

Nursing Home Legal Business Name: \_\_\_\_\_

DUNS: \_\_\_\_\_

<b>FACTOR 3: Past Performance.</b> Past performance is one indicator of an offeror's ability to perform the contract successfully. Proposals that lack any past performance will receive a neutral rating. Past performance shall consist of:			
a) If you are an incumbent VA-contracted facility, your previous performance under the VA Basic Ordering Agreement (BOA) or other contract vehicle;	Contract Number:		
	Number of years nursing home care provided for the VA:		
b) Your nursing home's most recent State inspection report including Statement of Deficiencies and Plan of Correction;	Yes	No	
c) VA requires nursing homes with a Medicare Star rating of at least 3 as found on the Nursing Home Compare website. Exceptions may be considered for those facilities located in geographically-isolated/rural areas/difficult to place patients/specialty units or a good reason for a waiver (i.e. lack of applicants). However, no rating of any facility will fall below a 2 rating.	Overall Medicare Star Rating		
	Individual component star ratings:		
	Health Inspections:	Staffing:	Quality of resident care:
d) Has this organization, had payment denials by Medicare in the last 3 years? Please provide dates and resolutions: YES      NO			
Date	Resolution		
e) Has this organization, under any current or former name or business identity, ever had a final adverse legal action imposed against it? YES      NO			
If YES, report each final adverse legal action, when it occurred, the Federal or State agency or the court/administrative body that imposed the action, and the resolution, if any. Attach a copy of the final adverse legal action documentation and resolution.			
FINAL ADVERSE LEGAL ACTION	DATE	TAKEN BY	RESOLUTION

**Prepared by:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Printed Title:** \_\_\_\_\_

**Nursing Home:** \_\_\_\_\_