

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

432



**FROM:** Human Resources Department

**SUBMITTAL DATE:**  
September 27, 2007

**SUBJECT:** Exclusive Care - EPO Second Amendment to Medical Contractor Agreement with Inland Empire Medical Imaging.

**RECOMMENDED MOTION:** 1) Approve the attached Second Amendment effective November 1, 2007 with Inland Empire Medical Imaging, a radiology provider located in San Bernardino which adds additional radiology services to their Agreement; 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 Second Amendment allows Inland Empire Medical Imaging to continue their participation in the Exclusive Care Provider Network under terms similar to other comparable providers under contract.

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

<b>FINANCIAL DATA</b>	<b>Current F.Y. Total Cost:</b>	\$ 0	<b>In Current Year Budget:</b>	N/A
	<b>Current F.Y. Net County Cost:</b>	\$ 0	<b>Budget Adjustment:</b>	None
	<b>Annual Net County Cost:</b>	\$ to be determined by claims	<b>For Fiscal Year:</b>	2007/08

<b>SOURCE OF FUNDS:</b> Premiums paid by members	<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** BY: Elizabeth J. Olson  
Elizabeth J. Olson

FORM APPROVED COUNTY COUNSEL  
BY: Lucy Furuta  
LUCY FURUTA  
10/02/07  
DATE  
Departmental Concurrence

Policy  Policy   
Consent  Consent

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

**Prev. Agn. RATTACHMENTS FILED** | **District:** | **Agenda Number:**

**3.32**