

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

105



**FROM:** Riverside County Regional Medical Center

**SUBMITTAL DATE:**  
August 19, 2003

**SUBJECT:** Professional Medical Services Agreement with Hubert C. Watkins, M.D.,  
for Dermatology Services

**RECOMMENDED MOTION:** 1) Ratify the Agreement with Hubert C. Watkins, M.D., effective July 1, 2003; 2) authorize the Chairperson to sign three (3) copies of the Agreement; and 3) retain one (1) copy and return two (2) copies of the executed Agreement to Riverside County Regional Medical Center (RCRMC) Administration for distribution.

**BACKGROUND:** Since the first day of January, 1993, professional dermatology physician services have been provided via contractual arrangements with Hubert C. Watkins, M.D. This renewal includes professional dermatology services, inpatient and outpatient clinics, administrative and teaching responsibilities, physician oversight and the complete obligations of this Physician Contractor to the Hospital. This Agreement includes all of the professional medical services that are the responsibility of the County and precludes Dr. Watkins from billing the County separately for these services. There are no additional costs associated with this updated Agreement.

Departmental Concurrence

FORM APPROVED  
COUNTY COUNCIL  
AUG 11 2003  
*[Signature]*

The Admendment has been approved as to form by Riverside County Counsel.

*[Signature: Douglas N. Bagley]*  
\_\_\_\_\_  
Douglas Bagley, Hospital Director/CEO

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$ 25,000	In Current Year Budget:	YES
	Current F.Y. Net County Cost:	\$ 25,000	Budget Adjustment:	NO
	Annual Net County Cost:	\$ 25,000	For Fiscal Year:	03/04

<b>SOURCE OF FUNDS:</b> Enterprise Funds	<b>Positions To Be Deleted Per A-30</b>	<input type="checkbox"/>
	<b>Requires 4/5 Vote</b>	<input type="checkbox"/>

**C.E.O. RECOMMENDATION:**

**APPROVE**

**County Executive Office Signature** *[Signature: Dan Martin]*

Consent  
 Policy  
  
 Consent  
 Policy  
  
 Dep't Recomm.:  
 Per Exec. Ofc.:

**Prev. Agn. Ref.:** | **District:** ALL | **Agenda Number:**

**ATTACHMENTS FILED  
WITH THE CLERK OF THE BOARD**

3.41