

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

609



FORM APPROVED COUNTY COUNSEL
DATE 10/19/15
BY: GREGORY P. PRAMOS

FROM: Emergency Management Department (EMD)

SUBMITTAL DATE:
10-06-2015

SUBJECT: Ratify the Three-Year Agreements for Medical Direction of Advanced Life Support Services with Five Paramedic Base Hospitals in Riverside County [All Districts], [\$0]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify the Base Hospital Agreements with Eisenhower Medical Center, John F. Kennedy Memorial Hospital, Riverside Community Hospital, Desert Regional Medical Center and Inland Valley Medical Center for the performance period of July 1, 2015 through June 30, 2018 for the provision of medical direction for Emergency Medical Care Services; and
2. Authorize the Director of Emergency Management to sign subsequent no money Amendments to the Base Hospital Agreements for the period of July 1, 2015 through June 30, 2018.

BACKGROUND:

Summary

The new agreements with the above mentioned Base Hospitals in Riverside County will allow for the continued provision of immediate medical direction of paramedics in Riverside County's Emergency (Continued on page 2)

Departmental Concurrence

BB:rp

Kim Saruwatari
Kim Saruwatari, Director
Emergency Management
Department

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 0	\$	\$ 0	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$	\$	\$	\$	

SOURCE OF FUNDS: N/A

Budget Adjustment:
For Fiscal Year:

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Cournoyer*
Debra Cournoyer

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes: Jeffries, Tavaglione, Washington, Benoit and Ashley
Nays: None
Absent: None
Date: November 3, 2015
xc: EMD

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

- A-30
- 4/5 Vote
- Positions Added
- Change Order

Prev. Agn. Ref.: 9/24/13, #3.46 **District:** All **Agenda Number:**

3-13

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA
FORM 11: Ratify the Three-Year Agreements for Medical Direction of Advanced Life Support
Services with Five Paramedic Base Hospitals in Riverside County [All Districts], [\$0]**

DATE:

PAGE: 2 of 2

BACKGROUND:

Summary (continued)

Medical Services (EMS) System. A Base Hospital is one of a limited number of hospitals which, upon designation by the Riverside County Emergency Medical Services Agency (REMSA) and upon completion of a written contractual agreement, is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and pre-hospital system assigned to it by REMSA.

These agreements for medical direction have been in place since 2005, and were most recently renewed in 2013 (Item 3.46, September 24, 2013). They are required under California Health and Safety Code Sections 1797.58 and 1798.100 thru 1798.105, and California Code of Regulations, Division 9, Title 22, Chapter 4, Section 100169. Late submission of these agreements is due to processing delays in coordinating with the hospitals.

In addition to the five hospitals represented by these agreements, Riverside County Regional Medical Center also serves as a Base Hospital. A Memorandum of Understanding with Riverside County Regional Medical Center for Base Hospital services will be signed by the Director of Emergency Management.

These are no money agreements.

Impact on Residents and Businesses

There are no negative impacts on residents and businesses of Riverside County. These agreements provide for appropriate, timely and accurate treatment of emergency medical conditions in the field and direction to appropriate levels of care for all residents and visitors.

COUNTY OF RIVERSIDE
DEPARTMENT OF PUBLIC HEALTH

FOR COUNTY USE ONLY



COUNTY DEPT/DIVISION DOPH/EMS		CONTRACT NO. 15-128	RFP NO. ----
FUND 10000	DEPARTMENT ID 4200101700	PROGRAM:	CLASS/LOCATION 6715
CONTRACT AMOUNT \$-0-		PERIOD OF PERFORMANCE July 1, 2015 thru June 30, 2018	
COUNTY CONTACT: Bruce Barton (951) 358-5029			
CONTRACTOR REPRESENTATIVE: Sabrina Yamashiro, PLN Email: Sabrina.yamashiro@hcahealthcare.com			
PROGRAM NAME: Base Hospital			

This agreement is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California, hereinafter referred to as "COUNTY", and **Riverside Healthcare System, L.P., dba Riverside Community Hospital** hereinafter referred to as "HOSPITAL".

WITNESSETH:

WHEREAS, Health and Safety Code Section 1798.100 authorizes the local Emergency Medical Services (EMS) Agency, with the approval of its medical director, to designate and contract with hospitals or other entities approved by the medical director of the Agency to provide medical direction of pre-hospital emergency personnel, within its area of jurisdiction; and

WHEREAS, the State of California Code of Regulations, Title 22, Section 100169 of Division 9, requires local EMS agencies to have written agreements with base hospitals indicating requirements for program participation as specified by law and by the agency's policies and procedures; and

WHEREAS, the Emergency Medical Services Plan has been approved by the County of Riverside, Board of Supervisors on October 4, 1994.

NOW THEREFORE in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 17.

HOSPITAL

By Patrick Brilliant

Patrick Brilliant, CEO
Print Name

Date 8/24/15

COUNTY

By Marion Ashley

Marion Ashley, Chairman, Board of Supervisors
Print Name

Date NOV 03 2015

ATTEST: Kecia Harper-Ihem, Clerk

FORM APPROVED COUNTY COUNSEL
BY: Neal R. Kipnis
NEAL R. KIPNIS

DATE NOV 03 2015 BY Kellie Dyer, Deputy

Base Hospital Agreement

Between the County of Riverside and Riverside Healthcare System, L.P., dba

Riverside Community Hospital

1. Definitions

1.1 As used in this Agreement, the following words and terms shall have the meanings described below:

A. Advanced Life Support (ALS) - Special services designed to provide definitive prehospital emergency medical care including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the supervision of a Base Hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by emergency or other medical staff of that Hospital.

B. ALS Provider – Emergency Medical Technician (EMT)-Paramedic prehospital personnel licensed by the State of California and accredited by the Riverside County EMS Agency (REMSA) to provide ALS services within the County as an authorized part of the regional EMS system, and affiliated with a REMSA approved ALS Service Provider.

C. Limited Advanced Life Support (LALS) Service Provider – A Service Provider approved by REMSA or State statute that utilizes Advanced EMT and/or EMT-II personnel.

D. Advanced EMT, or EMT II – A California certified EMT with additional training in limited advanced life support according to the standards prescribed by Title 22, Division 9, Chapter 3 of the California Code of Regulations, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to the aforementioned section of Title 22.

E. ALS Service Provider Agency – a public or private organization that has been approved by REMSA to provide ALS services within County as an authorized part of the regional EMS system.

F. Base Hospital – One of a limited number of hospitals which, upon designation by REMSA and upon the completion of an agreement with REMSA is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the REMSA.

G. Base Hospital Physician – A physician and surgeon who is currently licensed in California, who is assigned to the Emergency Department of a Base Hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the authority.

H. Call – A response by prehospital care personnel to a request for emergency medical services.

I. EMS Quality Improvement Program - Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.

J. REMSA –The Riverside County Emergency Medical Services Agency, which serves as the local EMS Agency. REMSA and County shall be used interchangeably for the purposes of this agreement.

K. Emergency Medical Services (EMS) – The services utilized in responding to a medical emergency.

L. EMS System – The specially organized arrangement which provides for the personnel, facilities, and equipment for the effective and coordinated delivery of EMS services within a County.

M. Local EMS Agency – The agency having primary statutory and regulatory responsibility for administration of emergency medical services in a county and/or region.

N. Mobile Intensive Care Nurse (MICN) – A registered nurse who is employed by the Base Hospital and who has received training and is authorized by the REMSA Medical Director to issue instructions to paramedics within an EMS system according to standardized procedures developed by REMSA as defined by California laws.

O. Prehospital Liaison Nurse – A registered nurse who is authorized as an MICN by the REMSA Medical Director to assist the Base Hospital Medical Director in the quality assurance, medical direction and supervision of prehospital emergency medical care personnel.

2. REMSA's Obligations

2.1 REMSA shall be responsible for planning, implementing and evaluating the Riverside County EMS system including the designation and function of Base Hospitals in accordance with the California Health and Safety Code, Division 2.5, the California, the California Code of Regulations, Title 22 and applicable County of Riverside laws, ordinances and policies.

2.2 REMSA shall develop and implement policies, protocols and procedures that establish requirements for the eligibility, designation, operation and evaluation of Base Hospitals within the organized Riverside County EMS system.

3. Hospital's Obligations as a Base Hospital

3.1 Hospital shall meet all requirements set forth in the California Health and Safety Code, Division 2.5, the California Code of Regulations, Title 22, and policies, protocols and procedures

implemented by REMSA pursuant to these laws as they pertain to eligibility, designation and operation as a Base Hospital within the organized Riverside County EMS system.

3.2 Hospital shall provide appropriately authorized or certified personnel 24 hours per day in sufficient numbers to provide uninterrupted on-line medical direction.

3.3 Hospital agrees to accept any and all patients who are under the immediate care of prehospital emergency medical care personnel.

3.4 Hospital shall monitor protocol compliance by field personnel and report deviations from REMSA protocols to the appropriate prehospital provider agency(s) and REMSA.

3.5 Hospital shall participate in County's EMS CQI Leadership Team or other ad-hoc groups as requested by REMSA.

3.6 MICNs shall be required to attend:

A. At least two (2) skills days per year, as approved by REMSA.

B. At least two (2) Base Hospital meetings per year, as approved by REMSA.

3.7 Hospital shall provide training for Emergency Department staff as may be required by REMSA policies, procedures and protocols.

3.8 Hospital shall equip Emergency Department with any additional equipment as may be specified by REMSA as it relates to emergency preparedness.

3.9 Hospital shall participate in research studies as requested and approved by REMSA.

3.10 Hospital shall actively participate in REMSA's data system.

3.11 Hospital shall provide patient outcome data to REMSA, upon request, for individual patients transported to the Base Hospital for evaluation and treatment. Patient outcome data is to be used internally by REMSA to meet requirements for continuous quality improvement review and EMS system oversight pursuant to Federal, State and Local laws. All data and other information submitted by a Base Hospital to REMSA for the purpose of monitoring, evaluating

or reporting on the necessity, quality and level of emergency services, including data or other information shall be subjected to California Evidence Code §1157.7.

3.12 Hospital shall adhere to all Federal, State, and County regulations, policies, and protocols concerning the confidentiality of patient/medical records.

3.13 Hospital shall make every effort to accept ambulance patients and free the ambulance to be available to respond to other calls within 30 minutes of arrival at the Hospital.

3.14 Hospital shall implement processes to work cooperatively with ambulance providers and REMSA staff to return ambulances to service as soon as possible when multiple ambulances are being held in the Emergency Department (ED) for extended periods of time.

3.15 Hospital shall implement procedures for notifying the EMS Duty Officer of issues and incidents that affect or may affect the EMS system, including but not limited to:

- A. Activation of internal disaster procedures.
- B. Safety issues for patients or prehospital providers.
- C. Disruption of emergency medical care capability or ability to receive patients.
- D. Need for hospital evacuation.
- E. Disruption in communications capability with the field, Base Hospital, or the REMSA Communications Center.
- F. Excessive delay in transfer of care time leading to the holding of 9-1-1 ambulances.

3.16 Hospital shall provide the insurance/billing information of patients transported to the hospital to the EMS transport service.

3.17 Hospital shall participate in all HAvBED or other polls as requested by REMSA.

3.18 Hospital shall agree to maintain and provide upon request to REMSA within 60 days after the end of the preceding month agreed upon data elements for program monitoring and evaluation of the EMS system. Such data may include, but not be limited to:

- A. ST Segment Elevation Myocardial Infarction (STEMI) data
- B. Stroke data
- C. Airship utilization
- D. Volume indicators, such as the total number of Base Hospital contacts, multi-casualty incident (MCI) calls managed by the Base Hospital, or specialty center designation calls (e.g., trauma, STEMI, Stroke) managed by the Base Hospital.
- E. Core Measures, as required by the State or REMSA.
- F. Other data as requested, including copies of Base Hospital or STEMI reports pertaining to specified incidents.

4. Hospital Reimbursement

4.1 Hospital shall not bill or otherwise charge patients for supplies or services provided to patients by prehospital personnel at the scene of an emergency, during transport to Hospital, or other emergency facility, and before arrival at Hospital. However, Hospital may charge the prehospital provider for supplies used at the scene and during transport to Hospital's facility if replaced by Hospital. County shall not be liable for any of Hospital's fees or charges whatsoever.

5. Term/Termination.

5.1 The Term of Agreement shall begin on the date this Agreement is executed and shall continue until June 30, 2018. This Agreement may be terminated by either party without cause upon ninety (90) days written notice to the other.

5.2 County may terminate this agreement with ninety (90) days written notice for uncorrected failures by the Hospital to meet the obligations contained within this agreement.

6. Independent Contractor Status

6.1 Each party shall be solely responsible for its own employees. Each party shall pay all wages, salaries, overtime, benefits and other amounts due to their own personnel pursuant to applicable law and in connection with any and all services under this Agreement. Each party shall be responsible for all reports and obligations respecting their own personnel, including but not limited to, social security taxes, income tax withholding, unemployment insurance, and workers' compensation insurance. Employees or agents of one party shall not be deemed employees of the other for any purpose. Each party shall defend, indemnify and hold harmless the other party from and against any and all expenses or liabilities of any kind arising from or incident to any claim by any employee of the indemnifying party or any governmental agency relating to wages, salaries, overtime, benefits or other obligations of the indemnifying party to any employee thereof.

7. Notices

7.1 All notices permitted or required under this Agreement shall be given to the respective parties at the following addresses, or at such other addresses as the respective parties may provide in writing for this purpose:

Hospital: Riverside Healthcare System, L.P., dba
Riverside Community Hospital
Attn: Patrick D. Brilliant, CEO/President
4445 Magnolia Avenue
Riverside, CA 92513
Sabrina.yamashiro@hcahealthcare.com
Phone: (951) 788-3000

County: Riverside County EMS Agency
Attn: Bruce Barton, EMS Director
P.O. Box 7600
Riverside, California 92503
BBarton@rivcocha.org
Phone: (951) 358-5029

7.2 Such notices may be provided by personal delivery, by first class mail, by express delivery or by facsimile transmission. Notice shall be deemed made as follows:

- A. When personally delivered.
- B. When mailed, seventy-two (72) hours after deposit in the U.S. Mail, first class postage prepaid.
- C. When sent by express delivery, upon delivery as documented by the delivery service.
- D. When sent via facsimile transmission, upon actual delivery as documented by any verifiable facsimile transmission record. Facsimile transmission shall be followed by first class delivery along with a copy of the facsimile transmission record. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

8. Cooperation and Further Acts

8.1 The parties shall fully cooperate with one another, and shall take any additional acts or sign any additional documents as may be necessary, appropriate or convenient to attain the purposes of this Agreement.

9. Non-Discrimination

9.1 Hospital shall not discriminate in the provisions of services, allocation of benefits, accommodation of facilities, or employment of personnel, on the basis of ethnic group identification, race, color, creed, ancestry, religion, national origin, sexual preference, sex, age (over 40), marital status, medical condition, or physical or mental handicap, and shall comply with all requirements of the law regarding non-discrimination and affirmative action including those laws pertaining to the prohibition against qualified handicapped persons in all programs or activities.

9.2 For the purpose of this Agreement, distinctions on grounds of race, religion, color, sex, national origin, age or physical or mental handicap include, but not limited to, the following:

A. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or in a different manner or at a different time from that provided to other eligible persons under this Agreement.

B. Subjecting an eligible person to segregation or separate treatment in any manner related to his/her receipt of any service, except when necessary for infection control.

C. Restricting the ineligible person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving a similar service or benefit.

D. Treating an ineligible person differently from others in determining whether he/she satisfies an eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar services or benefit.

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

10. Insurance

10.1 Without limiting or diminishing the Hospital's obligation to indemnify or hold the County harmless, Hospital shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverages during the term of this Agreement:

A. Workers' Compensation: If Hospital has employees as defined by the State of California, Hospital shall maintain 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 one million (\$1,000,000) per person per accident. Policy shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

B. Commercial General Liability: Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, completed operations, personal and advertising injury covering claims which may arise from or out of Hospital's performance of its obligations hereunder. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents or representatives as an Additional Insured. Policy's limit of liability shall not be less than one million dollars (\$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 Hospital's vehicles or mobile equipment are used in the performance of the obligations under this Agreement, Hospital shall maintain liability insurance for all owned non-owned or hired vehicles in an amount not less than one million dollars (\$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 of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents, or representatives as an additional insured.

D. Professional Liability Insurance: Professional Liability Insurance (Error & Omissions), providing coverage for performance of work included within the Agreement, with a limit of liability of not less than two million dollars (\$2,000,000) per occurrence and four million dollars (\$4,000,000) annual aggregate. If Consultant'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. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his/her sole expense either 1) an

Extended Reporting Endorsement (also known as Tail Coverage); or 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance the Consultant has maintained continuous coverage with the seam or original insurer. Coverage provided under items: 1), 2), or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

E. General Insurance Provisions:

(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 an 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 Hospital shall cause their insurance carrier(s) to furnish the County of Riverside with a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein; or 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) shall provide no less than thirty (30) days written notice be given to the County of Riverside prior to any material modification or cancellation of such insurance. In the event of a material modification or cancellation of 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) and the insurance required herein is in full force and effect. Individual(s) authorized by the insurance

carrier to do so, on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Hospital shall furnish the County of Riverside an original Certificate(s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section within 30 days of signing this Agreement.

(3) It is understood and agreed by the parties hereto and the Hospital's insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

(4) Hospital may meet the above insurance obligation through a program of self-insurance, or by participation in a Joint Powers Insurance Authority.

(5) Failure on the part of the Hospital to produce or maintain required insurance or the self-insurance program shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

11. Attorney's Fees

11.1 If any party commences an action against another party, either legal, administrative or otherwise, arising out of or in connection with this Agreement, the prevailing party in such litigation shall be entitled to have and recover from the losing party reasonable attorney's fees and all other costs of such action.

12. Indemnification

12.1 Hospital shall indemnify and hold County harmless from any liability arising out of the services provided by HOSPITAL, its officers, agents, employees or subcontractors, for property damage, bodily injury, or death or any other element of damage of any kind or nature resulting from acts, failures to act, omissions, errors, negligence, including willful acts or

intentional acts of Hospital, its officers, agents, employees or subcontractors hereunder, and Hospital shall defend, at its sole expense, including but not limited to attorney fees, County, Special Districts, their respective Directors, Officers, Board of Supervisors, employees, agents, and subcontractors in any legal claim or action based upon such alleged acts or omissions.

13. Entire Agreement; Amendments

13.1 This Agreement contains the entire Agreement of the parties with respect to the subject matter hereof, and supersedes all prior negotiations, understandings or agreements. This Agreement may only be modified by a writing signed by both parties.

14. Governing Law

14.1 This Agreement shall be governed by the laws of the State of California. Venue shall be in Riverside County.

15. Successors and Assigns

15.1 This Agreement shall be binding on the successors and assigns of the parties.

16. Assignment or Transfer

16.1 No party shall assign, hypothecate, subcontract or transfer, either directly or by operation of law, this Agreement or any interest herein without the prior written consent of the other party. Any attempt to do so shall be null and void, and any assignees, hypothecates or transferees shall acquire no right or interest by reason of such attempted assignment, hypothecation or transfer.

17. Construction, Reference and Captions

17.1 Since the parties or their agents have participated fully in the preparation of this Agreement, the language of this Agreement shall be construed simply, according to its fair meaning, and not strictly for or against any party. Any term referencing time, days or period for performance shall be deemed calendar days and not work days. All references to any party shall

include all officials, officers, employees and agents of that party, except as otherwise specified in this Agreement. The captions of the various sections are for the convenience and ease of reference only and do not define, limit, augment, or describe the scope, content, or intent of this Agreement.

18. Waiver

18.1 No waiver of any default shall constitute a waiver of any other default or breach, whether of the same of other covenant or condition. No waiver, benefit, privilege, or service voluntarily given or performed by a party shall give any other party any contractual rights by custom, estoppel, or otherwise.

19. No Third Party Beneficiaries

19.1 There are no third party beneficiaries of any right or obligation assumed by the parties.

20. Invalidity and Severability

20.1 If any portion of this Agreement is declared invalid, illegal, or otherwise unenforceable by a court of competent jurisdiction, the remaining provisions shall continue in full force and effect. In addition, if any portion of this Agreement is declared to be invalid, illegal or otherwise unenforceable by a court of competent jurisdiction, or is otherwise deemed to be such by legal counsel for the parties to this Agreement, the parties shall use their reasonable best efforts to amend this Agreement to remove the inappropriate provision(s); provided, however, that if the amendment cannot be made in a manner which preserves all essential parts of the consideration for any party, such party may terminate this Agreement as soon as is reasonably practicable or as required by law.

21. Authority to Execute Agreement

21.1 Each party warrants that it has all requisite power and authority to conduct its business and to execute, deliver, and perform the Agreement. Each party also warrants that the individuals who have signed this Agreement have the legal power to make this Agreement and bind each respective party hereto.

22. Counterparts

22.1 This Agreement may be signed in one or more counterparts, each of which shall constitute an original.

23. HIPAA Compliance

23.1 The Parties agree to take reasonable steps to maintain the confidentiality of all health care files and client data, and shall use appropriate safeguards to prevent inappropriate use of disclosure of individually identifiable patient information except as permitted by this contract or as required by law. Each Party shall immediately report to the other any impermissible use of disclosure that occurs as to such files and data. Each Party agrees to destroy, in a secure manner, or return to the other all patient health information shared upon termination of this Agreement as determined by the other. Breach of this provision may serve as ground for termination of the Agreement.

23.2 The Parties agree that in the event that either subcontracts their duties and/or obligations created by this Agreement, said subcontractors shall be required to comply with Section 23.1 above.

24. State/Federal Participation.

24.1 Each Party warrants that neither it nor its employees are listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in any state of federal health care program(s).

COUNTY OF RIVERSIDE
DEPARTMENT OF PUBLIC HEALTH

FOR COUNTY USE ONLY



COUNTY DEPT/DIVISION DOPH/EMS		CONTRACT NO. 15-127	RFP NO. ----
FUND 10000	DEPARTMENT ID 4200101700	PROGRAM:	CLASS/LOCATION 6715
CONTRACT AMOUNT \$-0-		PERIOD OF PERFORMANCE July 1, 2015 thru June 30, 2018	
COUNTY CONTACT: Bruce Barton (951) 358-5029			
CONTRACTOR REPRESENTATIVE: Shellee Fetters, PLN Email: SFetters@emc.org			
PROGRAM NAME: Base Hospital			

This agreement is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California, hereinafter referred to as "COUNTY", and **Eisenhower Medical Center** hereinafter referred to as "HOSPITAL".

WITNESSETH:

WHEREAS, Health and Safety Code Section 1798.100 authorizes the local Emergency Medical Services (EMS) Agency, with the approval of its medical director, to designate and contract with hospitals or other entities approved by the medical director of the Agency to provide medical direction of pre-hospital emergency personnel, within its area of jurisdiction; and

WHEREAS, the State of California Code of Regulations, Title 22, Section 100169 of Division 9, requires local EMS agencies to have written agreements with base hospitals indicating requirements for program participation as specified by law and by the agency's policies and procedures; and

WHEREAS, the Emergency Medical Services Plan has been approved by the County of Riverside, Board of Supervisors on October 4, 1994.

NOW THEREFORE in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 17.

HOSPITAL

By [Signature]
Aubrey Serfling
Print Name

Date 09.24.15

COUNTY

By [Signature]

Marion Ashley, Chairman, Board of Supervisors
Print Name

Date NOV 03 2015

FORM APPROVED/COUNTY COUNSEL

BY: [Signature]
NEAL R. KIPNIS

DATE

ATTEST: Kecia Harper-Ihem, Clerk

By [Signature], Deputy

Base Hospital Agreement

Between the County of Riverside and Eisenhower Medical Center

1. Definitions

1.1 As used in this Agreement, the following words and terms shall have the meanings described below:

A. Advanced Life Support (ALS) - Special services designed to provide definitive prehospital emergency medical care including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the supervision of a Base Hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by emergency or other medical staff of that Hospital.

B. ALS Provider – Emergency Medical Technician (EMT)-Paramedic prehospital personnel licensed by the State of California and accredited by the Riverside County EMS Agency (REMSA) to provide ALS services within the County as an authorized part of the regional EMS system, and affiliated with a REMSA approved ALS Service Provider.

C. Limited Advanced Life Support (LALS) Service Provider – A Service Provider approved by REMSA or State statute that utilizes Advanced EMT and/or EMT-II personnel.

D. Advanced EMT, or EMT II – A California certified EMT with additional training in limited advanced life support according to the standards prescribed by Title 22, Division 9, Chapter 3 of the California Code of Regulations, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to the aforementioned section of Title 22.

E. ALS Service Provider Agency – a public or private organization that has been approved by REMSA to provide ALS services within County as an authorized part of the regional EMS system.

F. Base Hospital – One of a limited number of hospitals which, upon designation by REMSA and upon the completion of an agreement with REMSA is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the REMSA.

G. Base Hospital Physician – A physician and surgeon who is currently licensed in California, who is assigned to the Emergency Department of a Base Hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the authority.

H. Call – A response by prehospital care personnel to a request for emergency medical services.

I. EMS Quality Improvement Program - Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.

J. REMSA –The Riverside County Emergency Medical Services Agency, which serves as the local EMS Agency. REMSA and County shall be used interchangeably for the purposes of this agreement.

K. Emergency Medical Services (EMS) – The services utilized in responding to a medical emergency.

L. EMS System – The specially organized arrangement which provides for the personnel, facilities, and equipment for the effective and coordinated delivery of EMS services within a County.

M. Local EMS Agency – The agency having primary statutory and regulatory responsibility for administration of emergency medical services in a county and/or region.

N. Mobile Intensive Care Nurse (MICN) – A registered nurse who is employed by the Base Hospital and who has received training and is authorized by the REMSA Medical Director to issue instructions to paramedics within an EMS system according to standardized procedures developed by REMSA as defined by California laws.

O. Prehospital Liaison Nurse – A registered nurse who is authorized as an MICN by the REMSA Medical Director to assist the Base Hospital Medical Director in the quality assurance, medical direction and supervision of prehospital emergency medical care personnel.

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2.1 REMSA shall be responsible for planning, implementing and evaluating the Riverside County EMS system including the designation and function of Base Hospitals in accordance with the California Health and Safety Code, Division 2.5, the California, the California Code of Regulations, Title 22 and applicable County of Riverside laws, ordinances and policies.

2.2 REMSA shall develop and implement policies, protocols and procedures that establish requirements for the eligibility, designation, operation and evaluation of Base Hospitals within the organized Riverside County EMS system.

3. Hospital's Obligations as a Base Hospital

3.1 Hospital shall meet all requirements set forth in the California Health and Safety Code, Division 2.5, the California Code of Regulations, Title 22, and policies, protocols and procedures

implemented by REMSA pursuant to these laws as they pertain to eligibility, designation and operation as a Base Hospital within the organized Riverside County EMS system.

3.2 Hospital shall provide appropriately authorized or certified personnel 24 hours per day in sufficient numbers to provide uninterrupted on-line medical direction.

3.3 Hospital agrees to accept any and all patients who are under the immediate care of prehospital emergency medical care personnel.

3.4 Hospital shall monitor protocol compliance by field personnel and report deviations from REMSA protocols to the appropriate prehospital provider agency(s) and REMSA.

3.5 Hospital shall participate in County's EMS CQI Leadership Team or other ad-hoc groups as requested by REMSA.

3.6 MICNs shall be required to attend:

A. At least two (2) skills days per year, as approved by REMSA.

B. At least two (2) Base Hospital meetings per year, as approved by REMSA.

3.7 Hospital shall provide training for Emergency Department staff as may be required by REMSA policies, procedures and protocols.

3.8 Hospital shall equip Emergency Department with any additional equipment as may be specified by REMSA as it relates to emergency preparedness.

3.9 Hospital shall participate in research studies as requested and approved by REMSA.

3.10 Hospital shall actively participate in REMSA's data system.

3.11 Hospital shall provide patient outcome data to REMSA, upon request, for individual patients transported to the Base Hospital for evaluation and treatment. Patient outcome data is to be used internally by REMSA to meet requirements for continuous quality improvement review and EMS system oversight pursuant to Federal, State and Local laws. All data and other information submitted by a Base Hospital to REMSA for the purpose of monitoring, evaluating

or reporting on the necessity, quality and level of emergency services, including data or other information shall be subjected to California Evidence Code §1157.7.

3.12 Hospital shall adhere to all Federal, State, and County regulations, policies, and protocols concerning the confidentiality of patient/medical records.

3.13 Hospital shall make every effort to accept ambulance patients and free the ambulance to be available to respond to other calls within 30 minutes of arrival at the Hospital.

3.14 Hospital shall implement processes to work cooperatively with ambulance providers and REMSA staff to return ambulances to service as soon as possible when multiple ambulances are being held in the Emergency Department (ED) for extended periods of time.

3.15 Hospital shall implement procedures for notifying the EMS Duty Officer of issues and incidents that affect or may affect the EMS system, including but not limited to:

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- B. Safety issues for patients or prehospital providers.
- C. Disruption of emergency medical care capability or ability to receive patients.
- D. Need for hospital evacuation.
- E. Disruption in communications capability with the field, Base Hospital, or the REMSA Communications Center.
- F. Excessive delay in transfer of care time leading to the holding of 9-1-1 ambulances.

3.16 Hospital shall provide the insurance/billing information of patients transported to the hospital to the EMS transport service.

3.17 Hospital shall participate in at all HAvBED or other polls as requested by REMSA.

3.18 Hospital shall agree to maintain and provide upon request to REMSA within 60 days after the end of the preceding month agreed upon data elements for program monitoring and evaluation of the EMS system. Such data may include, but not be limited to:

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- B. Stroke data
- C. Airship utilization
- D. Volume indicators, such as the total number of Base Hospital contacts, multi-casualty incident (MCI) calls managed by the Base Hospital, or specialty center designation calls (e.g., trauma, STEMI, Stroke) managed by the Base Hospital.
- E. Core Measures, as required by the State or REMSA.
- F. Other data as requested, including copies of Base Hospital or STEMI reports pertaining to specified incidents.

4. Hospital Reimbursement

4.1 Hospital shall not bill or otherwise charge patients for supplies or services provided to patients by prehospital personnel at the scene of an emergency, during transport to Hospital, or other emergency facility, and before arrival at Hospital. However, Hospital may charge the prehospital provider for supplies used at the scene and during transport to Hospital's facility if replaced by Hospital. County shall not be liable for any of Hospital's fees or charges whatsoever.

5. Term/Termination.

5.1 The Term of Agreement shall begin on the date this Agreement is executed and shall continue until June 30, 2018. This Agreement may be terminated by either party without cause upon ninety (90) days written notice to the other.

5.2 County may terminate this agreement with ninety (90) days written notice for uncorrected failures by the Hospital to meet the obligations contained within this agreement.

6. Independent Contractor Status

6.1 Each party shall be solely responsible for its own employees. Each party shall pay all wages, salaries, overtime, benefits and other amounts due to their own personnel pursuant to applicable law and in connection with any and all services under this Agreement. Each party shall be responsible for all reports and obligations respecting their own personnel, including but not limited to, social security taxes, income tax withholding, unemployment insurance, and workers' compensation insurance. Employees or agents of one party shall not be deemed employees of the other for any purpose. Each party shall defend, indemnify and hold harmless the other party from and against any and all expenses or liabilities of any kind arising from or incident to any claim by any employee of the indemnifying party or any governmental agency relating to wages, salaries, overtime, benefits or other obligations of the indemnifying party to any employee thereof.

7. Notices

7.1 All notices permitted or required under this Agreement shall be given to the respective parties at the following addresses, or at such other addresses as the respective parties may provide in writing for this purpose:

Hospital: Eisenhower Medical Center
 Attn: Aubry Serfling, CEO
 39000 Bob Hope Drive
 Rancho Mirage, CA 92270
aserfling@emc.org
 Phone: (760) 773-1345

County: Riverside County EMS Agency
 Attn: Bruce Barton, EMS Director
 P.O. Box 7600
 Riverside, California 92513
BBarton@rivcocha.org
 Phone: (951) 358-5029

7.2 Such notices may be provided by personal delivery, by first class mail, by express delivery or by facsimile transmission. Notice shall be deemed made as follows:

- A. When personally delivered.
- B. When mailed, seventy-two (72) hours after deposit in the U.S. Mail, first class postage prepaid.
- C. When sent by express delivery, upon delivery as documented by the delivery service.
- D. When sent via facsimile transmission, upon actual delivery as documented by any verifiable facsimile transmission record. Facsimile transmission shall be followed by first class delivery along with a copy of the facsimile transmission record. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

8. Cooperation and Further Acts

8.1 The parties shall fully cooperate with one another, and shall take any additional acts or sign any additional documents as may be necessary, appropriate or convenient to attain the purposes of this Agreement.

9. Non-Discrimination

9.1 Hospital shall not discriminate in the provisions of services, allocation of benefits, accommodation of facilities, or employment of personnel, on the basis of ethnic group identification, race, color, creed, ancestry, religion, national origin, sexual preference, sex, age (over 40), marital status, medical condition, or physical or mental handicap, and shall comply with all requirements of the law regarding non-discrimination and affirmative action including those laws pertaining to the prohibition against qualified handicapped persons in all programs or activities.

9.2 For the purpose of this Agreement, distinctions on grounds of race, religion, color, sex, national origin, age or physical or mental handicap include, but not limited to, the following:

A. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or in a different manner or at a different time from that provided to other eligible persons under this Agreement.

B. Subjecting an eligible person to segregation or separate treatment in any manner related to his/her receipt of any service, except when necessary for infection control.

C. Restricting the ineligible person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving a similar service or benefit.

D. Treating an ineligible person differently from others in determining whether he/she satisfies an eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar services or benefit.

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

10. Insurance

10.1 Without limiting or diminishing the Hospital's obligation to indemnify or hold the County harmless, Hospital shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverages during the term of this Agreement:

A. Workers' Compensation: If Hospital has employees as defined by the State of California, Hospital shall maintain 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 one million (\$1,000,000) per person per accident. Policy shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

B. Commercial General Liability: Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, completed operations, personal and advertising injury covering claims which may arise from or out of Hospital's performance of its obligations hereunder. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents or representatives as an Additional Insured. Policy's limit of liability shall not be less than one million dollars (\$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 Hospital's vehicles or mobile equipment are used in the performance of the obligations under this Agreement, Hospital shall maintain liability insurance for all owned non-owned or hired vehicles in an amount not less than one million dollars (\$1,000,000) per occurrence combined single limit. If such insurance contains a general aggregate limit it shall apply separately to this agreement of be no less than two (2) times the occurrence limit. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents, or representatives as an additional insured.

D. Professional Liability Insurance: Professional Liability Insurance (Error & Omissions), providing coverage for performance of work included within the Agreement, with a limit of liability of not less than two million dollars (\$2,000,000) per occurrence and four million dollars (\$4,000,000) annual aggregate. If Consultant'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. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his/her sole expense either 1) an

Extended Reporting Endorsement (also known as Tail Coverage); or 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance the Consultant has maintained continuous coverage with the same or original insurer. Coverage provided under items: 1), 2), or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

E. General Insurance Provisions:

(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 an 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 Hospital shall cause their insurance carrier(s) to furnish the County of Riverside with a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein; or 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) shall provide no less than thirty (30) days written notice be given to the County of Riverside prior to any material modification or cancellation of such insurance. In the event of a material modification or cancellation of 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) and the insurance required herein is in full force and effect. Individual(s) authorized by the insurance

carrier to do so, on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Hospital shall furnish the County of Riverside an original Certificate(s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section within 30 days of signing this Agreement.

(3) It is understood and agreed by the parties hereto and the Hospital's insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

(4) Hospital may meet the above insurance obligation through a program of self-insurance, or by participation in a Joint Powers Insurance Authority.

(5) Failure on the part of the Hospital to produce or maintain required insurance or the self-insurance program shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

11. Attorney's Fees

11.1 If any party commences an action against another party, either legal, administrative or otherwise, arising out of or in connection with this Agreement, the prevailing party in such litigation shall be entitled to have and recover from the losing party reasonable attorney's fees and all other costs of such action.

12. Indemnification

12.1 Hospital shall indemnify and hold County harmless from any liability arising out of the services provided by HOSPITAL, its officers, agents, employees or subcontractors, for property damage, bodily injury, or death or any other element of damage of any kind or nature resulting from acts, failures to act, omissions, errors, negligence, including willful acts or

intentional acts of Hospital, its officers, agents, employees or subcontractors hereunder, and Hospital shall defend, at its sole expense, including but not limited to attorney fees, County, Special Districts, their respective Directors, Officers, Board of Supervisors, employees, agents, and subcontractors in any legal claim or action based upon such alleged acts or omissions.

13. Entire Agreement; Amendments

13.1 This Agreement contains the entire Agreement of the parties with respect to the subject matter hereof, and supersedes all prior negotiations, understandings or agreements. This Agreement may only be modified by a writing signed by both parties.

14. Governing Law

14.1 This Agreement shall be governed by the laws of the State of California. Venue shall be in Riverside County.

15. Successors and Assigns

15.1 This Agreement shall be binding on the successors and assigns of the parties.

16. Assignment or Transfer

16.1 No party shall assign, hypothecate, subcontract or transfer, either directly or by operation of law, this Agreement or any interest herein without the prior written consent of the other party. Any attempt to do so shall be null and void, and any assignees, hypothecates or transferees shall acquire no right or interest by reason of such attempted assignment, hypothecation or transfer.

17. Construction, Reference and Captions

17.1 Since the parties or their agents have participated fully in the preparation of this Agreement, the language of this Agreement shall be construed simply, according to its fair meaning, and not strictly for or against any party. Any term referencing time, days or period for performance shall be deemed calendar days and not work days. All references to any party shall

include all officials, officers, employees and agents of that party, except as otherwise specified in this Agreement. The captions of the various sections are for the convenience and ease of reference only and do not define, limit, augment, or describe the scope, content, or intent of this Agreement.

18. Waiver

18.1 No waiver of any default shall constitute a waiver of any other default or breach, whether of the same or of other covenant or condition. No waiver, benefit, privilege, or service voluntarily given or performed by a party shall give any other party any contractual rights by custom, estoppel, or otherwise.

19. No Third Party Beneficiaries

19.1 There are no third party beneficiaries of any right or obligation assumed by the parties.

20. Invalidity and Severability

20.1 If any portion of this Agreement is declared invalid, illegal, or otherwise unenforceable by a court of competent jurisdiction, the remaining provisions shall continue in full force and effect. In addition, if any portion of this Agreement is declared to be invalid, illegal or otherwise unenforceable by a court of competent jurisdiction, or is otherwise deemed to be such by legal counsel for the parties to this Agreement, the parties shall use their reasonable best efforts to amend this Agreement to remove the inappropriate provision(s); provided, however, that if the amendment cannot be made in a manner which preserves all essential parts of the consideration for any party, such party may terminate this Agreement as soon as is reasonably practicable or as required by law.

21. Authority to Execute Agreement

21.1 Each party warrants that it has all requisite power and authority to conduct its business and to execute, deliver, and perform the Agreement. Each party also warrants that the individuals who have signed this Agreement have the legal power to make this Agreement and bind each respective party hereto.

22. Counterparts

22.1 This Agreement may be signed in one or more counterparts, each of which shall constitute an original.

23. HIPAA Compliance

23.1 The Parties agree to take reasonable steps to maintain the confidentiality of all health care files and client data, and shall use appropriate safeguards to prevent inappropriate use of disclosure of individually identifiable patient information except as permitted by this contract or as required by law. Each Party shall immediately report to the other any impermissible use of disclosure that occurs as to such files and data. Each Party agrees to destroy, in a secure manner, or return to the other all patient health information shared upon termination of this Agreement as determined by the other. Breach of this provision may serve as ground for termination of the Agreement.

23.2 The Parties agree that in the event that either subcontracts their duties and/or obligations created by this Agreement, said subcontractors shall be required to comply with Section 23.1 above.

24. State/Federal Participation.

24.1 Each Party warrants that neither it nor its employees are listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in any state or federal health care program(s).

COUNTY OF RIVERSIDE
DEPARTMENT OF PUBLIC HEALTH

FOR COUNTY USE ONLY



COUNTY DEPT/DIVISION DOPH/EMS		CONTRACT NO. 15-126	RFP NO. ----
FUND 10000	DEPARTMENT ID 4200101700	PROGRAM:	CLASS/LOCATION 6715
CONTRACT AMOUNT \$-0-		PERIOD OF PERFORMANCE July 1, 2015 thru June 30, 2018	
COUNTY CONTACT: Bruce Barton (951) 358-5029			
CONTRACTOR REPRESENTATIVE: Andrew Billings, PLN Email: A.Billings@tenethealth.com			
PROGRAM NAME: Base Hospital			

This agreement is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California, hereinafter referred to as "COUNTY", and **Tenet Healthcare Corp., dba John F. Kennedy Memorial Hospital** hereinafter referred to as "HOSPITAL".

WITNESSETH:

WHEREAS, Health and Safety Code Section 1798.100 authorizes the local Emergency Medical Services (EMS) Agency, with the approval of its medical director, to designate and contract with hospitals or other entities approved by the medical director of the Agency to provide medical direction of pre-hospital emergency personnel, within its area of jurisdiction; and

WHEREAS, the State of California Code of Regulations, Title 22, Section 100169 of Division 9, requires local EMS agencies to have written agreements with base hospitals indicating requirements for program participation as specified by law and by the agency's policies and procedures; and

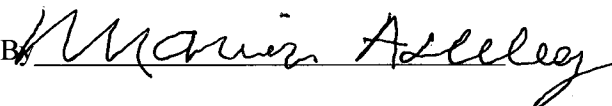
WHEREAS, the Emergency Medical Services Plan has been approved by the County of Riverside, Board of Supervisors on October 4, 1994.

NOW THEREFORE in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 17.

HOSPITAL

COUNTY

By 


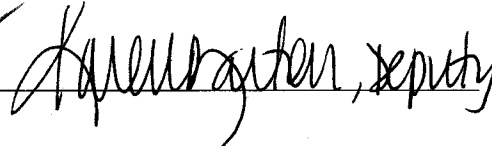
By 

Gary L. Honts
Print Name

Marion Ashley, Chairman, Board of Supervisors
Print Name

Date 8/24/15

Date NOV 03 2015

FORM APPROVED COUNTY COUNSEL
BY: 
NEAL R. KIPNIS DATE 11/3/15 BY: , deputy

ATTEST: Kecia Harper-Ihem, Clerk

Base Hospital Agreement

Between the County of Riverside and Tenet Healthcare Corp., dba John F. Kennedy

Memorial Hospital

1. Definitions

1.1 As used in this Agreement, the following words and terms shall have the meanings described below:

A. Advanced Life Support (ALS) - Special services designed to provide definitive prehospital emergency medical care including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the supervision of a Base Hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by emergency or other medical staff of that Hospital.

B. ALS Provider – Emergency Medical Technician (EMT)-Paramedic prehospital personnel licensed by the State of California and accredited by the Riverside County EMS Agency (REMSA) to provide ALS services within the County as an authorized part of the regional EMS system, and affiliated with a REMSA approved ALS Service Provider.

C. Limited Advanced Life Support (LALS) Service Provider – A Service Provider approved by REMSA or State statute that utilizes Advanced EMT and/or EMT-II personnel.

D. Advanced EMT, or EMT II – A California certified EMT with additional training in limited advanced life support according to the standards prescribed by Title 22, Division 9, Chapter 3 of the California Code of Regulations, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to the aforementioned section of Title 22.

E. ALS Service Provider Agency – a public or private organization that has been approved by REMSA to provide ALS services within County as an authorized part of the regional EMS system.

F. Base Hospital – One of a limited number of hospitals which, upon designation by REMSA and upon the completion of an agreement with REMSA is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the REMSA.

G. Base Hospital Physician – A physician and surgeon who is currently licensed in California, who is assigned to the Emergency Department of a Base Hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the authority.

H. Call – A response by prehospital care personnel to a request for emergency medical services.

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O. Prehospital Liaison Nurse – A registered nurse who is authorized as an MICN by the REMSA Medical Director to assist the Base Hospital Medical Director in the quality assurance, medical direction and supervision of prehospital emergency medical care personnel.

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- C. Disruption of emergency medical care capability or ability to receive patients.
- D. Need for hospital evacuation.
- E. Disruption in communications capability with the field, Base Hospital, or the REMSA Communications Center.
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A. ST Segment Elevation Myocardial Infarction (STEMI) data

B. Stroke data

C. Airship utilization

D. Volume indicators, such as the total number of Base Hospital contacts, multi-casualty incident (MCI) calls managed by the Base Hospital, or specialty center designation calls (e.g., trauma, STEMI, Stroke) managed by the Base Hospital.

E. Core Measures, as required by the State or REMSA.

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6. Independent Contractor Status

6.1 Each party shall be solely responsible for its own employees. Each party shall pay all wages, salaries, overtime, benefits and other amounts due to their own personnel pursuant to applicable law and in connection with any and all services under this Agreement. Each party shall be responsible for all reports and obligations respecting their own personnel, including but not limited to, social security taxes, income tax withholding, unemployment insurance, and workers' compensation insurance. Employees or agents of one party shall not be deemed employees of the other for any purpose. Each party shall defend, indemnify and hold harmless the other party from and against any and all expenses or liabilities of any kind arising from or incident to any claim by any employee of the indemnifying party or any governmental agency relating to wages, salaries, overtime, benefits or other obligations of the indemnifying party to any employee thereof.

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7.1 All notices permitted or required under this Agreement shall be given to the respective parties at the following addresses, or at such other addresses as the respective parties may provide in writing for this purpose:

Hospital: Tenet Healthcare Corp., dba
John F. Kennedy Memorial Hospital
Attn: Gary Honts, CEO
47111 Monroe Street
Indio, CA 92201
A.Billings@tenethealth.com
Phone: (760) 347-6191

County: Riverside County EMS Agency
Attn: Bruce Barton, EMS Director
P.O. Box 7600
Riverside, California 92513
BBarton@rivcocha.org
Phone: (951) 358-5029

7.2 Such notices may be provided by personal delivery, by first class mail, by express delivery or by facsimile transmission. Notice shall be deemed made as follows:

A. When personally delivered.

B. When mailed, seventy-two (72) hours after deposit in the U.S. Mail, first class postage prepaid.

C. When sent by express delivery, upon delivery as documented by the delivery service.

D. When sent via facsimile transmission, upon actual delivery as documented by any verifiable facsimile transmission record. Facsimile transmission shall be followed by first class delivery along with a copy of the facsimile transmission record. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

8. Cooperation and Further Acts

8.1 The parties shall fully cooperate with one another, and shall take any additional acts or sign any additional documents as may be necessary, appropriate or convenient to attain the purposes of this Agreement.

9. Non-Discrimination

9.1 Hospital shall not discriminate in the provisions of services, allocation of benefits, accommodation of facilities, or employment of personnel, on the basis of ethnic group identification, race, color, creed, ancestry, religion, national origin, sexual preference, sex, age (over 40), marital status, medical condition, or physical or mental handicap, and shall comply with all requirements of the law regarding non-discrimination and affirmative action including those laws pertaining to the prohibition against qualified handicapped persons in all programs or activities.

9.2 For the purpose of this Agreement, distinctions on grounds of race, religion, color, sex, national origin, age or physical or mental handicap include, but not limited to, the following:

A. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or in a different manner or at a different time from that provided to other eligible persons under this Agreement.

B. Subjecting an eligible person to segregation or separate treatment in any manner related to his/her receipt of any service, except when necessary for infection control.

C. Restricting the ineligible person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving a similar service or benefit.

D. Treating an ineligible person differently from others in determining whether he/she satisfies an eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar services or benefit.

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

10. Insurance

10.1 Without limiting or diminishing the Hospital's obligation to indemnify or hold the County harmless, Hospital shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverages during the term of this Agreement:

A. Workers' Compensation: If Hospital has employees as defined by the State of California, Hospital shall maintain 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 one million (\$1,000,000) per person per accident. Policy shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

B. Commercial General Liability: Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, completed operations, personal and advertising injury covering claims which may arise from or out of Hospital's performance of its obligations hereunder. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents or representatives as an Additional Insured. Policy's limit of liability shall not be less than one million dollars (\$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 Hospital's vehicles or mobile equipment are used in the performance of the obligations under this Agreement, Hospital shall maintain liability insurance for all owned non-owned or hired vehicles in an amount not less than one million dollars (\$1,000,000) per occurrence combined single limit. If such insurance contains a general aggregate limit it shall apply separately to this agreement of be no less than two (2) times the occurrence limit. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents, or representatives as an additional insured.

D. Professional Liability Insurance: Professional Liability Insurance (Error & Omissions), providing coverage for performance of work included within the Agreement, with a limit of liability of not less than two million dollars (\$2,000,000) per occurrence and four million dollars (\$4,000,000) annual aggregate. If Consultant'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. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his/her sole expense either 1) an

Extended Reporting Endorsement (also known as Tail Coverage): or 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance the Consultant has maintained continuous coverage with the same or original insurer. Coverage provided under items: 1), 2), or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

E. General Insurance Provisions:

(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 an 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 Hospital shall cause their insurance carrier(s) to furnish the County of Riverside with a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein; or 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) shall provide no less than thirty (30) days written notice be given to the County of Riverside prior to any material modification or cancellation of such insurance. In the event of a material modification or cancellation of 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) and the insurance required herein is in full force and effect. Individual(s) authorized by the insurance

carrier to do so, on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Hospital shall furnish the County of Riverside an original Certificate(s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section within 30 days of signing this Agreement.

(3) It is understood and agreed by the parties hereto and the Hospital's insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

(4) Hospital may meet the above insurance obligation through a program of self-insurance, or by participation in a Joint Powers Insurance Authority.

(5) Failure on the part of the Hospital to produce or maintain required insurance or the self-insurance program shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

11. Attorney's Fees

11.1 If any party commences an action against another party, either legal, administrative or otherwise, arising out of or in connection with this Agreement, the prevailing party in such litigation shall be entitled to have and recover from the losing party reasonable attorney's fees and all other costs of such action.

12. Indemnification

12.1 Hospital shall indemnify and hold County harmless from any liability arising out of the services provided by HOSPITAL, its officers, agents, employees or subcontractors, for property damage, bodily injury, or death or any other element of damage of any kind or nature resulting from acts, failures to act, omissions, errors, negligence, including willful acts or

intentional acts of Hospital, its officers, agents, employees or subcontractors hereunder, and Hospital shall defend, at its sole expense, including but not limited to attorney fees, County, Special Districts, their respective Directors, Officers, Board of Supervisors, employees, agents, and subcontractors in any legal claim or action based upon such alleged acts or omissions.

13. Entire Agreement; Amendments

13.1 This Agreement contains the entire Agreement of the parties with respect to the subject matter hereof, and supersedes all prior negotiations, understandings or agreements. This Agreement may only be modified by a writing signed by both parties.

14. Governing Law

14.1 This Agreement shall be governed by the laws of the State of California. Venue shall be in Riverside County.

15. Successors and Assigns

15.1 This Agreement shall be binding on the successors and assigns of the parties.

16. Assignment or Transfer

16.1 No party shall assign, hypothecate, subcontract or transfer, either directly or by operation of law, this Agreement or any interest herein without the prior written consent of the other party. Any attempt to do so shall be null and void, and any assignees, hypothecates or transferees shall acquire no right or interest by reason of such attempted assignment, hypothecation or transfer.

17. Construction, Reference and Captions

17.1 Since the parties or their agents have participated fully in the preparation of this Agreement, the language of this Agreement shall be construed simply, according to its fair meaning, and not strictly for or against any party. Any term referencing time, days or period for performance shall be deemed calendar days and not work days. All references to any party shall

include all officials, officers, employees and agents of that party, except as otherwise specified in this Agreement. The captions of the various sections are for the convenience and ease of reference only and do not define, limit, augment, or describe the scope, content, or intent of this Agreement.

18. Waiver

18.1 No waiver of any default shall constitute a waiver of any other default or breach, whether of the same or other covenant or condition. No waiver, benefit, privilege, or service voluntarily given or performed by a party shall give any other party any contractual rights by custom, estoppel, or otherwise.

19. No Third Party Beneficiaries

19.1 There are no third party beneficiaries of any right or obligation assumed by the parties.

20. Invalidity and Severability

20.1 If any portion of this Agreement is declared invalid, illegal, or otherwise unenforceable by a court of competent jurisdiction, the remaining provisions shall continue in full force and effect. In addition, if any portion of this Agreement is declared to be invalid, illegal or otherwise unenforceable by a court of competent jurisdiction, or is otherwise deemed to be such by legal counsel for the parties to this Agreement, the parties shall use their reasonable best efforts to amend this Agreement to remove the inappropriate provision(s); provided, however, that if the amendment cannot be made in a manner which preserves all essential parts of the consideration for any party, such party may terminate this Agreement as soon as is reasonably practicable or as required by law.

21. Authority to Execute Agreement

21.1 Each party warrants that it has all requisite power and authority to conduct its business and to execute, deliver, and perform the Agreement. Each party also warrants that the individuals who have signed this Agreement have the legal power to make this Agreement and bind each respective party hereto.

22. Counterparts

22.1 This Agreement may be signed in one or more counterparts, each of which shall constitute an original.

23. HIPAA Compliance

23.1 The Parties agree to take reasonable steps to maintain the confidentiality of all health care files and client data, and shall use appropriate safeguards to prevent inappropriate use of disclosure of individually identifiable patient information except as permitted by this contract or as required by law. Each Party shall immediately report to the other any impermissible use of disclosure that occurs as to such files and data. Each Party agrees to destroy, in a secure manner, or return to the other all patient health information shared upon termination of this Agreement as determined by the other. Breach of this provision may serve as ground for termination of the Agreement.

23.2 The Parties agree that in the event that either subcontracts their duties and/or obligations created by this Agreement, said subcontractors shall be required to comply with Section 23.1 above.

24. State/Federal Participation.

24.1 Each Party warrants that neither it nor its employees are listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in any state of federal health care program(s).

COUNTY OF RIVERSIDE
 DEPARTMENT OF PUBLIC HEALTH

FOR COUNTY USE ONLY



COUNTY DEPT/DIVISION DOPH/EMS		CONTRACT NO. 15-125	RFP NO. ----
FUND 10000	DEPARTMENT ID 4200101700	PROGRAM:	CLASS/LOCATION 6715
CONTRACT AMOUNT \$-0-		PERIOD OF PERFORMANCE July 1, 2015 thru June 30, 2018	
COUNTY CONTACT: Bruce Barton (951) 358-5029			
CONTRACTOR REPRESENTATIVE: Jessica Voigt, PLN email::Jessica.voigt@tenethealth.com			
PROGRAM NAME: Base Hospital			

This agreement is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California, hereinafter referred to as "COUNTY", and **Desert Regional Medical Center, Inc.** hereinafter referred to as "HOSPITAL".

WITNESSETH:

WHEREAS, Health and Safety Code Section 1798.100 authorizes the local Emergency Medical Services (EMS) Agency, with the approval of its medical director, to designate and contract with hospitals or other entities approved by the medical director of the Agency to provide medical direction of pre-hospital emergency personnel, within its area of jurisdiction; and

WHEREAS, the State of California Code of Regulations, Title 22, Section 100169 of Division 9, requires local EMS agencies to have written agreements with base hospitals indicating requirements for program participation as specified by law and by the agency's policies and procedures; and

WHEREAS, the Emergency Medical Services Plan has been approved by the County of Riverside, Board of Supervisors on October 4, 1994.

NOW THEREFORE in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 16.

By Carolyn Caldwell
HOSPITAL

By Marion Ashley
COUNTY

Carolyn Caldwell, FACHE, President and CEO
 Print Name

Marion Ashley, Chairman, Board of Supervisors
 Print Name

Date 8/31/15

Date NOV 03 2015

ATTEST: Kecia Harper-Ihem, Clerk

FORM APPROVED COUNTY COUNSEL
 BY: Neal R. Kipnis DATE: 11/3/15 By: Bruce Barton, Deputy

Base Hospital Agreement
Between the County of Riverside and
Desert Regional Medical Center, Inc.

1. Definitions

1.1 As used in this Agreement, the following words and terms shall have the meanings described below:

A. Advanced Life Support (ALS) - Special services designed to provide definitive prehospital emergency medical care including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the supervision of a Base Hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by emergency or other medical staff of that Hospital.

B. ALS Provider – Emergency Medical Technician (EMT)-Paramedic prehospital personnel licensed by the State of California and accredited by the Riverside County EMS Agency (REMSA) to provide ALS services within the County as an authorized part of the regional EMS system, and affiliated with a REMSA approved ALS Service Provider.

C. Limited Advanced Life Support (LALS) Service Provider – A Service Provider approved by REMSA or State statute that utilizes Advanced EMT and/or EMT-II personnel.

D. Advanced EMT, or EMT II – A California certified EMT with additional training in limited advanced life support according to the standards prescribed by Title 22, Division 9, Chapter 3 of the California Code of Regulations, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to the aforementioned section of Title 22.

E. ALS Service Provider Agency – a public or private organization that has been approved by REMSA to provide ALS services within County as an authorized part of the regional EMS system.

F. Base Hospital – One of a limited number of hospitals which, upon designation by REMSA and upon the completion of an agreement with REMSA is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the REMSA.

G. Base Hospital Physician – A physician and surgeon who is currently licensed in California, who is assigned to the Emergency Department of a Base Hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the authority.

H. Call – A response by prehospital care personnel to a request for emergency medical services.

I. EMS Quality Improvement Program - Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.

J. REMSA –The Riverside County Emergency Medical Services Agency, which serves as the local EMS Agency. REMSA and County shall be used interchangeably for the purposes of this agreement.

K. Emergency Medical Services (EMS) – The services utilized in responding to a medical emergency.

L. EMS System – The specially organized arrangement which provides for the personnel, facilities, and equipment for the effective and coordinated delivery of EMS services within a County.

M. Local EMS Agency – The agency having primary statutory and regulatory responsibility for administration of emergency medical services in a county and/or region.

N. Mobile Intensive Care Nurse (MICN) – A registered nurse who is employed by the Base Hospital and who has received training and is authorized by the REMSA Medical Director to issue instructions to paramedics within an EMS system according to standardized procedures developed by REMSA as defined by California laws.

O. Prehospital Liaison Nurse – A registered nurse who is authorized as an MICN by the REMSA Medical Director to assist the Base Hospital Medical Director in the quality assurance, medical direction and supervision of prehospital emergency medical care personnel.

2. REMSA's Obligations

2.1 REMSA shall be responsible for planning, implementing and evaluating the Riverside County EMS system including the designation and function of Base Hospitals in accordance with the California Health and Safety Code, Division 2.5, the California, the California Code of Regulations, Title 22 and applicable County of Riverside laws, ordinances and policies.

2.2 REMSA shall develop and implement policies, protocols and procedures that establish requirements for the eligibility, designation, operation and evaluation of Base Hospitals within the organized Riverside County EMS system.

3. Hospital's Obligations as a Base Hospital

3.1 Hospital shall meet all requirements set forth in the California Health and Safety Code, Division 2.5, the California Code of Regulations, Title 22, and policies, protocols and procedures

implemented by REMSA pursuant to these laws as they pertain to eligibility, designation and operation as a Base Hospital within the organized Riverside County EMS system.

3.2 Hospital shall provide appropriately authorized or certified personnel 24 hours per day in sufficient numbers to provide uninterrupted on-line medical direction.

3.3 Hospital agrees to accept any and all patients who are under the immediate care of prehospital emergency medical care personnel.

3.4 Hospital shall monitor protocol compliance by field personnel and report deviations from REMSA protocols to the appropriate prehospital provider agency(s) and REMSA.

3.5 Hospital shall participate in County's EMS CQI Leadership Team or other ad-hoc groups as requested by REMSA.

3.6 MICNs shall be required to attend:

A. At least two (2) skills days per year, as approved by REMSA.

B. At least two (2) Base Hospital meetings per year, as approved by REMSA.

3.7 Hospital shall provide training for Emergency Department staff as may be required by REMSA policies, procedures and protocols.

3.8 Hospital shall equip Emergency Department with any additional equipment as may be specified by REMSA as it relates to emergency preparedness.

3.9 Hospital shall participate in research studies as requested and approved by REMSA.

3.10 Hospital shall actively participate in REMSA's data system.

3.11 Hospital shall provide patient outcome data to REMSA, upon request, for individual patients transported to the Base Hospital for evaluation and treatment. Patient outcome data is to be used internally by REMSA to meet requirements for continuous quality improvement review and EMS system oversight pursuant to Federal, State and Local laws. All data and other information submitted by a Base Hospital to REMSA for the purpose of monitoring, evaluating

or reporting on the necessity, quality and level of emergency services, including data or other information shall be subjected to California Evidence Code §1157.7.

3.12 Hospital shall adhere to all Federal, State, and County regulations, policies, and protocols concerning the confidentiality of patient/medical records.

3.13 Hospital shall make every effort to accept ambulance patients and free the ambulance to be available to respond to other calls within 30 minutes of arrival at the Hospital.

3.14 Hospital shall implement processes to work cooperatively with ambulance providers and REMSA staff to return ambulances to service as soon as possible when multiple ambulances are being held in the Emergency Department (ED) for extended periods of time.

3.15 Hospital shall implement procedures for notifying the EMS Duty Officer of issues and incidents that affect or may affect the EMS system, including but not limited to:

- A. Activation of internal disaster procedures.
- B. Safety issues for patients or prehospital providers.
- C. Disruption of emergency medical care capability or ability to receive patients.
- D. Need for hospital evacuation.
- E. Disruption in communications capability with the field, Base Hospital, or the REMSA Communications Center.
- F. Excessive delay in transfer of care time leading to the holding of 9-1-1 ambulances.

3.16 Hospital shall provide the insurance/billing information of patients transported to the hospital to the EMS transport service.

3.17 Hospital shall participate in all HAVBED or other polls as requested by REMSA.

3.18 Hospital shall agree to maintain and provide upon request to REMSA within 60 days after the end of the preceding month agreed upon data elements for program monitoring and evaluation of the EMS system. Such data may include, but not be limited to:

- A. ST Segment Elevation Myocardial Infarction (STEMI) data
- B. Stroke data
- C. Airship utilization
- D. Volume indicators, such as the total number of Base Hospital contacts, multi-casualty incident (MCI) calls managed by the Base Hospital, or specialty center designation calls (e.g., trauma, STEMI, Stroke) managed by the Base Hospital.
- E. Core Measures, as required by the State or REMSA.
- F. Other data as requested, including copies of Base Hospital or STEMI reports pertaining to specified incidents.

4. Hospital Reimbursement

4.1 Hospital shall not bill or otherwise charge patients for supplies or services provided to patients by prehospital personnel at the scene of an emergency, during transport to Hospital, or other emergency facility, and before arrival at Hospital. However, Hospital may charge the prehospital provider for supplies used at the scene and during transport to Hospital's facility if replaced by Hospital. County shall not be liable for any of Hospital's fees or charges whatsoever.

5. Term/Termination.

5.1 The Term of Agreement shall begin on the date this Agreement is executed and shall continue until June 30, 2018. This Agreement may be terminated by either party without cause upon ninety (90) days written notice to the other.

5.2 County may terminate this agreement with ninety (90) days written notice for uncorrected failures by the Hospital to meet the obligations contained within this agreement.

6. Independent Contractor Status

6.1 Each party shall be solely responsible for its own employees. Each party shall pay all wages, salaries, overtime, benefits and other amounts due to their own personnel pursuant to applicable law and in connection with any and all services under this Agreement. Each party shall be responsible for all reports and obligations respecting their own personnel, including but not limited to, social security taxes, income tax withholding, unemployment insurance, and workers' compensation insurance. Employees or agents of one party shall not be deemed employees of the other for any purpose. Each party shall defend, indemnify and hold harmless the other party from and against any and all expenses or liabilities of any kind arising from or incident to any claim by any employee of the indemnifying party or any governmental agency relating to wages, salaries, overtime, benefits or other obligations of the indemnifying party to any employee thereof.

7. Notices

7.1 All notices permitted or required under this Agreement shall be given to the respective parties at the following addresses, or at such other addresses as the respective parties may provide in writing for this purpose:

Hospital: Tenet Healthcare Corp., dba
Desert Regional Medical Center
Attn: Carolyn Caldwell, CEO/ President
1150 N. Indian Canyon Drive
Palm Springs, CA 92262
Jessica.voigt@tenethealth.com
Phone: (760) 200-8859

County: Riverside County EMS Agency
Attn: Bruce Barton, EMS Director
P.O. Box 7600
Riverside, California 92513
BBarton@rivcocha.org
Phone: (951) 358-5029

7.2 Such notices may be provided by personal delivery, by first class mail, by express delivery or by facsimile transmission. Notice shall be deemed made as follows:

- A. When personally delivered.
- B. When mailed, seventy-two (72) hours after deposit in the U.S. Mail, first class postage prepaid.
- C. When sent by express delivery, upon delivery as documented by the delivery service.
- D. When sent via facsimile transmission, upon actual delivery as documented by any verifiable facsimile transmission record. Facsimile transmission shall be followed by first class delivery along with a copy of the facsimile transmission record. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

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9.2 For the purpose of this Agreement, distinctions on grounds of race, religion, color, sex, national origin, age or physical or mental handicap include, but not limited to, the following:

A. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or in a different manner or at a different time from that provided to other eligible persons under this Agreement.

B. Subjecting an eligible person to segregation or separate treatment in any manner related to his/her receipt of any service, except when necessary for infection control.

C. Restricting the ineligible person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving a similar service or benefit.

D. Treating an ineligible person differently from others in determining whether he/she satisfies an eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar services or benefit.

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

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D. Professional Liability Insurance: Professional Liability Insurance (Error & Omissions), providing coverage for performance of work included within the Agreement, with a limit of liability of not less than two million dollars (\$2,000,000) per occurrence and four million dollars (\$4,000,000) annual aggregate. If Consultant'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. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his/her sole expense either 1) an

Extended Reporting Endorsement (also known as Tail Coverage); or 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance the Consultant has maintained continuous coverage with the same or original insurer. Coverage provided under items: 1), 2), or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

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carrier to do so, on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Hospital shall furnish the County of Riverside an original Certificate(s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section within 30 days of signing this Agreement.

(3) It is understood and agreed by the parties hereto and the Hospital's insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

(4) Hospital may meet the above insurance obligation through a program of self-insurance, or by participation in a Joint Powers Insurance Authority.

(5) Failure on the part of the Hospital to produce or maintain required insurance or the self-insurance program shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

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12. Indemnification

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intentional acts of Hospital, its officers, agents, employees or subcontractors hereunder, and Hospital shall defend, at its sole expense, including but not limited to attorney fees, County, Special Districts, their respective Directors, Officers, Board of Supervisors, employees, agents, and subcontractors in any legal claim or action based upon such alleged acts or omissions.

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15.1 This Agreement shall be binding on the successors and assigns of the parties.

16. Assignment or Transfer

16.1 No party shall assign, hypothecate, subcontract or transfer, either directly or by operation of law, this Agreement or any interest herein without the prior written consent of the other party. Any attempt to do so shall be null and void, and any assignees, hypothecates or transferees shall acquire no right or interest by reason of such attempted assignment, hypothecation or transfer.

17. Construction, Reference and Captions

17.1 Since the parties or their agents have participated fully in the preparation of this Agreement, the language of this Agreement shall be construed simply, according to its fair meaning, and not strictly for or against any party. Any term referencing time, days or period for performance shall be deemed calendar days and not work days. All references to any party shall

include all officials, officers, employees and agents of that party, except as otherwise specified in this Agreement. The captions of the various sections are for the convenience and ease of reference only and do not define, limit, augment, or describe the scope, content, or intent of this Agreement.

18. Waiver

18.1 No waiver of any default shall constitute a waiver of any other default or breach, whether of the same or other covenant or condition. No waiver, benefit, privilege, or service voluntarily given or performed by a party shall give any other party any contractual rights by custom, estoppel, or otherwise.

19. No Third Party Beneficiaries

19.1 There are no third party beneficiaries of any right or obligation assumed by the parties.

20. Invalidity and Severability

20.1 If any portion of this Agreement is declared invalid, illegal, or otherwise unenforceable by a court of competent jurisdiction, the remaining provisions shall continue in full force and effect. In addition, if any portion of this Agreement is declared to be invalid, illegal or otherwise unenforceable by a court of competent jurisdiction, or is otherwise deemed to be such by legal counsel for the parties to this Agreement, the parties shall use their reasonable best efforts to amend this Agreement to remove the inappropriate provision(s); provided, however, that if the amendment cannot be made in a manner which preserves all essential parts of the consideration for any party, such party may terminate this Agreement as soon as is reasonably practicable or as required by law.

21. Authority to Execute Agreement

21.1 Each party warrants that it has all requisite power and authority to conduct its business and to execute, deliver, and perform the Agreement. Each party also warrants that the individuals who have signed this Agreement have the legal power to make this Agreement and bind each respective party hereto.

22. Counterparts

22.1 This Agreement may be signed in one or more counterparts, each of which shall constitute an original.

23. HIPAA Compliance

23.1 The Parties agree to take reasonable steps to maintain the confidentiality of all health care files and client data, and shall use appropriate safeguards to prevent inappropriate use of disclosure of individually identifiable patient information except as permitted by this contract or as required by law. Each Party shall immediately report to the other any impermissible use of disclosure that occurs as to such files and data. Each Party agrees to destroy, in a secure manner, or return to the other all patient health information shared upon termination of this Agreement as determined by the other. Breach of this provision may serve as ground for termination of the Agreement.

23.2 The Parties agree that in the event that either subcontracts their duties and/or obligations created by this Agreement, said subcontractors shall be required to comply with Section 23.1 above.

24. State/Federal Participation.

24.1 Each Party warrants that neither it nor its employees are listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in any state or federal health care program(s).

COUNTY OF RIVERSIDE
DEPARTMENT OF PUBLIC HEALTH

FOR COUNTY USE ONLY



COUNTY DEPT/DIVISION DOPH/EMS		CONTRACT NO. 15-124	RFP NO. ----
FUND 10000	DEPARTMENT ID 4200101700	PROGRAM:	CLASS/LOCATION 6715
CONTRACT AMOUNT \$-0-		PERIOD OF PERFORMANCE July 1, 2015 thru June 30, 2018	
COUNTY CONTACT: Bruce Barton (951) 358-5029			
CONTRACTOR REPRESENTATIVE: Daniel Sitar (951)-200-8859; Daniel.Sitar@uhsinc.com			
PROGRAM NAME: Base Hospital			

This agreement is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California, hereinafter referred to as "COUNTY", and **Inland Valley Medical Center** hereinafter referred to as "HOSPITAL".

WITNESSETH:

WHEREAS, Health and Safety Code Section 1798.100 authorizes the local Emergency Medical Services (EMS) Agency, with the approval of its medical director, to designate and contract with hospitals or other entities approved by the medical director of the Agency to provide medical direction of pre-hospital emergency personnel, within its area of jurisdiction; and

WHEREAS, the State of California Code of Regulations, Title 22, Section 100169 of Division 9, requires local EMS agencies to have written agreements with base hospitals indicating requirements for program participation as specified by law and by the agency's policies and procedures; and

WHEREAS, the Emergency Medical Services Plan has been approved by the County of Riverside, Board of Supervisors on October 4, 1994.

NOW THEREFORE in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 16.

HOSPITAL

COUNTY

By Bradley D. Neet

BRADLEY D. NEET, CEO
Print Name

Date 8.24.15

By Marion Ashley

Marion Ashley, Chairman, Board of Supervisors
Print Name

Date NOV 03 2015

ATTEST: Kecia Harper-Ihem, Clerk

FORM APPROVED COUNTY COUNSEL

BY: Neal R. Kipnis
NEAL R. KIPNIS

DATE

By

Kecia Harper-Ihem, Deputy

Base Hospital Agreement

Between the County of Riverside and Inland Valley Medical Center

1. Definitions

1.1 As used in this Agreement, the following words and terms shall have the meanings described below:

A. Advanced Life Support (ALS) - Special services designed to provide definitive prehospital emergency medical care including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the supervision of a Base Hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital and while in the emergency department of an acute care hospital until responsibility is assumed by emergency or other medical staff of that Hospital.

B. ALS Provider – Emergency Medical Technician (EMT)-Paramedic prehospital personnel licensed by the State of California and accredited by the Riverside County EMS Agency (REMSA) to provide ALS services within the County as an authorized part of the regional EMS system, and affiliated with a REMSA approved ALS Service Provider.

C. Limited Advanced Life Support (LALS) Service Provider – A Service Provider approved by REMSA or State statute that utilizes Advanced EMT and/or EMT-II personnel.

D. Advanced EMT, or EMT II – A California certified EMT with additional training in limited advanced life support according to the standards prescribed by Title 22, Division 9, Chapter 3 of the California Code of Regulations, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to the aforementioned section of Title 22.

E. ALS Service Provider Agency – a public or private organization that has been approved by REMSA to provide ALS services within County as an authorized part of the regional EMS system.

F. Base Hospital – One of a limited number of hospitals which, upon designation by REMSA and upon the completion of an agreement with REMSA is responsible for medical direction and supervision of the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the REMSA.

G. Base Hospital Physician – A physician and surgeon who is currently licensed in California, who is assigned to the Emergency Department of a Base Hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the authority.

H. Call – A response by prehospital care personnel to a request for emergency medical services.

I. EMS Quality Improvement Program - Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.

J. REMSA –The Riverside County Emergency Medical Services Agency, which serves as the local EMS Agency. REMSA and County shall be used interchangeably for the purposes of this agreement.

K. Emergency Medical Services (EMS) – The services utilized in responding to a medical emergency.

L. EMS System – The specially organized arrangement which provides for the personnel, facilities, and equipment for the effective and coordinated delivery of EMS services within a County.

M. Local EMS Agency – The agency having primary statutory and regulatory responsibility for administration of emergency medical services in a county and/or region.

N. Mobile Intensive Care Nurse (MICN) – A registered nurse who is employed by the Base Hospital and who has received training and is authorized by the REMSA Medical Director to issue instructions to paramedics within an EMS system according to standardized procedures developed by REMSA as defined by California laws.

O. Prehospital Liaison Nurse – A registered nurse who is authorized as an MICN by the REMSA Medical Director to assist the Base Hospital Medical Director in the quality assurance, medical direction and supervision of prehospital emergency medical care personnel.

2. REMSA's Obligations

2.1 REMSA shall be responsible for planning, implementing and evaluating the Riverside County EMS system including the designation and function of Base Hospitals in accordance with the California Health and Safety Code, Division 2.5, the California, the California Code of Regulations, Title 22 and applicable County of Riverside laws, ordinances and policies.

2.2 REMSA shall develop and implement policies, protocols and procedures that establish requirements for the eligibility, designation, operation and evaluation of Base Hospitals within the organized Riverside County EMS system.

3. Hospital's Obligations as a Base Hospital

3.1 Hospital shall meet all requirements set forth in the California Health and Safety Code, Division 2.5, the California Code of Regulations, Title 22, and policies, protocols and procedures

implemented by REMSA pursuant to these laws as they pertain to eligibility, designation and operation as a Base Hospital within the organized Riverside County EMS system.

3.2 Hospital shall provide appropriately authorized or certified personnel 24 hours per day in sufficient numbers to provide uninterrupted on-line medical direction.

3.3 Hospital agrees to accept any and all patients who are under the immediate care of prehospital emergency medical care personnel.

3.4 Hospital shall monitor protocol compliance by field personnel and report deviations from REMSA protocols to the appropriate prehospital provider agency(s) and REMSA.

3.5 Hospital shall participate in County's EMS CQI Leadership Team or other ad-hoc groups as requested by REMSA.

3.6 MICNs shall be required to attend:

A. At least two (2) skills days per year, as approved by REMSA.

B. At least two (2) Base Hospital meetings per year, as approved by REMSA.

3.7 Hospital shall provide training for Emergency Department staff as may be required by REMSA policies, procedures and protocols.

3.8 Hospital shall equip Emergency Department with any additional equipment as may be specified by REMSA as it relates to emergency preparedness.

3.9 Hospital shall participate in research studies as requested and approved by REMSA.

3.10 Hospital shall actively participate in REMSA's data system.

3.11 Hospital shall provide patient outcome data to REMSA, upon request, for individual patients transported to the Base Hospital for evaluation and treatment. Patient outcome data is to be used internally by REMSA to meet requirements for continuous quality improvement review and EMS system oversight pursuant to Federal, State and Local laws. All data and other information submitted by a Base Hospital to REMSA for the purpose of monitoring, evaluating

or reporting on the necessity, quality and level of emergency services, including data or other information shall be subjected to California Evidence Code §1157.7.

3.12 Hospital shall adhere to all Federal, State, and County regulations, policies, and protocols concerning the confidentiality of patient/medical records.

3.13 Hospital shall make every effort to accept ambulance patients and free the ambulance to be available to respond to other calls within 30 minutes of arrival at the Hospital.

3.14 Hospital shall implement processes to work cooperatively with ambulance providers and REMSA staff to return ambulances to service as soon as possible when multiple ambulances are being held in the Emergency Department (ED) for extended periods of time.

3.15 Hospital shall implement procedures for notifying the EMS Duty Officer of issues and incidents that affect or may affect the EMS system, including but not limited to:

A. Activation of internal disaster procedures.

B. Safety issues for patients or prehospital providers.

C. Disruption of emergency medical care capability or ability to receive patients.

D. Need for hospital evacuation.

E. Disruption in communications capability with the field, Base Hospital, or the REMSA Communications Center.

F. Excessive delay in transfer of care time leading to the holding of 9-1-1 ambulances.

3.16 Hospital shall provide the insurance/billing information of patients transported to the hospital to the EMS transport service.

3.17 Hospital shall participate in all HAvBED or other polls as requested by REMSA.

3.18 Hospital shall agree to maintain and provide upon request to REMSA within 60 days after the end of the preceding month agreed upon data elements for program monitoring and evaluation of the EMS system. Such data may include, but not be limited to:

A. ST Segment Elevation Myocardial Infarction (STEMI) data

B. Stroke data

C. Airship utilization

D. Volume indicators, such as the total number of Base Hospital contacts, multi-casualty incident (MCI) calls managed by the Base Hospital, or specialty center designation calls (e.g., trauma, STEMI, Stroke) managed by the Base Hospital.

E. Core Measures, as required by the State or REMSA.

F. Other data as requested, including copies of Base Hospital or STEMI reports pertaining to specified incidents.

4. Hospital Reimbursement

4.1 Hospital shall not bill or otherwise charge patients for supplies or services provided to patients by prehospital personnel at the scene of an emergency, during transport to Hospital, or other emergency facility, and before arrival at Hospital. However, Hospital may charge the prehospital provider for supplies used at the scene and during transport to Hospital's facility if replaced by Hospital. County shall not be liable for any of Hospital's fees or charges whatsoever.

5. Term/Termination.

5.1 The Term of Agreement shall begin on the date this Agreement is executed and shall continue until June 30, 2018. This Agreement may be terminated by either party without cause upon ninety (90) days written notice to the other.

5.2 County may terminate this agreement with ninety (90) days written notice for uncorrected failures by the Hospital to meet the obligations contained within this agreement.

6. Independent Contractor Status

6.1 Each party shall be solely responsible for its own employees. Each party shall pay all wages, salaries, overtime, benefits and other amounts due to their own personnel pursuant to applicable law and in connection with any and all services under this Agreement. Each party shall be responsible for all reports and obligations respecting their own personnel, including but not limited to, social security taxes, income tax withholding, unemployment insurance, and workers' compensation insurance. Employees or agents of one party shall not be deemed employees of the other for any purpose. Each party shall defend, indemnify and hold harmless the other party from and against any and all expenses or liabilities of any kind arising from or incident to any claim by any employee of the indemnifying party or any governmental agency relating to wages, salaries, overtime, benefits or other obligations of the indemnifying party to any employee thereof.

7. Notices

7.1 All notices permitted or required under this Agreement shall be given to the respective parties at the following addresses, or at such other addresses as the respective parties may provide in writing for this purpose:

Hospital: Inland Valley Medical Center
 Attn: Bradley D. Neet, CEO
 36485 Inland Valley Drive
 Wildomar, CA 92595
Daniel.Sitar@uhsinc.com
 Phone: (951) 200-8859

County: Riverside County EMS Agency
 Attn: Bruce Barton, EMS Director
 P.O. Box 7600
 Riverside, California 92513
BBarton@rivcocha.org
 Phone: (951) 358-5029

7.2 Such notices may be provided by personal delivery, by first class mail, by express delivery or by facsimile transmission. Notice shall be deemed made as follows:

A. When personally delivered.

B. When mailed, seventy-two (72) hours after deposit in the U.S. Mail, first class postage prepaid.

C. When sent by express delivery, upon delivery as documented by the delivery service.

D. When sent via facsimile transmission, upon actual delivery as documented by any verifiable facsimile transmission record. Facsimile transmission shall be followed by first class delivery along with a copy of the facsimile transmission record. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

8. Cooperation and Further Acts

8.1 The parties shall fully cooperate with one another, and shall take any additional acts or sign any additional documents as may be necessary, appropriate or convenient to attain the purposes of this Agreement.

9. Non-Discrimination

9.1 Hospital shall not discriminate in the provisions of services, allocation of benefits, accommodation of facilities, or employment of personnel, on the basis of ethnic group identification, race, color, creed, ancestry, religion, national origin, sexual preference, sex, age (over 40), marital status, medical condition, or physical or mental handicap, and shall comply with all requirements of the law regarding non-discrimination and affirmative action including those laws pertaining to the prohibition against qualified handicapped persons in all programs or activities.

9.2 For the purpose of this Agreement, distinctions on grounds of race, religion, color, sex, national origin, age or physical or mental handicap include, but not limited to, the following:

A. Denying an eligible person or providing to an eligible person any services or benefit which is different, or is provided in a different manner or in a different manner or at a different time from that provided to other eligible persons under this Agreement.

B. Subjecting an eligible person to segregation or separate treatment in any manner related to his/her receipt of any service, except when necessary for infection control.

C. Restricting the ineligible person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving a similar service or benefit.

D. Treating an ineligible person differently from others in determining whether he/she satisfies an eligibility, membership, or other requirement or condition which individuals must meet in order to be provided a similar services or benefit.

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

10. Insurance

10.1 Without limiting or diminishing the Hospital's obligation to indemnify or hold the County harmless, Hospital shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverages during the term of this Agreement:

A. Workers' Compensation: If Hospital has employees as defined by the State of California, Hospital shall maintain 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 one million (\$1,000,000) per person per accident. Policy shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

B. Commercial General Liability: Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, completed operations, personal and advertising injury covering claims which may arise from or out of Hospital's performance of its obligations hereunder. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents or representatives as an Additional Insured. Policy's limit of liability shall not be less than one million dollars (\$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 Hospital's vehicles or mobile equipment are used in the performance of the obligations under this Agreement, Hospital shall maintain liability insurance for all owned non-owned or hired vehicles in an amount not less than one million dollars (\$1,000,000) per occurrence combined single limit. If such insurance contains a general aggregate limit it shall apply separately to this agreement of be no less than two (2) times the occurrence limit. Policy shall name the County of Riverside, special districts, their respective directors, officers, Board of Supervisors, elected officials, employees, agents, or representatives as an additional insured.

D. Professional Liability Insurance: Professional Liability Insurance (Error & Omissions), providing coverage for performance of work included within the Agreement, with a limit of liability of not less than two million dollars (\$2,000,000) per occurrence and four million dollars (\$4,000,000) annual aggregate. If Consultant'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. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his/her sole expense either 1) an

Extended Reporting Endorsement (also known as Tail Coverage): or 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance the Consultant has maintained continuous coverage with the same or original insurer. Coverage provided under items: 1), 2), or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

E. General Insurance Provisions:

(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 an 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 Hospital shall cause their insurance carrier(s) to furnish the County of Riverside with a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein; or 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) shall provide no less than thirty (30) days written notice be given to the County of Riverside prior to any material modification or cancellation of such insurance. In the event of a material modification or cancellation of 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) and the insurance required herein is in full force and effect. Individual(s) authorized by the insurance

carrier to do so, on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Hospital shall furnish the County of Riverside an original Certificate(s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section within 30 days of signing this Agreement.

(3) It is understood and agreed by the parties hereto and the Hospital's insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

(4) Hospital may meet the above insurance obligation through a program of self-insurance, or by participation in a Joint Powers Insurance Authority.

(5) Failure on the part of the Hospital to produce or maintain required insurance or the self-insurance program shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

11. Attorney's Fees

11.1 If any party commences an action against another party, either legal, administrative or otherwise, arising out of or in connection with this Agreement, the prevailing party in such litigation shall be entitled to have and recover from the losing party reasonable attorney's fees and all other costs of such action.

12. Indemnification

12.1 Hospital shall indemnify and hold County harmless from any liability arising out of the services provided by HOSPITAL, its officers, agents, employees or subcontractors, for property damage, bodily injury, or death or any other element of damage of any kind or nature resulting from acts, failures to act, omissions, errors, negligence, including willful acts or

intentional acts of Hospital, its officers, agents, employees or subcontractors hereunder, and Hospital shall defend, at its sole expense, including but not limited to attorney fees, County, Special Districts, their respective Directors, Officers, Board of Supervisors, employees, agents, and subcontractors in any legal claim or action based upon such alleged acts or omissions.

13. Entire Agreement; Amendments

13.1 This Agreement contains the entire Agreement of the parties with respect to the subject matter hereof, and supersedes all prior negotiations, understandings or agreements. This Agreement may only be modified by a writing signed by both parties.

14. Governing Law

14.1 This Agreement shall be governed by the laws of the State of California. Venue shall be in Riverside County.

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