

## **COVID-19 HEALTHCARE VACCINATION RULE**

To All University Health Suppliers, Vendors and Contractors:

The Centers for Medicare & Medicaid Services (CMS) issued the Omnibus COVID-19, Health Care Vaccination Rule (the “Rule”) on November 5, 2021 (the “Rule”) mandating certain health care facilities, including University Health, require its employees, students and contracted providers and suppliers be fully vaccinated or obtain an approved exemption. CMS issued further guidance on January 20, 2022, expressly making the Rule applicable to Texas hospitals and detailing the required timeline for implementation.

The vaccination requirement applies to most suppliers, vendors and contractors who provide services on site. However, it does not apply to suppliers, vendors or contractors who work remotely and are never required to be on-site at a University Health facility. Nor does it apply to individuals who are only present on-site for short periods of time, for example, drivers dropping materials at a loading dock or construction site, plumbers on-site for a one-time repair, or delivery workers picking up packages at the entrance of a building. Similarly, construction projects performed in settings outside of our facilities, including the Women’s and Children’s hospital worksite, are excluded from this mandate.

You must complete the attached attestation for remote/infrequent services or for on-site services and submit it to [VENDORS.VAX@uhs-sa.com](mailto:VENDORS.VAX@uhs-sa.com), as soon as possible.

If the Rule applies, you must ensure proof of vaccinations, including boosters, for your employee or subcontractors is submitted either through the Symplr Vendor Credentialing tool or by emailing proof of vaccination to [VENDORS.VAX@uhs-sa.com](mailto:VENDORS.VAX@uhs-sa.com). For those employees or subcontractors of yours who qualify for a religious or medical accommodation from the COVID-19 vaccination, you will need to ensure proof of a qualifying exemption is submitted to University Health’s Human Resources department at [HR.VAX.Requests@uhs-sa.com](mailto:HR.VAX.Requests@uhs-sa.com) and Procurement Services at [VENDORS.VAX@uhs-sa.com](mailto:VENDORS.VAX@uhs-sa.com). University Health shall confirm compliance and determine whether there is an appropriate accommodation in accordance with the Rule and hospital policies and procedures.

Any individual vendor, supplier or contractor unable to confirm their status may be requested to present an image of their CDC vaccination card or proof of a qualifying employer-approved accommodation prior to being allowed on-site to provide services.

University Health recognizes that our suppliers and vendors may interact with, and therefore will be contacted by, different affiliates of University Health, and we ask for your cooperation to respond to each compliance request according to instructions at your earliest convenience. In addition, please note that University Health continues to follow CDC guidelines and requires face



4502 Medical Drive  
San Antonio, Texas 78229

masks in all indoor areas regardless of vaccination status, and outdoors when physical distancing is not possible.

For your convenience additional information on the Omnibus COVID-19, Health Care Vaccination Rule, applicable exemption request forms, and visitation policies, please visit our vendor information portal at [www.universityhealthsystem.com/about-us/vendor-program](http://www.universityhealthsystem.com/about-us/vendor-program).

If you have question about these requirements, please contact Corporate Communications at [Corporate.Communications@uhs-sa.com](mailto:Corporate.Communications@uhs-sa.com). Thank you for your cooperation as we work to fulfill our obligations under the Rule and create a safe working environment at University Health.

Sincerely,

A handwritten signature in blue ink, appearing to read "Travis Smith".

Travis Smith  
Vice President, Deputy Chief Financial Officer

## SUPPLIER, VENDOR AND CONTRACTOR VACCINE ATTESTATION

Name: _____	Date of Request: _____
Organization: _____	Position/Job Title: _____
Phone No.: _____	Email Address: _____
UH Contact: _____	UH Phone No.: _____
UH Department: _____	Location(s): _____

### Attestation Statement For Suppliers, Vendors and Contractors: Onsite Services

I hereby certify and attest that all my staff, employees, and subcontractors performing services for University Health are either: 1) Fully vaccinated with a COVID-19 vaccine authorized by the FDA; or 2) Approved for a qualifying medical or religious exemption. I acknowledge that proof of vaccination including type of vaccine and dosage date or exemption must be furnished to University Health as may be required by surveyors, regulators, or other government entities. I further acknowledge that anyone receiving an exemption approved by my Organization must confirm with University Health that it qualifies and be provided an approved accommodation by University Health before entering any University Health facility. I understand I am responsible for reviewing current rules and required mitigation measures applicable to all exempted individuals (e.g., COVID testing, additional personal protective equipment, etc.).

By signing and submitting this form, I acknowledge and agree to abide by the attestation statement for suppliers, vendors and contractors providing on-site services.

 \_\_\_\_\_  
 Provider Signature

 \_\_\_\_\_  
 Date

### Attestation Statement For Suppliers, Vendor and Contractors: Remote/Infrequent Services

I hereby certify and attest that the Omnibus COVID-19, Health Care Vaccination Rule does not apply since all staff performing services are either working remotely and are never required to be on-site at a University Health facility or only provide onsite services infrequently for short periods of time. Should this status change, I will immediately notify University Health.

By signing and submitting this form, I acknowledge and agree to abide by the attestation statement for suppliers, vendors, contract providing remote/infrequent services.

 \_\_\_\_\_  
 Signature

 \_\_\_\_\_  
 Date