

**Additional Information Regarding Vendors Performing Work in Replacement of State Employees**

This document contains copies of purchase order contracts obtained by OMB by which a nongovernmental person or entity agrees with any department, commission, board, council, agency, or public corporation to provide services, valued at one hundred fifty thousand dollars (\$150,000) or more, which are substantially similar to and in replacement of work normally performed by an employee of the department, commission, board, council, agency or public corporation. For additional supporting contract documents, you may submit a public records request to the Department of Administration in accordance with the Rhode Island Access to Public Records Act (“APRA”), R.I. Gen. Laws § 38-2-1 *et seq.* APRA forms, procedures and other information for the Department of Administration are available at <http://www.admin.ri.gov/publicrecords/index.php>.

Fiscal Year: FY23  
Agency: Corrections, Department Of  
Vendor Name: HOME CARE SERVICES OF R I INC  
Total Amount Paid to Vendor for Services: \$306,912.93

**Summary of Services Rendered to Agency:**

Identifying Code	Service Type	Amount
PO 3779102	Nursing/Convalescent Care And/Or Treatment	\$306,912.93

Note: Some of the above payments may have been made under the terms of a master price agreement (MPA). MPAs are solicited as requests for proposals or requests for quotes and may have cap limits for pricing and cap limits for project cost. MPAs provide agencies with access to qualified vendors, expedited process, and opportunities for mini-bids. Such purchases are made directly under the MPA and do not require a separate and unique contract. All MPAs are public and can be viewed at <http://www.purchasing.ri.gov/MPA/MPASearch.aspx>.

**Contents:**

Item Number	Document ID	Description
Item 1	PO 3779102	Nursing/Convalescent Care And/Or Treatment

# **ITEM 1**

# Notice of Blanket Purchase Agreement



**State Of Rhode Island  
 Department of Administration  
 Division of Purchases  
 One Capitol Hill  
 Providence, RI 02908-5860**

<b>V E N D O R</b>	<b>HOME CARE SERVICES OF R I INC          68 CUMBERLAND ST STE 206          WOONSOCKET, RI 02895-3323          United States</b>
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<b>APA-41853 DOC-BBV(NLH) - NURSING SERVICES (7/1/22-6/30/23)</b>	
Award Number	<b>3779102</b>
Revision Number	<b>2</b>
Effective Period	<b>01-JUL-2022 - 30-JUN-2023</b>
Approved PO Date	<b>08-JUL-2022</b>
Vendor Number	<b>30637</b>

<b>S H I P  T O</b>	<b>DOC BUSINESS OFFICE          39 HOWARD AVENUE          CRANSTON, RI 02920          United States</b>
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Type of Requisition	<b>SINGLE / SOLE SOURCE</b>
Requisition Number	<b>1760056</b>
Change Order Requisition Number	<b>DOC-NLH-070622</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Buyer	<b>Teixeira, Gerald</b> -
Requester Name	<b>Higham, Nancy L</b>
Work Telephone	<b>401-462-5164</b>

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

CHANGE TO PO 3779102 DATED 07/06/2022 - AGENCY DOC I.D. DOC-NLH-070622

LINES SEVEN (7), EIGHT (8), AND NINE (9) ADDED

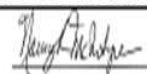
REASON/JUSTIFICATION:  
 ADDING LINES TO INCLUDE HOURLY RATES TO MATCH RATE SCHEDULE SUBMITTED TO PURCHASING.

**INVOICE TO**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
[http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative\\_09-01-2020.pdf](http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf)

**REGISTRATION REQUIREMENTS**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :  
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre


Line	Description	Unit	Unit Price (USD)
1	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - REGISTERED NURSE (RN)	Hour	60
2	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - LICENSED PRACTICAL NURSE (LPN)	Hour	57.5
3	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - CERTIFIED NURSE ASSISTANT (CNA)	Hour	50
4	APA-41853 FY23 OVER TIME PAID AT TIME AND A HALF	Each	1
5	APA-41853 FY23 HOLIDAYS PAID AT DOUBLE TIME	Each	1
6	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - INFECTIOUS CONTROL NURSE	Hour	100
7	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - INFECTIOUS CONTROL NURSE	Hour	110
8	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - REGISTERED NURSE (1ST \$65/HR, 2ND \$70/HR, 3RD \$75/HR)	Each	1
9	APA-41853 FY23 NURSING SERVICES/IN STATE STAFF - LICENSED PRACTICAL NURSE (1ST \$55/HR, 2ND \$60/HR, 3RD \$65/HR)	Each	1

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