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



FROM: Riverside County Regional Medical Center

SUBMITTAL DATE: February 2, 2010

SUBJECT: Amendment to the Radiation Oncology/Positron Emission Tomography Services Agreement between the County of Riverside and Wilshire Oncology Medical Group, Inc.

RECOMMENDED MOTION:

- 1) Ratify the Amendment to the Radiation Oncology/Positron Emission Tomography (PET) Services Agreement effective January 1, 2010;
- 2) Authorize the Chairperson to sign three (3) copies of the amendment;
- 3) Retain one (1) copy of the amendment and return two (2) copies of the executed amendments to Riverside County Regional Medical Center (RCRMC) for distribution.

BACKGROUND: Effective March 1, 2008, an agreement was signed with Wilshire Oncology Medical Group, Inc., to provide PET Imaging services as part of staging and treatment of cancer. PET Imaging services are not available on-site at Riverside County Regional Medical Center. This amendment reduces the amount paid for each PET Scan provided for patients referred by the Hospital.

This amendment has been approved as to form by County Counsel.

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	Current F.Y. Total Cost:	\$ 350,000	In Current Year Budget:	Yes	
FINANCIAL	Current F.Y. Net County Cost:	\$ N/A	Budget Adjustment:	No	
DATA	Annual Net County Cost:	\$ 0	For Fiscal Year:	09/10	
SOURCE OF F	UNDS: Enterprise Funds		Positio	ns To Be	

Deleted Per A-30

Requires 4/5 Vote

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County Executive Office Signature

APPROVE

Policy

M

Consent

Dep't Recomm.: ofc.: Exec

Prev. Agn. Ref.: 4/15/2008, 3.24

District:

Agenda Number:

ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

FIRST AMENDMENT TO THE RADIATION ONCOLOGY/POSITRON EMISSION TOMOGRAPHY SERVICES AGREEMENT WITH

WILSHIRE ONCOLOGY MEDICAL GROUP, INC.

That certain Agreement between the County of Riverside (COUNTY) and RadNet Management, Inc. (CONTRACTOR), effective March 1, 2008 is hereby amended effective January 1, 2010 as follows:

1. Delete Attachment "A" in its entirety and replace with the following, attached hereto as Attachment I.

All other terms and conditions of this Agreement are to remain unchanged.

IN WITNESS WHEREOF, the parties have executed this Amendment.

CONTRACTOR	COUNTY OF RIVERSIDE
By: President	By:
r resident	Chairman, Board of Supervisor
Date: 1/5/16	Date:
	<u>HOSPITAL</u>
	By: Douglas Bagley
	Hospital Director/CFO

FORM APPROVED COUNTY COUNSEL BY TAWNY LIEU DATE Attachment "A"

to

Radiation Oncology Service Agreement BetweenA Riverside County Regional Medical Center and Wilshire Oncology Medical Group, Inc.

In consideration of services provided by CONTRACTOR, pursuant to this Agreement, CONTRACTOR shall be entitled to receive payment by HOSPITAL in accordance with HOSPITAL policy and procedures as follows:

Standard Radiation Therapy (Professional & Technical Fees) Per Case Rate

CPT Code	Description	Global Charges
77305*	Simple Treatment Plan	\$ 4,500
	(Cases requiring single treatment area of interest encompassed in a Single port or simple parallel opposed ports with no blocking)	
77310*	Intermediate Treatment Plan	\$ 5,500
	(Cases requiring three or more converging ports, two separate treatment areas, multiple blocks, or special time constraints)	
77315*	Complex Treatment Plan	\$ 6,500
	(Cases requiring highly complex blocking, custom shielding blocks, tangential ports, special wedges or compensators, three or more separate treatment areas, rotational or special beam considerations, combination of therapeutic modalities)	
77295*	Conformal 3D Treatment	\$ 8,500
	(Cases requiring multiple custom megavoltage treatment beams focused on a large, three-dimensional reconstructed target)	
77301*	IMRT(Intensity Modulated Radiation Therapy) (Cases requiring dose escalation to tumor	\$18,500

	volume while sparing critical organs, decreasing the probability of Grade II or Grade III radiation toxicity as compared to conventional treatment)	
77761-77763*	Brachytherapy (Initial Treatment)	\$3,500
77799*	Brachytherapy (each follow up treatment)	\$2,900
	PET SCAN	\$1550
	PARTIAL TREATMENT	65% CHARGES
	CONSULT ONLY/NO TREATMENT	\$ 250

^{*}Multiple CPT Codes in addition may be used in billing these Global Case Rates

LOCATION

1280 Corona Pointe Court Suite 112 Corona, CA 92879

(951) 898-2828 (951) 898-2811 Fax