**ATTACHMENT A TO AGREEMENT #\_\_\_\_\_\_**

**STATEMENT OF WORK**

1. **Description of the Scope of Goods and/or Services**

Supplier to diligently recover low balance accounts receivable and improve cash flow. Account recovery solutions will result in reduction of late payments, streamlining and accelerating collections, reducing bad debt write-offs, and ensure regulatory compliance. Outsourcing low balance recovery will enable UCDH to focus internal resources on large balance accounts. Includes both Hospital Billing (HB) or Physician Billing (PB).

1. **Key Tasks and Activities, Deliverables and Completion Timeframe**

**Key Tasks and Activities:**

**Deliverables**

**Completion Deadlines or Milestones**

1. **UC Obligations**

UC will provide patient details.

1. **Place(s) of Performance**
2. **Key Personnel**

Supplier’s Account Manager is listed below, is subject to UC approval, and hasoverall responsibility for managing the UC/Supplier relationship:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | Name |  | | | | Phone |  |  |  | | Email |  | | | | Address |  | | | |  |  | | | |

Subcontractors authorized to provide Goods and/or Services under this SOW

|  |  |
| --- | --- |
| **Name of Subcontractor** | **Goods and/or Services the Subcontractor will provide** |
|  |  |
|  |  |

Supplier’s Account Management Team is:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** |  | | | | **Phone** |  |  |  | | **Email** |  | | | | **Address** |  | | | |  |  | | | |

UC’S Project Manager, responsible for acceptance/rejection of project results/deliverables, is:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | Name |  | | | | Phone |  |  |  | | Email |  | | | | Address |  | | | |  |  | | | |

1. **Reporting Requirements**

Supplier agrees to provide other reports as reasonably requested by UC during the Term of the Agreement and any extension(s) to the Term at no additional cost to UC.

1. **Service Level Agreement**

Any critical SLAs/KPI should be stated here.

During the Term of the Agreement, and any extension(s) of the Term, Supplier’s performance will be measured against the following Key Performance Indicators and associated criteria (KPIs):  
   
a) KPIs shall be subject to periodic review by UC.

c) Supplier shall provide performance reports to UC on a monthly basis in a format agreed upon between the parties.  
  
d) UC reserves the right to adjust, introduce new, or remove KPIs throughout the Term, however any significant changes to KPIs shall be agreed upon between UC and Supplier.

1. **Pricing and Invoicing Schedule**

Pricing as per Cost Proposal



|  |  |  |  |
| --- | --- | --- | --- |
| **Name and Title of Person Rendering Services** | **Rate per Hour/Day** | **Estimated No. of Days** | **Extended Cost of Fees** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Estimated Maximum Expenses (if any): | | | **n/a** |
| Estimated Maximum Cost: | | |  |

1. Purchasing: Outline Payment Schedule as needed
2. Purchasing: Outline additional invoicing requirements

All invoices must clearly indicate the following information:

California sales tax as a separate line item;

Freight costs as a separate line item;

UC Purchase Order or Release Number;

Description, quantity, catalog number and manufacturer number of the item ordered;

Net cost of each item;

Any applicable discount;

Reference to original order number for all credit invoices issued;

Purchasing card information, if applicable

Supplier will submit invoices directly to UC Accounts Payable Departments at each UC Location, unless UC notifies the Supplier otherwise by amendment to the Agreement.

UC will normally pay invoices within thirty (30) days of satisfactory product delivery or receipt of correct invoice.

1. **Acceptance Criteria and Testing**

Provide details of the Acceptance Criteria and testing which each Deliverable or Milestone must meet to be accepted, if specifics aren’t defined.

1. **Changes to the Services**

UC may desire to change the Goods and/or Services following execution of an SOW. If so, UC will submit a written Amendment to Supplier describing the changes in appropriate detail. UC will compensate Supplier for implementation of an Amendment in accordance with the terms and conditions of the relevant Amendment and Supplier’s response to the Amendment, if any.

1. **No Mandatory Use**

Because there is no mandatory use requirement at UC, nothing in this Statement of Work will be construed to prevent UC from entering into similar agreements with any third parties including, without limitation, suppliers that may be in competition with Supplier.

This Statement of Work is signed below by the parties’ duly authorized representatives.

**THE REGENTS OF THE [SUPPLIER NAME]**

**UNIVERSITY OF CALIFORNIA**

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(Signature) (Signature)

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(Printed Name, Title) (Printed Name, Title)

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(Date) (Date)