



**SUBMITTAL TO THE RIVERSIDE UNIVERSITY HEALTH  
SYSTEM MEDICAL CENTER GOVERNING BOARD  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



ITEM: 15.4  
(ID # 11507)

**MEETING DATE:**

Tuesday, January 7, 2020

**FROM:** RUHS-MEDICAL CENTER:

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM-MEDICAL CENTER: Ratification and Approval of the First Amendment to the Professional Service Agreement with Zymeda Provider Solutions, Inc. for Coding and Revenue Consulting Services Without Seeking Competitive Bids effective October 1, 2019 through September 30, 2020, with the Option to Renew for One Additional Year; All Districts. [Total Cost \$516,004; up to \$42,000 in additional compensation – 100% Hospital Enterprise Fund 40050]

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

1. Ratify and approve the First Amendment to the Professional Service Agreement with Zymeda Provider Solutions, Inc. for Coding and Revenue Consulting Services without seeking competitive bids to extend the period of performance for one year, effective October 1, 2019 through September 30, 2020, with the option to renew for one additional year through September 30, 2021, expand the scope of services to include coding and revenue consultation services at the Primary Care Clinics and Community Health Centers, and increase the maximum annual contract amount by \$96,004 from \$323,996 to \$420,000; authorize the Chairman of the Board to sign the amendment on behalf of the County; and

**ACTION:**Policy

  
Jennifer Cruikshank, Board Executive Officer - Health System 12/23/2019

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**MINUTES OF THE GOVERNING BOARD**

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

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt  
Nays: None  
Absent: None  
Date: January 7, 2020  
xc: RUHS

Kecia R. Harper  
Clerk of the Board

By:   
Deputy

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2. Authorize the Purchasing Agent, in accordance with Ordinance No. 459 and based on the availability of fiscal funding and as approved by County Counsel to: a) sign amendments that exercise the options of the agreement including modifications to the scope of services that stay within the intent of the agreement and b) sign amendments to the compensation provisions that do not exceed the sum total of ten (10) percent of the total annual cost of the agreement.

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$ 96,004	\$ 420,000	\$ 516,004	\$ 0
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS: 100% Hospital Enterprise Fund - 40050</b>			<b>Budget Adjustment: No</b>	
			<b>For Fiscal Year: 19/20-21/22</b>	

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

**BACKGROUND:**

**Summary**

Zymeda Provider Solutions has been working with Riverside University Health System (RUHS) for the past year on numerous coding and revenue initiatives tied primarily to Healthcare Effectiveness Data and Information Set (HEDIS)/Pay-For-Performance (P4P) encounter-based claim submissions, coding and claim auditing, and enhanced charge capture. As a result of these initiatives, Zymeda has identified additional improvement opportunities specifically for the Community Health Clinics (CHC).

Since the Agreement became effective on October 1, 2018, the following improvements have been achieved by Zymeda:

- Overall increase in Current Procedural Terminology (CPT) code level of care of 8.5% for audited claims.
- 500% increase in diagnosis capture for audited claims.
- Three year (2016-2019) projected increase in orthopedic clinic charges of \$579,170 (47% increase) and payments of \$289,974 (131% increase) previously not billed by anyone.
- Projected 2019 charges of \$509,452 and payments of \$117,174 for podiatry clinic based on annualized January to June 2019 data and assumed collection rate of 23%.
- 290% increase in P4P capitation payment for RUHS Clinics for 2019-2020 equating to \$297,974 in additional revenue.
- On track to achieve average quality score of 0.72 for RUHS Clinics in 2019-2020, an increase of 125% over prior year.

**Impact on Residents and Businesses**

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The ultimate goal of these performance improvement strategies is to enhance quality of care resulting in improved Riverside County patient/provider satisfaction and appropriate payment for the care provided.

**Additional Fiscal Information**

The initial term for the Agreement, October 1, 2018 – September 30, 2019 was budgeted at \$323,996 per twelve-month period at a monthly fixed rate of \$25,833 and \$3,500 for quarterly professional fees, with the option to renew for another twelve-month period effective October 1, 2019 through September 30, 2020. Illustrated below is the estimated budget per fiscal year.

Period of Performance	October 2018 - September 2019	October 2019 - September 2020	October 2020 - September 2021	Total
Board Approved Amount	\$323,996	\$323,996	N/A	\$647,992
Requested Amount	N/A	\$96,004	\$420,000	\$516,004
Total	\$323,996	\$420,000	\$420,000	\$1,163,996

**Contract History and Price Reasonableness**

On November 6, 2018, Agenda Item #17.1, the Board approved a sole source (approval #19-068) for a Professional Service Agreement with Zymeda Provider Solutions, Inc. for coding and revenue consulting services, without seeking competitive bids effective October 1, 2018 through September 30, 2019 with the option to renew for one additional year in the amount of \$323,996 annually. The rates for the quality and performance improvement initiative with the RUHS hospital-based clinic physicians are market competitive when compared to similar larger firms.

This First Amendment will extend Zymeda’s services to the RUHS-Community Health Centers (CHS) to effectively help manage claims payment and reconciliation for a total monthly fixed fee of \$35,000 per month.

**ATTACHMENT: FIRST AMENDMENT TO THE PROFESSIONAL SERVICE AGREEMENT FOR CODING AND REVENUE CONSULTING SERVICES WITH ZYMEDA PROVIDER SOLUTIONS, INC.**

**SUBMITTAL TO THE RIVERSIDE UNIVERSITY HEALTH  
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COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

  
Teresa Summers, Director of Purchasing 12/26/2019

  
Brianna Lantajo, Management Analyst 12/30/2019

  
Gregory V. Priarios, Director County Counsel 12/26/2019

**FIRST AMENDMENT TO THE PROFESSIONAL SERVICE AGREEMENT  
FOR  
CODING AND REVENUE CONSULTING SERVICES  
BETWEEN  
COUNTY OF RIVERSIDE  
AND  
ZYMEDA PROVIDER SOLUTIONS, INC.**

This First Amendment to the Professional Service Agreement for Coding and Revenue Consulting Services (herein referred to as "First Amendment") is made and entered into by and between the **County of Riverside**, a political subdivision of the State of California (herein referred to as "COUNTY"), on behalf of **Riverside University Health System** (herein referred to as "RUHS") and **Zymeda Provider Solutions, Inc.**, a California corporation (herein referred to as "CONTRACTOR"), sometimes collectively referred to as the "Parties" or individually referred to as a "Party."

WHEREAS, COUNTY and CONTRACTOR entered into that certain Professional Service Agreement for Coding and Revenue Consulting Services, approved November 6, 2018, Agenda Item #17.1, and effective October 1, 2018, (herein referred to as "Agreement"); and

WHEREAS, the Parties now desire to exercise the renewal option by amending the Agreement to extend the period of performance, expand the scope of services, and increase the maximum annual contract amount;

NOW THEREFORE, the Parties agree as follows:

1. **Period of Performance.** The first sentence of Subsection 2.1 of Section 2. Period of Performance is hereby amended to exercise the option to renew and extend the period of performance for one (1) additional year commencing on October 1, 2019 and continuing in effect through September 30, 2020, and add another option to renew for one (1) additional year through September 30, 2021, as follows:

"This Agreement shall be effective October 1, 2018 ("Effective Date") and continues in effect through September 30, 2020, with the option to renew for one (1) additional year through September 30, 2021 by a written amendment signed by both Parties, unless terminated earlier."

2. **Compensation.** The second sentence of Subsection 3.1 of Section 3. Compensation is hereby amended to increase the maximum annual contract amount by ninety-six thousand four dollars (\$96,004) annually, from three hundred twenty-three thousand nine hundred ninety-six dollars (\$323,996) annually to four hundred twenty thousand dollars (\$420,000) annually, as follows:

"Maximum payments by COUNTY to CONTRACTOR shall not exceed four hundred twenty thousand dollars (\$420,000) annually, including all expenses."

3. **Invoices.** The fourth sentence of Subsection 3.3 of Section 3. Compensation is hereby amended to require a copy of the invoices to be emailed to RUHS Accounts Payable, as follows:

“For this Agreement, send the invoices to:

Riverside University Health System-Medical Center  
 26520 Cactus Avenue, Suite A-2060  
 Moreno Valley, CA 92555  
 Attn: Hospital Administration  
 and

Email a copy of the invoices to: RUHS Accounts Payable at [AP@ruhealth.org](mailto:AP@ruhealth.org)”

4. **Exhibit A.** EXHIBIT A, SCOPE OF SERVICES, is hereby deleted in its entirety and replaced with EXHIBIT A, SCOPE OF SERVICES, attached hereto and incorporated herein, to expand the scope of services to the Primary Care Clinics and Community Health Centers effective October 1, 2019.
5. **Exhibit B.** Section 3.0 of EXHIBIT B, PAYMENT PROVISION, is hereby amended to add a fixed fee per month for the services that will be provided effective October 1, 2019, as follows:

“3.0 For the period of October 1, 2018 through September 30, 2019, CONTRACTOR shall be paid as follows:

Description	Amount	Frequency	Total Annual Amount
Fixed Fee Per Month	\$25,833	Each Month (12 Months)	\$309,996
Quarterly Professional Fee	\$3,500	Each Quarter (4 Quarters)	\$14,000
<b>TOTAL</b>			<b>\$323,996</b>

Effective October 1, 2019, CONTRACTOR shall be paid as follows:

Description	Amount	Frequency	Total Annual Amount
Fixed Fee Per Month – Estimated 280 Hours Per Month	\$35,000	Each Month (12 Months)	\$420,000
<b>TOTAL</b>			<b>\$420,000</b>

6. **Exhibit B.** Section 4.0 of EXHIBIT B, PAYMENT PROVISION, is hereby amended to increase the maximum annual contract amount by ninety-six thousand four dollars (\$96,004) annually, from three hundred twenty-three thousand nine hundred ninety-six dollars (\$323,996) annually to four hundred twenty thousand dollars (\$420,000) annually, as follows:

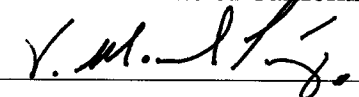
“Maximum payments by COUNTY to CONTRACTOR shall not exceed four hundred twenty thousand dollars (\$420,000) annually, including all expenses.”

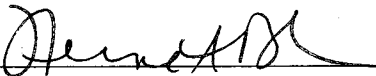
7. **Miscellaneous.** All other terms and conditions of the Agreement not modified herein shall remain unchanged and in full force and effect.
8. **Effective Date.** This First Amendment to the Agreement shall become effective upon signature of both Parties or October 1, 2019, whichever should come first.

IN WITNESS WHEREOF, the Parties hereto have caused their duly authorized representatives to execute this First Amendment.

COUNTY OF RIVERSIDE, a political subdivision of the State of California

ZYMEDA PROVIDER SOLUTIONS, INC., a California corporation

By: 

By: 

Name: V. MANUEL PEREZ

Name: Helene Beilman-Werner

Title: Chairman, Board of Supervisors

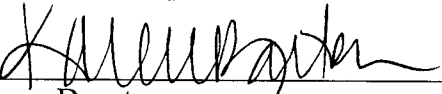
Title: Chief Executive Officer

Date: JAN 07 2020

Date: December 4, 2019

**ATTEST:**

Kecia R. Harper  
Clerk of the Board

By:   
Deputy

**APPROVED AS TO FORM:**

Gregory P. Priamos  
County Counsel

By:   
Danielle Maland  
Deputy County Counsel

Date: 12/18/19

**SCOPE OF SERVICES**

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- A. For the period of October 1, 2018 through September 30, 2019, CONTRACTOR shall provide process improvement tactics and consultation services for RUHS-Medical Center, as specified below:
1. Facilitate an understanding of how revenue integrity initiatives within individual hospital departments or services ultimately impact the hospital as a whole (and other initiatives) when viewed across the entire organization and not in an individual silo of responsibility.
  2. Create a best practice standard for Healthcare Effectiveness Data and Information Set (HEDIS)/Pay-For-Performance (P4P) target performance based on assigned members and encounter volume. This will include the implementation of tracking and follow up for these measures through regular audits as well as a routine reporting processes for clinic and hospital leadership.
  3. Complete all encounter-based claim submissions in support of P4P initiatives.
  4. Determine improvement opportunities for compliance based on audits of individual clinics and providers. Implement detailed audit processes utilizing review of clinic billing for payer specific HEDIS/P4P measures including AIC, Depression Screening, Immunizations, BMI/Weight, or measures deemed important to both RUHS and payers.
  5. Create audit process to verify physician order vs. charge capture in system, utilizing results to identify both documentation, coding and charge capture improvement opportunities to support revenue integrity initiatives.
  6. Utilize audit results to model financial impact to RUHS of recommended process improvement initiatives, weighing cost of initiatives with potential revenue impact.
  7. Increase Coding Query functions to include expanded access to EPIC and messaging capabilities to ensure changes to hospital notes match professional billing. This expansion will verify consistent diagnoses for technical/facility claims and professional claims, reducing risk and exposure to potential audit and positively impacting reimbursement.



SCOPE OF SERVICES

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8. Establish physician training sessions, including professional coding education, on HEDIS/P4P metrics, including required documentation and charge capture needs. Facilitate expert quarterly meetings with departments and physicians (depending on need) to review specific metrics and current performance. Conduct both routine training sessions (e.g. quarterly) and as-needed seminars based on previous quarter's audit results. Include physician fellows and residents in training as appropriate. Coordinate content of physician education seminars with RUHS Revenue Integrity staff to facilitate instruction in both professional and technical/facility documentation and charge capture requirements.
  9. Provide quarterly reports to RUHS leadership and individual physicians to monitor progress, identify deficiencies and highlight successes.
  10. Utilize all audit results to maintain current codes within system and coordinate necessary system changes in EPIC with RUHS IT support.
  11. Work with RUHS Revenue Integrity leadership to determine improvement opportunities for technical/facility billing based on audits of professional coding and billing for clinics. This may include identification of contract carve-outs such as implants, injections, etc.
  12. Apply key findings and audit results, in conjunction with RUHS administrative and clinical leadership, to establish a system which facilitates the implementation of Value-Based Payment (VBP) models. Participate with RUHS leadership in discussions with key payers to determine critical components of VBP models and the billing and reporting processes necessary to ensure success in this new payment structure.
- B. Effective October 1, 2019, CONTRACTOR shall provide process improvement tactics and consultation services for RUHS-Medical Center, Primary Care Clinics, and Community Healthcare Centers, as specified below:
1. Create a best practice standard for Healthcare Effectiveness Data and Information Set (HEDIS)/Pay-For-Performance (P4) target performance based on assigned members and

**SCOPE OF SERVICES**

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- encounter volume. This will include the implementation of tracking and follow up for these measures through regular audits as well as a routine reporting process for clinic and hospital leadership.
2. Complete encounter-based claim submissions in support of Inland Empire Health Plan and Molina P4P initiatives including a hospital based primary care, outpatient clinic, and Community Health Center encounter. This includes comprehensive review and reporting of the patient continuum of care performed at the medical center, as may be otherwise documented within the EPIC medical record.
  3. Determine improvement opportunities for compliance based on audits of individual clinics and providers. Implement detailed audit processes utilizing review of clinic billing for payer specific HEDIS/P4P measures including A1C, Depression Screening, Immunizations, BMI/Wight, or other measures as specified by payers.
  4. Utilize audit results to demonstrate financial impact of process improvement initiatives to RUHS.
  5. Provide periodic reports to RUHS leadership and individual physicians to monitor progress, identify deficiencies and highlight successes, but not less than quarterly.
  6. Utilize audit results to make coding recommendations for updates of current codes or workflow within the system.
  7. Apply key findings and audit results, in conjunction with RUHS administrative and clinical leadership, to establish a system which facilitates the implementation of Value-Based Payment (VBP) models. Participate with RUHS leadership in discussion with key payers to determine critical components of VBP models and the billing and reporting processes necessary to ensure success in this new payment structure.