

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

703



**FROM:** Human Resources Department

**SUBMITTAL DATE:**  
April 21, 2006

**SUBJECT:** Exclusive Care - EPO Medical Contractor Agreement with Emergency Physicians Medical Group

**RECOMMENDED MOTION:** 1) Approve the new contract for Emergency Physicians Medical Group in Rancho Mirage, from May 1, 2006 to April 30, 2008; 2) Authorize the Chairperson to sign four (4) copies of the attached Agreement and; 3) Retain one (1) copy of the signed Agreement and return three (3) copies to Human Resources for distribution.

**BACKGROUND:** In 1999, the Board of Supervisors established the County's self-funded Exclusive Provider Option (EPO) health plan, Exclusive Care, to provide a value health plan option to the employees of Riverside County and their families. To provide services to its enrolled members, Exclusive Care has contracted with a variety of healthcare providers. This agreement adds this provider's participation in the Exclusive Care Provider Network under terms similar to other comparable providers under contract.

Departmental Concurrence

Ronald W. Komers  
Asst. County Executive Officer/Human Resources Dir.

FORM APPROVED  
COUNTY COUNSEL

APR 25 2006

**FINANCIAL DATA**

|                               |                         |                         |           |
|-------------------------------|-------------------------|-------------------------|-----------|
| Current F.Y. Total Cost:      | \$ 0                    | In Current Year Budget: | N/A       |
| Current F.Y. Net County Cost: | \$ 0                    | Budget Adjustment:      | None      |
| Annual Net County Cost:       | \$ determined by claims | For Fiscal Year:        | 2006-2008 |

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

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

County Executive Office Signature

- Policy
- Consent
- Policy
- Consent

Dept't Recomm.:  
Per Exec. Ofc.:

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

SUBMITTED 3 21 11:51  
COUNTY CLERK'S OFFICE

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

3.13