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



FROM: Riverside County Regional Medical Center

APPROVED COUNTY COUNSE

March 13, 2012

SUBJECT: Medical clinic agreement with Desert AIDS Project for Riverside County HealthCare (RCHC)

RECOMMENDED MOTION: Move that the Board of Supervisors:

1) Approve and authorize the Chairperson to sign the Medical Clinic Agreement with Desert AIDS Project to provide health care services to members enrolled with RCHC, effective on the execution of the Agreement between the County of Riverside and the California Department of Health Care Services (DHCS) through December 31, 2013.

Health Care Services (DHCS) through December 31, 2013. Jepartmental Concurrence (continued on Page 2) Susan Harrington, Director of Public Health Douglas D. Bagley, Hospital Director In Current Year Budget: \$0 Yes **Current F.Y. Total Cost: FINANCIAL Budget Adjustment:** No **Current F.Y. Net County Cost:** \$0 **DATA** 2011/2012 **Annual Net County Cost FY:** \$0 For Fiscal Year: SOURCE OF FUNDS: 100% Low Income Health Plan / **Positions To Be Deleted Per A-30** Riverside County Requires 4/5 Vote C.E.O. RECOMMENDATION: APPROVE Policy Policy **County Executive Office Signature** Debra Cournoyer X X Consent Consent Dep't Recomm.: Per Exec. Ofc. Prev. Agn. Ref.: District: Agenda Number:

> ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

SUBJECT: Medical clinic agreement with Desert AIDS Project for Riverside County HealthCare (RCHC)

BACKGROUND:

The Department of Health Care Services (DHCS) released program applications for all eligible entities to participate in the Low Income Health Program (LIHP), which provides entities the opportunity to help build the bridge to health care reform in 2014. The LIHP consists of the Medicaid Coverage Expansion (MC) and the Health Care Coverage Initiative (HCCI) programs. These programs provide health care benefits to eligible persons in accordance with the Welfare & Institutions Code (WIC) Section 15909 -15915 (Chapter 723, Statutes of 2010, Assembly Bill 342), and the Special Terms and Conditions (STCs) of the federal section 1115 (a) California Bridge to Reform Demonstration. To meet the requirements of participation for this program various departments of the County, including the Community Health Agency/Department of Public Health, Department of Mental Health, Department of Public Social Services, Riverside County Regional Medical Center and the Office on Aging, have combined their resources to ensure that the County has a financially viable model for an integrated, quality, responsive, patient-centered health care system meeting the needs of county residents. These departments have partnered with Inland Empire Health Plan (IEHP) as a third party administrator in administering the service which implements the requirements of LIHP. Through this collaboration partnership, the requirements for the LIHP were developed and incorporated for Riverside County HealthCare (RCHC). RCHC is Riverside County's new health care program to help bridge to the health care reform in 2014. Patients eligible to participate in RCHC will have the opportunity to receive services through specific referrals. RCHC expects approximately 20,000 eligible participants/patients to participate in the health care program.

The Desert AIDS Project clinic located in Palm Springs has agreed to provide routine and minor office procedure health care services to members enrolled with Riverside County HealthCare (RCHC).

FINANCIAL IMPACT:

100% Low Income Health Plan funding will provide health care services to members enrolled with Riverside County Health Care throughout the County of Riverside.

Payment for health care services will be based on actual claims submitted and reimbursed at an all inclusive rate of seventy (\$70) dollars per visit.

REVIEW/APPROVAL:

County Counsel has approved the agreement as to legal form.

DB:cg

MEDICAL CLINIC AGREEMENT BETWEEN COUNTY OF RIVERSIDE AND DESERT AIDS PROJECT

This Agreement is made and entered into by and between the County of Riverside (COUNTY), a political subdivision of the State of California, and Desert AIDS Project, (CLINIC). COUNTY and CLINIC are referred to herein as Parties.

WHEREAS, the COUNTY has agreed to provide "medically necessary" Health Care Services in accordance with the Welfare and Institutions Code Section 15909 – 15915 (Chapter 723, Statutes of 2010, Assembly Bill 342), and the Special Terms and Conditions (STCs) of the federal section 1115 (a) California Bridge to Reform as part of the Low Income Health Program (LIHP) Medicaid Coverage Expansion (MCE) program; and

WHEREAS, COUNTY desires to arrange for the provision of certain health care services for its members by entering into service agreements with various health care clinics; and

WHEREAS, COUNTY desires to arrange for the provision of certain health care services for its members by entering into service agreements with various health care clinics; and

WHEREAS, Government Code Section 31000 authorizes the COUNTY to contract for professional services to be provided by persons who are specially trained, experienced and competent to perform the services required; and

WHEREAS, CLINIC in accordance with the requirements of the California Health Facilities Licensure Act (Health and Safety Code Sections 1250 et seq.) and the regulation promulgated pursuant thereto, is equipped, staffed and

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prepared to provide medical services; and

WHEREAS, COUNTY and CLINIC desire to partner in the operation of a medical services program to provide medical services to eligible persons.

NOW THEREFORE, in consideration of the mutual promises, covenants representations and conditions hereinafter contained, the PARTIES hereto mutually agree as follows.

DEFINITIONS: 1.0

As used in this Agreement, the following terms shall have the meaning described below

- "Agreement" means this Medical Clinic Agreement, including 1.1 all attachments, addenda and amendments hereto.
- ""Coordination of Benefits ("COB") means those provisions by 1.2 which the CLINIC seeks to recover costs of health care services provided for an incident of sickness of a Member, which may be covered by another insurer, health plan, government program, indemnification program or other organization, subject to any limitations imposed by applicable laws and Benefit Agreements.
- "Health Care Services" means all Medically Necessary 1.3 services to which members are entitled under the RCHC program, including medical, hospital, preventative, ancillary and emergency services.
 - "Hospital" means Riverside County Regional Medical Center. 1.4
- "Medically Necessary" means those covered services which 1.5 are reasonable and necessary to protect life, to prevent significant illness or significant disability or to alleviate severe pain and the diagnosis or treatment of disease, illness or injury.
 - "Member(s)" means those persons who have enrolled in the 1.6

- 1.7 "Primary Care Physician" means a CLINIC Physician who is the Primary Care Physician responsible for supervising, coordinating and providing initial, primary and preventative care to members for initiating referrals, maintaining continuity of Member care, and providing health counseling and education. This may include physicians who are in Family Practice, Internal Medicine, Obstetrics, or General Practice.
- 1.8 "Primary Care Services" means those covered services that Members are entitled to under RCHC, which CLINIC is required to provide or to make available to Members, as outlined in Attachment A, attached hereto and incorporated in full herein by reference.
- 1.9 "Provider Manual" means the document distributed to CLINIC that describes the administrative procedures of the RCHC Program and such other information that is from time to time distributed by the RCHC Program for inclusion in the Provider Manual.
- 1.10 "Riverside County HealthCare ("RCHC")" means a county-based elective program developed as part of the Medicaid Coverage Expansion a component of the Section 1115-(a) Comprehensive Demonstration Waiver which expands health coverage to low income uninsured adults who are not eligible for Medi-Cal or Healthy Families.

DUTIES OF CLINIC:

2.1 CLINIC agrees to provide Covered Primary Care Services for all assigned members and shall coordinate the provision of other specialty care referrals for members as outlined in Exhibit A.

2.2 CLINIC shall make its best efforts to provide timely access to Health Care Services, and make its best efforts to provide for reasonable hours of operation in compliance with the RCHC Program's standards for access and availability, as described in the Provider Manual. CLINIC shall render Health Care Services to Members in the same manner as provided to any other CLINIC patient. CLINIC further agrees to make emergency services available twenty-four (24) hours per day, seven (7) days a week.

2.3 CLINIC may not impose any limitations on the acceptance of Members for care or treatment that it does not impose on other patients of the CLINIC. CLINIC shall not request, demand, require or seek directly or indirectly the transfer, or removal of any Member for reasons of Members need for or utilization of Health Care Services. CLINIC shall not refuse or fail to provide authorized Health Care Services available at the CLINIC to any Member.

2.4 CLINIC shall admit all Members with acute conditions to Riverside County Regional Medical Center (HOSPITAL) only, unless an appropriate bed or service is unavailable or in the event of an emergency medical condition. CLINIC agrees to contact the RCHC program for authorization prior to admitting a member for an elective service, when services are not available at HOSPITAL or if a member is directed to an emergency room or emergency department for services.

2.5 CLINIC shall maintain the necessary registrations, accreditation, certifications and licenses required by the State of California, federal government and accreditation entities. All Health Care Services shall be

provided by professional personnel in accordance with all applicable federal and state laws, licensing requirements and professional standards.

- 2.6 CLINIC shall ensure that the health professional employed by or under contract with CLINIC shall be appropriately licensed to provide health care services in the State of California, have met and continue to meet all applicable federal, state or municipal statutes, ordinances or regulations, and RCHC program standards of care and shall submit evidence of such licensure to RCHC program, upon request.
- 2.7 CLINIC shall comply with RCHC program's Quality Management (QM) and Utilization Management (UM) Programs. If a potential quality of care issue is identified based on member complaints, or other information, RCHC program shall alert CLINIC to initiate appropriate action. CLINIC further agrees to assist RCHC program in the implementation of a corrective action plan.
- 2.8 CLINIC shall meet credentialing requirements for its primary care providers and maintain the necessary registrations, accreditation, certification and licenses required by the State of California, federal government and accreditation entities. CLINIC agrees that only medical professionals who are credentialed by the RCHC program shall treat members.
- 2.9 CLINIC shall notify the RCHC program immediately, upon its knowledge of a complaint by a member. CLINIC agrees to cooperate with the RCHC program in resolving member grievances and agrees to participate in the grievance review procedures of the RCHC program. CLINIC and CLINIC's staff

 shall comply with all final determinations of the RCHC programs' grievance procedure, and QM and UM Programs.

- 2.10 CLINIC agrees to cooperate with inspections of CLINIC facilities, as conducted by any state and federal regulatory agencies, or the RCHC program staff or designee, that are required to assure compliance with required facility standards.
- 2.11 CLINIC shall use its best efforts to notify the RCHC program in writing, ninety (90) days prior to any change in CLINIC's office address, telephone number, office hours, tax identification number, or license status or number.
- 2.12 CLINIC shall make its best efforts to provide thirty (30) days prior written notice to the RCHC program in the event of an extended leave of absence or termination of a Primary Care Physician.
- 2.13 CLINIC agrees to submit reports on a quarterly basis to the RCHC program that include, but are not limited to, reports as outlined in Exhibit C, attached hereto for reference for the effective management of the RCHC's program's health care delivery system.
- 2.14 CLINIC shall ensure that Member-specific immunization information is periodically reported to the immunization registry. Reports shall be made following the Member's initial health assessment and all other health care visits which result in an immunization being provided.
- 2.15 CLINIC shall provide and arrange for high quality interpreter and linguistic services for Members either through telephone language services

or on site interpreters.

2.16 CLINIC shall cooperate and comply with all policies and procedures developed by the RCHC program.

2.17 CLINIC shall make best efforts to participate in committee meetings pertaining to Quality Utilization Management, Data Reporting and Compliance.

3.0 DUTIES of the RCHC program

- 3.1 The RCHC program shall perform all necessary administrative, accounting and reporting requirements and other functions as required by state and federal laws and regulations for the administration of the RCHC program and this Agreement.
- 3.2 The RCHC program shall provide marketing and enrollment services to potential Members.
- 3.3 The RCHC program shall provide CLINIC with a Handbook that contains the RCHC program's policies and procedures and provide the necessary training regarding these policies and procedures when requested by CLINIC.
- 3.4 The RCHC program shall provide appropriate services in support of CLINIC for the medical care of Members, including but not limited to treatments and hospitalizations, case management and quality oversight.
- 3.5 The RCHC program shall provide customer service to

 Members, including, but not limited to, processing Member complaints and
 grievances, informing Members of the RCHC program's policies and procedures,

and providing Members with information about the RCHC program.

4.0 BILLING AND COMPENSATION

- 4.1 In consideration of services provided by CLINIC pursuant to this Agreement, CLINIC shall be entitled to receive payment in accordance with RCHC program policy and procedure. CLINIC shall submit clean, complete and accurate claims to within one hundred eighty (180) days from the date of service. Claims must be submitted on a CMS 1500 claim form and shall include all information necessary to verify and substantiate the provision of health care services. CLINIC shall not seek payment for claims not submitted in a timely manner. Any claims received after the billing deadline will not be considered for payment. CLINIC shall accept the payments for services as described above and specified in Attachment B, attached hereto, as payment in full.
- 4.2 The RCHC program shall pay CLINIC for health care services within forty-five (45) working days of receipt of an uncontested claim which is accurate, complete and otherwise in accordance with RCHC program standards,

The RCHC program shall notify CLINIC at least forty-five (45) days prior to any material modification to RCHC program claims and dispute filing guidelines, or other reimbursement guidelines. The RCHC program shall not be obligated to pay CLINIC on any claims not submitted within one hundred and eighty (180) days from the date of service.

4.3 CLINIC shall accept the payments specified in Attachment B of this Agreement as payment in full for all Health Care Services provided to Members and for all administrative costs incurred for providing such services. In the event the RCHC program fails to make any payments to CLINIC, as provided

herein, whether from RCHC program insolvency or otherwise, Members shall not be liable for payment to CLINIC, under any circumstances, for Health Care Services as specified herein.

- 4.4 CLINIC agrees that the only charges for which a Member may be liable and be charged by CLINIC shall be for applicable medical services not covered under the RCHC program. CLINIC shall advise Member of their payment responsibility, prior to rendering services that require payment. CLINIC shall obtain a written waiver from the Member prior to rendering non-covered medical services to Member. The waiver must be obtained in advance of rendering services, dated, signed and timed and shall specify those non-covered services or services the RCHC program has denied as not Medically Necessary and shall clearly state that the Member is responsible for payment of those services.
- event, including, without limitation, nonpayment by the RCHC program, insolvency of the RCHC program, or breach of the Agreement, bill, charge, collect and deposit, or attempt to bill, charge, collect or receive any form of payment other than coinsurance, or non-covered Member financial responsibility services from any Member for Health Care Services provided pursuant to this Agreement. Clinic also agrees it shall not maintain any action at law or equity against a Member to collect sums owed by the RCHC program to CLINIC. If the RCHC program receives notice of any such surcharge or action upon a Member, the RCHC program shall take appropriate action, including but not limited to terminating this Agreement for cause and requiring that CLINIC provide the Member with an immediate refund of such surcharge.

- 4.6 In the event Clinic disagrees with any payment, denial, adjustment or contest made by the RCHC program, CLINIC has ninety (90) days to submit a written dispute to the RCHC program. Said dispute shall include all information necessary to verify and substantiate the dispute.
- 4.7 The obligations set forth in this Article 4 shall survive termination of this Agreement regardless of the cause giving rise to such termination and shall be interpreted for the benefit of Members.

5.0 TERM AND TERMINIATION:

- 5.1 TERM. The term of this Agreement shall commence on the (approval) of the COUNTY's agreement with Department of Health Care Services (DHCS), and shall remain in effect through December 31, 2013.
- 5.2 TERMINATION WITHOUT CAUSE. Either party may terminate this Agreement with or without cause by giving ninety (90) days prior written notice to the other party.
- 5.3 TERMINATION FOR CAUSE. This Agreement shall terminate immediately, upon RCHC program's written notice, in the event of the occurrence of any of the following:
- (1) CLINIC's failure to Provide Primary Care Services to Members as provided herein.
- (2) CLINIC's failure to maintain the standards as provided herein.
- (3) CLINIC's breach of any material term, covenant or condition of the Agreement.

(4) Revocation, suspension, or restriction of CLINIC's licenses, accreditation or certification required for the performance of the duties hereunder.

- (5) Failure by CLINIC to maintain adequate professional liability coverage, as provided herein.
- (6) Upon RCHC program's determination that CLINIC has engaged in a fraudulent activity against the RCHC program or Members.
- 5.4 In the event of termination of this Agreement, CLINIC shall continue to provide and be compensated for services under the terms of this Agreement to patients who have been authorized for treatment on the date of termination until the effective date of discharge of care or the safe transfer of such patients to another health care provider, or a period of ninety (90) days, whichever comes first.
- 5.5 NON-AVAILABILITY OF FUNDS. In the event of non-availability of COUNTY funds, this Agreement shall be deemed terminated and of no further force and effect immediately on receipt of COUNTY's notification to CLINIC. CLINIC shall continue to provide services to Members for the duration of the period for which payment has been made, as well as for inpatient admissions up until discharge, if funds are not available.
- 5.6 FEDERALLY QUALIFIED HEALTH CENTER. In the event of the CLINIC's designation as a Federally Qualified Health Center (FQHC) and/or FQHC look alike status be designated, COUNTY reserves the right to terminate the CLINIC agreement as noted above or to provide an amendment to

the agreement to reflect payment of CLINIC services/procedures at an all inclusive applicable PPS rate.

6.0 HOLD HARMLESS:

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CLINIC shall indemnify and hold harmless all Agencies, 6.1 Districts, Special Districts and Departments of the County of Riverside, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents and representatives from any liability whatsoever, based or asserted upon any services of CLINIC, its officers, employees, subcontractors, agents or representatives arising out of or in any way relating to this Agreement, including but not limited to property damage, bodily injury, or death or any other element of any kind or nature whatsoever and resulting from any reason whatsoever arising from the performance of CLINIC, its officers, agents, employees, subcontractors, agents or representatives from this Agreement; CLINIC shall defend, at its sole expense, all costs and fees including but not limited to attorney fees, cost of investigation, defense and settlements or awards of the County of Riverside, its Agencies, Districts, Special Districts and Departments, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents and representatives in any claims or action based upon such alleged acts or omissions.

6.2 With respect to any action or claim subject to indemnification herein by CLINIC, CLINIC shall, at their sole cost, have the right to use counsel of their own choice and shall have the right to adjust, settle, or compromise any such action or claim without the prior consent of COUNTY; provided, however, that any such adjustment, settlement or compromise in no manner whatsoever limits or circumscribes CLINICS's indemnification to COUNTY as set forth herein.

 CLINIC's obligation to defend, indemnify and hold harmless COUNTY shall be subject to COUNTY having given CLINIC written notice within a reasonable period of time of the claim or the commencement of the related action, as the case may be, and information and reasonable assistance, at CLINIC's expense, for the defense or settlement thereof.

CLINIC's obligation hereunder shall be satisfied when CLINIC has provided to COUNTY the appropriate form of dismissal relieving COUNTY from any liability for the action or claim involved.

- 6.3 The specified insurance limits required in this Agreement shall in no way limit or circumscribe CLINIC's obligation to indemnify and hold harmless the COUNTY herein from third party claims.
- 6.4 In the event there is conflict between this clause and California Civil Code Section 2782, this clause shall not be interpreted to comply with Civil Code 2782. Such interpretation shall not relieve the CLINIC from indemnifying the COUNTY to the fullest extent allowed by law.
- 6.5 Liability resulting from professional acts of the CLINIC shall be subject to the terms of Section 7.5, below.

7.0 <u>INSURANCE:</u>

7.1 Without limiting or diminishing the CLINIC'S obligation to indemnify or hold the HOSPITAL harmless, CLINIC shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance and/or self-insurance coverages during the term of this Agreement.

7.2 <u>WORKERS' COMPENSATION</u>

If the CLINIC has employees as defined by the State of California, the CLINIC shall maintain statutory Workers' Compensation Insurance (Coverage

A) and/or self-insurance as prescribed by the laws of the State of California. Policy shall include Employers' Liability (Coverage B) including Occupational Disease with limits not less than \$1,000,000 per person per accident. The policy shall be endorsed to waive subrogation in favor of The County of Riverside, and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

7.3 COMMERCIAL GENERAL LIABILITY

Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, products and completed operations liability, personal and advertising injury covering claims which may arise from or out of CLINIC'S performance of its obligations hereunder. Policy shall name all Agencies, Districts, Special Districts, and Departments of the County of Riverside, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents or representatives as Additional Insured. Policy's limit of liability shall not be less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this agreement or be no less than two (2) times the occurrence limit.

7.4 <u>VEHICLE LIABILITY</u>

If CLINIC'S vehicles or mobile equipment are used in the performance of the obligations under this Agreement, then CLINIC shall maintain liability insurance for all owned, non-owned or hired vehicles so used in an amount not less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this Agreement or be no less than two (2) times the occurrence limit. Policy shall name all Agencies, Districts, Special Districts, and Departments of the County of

Riverside, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents or representatives as Additional Insured.

7.5 PROFESSIONAL LIABILITY INSURANCE

CLINIC shall maintain Professional Liability insurance coverage for the CLINIC's performance of work included within this Agreement, with a limit of liability of not less than \$1,000,000 per occurrence and \$3,000,000 annual aggregate. If CLINIC's Professional Liability Insurance is written on a claims made basis rather than an occurrence basis, such insurance shall continue through the term of this Agreement and CLINIC shall purchase at his sole expense either 1) an Extended Reporting Endorsement (also known as Tail Coverage); or 2) Prior Dates Coverage from new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; 3) demonstrate through Certificates of Insurance that CLINIC has maintained continuous coverage with the same or original insurer. Coverage provided under items; 1), 2) or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

7.6 GENERAL INSURANCE PROVISIONS – ALL LINES

- 1) Any insurance carrier providing insurance coverage hereunder shall be admitted to the State of California and have an A M BEST rating of not less than A: VIII (A:8) unless such requirements are waived, in writing, by the County Risk Manager. If the County's Risk Manager waives a requirement for a particular insurer such waiver is only valid for that specific insurer and only for one policy term.
- 2) The CLINIC'S insurance carrier(s) must declare its insurance deductibles. If such deductibles or self-insured retentions exceed

\$500,000 per occurrence such deductibles and/or retentions shall have the prior written consent of the County Risk Manager before the commencement of operations under this Agreement. Upon notification of deductibles unacceptable to the COUNTY, and at the election of the Country's Risk Manager, CLINIC'S carriers shall either; 1) reduce or eliminate such deductibles as respects this Agreement with the COUNTY, or 2) procure a bond, which guarantees payment of losses and related investigations, claims administration, and defense costs and expenses.

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CLINIC shall cause CLINIC'S Insurance carrier(s) to furnish 3) the County of Riverside with either 1) a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein, or 2) if requested to do so orally or in writing by the County Risk Manager, provide original Certified copies of policies including all Endorsements and all attachments thereto, showing such insurance is in full force and effect. Further, said Certificate(s) and policies of insurance shall contain the covenant of the insurance carrier(s) that thirty (30) days written notice shall be given to the County of Riverside prior to any material modification, cancellation, expiration or reduction in coverage of such insurance. In the event of a material modification, cancellation, expiration, or reduction in coverage, this Agreement shall terminate forthwith, unless the County of Riverside receives, prior to such effective date, another properly executed original Certificate of Insurance and original copies of endorsements or certified original policies, including all endorsements and attachments thereto evidencing coverage's set forth herein and the insurance required herein is in full force and effect. CLINIC shall not commence operations until the COUNTY has been furnished original Certificate(s) of

Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section. An individual authorized by the insurance carrier to do so on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance.

- 4) It is understood and agreed to by the parties hereto and the insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the COUNTY'S insurance and/or deductibles and/or self-insured retention's or self-insured programs shall not be construed as contributory.
- 5) The COUNTY'S Reserved Rights--Insurance. If, during the term of this Agreement or any extension thereof, there is a material change in the scope of services; or, there is a material change in the equipment to be used in the performance of the scope of work (such as the use of aircraft or watercraft) the COUNTY reserves the right to adjust the types of insurance required under this Agreement and the monetary limits of liability for the insurance coverage's currently required herein, if; in the County Risk Manager's reasonable judgment, the amount or type of insurance carried by the CLINIC has become inadequate.
- 6) CLINIC shall pass down the insurance obligations contained herein to all tiers of subcontractors working under this Agreement.
- 7) The insurance requirements contained in this Agreement may be met with a program(s) of self-insurance acceptable to the COUNTY.

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8.0 RECORDS AND DOCUMENTS:

- 8.1 CLINIC shall make available, upon written request by duly authorized Federal, State or COUNTY agency, a copy of this Agreement and such books, documents and records as are necessary to certify the nature and extent of the costs of the services provided by CLINIC. CLINIC shall maintain books and records for at least five (5) years from the termination of this Agreement.
- 8.2 CLINIC agrees to provide the RCHC program with reports and information relative to this Agreement and in accordance with terms set forth herein, as may be requested by the RCHC Program.

9.0 CONFIDENTIALITY:

- 9.1 CLINIC agrees to protect from unauthorized disclosure names and other identifying information concerning either persons receiving services under this Agreement or persons whose names or other identifying information becomes known to CLINIC as a result of services performed under this Agreement, except statistical information not identifying any such person.
- 9.2 CLINIC shall not disclose, except as otherwise specifically permitted by this Agreement or authorized by the client or client's representative, any such identifying information to anyone other than authorized RCHC Program personnel without prior written authorization from the RCHC program.
- 9.3 For the purpose of this paragraph, "identify" shall include, but not be limited to, name, identifying number, symbol, or other identifying particular assigned to the individual, such as finger or voiceprint or photograph.
- 9.4 CLINIC shall observe all Federal, State and County laws and regulations and certifies compliance with Americans with Disabilities Act of 1990

(42 USC, Section 12100 et. seq.) the Drug Free Workplace Act of 1990 (Gov. Code Section 8355), the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Board Policy B-23.

10.0 DISCLOSURE FORM

CLINIC represents that Attachment D contains the names of all of the officers and directors of CLINIC, all of the stockholders owning more than 10 percent (10%) of the issued and outstanding stock of CLINIC and all major creditors holding more than 5 percent (5%) of the debt of CLINIC. CLINIC shall promptly notify RCHC of any and all changes in the information contained in Attachment D.

11.0 LICENSE:

- 11.1 CLINIC shall, through the Term of this Agreement, maintain all licenses necessary for the provision of the services hereunder and required by the laws and regulations of the United States, the State of California, County of Riverside, and all other governmental agencies. CLINIC shall notify the RCHC program immediately, in writing, of inability to obtain or maintain such license. Said inability shall be cause for termination of this Agreement.
- 11.2 CLINIC shall ensure that CLINIC'S employees, agents, and subcontractors performing services under the terms of this Agreement are in compliance with all relative licensing requirements. CLINIC hereby agrees to notify the RCHC program immediately, in writing, of inability of CLINIC or any of CLINIC's employees, agents and subcontractors to obtain or maintain such license(s). Said inability may be cause for termination of this Agreement.
- 11.3 COPY REQUIRED. A copy of each such license, permit, approval, waiver, exemption, registration, accreditation, and certificate shall be

11.4 Further, CLINIC hereby agrees to abide by the standards of the medical practice of the profession when performing services hereunder.

 12.0 NONDISCRIMINATION AND ELIGIBILITY:

- 12.1 The CLINIC shall not discriminate in the provision of services, allocation of benefits, accommodation in facilities, or employment of personnel, on the basis of ethnic group identification, race, color, creed, ancestry, religion, national origin, sexual preference, sex, age (over 40), marital status, medical attention, or physical or mental handicap, and shall comply with all other requirements of law regarding non discrimination and affirmative action including those laws pertaining to the prohibition of discrimination against qualified handicapped persons in all programs or activities.
- 12.2 For the purpose of this Agreement, distinctions on the grounds of race, religion, color, sex, national origin, age, or physical or mental handicaps include but are not limited to the following:
- 1. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or at a different time from that provided to other eligible persons under this Agreement.
- 2. Subjecting an eligible person to segregation or separate treatment in any matter related to receipt of any service, except when necessary for infection control.
- 3. Restricting an eligible person differently in any way in the enjoyment of any advantage or privilege enjoyed by others receiving similar service or benefit.

4. Treating an eligible person differently from others in determining whether he/she satisfied any eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar service or benefit.

5. The assignment of times or places for the provision of services on the basis of race, religion, color, sex, national origin, age, or physical or mental handicap of the eligible person to be served.

13.0 CONFLICT OF INTEREST:

CLINIC and CLINIC's employees shall have no interest, and shall not acquire any interest, direct or indirect, which will conflict in any manner or degree with the performance of services required under this Agreement.

14.0 ALTERATION:

The Board of Supervisors and the Riverside County Healthcare Governance Administrator or designee are the only authorized COUNTY representatives who may at any time, by written order, make alterations within the general scope of this contract, in the definition of services to be performed, and the time (i.e. hours of the day, days of the week, etc.) and place of performance thereof. If any such alteration causes an increase or decrease in the cost of, or the time required for the performance of any part of the work under this contract, an equitable adjustment shall be made in the contract price or delivery schedule, or both, and the contract shall be modified in writing accordingly. Any claim by the CLINIC for adjustment under this paragraph shall be assessed within thirty (30) days of when the CLINIC received notice of the alteration in the work. Notwithstanding the foregoing, if the COUNTY Representative decides that the facts provide sufficient justification, he/she may

receive and act upon any claim, which is asserted by the CLINIC at any time prior to final payment under this Agreement. However, nothing in this clause shall excuse the CLINIC from proceeding with the contract as changed.

15. ASSIGNMENT:

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CLINIC may not delegate the obligations hereunder, either in whole or in part, without prior written consent of the County Representative and the RCHC program provided, however, obligations undertaken by CLINIC pursuant to this Agreement may be carried out by means of subcontracts if approved by the RCHC program and the RCHC program's Governing Committee. Nο subcontract shall terminate or alter the responsibilities of the CLINIC to the RCHC program pursuant to this Agreement. CLINIC may not assign the rights hereunder, either in whole or in part, without prior written consent of the RCHC Any attempted assignment or delegation in derogation of this program. paragraph shall be void. A change in the business structure of CLINIC, including but not limited to, change in the majority ownership, change in the form of CLINIC'S business organization, management of CLINIC, CLINIC'S ownership of other business dealing with CLINIC under this Agreement, or filing of reorganization or bankruptcy by CLINIC, shall be deemed an assignment for purposes of this paragraph.

16.0 ADMINISTRATION:

The COUNTY Executive Officer or designee shall administer this Agreement on behalf of the COUNTY.

17.0 WAIVER:

Any waiver by the RCHC program of any breach of any one or more of the terms of this Agreement shall not be construed to be a waiver of any

subsequent or other breach of the same or of any other term thereof. Failure on the part of the COUNTY to require exact, full and complete compliance with any terms of this Agreement shall not be construed as in any manner changing the terms or stopping the RCHC program from enforcement hereof.

18.0 JURISDICTION, VENUE, ATTORNEY FEES:

This Agreement and interpretation as to the validity, performance and breach shall be construed under the laws of the State of California. Any legal action related to the Agreement shall be filed in the appropriate courts in the County of Riverside, State of California.

19.0 SEVERABILITY:

In the event any provision in this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remaining provisions will nevertheless continue in full force without being impaired or invalidated in any way.

20.0 CAPTIONS AND PARAGRAPH HEADINGS:

Captions and paragraph headings used in this Agreement are for convenience only and are not a part of this Agreement and shall not be used in construing this Agreement.

21.0 NOTICES:

All correspondence and notices required or contemplated by this Agreement shall be delivered to the respective parties at the addresses set forth below and are deemed submitted one day after their deposit in the United States mail, postage prepaid:

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COUNTY

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CLINIC:

Riverside County Regional Medical Center Desert AIDS Project 26520 Cactus Avenue Moreno Valley, CA 92555

Post Office Box 2890 Palm Springs, CA 92263

Or to such other address(es) as the parties may hereafter designate:

Independent Contractor 22.0

The CLINIC is, for purposes arising out of this contract, an 22.1 Independent Contractor and shall not be deemed an employee of the County. It is expressly understood and agreed that the CLINIC shall in no event, as a result of this Agreement, be entitled to any benefits to which COUNTY employees are entitled, including but not limited to, overtime, retirement benefits, Worker's Compensation benefits and injury leave or other leave benefits. CLINIC hereby holds COUNTY harmless from any and all claims that may be made against COUNTY based upon any contention by any third party that an employer-employee relationship exists by reason of this Agreement.

22.2 It is further understood and agreed by the parties hereto that CLINIC in the performance of its obligation hereunder is subject to the control or direction of COUNTY merely as to the result to be accomplished by the services hereunder agreed to be rendered and performed and not as to the means and methods for accomplishing the results.

23.0 Subcontract for Work or Services

No contract shall be made by the CLINIC with any party for furnishing any of the work or services contained herein without the prior written approval of the RCHC Program, but this provision shall not require the approval of contracts of employment between the CLINIC and personnel assigned for services hereunder, or for parties named in the proposal and agreed to under

any resulting contract.

24.0 Interest of CLINIC

The CLINIC covenants that it presently has no interest, including, but not limited to, other projects or independent contracts, and shall not acquire any such interest, direct or indirect, which would conflict in any manner or degree with the performance of services required to be performed under this Agreement. The CLINIC further covenants that in the performance of this Agreement, no person having such interest shall be employed or retained by it under this Agreement.

25.0 Conduct of CLINIC

- 1) The CLINIC agrees to inform the COUNTY of all the CLINIC'S interest, if any, which are or which the CLINIC believes to be incompatible with any interest of the COUNTY.
- 2) The CLINIC shall not, under circumstances, which might reasonably be interpreted as an attempt to influence the recipient in the conduct of his duties, accept any gratuity or special favor from individuals or organizations with whom the CLINIC is doing business or proposing to do business, in accomplishing the work under the contract.
- 3) The CLINIC shall not use for personal gain or make other improper use of privileged information, which is acquired in connection with this Agreement. In this connection, the term "privileged information" includes, but is not limited to, unpublished information relating to technological and scientific development; medical, personnel, or security records of the individuals; anticipated materials requirement or pricing actions; and knowledge of selection of CONTRACTORS or SUBCONTRACTORS in advance of official announcement.

The CLINIC or employees thereof shall not offer gifts, 4) gratuity, favors, and entertainment directly or indirectly to COUNTY employees. 26.0 Right to Acquire Equipment and Services 3 Nothing in this Agreement shall prohibit the RCHC program from acquiring the same type or equivalent services from other sources, when deemed by the RCHC program to be in its best interest. 7 27.0 Force Majeure Neither party shall be liable nor deemed to be in default for any 8 delay or failure in performance under this Agreement or other interruption of service or employment deemed resulting, directly or indirectly, from acts of God, acts of war, civil disorders, or other similar acts. 12 28.0 Entire Agreement This Agreement constitutes the entire agreement of the parties 13 hereto with respect to its subject matter and supersedes all prior and 14 contemporaneous representations, proposals, discussions and communications, 15 whether oral or in writing. This contract may be modified only in writing and 16 shall be enforceable in accordance with its terms when signed by each of the 17 18 parties hereto. IN WITNESS WHEREOF, the undersigned have executed this Agreement as set 19 forth below: 20 CLINIC COUNTY: 21 22 Approved: 23 County of Riverside 24 By: Chief Executive Officer 25 John Tavaglione Chair. Board of Supervisors Date: <u> 2-11-2012</u>

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Date: _

1 Attachment "A" 2 PRIMARY CARE SERVICES 3 The list below outlines services to be provided by the CLINIC at no additional 4 charge to Member under this Agreement and for services not covered by the 5 Program. In the event that CLINIC needs to provide Health Care Services that fall outside this list, CLINIC must receive prior authorization from the RCHC 6 program: 7 8 Routine Office Visits • Evaluation, diagnosis and treatment of illness or injury 9 Health Education and Wellness • Preventive services 10 Periodic Health Assessments including hearing, vision, lab testing Routine pelvic examinations with PAP smears 11 Initial management of gynecological conditions 12 • Any other medical services or procedures normally provided in a primary care setting 13 <u>Injections</u> 14 Administration of injections Adult Immunizations 15 16 Minor Office Procedures Incision and drainage 17 Excision of minor lesions including debridement of eschar Wart removal 18 Burns-local treatment Excision of malignant lesions 19 Incision and removal of foreign body 20 Avulsion/Excision of toenail Removal of foreign body from eye 21 Urethral cauterization (foley) Spirometry 22 Pure tone screening/audiometry (air only) 23 Tympanogram

Electrocardiogram with interpretation and report

Simple repair of superficial wounds

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Biopsy of skin

1 2 3	 Rhythm strip Application & reapplication of dressing Removal of sutures Irrigation of Ears
	Short arm and Short leg castings
4567	 In-Office Laboratory Interpretation of laboratory results Routine office laboratory services i.e. urine pregnancy test, hematocrit, urine dipstick for sugar, acetone, bilirubin and protein, stool for occult blood, fingerstick for random blood sugar, rapid strep
8 9 10	Miscellaneous Dressing and other routine medical supplies Venipuncture, specimen collection Reference laboratory services
11 12	Referral of Patients Referrals to appropriate specialists or ancillary services, as medically necessary
13 14 15 16 17 18 19 20 21 22 23	Examples of non-covered services Attendant Care Homemaker services Food & Nutrition Products Routine Dental Care Social Services Wellness Programs Mental Health and Substance Abuse Counseling
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Attachment "B" Compensation

The RCHC Program will reimburse CLINIC the following all inclusive rate for services/procedures performed in the CLINIC's and provided to Members during the course of the visit, pursuant to this Agreement.

Seventy dollars (\$70.00) per visit

All services are considered inclusive of any social, transportation or other supplemental or technical fees charged by CLINIC.

Attachment "C" 1 **Data Reporting** 2 3 On a quarterly basis CLINIC agrees to: CLINIC shall use its best efforts to provide the RCHC program laboratory result 4 data for selected common laboratory tests to include the data elements as listed 5 below. Lab data may be supplied from an Electronic Medical Record, disease 6 registry or other data system, as applicable. 7 Laboratory-reported test results for the clinical tests listed below 8 9 Hemoglobin A1C t Fasting Blood Glucose 10 Lipid Panel or components thereof when ordered separately, including: Cholesterol (total, LDL, HDL), Triglycerides 11 Renal Function Panel or components thereof when ordered separately, including: Urine Microalbumin, Creatinine 12 Laboratory - Reported Test Results Data Elements 13 14 Unique Enrollee ID Number Date of Service 15 Lab Test Name CPT Code 16 Lab Result Value 17 CLINIC shall use its best efforts to provide Patient Satisfaction Surveys 18 that are completed for services provided in the CLINIC. 19 20 On a semi annual basis CLINIC agrees to: 21 CLINIC shall use its best efforts to comply compliance training to its 22 employees and clinical staff annually and provide reports of such training on a bi-annual basis to the RCHC Program Compliance Subcommittee. 23

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1	Attachment "D"						
2	OFFICERS AND OWNERS						
3	DISCLOSURE FORM						
4	OFFICERS, OWNERS, STOCKHOLDERS, CREDITORS OF CLINIC						
5	OTT TOLING, OTTO MILES DE LOS DELOS DE LOS DELOS DE LOS DELOS DE LOS DELOS DE LOS DE L						
6	List, by category, all of the above:						
7	<u>Name</u>	<u> Title</u>		ship % olicable)	Category		
8	1. Curtis Ringness Ir	· Board Cl	,	0%	officer		
9	2. Steve Lachs	Vice ch	air	070	officer		
10	3. Fred Drewette	Treasu	rer	0%	officer		
11	4. Tammy Fox						
12	5. David Brinkman			0%	officer		
13	6. Mary Park	CFO		0%	officer		
14	7.			Ji			
15	8. 9.						
16	10.						
17	11.						
18	12.						
19	*If corporation is publicly traded on a US stock market, indicate "Publicly						
20	Traded Corp"						
21	Please indicate how your organization is legally organized (circle one):						
22	Portners		aerehin		Sole Proprietorship		
23	Corporation Partnership				Colo i ropilotoromp		
24	Other (please describe): 501(c)(3) non-profit						
25							