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



FROM: Human Resources Department

SUBMITTAL DATE: March 10, 2011

SUBJECT: Exclusive Care - EPO First Amendment to the Medical Contractor Agreement with Retina Consultants of Southern California Medical Associates, Inc.

RECOMMENDED MOTION: 1) Ratify and approve the attached First Amendment from April 1, 2011 until May 31, 2013, with Retina Consultants of Southern California Medical Associates, Inc.; 2) authorize the Chairperson to sign three (3) copies of the attached Agreement and; 3) retain one (1) copy of the signed Agreement and return two (2) copies to Human Resources for distribution.

Provider Option	In 1999, the Board of S (EPO) health plan, Excl	usive Care, to provide	a value health	plan option	to the	
	verside County and thei as contracted with a varie				mbers,	
			<u> </u>			
		Shawn Atin, Asst. Hui Barbara A. Olivier	man Resources	Director for		
		Asst. County Executive	re Officer/Humar	n Resources	Dir.	
	Current F.Y. Total Cost:	\$ 0	In Current Year	Budget:	N	ю
FINANCIAL	Current F.Y. Net County Cost:	\$ 0	Budget Adjustm	ent:	N	10
DATA	Annual Net County Cost:	\$ to be determined by claims	For Fiscal Year:		2010	//11
SOURCE OF FU	NDS: Premiums paid by	members		Position: Deleted P	i i	
		*		Requires 4	I/5 Vote	
C.E.O. RECOMN	IENDATION:	A DDDOVE				
	vo Office Signature	APPROVE BY Company Co	nn	4.7		

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes:

Policy

 \boxtimes

Consent

Dep't Recomm.:

Exec. Ofc.

Policy

×

Consent

Buster, Stone, Benoit and Ashley

Nays:

None

Absent:

Tavaglione

Date:

March 29, 2011

xc:5011 1475 5 HRS 5. 13

Prev. Agn. Ref.:

District: ALL

Agenda Number:

Kecia Harper-Ihem

G:\EXEC\Form 11\EPO Provider (Interpretation) The mace of February Rolls and February Rol

Form 11 - Retina Consultants of SC Med. Assoc. Inc. – First Amendment March 10, 2011
Page 2

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 Retina Consultants of Southern California Medical Associates' participation in the Exclusive Care Provider Network with new rates 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

Retina Consultants of Southern California Medical Associates, Inc.

The Medical Contractor Agreement ("Agreement") between the County of Riverside, State of California ("County") and Retina Consultants of Southern California Medical Associates, Inc., ("Contractor") for health care services effective June 1, 2009 until May 31, 2013 for Exclusive Care enrollees, is hereby amended effective April 1, 2011 as follows:

- 1. Attachment 2 Compensation shall be terminated and replaced in its entirety as attached hereto.
- 2. All other terms and conditions of the Agreement shall remain in full force and effect.
- 3. Contractor certifies that the individual signing this amendment has authority to execute this First Amendment on behalf of Contractor, and may legally bind Contractor to the terms of conditions of this First 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	COUNTY OF RIVERSIDE
Kecia Harper-Ihem By Deputy	By <u>Job Bustu</u> Chairman, Board of Supervisors
Date	DateMAR 2 9 2011
Approved as to form and content:	
Pamela J. Walls County Counsel	
By: Deputy County Counsel	
· · · · · · · · · · · · · · · · · · ·	
CONTRACTOR: / Person D. Pesave	fo m
Printed Name: Richard D. Pesave	ento, M.D.
Title: President	
February 1 2011	

Attachment 2 Compensation

Reimbursement by Exclusive Care for authorized covered services, shall be payable by County at the following Medicare rates for the current year Medicare allowable for locality 99.

Professional Services shall be reimbursed at 110% (one hundred and ten percent)

Injections shall be reimbursed at 100% (one hundred percent) all inclusive of medications

Contractor is responsible for collecting deductibles, co-payments, and coinsurance amount from Members receiving Covered Services.

7.25.11 2.25.17 2.25.17

Provider Network Change Request

Provider Name	Specialty	Area	New	Change	Date	Requested rate
Retina Consultants of SC	Retina Specialists	Riverside/Rancho		XXXX	12/20/2010	12/20/2010 110% of Medicare
		Mirage, LL				
Number of like providers in area	Sub-Specialty					
one - but not all the same area						
Currently contracted providers only:						
Effective date of current contract include from and to dates	Initial rate of the current contract	requested rate	% difference	standard rate for provider type	% difference	
6/1/2008-5/31/2013	100% of Medicare	120% of Medicare	20%	100%		
Quantitative Information "report of other like providers to include reimbursement rate(s), utilization level(s) and other pertinent information 1. This group was requesting 120% of Medicare for all services except the injections which would remain at 100% of Medicare. 2. They will accept 110% of Medicare for all professional services and the injections would remain at 100% of Medicare. 3. This group has offices in Riverside, Rancho Mirage, Loma Linda and Victorville, 4. Both physicians in this group have privileges at LLU 5. The other like provider has 2 offices in the desert and one in Riverside and they are reimbursed at 100% of Medicare. 6. This is one of the specialties that when a member needs services it can be emergent so in order to keep all of the service covered both groups are needed.	providers to include reimbulicare for all services except II professional services and cho Mirage, Loma Linda and ages at LLU ie desert and one in Riversit member needs services it	ursement rate(s), utilic the injections which the injections would rate injections would rate injections would rate injections would rate injections and they are reimbared by the sementagent so it is a seme	zation level(s) a would remain a emain at 100% pursed at 100% n order to keep	and other pe it 100% of M of Medicar of Medicar	rrinent inform: fledicare. e e evice covered	ation
Recommendation 1: By: Sue 1. Upon approval by the EC Plan Manager and reimbursement and 100% of M/Care for locality	and Medical Director amend the current contract to 110% of M/Care for locality 99 for professional ality 99 for the injections through the term of the contract.	d the current contract ough the term of the	to 110% of M/ contract.	Care for loc	ality 99 for pro	fessional
Recommendation 2: By:1/18/11-DeNeen Culberson Agreed.	ulberson					
Approve addition to network up to requested reimbursement rate	equested reimbursement ra		Deny Network Participation at this time	ipation at th	s time	
Approve termination and Member move if applicable	nove if applicable	Other				· · · · · · · · · · · · · · · · · · ·
Medical Director: The Angel		Date: 1/2/2	110			
Plan Manager:		Date: 746/		***************************************	-	