

ATTACHMENT B: SCOPE OF WORK
Podiatry Services

Article 1
CONTRACTOR QUALIFICATIONS

1.1 Contractor Qualifications. The Contractor shall be a podiatric physician and maintain a current and valid license to practice podiatric medicine issued by the State of Utah, Division of Occupational and Professional Licensing.

ARTICLE 2
CONTRACTOR REQUIREMENTS

2.1 Contractor Requirements. The Contractor is responsible for all podiatry services at Utah State Hospital and shall assume management and administrative responsibility for all podiatry services. The Contractor shall:

- (1) to the extent possible, have the same Podiatrist provide services;
- (2) provide podiatry consultations for all patients as requested by DHHS physicians;
- (3) provide diagnostic testing, treatment and preventative services related to foot care to Utah State Hospital patients to include, but not limited to;
 - (A) podiatry for diabetic protocol;
 - (B) evaluation/treatment for foot pain/trauma;
 - (C) excision of granuloma;
 - (D) foot and ankle strapping;
 - (E) incision and drainage of abscess, hematoma, infected bursa and Paronychia;
 - (F) nail debridement;
 - (G) navicular padding;
 - (H) new patient examination;
 - (I) orthotics;
 - (J) recommendation for Ted Hose;
 - (K) reduction of callus tissue;
 - (L) removal of subcutaneous foreign body;
 - (M) removal of toenail, partial (including ingrown) or total;
 - (N) removal of warts from feet;
 - (O) therapeutic injections;
 - (P) treatment of bunions; and
 - (Q) nail and skin fungus.

- (4) notify the DHHS Clinic Manager of any podiatry issue, and document the issue in the electronic chart to which the Contractor will be given access. The DHHS Clinic Manager shall then notify medical and nursing staff of any podiatry issue;
- (5) ensure records remain at Utah State Hospital;
- (6) sign a Business Associate Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996;
- (7) see Utah State Hospital patients at times and days determined by the DHHS Clinical Director (estimated to be approximately 12 hours per month). Because service hours are dependent upon need, there may be some weeks where limited services are required. DHHS does not guarantee a minimum number of hours per week. DHHS will provide clinic space, telephone and computer access; and
- (8) notify the DHHS Clinical Director or designee of any vacations or other planned time off. Notice must be provided 60 days in advance for the Contractor's absence to establish the Contractor's monthly work schedule. In cases of unforeseen absence due to circumstances (such as illness) the Contractor shall notify the DHHS Clinical Director or designee as soon as possible.

ARTICLE 3 OUTCOMES

- 3.1 **Outcomes.** The outcomes of this contract will ensure that patients obtain needed podiatry services.
- 3.2 **Performance Measures.** The Contractor shall contribute to the following outcomes and report to DHHS the following measures:
 - (1) Measure: Number of patients seen each month;
 - (2) Measure: Number of patients unable to be seen and the reason; and
 - (3) Measure: Number of patients referred to an off-campus provider
- 3.3 **Reporting.** The Contractor shall submit monthly reports to the DHHS Clinics Manager or as requested.

Article 4 BILLING REQUIREMENTS

4.1 Invoicing.

- (a) The Contractor shall submit monthly invoices for services to the DHHS Business Office,

statehospitalinvoices@utah.gov 1300 E Center Street, Provo, UT 84604. The invoice must include:

- (1) service description;
 - (2) dates services rendered;
 - (3) contract number;
 - (4) uniquely identifiable invoice number;
 - (5) Contractor name;
 - (6) Contractor's address for payment;
 - (7) Contractor's phone number; and
 - (8) Contractor's signature.
- (b) Invoices submitted without the required information will not be paid and will be returned to the Contractor for revision.
- (e) All payments made will be made in the name of the Contractor as it appears on the cover page. Any change must be submitted in writing to the DHHS Administrative Services Director.