# BY: NEAL R. KIPNIS DATE Departmental Concurrence

nasing: Mark Seller, Assistant Direc

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

669



SUBMITTAL DATE: April 30, 2014

SUBJECT: Approve the five year Agreement between County of Riverside and Quest Diagnostics for various County Departments for other than low bid. All Districts (\$11,034,785)

**RECOMMENDED MOTION:** That the Board of Supervisors:

FROM: Riverside County Regional Medical Center

1. Approve the Agreement between Quest Diagnostics and the various County Departments; Public Health, Riverside County Regional Medical Center, Detention Health, Riverside County Healthcare System, Department of Mental Health, Occupational Health, and Probation Department's for an annual aggregate amount of \$2,206,957 effective July 1, 2014 through June 30, 2015, with the option to renew for four years, in one year increments; and,

Authorize the Purchasing Agent in accordance with Ordinance No. 459 to sign amendments that do not change the substantive terms of the agreement, including amendments to compensation

provision that do not exceed CPI rates.

(continued on next page)

Lowell Johnson, Interim CEO

FINANCIAL DATA	Curren	t Fiscal Year:	Next Fisc	al Year:	Total C	ost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$	2,206,957	\$	2,206,957	\$	11,034,785	\$	Consent □ Policy 😾
NET COUNTY COST	\$	307,000	\$	307,000	\$	1,535,000	\$	Consent □ Policy X
SOURCE OF FUNDS:		Depa	artment Budgets		Budget A	djustment:		
							For Fisca	il Year: 14/15
C.E.O. RECOMME	NDA	TION:		APPF	ROVE			
						Λ		

County Executive Office Signature

BY Debra Cournoyer

Debra Cournoyer

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes:

Jeffries, Stone, Benoit and Ashley

Nays: Absent: None Tavaglione

Date:

June 3, 2014

xc:

RCRMC, Purchasing

Prev. Agn. Ref.: 1/29/08 3.42 5/10/11 3.27 7-16-13 3-48

District: All

Agenda Number:

Deputy

Kecia Harper-Ihem

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA FORM 11: Approve the five year Agreement between County of Riverside and Quest Diagnostics for various County Departments for other than low bid. All Districts (\$11,034,785)

**DATE:** June 3, 2014

**PAGE: 2 of 2** 

#### **BACKGROUND:**

#### **Summary**

The Department of Public Health, Riverside County Healthcare System, Department of Mental Health, Riverside County Regional Medical Center, Department of Social Services and the Probation Department routinely use laboratory services not performed by the County's in-house testing laboratories due the complexity of the required tests involved. The service agreement covers services such as stat fees, pick-up and delivery of samples, consultation, esoteric testing, field support, drug testing and phlebotomy services, and provides for tests performed per Medi-Cal Managed Care capitation rates.

The County issued a bid last year, RFQ PUARC1271, for lab testing services, however, was canceled due to lack of bid responses received. Therefore, in August 2013, County Purchasing reissued the bid. Purchasing contacted the potential laboratory companies to solicit bid responses and did receive 3 bid responses, Quest Diagnostics, Primex, and Redwood Toxicology. Central Purchasing suggested Quest Diagnostics receive the award as the lowest bidder. However, RCRMC's consultant, Huron reviewed the three bid results, and analyzed the County's internal laboratory testing requirements countywide.

Huron's conclusion was that some of the testing and services that are currently being provided by the contracting laboratories could be performed internally by the County's laboratories. Per Huron's request, County Purchasing canceled the bid a second time, RFP PUARC-1271-A.

The third bid was released by County Purchasing, Request for Proposal (RFP) PUARC-1337, in February 2014, at the request of Huron, on behalf of the Department of Public Health, Riverside County Healthcare System, Department of Mental Health, Riverside County Regional Medical Center, Department of Social Services, Probation Department and Huron to obtain competitive proposals from qualified bidders. RFP's were sent to twenty-one (21) potential bidders and advertised on the County Purchasing website.

#### **Price Reasonableness**

Four (4) responses were received and evaluated according to the criteria listed in the RFP including: overall responsiveness and understanding to the RFP requirements, experience and ability, cost/fees, references, financials, clarification, exception, deviation and credentials, resumes, licenses, and certifications. The evaluation committee was made up of representatives from Huron, Department of Public Health, Riverside County Healthcare System, Riverside County Regional Medical Center, Department of Social Services and the Probation Department. When comparing all commonly bid tests, the bid ranges were \$2,064,681 to \$2,206,957. With the services being provided by Quest Diagnostics the County will save approximately \$900,000 annually over the previous year's prices. The Huron/RCRMC evaluation committee determined that the transition costs of approximately \$75,000 per month in higher costs until the transition is complete, and staff programming and implementation time needed associated with changing vendors outweighs the lower per test price and therefore the recommendation is to stay with Quest Diagnostics, the incumbent as the most responsible bidder.

#### **Impact on Citizens and Businesses**

Services provide care and treatment for citizens throughout the County.

#### SUPPLEMENTAL:

#### **Additional Fiscal Information**

Funding for this agreement will come from: Riverside County Regional Medical Center, Occupational Health, Detention Health Services, Healthcare System, Department of Public Health, Department of Mental Health, and the Probation Department. Departments have sufficient funding in FY 13/14 budgets to cover services. No additional NCC is necessary at this time. Departments will include funding in future year budgets.

# PROFESSIONAL SERVICE AGREEMENT

for

# **COUNTY WIDE LAB SERVICES**

between

## **COUNTY OF RIVERSIDE**

and

# UNILAB CORPORATION- DBA QUEST DIAGNOSTICS



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This Agreement, made and entered into this \_\_\_\_\_day of \_\_\_\_\_\_, 2014, by and between UNILAB CORPORATION- DBA QUEST DIAGNOSTICS, (herein referred to as "CONTRACTOR"), and the COUNTY OF RIVERSIDE, a political subdivision of the State of California, (herein referred to as "COUNTY"). The parties agree as follows:

#### 1. Description of Services

- 1.1 CONTRACTOR shall provide all services as outlined and specified in Exhibit A, Scope of Services, consisting of eighteen (18) pages at the prices stated in Exhibit B, Fees, consisting of thirty (30) pages, and Attachment I, HIPAA Business Associate Attachment to the Agreement, consisting of ten (10) pages.
- 1.2 CONTRACTOR represents that it has the skills, experience, and knowledge necessary to perform under this Agreement and the COUNTY relies upon this representation. CONTRACTOR shall perform to the satisfaction of the COUNTY and in conformance to and consistent with the highest standards of firms/professionals in the same discipline in the State of California.
- 1.3 CONTRACTOR affirms this it is fully apprised of all of the work to be performed under this Agreement; and the CONTRACTOR agrees it can properly perform this work at the prices stated in Exhibit B. CONTRACTOR is not to perform services or provide products outside of the Agreement.
- 1.4 Acceptance by the COUNTY of the CONTRACTOR's performance under this Agreement does not operate as a release of CONTRACTOR's responsibility for full compliance with the terms of this Agreement.

#### 2. Period of Performance

2.1 This Agreement shall be effective upon signature of this Agreement by both parties and continue in effect through June 30, 2015, with the option to renew for four years, each year shall be renewable in one year increments by written amendment, unless terminated earlier. CONTRACTOR shall commence performance upon signature of this Agreement by both parties and shall diligently and continuously perform thereafter. The Riverside County Board of Supervisors is the only authority that may obligate the County for a non-cancelable multi-year agreement.

#### 3. Compensation

3.1 The COUNTY shall pay the CONTRACTOR for services performed, products provided and expenses incurred in accordance with the terms of Exhibit B, Payment Provisions. Maximum payments by COUNTY to CONTRACTOR shall not exceed two million two hundred six thousand nine hundred fifty seven dollars (\$2,206,957) annually including all expenses. The COUNTY is not responsible for any fees or costs incurred above or beyond the contracted amount and shall have no obligation to purchase any

specified amount of services or products. Unless otherwise specifically stated in Exhibit B, COUNTY shall not be responsible for payment of any of CONTRACTOR's expenses related to this Agreement.

- 3.2 No price increases will be permitted during the first year of this Agreement. All price decreases (for example, if CONTRACTOR offers lower prices to another governmental entity) will automatically be extended to the COUNTY. The COUNTY requires written proof satisfactory to COUNTY of cost increases prior to any approved price adjustment. After the first year of the award, a minimum of 30-days advance notice in writing is required to be considered and approved by COUNTY. No retroactive price adjustments will be considered. Any price increases must be stated in a written amendment to this Agreement. The net dollar amount of profit will remain firm during the period of the Agreement. Annual increases shall not exceed the Consumer Price Index- All Consumers, All Items Greater Los Angeles, Riverside and Orange County areas diagnostic lab services and be subject to satisfactory performance review by the COUNTY and approved (if needed) for budget funding by the Board of Supervisors.
- 3.3 CONTRACTOR shall be paid only in accordance with an invoice submitted to COUNTY by CONTRACTOR within fifteen (15) days from the last day of each calendar month, and COUNTY shall pay the invoice within thirty (30) working days from the date of receipt of the invoice. Payment shall be made to CONTRACTOR only after services have been rendered or delivery of materials or products, and acceptance has been made by COUNTY. Prepare invoices in duplicate. For this Agreement, send the original and duplicate copies of invoices to:

Public Health Agency 4065 County Circle Drive Riverside, CA 92503 Attn: Fiscal Department

Riverside County Regional Medical Center 26520 Cactus Avenue Moreno Valley, CA 92555 Attn: Fiscal Department

> Mental Health Agency 4095 County Circle Drive Riverside, CA 92503 Attn: Fiscal Department

Riverside County Occupational Health 14375 Nason St. Suite 101, Moreno Valley, CA 92555

# Probation Department Administration PO Box 833 Riverside, CA 92502 Attn: Fiscal Services

Each invoice shall contain a minimum of the following information: invoice number and date; remittance address; bill-to and ship-to addresses of ordering department/division; Agreement number (RIVCO-96148-001-06/15); quantities; item descriptions, unit prices, extensions, sales/use tax if applicable, and an invoice total.

- a) Invoices shall be rendered monthly in arrears.
- 3.4 The COUNTY obligation for payment of this Agreement beyond the current fiscal year end is contingent upon and limited by the availability of COUNTY funding from which payment can be made. No legal liability on the part of the COUNTY shall arise for payment beyond June 30 of each calendar year unless funds are made available for such payment. In the event that such funds are not forthcoming for any reason, COUNTY shall immediately notify CONTRACTOR in writing; and this Agreement shall be deemed terminated, have no further force, and effect.

# 4. Alteration or Changes to the Agreement

- 4.1 The Board of Supervisors and the COUNTY Purchasing Agent and/or his designee is the only authorized COUNTY representatives who may at any time, by written order, alter this Agreement. If any such alteration causes an increase or decrease in the cost of, or the time required for the performance under this Agreement, an equitable adjustment shall be made in the Agreement price or delivery schedule, or both, and the Agreement shall be modified by written amendment accordingly.
- 4.2 Any claim by the CONTRACTOR for additional payment related to this Agreement shall be made in writing by the CONTRACTOR within 30 days of when the CONTRACTOR has or should have notice of any actual or claimed change in the work, which results in additional and unanticipated cost to the CONTRACTOR. If the COUNTY Purchasing Agent decides that the facts provide sufficient justification, he may authorize additional payment to the CONTRACTOR pursuant to the claim. Nothing in this section shall excuse the CONTRACTOR from proceeding with performance of the Agreement even if there has been a change.

# 5. <u>Termination</u>

5.1. COUNTY may terminate this Agreement without cause upon 30 days written notice served upon the CONTRACTOR stating the extent and effective date of termination.

- 5.2 COUNTY may, upon five (5) days written notice terminate this Agreement for CONTRACTOR's default, if CONTRACTOR refuses or fails to comply with the terms of this Agreement or fails to make progress that may endanger performance and does not immediately cure such failure. In the event of such termination, the COUNTY may proceed with the work in any manner deemed proper by COUNTY.
  - 5.3 After receipt of the notice of termination, CONTRACTOR shall:
    - (a) Stop all work under this Agreement on the date specified in the notice of termination; and
    - (b) Transfer to COUNTY and deliver in the manner as directed by COUNTY any materials, reports or other products, which, if the Agreement had been completed or continued, would have been required to be furnished to COUNTY.
- 5.4 After termination, COUNTY shall make payment only for CONTRACTOR's performance up to the date of termination in accordance with this Agreement and at the rates set forth in Exhibit B.
- 5.5 CONTRACTOR's rights under this Agreement shall terminate (except for fees accrued prior to the date of termination) upon dishonesty or a willful or material breach of this Agreement by CONTRACTOR; or in the event of CONTRACTOR's unwillingness or inability for any reason whatsoever to perform the terms of this Agreement. In such event, CONTRACTOR shall not be entitled to any further compensation under this Agreement.
- 5.6 CONTRACTOR is debarred from the System for Award Management (SAM). If the agreement is federally or State funded, CONTRACTOR must notify the COUNTY immediately of the debarment. Reference: (System for Award Management (SAM) at https://www.sam.gov for Central Contractor Registry (CCR), Federal Agency Registration (Fedreg), Online Representations and Certifications Application, and Excluded Parties List System (EPLS)). Excluded Parties Listing System (EPLS) (http://www.epls.gov) (Executive Order 12549, 7 CFR Part 3017, 45 CFR Part 76, and 44 CFR Part 17). The System for Award Management (SAM) is the Official U.S. Government system that consolidated the capabilities of CCR/FedReg, ORCA, and EPLS.
- 5.7 The rights and remedies of COUNTY provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law or this Agreement.

# 6. Ownership/Use of Contract Materials and Products

The CONTRACTOR agrees that all materials, reports or products in any form, including electronic, created by CONTRACTOR for which CONTRACTOR has been compensated by COUNTY pursuant to this Agreement shall be the sole property of the COUNTY. The material, reports or products may be used

by the COUNTY for any purpose COUNTY deems to be appropriate, including, but not limit to, duplication and/or distribution within the COUNTY or to third parties. CONTRACTOR agrees not to release or circulate in whole or part such materials, reports, or products without prior written authorization of the COUNTY.

#### 7. Conduct of Contractor

- 7.1 The CONTRACTOR covenants that it presently has no interest, including, but not limited to, other projects or contracts, and shall not acquire any such interest, direct or indirect, which would conflict in any manner or degree with CONTRACTOR's performance under this Agreement. The CONTRACTOR further covenants that no person or subcontractor having any such interest shall be employed or retained by CONTRACTOR under this Agreement. The CONTRACTOR agrees to inform the COUNTY of all the CONTRACTOR's interests, if any, which are or may be perceived as incompatible with the COUNTY's interests.
- 7.2 The CONTRACTOR shall not, under circumstances which could be interpreted as an attempt to influence the recipient in the conduct of his/her duties, accept any gratuity or special favor from individuals or firms with whom the CONTRACTOR is doing business or proposing to do business, in accomplishing the work under this Agreement.
- 7.3 The CONTRACTOR or its employees shall not offer gifts, gratuity, favors, and entertainment directly or indirectly to COUNTY employees.

# 8. <u>Inspection of Service; Quality Control/Assurance</u>

8.1 All performance (which includes services, workmanship, materials, supplies and equipment furnished or utilized in the performance of this Agreement) shall be subject to inspection and test by the COUNTY or other regulatory agencies at all times. The CONTRACTOR shall provide adequate cooperation to any inspector or other COUNTY representative to permit him/her to determine the CONTRACTOR's conformity with the terms of this Agreement. If any services performed or products provided by CONTRACTOR are not in conformance with the terms of this Agreement, the COUNTY shall have the right to require the CONTRACTOR to perform the services or provide the products in conformance with the terms of the Agreement at no additional cost to the COUNTY. When the services to be performed or the products to be provided are of such nature that the difference cannot be corrected; the COUNTY shall have the right to: (1) require the CONTRACTOR immediately to take all necessary steps to ensure future performance in conformity with the terms of the Agreement; and/or (2) reduce the Agreement price to reflect the reduced value of the services performed or products provided. The COUNTY may also

terminate this Agreement for default and charge to CONTRACTOR any costs incurred by the COUNTY because of the CONTRACTOR's failure to perform.

8.2 CONTRACTOR shall establish adequate procedures for self-monitoring and quality control and assurance to ensure proper performance under this Agreement; and shall permit a COUNTY representative or other regulatory official to monitor, assess, or evaluate CONTRACTOR's performance under this Agreement at any time, upon reasonable notice to the CONTRACTOR.

# 9. Independent Contractor

The CONTRACTOR is, for purposes relating to this Agreement, an independent contractor and shall not be deemed an employee of the COUNTY. It is expressly understood and agreed that the CONTRACTOR (including its employees, agents, and subcontractors) shall in no event be entitled to any benefits to which COUNTY employees are entitled, including but not limited to overtime, any retirement benefits, worker's compensation benefits, and injury leave or other leave benefits. There shall be no employer-employee relationship between the parties; and CONTRACTOR shall hold COUNTY harmless from any and all claims that may be made against COUNTY based upon any contention by a third party that an employer-employee relationship exists by reason of this Agreement. It is further understood and agreed by the parties that CONTRACTOR in the performance of this Agreement is subject to the control or direction of COUNTY merely as to the results to be accomplished and not as to the means and methods for accomplishing the results.

#### 10. Subcontract for Work or Services

No contract shall be made by the CONTRACTOR with any other party for furnishing any of the work or services under this Agreement without the prior written approval of the COUNTY; but this provision shall not require the approval of contracts of employment between the CONTRACTOR and personnel assigned under this Agreement, or for parties named in the proposal and agreed to under this Agreement.

#### 11. Disputes

11.1 The parties shall attempt to resolve any disputes amicably at the working level. If that is not successful, the dispute shall be referred to the senior management of the parties. Any dispute relating to this Agreement, which is not resolved by the parties, shall be decided by the COUNTY's Purchasing Department's Compliance Contract Officer who shall furnish the decision in writing. The decision of the COUNTY's Compliance Contract Officer shall be final and conclusive unless determined by a court of competent jurisdiction to have been fraudulent, capricious, arbitrary, or so grossly erroneous to imply bad

faith. The CONTRACTOR shall proceed diligently with the performance of this Agreement pending the resolution of a dispute.

11.2 Prior to the filing of any legal action related to this Agreement, the parties shall be obligated to attend a mediation session in Riverside County before a neutral third party mediator. A second mediation session shall be required if the first session is not successful. The parties shall share the cost of the mediations.

# 12. <u>Licensing and Permits</u>

CONTRACTOR shall comply with all State or other licensing requirements, including but not limited to the provisions of Chapter 9 of Division 3 of the Business and Professions Code. All licensing requirements shall be met at the time proposals are submitted to the COUNTY. CONTRACTOR warrants that it has all necessary permits, approvals, certificates, waivers and exemptions necessary for performance of this Agreement as required by the laws and regulations of the United States, the State of California, the County of Riverside and all other governmental agencies with jurisdiction, and shall maintain these throughout the term of this Agreement.

# 13. <u>Use By Other Political Entities</u>

The CONTRACTOR agrees to extend the same pricing, terms, and conditions as stated in this Agreement to each and every political entity, special district, and related non-profit entity in Riverside County. It is understood that other entities shall make purchases in their own name, make direct payment, and be liable directly to the CONTRACTOR; and COUNTY shall in no way be responsible to CONTRACTOR for other entities' purchases.

# 14. Non-Discrimination

CONTRACTOR shall not be discriminate in the provision of services, allocation of benefits, accommodation in facilities, or employment of personnel on the basis of ethnic group identification, race, religious creed, color, national origin, ancestry, physical handicap, medical condition, marital status or sex in the performance of this Agreement; and, to the extent they shall be found to be applicable hereto, shall comply with the provisions of the California Fair Employment and Housing Act (Gov. Code 12900 et. seq), the Federal Civil Rights Act of 1964 (P.L. 88-352), the Americans with Disabilities Act of 1990 (42 U.S.C. S1210 et seq.) and all other applicable laws or regulations.

#### 15. Records and Documents

CONTRACTOR shall make available, upon written request by any 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 CONTRACTOR's costs related to this Agreement. All such books,

documents and records shall be maintained by CONTRACTOR for at least five years following termination of this Agreement and be available for audit by the COUNTY. CONTRACTOR shall provide to the COUNTY reports and information related to this Agreement as requested by COUNTY.

#### 16. Confidentiality

- 16.1 The CONTRACTOR shall not use for personal gain or make other improper use of privileged or confidential information which is acquired in connection with this Agreement. The term "privileged or confidential information" includes but is not limited to: unpublished or sensitive technological or scientific information; medical, personnel, or security records; anticipated material requirements or pricing/purchasing actions; COUNTY information or data which is not subject to public disclosure; COUNTY operational procedures; and knowledge of selection of contractors, subcontractors or suppliers in advance of official announcement.
- 16.2 The CONTRACTOR shall protect from unauthorized disclosure names and other identifying information concerning persons receiving services pursuant to this Agreement, except for general statistical information not identifying any person. The CONTRACTOR shall not use such information for any purpose other than carrying out the CONTRACTOR's obligations under this Agreement. The CONTRACTOR shall promptly transmit to the COUNTY all third party requests for disclosure of such information. The CONTRACTOR shall not disclose, except as otherwise specifically permitted by this Agreement or authorized in advance in writing by the COUNTY, any such information to anyone other than the COUNTY. For purposes of this paragraph, identity shall include, but not be limited to, name, identifying number, symbol, or other identifying particulars assigned to the individual, such as finger or voice print or a photograph.
- 16.3 The CONTRACTOR is subject to and shall operate in compliance with all relevant requirements contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, enacted August 21, 1996, and the related laws and regulations promulgated subsequent thereto. Please refer to Attachment 1 of this agreement.

# 17. Administration/Contract Liaison

The COUNTY Purchasing Agent, or designee, shall administer this Agreement on behalf of the COUNTY. The Purchasing Department is to serve as the liaison with CONTRACTOR in connection with this Agreement.

#### 18. 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 two days after their deposit in the United States mail, postage prepaid:

#### **COUNTY OF RIVERSIDE**

Purchasing and Fleet Services 2980 Washington Street Riverside, CA 92504

Attn: Walter Mack

#### **CONTRACTOR**

Unilab Corporation; dba Quest Diagnostics 8401 Fallbrook Avenue West Hills, CA 91304 Attn: Robert Moverley

#### 19. Force Majeure

If either party is unable to comply with any provision of this Agreement due to causes beyond its reasonable control, and which could not have been reasonably anticipated, such as acts of God, acts of war, civil disorders, or other similar acts, such party shall not be held liable for such failure to comply.

# 20. EDD Reporting Requirements

In order to comply with child support enforcement requirements of the State of California, the COUNTY may be required to submit a Report of Independent Contractor(s) form **DE 542** to the Employment Development Department. The CONTRACTOR agrees to furnish the required data and certifications to the COUNTY within 10 days of notification of award of Agreement when required by the EDD. This data will be transmitted to governmental agencies charged with the establishment and enforcement of child support orders. Failure of the CONTRACTOR to timely submit the data and/or certificates required may result in the contract being awarded to another contractor. In the event a contract has been issued, failure of the CONTRACTOR to comply with all federal and state reporting requirements for child support enforcement or to comply with all lawfully served Wage and Earnings Assignments Orders and Notices of Assignment shall constitute a material breach of Agreement. If CONTRACTOR has any questions concerning this reporting requirement, please call (916) 657-0529. CONTRACTOR should also contact its local Employment Tax Customer Service Office listed in the telephone directory in the State Government section under "Employment Development Department" or access their Internet site at www.edd.ca.gov.

# 21. Hold Harmless/Indemnification

21.1 CONTRACTOR shall indemnify and hold harmless 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 (individually and collectively

hereinafter referred to as Indemnitees) from any liability whatsoever, based or asserted upon any services of CONTRACTOR, 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. CONTRACTOR 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, the Indemnitees in any claim or action based upon such alleged acts or omissions.

- 21.2 With respect to any action or claim subject to indemnification herein by CONTRACTOR, CONTRACTOR 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 CONTRACTOR'S indemnification to Indemnitees as set forth herein.
- 21.3 CONTRACTOR'S obligation hereunder shall be satisfied when CONTRACTOR has provided to COUNTY the appropriate form of dismissal relieving COUNTY from any liability for the action or claim involved.
- 21.4 The specified insurance limits required in this Agreement shall in no way limit or circumscribe CONTRACTOR'S obligations to indemnify and hold harmless the Indemnitees herein from third party claims.

# 22. Insurance

22.1 Without limiting or diminishing the CONTRACTOR'S obligation to indemnify or hold the COUNTY harmless, CONTRACTOR shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverage's during the term of this Agreement. As respects to the insurance section only, the COUNTY herein refers to the County of Riverside, its Agencies, Districts, Special Districts, and Departments, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents, or representatives as Additional Insureds.

#### A. Workers' Compensation:

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

#### **B.** Commercial General Liability:

Commercial General Liability insurance coverage, including but not limited to, premises liability, unmodified contractual liability, products and completed operations liability, personal and advertising injury, and cross liability coverage, covering claims which may arise from or out of CONTRACTOR'S performance of its obligations hereunder. Policy shall name the COUNTY 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.

#### C. Vehicle Liability:

If vehicles or mobile equipment is used in the performance of the obligations under this Agreement, then CONTRACTOR 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 the COUNTY as Additional Insureds.

**D. Professional Liability** Contractor shall maintain Professional Liability Insurance providing coverage for the Contractor's performance of work included within this Agreement, with a limit of liability of not less than \$1,000,000 per occurrence and \$2,000,000 annual aggregate. If Contractor'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 CONTRACTOR 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; or 3) demonstrate through Certificates of Insurance that CONTRACTOR has Maintained continuous coverage with the same or original insurer. Coverage provided under items; 1), 2), or 3) will continue as long as the law allows.

#### E. 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 CONTRACTOR must declare its insurance self-insured retention for each coverage required herein. If any such self-insured retention exceeds \$500,000 per occurrence each such retention shall have the prior written consent of the County Risk Manager before the commencement of operations under this

Agreement. Upon notification of self-insured retention unacceptable to the COUNTY, and at the election of the Country's Risk Manager, CONTRACTOR'S carriers shall either; 1) reduce or eliminate such self-insured retention 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.

- 3) CONTRACTOR shall cause CONTRACTOR'S insurance carrier(s) to furnish 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, and 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. CONTRACTOR shall not commence operations until the COUNTY has been furnished original Certificate (s) of Insurance and certified original copies of endorsements and if requested, certified original policies of insurance including all endorsements and any and all other attachments as required in this Section. An individual authorized by the insurance carrier shall sign the original endorsements for each policy and the Certificate of Insurance.
- 4) It is understood and agreed to by the parties hereto that the CONTRACTOR'S insurance 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) 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; or, the term of this Agreement, including any extensions thereof, exceeds five (5) years; the COUNTY reserves the right to adjust the types of insurance and the monetary limits of liability required under this Agreement, if in the County Risk Manager's reasonable judgment, the amount or type of insurance carried by the CONTRACTOR has become inadequate.
- 6) CONTRACTOR 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.
- 8) CONTRACTOR agrees to notify COUNTY of any claim by a third party or any incident or event that may give rise to a claim arising from the performance of this Agreement.

#### 23. General

- 23.1 CONTRACTOR shall not delegate or assign any interest in this Agreement, whether by operation of law or otherwise, without the prior written consent of COUNTY. Any attempt to delegate or assign any interest herein shall be deemed void and of no force or effect.
- 23.2 Any waiver by COUNTY 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 of this Agreement. Failure on the part of 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 preventing COUNTY from enforcement of the terms of this Agreement.
- 23.3 In the event the CONTRACTOR receives payment under this Agreement, which is later disallowed by COUNTY for nonconformance with the terms of the Agreement, the CONTRACTOR shall promptly refund the disallowed amount to the COUNTY on request; or at its option the COUNTY may offset the amount disallowed from any payment due to the CONTRACTOR.
- 23.4 CONTRACTOR shall not provide partial delivery or shipment of services or products unless specifically stated in the Agreement.
- 23.5 CONTRACTOR shall not provide any services or products subject to any chattel mortgage or under a conditional sales contract or other agreement by which an interest is retained by a third party. The CONTRACTOR warrants that it has good title to all materials or products used by CONTRACTOR or provided to COUNTY pursuant to this Agreement, free from all liens, claims, or encumbrances.
- 23.6 Nothing in this Agreement shall prohibit the COUNTY from acquiring the same type or equivalent equipment, products, materials or services from other sources, when deemed by the COUNTY to be in its best interest. The COUNTY reserves the right to purchase more or less than the quantities specified in this Agreement.
- 23.7 The COUNTY agrees to cooperate with the CONTRACTOR in the CONTRACTOR's performance under this Agreement, including, if stated in the Agreement, providing the CONTRACTOR with reasonable facilities and timely access to COUNTY data, information, and personnel.
- 23.8 CONTRACTOR shall comply with all applicable Federal, State and local laws and regulations. CONTRACTOR will comply with all applicable COUNTY policies and procedures. In the

event that there is a conflict between the various laws or regulations that may apply, the CONTRACTOR shall comply with the more restrictive law or regulation.

- 23.9 CONTRACTOR shall comply with all air pollution control, water pollution, safety and health ordinances, statutes, or regulations, which apply to performance under this Agreement.
- 23.10 CONTRACTOR shall comply with all requirements of the Occupational Safety and Health Administration (OSHA) standards and codes as set forth by the U.S. Department of Labor and the State of California (Cal/OSHA).
- 23.11 This Agreement shall be governed by the laws of the State of California. Any legal action related to the performance or interpretation of this Agreement shall be filed only in the Superior Court of the State of California located in Riverside, California, and the parties waive any provision of law providing for a change of venue to another location. 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.
- 23.12 This Agreement, including any attachments or exhibits, constitutes the entire Agreement of the parties with respect to its subject matter and supersedes all prior and contemporaneous representations, proposals, discussions and communications, whether oral or in writing. This Agreement may be changed or modified only by a written amendment signed by authorized representatives of both parties.

# **COUNTY: CONTRACTOR: County Administration Center** Unilab Corporation dba-Quest Diagnostics 4080 Lemon Street, 4th Floor 8401 Fallbrook Avenue Riverside, CA 92501 Westhills, CA 91304 **Board of Supervisors** Signature! Signature: Print Name: Robert Moverley Title: Chairman of the Board of Supervisors Title: Regional Vice President, Operations 2/19/2014 'JUN **0 3** 2014 Dated: Dated: FORM APPROVED COUNTY COUNSE

IHEM. Clerk

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RFP#PUARC-1337

# Exhibit A Scope of Work

# 1.0 Location: Riverside County Regional Medical Center

#### 1.1 Testing & Quality Control

#### 1.1.1 Quality Control

CONTRACTOR shall employ or arrange to employ both internal and external systems to monitor the accuracy and precision of all Laboratory Services provided, or arrange to be provided, to COUNTY patients hereunder as required by the State of California Department of Health and Human Services and the Clinical Laboratory Improvements Act of 1988 (CLIA) as amended and as applicable according to its terms. All Laboratory Services, Quality Assurance and Quality Control must meet the requirements of CLIA Laboratory testing sites must be accessible for site visits by County personnel, and State and Federal Agencies and other entities.

#### 1.1.2 Quality Assurance Summary.

All Quality Assurance/Quality Control data would be available for onsite/offsite auditing upon request only, including the method, equipment, and analytical detection limits, method blanks, and the name of person(s) performing the analyses.

#### 1.1.3 Repeat Determination

Repeat Testing will be performed by CONTRACTOR(S) at no extra charge.

- a. If an ordering physician requests analysis because he or she feels the original result to be inconsistent with clinical assessment or for any other reason, CONTRACTOR(S) shall perform or arrange for the performance of repeat analysis at no additional charge.
- b. CONTRACTOR(S) must provide for at no cost re-testing of samples due to laboratory personnel negligence or human error.

# 1.2 Supplies

CONTRACTOR(S) shall provide, or arrange for the provision at no charge to the COUNTY participating physician(s) and all sites, all supplies necessary for the collection, preparation, and preservation of all specimens to be submitted for test.

# 1.3 Pick-up/Collection

CONTRACTOR(S) shall provide or arrange for the provision of specimen pick-up and report delivery daily, Monday through Friday, including holidays. All STAT services shall be available seven (7) days a week, twenty four (24) hours a day and will be picked-up within one (1) hour of notification with the understanding that there may be certain uncontrollable circumstances that may lead to delays in specimen pickup. The laboratory's courier shall pick-up samples from the locations outlined below.

Riverside County Regional Medical Center	Blythe Health Center
26520 Cactus Avenue	236 N. Broadway
Moreno Valley, CA 93555	Blythe, CA 92225
(951) 486-5259	(760) 927-7985
Mental Health Unit	Department of Probation
9990 County Farm Road, Suite 2	3960 Orange Street, Suite 600
Riverside, CA 92503	Riverside, CA 92501
(951) 358-4596	(909) 955-2894
Palm Springs Family Care Center	Blaine Street Mental Health Clinic
3111 E. Tahquitz Canyon Way	769 Blaine Street, Suite B
Palm Springs, CA 92262	Riverside, CA 92507
(760) 778-2210	(951) 940-6700

#### 1.4 Results Reporting

- 1.4.1 Reports shall be delivered daily by <u>secured email or other secured electronic means</u>, Monday through Sunday, 7:30 a.m. to 5:30 p.m., including holidays.
- 1.4.2 CONTRACTOR(S) shall report the results of each test performed to the ordering physicians within twenty-four (24) hours, excluding esoteric testing procedures, or as soon as technically feasible except as provided below: (i) "critical values"; and (ii) "phone report requests", or secured email and (iii) STAT results.
- 1.4.3 "Critical values" and "phone reports request" shall be provided by phone call to ordering physicians as soon as the result becomes available and is verified, subject to the ability of CONTRACTOR(S) or other laboratory approved producers to contact the ordering physician. If CONTRACTOR(S) is unable to contact the ordering physician on its first attempt, it shall continue to make reasonable efforts to contact him or her thereafter by phone call to communicate the results, until the results are communicated by telephone call, secured email, or other secured electronic means.
- 1.4.4 STAT services are available to the COUNTY seven (7) days a week, twenty-four (24) hours a day. STAT results will be phoned, faxed, and/or sent to client via secured email within fourthree (43) hours of initial notification, with the understanding that certain procedures may take longer to perform and thus will have longer report times.

#### 1.5 Retention Schedule

All specimens that the County identifies must be held routinely seven (7) days and up to one (1) year if requested by the COUNTY.

#### 1.6 Consultation

For all tests performed, CONTRACTOR(S) shall arrange for qualified staff to be available to consult with ordering physician by telephone during normal laboratory working hours of 7:30 a.m. to 5:30 p.m., Monday through Friday, excluding holidays to discuss procedures and to explain procedure results.

#### 1.7 Field Support

CONTRACTOR(S) shall provide a laboratory service representative to each COUNTY site to assist in the establishment and maintenance of laboratory services as is necessary and appropriate. CONTRACTOR(S) must go to each COUNTY location and train staff on use secured email or other secured electronic means as required. CONTRACTOR will assign Professionally Trained Field Representatives to all Riverside County related locations as part of this bid, at no extra cost or charge. Accounts will be visited once or twice monthly, or depending on volume and service level requirements.

# 1.8 <u>Computerized Services</u>

<u>Secured electronic media or secured email services</u> will be required at all COUNTY facilities where the CONTRACTOR(S) will provide result accessibility on demand. CONTRACTOR(S) shall provide to COUNTY routine computerized Services including maintenance and on any computers provided by CONTRACTOR(S).

## 1.9 **Delayed Reporting Results**

If the analyses are not prepared within the specified time frame, the responsible laboratory shall provide the COUNTY with a written explanation within 24 hours as to the circumstances surrounding such delay and/or destruction of samples. This explanation shall be sufficient to provide the regulatory agency with satisfactory information for inclusion into monitoring reports. Those delays within the laboratory's control shall be at no charge to the COUNTY.

#### 1.10 Sample Results

CONTRACTOR will render the method, equipment, and MDL (Method Detection Limits) upon request.

1.11 CONTRACTOR(S) to provide a STAT lab listing, which includes a schedule detailing return date/time of results, after a specimen is received by the CONTRACTOR(S).

#### 1.12 <u>Chain of Custody Documentation</u> NA

#### 1.13 Payment Method

#### 1.13.1 Medi-Cal

- a. All capitated tests performed for Medi-Cal Managed Care (MMC) Patients shall be performed by Laboratory contracted to provide outpatient laboratory services for the Health Plan or IPA Medical Group. Laboratory healthcare services for MMC patients are not included in this RFP.
- b. CONTRACTOR acknowledges and agrees that under California state law for HMO patients, CONTRACTOR shall not bill, charge, collect a deposit from, seek compensation from, seek remuneration from, surcharge or have any recourse against any HMO patient or person acting on behalf of HMO patient except for applicable co-payments or deductibles. In the event CONTRACTOR is unable to identify

- reimbursement coverage, CONTRACTOR is required to clarify with COUNTY, patient's reimbursement coverage, in order to determine if the patient is billed for any services. Under no circumstance, is
- c. The patient to be billed directly, without clearance from COUNTY. Even in cases of nonpayment by HMO, IPA's or patients under COUNTY'S responsibility, CONTRACTOR shall not attempt any action or billing against HMO patient, the HMO, or the State of California.
- d. Capitated clinical lab services for COUNTY patients performed by CONTRACTOR shall be paid by COUNTY CONTRACTOR agrees that patients that are not the financial responsibility of the COUNTY, may at COUNTY'S election, be payable by a COUNTY contracted IPA or HMO in lieu of direct payment from COUNTY. For such IPA or HMO payments, CONTRACTOR agrees to accept the same terms, conditions, and payment structure contained in this Proposal.

#### 1.14 Billing

All invoices and/or billing requests shall be submitted in a timely manner, the invoice/billing request shall include the site name, sample date, and type of analysis, unit prices and costs, and laboratory tracking number. Statements should also reflect any no charge services and service credits applied during the billing cycle for lost test samples, STAT or standard tests that fall outside the established turnaround times. COUNTY will assign a medical record number and CONTRACTOR shall identify the number on invoicing to COUNTY. CONTRACTOR(S) shall be billed on HCFA 1500 forms only for patients under COUNTY'S responsibility. The **HCFA** 1500 claim form can he found www.tricareus.com/resources/files/form1500-90.pdf

# 2.0 Location: <u>Department of Mental Health</u>

# 2.1 Quality Control

CONTRACTOR shall employ or arrange to employ both internal and external systems to monitor the accuracy and precision of all Laboratory Services provided, or arrange to be provided, to COUNTY patients hereunder as required by the State of California Department of Health and Human Services and the Clinical Laboratory Improvements Act of 1988 (CLIA) as amended and as applicable according to its terms. All Laboratory Services, Quality Assurance and Quality Control must meet the requirements of CLIA. Furthermore, Laboratory Services provided, or arranged to be provided, to COUNTY MMC Patients hereunder shall be performed with at least the same quality and in accordance with the same medical standards offered to other patients of COUNTY. Laboratory testing sites must be accessible for site visits by County personnel, and State and Federal Agencies and other entities in compliance with managed care contracts.

#### 2.1 Sample Results

CONTRACTOR will render the method, equipment, and MDL (Method Detection Limits) upon request.

# 2.2 Chain of Custody Documentation

NA.

# 2.3 Repeat Determination

Repeat Testing will be performed by CONTRACTOR at no extra charge. All specimens will be held routinely seven days and up to one year *if requested* by COUNTY. If an ordering physician requests analysis because he or she feels the original result to be inconsistent with clinical assessment or for any other reason, CONTRACTOR shall perform or arrange for the performance of repeat analysis at no additional charge.

# 2.4 Pick-up/Collection Sites

CHILDREN'S SERVICES ASSESSMENT &	CHILDREN'S CASE MANAGEMENT	
CONSULTATION TEAM 3125 Myers Street	3125 Myers Street	
Riverside, CA 92503	Riverside, CA 92503	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (by referral		
only)	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
MH Services Supervisor	MH Services Supervisor	
Multidimential Treatment Foster Care (MTFC)	PRE-SCHOOL 0-5 PROGRAM	
3125 Myers Street, Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	(Including Incredible Kids & Parent Child Interactive Therapy [PCIT] Mobile Programs)	
	3075 Myers Street, Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	
TRAC TEAM	RECOVERY LEARNING CENTER	
(Therapeutic & Residential Assessment & Consultation)	9990 County Farm Road, Suite 5	
3125 Myers Street, Riverside, CA 92503	Riverside, CA 92503	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (by referral only)	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
MH Services Supervisor		
DESERT REG	ION	
DESERT REGION ADMINISTRATION	BANNING CLINIC	
47-825 Oasis Street	1330 W. Ramsey	
Indio, CA 92201	Banning, CA 92220	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
MH Services Administrator	MH Services Supervisor	
BLYTHE CLINIC	DESERT ADULT Full Service Partnership (FSP)	
1297 West Hobsonway	19531 McLane St. Suite B, Palm Springs, CA 92262	
Blythe, CA 92225	(Mailing Address)PO Box 2592 Palm Springs, CA 92263	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 7:30am-5pm M-Th 7:30am-4pm Fri (by referral only)	
MH Services Supervisor	MH Services Supervisor	

MDFT PROGRAM	RESIDENTIAL CASE MANAGEMENT
(Multidimentional Family Therapy)	47-825 Oasis Street
47-825 Oasis Street, Indio, CA 92201	Indio, CA 92201
HOURS: 8am-5:30pm M-Th 8am-4:30pm (by referral only)	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri
MH Services Supervisor	MH Services Supervisor
INDIO CLINIC - ADULTS & CHILDREN	OASIS MH TREATMENT CENTER
47-825 Oasis Street	47-915 Oasis Street, Indio CA 92201
Indio, CA 92201	Oasis Crisis Services (OCS)
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	Psychiatric Health Facility (PHF)
CHILDREN - MH Services Supervisor	HOURS: 24/7
ADULTS - MH Services Supervisor	Director
MHSA Innovations-Desert - MH Services Supervisor	
WRAPAROUND PROGRAM - DESERT FSP	
47825 Oasis Street	
Indio, CA 92201	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (by referral	
only)	
MH Services Supervisor	
DETENTION SER	RVICES
	MHSA MENTAL HEALTH COURT-Mid
MHSA MENTAL HEALTH COURT-Western Region	Co Region
3833 10th Street, Riverside, CA 92501	30755 B Auld Road, Murrieta, CA 92563
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri
MH Services Supervisor	MH Services Supervisor
	ROBERT PRESLEY DETENTION
MHSA MENTAL HEALTH COURT-Desert Region	CENTER
82-632 Highway 111, Suite A-3, Indio, CA 92201	4000 Orange Street, Riverside, CA 92501
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	24 Hours
MH Services Supervisor	MH Services Supervisor
SOUTHWEST DETENTION	DESERT DETENTION (Banning)
30755-B Auld Road, Murrieta, CA 92563	1627 S. Hargrave Street, Banning, CA 92220
HOURS: Monday - Friday 7am-7:30pm	HOURS: Monday - Friday 7am-7:30pm
(Indio Jail - 46057 Oasis St., Indio, CA 92201)	MH Service Supervisor
MH Services Supervisor	
	LAKE ELSINORE GAIN/CalWORKS-Mid
JURUPA GAIN/CalWORKS-Western Region	Co Region
50(1) (; Pl 1 P; ; 1 G) 00500	1400 W. Minthorne Ave., Lake Elsinore, CA
5961 Mission Blvd., Riverside, CA 92509	92530
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri
MH Services Supervisor	MH Service Supervisor
INDIO GAIN/CalWORKS-Desert Region	LA SIERRA GAIN
44-199 Monroe Street, Suite C, Indio, CA 92201	11060 Magnolia Ave., Riverside, CA 92506
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	MORENO VALLEY GAIN
	23119 Cottonwood Ave Bld. B, Moreno
MH Services Supervisor	Valley, CA 92553
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DANISTO CATE	1	
BANNING GAIN	NORCO GAIN	
643 South 4th St., Banning, CA 92860	3178 Hamner Ave, Norco, CA 92860	
CATHEDRAL CITY GAIN	PERRIS GAIN	
68625 Perez Rd., Suite #5, Cathedral City, CA 92234	351 Wilkerson Av, Suite D, Perris, CA 92570	
DESERT HOT SPRINGS GAIN	HEMET GAIN	
14201 Palm Dr., Desert Hot Springs, CA 92240	541 N. San Jacinto Avenue, Hemet, CA 92543	
MID-COUNTY R	EGION	
HEMET CLINIC	MORENO VALLEY CHIPS	
650 N. State Street	(Children's Interagency Program)	
Hemet, CA 92542	23119 Cottonwood Avenue, Bldg. A, Suite 110	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	Moreno Valley, CA 92553	
MH Services Supervisor	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
LAKE ELSINORE FAMILY MH CLINIC-Children	MH Services Supervisor	
(Including MDFT* & PCIT* Programs)	PERRIS CLINIC -Adults	
31946 Mission Trail, Suite B, Lake Elsinore, CA 92529	1688 N. Perris Blvd., #L7-L11, Perris, CA	
31940 Mission Tran, Suite B, Lake Eismore, CA 92329	92571	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
MH Services Supervisor	MH Services Supervisor	
MID COUNTY - MDFT*	MT SAN JACINTO CHILDREN'S CLINIC	
23119 Cottonwood Avenue, Bldg. A, Suite 110	950 Ramona Blvd, Suite 1 &2	
Moreno Valley, CA 92553	San Jacinto, CA 92582	
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (by referral	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
only)	1100KS. 8ain-3.30pin W-111 8ain-4.30pin F11	
MH Services Supervisor	MH Services Supervisor	
TEMECULA CLINIC		
41002 County Center Drive, Suite 320		
Temecula, CA 92591		
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri		
MH Services Supervisor		
OLDER ADU	LTS	
CATHEDRAL CANYON WELLNESS &	MISSION TRAIL WELLNESS &	
	RECOVERY CLINIC FOR MATURE	
RECOVERY CLINIC FOR MATURE ADULTS	RECOVERY CLINIC FOR MATURE ADULTS	
RECOVERY CLINIC FOR MATURE ADULTS S.M.A.R.T. Program*- Desert Region	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor TYLER VILLAGE WELLNESS &	
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RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor SAN JACINTO WELLNESS &  RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Mid County Region	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor  TYLER VILLAGE WELLNESS & RECOVERY CLINIC FOR MATURE ADULTS: S.M.A.R.T. Program*- Western Region PEI Innovations 10182 Indiana Ave., Riverside, CA 92503	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor  SAN JACINTO WELLNESS &  RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Mid County Region 1370 S. State Street, San Jacinto, CA 92583	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor  TYLER VILLAGE WELLNESS & RECOVERY CLINIC FOR MATURE ADULTS: S.M.A.R.T. Program*- Western Region PEI Innovations 10182 Indiana Ave., Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor  SAN JACINTO WELLNESS &  RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Mid County Region 1370 S. State Street, San Jacinto, CA 92583 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor  TYLER VILLAGE WELLNESS & RECOVERY CLINIC FOR MATURE ADULTS: S.M.A.R.T. Program*- Western Region PEI Innovations 10182 Indiana Ave., Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MHSA Innovations-West MH Services	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor  SAN JACINTO WELLNESS &  RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Mid County Region 1370 S. State Street, San Jacinto, CA 92583	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor  TYLER VILLAGE WELLNESS & RECOVERY CLINIC FOR MATURE ADULTS: S.M.A.R.T. Program*- Western Region PEI Innovations 10182 Indiana Ave., Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MHSA Innovations-West MH Services Supervisor PEI MH Services Supervisor	
RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Desert Region 68-625 Perez Rd., Suite 11, Cathedral City, CA 92234 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor SAN JACINTO WELLNESS &  RECOVERY CLINIC FOR MATURE ADULTS  S.M.A.R.T. Program*- Mid County Region 1370 S. State Street, San Jacinto, CA 92583 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	RECOVERY CLINIC FOR MATURE ADULTS 31946 Mission Trails, Suite B Lake Elsinore, CA 92530 HOURS: Friday Only 8am-5pm MH Services Supervisor  TYLER VILLAGE WELLNESS & RECOVERY CLINIC FOR MATURE ADULTS: S.M.A.R.T. Program*- Western Region PEI Innovations 10182 Indiana Ave., Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MHSA Innovations-West MH Services	

PUBLIC GUARDIAN			
PUBLIC GUARDIAN ADMINISTRATION	LPS/PROPERTY MANAGEMENT		
3190 Chicago Avenue	3190 Chicago Avenue		
Riverside, CA 92507	Supervising Deputy PG		
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri			
MH Services Manager			
CONSERVATORSHIP INVESTIGATIONS	PROBATE		
3190 Chicago Avenue	3190 Chicago Avenue		
Riverside, CA 92507	Riverside, CA 92507		
MH Services Supervisor	Supervising Deputy PG		
SUBSTANCE A	ABUSE		
BLYTHE SUBSTANCE ABUSE & BLYTHE DRUG	CATHERDRAL CUTY CURCEANCE A DUCE		
COURT	CATHEDRAL CITY SUBSTANCE ABUSE		
1207 W. H-1 Pl. 4 - CA 00005	68-615 Perez Road, Suite 6A, Cathedral City,		
1297 W. Habsonway, Blythe, CA 92225	CA 92234		
HOURS: 8am-6pm M-Th Closed Fri	HOURS: 8am - 6pm Tue-Fri Closed Monday		
MH Services Supervisor	Supervising BHS		
INDIO RECOVERY OPPORTUNITY CENTER	CORONA SUBSTANCE ABUSE		
(IROC)	CORONA SUBSTAINCE ABUSE		
68-615 Perez Road, Suite 6A, Cathedral City, CA 92234	623 N. Main Street, #D11, Corona, CA 91720		
HOURS: 8am - 6pm Tue-Fri Closed Monday	HOURS: 8am-6pm M-Th Closed Fri		
Supervising BHS	Supervising BHS		
RIVERSIDE DRINKING DRIVER PROGRAM &	HEMET SUBSTANCE ABUSE		
RIVERSIDE START TEAM	650 N. State Street, Hemet, CA 92543		
1777 Atlanta Ave., Suite G-1, Riverside, CA 92507	HOURS: 8am-6pm M-Th Closed Fri		
HOURS: 8am-6pm M-Th Closed Fri	Supervising BHS		
Supervising BHS			

INDIO DRINKING DRIVER PROGRAM	INDIO SUBSTANCE ABUSE	
45-596 Fargo Street, Suite 6, Indio, CA 92201	83-912 Avenue 45, Suite 9, Indio, CA 92201	
HOURS: 8am-6pm M-Th Closed Fri	HOURS: 8am-6pm M-Th Closed Fri	
Supervising BHS	Supervising BHS	
RIVERSIDE SUBSTANCE ABUSE (Atlanta II)	RIVERSIDE RECOVERY OPPORTUNITY CENTER (ROC)	
1827 Atlanta Ave., Suite D-1, Riverside, CA 92507	1827 Atlanta Ave., Suite D-1, Riverside, CA 92507	
HOURS: 8am-6pm M-Th Closed Fri	HOURS: 8am-6pm M-Th Closed Fri	
Supervising BHS	Supervising BHS	
TEMECULA SUBSTANCE ABUSE CLINIC		
41002 County Center Drive, #320, Temecula, CA 92591		
HOURS: 8am-6pm M-Th Closed Fri		
Supervising BHS		

WEST REGION ADULT SERVICES			
JEFFERSON WELLNESS CENTER - *FSP Adults 1827 Atlanta Avenue, Ste. D3 Riverside, CA 92507 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	THE SPOT- *FSP TAY 1827 Atlanta Avenue, Ste. D2 Riverside, CA 92507 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor		
BLAINE STREET CLINIC 769 Blaine Street, Suite B Riverside, CA 92507 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	JEFFERSON WELLNESS CENTER- Vocational Serv. 1827 Atlanta Avenue Riverside, CA 92507 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor		
MAIN STREET CLINIC 629 N. Main Street Suite C-3 Corona, CA 92880 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor			
WEST REGION CHILDR	EN'S SERVICES		
CHILDREN'S TREATMENT SERVICES (CTS) 3125 Myers Street Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor	FACT OF CORONA 1195 Magnolia Avenue Corona, CA 92879 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri MH Services Supervisor		
ISF WRAPAROUND* (Interagency Services for Families) 3125 Myers Street Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (referral only) MH Services Supervisor	MULTIDIMENSIONAL FAMILY THERAPY* 3125 Myers Street Riverside, CA 92503 HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (referral only) MH Services Supervisor		
VAN HORN COUNSELING CENTER 10000 County Farm Road Riverside, CA 92503	WRAPAROUND PROGRAM* 3125 Myers Street Riverside, CA 92503		
HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri	HOURS: 8am-5:30pm M-Th 8am-4:30pm Fri (referral only)		
MH Services Supervisor	MH Services Supervisor		

#### 2.5 Results Reporting

- 2.5.1 CONTRACTOR shall report the results of all tests performed to the ordering physicians within twenty-four (24) hours or as soon as technically feasible except as provided below:
  - a) "Critical Values" shall mean "Critical values" and "phone report requests" shall be provided by phone call to ordering physicians as soon as the result becomes available and is verified, subject to the ability of CONTRACTOR or other

Laboratory approved providers to contact the ordering physician. If CONTRACTOR is unable to contact the ordering physician on its first attempt, it shall continue to make reasonable efforts to contact him or her thereafter by phone call to communicate the results, until the results are communicated by <u>phone call</u>, <u>secured email</u>, or other secured electronic means.

b) STAT results: Shall mean STAT services are available to the COUNTY seven (7) days a week, twenty-four (24) hours a day, for an additional fee to be determined during the bid process. All STATS will be picked up within one (1) hour of notification. STAT results will be phoned, faxed and/or sent to client secured email within fourthree (43) hours of initial notification, with the understanding that certain procedures may take longer to perform and thus will have longer report times.

# 2.6 Retention Schedule & Field Support

2.6.1 Specimen Retention

CONTRACTOR(S) will retain all specimens in accordance with State and Federal laws.

2.6.2 Field Support

CONTRACTOR shall provide a laboratory service representative to each COUNTY site to assist in the establishment and maintenance of laboratory services as is necessary and appropriate. CONTRACTOR must go to each COUNTY location and train staff on use of CONTRACTOR(s) computer or other secured reporting system as required.

#### 2.7 Billing

2.7.1 All invoices and/or billing requests shall be submitted in a timely manner, the invoice/billing request shall include the site name, sample date, and type of analysis, unit prices and costs, and laboratory tracking number. The County's Auditor-Controller's Office will remit a check to the CONTRACTOR(s) for services rendered and invoiced.

# 3.0 Location: Department of Detention Health Services

#### 3.1 Quality Control

3.1.1 Quality Control

CONTRACTOR shall employ or arrange to employ both internal and external systems to monitor the accuracy and precision of all Laboratory Services provided, or arrange to be provided, to COUNTY patients hereunder as required by the State of California Department of Health and Human Services and the Clinical Laboratory Improvements Act of 1988 (CLIA) as amended and as applicable according to its terms. All Laboratory Services, Quality Assurance and Quality Control must meet the requirements of CLIA. Furthermore, Laboratory Services provided, or arranged to be provided, to COUNTY Correctional Facility patients hereunder shall be performed with at least the same quality and in accordance with the same medical standards offered to other patients of COUNTY. Laboratory testing sites must be accessible for

site visits by County personnel, and State and Federal Agencies and other entities in compliance with managed care contracts.

#### 3.1.2 <u>Sample Results</u>

CONTRACTOR will render the method, equipment, and MDL (Method Detection Limits) upon request.

# 3.2 <u>Pick-up/Collection</u>

CONTRACTOR will provide or arrange for the provision of specimen pick-up from all County correctional jail and juvenile facilities daily, Monday – Friday, excluding holidays, during normal business hours of 8:00 a.m. to 5:30 p.m. Reports shall be delivered by electronic means i.e. fax, secured email or other secured electronic means.

<b>Detention Facilities</b>	
Blythe Jail	Southwest Juvenile Hall
260 N. Spring Street	30755-B Auld Road
Blythe, CA 92225	Murrieta, CA 92563
Indio Jail	Indio Juvenile Hall
46-057 Oasis Street	47-665 Oasis Street
Indio, CA 92201	Indio, CA 92201
Smith Correctional Facility	Riverside Juvenile Hall
1657 Hargrave Street	3933 Harrison Street
Banning, CA 92220	Riverside, CA 92503
Robert Presley Detention Center	Southwest Detention Center
4000 Orange Street	30755-C Auld Road
Riverside, CA 90501	Murrieta, CA 92563

# 3.3 Results Reporting

3.3.1 CONTRACTOR shall report the results of all tests performed to the ordering physician within twenty-four hours or as soon as technically feasible.

#### 3.4 Repeat Determination

- 3.4.1 CONTRACTOR shall perform repeat testing at no extra charge. All specimens will be held routinely seven (7) days and up to one (1) year if requested by County. If an ordering physician request analysis because he or she feels the original result to be inconsistent with clinical assessment or for any other reason, CONTRACTOR shall perform repeat analysis at no additional charge to County.
- 3.4.2 Upon completion of initial training, CONTRACTOR shall provide a service representative to each County correctional site or region, as a contact person during normal business hours Monday-Friday, to assist in the establishment and maintenance of laboratory services as is necessary and appropriate. CONTRACTOR must provide training to employees at each County correctional facility location on policies and procedures specific to laboratory services.

#### 3.5 Payment Method

3.5.1 CONTRACTOR shall provide proper documentation of claims for services to

Correctional patients, to include backup documentation (physician orders/requisitions) of request for clinical lab studies and submit billing to County using a HCFA 1500 Form only.

# 3.6 Billing

3.6.1 All invoices and/or billing requests shall be submitted in a timely manner, the invoice/billing request shall include the site name, sample date, and type of analysis, unit prices and costs, and laboratory tracking number. Statements should also reflect any no charge services and service credits applied during the billing cycle for lost test samples, STAT or standard tests that fall outside the established turnaround times. COUNTY Correctional facilities will assign an Inmate Booking number (BK#) - Adult Jails or Client Identification (CID#) – Juvenile Halls and CONTRACTOR shall identify the number on invoicing to COUNTY. All Correctional facility billing shall be submitted on HCFA 1500 forms only to:

FIS/Detention Health Services Claims, P.O. Box 9610, Moreno Valley, CA 92552

# 4.0 Location: <u>Department of Probation</u>

4.1 <u>Sample Results</u>

CONTRACTOR will render the method, equipment, and MDL (Method Detection Limits) upon request.

4.2 <u>Pick-up/Collection</u>

Probation requires daily specimen pick-ups daily at the following locations:

Riverside	Riverside
Riverside Adult Probation	Recovery Opportunity Center
3021 Franklin Avenue	3768 10 <sup>th</sup> Street
Riverside, CA 92507	Riverside, CA 92501
D:	
Riverside	Perris
Riverside Juvenile Probation	Perris Probation
9889 County Farm Road	2560 N. Perris Blvd., Suite N-1
Riverside, CA 92503	Perris, CA 92571
Corona	Banning
Corona Probation	Banning Probation
505 S. Buena Vista Avenue, Suite 102	135 N. Alessandro Road
Corona, CA 92882	Banning, CA 92220
Temecula	Palm Springs
Temecula Probation	Palm Springs Probation
41002 County Center Drive	3255 E. Tahquitz Cyn Way, Room 101
Bldg. A, Room 42, #225	Palm Springs, CA 92262
Temecula, CA 92591	
San Jacinto	<u>Indio</u>
San Jacinto Probation	Indio Juvenile Probation
1330 S. State Street, Suite A	47-671 Oasis Street
San Jacinto, CA 92583	Indio, CA 92201

Indio

Additional Pick-Ups, Monday,
Wednesday
and Friday at the following location:
Blythe Probation
82-675 Hwy 111, Room B1
Indio, CA 92201

Additional Pick-Ups, Monday,
Wednesday
and Friday at the following location:
Blythe Probation
240 N. Broadway Street
Blythe, CA 92225

Occasional pick up at the following location (will call for service): Twin Pines Ranch

42-500 Twin Pines Road

Banning, CA 92220

# 4.3 Results Reporting

4.3.1 <u>Chain of Custody Documentation</u> NA

#### 4.4 Billing

4.4.1 All invoices and/or billing requests shall be submitted in a timely manner, the invoice/billing request shall include the site name, sample date, and type of analysis, unit prices and costs, and laboratory tracking number. Statements should also reflect any no charge services and service credits applied during the billing cycle for lost test samples, STAT or standard tests that fall outside the established turnaround times. COUNTY will assign a medical record number and CONTRACTOR shall identify the number on invoicing to COUNTY. The MISP Health Care Program determines on a fiscal year basis, the total dollar amount available to provide laboratory services to their eligible clients. When this total dollar amount has been paid to CONTRACTOR, additional payments will not be paid to the CONTRACTOR for the MISP Health Care clients' laboratory services. County Medically Indigent Services Program (MISP), Detention Health Services and Juvenile Detention Services shall be billed on HCFA 1500 forms only.

# 5.0 Location: <u>Riverside County Health System (RCHS)</u> Division of Ambulatory Care

# 5.1 <u>Testing & Quality Control</u>

# 5.1.1 Quality Control

CONTRACTOR shall employ or arrange to employ both internal and external systems to monitor the accuracy and precision of all Laboratory Services provided, or arrange to be provided, to COUNTY patients hereunder as required by the State of California Department of Health and Human Services and the Clinical Laboratory Improvements Act of 1988 (CLIA) as amended and as applicable according to its terms. All Laboratory Services, Quality Assurance and Quality Control must meet the requirements of CLIA. Laboratory testing sites must be accessible for site visits by County personnel, and applicable State and Federal Agencies and other entities, such as Title X, BPHC, HRSA, etc.

5.1.2 Laboratory testing sites must be accessible for site visits by County personnel, and State and Federal Agencies and other entities in compliance with managed care contracts.

# 5.2 Quality Assurance Summary.

All Quality Assurance/Quality Control data would be available for onsite/offsite auditing upon request only, including the method, equipment, and analytical detection limits, method blanks, and the name of person(s) performing the analyses.

#### 5.3 Repeat Determination

Repeat Testing will be performed by CONTRACTOR(S) at no extra charge. All specimens will be held routinely as appropriate for the specimen type submitted. If an ordering physician requests analysis because he or she feels the original result to be inconsistent with clinical assessment or for any other reason, CONTRACTOR shall perform or arrange for the performance of repeat analysis at no additional charge.

- a. If an ordering physician requests analysis because he or she feels the original result to be inconsistent with clinical assessment or for any other reason, CONTRACTOR(S) shall perform or arrange for the performance of repeat analysis at no additional charge.
- b. CONTRACTOR(S) must provide for at no cost re-testing of samples due to laboratory personnel negligence or human error.

#### 5.4 Supplies

a. CONTRACTOR(S) shall provide, or arrange for the provision at no charge to the COUNTY participating physician(s) and all sites, all supplies necessary for the collection, preparation, and preservation of all specimens to be submitted for test.

#### 5.5 Phlebotomy Services

CONTRACTOR shall provide phlebotomy services for those hard-to-draw COUNTY Patients at CONTRACTOR patient service centers on a per patient basis. Phlebotomy Services performed by CONTRACTOR for COUNTY Patients shall be reimbursed at a rate to be determined in the bid process, on a per patient basis, excluding MMC Patients. These locations must be within one (1) mile of the County's facilities.

# 5.6 Specimen Pick-Up/Report Delivery

CONTRACTOR shall provide or arrange for the provision of specimen pick-up and report delivery daily, Monday through Friday, excluding holidays, during normal business hours of 8:00 a.m. to 5:30 p.m. Reports shall be delivered daily by secured email, or other secured electronic means Monday through Friday, excluding holidays.

#### 5.7 Pick-up/Collection

5.7.1 CONTRACTOR(S) shall provide or arrange for the provision of specimen pick-up and report delivery daily, Monday through Friday, including holidays. All STAT services shall be available seven (7) days a week, twenty four (24) hours a day and will be picked-up within one (1) hour of notification. The laboratory's courier shall pick-up samples from the locations outlined below.

Banning Family Care Center 3055 W. Ramsey Banning, CA 92220 7:30 am – 5:00 pm, Monday – Friday	Blythe Family Health Clinic 321 W. Hobsonway Blythe, CA 92225	Corona Family Care Center 505 S. Buena Vista Avenue, Suite #101 Corona, CA 92882 7:30 am – 5:00 pm, Monday – Friday	
Hemet Family Care Center 880 N. State Street Hemet CA 92543 7:30 am – 5:00 pm, Monday – Friday	Indio Family Care Center 47-923 Oasis Street Indio, CA 92201 7:30 am – 5:00 pm, Monday – Friday	Jurupa Family Care Center 9415 Mission Blvd. Riverside, CA 92509 7:30 am – 5:00 pm, Monday – Friday	
Lake Elsinore Family Care Center 2499 E. Lakeshore Drive Lake Elsinore, CA 92530 7:30 am – 5:00 pm, Monday – Friday	Mecca Family Health Clinic 91275 66th Avenue Suite 500 Mecca, CA 92254	Palm Springs Family Care Center 1515 North Sunrise Way Palm Springs, CA 92262 7:30 am -5:00 pm, Monday - Friday	
Perris Family Care Center Dr. Robert Bruce Reid Health Clinic 308 E. San Jacinto Avenue Perris, CA 92570 7:30 am – 5:00 pm, Monday – Friday	Riverside Neighborhood Health Center 7140 Indiana Avenue Riverside, CA 92504 7:30 am – 5:00 pm, Monday – Friday	Rubidoux Family Care Center Don Schroeder Family Care Center 5256 Mission Blvd. Riverside, CA 92509 7:30 am – 5:00 pm, Monday – Friday	
Blaine Street Mental Health Clinic 769 Blaine Street, Suite B Riverside, CA 92507 7:30 am – 5:00 pm, Monday – Friday			

#### 5.8 Results Reporting

- 5.8.1 Reports shall be delivered daily by <u>secured email</u>, or other <u>secured electronic means</u>, Monday through Sunday, including holidays.
- 5.8.2 CONTRACTOR(S) shall report the results of each test performed to the ordering physicians within twenty-four (24) hours, excluding esoteric testing procedures, or as soon as technically feasible except as provided below: (i) "critical values"; and (ii) "phone report requests", and (iii) STAT results.
- 5.8.3 "Critical values" and "phone reports request" shall be provided by phone call to ordering physicians as soon as the result becomes available and is verified, subject to the ability of CONTRACTOR(S) or other laboratory approved producers to contact the ordering physician. If CONTRACTOR(S) is unable to contact the ordering physician on its first attempt, it shall continue to make reasonable efforts to contact him or her thereafter by phone call to communicate the results, until the results are communicated by telephone call, tele-printer, regular scheduled courier or other means.

5.8.4 STAT services are available to the COUNTY seven (7) days a week, twenty-four (24) hours a day. All STATS will be picked up within one (1) hour of notification. STAT results will be phoned, faxed, secured email, or other secured electronic means within fourthree (43) hours of initial notification, with the understanding that certain procedures may take longer to perform and thus will have longer report times.

# 5.9 Chain of Custody Documentation

NA.

#### 5.10 Retention Schedule

All specimens that the County identifies must be held routinely seven (7) days and up to one (1) year if requested by the COUNTY.

- a. Urine Specimens
- b. Serum
- c. Lavender Tubes
- d. Cultures

#### 5.11 Consultation

For all tests performed, CONTRACTOR(S) shall arrange for qualified staff to be available to consult with ordering physician by telephone during normal laboratory working hours of 7:30 a.m. to 5:30 p.m., Monday through Friday, excluding holidays to discuss procedures and to explain procedure results.

## 5.12 Field Support

CONTRACTOR(S) shall provide a laboratory service representative to each COUNTY site to assist in the establishment and maintenance of laboratory services as is necessary and appropriate. CONTRACTOR(S) must go to each COUNTY location and train staff on use of CONTRACTOR(S) computer as required.

#### 5.13 Computerized Services

Electronic reporting system will be provided to all COUNTY facilities. CONTRACTOR(S) will provide result accessibility and options to print on demand. CONTRACTOR(S) shall provide to COUNTY routine computerized services including maintenance and service to all computers and/or other electronic reporting systems provided by CONTRACTOR(S).

#### 5.14 Delayed Reporting Results

If the analyses are not prepared within the specified time frame, the responsible laboratory shall provide the COUNTY with a written explanation within 24 hours as to the circumstances surrounding such delay and/or destruction of samples. This explanation shall be sufficient to provide the regulatory agency with satisfactory information for inclusion into monitoring reports. Those delays within the laboratory's control shall be at no charge to the COUNTY.

#### 5.15 Sample Results

CONTRACTOR will render the method, equipment, and MDL (Method Detection Limits) upon request.

5.17 CONTRACTOR to provide list of STAT testing services that are available.

#### 5.18 Medi-Cal Managed Care (MMC) Patients

Reimbursement for MMC Patients laboratory services is not a part of this RFP. MMC patients will be referred for outpatient clinical laboratory services to the at-risk Health Maintenance Organization's ("HMO's"), Independent Physicians Organization's ("IPA's") or applicable Payor.

- a. CONTRACTOR acknowledges and agrees that under California state law for HMO patients, CONTRACTOR shall not bill, charge, collect a deposit from, seek compensation from, seek remuneration from, surcharge or have any recourse against any HMO patient or person acting on behalf of HMO patient except for applicable copayments or deductibles. Even in cases of nonpayment by HMO, IPA's or patients under COUNTY'S responsibility, CONTRACTOR shall not attempt any action or billing against HMO patient, the HMO, or the State of California.
- b. CONTRACTOR shall be paying fee-for-service reimbursement to COUNTY for Public Health Laboratory services.
- c. Charges for laboratory work referred directly from COUNTY to a non-CONTRACTOR laboratory will not be covered under this Agreement. CONTRACTOR is not responsible for payment of those charges with the exclusion of pap smears, biopsies and COUNTY Public Health Laboratory Testing.
- d. COUNTY shall reimburse awarded CONTRACTOR(s) for COUNTY patients in accordance with the discounted amount for the service listed in the Discount Price List of the CONTRACTOR Full Service List. CONTRACTOR shall present an invoice separately identifying each clinic site to COUNTY in arrears of completion of each month of service, setting forth the specific test performed, dollar amount for each test, and total amount due to CONTRACTOR. Each invoice shall be forwarded to the appropriate COUNTY location as specified in the contract arrangements subsequent to this bid process.
- e. CONTRACTOR shall directly bill and collect from Medi-Cal, insurance payors, and HMO payor sources for patients of COUNTY RCHS Clinics that pay for services on a fee-for-service basis specified under said agreement.
- f. CONTRACTOR shall attempt to collect Medi-Cal on any COUNTY patient that may possibly be eligible for Medi-Cal. In the event CONTRACTOR has not received reimbursement from Medi-Cal after two (2) full cycles of CONTRACTOR billing to Medi-Cal for a potential eligible patient, COUNTY shall reimburse CONTRACTOR for the ineligible patient in accordance with the payment structures determined during the bid process. Such eligibility issues shall be identified in a separate listing for billing purposes to COUNTY from the standard billings.
- g. Capitated clinical lab services for COUNTY patients performed by CONTRACTOR shall be paid by COUNTY for all MMC patients which are the financial responsibility under managed care CONTRACTS of COUNTY to pay at the established rate per capitated MMC patient enrolled to COUNTY physicians under primary care physician arrangements with HMOs. CONTRACTOR agrees that

COUNTY MMC patients that are not the financial responsibility of the COUNTY, may at COUNTY'S election, be payable by a COUNTY contracted IPA or HMO in lieu of direct payment from COUNTY. For such IPA or HMO payments, CONTRACTOR agrees to accept the same terms, conditions, and payment structure contained in this Proposal.

- h. CONTRACTOR acknowledges that COUNTY may be required by payors, HMO's or IPA's to send clinical laboratory services to another vendor. COUNTY shall make all attempts to use CONTRACTOR whenever possible.
- 5.19 All tests referred by COUNTY to a non-CONTRACTOR laboratory, with the exclusion of pap smears, outpatient biopsies and COUNTY Public Health Laboratory testing, are excluded from the capitation and will be billed to the COUNTY and reimbursed by the COUNTY. CONTRACTOR is not responsible for payment of those charges with the exclusion of pap smears, biopsies and COUNTY Public Health Laboratory Testing.
- 5.20 All laboratory testing that is not covered in the patient's HMO benefit plan, or laboratory testing for diagnoses that are not covered in an patient's benefit plan, will be excluded from the capitation rate and reimbursement for those services will be the patient's responsibility (i.e. Investigational testing, Non-FDA approved test(s), Fertility Testing, Weight Loss Tests, if allowable by patients HMO.
- 5.21 Blood drawing services will be limited to "Venous" venipuncture, i.e. excluding Heparin locks, arterial blood draws or any other blood collection method that cannot be collected by the phlebotomist at a CONTRACTOR services site during normal business hours.
- 5.22 STAT testing services are limited to the STAT Testing Menu that is in effect at the time of service and that are performed at a CONTRACTOR testing facility.

#### 5.23 Billing

- 6.23.1 All invoices and/or billing requests shall be submitted in a timely manner, the invoice/billing request shall include the site name, sample date, and type of analysis, unit prices and costs, and laboratory tracking number. Statements should also reflect any no charge services and service credits applied during the billing cycle for lost test samples, STAT or standard tests that fall outside the established turnaround times. COUNTY will assign a medical record number and CONTRACTOR shall identify the number on invoicing to COUNTY. CONTRACTOR(S) shall be billed on HCFA 1500 forms only for patients under COUNTY'S responsibility. Ambulatory Services should be billed on the appropriate CMS 1500 OR CMS 1450 (UB) claim form. The HCFA 1500 claim form can be found on www.tricareus.com/resources/files/form1500-90.pdf
- 5.23.2 In addition to previously stipulated billing by CONTRACTOR to Payor(s), the following payors will also be billed directly to payor as appropriate (including but not limited to):
  - a. Family PACT
  - b. Cancer Detection Program (CDP)

- c. Child Health and Disability Prevention Program (CHDP)
- d. Exclusive Care
- e. Medicare
- f. Medi-Cal
- g. Medicaid
- h. Inland Empire Health Plan (IEHP)
- 5.23.3 CONTRACTOR will bill all of the payors indicated above as well as any other payers with the exception of payers with exclusive agreements with other laboratories.

## EXHIBIT B FEES

CPT Code	Test Description	MANUSCO DI LANCO ZO DININO DI RINO MANINO ZE SANO ZE DUNO NO UNIVERSI DI LA CONTROLO DI LA CONTR	Fee Per Test
36415	DRAW FEE, PSC SPEC.		\$2.85
36415	Routine venipuncture or finger/heel/ear stick for o	collection	\$2.85
36416	DRAW FEE, CAPILLARY		\$15.40
80048	BASIC METAB PNL	Manager of the State of the Sta	\$4.40
80048	Basic metabolic panel		\$4.40
80051	ELECTROLYTE PANEL		\$3.67
80051	ELECTROLYTE PANEL		\$3.67
80053	COMP METAB PNL		\$5.50
80053	Comprehensive metabolic panel		\$5.50
80061	Lipid panel		\$8.80
80069	RENAL FUNC PNL		\$4.77
80069	Renal function panel		\$4.77
80076	HEPATIC FUNC PNL		\$4.22
80076	Hepatic function panel		\$4.22
80101	ALCOHOL, ETHANOL (U)		\$6.30
80101	PM COC MET W/CONF,U		\$7.71
80101	DAP 10-50		\$8.30
80101	MARIJUANA-50 CLIN		\$14.46
80101	VOLATILES (U) QL		\$14.49
80101	DAP 10-50 +		\$16.38
80101	DAP 5-50		\$16.38
80101	FENTANYL SCR/W CONF		\$16.38
80101	METHADONE CLIN		\$16.38
80101	OPIATES CEINICAL		\$16.38
80101	DAP 10-50		\$19.09
80101	DRUG ABUSE PNL 7 S		\$30.80
80101	DAP 5 MECONIUM	Constitution of the second	\$35.70
80101	DRUG SCR CLIN-1 (U)		\$44.80
80101	GHB-SCN;U (FORENSIC)		\$87.00
80102	DRUG PROCEDURE,1		\$19.58
80102	DRUG PROCEDURE,2	to the state of th	\$39.15
80150	AMIKACIN =	化氯磺基苯基苯化	\$10.64
80152	AMITRIPTYLINE		\$19.97
80154	PM BENZO QN U		\$34.77
80156	CARBAMAZEPINE, TOTAL		\$7.90
80156	CARBANIAZEP & METAB		\$40.20
80157	CARBAMAZEPINE, FREE		\$21.15
80158	CYCLOSPORINE LCMSMS		\$23.48

80162	DIGOXIN	\$9.70
80162	DIGOXIN	\$9.70
80164	VALPROIC ACID	\$8.73
80164	Dipropylacetic acid (valproic acid)	\$8.73
80164	VALPROIC ACID, F & T	\$62.01
80173	HALOPERIDOL	\$42.33
80178	LITHIUM "	\$6.07
80182	NORTRIPTYLINE	\$13.48
80184	PHENOBARBITAL	\$7.21
80185	PHENYTOIN	\$9.68
80186	PHENYTOIN, FREE	\$11.00
80195	RAPAMYCIN-SIROLIMUS	\$19.96
80198	THEOPHYLLINE	\$10.56
80201	TOPIRAMATE #	\$13.18
80202	VANCOMYCIN, TROUGH	\$7.76
80202	Vancomycin	\$7.76
80299	LAMOTRIGINE	\$10.54
80299	METHOTREXATE.	\$13.79
80299	ZONIŠAMIDE	\$15.14
80299	FLUOXETINE	\$19.21
80299	LEVETIRACETAM	\$19.57
80299	CAFFEINE	\$20.24
80299	MYCOPHENOLIC ACID, S	\$26.82
80299	FLECAINIDE	\$27.33
80299	CAFFEINE (U)	\$28.42
80299	METHOCARBAMOL;SP	\$35.00
80299	GLYBURIDE;SP	\$46.00
80299	OLANZAPINE	\$131.60
80299	GRISEOFULVIN;SP	\$353.00
81001	UA, COMPLETE	\$3.85
81001	CULT, UA, COMP W/RFL	\$3.85
81001	Urinalysis, by dip stick or tablet reagent for bilirubin,	\$3.85
81003	URINALYSIS, REFLEX	\$1.77
81003	UA, MACROSCOPIC	\$1.77
81005	RED. SUBSTANCES (U)	\$35.80
81025	HCG, TOTAL (U) QL	\$4.34
81206	P210 BCR ABL1	\$26.42
81207	P190 BCR ABL1	\$26.42
81220	CF CARRIER SCREEN	\$82.00
81225	GLOPIDOGKEL CYP2C19	\$106.78
81226	CYP2D6	\$88.24
81227	CVP2C9	\$106.78
81229 PED#DLIADC 1227	GENOMIC ALTERATIONS  Page 27 of 76	\$606.16

81240	PROTHROMBIN GENE	\$47.00
81241	FACTOR V (LEIDEN)	\$29.21
81243	FRAGILE X PCR	\$83.61
81244	FRAG X SOUTHERN BLOT	\$57.04
81256	HEREDITARY HEMO.	\$69.50
81257	ALPHA THAL MUT ANAL	\$69.30
81270	JAKZ V617F, QL	\$81.24
81270	JAK2 MUT, QN, PLASMA	\$257.00
81291	MTHFR, DNA MUTATION	\$83.81
81324	PMP22 DUP/DELETION DNA	\$604.80
81331	PRADER-WILLI/SYND.	\$127.70
81332	AAT MUTATION ANALY.	\$65.00
81373	HLA A,B CLASS I DNA	\$101.76
81374	HLA-A29 TYPING	\$88.68
81374	HLA-B51 TYPING	\$88.68
81381	HLA-B*5701 TYPING	\$73.29
81400	ACCUTYPE(R) 1L28B	\$31.83
81400	DPD GENE MUTATION	\$50.57
81400	PAI-14G/5G	\$69.31
81400	HPA 1 GENOTYPE	\$124.30
81401	TPMT GENOTYPE	\$55.19
81401	HUNTINGTON'S DISEASE	\$170.63
81401	SMA DIAGNOSTIC TEST	\$221.51
81404	ALPHA-GLOBIN GENE	\$228.03
82010	ACETONE (B)	\$40.89
82017	ACYLCARNITINE PLASMA	\$42.33
82024	ACTH	\$10.00
82024	Adrenocorticotropic hormone (ACTH)	\$10.00
82040	ALBUMIN	\$3.21
82040	Albumin; serum	\$3.21
82042	ALBÚMIN, CSF	\$15.05
82043	MICROALBUMIN RAND UR	\$6.40
82043	Albumin; urine, microalbumin, quantitative	\$6.40
82043	MICROALBUMIN, 24 HR UR	\$6.40
82043	MALB, RAND UR W/O CR	\$6.40
82043	MICROALBUMIN 24HR (U)	\$6.40
82055	ALCOHOL, ETHYL (B)	\$11.11
82055	ALCOHOL QUANT, RAND (U)	\$39.36
82085	ALDOLASE	\$5.97
82085	ALDOLASE	\$5.97
82088	ALDOSTERONE,LC/MS/MS	\$12.00
82103	A-1-ANTITRYPSIN ON	\$9.61
82103	ALPHA-1-ANTITRYPSIN *	\$14.85

82104 A-1-A	NTITRYPSIN		\$15.98
82105 AFP,T	UMOR (CHIRON)		\$11.64
82107 AFP A	ND AFP-L3		\$37.80
82131 CYSTII	NE QN 24 HR		\$39.40
82135 D-ALA	, 24HR (U)		\$29.05
82135 ALA, F	RAND (U)		\$29.05
82139 AMIN	O ACID FRAC, P		\$78.58
82139 AMIN	O ACID FRAC,N		\$78.58
82139 AMIN	O ACID,QT(U)		\$90.33
82140 AMM	ONIA (P)		\$10.67
82140 Amm	phia		\$10.67
82145 AMPH	HETAMINES (U)		\$17.18
82145 AMP	IET. GC/MS MECON		\$30.51
82145 PM AI	MPHETAMINES QN U		\$34.77
82150 AMYL	ASE		\$3.88
82150 AMYL	ASE		\$3.88
82150 AMYL	ASE (U)		\$6.45
82157 ANDR	OSTENEDIONE LCMS		\$21.34
82157 ANDR	OSTENEDIONE		\$21.34
82157 : ANDR	OSTENEDIONE		\$21.34
82164 ANGIO	OTENSIN CONVENZ		\$8.00
82164 ANGK	OTENSIN CONVT		\$10.80
82172 APOL	POPROTEIN B		\$17.85
82172 Apolių	ooprotein, each		\$17.86
82172 APOL	POPROTEIN A1		\$17.86
82175 ARSEI	NIC (B)		\$14.55
82175 ARSE	NIC (U)		\$21.55
82180 VITAN	MINC		\$25.68
82205 PENTO	OBARBITAL		\$16.52
82205 PM B	ARBITURATES ON U	The second secon	\$34.77
82232 BETA-	2-MICROGLOBULIN		\$9.70
	2 microglobulin		\$9.70
82239 BILE A	CIDS, TOTAL		\$11.20
82247 BILIRI	JBIN, TOTAL		\$3.21
	OTAL PEDIATR.		\$17.17
	t bilirubin code		\$3.21
	JBIN, DIRECT		\$3.21
	RECT, PEDI		\$7.44
	LT BLOOD, FÉCES		\$3.63
	MMUNOCHEM		\$9.21
		determination by immunoassa	\$9.21
	MUM (U)		\$23.02
82306 VIT D	250H LC/MS/MS		\$15.00

82306	Calcifediol (25-OH Vitamin D-3)		\$15.00
82308	CALCITONIN		\$17.46
82308	CALCITONIN		\$17.46
82310	Calcium; total		\$3.21
82310	CALCIUM		\$3.21
82310	CALCIUM W/O CREAT RAND UR		\$4.85
82310	CALCIUM (U)		\$5.13
82330	CALCIUM, IONIZED	Appendix of the second	\$8.00
82330	Calcium; ionized		\$8.00
82340	CALCIUM W/O CREAT 24 H UR		\$6.00
82365	STONE ANALYSIS		\$16.27
82374	BICARBONATE;U		\$39.00
82378	CEA, PERITONEAL FL		\$8.26
82379	CARNITINE, LC/MS/MS		\$18.65
82379	CARNITINE, URINE		\$204.90
82380	CAROTENE		\$15.73
82380	CAROTENE		\$15.73
82384	CATECHOLAMINES 24HR		\$14.34
82384	CATECHOL, F&T, PL		\$26.25
82384	CATECHOLAMINES, FRAC		\$28.91
82384	CATECHOLAMINES (U)		\$28.91
82384	Catecholamines; fractionated		\$28.91
82384	CATECHOLAMINES(U)W/CR		\$31.41
82390	CERULOPUASMIN.		\$6.79
82390	CERULOPLASMIN		\$6.79
82397	INHIEIN B		\$47.95
82435	CHLOREDE		\$3.21
82436	CHLORIDE W/O CREAT 24H UR		\$2.78
82436	CHLORIDE W/O CREAT RAND		\$3.61
82436	CHLORIDE (U)		\$3.94
82465	CHÖLESTEROL, TOTAL		\$3.30
82465	Cholesterol, serum, total		\$3.30
82491	NOREPINEPHRINE		\$13.09
82491	DOPAMINE, P		\$13.09
82491	EPINEPHRINE		\$13.09
82491	PORPHYRINS, TOTAL		\$47.71
82492	PORPHYRINS, FRAC (P)		\$26.76
82495	CHROMIUM, SERUM		\$25.69
82507	CITRIC ACID W/O CREAT 24H	A STATE OF THE STA	\$10.00
82507	Citrate		\$11.78
82507	CITRIC ACID 24HR (LI)		\$11.78
82520	COCAINE METAB. GC/MS		\$16.75
82523	N-TELOPEPTIDE 24HR (U)		\$20.50

82525 COPPER (U)	\$8.06
82525 COPPER	\$11.99
82525 COPPER	\$11.99
82525 COPPER, RBC	\$22.66
82530 CORTISOL, FREE 24HR	\$11.64
82530 CORTISOL, FREE	\$19.46
82530 Cortisol; free	\$19.46
82533 CORTISOL, TOTAL	\$8.73
82533 CORTISOL, A.M.	\$8.73
82533 Cortisol; total	\$8.73
82533 DST 1 SPEC	\$8.73
82540 CREATINE, SERUM	\$8.30
82540 CREATINE, 24HR (U)	\$8.30
82542 THC METAB., GC/MS U	\$15.07
82542 MARJUANA CONFIGC/MS	\$13.07
82542 THC GC/MS MECON	\$20.83
82542 PM MARIJUANA M QN U	\$34.77
82544 ACYLGLYCINES, QN, U	\$345.15
82550 CK, TOTAL	\$4.26
82550 Creatine kinase (CK), (CPK); total	\$4.26
82552 CK ISOENZYMES	\$15.87
82553 CK-MB (CK-2)	\$25.59
82553 Creatine kinase (CK), (CPK); MB fraction	
82565 CREATININE	\$3.21
82565 Creatinine; blood	\$3.21
82570 CREATININE RAND (U)	\$2.50
82570 CREATININE (U)	\$2.50
82570 CREAT, PERITONEAL FL	\$10.35
82575 CREATININE CLEARANCE	\$6.15
82595 CRYOGLOBULIN,%CRYO	\$6.76
82595 CRYOGLOB EVAL	\$15.08
82607 VITAMIN B12	\$3.84
82607 Cyanocobalamin (Vitamin B-12);	\$3.84
82608 VIT \$12 BINDING CAP	\$13.68
82626 DHEA, LC/MS/MS	\$14.94
82626 DHEA, UNCONJUGATED	\$14.94
82626 Dehydroepiandrosterone (DHEA)	\$14.94
82627 DHEA-SULFATE	\$7.20
82627 Dehydroeplandrosterone-sulfate (DHE	
82646 HYDROCODONE & METAB.	\$71.78
82651 DIHYDROTESTOSTERONE	\$28.54
82652 VITAMIN D,1,25	\$19.11
82652. Dihydroxyvitamin D, 1,25-	\$19.11

82668 ERYTHROPOIETIN  82668 ERYTHROPOIETIN  82670 ESTRADIOL  82670 ESTRADIOL  82672 ESTRADIOL,EXTRACTION  82672 Estrogens; total	\$18.43 \$18.43 \$15.52 \$15.52 \$16.42 \$13.38
82670 ESTRADIOL  82670 ESTRADIOL  82670 ESTRADIOL, EXTRACTION	\$15.52 \$15.52 \$16.42
82670 ESTRADIOL 82670 ESTRADIOL, EXTRACTION	\$15.52 \$16.42
82670 ESTRADIOL, EXTRACTION	\$16.42
82672 Estrogens; total	¢12 20
	313.30
82672 ESTROGEN, TOTAL (S)	\$13.38
82677 ESTRIOL, SERUM	\$20.00
82677 Estriol	\$20.00
82679 ESTRONE	\$23.28
82679 ESTRONE	\$23.28
82693 ETHYLENE GLYCOL	\$14.82
82705 FECAL FAT, QUAL	\$12.96
82705 Fat or lipids, feces; qualitative	\$12.96
82710 FECAL LIPIDS, TOTAL	\$29.03
82725 FATTY ACIDS, FREE	\$9.14
82728 FERRITIN	\$5.50
82728 FERRITIN	\$5.50
82746 FOLATE, SERUM	\$4.00
82746 Folic acid; serum	\$4.00
82747 FOLATE, RBC	\$5.82
82775 GAL-1-P UR TRANSFASE	\$171.08
82784 IMMUNOGLOBULIN G	\$4.75
82784 IMMUNOGLOBULIN M	\$4.75
82784 IMMUNOGLOBULIN A	\$4.75
82784 IGG, CSF	\$6.00
82784 IMMUNOGLOBULINS, FL	\$29.51
82784 IMMUNOGLOBULIN D	\$37.14
82785 IMMUNOGLOBULIN E	\$8.00
82787 IGG SUBCLASS 4	\$8.87
82941 GASTRIN	\$11.64
82943 GLUCAGON	\$25.88
82945 GLUCOSE, CSF	\$3.01
82947 GLUCOSE, PLASMA	\$2.32
82947 GLUCOSE, PP/2 HOUR	\$2.32
82947 GLUCOSE, PP/1 HR	\$2.32
82947 GLUCOSE, SERUM	\$3.21
82947 GLUC,FAST & POST 2HR	\$4.64
82950 GTT, 2 SPEC	\$4.64
82951 GTT, 3 SPECIMENS	\$6.96
82951 Glucose; tolerance test (GTT), three specimens (includes	\$6.96
82955 G-6-PD (8)	\$6.67
82977 GGT	\$2.50

82977	Glutamyltransferase, gamma (GGT		\$2.50
82985	FRUCTOSAMINE		\$8.12
3 83001	FSH		\$5.00
83001	Gonadotropin; follicle stimulating h	ormone (FSH)	\$5.00
83001	FSH,3RD GENERATION		\$10.33
83002	LH		\$5.00
83002	Gonadotropin; luteinizing hormone	(LH)	\$5.00
83002	LH,3RD GENERATION		\$17.46
83003	HGH		\$7.76
83010	HAPTOGLOBIN		\$8.73
83010	Haptoglobin; quantitative		\$8.73
83013	H.PYLORI BREATH TEST		\$74.47
83013	H.pylori analysis code		\$74.47
83014	UBT COLLECTION		\$8.69
83018	COBALT, RANDOM URINE		\$22.37
83018	THALLIUM RANDOM UR		\$27.34
83018	COBALT;SP		\$50.00
83018	PLATINUMSP		\$68.00
83018	INDIUM;B		\$87.00
83018	TITANIUM;B		\$87.00
83036	HEMOGLOBIN A1C		\$4.80
83036	Hemoglobin; glycated		\$4.80
83036	HEMOGLOBIN A1C W/MPG		\$4.80
83036	HEMOGLOBIN A1C W/EAG		\$4.80
83090	HOMOCYSTEINE, CARDIO		\$7.52
83090	Homocystine Assay		\$7.52
83090	HOMOCYSTEINE, NU/CON		\$18.65
83497	HIAA, 5-, URINE		\$19.63
83497	HIAA, 5 (U)		\$19.63
83497	Hydroxyindolacetic acid, 5-(HIAA)		\$19.63
83498	17-OHPROGEST, LC/MSMS		\$14.43
83498	17-HYDRXPROG NEO/INF		\$14.43
83516	ACTIN ANTIBODY (IGG)		\$8.88
83516	TTG-IGA		\$10.00
83516	RIBOSOMAL PAB		\$10.27
83516	GLIADINIGA		\$10.27
83516	TTG IGG		\$10.27
83516	GLIADIN AB IGG	7304	\$10.27
83516	ANTIHISTONE AB		\$10.27
83516	TTG:IGG,IGA		\$20.54
83516	GLIADIN AB IGG/IGA		\$20.54
83516	NMO AUTOAB IGG		\$382.20
83519	PTH-RELATED PROTEIN		\$14.94

ALL STREET, ST		
83519	ACHR MODULATING AB	\$14.94
83519	ANTI-T3 AUTOAB	\$14.94
83519	ALPHA SUBUNIT	\$14.94
83519	IGFBP-3	\$14.94
83519	IGFBP-1	\$14.94
83519	TBII-THYRO, BIND, IG	\$14.94
83519	ACHR BLOCKING	\$24.02
83519	TRYPSIN, RIA	\$25.70
83519	ACHR BINDING AB	\$27.01
83519	VGCC AB ASSAY	\$125.50
83519	ACH RECEPTOR MOD. AB	\$225.75
83519	MUSK ON AB TITER	\$693.00
83520	ANTI-GM1	\$12.88
83520	GBM ANTIBODY	\$14.31
83520	ANTI-MULLERIAN	\$14.40
83520	SQLUBLE LIVER AG ABS	\$18.14
83520	GANGLIGSIDE ASIALO	\$22.07
83520	TRYPTASE TOTAL ***	\$22.62
83520	ASIALO-GM-1 GANGLAB	\$24.98
83520	HYALURONICACID	\$25.47
83520	RNA POLYMERASE III	\$26.30
83520	BULLOUS PEMPHIGOID 8P230	\$27.66
83520	BP180	\$29.60
83520	GD1A A8 (IGM)	\$31.40
83520	GD1A AB (IGG)	\$34.23
83520	IL-6	\$37.21
83520	DESMOGLEIN AB	\$45.08
83520	GQ1B AB(IGG)	\$46.01
83520	VONWILLEBRAND FACTOR	\$49.62
83525	INSULIN	\$7.00
83525	Insulin; total	\$7.00
83540	lron	\$3.87
83540	IRON, TOTAL	\$3.87
83605	LACTIC ACID, (P)	\$9.09
83615	LDH, TOTAL	\$2.32
83615	Lactate dehydrogenase (LD), (LDH);	\$2.32
83625	LD ISOENZYMES	\$12.48
83630	LACTOFERRIN DET.	\$41.19
83632	HPL	\$88.00
83655	LEAD, (B)	\$5.69
83655	LEAD W/OSHA (B)	\$5.69
83655	Lead	\$5.69
83655	LEAD (U)	\$12.04

\$3.10   \$3.10   \$3.10   \$3.10   \$3.10   \$3.99   \$1.00   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$6.73   \$1.00   \$1.00   \$6.73   \$1.00   \$1.0	93500	Linese		62.40
### S1899	83690	LIPASE		\$3.10
SAMPO				
B3690   LIPASE, PAECHEN, THUD   \$6.73				
S5890				<del></del>
B3695   LIPOPROTEIN   A)   \$14.47     B3768   LIPOPROTEIN   A)   \$14.47     B3778   BDC-CHOLESTERIOL   \$2.20     B37721   DIRECT IDL   \$55.82     B3721   LIPOPROTEIN   GITECT INS SUITEMENS, direct measurement, LDL   \$5.82     B3727   OCNADOTROPIN REE HON   \$225.00     B3735   MAGNIESIUM   \$33.64     B3735   MAGNIESIUM   \$33.64     B3735   MAGNIESIUM   \$33.64     B3735   MAGNIESIUM   \$38.77     B3745   MAGNIESIUM   \$40.00   \$40.00     B3735   MAGNIESIUM   \$40.00     B3736   CLOZAPPIN   CLOZAPIN   \$11.27     B3739   ODINE SERSIM, PLASMA   \$19.97     B3739   ODINE SERSIM, PLASMA   \$19.97     B3739   REPUBLICATION   MERAS, SP   \$85.72     B3825   MERCURY   (U)   \$25.16     B3835   MERCURY   (U)   \$25.16     B3835   MERCURY   (U)   \$25.16     B3835   MERCURY   (U)   \$25.16     B3835   MERCURY   (U)   \$25.16     B3836   BMERCURY   (U)   \$34.77     B3870   BNIP   \$31.427     B3880   PMAETHADONEON-U   \$34.77     B3881   MAPOGLOBIN   \$11.79     B3883   KAPPA/LAMBDA ECHAPIN   \$19.66     B3883   KAPPA/LAMBDA ECHAPIN   \$19.66     B3883   KAPPA/LAMBDA & MANTIO   \$10.60     B3885   KAPPA/LAMBDA & MANTIO   \$10.60     B3885   NUCLEORDASE   \$42.42			The second secon	<del></del>
S3695   Lipoprotein (a)				
### ### ### ### ### ### ### ### ### ##				
\$5.82   \$5.82   \$5.82   \$3721   Lipoprotein, direct measurement, direct measurement, LDL   \$5.82   \$3721   Lipoprotein, direct measurement, direct measurement, LDL   \$5.82   \$3.821   \$3.841   \$3.841   \$3.841   \$3.841   \$3.841   \$3.841   \$3.841   \$3.841   \$3.8425   \$3.8435				
B3721   Lipoprotein, direct measurement, direct measurement, LDS   \$5.82	The second secon		Level 1997 1997	
83727   GONADOTROPIN REL HOR   \$225.00     83735   MAGNESIUM   \$3.64     83735   MAGNESIUM   \$3.64     83735   MAGNESIUM   \$8.77     83735   MAGNESIUM   \$8.77     83735   MAGNESIUM   \$10.53     83735   MAGNESIUM   \$24 PR W/O CREAT   \$11.27     83735   MAGNESIUM   \$24 PR W/O CREAT   \$18.38     83789   CLOZAPIU   \$15.28     83789   CLOZAPIU   \$15.28     83789   OXCARBAZIPINE   \$19.97     83789   OXCARBAZIPINE   \$19.97     83789   TPMT ACTIVITY   \$55.24     83789   RISPERIDONE / METAB, SP   \$85.72     83825   MERCURY   \$1.12     83825   MERCURY   \$1.12     83825   MERCURY   \$1.12     83835   METANPH, ZA HR URINE   \$16.88     83835   METANPH, ZA HR URINE   \$16.88     83835   METANPH, RAND   \$1.00   \$10.88     83836   METANPH, RAND   \$1.79     83840   PRO METHADONE QN U   \$34.77     83840   PRO METHADONE QN U   \$34.77     83874   MYOGLOBIN   \$11.79     83880   PRO SINP   \$37.94     83883   KAPPA LT CHN QNT, (U)   \$15.03     83883   KAPPA LT CHN QNT, (U)   \$15.03     83883   KAPPA LAMBDA L CHAIN   \$19.66     83883   KAPPA LAMBDA 2 HR U   \$30.06     83883   KAPPA LAMBDA W/RATTO   \$70.60     83887   NICOTINE/COTININE U   \$26.18     83915   NUCLEOTIDASE, 5°   \$42.42				<del> </del>
\$3.64     \$3.735   MAGNESIUM   \$3.64     \$3.735   MAGNESIUM   \$3.64     \$3.735   MAGNESIUM   \$3.64     \$3.735   MAGNESIUM   \$3.77     \$3.735   MAGNESIUM   \$3.05     \$3.735   MAGNESIUM   \$3.05     \$3.735   MAGNESIUM   \$3.05     \$3.735   MAGNESIUM   \$3.05     \$3.735   MAGNESIUM   \$3.00     \$3.838   \$3.735   MAGNESIUM   \$3.00     \$3.737   \$3.735     \$3.737   MAGNESIUM   \$3.00     \$3.737   MAGNESIUM   \$3.00     \$3.737   MAGNESIUM   \$3.00     \$3.737   MAGNESIUM   \$3.00     \$3.738   MAGNESIUM   \$3.00     \$3.730   MAGNESIUM   \$3.00     \$3.730   MAGNESI			irect measurement, LDL	
\$3.64     \$3.735   MAGNESIUM (U)   \$8.77     \$3.735   MAGNESIUM (U)   \$8.77     \$3.735   MAGNESIUM 24HR W/O'CREAT.   \$10.53     \$3.735   MAGNESIUM 24HR W/O'CREAT.   \$11.27     \$3.735   MAGNESIUM (U)W/CR   \$11.27     \$3.735   MAGNESIUM (U)W/CR   \$11.27     \$3.739   MAGNESIUM (ELOZARIL)   \$15.28     \$3.789   OXCARBAZEPINE   \$19.97     \$3.789   OXCARBAZEPINE   \$19.97     \$3.789   TPMT ACTIVITY   \$55.24     \$3.789   RISPERIORIE / METAB, SP   \$85.72     \$3.825   MERCURY (B)   \$14.12     \$3.825   MERCURY (U)   \$25.16     \$3.835   METANPH, RAND (U)   \$16.88     \$3.835   METANPH, RAND (U)   \$16.88     \$3.835   METANPH, RAND (U)   \$34.77     \$3.840   PW METHADORE ON U   \$34.77     \$3.873   MYELIN BASIC PROTEIN   \$17.42     \$3.874   MYOGLOBIN, (U)   \$11.79     \$3.875   BASP   \$37.94     \$3.880   BNP   \$37.94     \$3.883   KAPPA LT CHN ONT, (U)   \$15.03     \$3.883   KAPPA LT CHN ONT, (U)   \$15.03     \$3.883   KAPPA/LAMBDA LCHAIN   \$19.66     \$3.883   KAPPA/LAMBDA LCHAIN   \$19.66     \$3.883   KAPPA/LAMBDA L24 HR U   \$30.06     \$3.883   KAPPA/LAMBDA W/RATIC   \$70.60     \$3.887   NICOTINE/COTININE U   \$26.18     \$3.915   NIUCLEOTIDASE, 5' \$42.42				\$225.00
\$3735   MAGNESIUM (U)   \$8.77   \$3735   MAGNESIUM 24HR W/O CREAT   \$10.53   \$11.27   \$13735   MAGNESIUM 24HR W/O CREAT   \$11.27   \$11.27   \$13735   MAGNESIUM 24HR U) W/CR   \$118.38   \$118.38   \$1739   CLOZAPINE (CLOZARIL)   \$15.28   \$15.28   \$1739   OXCARBAZEPINE   \$19.97   \$19.97   \$19.97   \$19.97   \$19.97   \$19.99   ODINE SERUM, PLASMA   \$19.97   \$19.97   \$19.97   \$19.97   \$19.99   ODINE SERUM, PLASMA   \$19.97				\$3.64
83735   MAGNESIUM 24HR W/O CREAT.   \$10.53     83735   MAGNESIUM (U) W/CR   \$11.27     83735   MAGNESIUM 24HR (U) W/CR   \$18.38     83789   GLOZAPINE (CLOZARIL)   \$15.28     83789   OXCARBAZEPINE   \$19.97     83789   IODINE SERUM, PLASMA   \$19.97     83789   IODINE SERUM, PLASMA   \$19.97     83789   TPMT ACTIVITY   \$55.24     83789   RISPERIDONE / METAB, SP   \$85.72     83825   MERCURY (B)   \$14.12     83825   MERCURY (B)   \$25.16     83335   METANPH-24 HR URINE   \$16.88     83835   METANPH-R. RAND (U)   \$16.88     83835   METANPHRINES, FRACT   \$29.72     83840   PM METHADONE QN U   \$34.77     83873   MYELIN BASIC PROTEIN   \$17.42     83874   MYOGLOBIN   \$11.79     83880   BNP   \$37.94     83880   BNP   \$37.94     83883   KAPPA LT CHN QMT, (U)   \$15.03     83883   KAPPA LT CHN QMT, (U)   \$15.03     83883   KAPPA LORING CHAIN   \$19.66     83883   KAPPA LIGHT CHAIN, FREE   \$31.13     83887   NICOTINE/COTININE U \$26.18	83735			\$3.64
\$3735   MAGNESIUM (U)W/CR   \$11.27     \$3735   MAGNESIUM 24HR(U)W/CR   \$18.38     \$3789   CLOZAPINE (CLOZARIL)   \$15.28     \$3789   OXCARBAZEPINE   \$19.97     \$3789   IODINE SERUM, PLASMA   \$19.97     \$3789   TPMT ACTIVITY   \$55.24     \$3789   RISPERIDONE / METAS, SP   \$85.72     \$3825   MERCURY (B)   \$14.12     \$3825   MERCURY (B)   \$25.16     \$3835   METANPH-24 HR URINE   \$16.88     \$3335   METANPH-24 HR URINE   \$16.88     \$3335   METANPH-24 HR URINE   \$16.88     \$3835   METANPH-24 HR URINE   \$17.42     \$3840   PM METHADONE ON U   \$34.77     \$3873   MYEUIN BASIC PROTEIN   \$17.42     \$3874   MYOGLOBIN (U)   \$11.79     \$3874   MYOGLOBIN   \$14.27     \$3880   BNP   \$37.94     \$3883   KAPPA LT CHN QINT, (U)   \$15.03     \$3883   KAPPA LT CHN QINT, (U)   \$15.03     \$3883   KAPPA LT CHN QINT, (U)   \$15.03     \$3883   KAPPA/LAMBDA L CHAIN   \$19.66     \$3883   KAPPA/LAMBDA W/RATIO   \$70.60     \$3887   NICOTINE/COTININE U   \$26.18     \$39915   NIJCLEOTIDASE, 5' \$42.42				\$8.77
83735       MAGNESIUM 24HR(U)W/CR       \$18.38         83789       CLOZAPINE (CLOZARIL)       \$15.28         83789       OXCARBAZEPINE       \$19.97         83789       IODINE SERUM, PLASMA       \$19.97         83789       TPMT ACTIVITY       \$55.24         83789       RISPERIOONE / METAB, SP       \$85.72         83825       MERCURY (B)       \$14.12         83825       MERCURY (U)       \$25.16         83835       METANPH, ZA HR URINE       \$16.88         83835       METANPH, RAND (U)       \$16.88         83835       METANPHRINES, FRACT       \$29.72         83840       PM METHADORIE QN U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83880       BNP       \$37.94         83880       PRORNP       \$52.71         83883       KAPPA LI CHN QNT, (U)       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/	83735	MAGNESIUM 24HR W/O CREAT.	CATALOGUE CATALO	\$10.53
83789         CLOZAPINE (CLOZARIL)         \$15.28           83789         OXCARBAZEPINE         \$19.97           83789         IODINE SERUM, PLASMA         \$19.97           83789         TPMT ACTIVITY         \$55.24           83789         RISPERIDONE / METAB, SP         \$85.72           83825         MERCURY (B)         \$14.12           83825         MERCURY (U)         \$25.16           83835         METANPH, ZA HR URINE         \$16.88           83835         METANPH, RAND (U)         \$16.88           83835         METANPH, RAND (U)         \$16.88           83840         PM METHADONE ON U         \$34.77           83873         MYELIN BASIC PROTEIN         \$17.42           83874         MYOGLOBIN, (U)         \$11.79           83880         BNP         \$37.94           83880         BNP         \$52.71           83880         PROBIP         \$55.03           83883         KAPPA LIT CHN QNT, (U)         \$15.03           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/C	83735	MAGNESIUM (U)W/CR	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	\$11.27
83789         OXCARBAZEPINE         \$19.97           83789         IODINE SERUM, PLASIMA         \$19.97           83789         TPMT ACTIVITY         \$55.24           83789         RISPERIDONE / METAB, SP         \$85.72           83825         MERCURY (B)         \$14.12           83825         MERCURY (U)         \$25.16           83835         METANPH.24 HR URINE         \$16.88           83835         METANPH, RAND (U)         \$16.88           83835         METANPH, RAND (U)         \$16.88           83840         PM METHADONE QN U         \$34.77           83873         MYELIN BASIC PROTEIN         \$17.42           83874         MYOGLOBIN, (U)         \$11.79           83880         BNP         \$37.94           83880         PROBNP         \$52.71           83883         KAPPA LT CHN QNT, (U)         \$15.03           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA L CHAIN         \$30.06           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83735	MAGNESIUM 24HR(U)W/CR		\$18.38
S3789   IODINE SERUM, PLASIMA   \$19.97	83789	CLOZAPINE (CLOZARIL)		\$15.28
83789         TPMT ACTIVITY         \$55.24           83789         RISPERIDONE / METAB, SP         \$85.72           83825         MERCURY (B)         \$14.12           83825         MERCURY (U)         \$25.16           83835         METANPH, 24 HR URINE         \$16.88           83835         METANPH, RAND (U)         \$16.88           83835         METANPH, RAND (U)         \$34.77           83840         PM METHADORE QN U         \$34.77           83873         MYELIN BASIC PROTEIN         \$17.42           83874         MYOGLOBIN, (U)         \$11.79           83874         MYOGLOBIN, (U)         \$14.27           83880         BNP         \$37.94           83880         PROBNP         \$52.71           83883         KAPPA LIT CHN QNT, (U)         \$15.03           83883         A-2-MACROGLOBUUN         \$15.03           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA L CHAIN         \$30.06           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83789	OXCARBAZEPINE ***		\$19.97
83789       RISPERIDONE / METAB, SP       \$85.72         83825       MERCURY (B)       \$14.12         83825       MERCURY (U)       \$25.16         83835       METANPH. 24 HR URINE       \$16.88         83835       METANPH, RAND (U)       \$16.88         83840       PM METHADONE ON U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83880       BNP       \$37.94         83880       BNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBULN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83789	IODINE SERUM, PLASMA		\$19.97
83825       MERCURY (U)       \$25.16         83835       METANPH.24 HR URINE       \$16.88         83835       METANPH, RAND (U)       \$16.88         83835       METANPH, RAND (U)       \$16.88         83835       METANPHRINES, FRACT       \$29.72         83840       PM METHADONE QN U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83874       MYOGLOBIN       \$14.27         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LIT CHN QNT, (U)       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA L CHAIN       \$30.06         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83789	TPMT ACTIVITY		\$55.24
83825         MERCURY (U)         \$25.16           83835         METANPH, 24 HR URINE         \$16.88           83835         METANPH, RAND (U)         \$16.88           83835         METANPHRINES, FRACT         \$29.72           83840         PM METHADONE QN U         \$34.77           83873         MYELIN BASIC PROTEIN         \$17.42           83874         MYOGLOBIN, (U)         \$11.79           83880         BNP         \$37.94           83880         BNP         \$52.71           83883         KAPPA LT CHN QNT, (U)         \$15.03           83883         A-2-MACROGLOBUUN         \$15.03           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA 24 HR U         \$30.06           83883         KAPPA LIGHT CHAIN, FREE         \$31.13           83883         KAPPA LIGHT CHAIN, FREE         \$31.13           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83789	RISPERIDONE / METAB, SP		\$85.72
83835       METANPH.24 HR URINE       \$16.88         83835       METANPH, RAND (U)       \$16.88         83835       METANEPHRINES, FRACT       \$29.72         83840       PM METHADGNE QN U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83874       MYOGLOBIN       \$14.27         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83825	MERCURY (B)		\$14.12
83835       METANPH, RAND (U)       \$16.88         83835       METANEPHRINES, FRACT       \$29.72         83840       PM METHADONE QN U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83874       MYOGLOBIN       \$14.27         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBULIN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FRÉE       \$31.13         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83825	MERCURY (U)		\$25.16
83835       METANEPHRINES, FRACT       \$29.72         83840       PM METHADONE QN U       \$34.77         83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN, (U)       \$11.79         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBUUN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83835	METANPH.24 HR URINE		\$16.88
83840         PM METHADONE ON U         \$34.77           83873         MYFLIN BASIC PROTEIN         \$17.42           83874         MYOGLOBIN, (U)         \$11.79           83880         BNP         \$37.94           83880         PROBNP         \$52.71           83883         KAPPA LT CHN QNT, (U)         \$15.03           83883         A-2-MACROGLOBUUN         \$15.03           83883         KAPPA/LAMBDA L CHAIN         \$19.66           83883         KAPPA/LAMBDA L CHAIN         \$30.06           83883         KAPPA/LAMBDA 24 HR U         \$30.06           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83835	METANPH, RAND (U)		\$16.88
83873       MYELIN BASIC PROTEIN       \$17.42         83874       MYOGLOBIN (U)       \$11.79         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBUUN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA 24 HR U       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83835	METANEPHRINES, FRACT		\$29.72
83874       MYOGLOBIN, (U)       \$11.79         83874       MYOGLOBIN       \$14.27         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBULIN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA 24 HR U       \$31.13         83883       KAPPA/LAMBDA W/RATEO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83840	PW METHADONE ON U		\$34.77
83874       MYOĞLOBIN       \$14.27         83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBULIN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA/LAMBDA 24 HR U       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83873	MYELIN BASIC PROTEIN		\$17.42
83880       BNP       \$37.94         83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBULIN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83874	MYOGLOBIN, (U)		\$11.79
83880       PROBNP       \$52.71         83883       KAPPA LT CHN QNT, (U)       \$15.03         83883       A-2-MACROGLOBUUN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83874	MYOGLOBIN		\$14.27
83883   KAPPA LT CHN QNT, (U)   \$15.03     83883   A-2-MACROGLOBULIN   \$15.03     83883   KAPPA/LAMBDA L CHAIN   \$19.66     83883   KAPPA/LAMBDA 24 HR U   \$30.06     83883   KAPPA/LAMBDA 24 HR U   \$31.13     83883   KAPPA/LAMBDA W/RATIO   \$70.60     83887   NICOTINE/COTININE U   \$26.18     83915   NUCLEOTIDASE, 5'   \$42.42	83880	BNP		\$37.94
83883       A-2-MACROGLOBULIN       \$15.03         83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOFIDASE, 5'       \$42.42	83880	PROBNE		\$52.71
83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83883	KAPPA LT CHN QNT, (U)		\$15.03
83883       KAPPA/LAMBDA L CHAIN       \$19.66         83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83883	A-2-MACROGLOBULIN		\$15.03
83883       KAPPA/LAMBDA 24 HR U       \$30.06         83883       KAPPA LIGHT CHAIN, FREE       \$31.13         83883       KAPPA/LAMBDA W/RATIO       \$70.60         83887       NICOTINE/COTININE U       \$26.18         83915       NUCLEOTIDASE, 5'       \$42.42	83883	KAPPA/LAMBDA L CHAIN		\$19.66
83883         KAPPA LIGHT CHAIN, FREE         \$31.13           83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83883			
83883         KAPPA/LAMBDA W/RATIO         \$70.60           83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83883	KAPPA LIGHT CHAIN, FREE		\$31.13
83887         NICOTINE/COTININE U         \$26.18           83915         NUCLEOTIDASE, 5'         \$42.42	83883			
83915 NUCLEOTIDASE, 5' \$42.42	83887			
		OLIGOCLONAL BANDING		\$26.42

83921	METHYLMALONIC ACID	\$13.85
83921	METHYEMALONIC ACID U	\$20.93
83921	OROTIC ACID URINE	\$197.18
83925	OPIATES CNF GCMS UR	\$24.20
83925	OPIATES, GC/MS (U)	\$28.80
83925	PM FENTANYL,QN,U	\$34.77
83925	PM OPIATES, OXYCOD QN	\$34.77
83930	OSMOLALITY	\$6.98
83935	OSMOLALITY (U)	\$6.04
83945	OXALIC ACID W/O CREAT 24H	\$12.82
83945	OXALIC ACID 24HR (U)	\$12.82
83951	DCP	\$76.73
83951	des-gamma-carboxy-prothrombin (DCP)	\$76.73
83986	PH, FECES	\$12.99
83992	PHENCYCLIDINE	\$17.61
83993	CALPROTECTIN,STOOL	\$53.42
84030	PHENYLALANINE	\$25.20
84066	ACID PHOS, PROS, IMM	\$7.33
84075	ALKAUNE PHOSPHATASE	\$3.21
84075	Phosphatase, alkaline;	\$3.21
84100	PHOSPHATE (AS PHOS)	\$3.21
84100	Phosphorus inorganic (phosphate);	\$3.21
84105	Phosphorus inorganic (phosphate); urine	\$0.00
84105	PHOSPHATE 24HR (U)	\$7.82
84105	PHOSPHATE (U)	\$7.82
84105	PHOSPHATE W/O CREAT 24H U "	\$9.83
84110	PORPHOBILINGGEN, RAND (U)	\$25.14
84110	PORPHOBILINOGEN, 24HR (U)	\$41.03
84120	PORPH FRAC RAND (U)	\$16.26
84120	PORPH FRAC, 24HR (U)	\$16.26
84132	POTASSIUM	\$3.21
84132	Potassium; serum	\$3.21
84133	POTASSIUM W/O CREAT 24H U	\$3.61
84133	POTASSIUM W/O CREAT RAND	\$3.61
84133	POTASSIUM 24HR (U)	\$3.94
84133	POTASSIUM (U)	\$3.94
84134	PREALBUMIN	\$6.00
84134	PREALBUMIN	\$6.00
84143	PREGNENOLONE, 17-OH	\$25.23
84143	17-hydroxypregnenolone	\$25.23
84144	PROGESTERONE	\$8.00
84144	PROGESTERONE	\$8.00
84144 REP#PLIARC-1337	PROGESTERONE,LC/MSMS	\$8.00

84145	PROCALCITONIN	\$200.00
84146	PROLACTIN	\$8.00
84146	PROLACTIN	\$8.00
84146	PROLACTIN W/DILUTION	\$63.81
84153	PSA, TOTAL	\$5.00
84153	Prostate specific antigen (PSA)	\$5.00
84155	PROTEIN, TOTAL	\$3.21
84156	PROTEIN,TOT,W/O CREAT	\$2.21
84156	PROTEIN, TOTAL	\$2.50
84157	PROTEIN, TOTAL, CSF	\$3.57
84202	PROTOPORPHYRIN, ZINC	\$6.00
84202	EP TO THE REPORT OF THE PROPERTY OF THE PROPER	\$25.08
84206	PROINSULIN	\$19.70
84207	VITAMIN B6	\$17.27
84207	Pyridoxal phosphate (Vitamin B-6)	\$17.27
84210	PYRUVATE (B)	\$12.70
84220	PRYUVATE KINASE RBC	\$127.65
84238	IL-2R	\$40.42
84244	PRA LC/MS/MS	\$38.01
84252	VITAMIN B2	\$22.37
84260	SEROTONIN, SERUM	\$17.00
84270	SHBG	\$15.49
84295	SODIUM	\$3.21
84300	SODIUM W/O CREAT 24H UR	\$3.01
84300	SODIUM W/O CREAT RAND UR	\$3.01
84300	SODIUM (U)	\$3.94
84300	SODIUM 24HR (U)	\$3.94
84302	SODIUM, FECES	\$10.67
84305	IGF1, ECL	\$18.90
84307	SOMATOSTATIN	\$26.65
84311	PHOSPHOLIPIDS	\$7.60
84311	ADENOSINE DEAMINASE, PLEU	\$7.60
84311	ADENOSINE DEAMINASE, PERI	\$7.60
84311	POTASSIUM, FECES	\$10.76
84311	FUNGITELL(1-3)B-D-GL	\$96.92
84311	METHEMOGLOBIN REDUC (B)	\$259.58
84376	REDUCING SUB, FECES	\$11.39
84378	GLYCOMARK (R)	\$23.68
84402	Testosterone; free	\$28.15
84402	TESTOSTERONE, FREE	\$28.15
84403	TESTOSTERONE, TOTAL	\$7.00
84403	TESTOSTERONE, TOTAL, M	\$7.50
84403	TESTOSTERONE,T,LC/MS	\$7.79

84403	Testosterone; total	\$7.79
84403	TESTOSTERONE,T,LC/MS	\$7.79
84425	VITAMIN B1,THIAMINE	\$23.62
84425	Thiamine (Vitamin B-1)	\$23.62
84425	VITAMIN B1, PLASMA	\$23.62
84425	VITAMIN B1,LCMSMS,P	\$27.00
84432	THYROGLOBULIN LCMSMS	\$32.90
84436	Thyroxine; total	\$3.50
84436	T-4 (THYROXINE)	\$3.50
84439	T-4, FREE	\$7.67
84439	Thyroxine; free	\$7.67
84439	T-4, FREE DIALYSIS	\$12.02
84442	TBG	\$14.90
84442	Thyroxine binding globulin (TBG)	\$14.90
84443	TSH	\$8.00
84443	Thyroid stimulating hormone (TSH)	\$8.00
84443	TSH W/REFL FT4	\$8.00
84445	TSIG	\$35.00
84445	Thyroid stimulating immunoglobulins (TSI)	\$35.00
84446.	Tocopherol alpha (Vitamin E)	\$15.73
84446	VITAMINE	\$15.73
84450	AST	\$3.21
84450	Transferase; aspartate amino (AST) (SGOT)	\$3.21
84460	ALT	\$3.21
84460	Transferase; alanine amino (ALT) (SGPT)	\$3.21
84466	TRANSFERRIN	\$6.79
84478	TRIGLYCERIDES	\$3.30
84478	TRIGLYCERIDES	\$3.30
84479	T-3 UPTAKE	\$3.43
84479	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding	\$3.43
84480	T-3, TOTAL	\$8.73
84481	T-3, FREE	\$6.79
84481	Triiodothyronine T3; free	\$6.79
84484	TROPONIN-I	\$32.06
84484	TROPONINT	\$64.79
84520	UREA NITROGEN (BUN)	\$3.21
84520	Urea nitrogen; quantitative	\$3.21
84540	UREA NIT 24H W/O CRE	\$3.34
84550	URIC ACID	\$1.92
84550	Uric acid; blood	\$1.92
84560	URIC ACID W/O CREAT 24H U	\$4.76
84560	URIC ACID 24HR (Ú)	\$4.76
84560	URIC ACID W/O CREAT RAND	\$8.79

84585	VMA (U)	\$18.04
84585	VMA, 24HR (U)	\$28.30
84586	VP	\$31.04
84588	ANTIDIURETIC HORMONE	\$23.90
84588	Vasopressin (antidiuretic hormone, ADH)	\$23.90
84590	VITAMINA	\$15.73
84590	VITAMINA	\$15.73
84591	VITAMIN B3	\$16.50
84591	VITAMIN B5	\$21.57
84591	VITAMIN 83	\$36.00
84597	VITAMIN K, PLASMA	\$31.64
84600	ALCOHOL, METHYL (B)	\$11.11
84600	ALCOHOL, ISOPROPYL	\$11.11
84600	PROPYLENE GLYCOLIB	\$87.00
84630	Zinc	\$9.24
84630	ZINC (P)	\$9.24
84681	C-PEPTIDE CONTRACTOR OF THE PERTINE	\$10.00
84702	HCG, TOTAL, QN	\$6.79
84702	Gonadotropin, chorionic (NCG); quantitative	\$6.79
84703	Gonadotropin, cherionic (hCG); qualitative	\$4.99
84703	HCG TOTAL QL	\$4.99
84999	OSMOLALITY, FECES	\$10.47
85004	Blood count; automated differential WBC count	\$2.47
85004	DIFFERENTIAL CT (B)	\$2.47
85014	HEMATOCRIT	\$4.50
85018	HEMOGLOBIN (B)	\$4.50
85018	Blood count; hemoglobin	\$4.50
85025	CBC (DIFF/PLT)	\$4.75
85025	Blood count; hemogram and platefet count, automated, and	\$4.75
85027	CBC(H/H,RBC,WBC,PLT)	\$4.70
85027	Blood count; hemogram and platelet count, automated	\$4.70
<b>85045</b>	RETICULOCYTE COUNT	\$2.54
85045	Blood count; reticulocyte count, flow cytometry	\$2.54
85049	PLT SODIUM CITRATE	\$2.50
85049	PLATELET COUNT	\$4.50
85060	PATH REVIEW OF SMEAR	\$12.40
85210	COAG FACTOR II ACT	\$25.75
85220	COAG FACTOR V ACT	\$44.66
85230	COAG FACTOR VII ACT	\$34.25
85240	FACTOR VIII ACTIVITY	\$21.84
85244	FACTOR VIII AG	\$137.60
85245	RISTOCETIN COFACTOR	\$25.38
85245 DED#DUARC 1227	VWF FUNCTIONAL, ACT.	\$25.38

85246 V	ON WILLEDBANG AS			¢2E 20
	ON WILLEBRAND AG			\$25.38
	ON WILLEBRAND, MULT			\$35.43
	OAG FACTOR X ACT			\$30.68
	OAG FACTOR X ACT			\$40.33
	COAG FACTOR XII ACT			\$33.80
	OAG FACTOR XII ACT	A Walter State Co.		\$64.89
	ACTOR XIII FUNCTION			\$41.35
	INTITHROMBIN III ACT			\$12.61
	NTITHROMBIN III AG			\$11.96
	ROTEIN C, ACTIVITY			\$15.00
	ROTEIN'S AG, FREE			\$15.00
	ROTEIN S, ACTIVITY			\$20.98
	PC RESISTANCE			\$18.16
	OAG IN. VIII	per sell tiller		\$37.00
	WF PROTEASE INHIBIT			\$44.99
	ACTOR VIII INHIB.SC			\$67.04
	DIMER ON	(1)		\$10.13
	ibrin degradation produc	ts, D-dimer; quantitative		\$10.13
	IBRINOGEN QN			\$9.30
	WF CLEAVING PRO ACT			\$37.73
	LASMINOGEN ACT.			\$29.10
	TEPARIN ANTI-XA LMWH			\$35.82
	EPARIN, UNFRACTION		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	\$44.70
	YSÖZYME			\$16.35
	PHOSPHOUPID NEUT			\$12.00
	UPUS ANTICOAG HEX			\$14.86
the state of the s	PRO TIME WITH INR			\$3.40
Committee of the Commit	Prothrombin time;			\$3.40
History and the History and th	PRVVT 1:1 MIX			\$10.58
	ED RATE BY MOD WEST			\$2.98
	edimentation rate, eryth	rocyte; automated		\$2.98
	ICKLE CELL SCREEN			\$5.05
	ICKLE CELL W/REFL			\$5.05
	hrombin time; plasma	72		\$26.09
	HROMBIN TIME			\$26.09
	HROMBIN W/RFLX MIX			\$26.09
85730 P	PTT, ACTIVATED			\$3.41
85730 T	hromboplastin time, part	tal (PTT); plasma or whole	blood	\$3.41
85810 V	/ISCOSITY			\$25.81
86001	SLUTEN IGG			\$5.78
86001	ATEX IGG			\$12.04
86003 II	MCAP, PERENNIAL RYE (G	<b>(5)</b>		\$5.78
86003	MCAP, LATEX (K82)			\$5.78

<b>86003</b> 4	RAST, PENICILLIN V	The second of th	\$5.78
86003	IMCAP, A. FUMIGATUS (M3)		\$5.78
86003	IMCAP, ECHINOCOCCUS (P2)		\$5.78
86003	IMCAP, TURKEY MEAT (F284)		\$5.78
86003	IMCAP, PORK (F26)		\$5.78
86003	IMCAP, BEEF (F27)		\$5.78
86003	IMCAP, SALMON (F41)		\$5.78
86003	ALLERGY 11,PCS,MOLD		\$28.90
86003	ALLERGY 12,PCS,ANIML	The second secon	\$28.90
86003	ALLERGY 18 PC NUTS		\$28.90
86003	ALLERGY 19,PCS,SEAFD		\$28.90
86003	ALLERGY 15,PCS,CEREAL		\$28.90
86003	ALLERGY 10, SW		\$57.80
86003	ADULT FOOD ALLERGY PROF		\$69.36
86021	MYELOPEROXIDASE AB		\$10.00
86021	C-ANCA TITER		\$13.59
86021	P-ANCA TITER		\$13.59
86021	PROTEINASE-3.AB		\$15.00
86021	ANCA SC W/RFL TITER		\$15.88
86021	ATYP P-ANCA TITER		\$15.88
86021	ANCA.		\$25.00
86022	PLATELET AB INDIRECT		\$23.02
86022	PLT CIRCU. AB		\$34.00
86022	HEP INDUCED PLAT AB		\$34.46
86022	SEROTONIN REL. ASSAY		\$36.76
86023	PLATELET AB, DIRECT		\$38.90
86038	ANA W/RFX		\$5.54
86038	Antinuclear antibodies (ANA);		\$5.54
86038	ANA SCREEN		\$5.54
86038	CENTROMERE AB, EIA		\$11.02
86039	ANA TITER&PATTERN		\$6.79
86060	Antistreptolysin 0; titer		\$5.66
86060	ASO		\$5.66
86140	CRP		\$5.00
86140	C-reactive protein		\$5.00
86141	CARDIO CRP		\$14.31
86146	B2-GLYCO I(IGG)		\$10.00
86146	B2-GLYCO I(IGM)		\$10.00
86146	B2-GLYCO I(IGA)		\$10.00
86146	Glycoprotein Antibody		\$10.00
86147	CARDIOLIPIN IGM AB		\$5.28
86147	CARDIOLIPIN IGG AB		\$5.28
86147 PED#DUARC 1227	CARDIOLIPIN IGA AB		\$5.28

86147	Cardiolipin (phespholipid) antibody	\$5.28
86147	CARDIOLP SC/RF	\$15.00
86147	CARDIOLP AB G/M/A	\$16.86
86148	ANTIPHOSPHATIDYLSER	\$53.28
86157	COLD HEMAGGLUTININS	\$9.77
86160	COMPLEMENT C3C	\$7.00
86160	COMPLEMENT C4C	\$7.00
86160	C1 INHIBITOR, PROTEIN	\$12.55
86160	COMPLEMENT COMP C1Q	\$13.27
86160	C2 COMPLEMENT COMP	\$13.27
86160	COMP C3C4	\$14.00
86160	C5 COMPLEMENT COMP	\$37.97
86161	C1 INHIBITOR, FUNCT	\$18.66
86162	COMPLEMENT, (CH50)	\$8.97
86162	Complement; total hemolytic (CH50)	\$8.97
86200	CCP AB IGG	\$7.10
86200	Cyclic citrullinated peptide (CCP), anitbody	\$7.10
86215	ANTI-DNASE B TITER	\$18.20
86225	ANTI-DSDNA AB, EIA	\$7.76
86225	Deoxyribonucleic acid (DNA) antibody; native or double stran	\$7.76
86226	SS DNA IGG ANTIBODY	\$28.48
86235	SJOGRENS AB (SS-B)	\$8.01
86235	SS A RO AB(IGG)EIA	\$8.01
86235	SM ANTIBODY > **	\$8.44
86235	SM/RNP ABS	\$8.44
86235	SCL-70	\$12.25
86235	JO-1 ANTIBODY	\$15.20
86235	RNPANTIBODY	\$15.20
86235	CHROMATIN AUTO AS	\$15.20
86235	SJOGREN'S ANTIBODIES	\$16.02
86235	SM & SM/RNP ABS	\$16.88
86235	AB TO PM-1	\$20.13
86235	MI-2 AUTO ABS	\$33.16
86235	SRP AUTOANTIBODIES	\$34.14
86235	ENA, SCL 70,SSA,SSB	\$49.13
86255	SMOOTH MUSC RFX/TIT	\$8.69
86255	PARIETAL CELL W/REFL	\$9.99
86255	ENDOMYSIAL IGA AB	\$10.00
86255	STRIATED MUSCLE W/REFL	\$10.94
86255	YO AB SCR W/REFL (S)	\$12.16
86255	YO AB SCR W/REFLEX	\$12.16
86255	ANTI-HU REX/TITER/WB	\$12.80
86255	BASEMENT MEMBRANE AB	\$14.85

86255 NEUR RFX/TITER/RI/WB	\$23.21
86255 ANTI-HU/IFA/RFX/WB	\$52.77
86255 RI AB SCR W/REFLEX	\$52.77
86256 SMOOTH MUSCL TITER	\$6.25
86256 MITOCHONDRIAL TITER	\$13.33
86256 ADRENAL AB	\$19.95
86300 CA27,29 CHIRON/BAYER	\$10.00
86300 CA 15-3	\$12.00
86304 CA125	\$8.00
86305 HE4 OVARIAN CANCER	\$23.85
86308 HETEROPHILE, MONO	\$4.71
86308 Heterophile antibodies; screening	\$4.71
86308 HETER.MONO (REFL)	\$4.71
86316 AFP, PERITONEAL FL	\$11.64
86316 NSE	\$23.01
86316 NEURON SPEC ENOLASE	\$26.37
86316 CHROMOGRANIN A ECL	\$34.93
86317 S.PNEUM IGG (6 SERO)	\$60.00
86331 BIRD MOLD PNL II	\$290.16
86334 IMMUNOFIXATION, SERUM	\$19.92
86335 IMMUNOFIX, UR	\$27.53
86335 BETA 2 TRANSFERRIN	\$32.80
86336 INHIBIN A	\$21.13
86337 INSULIN ABS, HIGHLY	\$18.74
86340 INTRINSIC FACTOR AB	\$10.69
86341 GAD-65 AB	\$14.94
86341 ISLET CELL AB TITER	\$17.21
86341 ISLET CELL RFX TITER	\$18.43
86341 ISLET CELL AB 512	\$24.79
86360 LYMPH SUBSET PNL 4	\$24.00
86361 LYMPH SUBSET PNL5	\$24.00
86376 THYROID PEROXID AB	\$8.36
86376 LKM-1 ANTIBODY(IGG)	\$15.20
86376 LIVER CYTOSOL AUTOAB	\$23.07
86382 POLIOVIRUS AB, NEUT.	\$40.00
86382 RABIES TITER REFET	\$65.00
86403 S.PNEUMONIAE AG,LA	\$38.55
86406 CRYPTOCOCCUS AG, TITR	\$16.14
86431 RHEUMATOID FACTOR	\$2.57
86431 Rheumatoid factor; quantitative	\$2.57
86603 ADENOVIRUS AB, SERUM	\$17.28
86606 ASPERGILLUS ABS	\$15.18
86609 NEISSERIA AB, CF	\$14.95

86609	LISTERIA AB, CE	\$17.66
86611	B.HENSELAE W/REFL	\$22.59
86611	BARTONELLA AB/REFL	\$45.09
86612	BLASTOMYCES AB PNL	\$43.07
86615	BORD.PERT.IGG/IGA	\$58.32
86617	LYME DIS IGG/IGM WBA	\$20.11
86618	LYME AB-WB CONFIRM	\$8.50
86618	LYME IGG & IGM, CSF	\$12.96
86622	BRUCELLA IGG, IGM	\$21.74
86622	BRUCELLA IGG,IGM	\$21.74
86625	CAMPYLOBACTER, ELISA	\$14.50
86635	COCCI TOTAL AB, W/RFX	\$11.41
86635	COCCIDIOIDES AB, CF	\$11.54
86635	COCCIDIO AB, CF, CSF	\$12.68
86635	COCCIDIO AB, ID	\$12.81
86635	COCCI AB TO TP/F AG	\$25.36
86635	COCC AB (TP AG)	\$40.13
86638	Q FEVER IGG PHSI SCR	\$9.55
86638	Q FVR IGG PHS II SCR	\$9.55
86638	Q FVR IGM PHSEI SCR	\$9.55
86638	Q FVR IGM PHSII SCRN	\$9.55
86638	Q FVR IGM PHSI TITER	\$14.60
86638	Q FEV.IGG PHSI TITER	\$18.22
86644	CMV IGG AB	\$7.82
86644	Antibody; cytomegalovirus (CMV)	\$7.82
86645	CMV IGM AB	\$11.00
86645	Antibody; cytomegalovirus (CMV), IgM	\$11.00
86648	DIPHTHERIA ANTITOXOID	\$15.48
86654	W.ENCEPHALITIS G,M	\$29.16
86658	COXSACKIE B (1-6) AB	\$20.00
86658	ECHOVIRUS AB(S)	\$25.00
86658	COXSACKIE A AB	\$26.00
86665	EBV IGM AB	\$9.45
86665	EBV IGG AB	\$9.70
86671	ASCA IGA	\$13.56
86671	ASCA IGG	\$13.56
86674	GIARDIA AB PNL	\$58.57
86677	H.PYLORI IGG AB	\$10.00
86677	H.PYEORI IGA AB	\$13.11
86677	H.PYLORINGM AB	\$13.95
86677	H.PYLORI ABS,IGA,IGG	\$23.11
86682	TOXOCARA AB	\$14.38
86682	CYSTICERCUS AB CSF	\$14.38

86682	CYSTICERCUS IGG WB	\$32.96
86682	CYSTICERCOSIS AB	\$35.39
86682	CYSTICERCUS CSF.WB	\$41.28
86689	HIV-1 AB BY WBA	\$48.18
86689	HTLV-I/II WEST BLOT	\$75.84
86689	HIV-1/HIV-2 WEST.BLT	\$95.51
86692	HEP DELTA VIRUS AB	\$29.86
86694	Antibody; herpes simplex, non-specific type test	\$9.03
86694	HSV IGM AB SCREEN	\$9.03
86695	HSV 1 HERPESELECT	\$3.33
86695	HSV.1.IGM TITER	\$30.33
86696	HSV 2 HERPESELECT	\$3.33
86696	HSV 2 IGM TITER	\$30.33
86696	HSV2 INHIBITION	\$107.56
86707	Hepatitis Be antibody (HBeAb)	\$16.73
86710	INFCUENZA A&B AB, CF	\$22.08
86710	INFLUENZA A AB	\$23.69
86710	INFLUENZA B AB	\$23.69
86720	LEPTÖSPIRA AB W/REFL	\$21.02
86727	LCM	\$24.09
86735	MUMPS VIRUS IGG, EIA	\$8.73
86735	MUMPS VAB(IGM)	\$12.89
86738	M PNEUMO IGG AB	\$9.27
86738	M. PNEUM IGM A8	\$10.85
86738	M.PNEUMO/AB,CF,CSF	\$32.13
86747	PARVO B19 IGG/IGM	\$24.13
86753	E.HISTOLYTICA IGG	\$22.05
86753	T-CRUZI AB, TOTAL	\$62.64
86757	RMSF IGM TITER	\$12.50
86757	RMSF IGG/IGM W/REFL	\$17.87
86765	MEASLES AB TGG, EIA	\$3.38
86765	Antibody, rubeola 👯	\$3.38
86765	MEASLES AB IGM, IF	\$14.25
86765	MEASLES AB IGG,IGM	\$17.63
86768	SALMONELLA AB EIA	\$35.04
86774	TETANUS ANTITOXOID	\$16.36
86777	TOXO IGG AB	\$11.62
86777	TOXO GONDINGG CSF	\$15.36
86778	TOXO IGM EIA	\$11.62
86787	VZV IGG AB	\$4.00
86787	VZV AB 1GM	\$10.19
86787	VZ AB PNL CSF	\$28.50
86790	HEPEAB (IGM)	\$15.32

86790	HHV 6 AB PNL		\$36.43
86790	HEP E (IGG&IGM)		\$47.69
86790	DENGUE FEVER AB PNL		\$50.04
86800	THYROGLOBULIN AB		\$5.82
86800	Thyroglobulin antibody		\$5.82
86812	HLA-B27 ANTIGEN		\$13.70
86816	HLA-DR4 ANTIGEN		\$38.55
86849	PROTHROMBIN ABS		\$76.67
86850	AB SCR RFX ID/TITER		\$5.66
86870	ANTIBODY PANEL X 1		\$26.92
86870	ANTIBODY PANEL X 3		\$80.76
86880	COOMBS, DIRECT		\$9.14
86886	ANTIBODY TITER X 1	· () (1) (1) (1) (1) (1) (1) (1) (1) (1)	\$20.35
86901	RHTYPE		\$2.81
86905	ANTIGEN TYPE X 2	· · · · · · · · · · · · · · · · · · ·	\$28.84
87040	CULTURE, BLOOD		\$13.64
87045	CULTURE, SALM/SHIG		\$8.73
87045	Culture, bacterial, definitive;	stool 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$8.73
87046	CULT, CAMPYLOBAC.		\$3.67
87046	CULT, YERSINIA		\$4.15
87046	CULTURE, E COLI 0157		\$39.66
87070	CULT, THROAT		\$6.54
87070	CULTURE, GENITAL		\$6.54
87070	CULTURE, NP/NASAL		\$9.52
87070	CULT, EAR, EXT.		\$9.52
87070	CULT, EYE, EXT.		\$9.52
87070	CULTURE, AEROBIC BAC		\$9.89
87077	AEROBIC BACT ID		\$39.51
87081	CULTURE, GP. A STREP	The second of th	\$3.23
87081	SCREEN FOR S. AUREUS		\$6.89
87081	CULT, STREP GRP B		\$7.33
87081	BORDETELLA CULTURE		\$18.11
87081	MRSA CULTURE SCREEN		\$20.34
87081	C.DIFFICILE CULTURE		\$29.30
87081	CULT, LEGIONELLA		\$41.56
87101	CULTURE FUNGUS S/H/N		\$33.07
87109	MYCO/UREA CULTURE		\$15.52
87109	MYCOPLASMA PNEU CLT		\$33.47
87140	VIRAL RES CULTURE ID		\$52.59
87158	C.DIFF TOXIN EIA		\$4.97
87186	MIC, AEROBIC		\$8.60
87186	AEROBIC SUSC (1)		\$33.95
	SUSCEPT, AFB RAPID		· · · · · · · · · · · · · · · · · · ·

87186	SUS, YEAST COMP PNL	\$70.29
87186	AEROBIC SUSC (2)	\$79.50
87210	Smear, primary source, with interpretation; wet mount with	\$7.72
87210	WETMOUNT	\$7.72
87230	C DIFF TOXIN B QL	\$21.82
87230	C.DIFF CYTO AB.NETU	\$37.60
87252	CULTURE, VIRUS	\$29.53
87254	CULTURE, RAPID FLU A&B	\$18.56
87254	HSV/VZV RAPID CULT	\$39.77
87254	CULTURE, ENTEROVIRUS	\$57.77
87254	VIRAL RESP CUL W/RFL	\$119.97
87255 ***	CULT, HSV, RAPID	\$11.71
87255	CULT, HSV+TYPING.	\$12.14
87260	ADENOVIRUS, DFA	\$11.03
87271	CMV AG DETECTION	\$50.05
87278	L. PNEUMOPHILA, DFA	\$20.67
87279	PARAINFLU 1,2,3 DFA	\$41.70
87280	RSV: AG BY DFA	\$11.08
87299	HSV AG DETECT	\$23.55
87299	METAPNEUMOVIRUS, DFA	\$40.86
87305	ASPERGILLUS ANTIGEN	\$39.59
87324	C DIFF TOXIN A&B	\$10.27
87329	Infectious agent antigen detection, giardia	\$9.70
87329	GIARDIA AG DETECTION	\$9.70
87337	ENTAMOEBA HIST	\$34.99
87338	H.PYLORI AG STOOL	\$15.90
87338	Helicobacter pylon, stool	\$15.90
87350	HEP BE AG	\$16.73
87385	HISTOPLASMA AG UR	\$10.93
87385	HISTOPLASMA GALAC AG	\$18.95
87385 F	MVISTA(TM) HISTOPLASMA QN	\$78.00
87425	ROTAVIRUS AG DETECT.	\$18.44
87449	LEGIONELLA AG (U)	\$15.34
87471	BARTONELLA DNA,PCR	\$58.38
87493	CLOSTRIDIUM DIF TBR QL	\$40.22
87 <b>49</b> 6	CMV DNA, QL, PCR	\$56.00
87497	CMV DNA QN, PCR	\$55.63
87498	ENTEROVIRUS RNA, RT-PCR	\$76.52
87502	INFLU A/B PCR W/REFL	\$64.88
87502	INFLUENZA A H1N1(SWINE)	\$77.60
87516	MBV DNA PCR, QUAL	\$56.30
87517	HBV DNA QUANT	\$66.60
87521	HCV RNA, QL TMA	\$47.11

87522	HCV RNA BY PCR OT	\$55.98
87526	HGV	\$38.80
87529	HSV TYPE 1 & 2, PCR	\$77.60
87535	HIV-1 DNA QUAL PCR	\$38.80
87536	HIV-1 RNA, QN, RT PCR	\$75.00
87536 W	HIV-1 RNA, QN, RT PCR, CFS	\$75.00
87536	HIV-1 RNA QN BDNA	\$85.00
87556	M TUBER, PCR	\$54.94
87561	MAI DNA QL, PCR	\$77.60
87621	HPVHR	\$38.80
87621	HPV HYBRID CAPTURE 2	\$77.60
87621	HPV GENO 16 AND 18	\$77.60
87650	GRP A STREP PROBE	\$22.17
87798	RUBELLA VIRUS RNA QL	\$42.35
87798	PARVOVIRUS DNA PCR	\$46.80
87798	TOXO GONDII DNA PCR	\$57.50
87798	VZV DNA PCR	\$59.51
87798	B.PER/PARA RT-PCR	\$77.60
87798	JC/BK VIRUS RAP/PCR	\$84.13
87798	TVAG RNA QL TMA	\$84.60
87798	ASPERGILLUS QL PCR	\$116.40
87798	HEP D VIRUS RNA	\$134.63
87799	VZV DNA QN PCR	\$50.60
87799	EBY DNA QT. PCR	\$61.71
87799	ADENOVIRUS DNA QN	\$69.78
87799	JC POLYOMA VIRUS DNA, QN	\$73.92
87799	JCV:ULTRA, QN PCR	\$81.40
87801	LYME DNA PCR.CSF/SF	\$64.92
87801	LYME DISEASE DNA, PCR	\$68.11
87807	RSV AG (IA)	\$12.19
87880	STREP AG(A)RFL/CUL	\$3.98
87880	STREP AG TEST, GP A	\$3.98
87901	HIV-1 GENOTYPE	\$250.00
87902	HCV GENOTYPE LIPA	\$125.00
87906	HIV1 CORECEPTOR TROP	\$179.53
87906	HIV1 INTEGRASE	\$250.00
87906	ULTRADEEP SEQUENCING	\$259.22
87906	TROFILE DNA	\$2,800.00
87912	HBV GENOTYPE	\$69.30
88142	SP, MANUAL SCREEN	\$22.40
88142	Cytopathology, cervical or vaginal (any reporting system),	\$22.40
88142	CYTYC PAP	\$22.40
88164 PED#DUARC 1227	CYTOPATH, GYN 1	\$13.51

88175	CYTYC PAP & RVW		\$28.00
88175	Cytopathology, cervical or vaginal, w/screening by	auto & man	\$28.00
88175	AUTOMATED PAP & RVW		\$28.00
88346	CUTANEOUS DIR IMMFL		\$403.56
89051	CT, DIFF SYNOVIAL FL		\$8.88
89051	CEUL CT AND DIFF,CSF		\$36.01
89055	FECAL LEUKOCYTE STN		\$6.72
89055	Leukocyte count, fecal		\$6.72
89060	CRYSTALS, SYN FLD		\$4.85
89321	SPERM, POST-VASECT		\$9.28
89321	Semen Analysis		\$9.28
. 99001	TRANSPORT FEE 25		\$6.30
99001	TRANSPORT FEE 10		\$10.00
99001	TRANSPORT FEE 20		\$20.00
99199	STAT ASSAY 1		\$26.35
80051, 82565,			
82947, 84520	BASIC METAB PNLW/O CA		\$4.21
80100 , 80101	COMP DRUG SCR US/P		\$98.24
80100, 80101	COMP DRUG SCR (U)		\$44.80
80100, 80101	COMP DRUG SCR S/P		\$45.54
80101,82570,			
83986, 84311	PM1 W/CONF, W/O MEDM		\$33.26
80101,82570,			
83986, 84311	PAIN 1 W/O CONF,U		\$33.26
80101LC	HYPOGLYCEMIC PAN;SP	A second	\$85.00
80152, 80160,			
80166, 80174,			
80182,82542	ANTIDEPRESSANTS PAN;B		\$165.00
80156, 80157	CARBAMAZEPINE, F & T		\$33.43
80184, 80188	PRIMIDONE		\$13.44
81227, 81355	ACCUTYPE(R) WARFARIN		\$220.21
82040, 82042,	The second secon		
82784	IGG SYNTHESIS/INDEX		\$17.69
82040, 82247,			
82310, 82435,			
82565, 82947,			
84075, 84132,			
84155, 84295,			
84450, 84520	CMP W/O CO2,ALT		\$5.13
82040, 84155	PROTEIN, TOT AND ALB		\$3.30
82040, 84270,			4-1
84403	TESTOSTERONE, F&T&BIO		\$36.70
82043, 82570	MALB, RAND UR W/CR		\$8.90

82043, 82570	MALB, 24H, W/CREAT	\$8.90
82088, 825 <del>33</del>	ALDOSTERONE/CORTISOL	\$21.30
82106, 82664,		
83033	AFP, FLUID W/RFX	\$15.33
82150; 82570	AMYLASE (U)W/CR	\$8.95
82175, 82570,		
83655, 83825	HEAVY METALS (U)	\$84.63
82247, 82248	BILIRUBIN, FRAC.	\$3.30
82247, 82248	BILI, FRAC, PEDIATR	\$17.17
82306, 82652	VIT D PNL 25 OF LC MS	\$39.11
82310, 83970	PTH,INTACT & CALCIUM	\$16.78
82340, 82570	CA 24HR (U) W/CR	\$8.50
82382, 83835	PHEOCHROMOCYTOMA EVL	\$57.53
182436, 82570	CHLORIDE (U) W/GR	\$6.44
82438, <del>84</del> 302,		
84311	ELECTROLYTES (FECES)	\$24.63
82465, 82664,		
84478	LIPOPROTEIN ELEC	\$20.42
82480, 82 <del>638</del>	CHOLINEST, DIB INHIB	\$13.58
82530, 82533	CORTISOL, FREE-TOTAL	\$36.50
82565,84520	BUN/CREAT RATIO	\$3.30
82570, 84105	PHOSPHATE (U)W/CR	\$10.32
82570, 84133	POTASSIUM (U)W/CR	\$6.44
82570, 84156	TP 24HR (U) W/CREAT	\$3.94
82570, 84156	TP RAND (U) W/ CREAT	\$3.94
82570, 84156,		
84166	PROTEIN ELECTRO, (U)	\$17.11
82570, 84156,		647.44
84166	U PROTEIN ELECT W/RF	\$17.11
82570, 84156, 84166	DOOT SHOT (III) (DES)	617.11
	PROT ELECT,(U) (REFL)	\$17.11
82570, 84156, 84166	PROTEIN ELECT(REFL)	\$17.11
82570, 84300	SODIUM (U) W/CR	\$6.44
82570, 84560	UA 24HR (U)W/CR	\$7.26
82670, 8267059	ESTRADIOL, FREE	\$61.80
82784; 82787	IGA SUBCLASS	\$37.67
82784, 82787	IGG SUBCLASS PANEL	\$41.56
82785, 8 <del>6</del> 003	MOLD PROF/IGE	\$36.90
82785, 86003	CHILDHOOD ALLERGY PROFILE	\$94.70
82785, 86003	ALLERGY PNL REG 12	\$135.16
82785, 86003	ALLERGY PNL REG 14	\$140.94
82947, 8294791	GLUC,FAST & POST 1HR	\$4.64
		<del> </del>

82950, 829 <del>5</del> 1	GTT, GESTATIONAL, 4	\$9.28
82950, 82951	GTT,4 SPECIMEN	\$9.28
82950SL	GLUCOSE, GEST, SCR. **	\$2.32
83001, 83002	FSH'& LH (S)	\$10.00
83021, 85014,		
85018, 85041	HEMOGLOBINOPATHY	\$24.50
83516 , 86038,		
86039, 86160		1
86235 , 86255 ,		
86256,86376,		4000
86431	LUPUS(SLE)PNL	\$228.99
83516,86235	MYOSITIS PLUS JO-1	\$222.32
83519 , 83520, 86256	PARANEOPLASTIC/AB/S	\$871.20
83540, 83550	IRON, TOTAL, & IBC	\$7.51
83605, 84210	LACTATE/PYRUVATE	\$25.50
83883 , 84155,		723.30
84165	PROT ELEC+K/L CHAINS	\$35.58
83891, 83896		
83898, 83900,		
83902,83912	BCR/ABL GENE,PCR,QT	\$66.45
83891, 83896		
83901, 83912	FACTOR V (LEIDEN)	\$22.74
84075, 84080	ALK PHOS ISOENZYMES	\$19.90
84153, 84154	PSA FREE & TOTAL	\$10.00
84155, 84165	PROTEIN ELECTRO.	\$7.83
84155, 84165	PROTEIN ELECT W/REFL	\$7.83
84302, 84311	OSMOTIC GAP, FECES	\$26.15
84402, 84403	TESTOSTERONE, FR&TOT	\$18.00
84432,86800	THYROGLOBULIN QT	\$13.16
84480, 84481	T3 FREE TRACER DIAL	\$14.75
85004, 85048 85007, 85037	WBC & DIFF	\$4.55
85007, 85027	CBC(DIFF/PLT)W/SMEAR	\$3.70
85014, 85018, 85041	HGB INDICES	\$4.60
85025, 85060	CBC(DIFF/PLT)W/PATH	\$7.86
85302, 85303	PROTEIN C, ACT & AG	\$31.92
85305, 85306	PROTEIN'S AG, F&T	\$29.76
85610, 85611,		<u> </u>
85730, 85732	MIXING STUDY	\$19.62
85613, 85730	LUPUS ANTICOAG W/RFL	\$8.00
86255 , 86256	ANTIEPIDERMAL RFX	\$14.85
86255, <mark>86256</mark>	MITOCHONDRIAL W/REFL	\$7.61

86255, 86256	ANTI-DSDNA,RFX,TITER	\$10.70
86255, 86256	ADRENAL AB REX TITER	\$23.33
86317, 8631759	N.MENINGITIDIS IGG	\$50.44
86329, 86334,		
86431	CRYOGLOB (REFL)	\$66.87
86355, 86359,		
86360	LYMPH SUBSET PNL 2	\$38.88
86359, 86360	LYMPH SUBSET PNL 3	\$38.31
86382, 87253	INTERFERON BETA 1A	\$300.00
86406, 87327	CRYP.AG EIA W/TITER	\$9.99
86631 , 86632	C TRACHOMATIS AB PNL	\$21.33
86644, 86645	CMV IGG & IGM AB,CSF	\$29.63
86664, 86665	EBV AB PANEL	\$28.85
86695, 86 <del>696</del>	HSV 1/2 HERPESELECT	\$6.66
86695, 86696	HSV 1/2-W/REFL	\$12.79
86695, 86696	HSV 1/2 IGM AB, IFA	\$23.63
86695, 86696	HSV1/2 IGM, W/RFL	\$35.98
86777, 86778	T.GONDII IGG IGM CSF	\$30.72
86777, 86778	TOX G&M SABN-FLD	\$267.00
86788, 86789	WEST NILE VIRUS,(S)	\$34.92
86900, 86901	ABO GRP AND RH TYPE	\$5.62
87015, 87207	MICROSPORIDIA EXAM	\$18.66
87015, 87210	ISOSPORA DETECTION	\$42.99
87015, 87272	CRYPTO AG DEA	\$17.65
87070, 87075,		
87205	CULTURE, AEROB/ANAER	\$21.98
87070, 87205	CULTURE, CSF	\$6.54
87075, 87205	ANAEROBIC CULT. W/GS	\$12.09
87081, 87184	CULT, NEISSERIA	\$7.33
87086, 87088	CULT, (U) ROUTINE	\$7.60
87101, 87106,		
87107, 87143,		
87149, 87220	CULT, FUNGUS, SKIN	\$14.73
87102, 87106,		
87143, 87149,		
87206	CULT, YEAST W/DIR KOH	\$8.33
87102, 87206	CULT,FUNGUS,OTHER	\$10.69
87103, <b>87</b> 106,		
87107, 87143,		• • • • • • • • • • • • • • • • • • •
87149	CULT, FUNGUS (B)	\$7.61
87106, 87107,		A
87143, 87149	FUNGAL ISOLATE ID.	\$9.70
87110, 87140	CULT, CHLAMYDIA	\$25.59

			<u> </u>
87110, 87140	CULTURE, CHLAMYDIA PNEU		\$77.21
87177 , 87209	OVA & PARASITE X2		\$17.50
87177 , 87209	OVA & PARASITE X3		\$26.25
87177, 87209	OVA AND PARASITE:		\$8.75
87177, 87209	O & P EXAMINATION		\$46.29
87206, 87220	FUNGAL STAIN		\$3.38
87252, 87254	CULT,CMV RAPID/CONV		\$39.40
87275, 87276	INFLUENZA A, B. DFA		\$20.54
87798RP	RHINOVIRUS RNA,RTPCR		\$50.24
87798RP	ADENOVIRUS QL, PCR		\$63.55
87798RP	HMPV RNA, RT PCR		\$123.97
88184, 88185	NK CELL FUNCTION		\$70.00
88184, 88185 ,			
88188	PNH W/FLAER (HS)		\$277.46
88184, 88185,			
88189	LEU & LYM 22 MARKERS		\$942.92
88230, 88262	CHROMOSOME, BLOOD		\$296.77
88235, 88269,			
88280	CHROM STUDY, AF		\$284.68
88271,88275	FISH CML/ALL BCR/ABL		\$226.06
88271,88275	FISH, MDS/MYELOID PNL	Carlo See II	\$298.90
88271, 88273	FISH, DIGEORGE		\$182.83
88304TC	III-PATH,G&M,1SP,TC		\$39.26
88305TC	IV-PATH,G&M1SP,TC		\$40.37
88305TC	IV-PATH,G&M,2SP,TC		\$80.74
	RFL-MICR (INC)		\$2.08
	CHEM TEST 02		\$3.30
	CHEM TEST 10	THE STATE OF THE S	\$4.76
	T4, TOTAL		\$5.20
	ORG ID 1		\$5.26
	ORG-ID-1		\$5.26
	PRESUMPTIVE ID 1 M	6 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4	\$5.26
	CHEM TEST 15		\$5.68
	SUSC-1		\$6.88
	SUSC-1		\$8.50
	SUSC-1		\$8.50
	PHOSPHATE W/O CREAT RAND		\$9.08
	SUSC-1		\$9.55
	ORG ID 2		\$10.52
	ORG ID 2		\$10.52
	PRESUMPTIVE ID 2 * M		\$10.52
	PATHREVIEW	A CONTRACTOR OF THE CONTRACTOR	\$12.40
	PATH REVIEW, LIQ PAP		\$12.40

	RO TIME W/INR	\$13.00
	USC-2	\$13.76
	METHYLMALONIC ACID	\$13.85
FF2206 CAPACITY CONTROL CONTRO	I. PYLORI IGG, QN	\$13.95
A	NTIGEN TYPEX 1	\$14.42
	PRG ID 1	\$15.18
1	I-PATH,G&M,1SP,PC	\$15.27
C	ORG ID 3	\$15.78
D	AP 7 + ETOH	\$16.38
A	AARIJUANA-50 SCREEN	\$16.38
7	-3, REVERSE	\$16.61
A	LCOHOL, ETHYL NO CONF	\$16.80
S	USC-2	\$17.00
H	EPATIC FUNCTION PNL	\$19.00
n de la companya de	V-PATH,G&M,1\$P,PC	\$19.88
5	USC-3	\$20.64
T	ACROLIMUS	\$20.85
O	PRG-ID 4	\$21.04
THE PARTY L	/S RATIO	\$21.16
E	CHINOCOCCOSIS IGG	\$21.89
S	PERM COUNT	\$23.27
	YCLOSPORINE (B)	\$23.48
The Part of the Control of the Contr	11 RNP/SNRNP ABS	\$23.59
S	USC-3	\$25.50
S	USC:3	\$25.50
L	ACOSAMIDE	\$26.88
C	DRG ID 1	\$28.41
	ORG ID 2	\$30.36
C	PIATES GC/MS MECON	\$31.44
-1:	ORD PERTUS/PARAPERT	\$32.15
C	OCCIDIODES AB IGM	\$35.00
	MMUNOCYTO 1 AB,TC	\$35.03
	HSTO SP STAIN GP I	\$36.41
The state of the s	NS HPV HIGH RISK	\$38.80
	MMUNOCYTO 1 AB,PC	\$39.51
	V-PATH,G&M,ZSP,PC	\$39.77
THE STATE OF THE PARTY OF THE P	NTIBODY TITER X 2	\$40.70
i i i i i i i i i i i i i i i i i i i	HSTO SP STAIN GP II	\$40.84
The second secon	NTIGEN TYPE X 3	\$43.26
	OCCIDIOIDOM, (S)	\$45.00
	HEPTIMAX (TM)	\$47.36
	/S RATIO	\$50.00
	ION-GYN SMEAR, NOPREP	\$51.60

	FINE NEEDLE ASP. 1			\$51.98
	ANTIBODY PANEL X 2			\$53.84
	III-PATH, G&M, 1			\$54.53
	DRUG SCREEN 9-50 NO CONF			\$54.72
	STREPTOMYCIN, HPLC			\$59.33
	IV-PATH, G&M, 1SP			\$60.25
72,4	CYTO, NON-GYN, LIQ PREP 1	The state of the s		\$62.50
	COCCI SEROLOGY #	Paradaga managa s		\$70.00
	IMMUNOCYTO 2-AB,TC			\$70.07
	L/S RATIO			\$70.80
	HISTO SP STAIN GP 1 SP2			\$72.82
	BCR ABL1 GENE QN PCR		Mark Committee Committee	\$73.26
	IMMUNOCYTOCHEM 1 AB	Lesson in the Co		\$74.54
	INSULIN-LIKE GR FCT2			\$75.75
	IMMUNOCYTO 2 AB,PC			\$79.01
1 di	HLA CELIAC DISEASE			\$84.57
The state of the s	D. DIMER QN			\$85.00
	FLETCHER FACTOR			\$87.13
1000	V-PATH, G&M, 1SP			\$87.64
	JAK2 EXONS 12 AND 13			\$95.02
	HLA DRB3*4*5 DNA TYP			\$96.94
	METHOTREXATE			\$100.00
	PARAINELUENZA VIRUS			\$102.39
	IMMUNOCYTO 3 AB,TC			\$105.10
	T-CELL REARRANGE QL LEUM			\$107.54
	HCV RNA QUANT.TMA			\$111.76
	IMMUNOCYTO 3 AB, PC			\$118.52
THE STATE OF	IV-PATH, G&M, 2SP			\$120.50
	ASPERGILLUS G,M,A			\$121.86
	CYTO, NON-GYN, LIQ PREP 2			\$125.00
	ALLERGY PNL REG 13			\$146.72
	IMMUNOCYTOCHEM 2 AB			\$149.08
	V-PATH, G&M, 2SP			\$175.28
	ENTEROVIRUS PANEL II, CF			\$178.45
	IV-PATH, G&M, 3SP			\$180.75
	CYTO, NON-GYN, LIQ PREP 3			\$187.50
	CRMP-5-IGG WBLOT			\$204.68
	IMMUNOCYTOCHEM 3 AB			\$223.62
	PREDNISONE, SERUM			\$225.00
	HCV FIBROSURE			\$263.75
To the second se	ORGANIC ACIDS, QUANT			\$264.33
	PRO PREDICTRX META			\$270.00
RFP#PIJARC-1337	IMMUNOCYTO 8 AB,TC	ir day		\$280.27

IMMUNOCYTOCHE	M 4 AB \$298.16
IMMUNOCYTO 8 AB	\$316.05
CHROM ANALYSIS,	TISS \$344.10
IMMUNOCYTOCHEN	M 5 AB \$372.70
IMMUNOCYTOCHEN	VI 6 AB \$447.24
IMMUNOCYTOCHER	M 7 AB \$521.78
IMMUNOCYTOCHEN	V 8 AB \$596.32
IMMUNOCYTOCHEN	W 10 AB \$745.40
IMMUNOCYTOCHEN	VI 14 AB \$1,043.56

#### Attachment I

# HIPAA Business Associate Agreement Addendum to Contract Retween the County of Riverside and

Detween the County of Riverside and															
This	HIPAA	Business	Associate	Agreement	(the	"Adden	dum")	suppl	ements,	and	is	made	part	of	the
		<del></del>	(the	"Underlying	Agreen	nent") l	oetween	the	County	of	Rive	rside	("Coun	ty")	and
				actor") and sha	all be eff	ective as	of the d	ate the	Underly	ing A	green	nent is	approve	d by	both
Partie	s (the "Eff	ective Date	").												

#### RECITALS

WHEREAS, County and Contractor entered into the Underlying Agreement pursuant to which the Contractor provides services to County, and in conjunction with the provision of such services certain protected health information ("PHI") and/or certain electronic protected health information ("ePHI") may be created by or made available to Contractor for the purposes of carrying out its obligations under the Underlying Agreement; and,

WHEREAS, the provisions of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), Public Law 104-191 enacted August 21, 1996, and the Health Information Technology for Economic and Clinical Health Act ("HITECH") of the American Recovery and Reinvestment Act of 2009, Public Law 111-5 enacted February 17, 2009, and the laws and regulations promulgated subsequent thereto, as may be amended from time to time, are applicable to the protection of any use or disclosure of PHI and/or ePHI pursuant to the Underlying Agreement; and,

WHEREAS, County is a covered entity, as defined in the Privacy Rule; and,

WHEREAS, to the extent County discloses PHI and/or ePHI to Contractor or Contractor creates, receives, maintains, transmits, or has access to PHI and/or ePHI of County, Contractor is a business associate, as defined in the Privacy Rule; and,

WHEREAS, pursuant to 42 USC §17931 and §17934, certain provisions of the Security Rule and Privacy Rule apply to a business associate of a covered entity in the same manner that they apply to the covered entity, the additional security and privacy requirements of HITECH are applicable to business associates and must be incorporated into the business associate agreement, and a business associate is liable for civil and criminal penalties for failure to comply with these security and/or privacy provisions; and,

WHEREAS, the parties mutually agree that any use or disclosure of PHI and/or ePHI must be in compliance with the Privacy Rule, Security Rule, HIPAA, HITECH and any other applicable law; and,

WHEREAS, the parties intend to enter into this Addendum to address the requirements and obligations set forth in the Privacy Rule, Security Rule, HITECH and HIPAA as they apply to Contractor as a business associate of County, including the establishment of permitted and required uses and disclosures of PHI and/or ePHI created or received by Contractor during the course of performing functions, services and activities on behalf of County, and appropriate limitations and conditions on such uses and disclosures;

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, the parties agree as follows:

- 1. <u>Definitions</u>. Terms used, but not otherwise defined, in this Addendum shall have the same meaning as those terms in HITECH, HIPAA, Security Rule and/or Privacy Rule, as may be amended from time to time.
  - A. "Breach" when used in connection with PHI means the acquisition, access, use or disclosure of PHI in a manner not permitted under subpart E of the Privacy Rule which compromises the security or privacy of the PHI, and shall have the meaning given such term in 45 CFR §164.402.
    - (1) Except as provided below in Paragraph (2) of this definition, acquisition, access, use, or disclosure of PHI in a manner not permitted by subpart E of the Privacy Rule is presumed to be a breach unless Contractor demonstrates that there is a low probability that the PHI has been compromised based on a risk assessment of at least the following four factors:

- (a) The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification;
- (b) The unauthorized person who used the PHI or to whom the disclosure was made;
- (c) Whether the PHI was actually acquired or viewed; and
- (d) The extent to which the risk to the PHI has been mitigated.

#### (2) Breach excludes:

- (a) Any unintentional acquisition, access or use of PHI by a workforce member or person acting under the authority of a covered entity or business associate, if such acquisition, access or use was made in good faith and within the scope of authority and does not result in further use or disclosure in a manner not permitted under subpart E of the Privacy Rule.
- (b) Any inadvertent disclosure by a person who is authorized to access PHI at a covered entity or business associate to another person authorized to access PHI at the same covered entity, business associate, or organized health care arrangement in which County participates, and the information received as a result of such disclosure is not further used or disclosed in a manner not permitted by subpart E of the Privacy Rule.
- (c) A disclosure of PHI where a covered entity or business associate has a good faith belief that an unauthorized person to whom the disclosure was made would not reasonably have been able to retain such information.
- B. "Business associate" has the meaning given such term in 45 CFR §164.501, including but not limited to a subcontractor that creates, receives, maintains, transmits or accesses PHI on behalf of the business associate.
- C. "Data aggregation" has the meaning given such term in 45 CFR §164.501.
- D. "Designated record set" as defined in 45 CFR §164.501 means a group of records maintained by or for a covered entity that may include: the medical records and billing records about individuals maintained by or for a covered health care provider; the enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or, used, in whole or in part, by or for the covered entity to make decisions about individuals.
- E. "Electronic protected health information" ("ePHI") as defined in 45 CFR §160.103 means protected health information transmitted by or maintained in electronic media.
- F. "Electronic health record" means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given such term in 42 USC §17921(5).
- G. "Health care operations" has the meaning given such term in 45 CFR §164.501.
- H. "Individual" as defined in 45 CFR §160.103 means the person who is the subject of protected health information.
- I. "Person" as defined in 45 CFR §160.103 means a natural person, trust or estate, partnership, corporation, professional association or corporation, or other entity, public or private.
- J. "Privacy Rule" means the HIPAA regulations codified at 45 CFR Parts 160 and 164, Subparts A and E.
- K. "Protected health information" ("PHI") has the meaning given such term in 45 CFR §160.103, which includes ePHI.
- L. "Required by law" has the meaning given such term in 45 CFR §164.103.
- M. "Secretary" means the Secretary of the U.S. Department of Health and Human Services ("HHS").

- N. "Security incident" as defined in 45 CFR §164.304 means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system.
- O. "Security Rule" means the HIPAA Regulations codified at 45 CFR Parts 160 and 164, Subparts A and C.
- P. "Subcontractor" as defined in 45 CFR §160.103 means a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate.
- Q. "Unsecured protected health information" and "unsecured PHI" as defined in 45 CFR §164.402 means PHI not rendered unusable, unreadable, or indecipherable to unauthorized persons through use of a technology or methodology specified by the Secretary in the guidance issued under 42 USC §17932(h)(2).

## 2. Scope of Use and Disclosure by Contractor of County's PHI and/or ePHI.

- A. Except as otherwise provided in this Addendum, Contractor may use, disclose, or access PHI and/or ePHI as necessary to perform any and all obligations of Contractor under the Underlying Agreement or to perform functions, activities or services for, or on behalf of, County as specified in this Addendum, if such use or disclosure does not violate HIPAA, HITECH, the Privacy Rule and/or Security Rule.
- B. Unless otherwise limited herein, in addition to any other uses and/or disclosures permitted or authorized by this Addendum or required by law, in accordance with 45 CFR §164.504(e)(2), Contractor may:
  - 1) Use PHI and/or ePHI if necessary for Contractor's proper management and administration and to carry out its legal responsibilities; and,
  - 2) Disclose PHI and/or ePHI for the purpose of Contractor's proper management and administration or to carry out its legal responsibilities, only if:
    - a) The disclosure is required by law; or,
    - b) Contractor obtains reasonable assurances, in writing, from the person to whom Contractor will disclose such PHI and/or ePHI that the person will:
      - i. Hold such PHI and/or ePHI in confidence and use or further disclose it only for the purpose for which Contractor disclosed it to the person, or as required by law; and,
      - ii. Notify Contractor of any instances of which it becomes aware in which the confidentiality of the information has been breached; and,
  - 3) Use PHI to provide data aggregation services relating to the health care operations of County pursuant to the Underlying Agreement or as requested by County; and,
  - 4) De-identify all PHI and/or ePHI of County received by Contractor under this Addendum provided that the de-identification conforms to the requirements of the Privacy Rule and/or Security Rule and does not preclude timely payment and/or claims processing and receipt.
- C. Notwithstanding the foregoing, in any instance where applicable state and/or federal laws and/or regulations are more stringent in their requirements than the provisions of HIPAA, including, but not limited to, prohibiting disclosure of mental health and/or substance abuse records, the applicable state and/or federal laws and/or regulations shall control the disclosure of records.

## 3. Prohibited Uses and Disclosures.

A. Contractor may neither use, disclose, nor access PHI and/or ePHI in a manner not authorized by the Underlying Agreement or this Addendum without patient authorization or de-identification of the PHI and/or ePHI and as authorized in writing from County.

- B. Contractor may neither use, disclose, nor access PHI and/or ePHI it receives from County or from another business associate of County, except as permitted or required by this Addendum, or as required by law.
- C. Contractor agrees not to make any disclosure of PHI and/or ePHI that County would be prohibited from making.
- D. Contractor shall not use or disclose PHI for any purpose prohibited by the Privacy Rule, Security Rule, HIPAA and/or HITECH, including, but not limited to 42 USC §17935 and §17936. Contractor agrees:
  - 1) Not to use or disclose PHI for fundraising, unless pursuant to the Underlying Agreement and only if permitted by and in compliance with the requirements of 45 CFR §164.514(f) or 45 CFR §164.508;
  - 2) Not to use or disclose PHI for marketing, as defined in 45 CFR §164.501, unless pursuant to the Underlying Agreement and only if permitted by and in compliance with the requirements of 45 CFR §164.508(a)(3);
  - 3) Not to disclose PHI, except as otherwise required by law, to a health plan for purposes of carrying out payment or health care operations, if the individual has requested this restriction pursuant to 42 USC §17935(a) and 45 CFR §164.522, and has paid out of pocket in full for the health care item or service to which the PHI solely relates: and.
  - 4) Not to receive, directly or indirectly, remuneration in exchange for PHI, or engage in any act that would constitute a sale of PHI, as defined in 45 CFR §164.502(a)(5)(ii), unless permitted by the Underlying Agreement and in compliance with the requirements of a valid authorization under 45 CFR §164.508(a)(4). This prohibition shall not apply to payment by County to Contractor for services provided pursuant to the Underlying Agreement.

## 4. Obligations of County.

- A. County agrees to make its best efforts to notify Contractor promptly in writing of any restrictions on the use or disclosure of PHI and/or ePHI agreed to by County that may affect Contractor's ability to perform its obligations under the Underlying Agreement, or this Addendum.
- B. County agrees to make its best efforts to promptly notify Contractor in writing of any changes in, or revocation of, permission by any individual to use or disclose PHI and/or ePHI, if such changes or revocation may affect Contractor's ability to perform its obligations under the Underlying Agreement, or this Addendum.
- C. County agrees to make its best efforts to promptly notify Contractor in writing of any known limitation(s) in its notice of privacy practices to the extent that such limitation may affect Contractor's use or disclosure of PHI and/or ePHI.
- D. County agrees not to request Contractor to use or disclose PHI and/or ePHI in any manner that would not be permissible under HITECH, HIPAA, the Privacy Rule, and/or Security Rule.
- E. County agrees to obtain any authorizations necessary for the use or disclosure of PHI and/or ePHI, so that Contractor can perform its obligations under this Addendum and/or Underlying Agreement.
- 5. Obligations of Contractor. In connection with the use or disclosure of PHI and/or ePHI, Contractor agrees to:
  - A. Use or disclose PHI only if such use or disclosure complies with each applicable requirement of 45 CFR §164.504(e). Contractor shall also comply with the additional privacy requirements that are applicable to covered entities in HITECH, as may be amended from time to time.
  - B. Not use or further disclose PHI and/or ePHI other than as permitted or required by this Addendum or as required by law. Contractor shall promptly notify County if Contractor is required by law to disclose PHI and/or ePHI.
  - C. Use appropriate safeguards and comply, where applicable, with the Security Rule with respect to ePHI, to prevent use or disclosure of PHI and/or ePHI other than as provided for by this Addendum.

- D. Mitigate, to the extent practicable, any harmful effect that is known to Contractor of a use or disclosure of PHI and/or ePHI by Contractor in violation of this Addendum.
- E. Report to County any use or disclosure of PHI and/or ePHI not provided for by this Addendum or otherwise in violation of HITECH, HIPAA, the Privacy Rule, and/or Security Rule of which Contractor becomes aware, including breaches of unsecured PHI as required by 45 CFR §164.410.
- F. In accordance with 45 CFR §164.502(e)(1)(ii), require that any subcontractors that create, receive, maintain, transmit or access PHI on behalf of the Contractor agree through contract to the same restrictions and conditions that apply to Contractor with respect to such PHI and/or ePHI, including the restrictions and conditions pursuant to this Addendum.
- G. Make available to County or the Secretary, in the time and manner designated by County or Secretary, Contractor's internal practices, books and records relating to the use, disclosure and privacy protection of PHI received from County, or created or received by Contractor on behalf of County, for purposes of determining, investigating or auditing Contractor's and/or County's compliance with the Privacy Rule.
- H. Request, use or disclose only the minimum amount of PHI necessary to accomplish the intended purpose of the request, use or disclosure in accordance with 42 USC §17935(b) and 45 CFR §164.502(b)(1).
- I. Comply with requirements of satisfactory assurances under 45 CFR §164.512 relating to notice or qualified protective order in response to a third party's subpoena, discovery request, or other lawful process for the disclosure of PHI, which Contractor shall promptly notify County upon Contractor's receipt of such request from a third party.
- J. Not require an individual to provide patient authorization for use or disclosure of PHI as a condition for treatment, payment, enrollment in any health plan (including the health plan administered by County), or eligibility of benefits, unless otherwise excepted under 45 CFR §164.508(b)(4) and authorized in writing by County.
- K. Use appropriate administrative, technical and physical safeguards to prevent inappropriate use, disclosure, or access of PHI and/or ePHI.
- L. Obtain and maintain knowledge of applicable laws and regulations related to HIPAA and HITECH, as may be amended from time to time.
- M. Comply with the requirements of the Privacy Rule that apply to the County to the extent Contractor is to carry out County's obligations under the Privacy Rule.
- N. Take reasonable steps to cure or end any pattern of activity or practice of its subcontractor of which Contractor becomes aware that constitute a material breach or violation of the subcontractor's obligations under the business associate contract with Contractor, and if such steps are unsuccessful, Contractor agrees to terminate its contract with the subcontractor if feasible.

## 6. Access to PHI, Amendment and Disclosure Accounting. Contractor agrees to:

- A. Access to PHI, including ePHI. Provide access to PHI, including ePHI if maintained electronically, in a designated record set to County or an individual as directed by County, within five (5) days of request from County, to satisfy the requirements of 45 CFR §164.524.
- B. Amendment of PHI. Make PHI available for amendment and incorporate amendments to PHI in a designated record set County directs or agrees to at the request of an individual, within fifteen (15) days of receiving a written request from County, in accordance with 45 CFR §164.526.
- C. Accounting of disclosures of PHI and electronic health record. Assist County to fulfill its obligations to provide accounting of disclosures of PHI under 45 CFR §164.528 and, where applicable, electronic health records under 42 USC §17935(c) if Contractor uses or maintains electronic health records. Contractor shall:

- 1) Document such disclosures of PHI and/or electronic health records, and information related to such disclosures, as would be required for County to respond to a request by an individual for an accounting of disclosures of PHI and/or electronic health record in accordance with 45 CFR §164.528.
- 2) Within fifteen (15) days of receiving a written request from County, provide to County or any individual as directed by County information collected in accordance with this section to permit County to respond to a request by an individual for an accounting of disclosures of PHI and/or electronic health record.
- 3) Make available for County information required by this Section 6.C for six (6) years preceding the individual's request for accounting of disclosures of PHI, and for three (3) years preceding the individual's request for accounting of disclosures of electronic health record.
- 7. <u>Security of ePHI</u>. In the event County discloses ePHI to Contractor or Contractor needs to create, receive, maintain, transmit or have access to County ePHI, in accordance with 42 USC §17931 and 45 CFR §164.314(a)(2)(i), and §164.306, Contractor shall:
  - 1. Comply with the applicable requirements of the Security Rule, and implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of ePHI that Contractor creates, receives, maintains, or transmits on behalf of County in accordance with 45 CFR §164.308, §164.310, and §164.312;
  - 2. Comply with each of the requirements of 45 CFR §164.316 relating to the implementation of policies, procedures and documentation requirements with respect to ePHI;
  - 3. Protect against any reasonably anticipated threats or hazards to the security or integrity of ePHI;
  - 4. Protect against any reasonably anticipated uses or disclosures of ePHI that are not permitted or required under the Privacy Rule;
  - 5. Ensure compliance with the Security Rule by Contractor's workforce;
  - 6. In accordance with 45 CFR §164.308(b)(2), require that any subcontractors that create, receive, maintain, transmit, or access ePHI on behalf of Contractor agree through contract to the same restrictions and requirements contained in this Addendum and comply with the applicable requirements of the Security Rule;
  - 7. Report to County any security incident of which Contractor becomes aware, including breaches of unsecured PHI as required by 45 CFR §164.410; and,
  - 8. Comply with any additional security requirements that are applicable to covered entities in Title 42 (Public Health and Welfare) of the United States Code, as may be amended from time to time, including but not limited to HITECH.
  - 8. <u>Breach of Unsecured PHI</u>. In the case of breach of unsecured PHI, Contractor shall comply with the applicable provisions of 42 USC §17932 and 45 CFR Part 164, Subpart D, including but not limited to 45 CFR §164.410.
  - A. **Discovery and notification.** Following the discovery of a breach of unsecured PHI, Contractor shall notify County in writing of such breach without unreasonable delay and in no case later than 60 calendar days after discovery of a breach, except as provided in 45 CFR §164.412.
    - 1) Breaches treated as discovered. A breach is treated as discovered by Contractor as of the first day on which such breach is known to Contractor or, by exercising reasonable diligence, would have been known to Contractor, which includes any person, other than the person committing the breach, who is an employee, officer, or other agent of Contractor (determined in accordance with the federal common law of agency).

- 2) Content of notification. The written notification to County relating to breach of unsecured PHI shall include, to the extent possible, the following information if known (or can be reasonably obtained) by Contractor:
  - a) The identification of each individual whose unsecured PHI has been, or is reasonably believed by Contractor to have been accessed, acquired, used or disclosed during the breach;
  - b) A brief description of what happened, including the date of the breach and the date of the discovery of the breach, if known;
  - c) A description of the types of unsecured PHI involved in the breach, such as whether full name, social security number, date of birth, home address, account number, diagnosis, disability code, or other types of information were involved:
  - d) Any steps individuals should take to protect themselves from potential harm resulting from the breach;
  - e) A brief description of what Contractor is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and,
  - f) Contact procedures for individuals to ask questions or learn additional information, which shall include a toll-free telephone number, an e-mail address, web site, or postal address.
- B. Cooperation. With respect to any breach of unsecured PHI reported by Contractor, Contractor shall cooperate with County and shall provide County with any information requested by County to enable County to fulfill in a timely manner its own reporting and notification obligations, including but not limited to providing notice to individuals, prominent media outlets and the Secretary in accordance with 42 USC §17932 and 45 CFR §164.404, §164.406 and §164.408.
- C. **Breach log.** To the extent breach of unsecured PHI involves less than 500 individuals, Contractor shall maintain a log or other documentation of such breaches and provide such log or other documentation on an annual basis to County not later than fifteen (15) days after the end of each calendar year for submission to the Secretary.
- D. Delay of notification authorized by law enforcement. If Contractor delays notification of breach of unsecured PHI pursuant to a law enforcement official's statement that required notification, notice or posting would impede a criminal investigation or cause damage to national security, Contractor shall maintain documentation sufficient to demonstrate its compliance with the requirements of 45 CFR §164.412.
- E. Payment of costs. With respect to any breach of unsecured PHI caused solely by the Contractor's failure to comply with one or more of its obligations under this Addendum and/or the provisions of HITECH, HIPAA, the Privacy Rule or the Security Rule, Contractor agrees to pay any and all costs associated with providing all legally required notifications to individuals, media outlets, and the Secretary. This provision shall not be construed to limit or diminish Contractor's obligations to indemnify, defend and hold harmless County under Section 9 of this Addendum.
- F. Documentation. Pursuant to 45 CFR §164.414(b), in the event Contractor's use or disclosure of PHI and/or ePHI violates the Privacy Rule, Contractor shall maintain documentation sufficient to demonstrate that all notifications were made by Contractor as required by 45 CFR Part 164, Subpart D, or that such use or disclosure did not constitute a breach, including Contractor's completed risk assessment and investigation documentation.
- G. Additional State Reporting Requirements. The parties agree that this Section 8.G applies only if and/or when County, in its capacity as a licensed clinic, health facility, home health agency, or hospice, is required to report unlawful or unauthorized access, use, or disclosure of medical information under the more stringent requirements of California Health & Safety Code §1280.15. For purposes of this Section 8.G, "unauthorized" has the meaning given such term in California Health & Safety Code §1280.15(j)(2).

- 1) Contractor agrees to assist County to fulfill its reporting obligations to affected patients and to the California Department of Public Health ("CDPH") in a timely manner under the California Health & Safety Code §1280.15.
- 2) Contractor agrees to report to County any unlawful or unauthorized access, use, or disclosure of patient's medical information without unreasonable delay and no later than two (2) business days after Contractor detects such incident. Contractor further agrees such report shall be made in writing, and shall include substantially the same types of information listed above in Section 8.A.2 (Content of Notification) as applicable to the unlawful or unauthorized access, use, or disclosure as defined above in this section, understanding and acknowledging that the term "breach" as used in Section 8.A.2 does not apply to California Health & Safety Code §1280.15.

### 9. Hold Harmless/Indemnification.

- A. Contractor agrees to indemnify and hold harmless County, all Agencies, Districts, Special Districts and Departments of County, 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 Contractor, its officers, employees, subcontractors, agents or representatives arising out of or in any way relating to this Addendum, including but not limited to property damage, bodily injury, death, or any other element of any kind or nature whatsoever arising from the performance of Contractor, its officers, agents, employees, subcontractors, agents or representatives from this Addendum. Contractor 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 County, all Agencies, Districts, Special Districts and Departments of County, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents or representatives in any claim or action based upon such alleged acts or omissions.
- B. With respect to any action or claim subject to indemnification herein by Contractor, Contractor shall, at their sole cost, have the right to use counsel of their choice, subject to the approval of County, which shall not be unreasonably withheld, 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 Contractor's indemnification to County as set forth herein. Contractor's obligation to defend, indemnify and hold harmless County shall be subject to County having given Contractor written notice within a reasonable period of time of the claim or of the commencement of the related action, as the case may be, and information and reasonable assistance, at Contractor's expense, for the defense or settlement thereof. Contractor's obligation hereunder shall be satisfied when Contractor has provided to County the appropriate form of dismissal relieving County from any liability for the action or claim involved.
- C. The specified insurance limits required in the Underlying Agreement of this Addendum shall in no way limit or circumscribe Contractor's obligations to indemnify and hold harmless County herein from third party claims arising from issues of this Addendum.
- D. In the event there is conflict between this clause and California Civil Code §2782, this clause shall be interpreted to comply with Civil Code §2782. Such interpretation shall not relieve the Contractor from indemnifying County to the fullest extent allowed by law.
- E. In the event there is a conflict between this indemnification clause and an indemnification clause contained in the Underlying Agreement of this Addendum, this indemnification shall only apply to the subject issues included within this Addendum.
- 10. <u>Term.</u> This Addendum shall commence upon the Effective Date and shall terminate when all PHI and/or ePHI provided by County to Contractor, or created or received by Contractor on behalf of County, is destroyed or returned to County, or, if it is infeasible to return or destroy PHI and/ePHI, protections are extended to such information, in accordance with section 11.B of this Addendum.

## 11. **Termination.**

A. Termination for Breach of Contract. A breach of any provision of this Addendum by either party shall constitute a material breach of the Underlying Agreement and will provide grounds for terminating this Addendum and the

Underlying Agreement with or without an opportunity to cure the breach, notwithstanding any provision in the Underlying Agreement to the contrary. Either party, upon written notice to the other party describing the breach, may take any of the following actions:

- 1) Terminate the Underlying Agreement and this Addendum, effective immediately, if the other party breaches a material provision of this Addendum.
- 2) Provide the other party with an opportunity to cure the alleged material breach and in the event the other party fails to cure the breach to the satisfaction of the non-breaching party in a timely manner, the non-breaching party has the right to immediately terminate the Underlying Agreement and this Addendum.
- 3) If termination of the Underlying Agreement is not feasible, the breaching party, upon the request of the non-breaching party, shall implement, at its own expense, a plan to cure the breach and report regularly on its compliance with such plan to the non-breaching party.

#### B. Effect of Termination.

- 1) Upon termination of this Addendum, for any reason, Contractor shall return or, if agreed to in writing by County, destroy all PHI and/or ePHI received from County, or created or received by the Contractor on behalf of County, and, in the event of destruction, Contractor shall certify such destruction, in writing, to County. This provision shall apply to all PHI and/or ePHI which are in the possession of subcontractors or agents of Contractor. Contractor shall retain no copies of PHI and/or ePHI, except as provided below in paragraph (2) of this section.
- 2) In the event that Contractor determines that returning or destroying the PHI and/or ePHI is not feasible, Contractor shall provide written notification to County of the conditions that make such return or destruction not feasible. Upon determination by Contractor that return or destruction of PHI and/or ePHI is not feasible, Contractor shall extend the protections of this Addendum to such PHI and/or ePHI and limit further uses and disclosures of such PHI and/or ePHI to those purposes which make the return or destruction not feasible, for so long as Contractor maintains such PHI and/or ePHI.

## 12. General Provisions.

- A. Retention Period. Whenever Contractor is required to document or maintain documentation pursuant to the terms of this Addendum, Contractor shall retain such documentation for 6 years from the date of its creation or as otherwise prescribed by law, whichever is later.
- B. Amendment. The parties agree to take such action as is necessary to amend this Addendum from time to time as is necessary for County to comply with HITECH, the Privacy Rule, Security Rule, and HIPAA generally.
- C. Survival. The obligations of Contractor under Sections 3, 5, 6, 7, 8, 9, 11.B and 12.A of this Addendum shall survive the termination or expiration of this Addendum.
- D. Regulatory and Statutory References. A reference in this Addendum to a section in HITECH, HIPAA, the Privacy Rule and/or Security Rule means the section(s) as in effect or as amended.
- E. Conflicts. The provisions of this Addendum shall prevail over any provisions in the Underlying Agreement that conflict or appear inconsistent with any provision in this Addendum.

#### F. Interpretation of Addendum.

- 1) This Addendum shall be construed to be part of the Underlying Agreement as one document. The purpose is to supplement the Underlying Agreement to include the requirements of the Privacy Rule, Security Rule, HIPAA and HITECH.
- 2) Any ambiguity between this Addendum and the Underlying Agreement shall be resolved to permit County to comply with the Privacy Rule, Security Rule, HIPAA and HITECH generally.
- G. Notices to County. All notifications required to be given by Contractor to County pursuant to the terms of this Addendum shall be made in writing and delivered to the County both by fax and to both of the addresses listed below by either registered or certified mail return receipt requested or guaranteed overnight mail with tracing capability, or at such other address as County may hereafter designate. All notices to County provided by Contractor pursuant to this Section shall be deemed given or made when received by County.

# Contract ID # RIVCO-96148-001-06/15

County HIPAA Privacy Officer:	HIPAA Privacy Manager
County HIPAA Privacy Officer Address:	P.O. Box 1569 Riverside, CA 92502
County HIPAA Privacy Officer Fax Number:	(951) 955-HIPAA or (951) 955-4472
	COUNTY PERSONNEL ONLY ———————
County Departmental Officer:	
County Departmental Officer Title:	
County Department Address:	
County Department Fax Number	