

GENESESS HEALTH SYSTEM SUB-CONTRACTING FORM

Provider Organization Name: _____

Type of Contract: _____

Any services included in you contract which are performed by individuals who are not direct employees are considered to be sub-contractors. This can include management, nursing, outpatient services, as well as students, interns, and volunteers.

Section 4.15 of your contract states “the parties agree not to assign this contract without the prior consent of the other party.” Please check the appropriate box below to indicate whether or not you intend to sub-contract any of your services included in your FY_____ contract with Genesee Health System.

No, I do not intend to sub-contract services included in my GHS contract.

Yes, I am or plan on sub-contracting services included in my GHS contract.
(Please complete next section)

 Provider Signature Date

Types of Services to be Sub-contracted: _____

Along with this written notification to sub-contract please provide the following:

A roster of subcontractors with credentials, certifications, licenses, job titles, and beginning date of the contractual relationship listed.

Copy of your contract boilerplate used for the sub-contractors.

Copy of your HIPAA/Business Associate Agreement boilerplate for sub-contractors.

Copy of your sub-contractors insurance coverage for our review (commercial/professional liability, auto insurance-applicable if the contract staff use personal car to transport clients).

Check the Appropriate Box Below:

(1) Sub-contract staff are included in the commercial liability insurance of

Provider or sub-contract agency –**identify the applicable one on the line above.** Attach a copy of the insurance binder page to the sub-contract roster.

(2) Each sub-contract staff has their own professional liability insurance - a copy of each insurance binder must be attached to the sub-contract roster.

Copy of your Policy and Procedures regarding sub-contractor's training and compliance with GHS contract policies and procedures.

NOTE: This form must be submitted with your contract. All of this information must be received BEFORE your contract will be fully executed by GHS. If sub-contract boilerplates, policy of procedures are changed, updated, or modified in any way during the contract period, a copy of the revisions must be submitted to the Contract Management Department.