

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

721



FROM: Human Resources Department

SUBMITTAL DATE:
September 22, 2008

SUBJECT: Exclusive Care - EPO Medical Contractor Agreement with Anthony D. Young Chiropractic, Inc.

RECOMMENDED MOTION: 1) Approve the attached Medical Contractor Agreement from December 1, 2008 until November 30, 2012 with Anthony D. Young Chiropractic, Inc. a Chiropractor located in Temecula; 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. The California Board of Chiropractic Examiners has been checked and no adverse actions were found. This Provider has completed the Exclusive Care credentialing process. This agreement continues participation in the Exclusive Care Provider Network under terms similar to other comparable providers under contract.

Barbara A. Olivier
Barbara A. Olivier, Asst. HR Director for
Ronald W. Komers, Asst. CEO/Human Resources Dir.

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:	\$ to be determined by claims	For Fiscal Year:	2008/09

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

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

BY: *Elizabeth J. Olson*
Elizabeth J. Olson

County Executive Office Signature

FORM APPROVED COUNTY COUNSEL
BY: LUCY FURDIA
DATE: 9/22/08
Department of Administration

Consent Policy
 Consent Policy

Dept's Recomm.:
 Per Exec. Ofc.:

Prev. Agn. Ref.: | **District:** | **Agenda Number:** 3.25