

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

430A



FROM: Human Resources Department

SUBMITTAL DATE:
May 26, 2010

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

RECOMMENDED MOTION: 1) Ratify and approve the attached First Amendment from June 1, 2010 until June 30, 2013, with Inland Empire Medical Imaging a radiology provider located in San Bernardino; 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.

Barbara A. Olivier
Barbara A. Olivier
Asst. County Executive Officer/Human Resources Dir.

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 0	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	No
	Annual Net County Cost:	\$ to be determined by claims	For Fiscal Year:	2009/10

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: *Karen L. Johnson*
Karen L. Johnson
County Executive Office Signature

- Policy
- Policy
- Consent
- Consent

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Stone, seconded by Supervisor Buster and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Buster, Tavaglione, Stone, Benoit and Ashley
Nays: None
Absent: None
Date: July 13, 2010
xc: HR

Kecia Harper-Ihem
Clerk of the Board
By: *Kecia Harper-Ihem*
Deputy

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

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

3.56

FORM APPROVED COUNTY COUNSEL
BY: *Neal R. Kipnis*
NEAL R. KIPNIS
DATE: 6/1/10
Departmental Concurrence

BACKGROUND continued:

This Provider has completed the Exclusive Care credentialing process which includes all appropriate medical licensure, public records, consumer complaints, business license, and lien verifications. The legal contracting entity has been verified with the W9 and/or the California Business Portal or Business License. This Amendment continues Inland Empire Medical Imaging participation in the Exclusive Care Provider Network with new rates and services similar to other comparable providers under contract.

**FIRST AMENDMENT TO THE
RIVERSIDE COUNTY – EXCLUSIVE CARE
EXCLUSIVE PROVIDER ORGANIZATION
MEDICAL CONTRACTOR AGREEMENT**

By and Between

The County of Riverside, State of California

And

Inland Empire Medical Imaging

The Medical Contractor Agreement (“Agreement”) between the County of Riverside, State of California (“County”) and Inland Empire Medical Imaging (“Contractor”) for health care services effective July 1, 2008 through June 30, 2013 for Exclusive Care enrollees, is hereby amended effective June 1, 2010 as follows:

1. Attachment 2 **COMPENSATION**, as amended, is deleted in its entirety, and replaced with the following:

Reimbursement of the Exclusive Care Provider Organization, Exclusive Care, established by the County of Riverside for employees and their dependents, for prior authorized covered services, shall be payable by County at the following rates:

PET Scans	\$1,250.00
PET/CT	\$1,250.00
CT without contrast	\$ 230.00
CT with contrast	\$ 285.00
CT with and without contrast	\$ 330.00
MRI without contrast	\$ 325.00
MRI with contrast	\$ 410.00
MRI with and without contrast	\$ 435.00

Ultrasounds shall be reimbursed at 90% of current Medicare allowable for locality 99

All other authorized services shall be paid at 70% of the current year’s Medicare allowable for locality 99.

Services authorized but not covered by the Medicare Fee Schedule shall be reimbursed at 60% (sixty percent) of billed charge.

Contractor is responsible for collecting the co-payment.

The above rates are for all applicable CPT codes without exception.

2. All other terms and conditions of the Agreement shall remain in full force and effect.

Contractor certifies that the individual signing below has authority to execute this First Amendment on behalf of Contractor, and may legally bind Contractor to the terms of conditions of this Third Amendment.

IN WITNESS WHEREOF, the parties hereto have cause their duly appointed representatives to execute this First Amendment to the Medical Contractor Agreement for EPO Services for Riverside County.

ATTEST:

Clerk to the Board
Kecia Harper-Ihem

COUNTY OF RIVERSIDE

By: *Kecia Harper-Ihem*
Deputy

By: *Marion Ashley*
Chairman, Board of Supervisors **MARION ASHLEY**

Date JUL 1 3 2010

Date JUL 1 3 2010

Approved as to form and content:

Pamela J. Walls
County Counsel

FORM APPROVED COUNTY COUNSEL
BY: *Neal R. Kipnis* DATE 01/16/10
NEAL R. KIPNIS

By: _____
Deputy County Counsel

CONTRACTOR: Inland Empire Medical Imaging

By: *Sonna Schaefer*

Printed Name: SONNA SCHAEFER

Title: ADMINISTRATOR

Date: 5/14/10