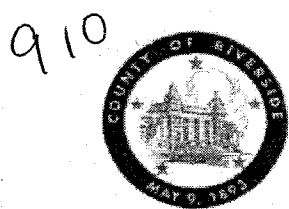


**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**FROM:** Executive Office

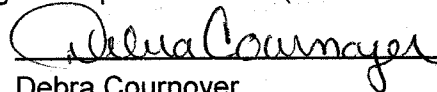
**SUBMITTAL DATE:**  
December 18, 2012

**SUBJECT:** Amendment to the Third Party Administrator Agreement with Inland Empire Health Plan for the Low Income Health Program

**RECOMMENDED MOTION:**

- 1) Ratify the amendment to the Third Party Administration Agreement with Inland Empire Health Plan for the Low Income Health Program effective August 1, 2012;
- 2) Authorize the Chairperson to sign four (4) copies of the amendment; and
- 3) Direct the Clerk of the Board to return all four (4) copies of the signed originals to Riverside County Regional Medical Center Administration. Upon final execution by the Inland Empire Health Plan Governing Board, a fully executed amendment will be returned to the Clerk of the Board.

**BACKGROUND:** On July 26, 2011 agenda item no 3.2, the Board of Supervisors approved the Third Party Administrator Agreement with Inland Empire Health Plan (IEHP) to provide administrative services in support of the Low Income Health Program implementation. (Continued on Page 2)

  
 Debra Cournoyer,  
 Deputy County Executive Officer

<b>FINANCIAL DATA</b>	<b>Current F.Y. Total Cost:</b>	\$ 0	<b>In Current Year Budget:</b>	Yes
	<b>Current F.Y. Net County Cost:</b>	\$ 0	<b>Budget Adjustment:</b>	No
	<b>Annual Net County Cost FY:</b>	\$ 0	<b>For Fiscal Year:</b>	12/13

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

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

**APPROVE**

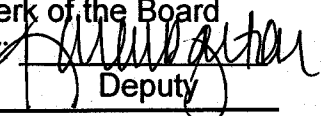
County Executive Office Signature BY:   
Christopher M. Hans

- Policy
- Policy
- Consent
- Consent
- Dep't Recomm.:
- Per Exec. Ofc.:

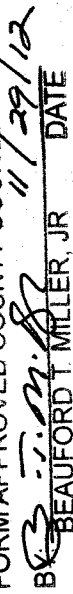
**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Stone, seconded by Supervisor Tavaglione 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: December 18, 2012  
 xc: EO, RCRMC

Kecia Harper-Ihem  
 Clerk of the Board  
 By:   
 Deputy

Prev. Agn. Ref.: 3.2, 7/26/2011 | District: All | Agenda Number:

FORM APPROVED COUNTY COUNSEL  
 BY:  11/29/12  
 BEAUFORD T. MILLER, JR. DATE  
 Departmental Concurrence

**SUBJECT:** Amendment to the Third Party Administrator Agreement with Inland Empire Health Plan for the Low Income Health Program

**Page 2**

**BACKGROUND:** (Continued)

This first amendment is a result of the change in vendors by IEHP for their 24/7 Nurse Advise Line to Nurse Response. The cost for to the Riverside County Health Care (RCHC) Program is a vendor pass through cost from the IEHP contract rate with this vendor. Nurse Response will provide client activity reports to RCHC for its membership.

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

CLERK'S COPY

to Riverside County Clerk of the Board, Stop 2016  
Post Office Box 1147, Riverside, Ca 92502-1147  
Thank you.

FIRST AMENDMENT

TO THE PROFESSIONAL SERVICES AGREEMENT

BETWEEN

INLAND EMPIRE HEALTH PLAN

AND

COUNTY OF RIVERSIDE THROUGH RIVERSIDE COUNTY HEALTHCARE

WHEREAS, the Inland Empire Health Plan ("IEHP"), IEHP Health Access ("Health Access") (known collectively as "IEHP Health Plan"), and the County of Riverside, through its Low Income Health Program, RIVERSIDE COUNTY HEALTHCARE ("PROVIDER") agree to amend the Professional Services Agreement, between them dated June 1, 2011 (the "Agreement");

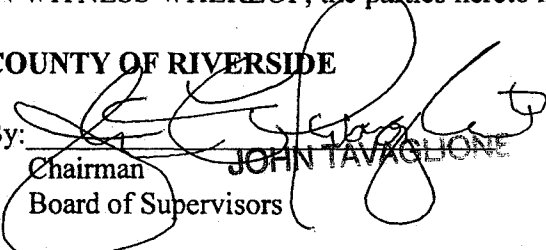
NOW THEREFORE, the parties agree as follows:

- A. The section contained on the last page of Exhibit A, titled Description of Services (Optional), is hereby deleted and replaced as attached hereto (See amended section of Exhibit A, Description of Services (Optional)). The remaining provisions of Exhibit A shall remain in full force and effect.
- B. Notwithstanding the date of execution, unless otherwise referenced, this First Amendment shall be effective August 1, 2012.
- C. All other terms and conditions of the Agreement are to remain in full force and effect.
- D. PROVIDER certifies that the individual signing herein has authority to execute this Amendment on behalf of PROVIDER, and may legally bind PROVIDER to the terms and conditions of this Amendment, and any attachments hereto.

(THE BALANCE OF THIS PAGE INTENTIONALLY LEFT BLANK)

IN WITNESS WHEREOF, the parties hereto have signed this Amendment as set forth below.

**COUNTY OF RIVERSIDE**

By:   
Chairman **JOHN TAVAGLIONE**  
Board of Supervisors

Date: \_\_\_\_\_

**INLAND EMPIRE HEALTH PLAN:**

By: \_\_\_\_\_  
Bradley P. Gilbert, M.D.  
Chief Executive Officer

Date: \_\_\_\_\_

APPROVED AS TO CONTENT:  
RIVERSIDE COUNTY HEALTHCARE

By: \_\_\_\_\_  
Chief Executive Officer

Date: \_\_\_\_\_

By: \_\_\_\_\_  
Chairperson  
Inland Empire Health Plan  
Governing Board


Date: \_\_\_\_\_

Attest: \_\_\_\_\_  
Secretary  
Inland Empire Health Plan

Date: \_\_\_\_\_

**FORM APPROVED COUNTY COUNSEL**

By:  11/29/12  
BEAUFORD T. MILLER, JR. DATE

ATTEST  
KECIA HARPER-JHEM, Clerk  
By:   
DEPUTY

Approved as to Form:

By: \_\_\_\_\_  
Jinny R. Yang  
Staff Counsel for Inland Empire Health Plan

Date: \_\_\_\_\_

**EXHIBIT A**

**Description of Services (Optional)**

**24/7 Nurse Advice Line Services through Nurse Response**

RCHC agrees to reimburse IEHP for 24/7 Nurse Advice Line services from Nurse Response for the RCHC Low Income Health Program (as a vendor pass through cost) through IEHP's contract with Nurse Response. IEHP shall pass through the monthly invoice costs associated with Nurse Response services to RCHC in its monthly TPA service invoicing. RCHC will establish, at its own expense, a separate toll free phone line dedicated for nurse advice line services. Nurse Response shall provide the basic reporting services in the Client Activity Report, Disposition Demographics Report and the Triage Utilization Report. The following rates apply to the RCHC program.

<u>Nurse Triage Service Fee</u>	\$0.19 PMPM
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