Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HH	STX-3-0000313128		
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's			Date 03/27/23	Revision			
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		Ship To:	1964 - Austin:1100 W 49th St (DHT) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DHT) PO Box 149347 Ste T713 Austin TX 78756 United States				
Vendor: 174	1976051 1		Rill To:	Invoice-DSHS Fiscal Cl	aime		

Vendor: 1741976051 1

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703

United States

Bill To: Invoice-DSHS Fiscal Claims

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

 Line-Sch
 Inventory Item ID - Line Description
 Class/Item
 Quantity
 UOM
 PO Price
 Extended Amt
 Due Date

FY23 funding

EX/0- TGC 2155.441 - Managed Term Contract 962-M3

Requisition 00002221051

PO Service Dates 03/27/23 Thru 08/31/2023

NIGP: 962-69

Previous PO# 0000294177

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

Texas District: 14 Job Class#: 4076

Job Class Title: Public Health and Prevention Specialist III

Rate (Entry Level, Experienced, Expert): Expert

Job Description: The temporary staff will be responsible for accessing hospital and medical records systems; and identifying, abstracting, and reviewing birth defects cases.

Essential Job Functions: The temporary staff will be responsible for accessing hospital and medical records systems; and identifying, abstracting, and reviewing birth defects cases.

Knowledge, Skills, and Abilities:

Knowledge of International Classification of Diseases (ICD) codes specific to birth defects cases;

Skilled at abstracting data from hospital and clinical medical records systems; and

Previous and extensive experience and knowledge related to the abstraction of both simple and complex birth defects cases entered in the Birth Defects registry system.

Work Hours: __8:00__:AM to _5:00__:PM Work Days: (ie. Mon-Fri) Monday-Friday

Work Hours per Week: 40 Start Date: 05/01/23 End Date: 08/31/23 Department: DSHS

Street Address: 1100 W. 49th Street

City: Austin

Bldg/Room#: n/a (remote workers) Supervisor Name: Karen Johnson Supervisor Phone Number: 713-767-3314

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000313128
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 03/27/23	Revision	Page 2
			Ship To:	1964 - Austin:1100 W 49th St (DHT) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DHT) PO Box 149347 Ste T713 Austin TX 78756 United States	

Vendor: 1741976051 1

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703

United States

Bill To: Invoice-DSHS Fiscal Claims

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

57.27000

\$61.851.60 05/01/2023

 Line-Sch
 Inventory Item ID - Line Description
 Class/Item
 Quantity
 UOM
 PO Price
 Extended Amt
 Due Date

Supervisor Email: karen.johnson@dshs.texas.gov

If additional or alternate contacts are needed, please enter the information below.

Contact Phone Number: 512-776-6151 Contact Email: dan.driggers@dshs.texas.gov Contact Name (if not supervisor): Don Penn Contact Phone Number: 512-776-6197

Additional Contact Name: Dan Driggers

Contact Phone Number: 512-776-6197 Contact Email: don.penn@dshs.texas.gov

Name of Temp (if known): Ruby Garcia, Belinda Preece, Alice Jones

**Per contract at no additional charge, we request a standard DPS criminal history check.

062 60

PCS:

1 1

Kimberly Andrews, CTCD
Purchaser V- Services Department
Procurement and Contracting Services (PCS)
801 S Hwy 161 Suite 620, Office F
Grand Prairie, Texas 75051
Teleworking-please call thru Microsoft
Office: 972-337-6254
Kimberly.Andrews@hhs.texas.gov

1-1	Request to Extend Two Temporary Staff for the Birth Defects Epidemiology and Surveillance Branch at 540 hours per 2 employees for 4 months (May 1, 2023- August 31,2023)	902-09	1080.00	нк	37.27000	\$01,831.00	05/01/2023
					Schedule Total	\$61,851.60	
					Item Total for Line 1	\$61,851.60	
2-1	Request to Extend One Temporary Staff for the Birth Defects Epidemiology and	962-69	720.00	HR	57.27000	\$41,234.40	05/01/2023

1080 00 HP

Department of State Health Services

Purchase Order

Ship Via

Payment Terms

Freight Terms

Dispatch via Print

Net 30	Prepaid & Allow	BEST		Purchase Orde	r H	IHSTX-3-00	000313128	
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's			Date 03/27/23	Revision		Page 3		
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Ship To:	1964 - Austin:1100 W 49th St (DHT) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DHT) PO Box 149347 Ste T713 Austin TX 78756 United States			
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-DSHS Fisca DEPARTMENT OF 1100 W 49th St (RB PO Box 149347 Austin TX 78756 United States	STATE HEALTH	H SERVICES		
				Fax: Email:	512/458-7442 invoices@dshs.texas	~ · · · -		
				Purchaser:	Andrews,Kimberly	97	2/337-6254	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
	Surveillance Branch at 720 hours over 4 months (May 1, 2023 -August 31, 2023)							
				Sch	nedule Total	\$41,234.40		
				Item Total	l for Line 2	\$41,234.40		
				Total l	PO Amount	\$103,086.00		

No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract.

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By
Kimberly Andrews, CTCD
03/27/2023