layer Coverage Model

RFP / Q&A Alignment: Specifications §3.6.1 and §4.16; Addendum No. 1 §4.28; Q&A Q57-Q58 and Q132.

Saratoga maintains three layers of workforce capacity to support the number and mix of personnel WVNVF requests while preserving backup depth. Saratoga's Ready Reserve provides qualified backup personnel for rapid replacement when planned staff become unavailable.

For every requested shift, Saratoga works to provide an RN, LPN, or HSW/CNA who has been properly qualified, has committed to the schedule, completes required orientation, reports when expected, communicates appropriately, and can become a reliable part of the WVNVF care environment.



Coverage Layer	Purpose	WVNF Application
Committed Core	Personnel who have accepted a specific monthly or term schedule	Primary RN, LPN and HSW/CNA personnel committed to scheduled shifts, including required weekends and holidays
Ready Reserve	Qualified PRN and backup personnel available when planned staff become unavailable	Replacement capacity organized by discipline, day/night availability, orientation status and weekend/holiday availability
Recruiting Surge	Continuously refreshed candidate pipeline	Replenishes the reserve, supports increased demand, replaces attrition and provides candidates for new PRN or term requirements

Saratoga's Ready Reserve functions as an operational replacement factor so predictable workforce variability does not automatically become an uncovered resident-care shift.

Our approach incorporates an important principle from VA nursing staffing methodology: a reliable staffing plan must account for replacement needs, not merely baseline staffing. Staff will inevitably take leave, become ill, change availability, or leave employment.

Saratoga Coverage Control Loop

1. Receive Need	2. Match & Confirm	3. Deploy & Monitor	4. Respond to Exception	5. Learn & Rebalance
WVNF monthly request or term need	Committed Core + Ready Reserve matched by discipline/shift	Facility schedules; Saratoga tracks internal availability and readiness	Immediate communication + Ready Reserve activation	Performance data adjusts reserve depth and recruiting focus

3. Monthly Schedule Coverage

RFP / Q&A Alignment: Specifications §3.6.1 and §5.1; Addendum No. 1 Q&A Q44, Q97-Q98, and Q132.

When WVNF provides its anticipated monthly staffing requirement, Saratoga will immediately review the request by discipline, shift, day/night requirement, weekend and holiday requirement, and PRN versus term status.

Within the Facility's required 24-hour response period, our staffing team will crosswalk the requested schedule against the Committed Core and Ready Reserve. Personnel availability will be reconfirmed before Saratoga identifies them as available to the Facility. Saratoga will not equate an unanswered message or an old availability record with a commitment to work.

The Facility will retain scheduling authority as required by the solicitation. Saratoga's role is to ensure that the people identified as available have affirmatively committed to the applicable scheduling conditions and that sufficient backup capacity is maintained behind the primary roster.

Saratoga will track assignments centrally and monitor upcoming scheduled work, PRN participation, orientation status and staff availability throughout the month rather than waiting for the next staffing request to identify developing gaps.



Technology-Enabled Coverage Control

WVNF remains the scheduling authority and its platform remains the Facility system of record. Saratoga uses the tools below internally to strengthen response speed, attendance visibility, workforce communication, and quality control.

Operational Need	Saratoga Process / Tool	Value to WVNF
Candidate and workforce pipeline	Salesforce CRM centralizes recruiting status, employee availability, work-order activity, and customer engagement.	Current view of who is available, committed, onboarding, active, or at risk.
Attendance, backfill, and escalation	Connecteam supports attendance validation, geofenced clock-in, mobile coordination, and real-time employee availability for call-ins or surge. Saratoga uses direct phone/SMS and defined escalation contacts for workforce communication, while following the Facility's scheduling and after-hours contact process.	Earlier exception visibility, rapid backup activation, and documented communication without displacing the Facility's scheduling authority.
Training and competency readiness	Healthcare Staffing Hire and Relias support new-hire assessment, healthcare compliance training, continuing education, and competency management.	Better assurance that personnel remain training-ready and qualified for patient-facing work.
Performance visibility	Power BI converts approved internal and customer data into operational dashboards reviewed on an agreed cadence.	Trend visibility for fill performance, call-offs, replacement response, orientation completion, and retention.

4. No Silent Schedule Changes

RFP / Q&A Alignment: Specifications §3.6.1 and §4.15.5; Addendum No. 1 Q&A Q8, Q57, Q138, and Q143.

The most important attendance rule in Saratoga's WVNF program will be straightforward:

The Facility should never discover after the fact that a Saratoga employee changed his or her schedule.

Saratoga will train every assigned employee on the Facility's attendance and notification requirements before placement. When a Saratoga worker reports a potential absence or change, Saratoga will promptly communicate with the DON, ADON and/or Facility scheduler through the designated communication channel and begin replacement outreach as appropriate.

A call-off initiates two activities at the same time: communication and coverage. Saratoga does not wait until a replacement is located before telling the Facility that a problem exists.

For an unexpected same-day opening, Saratoga recognizes that the solicitation expressly exempts call-off, same-day and emergency coverage from the normal two-hour advance staffing standard. Saratoga will activate available Ready Reserve personnel immediately and cooperate with Facility personnel, who



may also contact available workers directly. The Facility will know the status of Saratoga's replacement effort rather than operating without information.

No-call/no-show events will be documented and escalated internally. Repeated attendance failures will result in corrective action and, where appropriate and consistent with contract and employment requirements, removal from the active WVVNF roster and replacement with a more reliable worker.

5. Weekend, Holiday, Vacation and PRN Coverage

RFP / Q&A Alignment: Specifications §3.6.1; Addendum No. 1 §§4.27, 4.28, and 4.30; Q&A Q39, Q58, Q132, Q138-Q139.

Saratoga will treat weekend and holiday availability as a recruiting qualification, not a scheduling problem to solve after a candidate is hired.

Before a worker is submitted for WVVNF, Saratoga will explain and confirm the amended scheduling requirements. Day-shift personnel must be able to work two complete Saturday/Sunday weekends per month and at least one additional Friday day shift. Night-shift personnel must be able to work two complete Friday/Saturday weekends per month and one additional Sunday night shift.

The six designated holidays and applicable holiday conditions will be discussed before the worker accepts the assignment. Vacation plans or known periods of unavailability will be captured during schedule confirmation so the Ready Reserve can be planned before the absence becomes a vacancy.

Saratoga will also track the requirement that PRN personnel work at least three days during each 30-day period to remain eligible for PRN status. PRN workers will represent a genuinely active reserve rather than a database of individuals who are no longer participating at the Facility.

Saratoga will also track weekend make-up obligations when a worker calls off a required weekend day, so the next scheduling cycle reflects any additional weekend day, or days required by the Facility. The Q&A further clarifies that PRN personnel working two or more days per week are expected to participate in weekend and holiday coverage. These obligations will be visible in Saratoga's internal availability records before personnel are offered for the next schedule.

For longer-duration needs, Saratoga will use the term-contract option authorized by the State, including typical 13-week assignments, generally at least 36 hours per week, when appropriate and agreed by the Facility. A deliberate mixture of committed term staff and active PRN staff provides greater stability than attempting to operate an agency-dependent facility through per-diem recruiting alone.

6. Orientation Is Part of Coverage

RFP / Q&A Alignment: Addendum No. 1 §§4.10.2-4.10.3; Q&A Q2, Q47, Q101-Q102.

For WVVNF, a recruited candidate does not become usable coverage until orientation is completed and the employee demonstrates reliable attendance. Saratoga classifies candidates as orientation-ready before they are scheduled for Facility training.

Candidates will receive the complete orientation commitment before acceptance, including the classroom schedule, five 12-hour floor-orientation shifts and subsequent work expectations applicable to the position. Saratoga will verify the candidate's availability for the complete orientation period and reinforce that call-offs during classroom and floor orientation are not acceptable except under the limited circumstances identified by the Facility.



Most importantly, Saratoga will plan the employee's first post-orientation work before training is completed so the employee can satisfy the requirement to work at least 24 hours within the following 10 days. This reduces both coverage risk to WVVNF and avoidable orientation expense.

Orientation attendance, floor progression, post-orientation work and candidate withdrawals will be tracked. If a candidate disengages, Saratoga will not restart the process from zero; the Recruiting Surge pipeline will already contain the next qualified candidates.

7. Communication and Accountability

RFP / Q&A Alignment: Specifications §3.6.1; Addendum No. 1 Q&A Q8, Q18, Q44, and Q143.

Saratoga will provide WVVNF with one clearly identified primary contact and the required backup/escalation support. Routine communication will be coordinated with the DON, ADON and/or scheduler in accordance with the Facility's preferred process.

Schedule confirmations, known absences, call-offs, replacement activity and unresolved coverage issues will be communicated promptly. Saratoga's centralized workforce-management process will retain the history necessary to identify repeated attendance problems, high-risk shifts and emerging staffing patterns.

Saratoga will align this process to the Facility's stated operating practice: WVVNF does not typically issue after-hours emergency requests to staffing agencies and may contact available staff members directly for call-offs, no-call/no-shows, or open same-day spots. Saratoga will maintain its designated escalation path and internal workforce visibility so that, whenever Saratoga is contacted or becomes aware of an exception, the Facility receives a prompt, accurate status and Saratoga can support replacement activity without creating conflicting scheduling instructions.

This creates accountability on both sides of the staffing relationship: WVVNF has visibility into the status of requested coverage, and Saratoga has the data necessary to take action before a recurring problem becomes a chronic vacancy.

Closed-Loop Quality and Corrective Action

Saratoga will apply its performance-driven Quality Control and Continuity approach as a closed loop: detect the exception, document what occurred, restore coverage, identify the cause, implement corrective action, and verify that the issue does not recur. Saratoga's Quality Control Manager uses a Quality Control Plan and Plan-Do-Check-Act discipline to connect measurable standards, monitoring methods, corrective actions, and follow-up verification. Repeated call-offs, no-call/no-shows, late notifications, credential delays, and orientation failures will therefore be treated as trends to prevent - not isolated events to explain after the fact. The Program Manager and Quality Control Manager will use operating data and employee feedback to determine whether corrective action belongs in scheduling, recruiting, onboarding, coaching, credential management, or reserve staffing.

8. Coverage for the Future State

RFP / Q&A Alignment: Specifications §3.6.1 and §5.1; Addendum No. 1 Q&A Q42, Q62, Q97, and Q132.

Saratoga's Shift Coverage Plan is a living plan, not a static headcount.

Resident census, acuity, leave, illness, turnover, labor-market conditions, and the mix of PRN and term requirements will change during the initial year and any renewal periods.



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
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Shift Coverage & Recruiting Plans

Saratoga will review fill performance, call-offs/no-call-no-shows, same-day openings, weekend and holiday gaps, turnover, PRN eligibility, and demand by discipline. Salesforce and Power BI will use approved internal and Facility-provided data to identify changes in demand, attendance, and retention early enough to adjust coverage.

Those trends will drive action: Saratoga will rebalance Ready Reserve depth, recruiting focus, term assignments, and sourcing geography before coverage deteriorates. The result is a resilient plan that anticipates change and maintains backup capacity before resident-care schedules are at risk.



RECRUITING PLAN

CONTRACT REQUIREMENT - RECRUITING PLAN

Specifications §3.6.2: Recruiting plan detailing how vendors plan to recruit nursing staff in the Clarksburg, WV area. Addendum No. 1 Q&A Q54 confirms no specified format and that the plan is part of bid responsiveness; Q73-Q74 confirm no local office or existing local candidate pool is required.

1. Recruiting Objective: Recruit for the Schedule, Not Just the License

RFP / Q&A Alignment: Specifications §3.6.2; Addendum No. 1 Q&A Q54, Q73-Q74, and Q130.

Saratoga Ascend's recruiting objective for the West Virginia Veterans Nursing Facility is to create and continuously replenish a dependable workforce of qualified RNs, LPNs and HSWs/CNAs who are prepared for the actual working conditions of this Facility.

A candidate is not successful merely because the individual has the correct credential. For WVVNF, the right candidate must also be willing and able to work 12-hour shifts, meet weekend and holiday requirements, complete the Facility's substantial orientation process, maintain PRN eligibility when applicable, report reliably, communicate schedule changes appropriately, and provide respectful direct care to veterans in a long-term-care environment.

That distinction matters because WVVNF has already identified its principal workforce problems as call-offs, no-call/no-shows and uncommunicated schedule changes. Saratoga will recruit for reliability and assignment fit from the first candidate conversation rather than discovering availability conflicts after placement.

Mission-aligned recruiting: Saratoga was built supporting military and federal healthcare missions and has recruited healthcare personnel for more than four decades. When qualifications are substantially equal, Saratoga's military-first recruiting philosophy gives preference to Veterans, transitioning Service members, and military spouses. That mission orientation is particularly relevant to a home serving West Virginia Veterans, while every submission remains qualification-, reliability-, and assignment-fit driven.

2. Recruiting for a Tight North-Central West Virginia Labor Market

RFP / Q&A Alignment: Specifications §3.6.2; Addendum No. 1 Q&A Q54 and Q73-Q74.

Saratoga recognizes that WVVNF is recruiting within a genuinely competitive healthcare labor market. West Virginia continues to experience nursing workforce constraints driven by replacement demand, retirements and continued healthcare hiring. The Clarksburg facility also competes for healthcare talent with hospitals, long-term-care providers and the adjoining Louis A. Johnson VA Medical Center. At the same time, North-Central West Virginia has valuable nursing education infrastructure that can form part of a sustainable long-term recruiting pipeline.

The labor market is difficult. West Virginia reports that nearly one-third of licensed nurses are over 50 and projects roughly **1,500 RN openings annually** through 2030 from growth and replacement needs. In July 2026, the State announced new funding specifically for "critical healthcare workforce shortages" and said rural providers frequently rely on temporary agencies for critical positions.



Saratoga will use a local-first, regionally expandable recruiting strategy rather than relying exclusively on either local advertisements or costly traveler recruitment.

Recruiting Tier	Target Market	Strategy
Tier 1 - Local	Clarksburg, Bridgeport, Harrison County and immediate surrounding communities	Direct sourcing, referrals, former applicants, qualified local healthcare workers and local education/workforce outreach
Tier 2 - North-Central WV	Fairmont, Morgantown and surrounding counties	Expanded RN/LPN/CNA sourcing and alumni/program outreach
Tier 3 - Statewide WV	Qualified personnel throughout West Virginia	Digital recruiting, referral campaigns, direct sourcing and re-engagement
Tier 4 - Regional/NLC	Nurses holding qualifying multistate licenses and regional/travel personnel	Used to strengthen hard-to-fill shifts and term assignments when local supply is insufficient

The State has expressly permitted recruiting from any location, and valid multistate Nurse Licensure Compact credentials expand the potential RN/LPN labor pool. Saratoga will use that flexibility strategically while continuing to prioritize personnel who can sustain the assignment economically and reliably.

Saratoga Multi-Channel Recruiting Engine

The geographic tiers define where Saratoga recruits; the channels below define how Saratoga reaches those candidates. Recruiters work each requirement continuously until qualified, committed personnel are identified.

Channel	How Saratoga Uses It for WVVNF
Pre-qualified internal talent database	Re-engages healthcare professionals already known to Saratoga and filters by discipline, licensure, experience, location, and availability.
ADP Workforce Now	Posts openings with syndication across major online platforms to create broad market reach.
Digital recruiting campaigns	In-house campaigns across LinkedIn, Facebook, Instagram, and X, supported by an audience exceeding 22,000 followers.
Salesforce Marketing Cloud	Targets matching candidates through segmented SMS and email outreach rather than relying only on passive job postings.
Recruiter-led direct sourcing	Direct outreach through LinkedIn, Indeed, CareerBuilder, Reddit, professional networks, referrals, and four decades of candidate relationships.



Channel	How Saratoga Uses It for WVVNF
Military and Veteran networks	Where appropriate, reaches Veterans, transitioning Service members, and military spouses through TRP, Marine for Life, Veteran Service Organizations, TAP resources, Military OneSource, and related networks.

3. Build a Local Pipeline, Not Just a Local Job Posting

RFP / Q&A Alignment: Specifications §3.6.2; Addendum No. 1 Q&A Q3, Q65-Q67, and Q73-Q74.

Saratoga will develop recruiting outreach around the actual healthcare education infrastructure surrounding WVVNF. United Technical Center in Clarksburg operates a 12-month Practical Nursing program as well as therapeutic-services/health-occupation training that includes CNA preparation. Fairmont State's College of Nursing provides ASN, LPN-to-ASN and BSN pathways and reports strong employment outcomes. WVU's Morgantown nursing programs add another significant North-Central West Virginia pipeline.

Saratoga will pursue outreach to appropriate programs, alumni networks, career resources and eligible graduates who meet WVVNF qualification requirements. No existing institutional partnership is represented by this plan; these are targeted recruiting channels Saratoga will develop specifically for WVVNF.

Experienced clinicians remain the primary source for near-term coverage, while relationships with regional training programs will build a sustainable longer-term West Virginia talent pipeline.

Following award, Saratoga will also pursue qualified incumbent personnel who wish to continue serving WVVNF where permitted. The State has specifically confirmed that existing agency personnel may transition to a successful new vendor. Retaining qualified workers who already understand the Facility can preserve institutional knowledge and reduce unnecessary disruption for residents.

Because subcontracting is prohibited, all personnel supplied under Saratoga's contract will remain under Saratoga's direct recruiting, employment, credentialing and performance accountability.

4. Candidate Commitment Gate

RFP / Q&A Alignment: Specifications §§4.5-4.7 and §3.6.2; Addendum No. 1 §§4.10.2-4.10.3, 4.27-4.28; Q&A Q55-Q56 and Q140-Q141.

Human-in-the-Loop Candidate Matching and Screening

Saratoga uses **PrecisionMatch**, its internally developed AI-assisted resume evaluation platform, to compare candidate experience against contract requirements. The platform reports alignment accuracy above 90 percent, but it does not make the submission decision: **an experienced recruiter reviews every match and applies human judgment before a candidate advances.**



Source	Match	Verify	Commit	Onboard & Retain
Multi-channel pipeline	PrecisionMatch + recruiter review	Resume, structured interview, references, credentials, role-specific screening	WVVNF schedule / orientation / transportation / weekend and holiday commitment	Background, training, competency, check-ins, performance monitoring

Every candidate will pass through an assignment-specific commitment review before submission. The review will validate the appropriate license or CNA status, relevant direct-care work history, required credentials, ability to satisfy WVCARES and Facility onboarding requirements, reliable transportation, 12-hour-shift availability, weekend and holiday availability, orientation availability, and willingness to comply with the Facility's attendance and communication rules.

Consistent with Saratoga's healthcare staffing quality controls, required licenses, certifications, education, and work history are verified at the primary source before a candidate is released for placement. Credential expiration dates are tracked so personnel with expired, incomplete, or unverifiable requirements are not scheduled. This pre-scheduling qualification gate reflects the discipline behind Saratoga's awarded **Joint Commission Gold Seal for Health Care Staffing Services** and reduces the risk that a staffing need is lost late in onboarding because a required qualification cannot be validated.

For patient-facing assignments, Saratoga also screens for professionalism, communication judgment, emotional intelligence, and compassion. This is particularly important in a Veterans nursing home and dementia-care environment, where resident trust, patience, dignity, and consistent communication matter alongside clinical qualifications. Saratoga completes required background checks at its own expense and will coordinate WVVNF-specific WVCARES and onboarding requirements at the appropriate post-award stage.

For nurses, recruiting will include both West Virginia license holders and appropriately licensed Nurse Licensure Compact candidates permitted to practice in West Virginia. For HSW requirements, Saratoga will recruit personnel meeting the Facility's CNA requirement rather than treating HSW as a generic unlicensed direct-care classification.

Candidates will also be informed up front of CPR, food-handler, health-screening, immunization and other required documentation so credential completion does not become a last-minute barrier after selection.

The recruiter will specifically ask the questions that matter operationally: Can you work the required weekends? Can you commit to the complete orientation? Can you work at least 24 hours during the 10 days following orientation? Can you reliably get to Clarksburg for every committed shift? Are there known schedule conflicts we need to resolve now rather than after you are placed?

This screening is Saratoga's first defense against the attendance problems WVVNF is seeking to correct.



5. Discipline-Specific Recruiting

RFP / Q&A Alignment: Specifications §3.6.2 and required RN/LPN/HSW staffing scope; Addendum No. 1 Q&A Q15, Q27, Q30, Q70, and Q73-Q74.

The recruiting strategy will reflect the different supply conditions and volume needs of each discipline rather than treating all three labor categories identically.

For HSW/CNA, Saratoga will emphasize Clarksburg and North-Central West Virginia sourcing, long-term-care and direct-care experience, local education pipelines, former employees, referrals and qualified institutional-care workers. This is particularly important because HSW/CNA represents a high-volume component of the Facility's expected staffing mix and requires a workforce able to sustain physically demanding 12-hour direct-care shifts.

For LPNs, Saratoga will combine local program outreach and experienced local direct-care sourcing with statewide recruiting. United Technical Center's Clarksburg LPN program provides a particularly relevant long-term pipeline, while experienced LPNs working across nursing homes, rehabilitation, institutional healthcare and other direct-care environments form the immediate recruiting target.

For RNs, Saratoga will broaden the search earlier. West Virginia-licensed RNs will be supplemented by nurses holding qualifying multistate compact licenses, regional healthcare candidates and term-contract candidates when appropriate. The objective is to avoid exhausting a small local RN market before expanding the search.

6. Orientation-to-Assignment Recruiting

RFP / Q&A Alignment: Specifications §3.6.2; Addendum No. 1 §§4.10.2-4.10.3; Q&A Q2, Q47, Q101-Q102.

Building on the Candidate Commitment Gate, Saratoga will treat orientation as part of recruiting rather than a separate post-recruiting step. Before orientation, the recruiter will reconfirm the candidate's schedule and intent to work at WVVNF; during orientation, reminders and attendance confirmation will continue; and after orientation, the team will coordinate the employee's transition into productive assignments so the 24-hours-within-10-days requirement is met.

A candidate who withdraws, repeatedly delays documentation, misses required activities or demonstrates unreliable communication will trigger immediate review before Saratoga invests additional Facility or corporate resources in that placement.

The result is a pipeline of candidates selected not only to start but to stay and work.

7. Retention Is Part of Recruiting

RFP / Q&A Alignment: Specifications §3.6.2 and §3.6.1; Addendum No. 1 §4.28; Q&A Q139 and Q132.

In a market where qualified nurses and CNAs have multiple employers competing for them, continually replacing departing staff is neither an efficient recruiting model nor a sound resident-care strategy.

Saratoga will maintain regular contact with assigned employees to identify scheduling conflicts, payroll questions, workload concerns and potential attrition early. Attendance trends will be reviewed alongside employee engagement. Personnel who prefer predictable schedules may be better suited to term assignments; others may provide greater value as active PRN staff. Aligning the assignment with the worker's actual availability reduces avoidable turnover.



Saratoga reinforces retention through scheduled Program Manager check-ins, mentorship and continuing education, competency training through Healthcare Staffing Hire and Relias, and support for required licensure or credential renewals. Where appropriate, performance-based incentives can reinforce reliability and longevity. The operating principle is early intervention: resolve a payroll, scheduling, training, or assignment-fit concern while it is still a solvable employee issue rather than after it becomes a resignation or missed shift.

Retention also has a resident-care benefit. In a veterans nursing home-and particularly within specialized dementia care-greater workforce continuity gives staff more opportunity to understand Facility routines, resident preferences and operating expectations instead of repeatedly restarting the learning curve with new personnel.

8. Recruiting for Future Needs

RFP / Q&A Alignment: Specifications §3.6.2; Addendum No. 1 Q&A Q42, Q62, Q73-Q74, Q97, and Q132.

Saratoga will not assume that the labor market or the recruiting channels that work at contract start will remain equally effective throughout performance.

Saratoga will monitor candidate flow by discipline, time to identify qualified personnel, acceptance, credential readiness, orientation conversion, retention, and hard-to-fill roles. Source-to-hire conversion data will show which channels and geographies produce qualified, reliable WVVNF employees, allowing Saratoga to increase investment in strong sources and adjust underperforming campaigns in real time.

If the local LPN pipeline weakens, Saratoga will widen the sourcing radius; if HSW/CNA turnover rises, recruiters will reassess candidate and assignment fit; if term assignments improve continuity, Saratoga will deepen that pipeline; and if RN supply tightens, additional compact-state recruiting will be activated before vacancies become critical.

This future-state approach uses the same integrated recruiting, credentialing, and workforce-management discipline Saratoga applies across mission-critical federal healthcare programs and difficult-to-fill or remote clinical requirements. For WVVNF, those enterprise capabilities will remain focused on three labor categories—RN, LPN, and HSW/CNA—and on the specific reliability conditions that sustain resident-care continuity in Clarksburg.

Saratoga will bring that same operating discipline to Clarksburg with a much narrower mission focus:

Find the right people. Confirm the commitment. Prepare them correctly. Keep them engaged. Maintain replacements before they are needed. And give West Virginia's veterans home residents a workforce on whom they can depend.



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
CRFQ 0613 VNF2700000001
Shift Coverage & Recruiting Plans

Appendix

CERTIFICATE OF DISTINCTION

has been awarded to

Saratoga Medical Center
New York, NY

for
Health Care Staffing
by



The Joint Commission
based on a review of compliance with national standards.

July 23, 2025

Certification is customarily valid for up to 24 months.


Michael Suk, MD, JD, MPH, MBA, FACS
Chair, Board of Commissioners

ID #681039
Print/Reprint Date: 07/23/2025


Jonathan B. Perlis, MD, PhD, MSHA, MACP, FACMI
President and Chief Executive Officer

The Joint Commission is an independent, not-for-profit national body that oversees the safety and quality of health care and other services provided in certified organizations. Information about certified organizations may be provided directly to The Joint Commission at 1-800-994-6610. Information regarding certification and the certification performance of individual organizations can be obtained through The Joint Commission's web site at www.jointcommission.org.



This reproduction of the original certification certificate has been issued for use in regulatory/payer agency verification of certification.



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
CRFQ 0613 VNF2700000001
Shift Coverage & Recruiting Plans



U.S. Small Business
Administration

www.sba.gov/wosbready

Women Owned Small Business Federal Contract Program | 409 Third St. SW | Washington, DC 20416

5/2/2024

Jaskiran Sidhu
SARATOGA MEDICAL CENTER, INC.
11094 LEE HWY STE D103
FAIRFAX, VA

Dear Jaskiran Sidhu:

Congratulations! The U.S. Small Business Administration (SBA) has certified your firm as a Women-Owned Small Business (WOSB) eligible to participate in the Women-Owned Small Business Federal Contract Program (WOSB Program), as set forth in Title 13, Part 127 of the Code of Federal Regulations (CFR).

Your certification is valid for three years from the date of this letter. Thereafter, your firm must undergo a full program examination every three years conducted by SBA or a third-party certifier to maintain certification. Instructions for maintaining WOSB Program certification are available at 13 CFR 127.400 and at <https://wosb.certify.sba.gov/>.

Your firm must immediately notify SBA of any material changes that could affect its eligibility in accordance with 13 CFR 127.401. This notification must be in writing and must be uploaded into the firm's profile in WOSB.Certify.sba.gov. Your firm must not misrepresent its WOSB Program certification status to any other party, including any local or State government contracting official or the Federal government or any of its contracting officials.

As a certified WOSB Program participant, there are valuable free resources available to you. These include:

- SBA Resource Partners: For general assistance on various topics, information on SBA programs, and upcoming small business events in your area. You can find your local resource partner by visiting: <https://www.sba.gov/tools/local-assistance>.

All SBA programs and services are extended to the public on a nondiscriminatory basis.



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
CRFQ 0613 VNF2700000001
Shift Coverage & Recruiting Plans

Certificate Number
NY952197



Advancing Economic
Impact Together

This certificate attests that the below mentioned company is an NMSDC-Certified
Minority Business Enterprise(MBE)

Saratoga Medical Center Inc

12-04-2025

Issuance Date

12-31-2026

Expiration Date

Donald R. Cravins, Jr.
President and CEO
NMSDC

621111,541611,541690,621999

NAICS Codes

80111606

UNSPSC Codes

Regional Affiliate: New York/New Jersey MSDC



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
Service - Prof

Proc Folder: 2029895			Reason for Modification: Addendum No. 1 To Extend Bid Opening To Publish TQ&A
Doc Description: Direct Care Staffing Services			
Proc Type: Central Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	
2026-08-19	2026-08-26 13:30	CRFQ 0613 VNF2700000001	2

BID RECEIVING LOCATION

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

VENDOR

Vendor Customer Code: VS0000047252

Vendor Name : Saratoga Medical Center, Inc, (DBA Saratoga Ascend)

Address : 12 East 32d Street 7th floor

Street :

City : New York

State : NY **Country :** USA **Zip :** 10016

Principal Contact : Saleena Sidhu, President

Vendor Contact Phone: (917) 957-0191 Cell **Extension:**

FOR INFORMATION CONTACT THE BUYER

Jessica L Riley
304-558-0246
jessica.l.riley@wv.gov

Vendor Signature X *Saleena Sidhu* **FEIN#** 541288737 **DATE** 8/25/2026

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

ADDITIONAL INFORMATION

Addendum No. 1 is issued for the following:

1. Responses to vendor questions attached. See Attachment A.

2 To modify bid opening date and time to 08/26/2026 at 13:30 (1:30PM EST)

No other changes

The West Virginia Purchasing Division, is soliciting bids on behalf of the WV Veterans Nursing Facility, to establish an open-end contract for Direct Care Staffing Services to include RN's LPN's and HSW's per the attached specifications, pricing pages and documentation.

INVOICE TO				SHIP TO			
DIVISION OF VETERANS AFFAIRS 1 FREEDOMS WAY CLARKSBURG WV US				VETERAN'S NURSING FACILITY 1 FREEDOMS WAY CLARKSBURG WV US			

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Direct Care Staffing Services				

Comm Code	Manufacturer	Specification	Model #
85101601			

Extended Description:

Open-end contract for Direct Care Staffing Services

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Technical Questions Deadline: 08/12/2026 at 10:00AM	2026-08-12

SOLICITATION NUMBER: Addendum Number:

The purpose of this addendum is to modify the solicitation identified as (“Solicitation”) to reflect the change(s) identified and described below.

Applicable Addendum Category:

- ☐ Modify bid opening date and time
- ☐ Modify specifications of product or service being sought
- ☐ Attachment of vendor questions and responses
- ☐ Attachment of pre-bid sign-in sheet
- ☐ Correction of error
- ☐ Other

Description of Modification to Solicitation:

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

Attachment A

REQUEST FOR QUOTATION

CRFQ VNF27*01

DIRECT CARE STAFFING SERVICES

ADDENDUM ONE

AUGUST 13, 2026

4.28 All vendor staff must work at a minimum of three (3) days every thirty (30) days to remain eligible for PRN status with the facility.

4.10.3 Call offs during orientation (classroom and floor) are inexcusable except in the event of covid or extreme emergency. Vendors must advise their staff NOT to call off during orientation.

4.10.2 If Agency staff does not work following initial classroom training/floor orientation, the vendor will NOT be paid for the Agency's staff hours. Staff must work at least twenty-four (24) hours in ten (10) days following orientation.

4.30 Holidays paid include New Year's Day, Memorial Day, Independence Day, Veterans Day, Thanksgiving Day, and Christmas Day at (double time) the hourly rate for an eight (8) hour shift.

4.27 Agency staff will work two full weekend shifts per month, and day shift will work one Friday day shift per month, and night shift will work one (1) Sunday night shift per month. Weekends consist of day shift as Saturday and Sunday, night shift as Friday and Saturday.

ATTACHMENT A

CRQM-0613-VNF2700000001

Direct Care Staffing Services

Vendor Questions & Answers

Q1. Will you consider proposals from out-of-state vendors? (We are registered in the wvOASIS portal.)

A1. Yes

Q2. RFQ Document page 26, section 4.10, can you share how many hours are required to complete the orientation and training? (We would like to let candidates know up front how long orientation and training is in terms of hours and/or days.)

A2. Tuesday-Thursday 8am-4pm for CNA's

Tuesday-Friday 8am-4pm Friday will be until roughly 1pm for nurses.

Floor orientation they will be given 5 days, then 2 days on their own. These will be 12 hour shifts.

Q3. Are incumbent vendor personnel able to transition to new awardee vendors if the incumbent is not awarded?

A3. Yes

Q4. Please confirm if this is a new intuitive or a re-bid of an existing contract?

A4. New

Q5. Please confirm the budget allocated for this project.

A5. To be announced

Q6.If it is a rebid, please share the names of the current service providers/incumbent vendors? Additionally, how many active resources are working under the previous contract?

A6. Freedom of information Act

Q7.Please provide the historical spending associated with this contract.

A7.Freedom of information Act

Q8.Are there any specific challenges, pain points, or areas of concern that you are currently experiencing with the existing vendor?

A8. call offs, No call no shows, and schedule changes that the facility is not being notified of.

Q9.Please clarify the anticipated number of awards under this RFP.

A9. Anticipated number is 2

Q10.Is there a local preference in connection with this RFP?

A10. No

Q11.Please confirm the evaluations criteria and weighing (e.g. technical vs. cost).

A11. Lowest two bids evaluated that meet specifications will be awarded the contract

Q12.Will there be an opportunity for a virtual/on-presentation or negotiation meeting during the evaluation process?

A12.**No**

Q13.What is the expected timeline for award notification and contract execution?

A13. **Contract to start on September 14th, 2026**

Q14.What is the anticipated volume of staffing requests (e.g. estimated number of requisitions per year)?

A14. **85-90% of staff are agency**

Q15.Could you please provide details on the job categories, labor classifications or skill sets most requested?

A15. **CNA, LPN, RN**

Q16.Is there an employee conversion policy (e.g. can the department directly hire contractor staff after a defined period)?

A16. **There is not a defined period of time, if a staff member wants to apply for a state position they can.**

Q17.Will timekeeping be handled through the department's system or will vendors be required to provide a platform?

A17. **We have a platform, and send agency timesheets weekly.**

Q18.In the event of a contract award, please clarify whether vendors will be permitted to directly engage with individual departments/agencies for staffing requests or if all requirements will be routed through a centralized system?

A18. **The agency will be dealing with the nursing department, and will speak with DON, ADON, and/or scheduler.**

Q19.Are there preferences for SBE, WBE, or MBE business, as we are NMSDC approved MBE. Is that acceptable?

A19.**Yes**

Q20.Who are the current providers? If you can help me with the incumbent's response documents for the same, if applicable.

A20. **Freedom of information act**

Q21.Are there preferences for local WV vendors?

A21. **NO**

Q22.Do we need to create response using Vendor Qualification Section 3.6 and submit rest forms or is there any other format or template?

A22. **No format or template exists**

Q23.What is the overall budget?

[A23.](#) **To be determined**

Q24.How many roles and requirements can we expect from this contract?

A24. **85-90% of staff are agency, this does vary for time to time**

Q25.Is this a new contract or renewal of an existing contract?

A25. **NEW**

Q26.If there is an existing contract, could you please share the names if the current vendors and their pricing?

A26.**No**

Q27. In order to be considered responsive for this solicitation, is it mandatory to bid on all positions?

A27. **Yes**

Q28. What is the estimated budget for this contract?

A28. **To be announced**

Q29. Is it mandatory to subcontract?

A29. **No**

Q30. Could you please provide information on the daily duration of shifts required for the necessary professions? For example. The number of hours per day?

A30. **Shifts for all 3 disciplines are 12 hours, unless mandated for a 16 hour shift.**

Q31. Can the Purchasing Division or the WV Veterans Nursing Facility provide historical or estimated annual utilization (hours by role-RN, LPN, and HSW) for Direct Care Staffing Services at the facility, given that the solicitation does not state a minimum guaranteed volume or historical baseline for purchasing purposes?

A31. **No, Freedom of information act**

Q32. Is there a current incumbent staffing vendor or vendors for this contract, and if so, is this solicitation a recompetes of an existing arrangement or a new procurement?

A32. **Yes and no**

Q33. Section 11 of the General Terms and Conditions presents three liquidated damages options (a stated amount, "contained in the specifications," or "not included"); could the Purchasing Division confirm which liquidated damages

provision, if any, applies to this specific solicitation, as this is not clearly indicated in the posted documents?

A33. No

Q34. Section 4.30 states that specified holidays are paid at 1.5 times the hourly rate, while Section 4.31.2 states that hours worked on a paid holiday are paid twice the regular rate for up to eight hours. Please confirm the correct holiday billing multiplier.

A34. See addendum

Q35. Christmas Eve and New Year's Eve appear in both Sections 4.31 and 4.32. Please confirm the applicable premium, number of premium hours, and whether either date is treated differently from the other "Important Dates."

A35. See addendum

Q36. Section 2.3 states that a standard 12-hour shift consists of 11 worked/billable hours, a 30-minute paid lunch, and two paid 15-minute breaks. Should vendor invoice 1 or 12 hours or a completed 12-hour shift?

A36. The complete 12 hour shift

Q37. Section 4.28 states that staff must work "a minimum (3) days every thirty (30) days" to remain eligible for PRN status. Please confirm whether the intended minimum is one day or three days per 30-day period.

A37. see addendum

Q38. Please explain how the following rates and premiums interact: Weekday or weekend rate, \$1 per-shift differential, Overtime, Holiday premium, Other Important Date premium. Specifically, please confirm whether any premiums may be combined and whether overtime is calculated from the regular weekday/weekend rate or from a premium rate.

A38. As stated in the specifications section 4 and the exhibit A pricing pages

Q39. Please confirm how weekend hours should be classified for pricing purposes, particularly Friday night, Saturday night, and Sunday night shifts that cross into another calendar day.

A39. Friday and Saturday nights are weekend shifts, Sunday night is not considered a weekend shift.

Q40. The CRFQ cover form contains a single unit-price and total-price line, while the solicitation provides separate pricing pages for RN, LPN, and HSW/CAN services. What amount should vendors enter on the CRFQ cover form and in the corresponding WV OASIS line item?

A40. The same

Q41. Should each of the three detailed pricing pages be individually signed and uploaded with the electronic bid?

A41. Yes

Q42. Are the estimated 19,200 annual hours the combined anticipated usage across both awarded vendors? Please confirm that these hours are estimates only and that no minimum number of hours is guaranteed to either vendor.

A42. Estimate only, and yes

Q43. Can the state provide historical annual hours, fill rates, or expenditures for RN, LPN, and HSW/CAN staffing at the facility? If a current contract exists, please identify where the award, incumbent vendor information, and contract rates may be obtained publicly.

A43. Freedom of information act

Q44. When the facility issues a staffing request to the two awarded vendors, how much time will vendors normally have to submit their quotations and confirm staffing availability?

A44. They will have 24 hours to give us staff members for the month and the facility will schedule the staff where needed. Unless there is an agreed upon contract for staff members and then they will be scheduled by facility for the length of their contract with possibility of renewal.

Q45. Section 4.35 permits the facility to cancel a shift with at least two hours' notice. If the facility provides less than two hours' notice, will the vendor receive a minimum payment or cancellation fee?

A45. Yes, employee will be compensated

Q46. Please confirm which orientation and training hours are billable. In particular, does the facility pay for PointClickCare training, facility orientation, initial Alzheimer's training, annual recertification, and mandatory meetings?

A46. This is discussed in detail in the contract

Q47. If an employee completes training but is not offered enough shifts to work 24 hours within the following 10 days, will the vendor still be paid for the training time?

A47. This is discussed in detail in the contract. They are given 2 extra days so therefore they have no reason to not have those hours available, unless they do not schedule them in the required timeframe.

Q48. Section 3.1 states that evidence of at least 12 months of direct-care experience "should" be furnished with the bid but "must" be provided before award. Please confirm whether this evidence is mandatory with the initial bid.

A48. Yes

Q49. In addition to the signed CRFQ form, three pricing pages, shift-coverage plan, recruiting plan, designated contact form, applicable addendum acknowledgements, are there any other documents that must be submitted with the initial bid?

A49. No

Q50.The insurance section checks commercial general liability and automobile liability but does not check professional liability/malpractice insurance. Please confirm whether professional liability or medical malpractice insurance is required for this contract.

A50. Yes for the vendor

Q51.Are the quoted hourly rates fixed only for the initial September 14, 2026-September 13, 2027 period, or must the same rates remain in effect during all renewal periods? If renewal period adjustments are permitted, what adjustment method will apply?

A51. Fixed rate per the contract dates with no adjustment for the term of the contract including renewals

Q52.Please clarify whether the Agency will accept documented experience providing RN, LPN, and CNA/HSW staffing through a healthcare staffing division, including experience outside West Virginia, to satisfy the required 12 months of Direct Care Staffing experience. Also, what documentation is required as proof of such experience?

A52. Yes and documentation on file

Q53.Please clarify the required proposal content for the recruiting and shift coverage plans, including whether currently local personnel are required or if proposed recruiting, scheduling, and replacement strategies are acceptable. Also, please confirm whether there is a specific format or template for pricing.

A53. As stated in the specifications and pricing pages

Q54.Section 3.6 requires a recruiting plan detailing how vendors will recruit nursing staff in the Clarksburg, WV area. Please clarify whether the Agency has a required format, or minimum content requirements for the recruiting plan and whether the plan is evaluated as part of bid responsiveness.

A54. Vendor may recruit in any location in an effort to fill the positions. No format is specified. Yes.

Q55. Section 4.5.3 requires a completed application or resume as proof of experience, with references, for Agency Staff. Please clarify whether these documents are required with the initial bid response for proposal personnel or only after the Agency requests and prior to placement of individual staff members.

A55. No, these should be provided when submitting candidates for positions after the contract is awarded.

Q56. Section 4.7.3 requires staff to meet the Agency's immunization requirements for PPD and Hepatitis B and provide copies of results. Please clarify whether the Facility accepts legally permitted Hepatitis B vaccination declinations or exemptions, and if so, what documentation will be required.

A56. Yes, we accept Hep B declination, Hep B declination form signed by the employee

Q57. Section 4.16 requires the vendor to provide the required number of staff at least two (2) hours prior to start of shift or assignment period. Please clarify whether the two-hour requirement applies to all staffing requests, including emergency and same-day requests, or only to requests communicated to the vendor at least two hours before the scheduled shift.

A57. This does not include staff picking up to cover call off or open the same day or emergencies

Q58. Please clarify whether the PRN requirement is one (1) or three (3) days of work every thirty (30) days.

A58. 3 days per month

Q59. Section 4.30 states that paid holidays are compensated at one-and one half (1.5) times the hourly rate for eight hours, while Section 4.31.2 states that hours worked on a paid holiday will be paid twice the regular rate for up to eight hours. Please clarify which rate applies to hours actually worked on a paid holiday.

A59. off of base pay, see addendum

Q60. Please clarify how overtime will be calculated when an employee works more than 40 hours in the defined work week and some of those hours also fall on a paid holiday or other important date. Specifically, should the applicable holiday/important-date premium be combined with the overtime premium, or will only one premium apply?

A60. See section 4.3 through 4.35 in the specifications

Q61. Since only two vendors will be awarded under this solicitation, please clarify whether vendors are required to be local, hold any specific certifications, or have any required registrations to be eligible for award.

A61. Vendors must meet all requirements in the specifications, recruiting anywhere they wish in order to fill the positions.

Q62. Please clarify whether the estimated annual hours are for bid evaluation only or represent anticipated annual staffing demand.

A62. Bid evaluation only

Q63. Section 5.3 states that awards will be made to responsible bidders with the lowest overall total cost, while vendors are required to submit pricing for all three disciplines. Please clarify whether "lowest overall total cost" will be calculated by combining the evaluated totals for RN, LPN, and HSW, or whether each discipline will be evaluated independently.

A63. See sections 5.2 and 5.3 as stated in the specifications

Q64. Are Davis Bacon wages required?

A64. **No**

Q65. What is the purpose of subcontracting? Can other vendors on this contract at this time subcontract with the vendors that are successful bidders at a later time in the bid?

A65. **No subcontracting**

Q66. May staff who are working for vendors at this time and their agency did not get the contract, transfer to successful bidders?

A66. **Yes**

Q67. May we contact other vendors that are on this contract to discuss subcontracting now, or do we wait until the contract is awarded?

A67. **No, Vendors must not be allowed subcontract**

Q68. Section 3.1 requires vendors to have at least twelve (12) months of experience operating a Direct Care Staffing organization. Please clarify whether this experience must specifically include staffing for a Veteran Nursing Facility or other long-term care/nursing facility setting, or whether comparable direct-care healthcare setting experience in other institutional settings, such as correctional facilities, satisfies this requirement. For example, would experience providing RNs, LPNs, CNAs, or other direct care health care personnel to correctional facilities qualify as acceptable evidence of the required experience?

A68. **Yes**

Q69. Section 4.30 appears to reference holiday pay at 1.5 times the hourly rate, while Section 4.31.2 and Exhibit A indicate holiday pay at 2.0 times the regular rate for up to eight hours. Please confirm the applicable holiday multiplier for pricing and invoicing purposes.

A69. **See addendum**

Q70.The solicitation references a standard twelve-hour shift consisting of eleven worked/billable hours along with paid lunch and rest breaks. Please confirm whether vendors should invoice eleven hours or the full twelve scheduled hours for a standard twelve-hour shift.

A70. 12 hour shift

Q71.Please confirm whether the “lowest overall total cost” used for award evaluation represents the combined evaluated pricing for RN, LPN, and HSW/CAN services, including both weekday and weekend rates.

A71. Yes

Q72. The solicitation provides an additional \$1.00 per hour for hours worked between 3:00 pm and 7:00 am. Please confirm whether the differential applies to both weekday and weekend rates and whether it also applies when holiday, important date, or overtime premiums are applicable.

A72. Yes, and based on base pay

Q73.Please clarify the minimum information expected in the required Clarksburg-area recruitment plan, including whether vendors need to demonstrate an existing local candidate pool, provide a minimum number of available RN, LPN, and HSW/CAN candidates, submit candidate resumes or profiles, maintain a local recruiting office/presence, or provide specific recruitment metrics and timelines.

A73. Vendor may recruit in any location in an effort to fill the positions and no local existing candidate pool or office is required.

Q74.Please confirm whether candidates need to currently reside in the Clarksburg, WV area or whether qualified healthcare professionals from other locations who are available and willing to work at the West Virginia Nursing Facility are acceptable.

A74. No, they do not have to be local/reside in Clarksburg area

Q75.Section 2.3 defines a standard twelve hour shift as consisting of eleven worked and billable hours plus a thirty minute paid lunch break and two paid fifteen minute

breaks. Please confirm that for a twelve hour shift the agency will be invoiced for eleven hours, and that the one hour if break time is compensated by the Vendor and is not billable to the agency. If the agency intends that all twelve hours be billable, please state so.

A75. 12 hour shift

Q76. For shifts of other lengths, including shifts of eight hours or more that are not twelve hours, please confirm how billable hours are calculated relative to break time.

A76. If working 4 hour shift get ½ lunch break, if working 8 or more hours get 2 paid 15 minute breaks and ½ paid lunch break

Q77. Section 5.1.4 provides that each request for bids will include a Pricing Page to be completed by the Vendor, while Section 13 of the General Terms and Conditions provides that pricing is firm for the life of the Contract. Please clarify whether the hourly rates bid on the Exhibit A Pricing Pages become the firm contract rates for the life of the Contract, or whether they are used solely to determine the two awarded Vendors, with actual rates re-bid at each request for bids. If rates are re-bid, may a vendor bid a rate higher than its Exhibit A rate?

A77. For the life of the contract

Q78. Sections 4.36.1 and 4.37.2 require Registered Nurses and Licensed Practical Nurses to hold a valid West Virginia license. West Virginia has been a Nurse Licensure Compact party state since January 19, 2018. Please confirm whether a nurse holding a valid multistate license issued by another Compact party state, and therefore holding a privilege to practice in West Virginia under W. Va. Code 30-7F, satisfies those sections, or whether a West Virginia single state license is required.

A78.

If they have a multistate license then they can work in WV

Q79. Section 5.3 provides for award to the responsible bidders with the lowest overall total cost. Please confirm whether "overall total cost" means the sum of the Grand Totals of all three Exhibit A Pricing Pages combined or whether each discipline is evaluated separately.

A79. The total overall combined disciplines

Q80. The solicitation contains a single wvOASIS commodity, Line 1, Direct Care Staffing Services, with no quantity or unit price stated, in addition to the three Exhibit A Pricing Pages, please confirm what a vendor should enter on that wvOASIS line, and how that entry relates to the Exhibit A Pricing Pages for evaluation purposes.

A80. A total estimated cost will be applied to the commodity line in oasis, and all three exhibit A pricing pages must be completed as well

Q81. Please confirm whether the estimated hours shown on the Exhibit A Pricing Page represent the Facility's total anticipated staffing requirement for the period of September 14, 2026 through September 13, 2027, or whether they represent a portion of a larger requirement filled in part under the contracts or purchase orders.

A81. The estimated hours are for the duration of the contract.

Q82. Section 4.9 requires all Agency Staff to complete thirty hours of Alzheimer's training provided by the facility, and eight hours thereafter as a recertification. Please confirm whether Agency Staff who have previously completed the Facility's thirty hour Alzheimer's training and remain continuously assigned to the Facility will be credited with that completed training and placed on the eight hour annual recertification cycle, or whether the thirty hour training must be repeated.

A82. Yes, they will continue with their annual training

Q83. Section 4.28 (PRN Eligibility): This section states "All vendor staff must work at a minimum one (3) days every thirty (30) days to remain eligible for PRN status." Could you clarify whether the requirement is 1 day or 3 days per 30 day period?

A83.0 3 days per month

Q84.Award Methodology (Section 5.3): Pricing is submitted as three sperate exhibits, one each for RN, LPN, and HSW. Since the award is a progressive award based on lowest overall total cost, is that ranking calculated as a combined or blended total across all three disciplines, or is each discipline evaluated and ranked separately?

A84. Yes

Q85.Contract Value Cap (Section9, Payment): This section notes that “no release is permitted to exceed one million dollars (\$1,000,000.00).” Is this a cap on each individual release or purchase order, or a cap on total contract value over the full term?

A85. To be determined.

Q86.Historical utilization: The pricing pages list estimated annual hours for each discipline but note they are not guaranteed. Would the Facility be able to share actual hours utilized and/or spend by discipline over the prior 12 months, to help inform our pricing?

A86. No

Q87.Incumbent vendor: Is there an incumbent staffing vendor currently servicing this contract, and if so, would that information be available?

A87. Yes must file for a freedom of information act.

Q88.Subcontracting relationships are set up after the award of the contract because you do not want to talk to another vendor during the blackout period?

A88. No subcontracting

Q89. Is one total number the deciding factor?

A89. No, it is dependant on the overall price of the three disciplines.

Q90. How does being a SWAM agency affect the outcome of the successful bid?

A90. **As determined in the Central terms and conditions.**

Q91. Section 2.26 defines Weekend as "Saturday and Sunday for Dayshift, and Friday and Saturday for night shift. "The Exhibit A Pricing Pages direct Vendors to "Weekend – see Section 2.26 (hours between Saturday at 12:01 a.m. and Sunday at midnight)," which state different definition. The Exhibit A Pricing Pages require separate Weekday and Weekend hourly rates. A.) Please confirm which definition governs in determining whether an hour is billed at the Weekday rate or the Weekend rate. B.) Please confirm specifically whether hours worked on a Friday night shift are billed at the Weekend rate and whether hours on a Sunday night shift are billed at the Weekday or the Weekend rate.

A91. **See addendum**

Q92. Section 4.30 states that the six listed paid Holidays are paid "at (1/2) times the hourly rate for an 8-hour shift." Section 4.31.2 states that "the pay rate for hours worked on a paid Holiday will be twice the regular rate (double time) for up to 8 hours worked," and the worked example at Section 4.31.2.1 applies double time. The Exhibit A Pricing Pages state "Holiday Pay-See Section 4.30 (will be 2 times the regular rate for up to 8 hour)." A.) Please confirm whether hours worked on a paid Holiday are billed at one and one half times or at two times the rate. B.) Section 4.31 states that Christmas Eve and New Year's Eve are paid at one and one half times the hourly rate for a 4-hour shift, while Section 4.32 lists both dates among the Other Important Dates, which Section 4.32.2 pays at one and one half times for up to eight hours. Please confirm which provision applies to those dates and whether the premium is capped at four hours or eight.

A92. **See Addendum.**

Q93. Section 4.28 states that "All vendor staff must work at a minimum one (3) days every thirty (30) days to remain eligible for PRN status with the facility. The written word and the numeral differ. Please confirm whether the minimum is one day or three days in every thirty-day period.

A93. **3 days per month**

Q94. Section 4.27 states that "Agency Staff will work two (2) full weekend shifts, one (1) Friday day shift, and one (1) Sunday Night shift per month." A.) Please confirm whether "two (2) full weekend shifts" means two night shift in total, or two complete weekends consisting of a Saturday shift and a Sunday shift each and therefore how many mandatory shifts per month each Agency Staff member is obligated to work. B.) The second sentence of Section 4.27 states that weekend shifts include "Night Shifts Friday, and Saturday," which does not include Sunday, while the first sentence requires a Sunday night shift each month. Please confirm how provisions are reconciled.

A94. Dayshift staff need to work 2 full weekends consisting of Saturday and Sunday(and at least 1 Friday a month not considered a weekend shift).. Nightshift must work 2 full weekends consisting of Friday and Saturday (and 1 Sunday a month not considered a weekend shift).

Q95. Section 4.10.2 states that "If Agency Staff does not work at least 24 hours in the 10 days following training/orientation, the vendor will not be paid for Agency Staff's hours." Please confirm that this provision applies only to the hours spent in training and does not affect payment for any other hours worked by that Agency Staff member.

A5. Orientation consist of classroom and floor orientation, see addendum

Q96. Does the Agency have a required fill-rate percentage of performance for awarded vendors?

A96. Yes

Q97.What is the typical lead time provided for staffing requests? (Examples: Same day, 24 hours, 72 hours, scheduled weeks in advance)

A97. Will request staff for the month and will have 24 hours to provide us the staff working for the month and if they are only wanting less than 3 day a week or only 1-3 days a month

Q98.Can the Agency provide the typical shift structure and distribution of requested assignments? (Examples: 7a-7p, 7p-7a, 8-hour shifts, 12-hour shifts)

A98. No, the facility staffs for 12 hour shifts and depends on the time of shift per discipline. The facility will be completing the scheduling for staff.

Q99.Does the Agency expect staffing demands to be distributed evenly between awarded vendors, or is utilization expected to follow the progressive award language whereby the lowest-priced vendor receives first opportunity for each request?

A99. No, the lowest priced vendor is awarded first.

Q100.Is there a minimum volume commitment to awarded vendors?

A100. No

Q101.Approximately how many orientation hours are required for each discipline?

A101. CNA's 24 classroom and 60 floor orientation hours

Q102.What does the orientation consist of?

A102. Classroom which covers a variety of topics, policies, PCC, dementia.Floor orients staff to facility, residents and routines and how the facility does things/ operates

Q103.Can you clarify if the Food Handlers card is from Harrison County Health Department or a state certification?

A103. **Both**

Q104. Is Food Handler card for all positions?

A104. **Yes**

Q105. Will the facility accept Food Handler card completion after award but prior to first shift, or must all personnel possess the credential before orientation?

A105. **Will be at the time of submission of candidates for positions**

Q106. Can the Agency provide historical holiday staffing utilization by discipline?

A106. **No**

Q107. Can the Agency provide the percentage of historical staffing hours that occurred on weekends versus weekdays?

A107. **No**

Q108. Is there a specific format the state prefers for vendor responses?

A108. **As stated in the specifications and contract requirements.**

Q109. Will vendor staff be required to drive on facility business? If yes, are they to drive facility vehicles or personal?

A109. **No**

Q110. Is automobile insurance a requirement?

A110. **Yes**

Q111.How will vendors be notified about needs from the facility?

A111. The facility will email agencies

Q112.Is staff expected to be provided on a week to week or day to day basis or will staff be utilized in more of an FTE/contracted capacity?

A112. Staff will be scheduled on a month to month basis unless an agreed upon contract

Q113.Is there a conversion fee if the state hires contracted employees permanently?

A113. No

Q114. Are future rate adjustments permitted during the term of the master agreement or during an option year?

A114. No

Q115.Is there a minimum amount of experience candidate needs for each labor category?

A115. No, but would prefer them have experience, if no experience they may have an extended orientation period

Q116.What would interview process look like, phone, virtual, or in person? If in person, would phone or virtual be sufficient for travel staff?

A116. Prefer in person interviews, depending on circumstance could be by phone

Q117.What are expectations from the agency if staff calls off?

A117. Attempt to file that spot

Q118. Will you please share the historical and/or incumbent rates for the requested services?

A118. **No, file a freedom of information act**

Q119. Will the award of each contract be based on the lowest price per service, or lowest price overall? For example, if Vendor 1 has the lowest price overall, but Vendor 2 has a lower price for RNs, specifically, would Vendor 2 be given preference?

A119. **Lowest price overall for the combined disciplines.**

Q120. Is there an incumbent vendor currently providing RN/LPN/HSW staffing services to WVVNF, and if so, can the incumbent's identity and current contract pricing be disclosed?

A120. **Yes and no.**

Q121. Is there an estimated annual contract value, historical spend, or budgeted amount for this staffing requirement that can be shared for proposal planning purposes?

A121. **No**

Q122. Since award is based on "lowest overall total cost", is that total by summing all six subtotals (weekday/weekend across the three Exhibit A Pricing Pages), or is each discipline (RN, LPN, HSW) evaluated and awarded independently?

A122. **Overall combined disciplines**

Q123. The two mandatory plans required with the bid (shift coverage plan and recruiting plan, Section 3.6) have no stated format or page limit-is there a preferred template, format, or page limit for these submissions?

A123. **No**

Q124. Should the Proof of Experience demonstrating 12+months operating a Direct Care Staffing organization (Section 3.1) be submitted with the bid, or can it be provided after bid opening but prior to award, per Instructions to Vendor 20?

A124. Yes

Q125. Since Shift differential, overtime, holiday pay, and Important Date pay are described as additives the Facility pays on top of the base hourly rate, should the Exhibit A rate reflect only the straight regular hourly rate, or an anticipated blended average?

A125. To be determined on the vendor's anticipated hourly base rate.

Q126. Will requests for bids (Section 5.1) be issued simultaneously to both awarded vendors for every staffing need, or will only the lowest-priced vendor receive first right of refusal on each request, per the progressive-award language in Section 5.3?

A126. Lowest first

Q127. Does WVCARES registration and 15-day eligibility requirement (Section 3.5) apply only to individual staff placed at the Facility, or must the Vendors business entity also complete a separate agency-level WVCARES registration?

A127. Just the staff.

Q128. Is there a required file format or naming convention for uploading the three completed Exhibit A Pricing Pages in wvOASIS, since they must be submitted together as a set?

A128. Yes, per Central Purchasing Guidelines.

Q129. Section: 4.1: This will be a multiple award contract. Contracts will be awarded to (2) Two Vendors. The Agency will request quotes from each Vendor as needed. The Agency shall then award the contract/purchase order to the lowest responsible bidders. The Agency shall reject any bid that fails to comply with the requirements contained in the agreement and request for bids.

Question: In the above referenced section, it states 2 Vendors will be awarded a contract. It then states the Agency will request quotes from the vendors. This

appears to be a prequalification bid so does that mean rates will not be requested until after the vendors are selected?

A129. No, this is not a prequalification bid.

Q130. Section 4.5: Vendors shall provide the Facility with information on each Agency Staff member prior to placement in the Facility and according to the state and federal standards. Any deviation from this requirement must be agreed to in writing by the Vendor and the Facility. These items will be provided at Vendor's cost and include but are not limited to: Additionally in Section 3.6 Vendors must provide the following documented plans with their bid response. 3.6.1 Plan for coverage of all shifts requested including weekends, holidays, call offs, and vacations. 3.6.2 Recruiting plan detailing how vendors plan to recruit nursing staff in the Clarksburg, WV area.

Question: Does the vendor attempting to staff the facility need to provide a list of staff to be prequalified?

A130. NO

Q131. Section 5.3: Award of Bids: The Facility shall award an Open-End contract/purchase order to the responsible bidders with the lowest overall total cost. This will be a progressive award contract with (2) Two vendors that respond to the bid request. Awards will be prioritized by lowest overall total cost. For example, if Vendor A (lowest bid) cannot meet the needs, the facility shall move to the next lowest bid (Vendor B) and so on.

Question: If the vendor is the lowest bidder but does not have the staff then how does this help staff the facility?

A. None.

Question: Are you looking for vendors who have staff or the lowest rate?

A. Both

Question: Are you going to pick the vendor with the most staff and then have them provide rates?

A. No

Question: If the agency does not plan on picking the vendor with the most staff and finds the facility struggling for staff at what point does and "so on and so on" take place?

A. This is not a valid question.

Question: Can you please describe how the "so on so on" will work?

A. This is not a valid question

Question: It states in this section "awards will be prioritized by lowest overall total cost." Will the lowest overall total cost be the total cost of all three disciplines combined or by lowest cost per discipline?

A. Three disciplines combined

Question: Are you selecting 2 vendors for the entire facility or 2 vendors per each discipline as currently in place?

A. 2 vendors for the entire facility

Q132. Section 5. Award and Requests for Bids: 5.1 Requests for Bids: All Vendors will be sent requests for bids when services are needed. The request for bids will contain the following: 5.1.1 Whether PRN or Term contract:

Question: Will the Vendor be able to have the option of both PRN staff and Term Contract Staff? Question: How long will the term contract be? Question: Does the term contract have an hour requirement?

A. Can have both PRN and Term contract.

The contract length will be agreed upon by the agency and facility, but typically 13 week contract with option of renewal if facility wishes. Would be for at least 36 hours a week.

Q133. 5.1.4 Pricing Page to be completed by the vendor:

Question: Is this after the vendor has been selected as a prequalified vendor?

A. This is not a bid for prequalified vendors

Q134. Exhibit A RN Pricing Page: Exhibit A LPN Pricing Page: Exhibit A HSWs Pricing Page: Dates state that pricing is good from September 14, 2026-September 13, 2027.

Question: Do the rates only last 1 year and then the 2 prequalified vendors will resubmit rates after the 1st year?

A. Specifications and Terms and Conditions state, One year initial contract with three (3) renewals

Q135. Section: 4.7.4: Complete an orientation packet or attend Facility orientation, PCC Training and Administration Training as part of orientation.

Question: Will staff have the option to do packets for orientation vs. in person?

A. No, in person is required.

Q136. 4.10.3 3 Call-offs during orientation are inexcusable except in the event of COVID or extreme emergency. Vendors must advise their staff NOT to call off during orientation.

Question: What happens if they call off during orientation what is the protocol?

A. **Depends on the reason because if they are sick we do not want them at the facility to cause others to be ill. So they can make up the day they missed or can return to the next orientation.**

Q137.4.14.4 All Staffing Agency's employees must attend mandatory meetings and in-services. If staff miss two (2) or more meetings per aggregate 12-month period, they may be told not to return to the Facility.

Question: Will these meetings be scheduled at least 30 days in advance? Will nightshift offered a reasonable option to attend? Will staff who are already scheduled off for vacation be accommodated? Will they receive at least 2 hours of pay?

A. **No they will not be scheduled 30 days in advance, the facility attempts to give as much notice as possible, although issues arise and meetings have to be held quickly at times. There will be time that nightshift can attend. Staff scheduled on vacations can contact administration upon return to address any meetings missed. They will be paid for the time in the meeting.**

Q138.4.15.5 Should Staffing Agency's employee(s) call off on or be unable to work a scheduled working weekend day or days, Staffing Agency's employee(s) will be scheduled to work an extra weekend day or days on the next schedule.

Question: How will this be tracked and what happens if they aren't available another weekend due to other factors?

A. **To be determined**

Q139.4.28 All vendor staff must work at a minimum one (3) days every thirty (30) days to remain eligible for PRN status with the facility.

Question: Are PRN staff required to work so many weekend shifts or just 3 shifts total? What about holidays?

A. **If staff work 2 or more days a week they are required to work weeks and holidays. Staff are PRN because they are not guaranteed hours, but most work full time hours.**

Q140. Can our company get WVCARES registration done after award?

A140. **WVCARES are done when submitting candidates for positions**

Q141. What licenses, permits, and certifications are required in the performance of this contract?

A141. **As stated in the specifications**

Q142. In experience what kind of proof do we need to provide?

A142. **As stated in the specifications**

Q143. Is there a required response time for emergency staffing requests outside normal business hours?

A143. **Do not typically contact agencies outside normal business hours, facility staff contact staff members to fill open spots, for call offs, NCNS, etc**

End of questions.

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)

☒ Addendum No. 1	☐ Addendum No. 6
☐ Addendum No. 2	☐ Addendum No. 7
☐ Addendum No. 3	☐ Addendum No. 8
☐ Addendum No. 4	☐ Addendum No. 9
☐ Addendum No. 5	☐ 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.

_____Saratoga Medical Center, Inc, (DBA Saratoga
Ascend)_____ Company

_____Saleena Sidhu_____
Authorized Signature

_____8/25/2026_____
Date



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
Service - Prof

Proc Folder: 2029895			Reason for Modification: Addendum No. 1 To Extend Bid Opening To Publish TQ&A
Doc Description: Direct Care Staffing Services			
Proc Type: Central Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	
2026-08-19	2026-08-26 13:30	CRFQ 0613 VNF2700000001	2

BID RECEIVING LOCATION

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

VENDOR

Vendor Customer Code: VS0000047252
Vendor Name : Saratog Medical Center, Inc. (DBA Saratoga Ascend)
Address : 12 East 32nd Street 7th Floor
Street :
City : New York
State : New York **Country :** NY **Zip :** 10016
Principal Contact : Saleena Sidhu, President
Vendor Contact Phone: (917) 957 0191 **Extension:**

FOR INFORMATION CONTACT THE BUYER

Jessica L Riley
304-558-0246
jessica.l.riley@wv.gov

Vendor Signature X *Saleena Sidhu* **FEIN#** 541288737 **DATE**

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

ADDITIONAL INFORMATION
Addendum No. 1 is issued for the following: 1. Responses to vendor questions attached. See Attachment A. 2 To modify bid opening date and time to 08/26/2026 at 13:30 (1:30PM EST) No other changes ***** The West Virginia Purchasing Division, is soliciting bids on behalf of the WV Veterans Nursing Facility, to establish an open-end contract for Direct Care Staffing Services to include RN's LPN's and HSW's per the attached specifications, pricing pages and documentation.

INVOICE TO	SHIP TO
DIVISION OF VETERANS AFFAIRS 1 FREEDOMS WAY CLARKSBURG WV US	VETERAN'S NURSING FACILITY 1 FREEDOMS WAY CLARKSBURG WV US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Direct Care Staffing Services				

Comm Code	Manufacturer	Specification	Model #
85101601			

Extended Description:
Open-end contract for Direct Care Staffing Services

SCHEDULE OF EVENTS		
<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Technical Questions Deadline: 08/12/2026 at 10:00AM	2026-08-12

	Document Phase	Document Description	Page 3
VNF2700000001	Final	Direct Care Staffing Services	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

PAST PERFORMANCE QUESTIONNAIRE

The Defense Health Agency is soliciting proposals for a Medical Q-Coded Services Contract Task Order, and the offeror has identified you as a reference to validate past performance. Solicitation Number, TOPR 10696 is for a Personal Services Contract.

Please complete the following questionnaire to assist our evaluation of the Contractor's past performance and **return via email no later than 08/26/2026 to the contractor.**

RESPONDENT INFORMATION:

Contracting Activity/Customer:	Hurlburt Field, FL
Point of Contact (POC):	TSgt Justin Carroll / TSgt Matthew McCabe
Title of POC:	Section Chief, Services / Contracting Officer's Representative
Telephone:	850-884-7685 / 662-434-7767
Email:	justin.carroll.4@us.af.mil / matthew.mccabe.5@us.af.mil

OFFEROR'S REFERENCE INFORMATION:

Contractor Name:	Saratoga Medical Center, Inc.
Point of Contact (POC):	Saleena Sidhu
Telephone Number:	212-213-2520 Ext.101
Email:	ssidhu@saratogamed.com

CONTRACT INFORMATION:

Contract Number:	HT0050-18-D-0012
Task Order Number:	FA4417-24-F-0334
Type of Contract:	Firm Fixed Price
Performance Period: (Base plus any options):	09/30/2024 – 11/30/2027
Description of Services:	3 FTE EMS/Paramedics in support of Hurlburt Field, FL

MARKET SEGMENT			
Ancillary Services	Dental Services	Nursing Services	Physician Services
X			
COMPLEXITY			
Number of FTEs:	3		
Number of Credentialed FTEs:	0		
Number of Privileged FTEs:	0		
Facility Type (i.e., Hospital/Clinic):	Clinic		
Contractor performed on this contract as:			
Prime	Subcontractor	Teaming Partner	Joint Venture
X			

Please refer to the following assessment definitions to assess the Contractor's performance in each of the areas listed in this questionnaire:

(E) Exceptional - The Contractor's performance meets contractual requirements and exceeds many (requirements) to the Government's benefit. The contractual performance was accomplished with few minor problems for which corrective actions taken by the Contractor were highly effective.

(V) Very Good - The Contractor's performance meets contractual requirements and exceeds some (requirements) to the Government's benefit. The contractual performance was accomplished with some minor problems for which corrective actions taken by the Contractor were effective.

(S) Satisfactory - The Contractor's performance meets contractual requirements. The contractual performance contained some minor problems for which corrective actions taken by the Contractor appear or were resolved satisfactorily.

(M) Marginal - Performance does not meet some contractual requirements. The contractual performance reflects a serious problem for which the Contractor has not yet identified corrective actions or the Contractor's proposed actions appear only marginally effective or were not fully implemented.

(U) Unsatisfactory - Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance contains serious problem(s) for which the Contractor's corrective actions appear or were ineffective.

(N) Not Applicable – Unable to assess the area.

Overall Fill Rate (CPARS "Quality of Service" Rating Area)						
Assess how the Contractor:	E	V	S	M	U	NA

Provided qualified HCW's IAW the terms and conditions of the contract.		X				
Ensured that qualified HCW's remained filled IAW the terms and conditions of the contract.		X				
Recruited, placed and retained qualified HCW's with minimal disruption for hard-to-fill (specialty) positions or at remote locations.		X				
If other than "Satisfactory," explain how the performance exceeds or does not meet contractual requirements:	All personnel qualified and performing well.					
On-Time Fill Percentage (CPARS "Schedule" Rating Area)						
Assess how the Contractor:	E	V	S	M	U	NA
Provide qualified HCW's on time IAW the Terms and conditions of the contract.		X				
Provided complete, current and accurate qualifying package for each HCW IAW the Terms and conditions of the contract.		X				
Provided complete, current and accurate credentialing/privileging packages within established time frames IAW the Terms and conditions of the contract.		X				
If other than "Satisfactory," explain how the performance exceeds or does not meet contractual requirements:	Accurate packages sent in a timely fashion.					
Turnover Rate (CPARS "Management" Rating area)						
Assess how the Contractor:	E	V	S	M	U	NA
Retained qualified HCWs without frequent turnover and minimal operations disruption IAW the terms of the contract.		X				
If other than "Satisfactory," explain how the performance exceeds or does not meet contractual requirements:	Turnover addressed promptly.					
Replenishment Rate (CPARS "Management" Rating area)						
Assess how the Contractor:	E	V	S	M	U	NA
Planned for and provided replacement candidates during the life of the contract to, include pre-planned/unplanned absences and extended leave of absence to avoid disruption of services and/or work schedule IAW the terms of the contract.		X				
If other than "Satisfactory," explain how the performance exceeds or does not meet contractual requirements:	Vacancies filled in a timely manner.					

PERFORMANCE SUMMARY		Yes	No
Would you award this firm another contract:		X	
If you answered "No" provide an explanation:			
Was the contract terminated for default or cause:			X
If you answered "Yes" provide an explanation:			
Additional Comments:			

Signature: _____

Date: 12 August 2026

Print Name: Justin Carroll

Title: Contracting Officer

Telephone: 850-884-7685

Thank you for your participation in providing a detailed and accurate history of past performance for this offeror.

Orthopedic Technician, ENT Surgical Technologist,
Respiratory Therapist, and Telemetry Technician Services

PAST PERFORMANCE QUESTIONNAIRE

Keesler AFB is in the process of soliciting offers from companies capable of providing:

Two (2) FTE Orthopedic Technician, ENT Surgical Technologist, Respiratory Therapist, and Four (4) Telemetry Technician Services,

In order for the 81st Contracting Squadron to conduct its evaluation, we request that you complete the questionnaire below and e-mail a PDF file to priscilla.brown.5@us.af.mil, Contract Specialist, at [81 CONS, Keesler AFB](#). The due date for completed questionnaires is 07/28/2020 at 2:00 PM CST. Your completed questionnaire will become a part of the official source selection records. To be considered, the Past Performance Questionnaire shall be returned to the Contract Specialist in its entirety and by the due date and time specified above.

To confirm receipt of your completed/submitted questionnaires please contact Contract Specialist, Priscilla Brown by e-mail at priscilla.brown.5@us.af.mil.

A. OFFEROR'S REFERENCE INFORMATION:

Contract Name and/or Number (include task order number(s) if applicable)	HT0050 - 18 - D - 0012 // DO# FA4814 - 19 - F - A027
Company/Division Name to be evaluated	Saratoga Medical Center, Inc.
Address:	16 West 32nd Street, Suite 806 New York, NY 10001
Point of Contact (POC):	Saleena Sidhu
Title of POC:	Vice President
Telephone Number:	212-213-2520 x101
Email	Saleen@saratogamed.com
Contractor performed as: ☒ Prime contractor Contractor performed as: ☐ Sub-Contractor ☐ Joint Venture ☐ Affiliate To/With _____	

B. RESPONDENT INFORMATION: Please complete.

Contracting Activity/Customer	Saratoga Medical Center, Inc.
Address:	MacDill AFB
Telephone Number: Email Address:	813-827-3769 amanda.baca.2@us.af.mil
Point of Contact (POC):	Amanda Baca
Title of POC:	Medical Business Advisor

Orthopedic Technician, ENT Surgical Technologist,
Respiratory Therapist, and Telemetry Technician Services

PAST PERFORMANCE QUESTIONNAIRE

C. CONTRACT INFORMATION: Please complete.

Contract Name and/or Number	HT0050-18-D-0012
Task Order number:	FA4814-19-F-A027
Type of Contract:	Personal Services
Performance Period: (Base plus any options):	1/1/2019 - 12/31/2023
Performance Period for the task order:	1/1/2019 - 12/31/2023
Annual Contract Values:	Base Year: \$ 552,960.00 Option 1: \$561,254.40 Option 2: \$569,664.00 Option 3: \$578,188.80 Option 4: \$586,886.40
Total Contract Dollar Value: (base plus any options)	
Number of FTEs / Session-based:	3 FTE Pharmacists 3 FTE Pharmacy Technicians
Contract Description:	Saratoga successfully staffed 3 Pharmacists and 3 pharmacy technicians to our base. The current status of the assignment is still active. All staff was able to start at the required start date. Saratoga has completed the full base year and is currently at working towards the end of Option Year 1. There was little to no employee turn over. Saratoga actively began recruitment to make sure that the base had adequate staff.

Contractor performed as: ☒ Prime contractor

Contractor performed as: ☐ Sub-Contractor ☐ Joint Venture ☐ Affiliate To/With _____

What percentage of the contract was performed by the evaluated contractor, if available:%.

PAST PERFORMANCE QUESTIONNAIRE

Instructions:

Please provide ratings and comments regarding the Contractor's performance in each area below using the following ratings.

RATING	DEFINITION
Exceptional	Performance meets contractual requirements and exceeds many to the Government's benefit. The contractual performance of the element or sub-element being evaluated was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.
Very Good	Performance meets contractual requirements and exceeds some to the Government's benefit. The contractual performance of the element or sub-element being evaluated was accomplished with some minor problems for which corrective actions taken by the contractor were effective.
Satisfactory	Performance meets contractual requirements. The contractual performance of the element or sub-element contains some minor problems for which corrective actions taken by the contractor appear or were satisfactory.
Marginal	Performance does not meet some contractual requirements. The contractual performance of the element or sub-element being evaluated reflects a serious problem for which the contractor has not yet identified corrective actions. The contractor's proposed actions appear only marginally effective or were not fully implemented.
Unsatisfactory	Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element or sub-element contains a serious problem(s) for which the contractor's corrective actions appear or were ineffective.
N/A	Not Applicable

PAST PERFORMANCE QUESTIONNAIRE

	Exceptional	Very Good	Satisfactory	Marginal	Unsatisfactory	N/A
A. QUALITY OF SERVICE AND PERFORMANCE						
(1) The Contractor provided quality service that adhered to contract requirements, specifications, and standards of professional conduct.	X					
(2) The Contractor consistently responded to problems and took appropriate action to correct performance.	X					
(3) Did the contract involve hard to fill positions (specialty positions) or positions are remote locations? If so, Contractor successfully recruited and retained qualified Ancillary HCPs with minimal disruption.	X					
B. MANAGEMENT						
(1) Contractor was able to resolve customer complaints quickly and effectively.	X					

Orthopedic Technician, ENT Surgical Technologist,
Respiratory Therapist, and Telemetry Technician Services

PAST PERFORMANCE QUESTIONNAIRE

(2) Contractor demonstrated an overall effective and quality management effort.	X					
(3) Contractor cooperated with the Government in providing flexible, proactive and effective solutions to critical contract issues.	X					
C. TIMELINESS/ SCHEDULE OF PERFORMANCE/SERVICES						
(1) Contractor demonstrated ability to plan for and provide replacement candidates during the life of the contract to include pre-planned absences, unplanned illnesses, or an extended leave of absence.	X					
(2) The Contractor consistently demonstrated an ability to quickly recruit and retain qualified HCPs in accordance with contract requirements and to avoid disruption of services and/or work schedule.	X					
(3) Credentialing Packages (to include current and complete information) were presented in timely fashion to the applicable facility.	X					

D. OTHER:

(1) Would you award this firm another contract? (☒) Yes (☐) No

If you answered "No" provide an explanation. _____

(2) Was the contract terminated for default or cause? (☐) Yes (☒) No

If you answered "Yes", provide an explanation. _____

(3) Has the Contractor been given a cure notice, show cause notice, suspension of progress payments in the last 3 years? (☐) Yes (☒) No

If you answered "Yes", provide an explanation and how many actions and if they were resolved:

(4) ADDITIONAL COMMENTS:

Saratoga has been a great team partner on this contract by opening lines of communication right away. We would award them another contract if given the opportunity.

RESPONDENT SIGNATURE



Direct Care Staffing Services
West Virginia Veterans Nursing Facility
CRFQ 0613 VNF2700000001
Shift Coverage & Recruiting Plans

Designated Contact Form

Manager: Vendors must designate and maintain a primary manager responsible for overseeing Vendor's responsibilities under the Agreement. The manager must be available during normal business hours to address any customer service or other issues related to the agreement. Vendor shall supply its Manager contact information upon request.

Emergency Contact: Vendors must designate and maintain an emergency contact responsible for any staffing issues that may arise outside of normal business hours. The emergency contact number must be answered or responded to within 2 hours on any given day or time, including weekends or holidays. Vendors shall supply its emergency contact information upon request.

Contract Manager: Saleena Sidhu

Office Manager: Hanny Gomez

Cell Number: (917) 957-0191

Fax Number: N/A

Email Address: ssidhu@saratogamed.com

PAST PERFORMANCE QUESTIONNAIRE TEMPLATE

The 42d Contracting Squadron is conducting a competitive small-business set aside. The offeror has identified you as a reference to validate past performance.

Solicitation Number, **14588** is for personal services of one part-time (1500 hours) Nurse Practitioner at the Maxwell AFB, AL.

Please complete the following questionnaire to assist our evaluation of the Contractor's past performance, and **return via email no later than 25 Mar 2022** to Kimberly Knott at kimberly.knott.1@us.af.mil and Brian Thornton at brian.thornton.15@us.af.mil.

RESPONDENT INFORMATION:

Contracting Activity/Customer:	Maxwell AFB, AL 42 nd MDG 501 Lemay PLZ N Bldg. 1487 Maxwell AFB, AL 36112
Point of Contact (POC):	Maj. Matthew D. Lee
Title of POC:	Contracting Officer Representative Health Flight Services
Telephone:	334-953-4029
Email:	Matthew.lee.43@us.af.mil

OFFEROR'S REFERENCE INFORMATION:

Contractor Name:	Saratoga Medical Center, Inc	
Point of Contact (POC):	Saleena Sidhu	
Telephone Number:	212-213-2520 X 101	
Email:	Saleena@saratogamed.com	

CONTRACT INFORMATION:

Contract Number:	HT0050-18-D-0012
Task Order Number:	FA3300-21-F-0028
Type of Contract:	DHA MQS FFP
Performance Period: (Base plus any options):	4/15/2021 – 4/14/2022
Description of Services:	1 FTE Physician Assistant/Nurse Practitioner

MARKET SEGMENT			
Ancillary Services	Dental Services	Nursing Services	Physician Services
x			
MAGNITUDE			
Annual Contract Value:	\$120,615.00		
Total Contract Dollar Value:	\$120,615.00		
COMPLEXITY			
Number of FTEs:	1		
Number of Credentialed FTEs:	1		
Number of Privileged FTEs:			
Facility Type (i.e., Hospital/Clinic):	Clinic		
Contractor performed on this contract as:			
Prime	Subcontractor	Teaming Partner	Joint Venture
X			

Please refer to the following assessment definitions to assess the Contractor's performance in each of the areas listed in this questionnaire:

(E) Exceptional - The Contractor's performance meets contractual requirements and exceeds many (requirements) to the Government's benefit. The contractual performance was accomplished with few minor problems for which corrective actions taken by the Contractor were highly effective.

(V) Very Good - The Contractor's performance meets contractual requirements and exceeds some (requirements) to the Government's benefit. The contractual performance was accomplished with some minor problems for which corrective actions taken by the Contractor were effective.

(S) Satisfactory - The Contractor's performance meets contractual requirements. The contractual performance contained some minor problems for which corrective actions taken by the Contractor appear or were resolved satisfactorily.

(M) Marginal - Performance does not meet some contractual requirements. The contractual performance reflects a serious problem for which the Contractor has not yet identified corrective actions or the Contractor's proposed actions appear only marginally effective or were not fully implemented.

(U) Unsatisfactory - Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance contains serious problem(s) for which the Contractor's corrective actions appear or were ineffective.

(N) Not Applicable – Unable to assess the area.

Overall Fill Rate (CPARS “Quality of Service” Rating Area)						
Assess how the Contractor:	E	V	S	M	U	NA
Provided qualified HCW’s IAW the terms and conditions of the contract.	X					
Ensured that qualified HCW’s remained filled IAW the terms and conditions of the contract.	X					
Recruited, placed and retained qualified HCW’s with minimal disruption for hard-to-fill (specialty) positions or at remote locations.	X					
If other than “Satisfactory,” explain how the performance exceeds or does not meet contractual requirements:	Saratoga provided the current incumbent on this contract, and have been able to retain her without disruption of service at Maxwell, AFB providing exceptional performance in this area.					
On-Time Fill Percentage (CPARS “Schedule” Rating Area)						
Assess how the Contractor:	E	V	S	M	U	NA
Provide qualified HCW’s on time IAW the Terms and conditions of the contract.	X					
Provided complete, current and accurate qualifying package for each HCW IAW the Terms and conditions of the contract.	X					
Provided complete, current and accurate credentialing/privileging packages within established time frames IAW the Terms and conditions of the contract.	X					
If other than “Satisfactory,” explain how the performance exceeds or does not meet contractual requirements:	Saratoga’s incumbent is highly qualified and has been able to learn, know and understand all systems at Maxwell. Saratoga knows how to provide accurate and complete qualifying package for this position and will be able to provide uninterrupted service upon award.					
Turnover Rate (CPARS “Management” Rating area)						
Assess how the Contractor:	E	V	S	M	U	NA
Retained qualified HCWs without frequent turnover and minimal operations disruption IAW the terms of the contract.	X					
If other than “Satisfactory,” explain how the performance exceeds or does not meet contractual requirements:	Saratoga has not had any turnover or disruption of this incumbent position and performs exceptionally to maintain open communication with their employee.					

Replenishment Rate (CPARS "Management" Rating area)						
Assess how the Contractor:	E	V	S	M	U	NA
Planned for and provided replacement candidates during the life of the contract to, include pre-planned/unplanned absences and extended leave of absence to avoid disruption of services and/or work schedule IAW the terms of the contract.						X
If other than "Satisfactory," explain how the performance exceeds or does not meet contractual requirements:	Since Saratoga has retained this candidate upon award, this area does not apply.					

PERFORMANCE SUMMARY		Yes	No
Would you award this firm another contract:		X	
If you answered "No" provide an explanation:			
Was the contract terminated for default or cause:			X
If you answered "Yes" provide an explanation:			
Additional Comments:	Saratoga has been very responsive to any needs of our organization as well as communicative and dedicated to the mission success.		

Signature: _____ **Date:** ____07MAR22____

Print Name: __Matthew D. Lee_____

Title: 22d TRSS Director of Operations, OTS_____

Telephone: ____334-953-4740_____

Thank you for your participation in providing a detailed and accurate history of past performance for this offeror.