



Contract Number

SAP Number

Arrowhead Regional Medical Center

| | |
|-------------------------------------------|-------------------------------------------------------------|
| Department Contract Representative | William L. Gilbert |
| Telephone Number | (909) 580-6150 |
| Contractor | CEP America - California |
| Contractor Representative | Rodney Borger, MD |
| Telephone Number | 909-580-6370 |
| Contract Term | January 1, 2024 – December 31, 2026 |
| Original Contract Amount | \$66,543,912 (\$22,181,304 per annum) plus variable amounts |
| Amendment Amount | |
| Total Contract Amount | \$66,543,912 (\$22,181,304 per annum) plus variable amounts |
| Cost Center | 911004200 |

PROFESSIONAL SERVICES AGREEMENT

PART I

RECITALS

1.01 San Bernardino County (“County”) is the owner and operator of an acute care hospital located at 400 North Pepper Avenue, Colton, California, known as Arrowhead Regional Medical Center, hereinafter referred to as “Hospital,” in which is located the service of Emergency Medicine (“Specialty”), and wishes to engage CEP America - California hereinafter referred to as “Provider” or “Corporation” to provide services at Hospital, in Specialty, which includes the subspecialties of family medicine and street medicine, and to provide certain other services to the County Departments (hereinafter all such services provided under this Contract are collectively referred to as the “Service” or “Services”). County also operates several detention facilities by and through its Sheriff’s Department, a Probation Department, a Department of Behavioral Health, and is affiliated with the San Bernardino County Fire

Protection District (collectively, all hereinafter referred to as the "County Departments" and each a "County Department").

- 1.02 Hospital provides both inpatient and outpatient services through hospital-owned outpatient clinics ("Clinics") offering healthcare services in the medical and/or surgical specialties listed in **Appendix A**.
- 1.03 The purpose of this Professional Services Agreement, herein referred to as the "Contract", is to provide a full statement of the respective rights and responsibilities of the parties in connection with the provision of the professional and administrative duties with respect to the Services and operation of the Medical Staff Department of Emergency Medicine ("Department") during the term of this Contract.
- 1.04 Provider is a medical corporation organized under the Medical Professional Corporation Laws of the State of California, hereinafter referred to as the "Corporation", that employs or contracts with individuals who are licensed in California and qualified for providing the Services ("Practitioners"). The term Practitioner includes individuals credentialed by the Hospital as either a Hospital Medical Staff member or Advanced Practice Professional ("APP").

PART II

DUTIES AND RESPONSIBILITIES OF THE CORPORATION AND ITS PRACTITIONERS

2.01 Corporation Leadership

- A. Corporation shall recommend and provide a Practitioner for appointment as the chair of the Department of Emergency Medicine for the Hospital ("Department Chair"). The ultimate selection of the Department Chair shall be governed by the procedures set forth in the Hospital Medical Staff Bylaws. The Department Chair must meet the qualification requirements for a department chair as set forth in the Medical Staff Bylaws, be an Active member of the Hospital's medical staff, and remain "In Good Standing" as defined by, and in accordance with the Medical Staff Bylaws. In the event the Department Chair is deficient in his/her duties, as determined in the sole discretion of the Hospital Director, the Hospital Director may appoint an interim chair at his/her sole discretion until either (1) the Hospital Director become satisfied that the former Department Chair is ready, willing, and able to fully perform the duties of the Department Chair, or (2) a new Department Chair is appointed and the former Department Chair is removed consistent with the procedures under the Medical Staff Bylaws.
- B. The Corporation shall recommend Practitioners for the roles of department chair, vice chairs, chiefs, directors, section directors, or other positions whereby the Corporation is being paid by the County for administrative responsibilities at the Hospital. Any appointments of Corporation's Practitioners to such positions shall be approved at the discretion of the Hospital Director and Medical Executive Committee, unless otherwise provided for under the Medical Staff By-Laws.
- C. Appointments of Corporation Leadership are outlined in **Appendix B**

2.02 General Duties and Responsibilities

- A. If Hospital deems it advisable for Corporation to contract with a managed care plan for which the Hospital serves as an in-network provider, Corporation agrees to enter into good faith negotiations to secure a contractual agreement equal to the prevailing reimbursement rates for emergency physician specialists within the geographic area of Hospital.
- B. Corporation shall provide a list of proposed Practitioners (**Appendix C**) to provide services under this Contract to the Hospital's Director for Hospital approval prior to a Practitioner providing services under this Contract. Except for the removal of Practitioners where required under Sections 2.02(H)

and 3.04 of this Contract, any proposed changes by Corporation to the agreed upon list of Practitioners must be submitted in writing by the Corporation and shall be subject to the written approval of the Hospital's Director. Any Practitioner proposed to be added to the list by the Corporation after the execution of this Contract must meet the Practitioner qualification requirements in Section 2.03 and be approved in writing by the Hospital Director.

- C. Corporation shall, at all times, provide an appropriate number of qualified Practitioners in the Specialty to accommodate patient needs and services at the Hospital and its Clinics and otherwise meet the patient care, administrative, and teaching needs of the Hospital. Telehealth or Telemedicine is not considered a form of coverage unless approved in writing by the Hospital Director.
- D. Corporation shall provide Practitioner services to all patients requiring care in the Specialty at the Hospital and its Clinics and will ensure active participation of assigned Practitioners in activities of the Hospital and Medical Staff, including but not limited to, education, committee meeting attendance, and quality improvement activities. Practitioners shall provide Hospital 30-days prior written notice of any routine clinic cancellation days when scheduled at the Hospital or any Clinic. Routine cancellation is defined as any cancellation other than for an emergency or illness. Any non-routine cancellation must be discussed with the Hospital Clinical Manager and Hospital Administration.
- E. Corporation acknowledges that Hospital has a policy pursuant to which it classifies certain patients as Charity Care patients based on an individualized assessment of the patient's financial need, and Hospital does not charge or seek to collect payment from Charity Care patients for Hospital's services once Hospital has determined that a patient qualifies as a Charity Care patient. Accordingly, to the extent permitted by applicable law, Corporation agrees that it will adhere to Hospital's policy in this regard and shall not charge or seek to collect payment from Charity Care patients for professional medical services provided by Corporation's Practitioners once Hospital notifies Corporation that a patient qualifies as a Charity Care patient. Corporation acknowledges and agrees that its compensation from Hospital in accordance with this Contract is sufficient to compensate Corporation for all of its services hereunder, including the services that Corporation's Practitioners render to Hospital's Charity Care patients.
- F. Practitioners are expected to be available to provide care during all clinical scheduled hours. Clinic Hours are outlined in Appendix "A", but may be modified upon written notification from the Hospital Director or designee with at least 30 days notification or earlier if mutually agreed upon.
- G. Corporation agrees that it and its Practitioners, employees, and its agents providing Services under this Contract shall comply fully with all applicable laws, and with all the Clinic, Hospital, Medical Staff and County policies, protocols, bylaws, rules and regulations, and regularly discharge all administrative, teaching, and clinical responsibilities of the Hospital and Medical Staff including active participation in the Hospital's risk management program and electronic initiatives. Corporation further specifically agrees that it and the Practitioners and other personnel providing Services under this Contract shall abide by the Hospital's policies prohibiting misconduct toward patients or harassment of employees, including the policy attached as Exhibit "B", and shall report violations of such policies.
- H. Corporation shall immediately remove any Practitioner from furnishing Services under this Contract who:
 - Has his or her Medical Staff membership or clinical privileges at Hospital terminated, suspended, revoked or relinquished for any reason, whether voluntarily or involuntarily, temporarily or permanently;

- Has his or her professional license to practice medicine in the state denied, suspended, terminated, revoked, restricted, or relinquished for any reason, whether voluntarily or involuntarily;
 - Fails to satisfy the requirements pertaining to Practitioners providing services on behalf of Corporation pursuant to this Contract, including, but not limited to, the Practitioner qualifications contained in Section 2.03, or breaches or causes Corporation to breach this Contract; or
 - If Practitioner is terminated by a payor or health plan.
- I. Corporation shall assure that all Time Records Forms (**Exhibit A**) are filled out accurately by all Practitioners which include hours for administrative, teaching, direct care, and on-call services.
- J. Medical records shall, at all times, be the property of Hospital, but (subject to all applicable patient privacy laws and regulations) Corporation shall have reasonable access to such medical records and shall have the right to make copies thereof, at Corporation's sole cost and expense, upon reasonable notice to Hospital requesting to do so and in accordance with applicable federal and state laws and regulations.
- K. Practitioners and other personnel of the Corporation shall complete all Hospital required education updates and recurring and/or specialized requirements including, but not limited to:
- Influenza Immunization
 - Competency Education
 - HIPAA Training
 - Infection Control
 - Adverse Events
 - Patient Safety
 - Pain Management
 - Services Recovery
 - Other programs as required by the Hospital or Medical Staff

2.03 Practitioner Qualifications

Corporation and each Practitioner represents and warrants that, as applicable, each Practitioner:

- A. Maintains an unlimited, unrestricted license to practice in the state of California.
- B. Is board certified or is eligible for board certification in the Specialty, in compliance with board certification requirements in the Medical Staff Bylaws.
- C. Maintains membership on the Hospital's Medical Staff or APP Staff, with appropriate clinical privileges.
- D. Is a participating provider in the Medicare and Medi-Cal programs, participates in all payor contracts Hospital enters, and in other government health plans in which Hospital participates.
- E. Will not participate in billing practices that are competitive with the billing practices of the Hospital and will adhere to all Hospital billing guidelines and practices in accordance with applicable laws and regulations.
- F. Participates in continuing education as necessary to maintain licensure, professional competence and skills commensurate with the standards of the medical community, and in accordance with the maintenance of the specific privileges that said Corporation and each Practitioner acquires at Hospital, and as otherwise required by Corporation's continuing medical education policy.

- G. Is not an excluded, debarred or suspended Practitioner for any state or federal health care program, federal procurement program or of the U.S. Food and Drug Administration.
- H. Has never been convicted of a felony, or of a misdemeanor involving patient care issues, violation of healthcare laws or moral turpitude, or has been subject to exclusion from participating as a Practitioner in either the Medicare, or a state Medicaid program; and
- I. Has never had his/her privileges or prerogatives to practice at any health care facility, medical staff membership, or license to practice in any state been limited, suspended, revoked or voluntarily relinquished.

Each Practitioner providing services under this Contract shall sign an acknowledgment, in the form of **Attachment "A"** attached hereto, of the obligations of Corporation hereunder, and the representations contained in this Section. This Contract does not confer any rights on Practitioners individually, and only the Hospital, the County, and Corporation shall have the right to assert the benefits of this Contract.

2.04 Practitioner Coverage

- A. Corporation shall ensure that there are adequate qualified Practitioners available for consultation on a 24-hour per day, seven days per week basis to ensure proper operation of all units of responsibility in the Hospital. Consultation for the purposes of this Contract is defined as providing availability to respond via telephone, video and/or in-person.
- B. Corporation shall ensure that there are adequate qualified Practitioners available for on-call services off-hours as defined in Appendix A of this Contract. For the purposes of this Contract, on-call services are defined as having qualified practitioners available to respond to the hospital for any inpatient service in-person.
- C. Corporation shall ensure there is adequate qualified Practitioners available to provide services to Hospital as outlined in Section 2.02 (F) and Appendix 'A'.
- D. Corporation shall provide appropriate staffing to ensure consults and procedures are completed as medically indicated, but no later than twenty-four (24) hours of request for routine inpatient consults; 30-minutes for the emergency department and for patient placement/patient determination.
- E. Corporation personnel designated pursuant to Part II of this Contract, shall devote sufficient time to perform all administrative and teaching duties in a timely and efficient manner. In the event that Corporation fails to provide coverage of the positions described in Part II and other pertinent sections of this Contract, the parties agree that the compensation due to Corporation pursuant to Part IV of this Contract for such administration, supervision, and teaching for these positions may be reduced in proportion to the actual reduction in coverage of the positions.
- F. Corporation shall reimburse Hospital for all overhead costs incurred by Hospital related to cancelled surgeries or procedures, and any other incurred cost resulting from decisions made by Corporation that directly affect Hospital.
- G. Corporation shall work with the Hospital to improve worked relative value units (wRVUs) for the Practitioners and strive to achieve wRVUs in the 50th percentile against national benchmarks for an academic medical center for clinical services provided in the outpatient clinic environment. The Parties shall meet regularly to review wRVU performance and address recommendations to improve productivity.

2.05 Administrative and Teaching Responsibilities

- A. The Corporation shall recommend Practitioners for appointment to the Hospital or Medical Staff committees, including, but not limited to, risk management, peer review, etc. Any appointments of Corporation's Practitioners to such roles shall be approved at the discretion of the President of the Medical Staff, and Hospital Director, unless otherwise provided for in the Medical Staff Bylaws. Corporation shall ensure that designated Practitioners faithfully serve on Hospital and Medical Staff Committees, and that each Practitioner appointed to such roles attend at least 80 percent of all scheduled meetings, arrive on time and stay through the entire meeting, and actively participate in a collaborative manner. In the event Practitioner is unable to meet the 80 percent threshold, the Hospital has a right to reduce administrative payments by the percentage of hours missed below the 80 percent.
- B. Corporation shall ensure that each Practitioner appointed to an administrative role, as set forth in Appendix B, shall perform the specific duties and responsibilities for that role as delineated in Appendix B, and shall comply with the time records requirements in Section 4.04.
- C. Those Practitioners appointed in this Contract for teaching shall be responsible for preparing and presenting didactic lectures, conferences, seminars, Accreditation Council for Graduate Medical Education ("ACGME") required hours, teaching rounds and other activities necessary to carry out the established core curriculum for teaching in the Specialty and liaison with Hospital's physician residents ("Residents") and Hospital-contracted university-affiliated medical students, and shall comply with the time records requirements in Section 4.04.
- D. Corporation shall ensure Practitioners providing teaching services under this Contract devote the appropriate time necessary to complete the required teaching duties for the Specialty as required by the ACGME and medical school agreements.
- E. Duties and responsibilities for teaching services are outlined in **Appendix B**.
- F. Corporation's Practitioners shall prepare and timely submit written evaluations of the performance of all Residents who have performed a clinical rotation in the Specialty. Such Resident evaluations must be submitted no later than (1) fourteen (14) business days after receipt of written request or (2) in accordance with the most current timeframe put forth by the Hospital.

2.06 Non-Clinical Personnel

Non-Clinical Personnel employed by the Corporation are expected to develop and maintain an amicable working relationship with Hospital and County Departments management and staff. Such personnel who provide services in the Hospital will maintain a reporting relationship with the Executive Assistant in the Hospital Department of Administration and will follow all Hospital policies and directives referred to in Section 2.02(G). Corporation will be notified in the event that any Corporation Non-Clinical Personnel fail to maintain an amicable relationship and/or fail to follow Hospital policies, at which point Corporation agrees to discontinue use of such Non-Clinical Personnel and replace said individual with another Non-Clinical Personnel to fulfill Corporation's obligations under this Contract.

2.07 Projection of Needs

It shall be the responsibility of the Corporation to annually project space, personnel, and equipment needs for the areas of responsibility as defined by this Contract for each County fiscal year and project needs for future years as required by Hospital and to submit such evaluations and projections in writing with the same supporting documentation and process required by the Hospital for space and equipment needs, including but not limited to formal requests via committee and/or Hospital department approval to the Hospital Director.

2.08 Referrals Involving County Patients

- A. The Corporation and the Practitioners providing services under this Contract agree that they shall not compete with Hospital by re-directing County Patients (as defined herein) to private practice ventures (i.e. non-County providers or facilities). For purposes of this Section 2.08, "County Patients" shall include any and all patients initially seen by any Practitioner while providing services under this Contract including any patients seen by Practitioners in the Hospital, any Hospital Clinic or any other County facility. This requirement to make referrals to the County shall not apply if: (1) the patient expresses a preference for a non-County provider or facility; (2) the patient's insurer determines the provider, practitioner or supplier; or (3) the referral is not in the patient's best medical interests in the Practitioner's judgment. In addition, the parties agree that the referral requirement in this section relates solely to the Practitioner's services covered by the scope of this Contract and the referral requirement is reasonably necessary to effectuate the legitimate business purposes of this Contract. If a County patient is referred outside of the County system for one of the reasons listed above, Corporation shall report such referral to the Hospital Director or designee for review prior to said referral, except in cases of a medical emergency, in which case, Corporation or Provider shall report such referral within 24 hours after the referral.
- B. In no event shall the Corporation or any Practitioner be required to make referrals that relate to services that are not provided by the Corporation or any Practitioner under the scope of this Contract.

2.09 Private Use of Hospital Premises

Corporation acknowledges that Hospital is required to comply with certain provisions of the Internal Revenue Code (the Code and its accompanying rules, regulations and procedures are together referred to as "IRC") relating to tax-exempt bonds (which were used to finance the acquisition and construction of the Hospital) and restrictions on private use imposed on property financed with proceeds of tax-exempt bonds. Corporation agrees that if Hospital, in its sole discretion, determines an amendment of this Contract is necessary so that Hospital is in compliance with the applicable IRC, it will execute an amendment to this Contract and do so in an expedited manner.

2.10 Non-Permitted Use of Hospital Premises

Corporation shall not use or permit any of Corporation's representatives to use any Hospital facility or service for any purpose other than the performance of Services under this Contract. Corporation agrees that no part of the Hospital premises shall be used at any time as an office for private practice or delivery of care for non-County patients.

2.11 Research Studies/Clinical Trials

- A. Corporation shall submit all research studies/clinical trials involving patients at the Hospital and its Clinics to the Hospital's Institutional Review Board and Office of Research and Grants to obtain approval prior to implementation of any part of the research study/clinical trial at the Hospital.
- B. Corporation shall ensure that all research study/clinical trial contracts with third party sponsors shall contain a provision indemnifying, defending and holding harmless the County, its officers, employees, agents and volunteers from any and all claims, actions, losses, damages and/or liability, including reasonable attorney fees and costs arising out of or directly attributable to the research study/clinical trial.

2.12 Notification of Certain Events

- A. Corporation shall make good faith efforts to provide immediate verbal notice upon receipt of information to the Hospital Director and, in addition, provide to the Hospital Director written notification within twenty-four (24) hours after the occurrence of any of the following events:
- a. Corporation or any of the Practitioners providing Services under this Contract becomes the subject of, or materially involved in any investigation, proceeding, or disciplinary action by: Medicare and/or the Medi-Cal program or any other federal or state health care program, any state's medical board, any agency responsible for professional licensing, standards or behavior, or any hospital's or health facility's medical staff.
 - b. The medical staff membership or clinical privileges of any of the Practitioners providing Services under this Contract at any hospital are denied, suspended, restricted, revoked or voluntarily relinquished.
 - c. Any Practitioner providing Services under this Contract has his or her license to practice in any jurisdiction suspended, revoked, or otherwise restricted.
 - d. Any Practitioner or other Corporation personnel providing Services under this Contract is convicted of a criminal offense.
 - e. Corporation or any of the Practitioners providing Services under this Contract is debarred, suspended, excluded or otherwise ineligible to participate in any federal or state health care program.
 - f. Corporation or any of the Practitioners providing Services under this Contract becomes the subject of any suit, action or other legal proceeding arising out of the Services provided under this Contract; or
 - g. Any representation contained in Section 2.03 regarding any of its Practitioners ceases to be true.

2.13 Compliance with Electronic Initiatives

Corporation shall participate in the development, optimization and continuous improvement of electronic initiatives (e.g. electronic health records (EHR), E-Consult, etc.) affecting their service area and shall ensure that all Practitioners and Non-Clinical Personnel providing Services receive the appropriate training necessary to successfully implement the initiatives.

2.14 Active Participation in Hospital Risk Management Program

Corporation shall ensure that Practitioners and Non-Clinical Personnel providing Services participate fully in all aspects of the Hospital Risk Management Program including but not limited to all liability education programs, Root Cause Analyses, Proactive Risk Assessments/Failure Mode and Effects Analysis (FMEA), cooperation with all risk or legal related investigations and inquires, and communication with County attorneys via the Hospital Risk Management Program.

2.15 Operational Improvement Committees

To improve quality and patient satisfaction, Hospital will establish operational improvement committees in various areas of service. Corporation shall participate in such committees by assigning a Practitioner, who will be subject to approval by Hospital Director at his/her sole discretion, to serve as co-

chair/physician champion on committees affecting Corporation's area of practice, and on committees where the stakeholders include a Practitioner from the Specialty of which participation is required.

2.16 Participation in County Clinically Integrated Network.

The County is in the process of developing a clinically integrated network ("CIN"), which will include the Hospital and may include an independent practice association ("IPA"), or other entity, which CIN will facilitate the coordination of patient care across conditions, providers and settings, and streamline the process for contracting with third party payors, including but not limited to access to any and all software or hardware that maintains records and/or data that may be part and parcel to patient care or constitute a complete medical record as determined by policy, law, or regulation. The Corporation agrees to participate in any CIN directly, or through an IPA, as applicable, and as reasonably requested by the Hospital.

2.17 Key Performance Indicators (KPI)

Corporation shall work to improve the Key Performance Indicators as outlined in Appendix D.

2.18 Marketing and Public Relations

The County has the right to use Corporation's logo for marketing purposes based on the written consent of the Corporation.

2.19 Disaster Response Activation

In the event of a local, state, or national disaster, Hospital Director or its designee can request Corporation to provide medical services to aid in the disaster event. The request to Corporation and termination of request will be provided in writing that will outline the scope of services for that event consistent with the reimbursement rates set forth on Appendix E for such services.

2.24 Use of County Vehicles

In the event of a local, state, or national emergency/disaster, the Department Chief/designee (Sheriff, Probation, Fire) or Hospital Director/designee (ARMC) may authorize select physicians (members of the HERT team), who have completed vehicle safety and driver training, to utilize county emergency vehicles for the purpose of responding to such emergency/disaster. Use of County vehicles by such physicians are subject to County policies.

2.25 Duties of Corporation and its Practitioners in the County Departments.

(A) The duties and responsibilities of Corporation and its Practitioners at the Sheriff/Coroner/Public Administration Detention Facilities are outlined in Appendix F.

(B) The duties and responsibilities of Corporation and its Practitioners at the County Probation Department are outlined in Appendix G.

(C) The duties and responsibilities of Corporation and its Practitioners at the San Bernardino County Department of Behavioral Health Department for Alcohol and Drug Services are outlined in Appendix H.

(D) The duties and responsibilities of Corporation and its Practitioners at the San Bernardino County Fire Protection District are outlined in Appendix I.

PART III

DUTIES, RIGHTS, AND RESPONSIBILITIES OF THE HOSPITAL

3.01 Facilities, Equipment, Supplies and Services

Hospital shall provide and maintain adequate space and appropriate equipment for the efficient operation and conduct of the Service and the Service Clinics. Hospital shall also provide utilities, housekeeping, security, laundry, accounting, purchasing, medical records, and other supplies and services required for the administrative operations, the operation of the residency and medical student educational components of the Service, and the Service Clinics in accordance with available resources and with consideration to essential areas, as determined by Hospital and with the Hospital having priority. The facilities, equipment, services, and supplies needed shall be determined initially and reevaluated from time to time by the Hospital. All equipment introduced, utilized, or proposed by the Corporation shall be approved in accordance with the then-current Hospital policy. In the event Corporation or Corporation's Practitioner proposes the use of any new equipment or new service at the Hospital, the Corporation and Corporation's Practitioners shall disclose in writing to the Hospital's Director if the Corporation or any of its Practitioners have a financial interest or financial relationship with the vendor being proposed to provide the new equipment or service. Failure to provide such disclosure shall be deemed a material breach of this Contract.

3.02 Administrative Personnel

Except as otherwise agreed upon, administrative personnel required for the proper operation of the Specialty Department and the Specialty Clinics shall be employed by Hospital. The selection and retention of such personnel may include consultants of the Corporation, consistent with the County's Memorandum of Understanding provisions and County's Personnel Rules and Regulations.

3.03 Contract Compliance

Hospital and Corporation representatives will meet quarterly to discuss contract compliance by both parties. Corporation will supply data relevant to contract compliance upon request of the Hospital and within the timeframe requested. No failure by the County to insist upon the strict performance of this section of the Contract shall constitute a waiver of its right to enforce this requirement during the term of this Contract. A letter will be issued to Corporation following the quarterly meetings. A sample of the letter is shown in Exhibit F.

3.04 Right to Remove Practitioner

Hospital shall have the right to remove a Practitioner from the list of approved Practitioners by written notice to the Corporation, effectively immediately or at such later date as specified in such notice, at any time during the term of this Contract with or without cause. If removed from the list of approved Practitioners, the Practitioner may no longer furnish services under this Contract and the Corporation and the Hospital will work together to ensure appropriate continuity of care for any affected patients. Removal of a Practitioner from the list of approved Practitioners does not affect the Practitioner's medical staff membership or clinical privileges and does not generate hearing rights under the Hospital's Medical Staff Bylaws.

PART IV

BILLING AND COMPENSATION

4.01 Compensation

Hospital shall compensate Corporation for Services provided under this Contract, as outlined in Appendix E.

4.02 Compensation for Patient Care

- A. Hospital shall not compensate Corporation for professional services rendered directly to patients except as otherwise stated herein.
- B. Except as otherwise stated in this Contract, Corporation shall bill usual and customary charges for patient care services rendered directly to the patient or appropriate third-party payors in accordance with the laws and regulations of the State of California, the United States and appropriate governmental agencies and Corporation shall bear all risks for collection of said fees. Hospital shall use its best efforts to provide Corporation or its billing agents with all records and data necessary to accomplish such billing for patient care services rendered in an efficient and timely manner, to enable all billings to be made within the time limits established by law. Corporation shall not bill patients for administrative or teaching services and responsibilities rendered by Corporation pursuant to Part II of this Contract, or for patient care rendered by fellows and Residents not directly supervised by or in conjunction with faculty personnel of the Corporation or where such billing is not permitted by law.
- C. Payment for patient care is based on the fair market valuation and percentage of payor mix whereby Corporation is unable to bill for professional services.

4.03 Method of Payment

At the end of each month, Corporation shall submit to the County an invoice and all related accurate and completed time records required under this Contract for services rendered during that month for payment by the County. Payment terms for invoices are net 30 days or 30 days following the resolution of any disputed invoice. County will not dispute any invoice that is accurate and that includes fully completed and accurate time records with hours that conform to the Approximate Monthly Hours required under the Contract. The phrase "Approximate Monthly Hours" refers to the total numbers of hours of services to be provided annually under the Contract divided by twelve.

4.04 Time Records

- A. It shall be the responsibility of the Corporation to ensure that Practitioners sign and record their time spent in administration, supervision, teaching, and direct patient care in accordance with the "Time Record Form" hereto attached as Exhibit "A." Corporation shall submit to County such time records as an attachment to the invoice supporting such activity at the time of invoice submission for the calendar month during which the services were provided. Records that are incomplete shall be returned for completion. The parties acknowledge that the actual time required to perform the administration services may vary from month to month, provided, however, that Corporation shall ensure that the level of administration services is at least sufficient to meet the requirements under California Code of Regulations, Title 22, CMS Conditions of Participation, and Hospital accreditation standards regarding medical-administrative oversight of clinic activities. The County's obligation to compensate the Corporation for the administrative, teaching and direct patient care services described in this Contract is contingent upon: (1) the Corporation's completion of the minimum number of hours required by ACGME (if applicable); (2) the Corporation's submission of the time records described in this section; and (3) up to the associated hours in listed on the timesheets not to exceed the amounts listed in Appendix E of this Contract.

4.05 Electronic Fund Transfer Program

Corporation shall accept all payments from County via electronic funds transfer (EFT) directly deposited into the Corporation's designated checking or other bank account. Corporation shall promptly comply with directions and accurately complete forms provided by County required to process EFT payments.

4.06 Billing Compliance/Indemnification

Corporation shall comply with all applicable laws, including those of any federal or state health care program, customary practice and other third-party payor programs, whether public or private, in connection with billing and coding for Practitioner Services provided pursuant to this Contract. Corporation shall adopt and maintain billing and coding compliance policies and procedures to ensure Corporation's compliance with applicable laws including those of any federal or state health care program, including but not limited to the Medicare and Medi-Cal programs. Hospital shall have reasonable access to Corporation's books and records in order to assure Corporation's compliance with any and all provisions of this Contract, and Corporation shall fully cooperate with Hospital in this regard.

Corporation hereby agrees to indemnify, defend and hold harmless County, its officers, supervisors, employees and agents from and against all liability, cost, loss, penalty or expense (including without limitation, attorneys' fees and court costs) incurred by County resulting from inaccurate and/or improper billing information furnished by Corporation and relied on by Hospital regarding professional services rendered by Corporation to Hospital patients to the extent such liability, cost, penalty, or expense exceeds the amount of payment or reimbursement actually received by Hospital for such services.

PART V

DELINQUENT MEDICAL RECORDS AND REPORTS

- 5.01 Practitioners shall prepare and maintain, or cause to be prepared and maintained, complete and accurate medical records, in accordance with all applicable policies, laws, and regulations including Hospital and Hospital Medical Staff requirements for documentation, timeliness and completeness, for each patient who is treated by Corporation at Hospital or any Hospital Clinic.
- 5.02 Corporation shall ensure that its Practitioners complete medical records in accordance with all applicable policies, laws, and regulations.
- 5.03 A medical record or Resident evaluation not completed within the timeframes specified by federal or state law, regulations, Hospital policies, or rules specified by accrediting agencies, including, but not limited to the ACGME, is considered delinquent. If any medical records or Resident Evaluations required under this section are delinquent for more than sixty (60) days, the County shall be entitled to withhold fees due to the Corporation. Such withholdings shall be made from the next payment due to the Corporation following such delinquency. The withheld funds will remain in place until all delinquencies in place for greater than 60 days have been corrected.

PART VI

GENERAL PROVISIONS

6.01 Personnel

All Residents, fellows and non-medical personnel required for the proper operation of the Specialty Department in the Hospital and the Clinics, who are not employed by or who have not contracted with Corporation, shall be employed by Hospital or other affiliated institutions.

6.02 Independent Contractors

- A. In the performance of work, duties, and obligations by Corporation under this Contract, it is mutually understood and agreed that the Corporation, its employees, associates, partners, and/or contracting persons are at all times acting and performing as independent contractors, practicing the profession of medicine and specializing in the Specialty. The Corporation, its employees, associates, partners, and/or contracting persons are not officers, employees, agents, or volunteers of the Hospital, and as such, the County's workers' compensation benefits will not be extended to the Corporation, its employees, associates, partners, and/or contracting persons.
- B. Hospital shall neither have nor exercise any control or direction over the methods by which Corporation or its employees, associates, partners, or contracting persons shall perform duties subject to their clinical training and education unless directed by policy, law, or regulations. The sole interest and responsibility of Hospital is to assure that the Department and Services covered by this Contract shall be administered, performed, and rendered in a competent and efficient manner satisfactory to the Hospital's Director, in compliance with this Contract, and based in accordance with the essentials of acceptable medical practice. All parties hereto shall fully comply with all applicable provisions of law and other rules and regulations of any and all governmental authorities relating to licensure and regulation of Practitioners and hospitals and to the operations of the Service. In addition, the parties shall also operate and conduct themselves in accordance with standards and recommendations of the American Osteopathic Association (AOA) and American Medical Association (AMA), the Policies and Procedures of the Hospital and County, and the Bylaws and Rules and Regulations of the Medical Staff as may be in effect from time to time.

6.03 Scribes

Corporation may utilize, at their own expense, the services of qualified clerical and non-professional personnel referred to as scribes as a subcontractor. A scribe helps providers expedite the patient flow and improve medical record documentation speed and accuracy. A scribe functions under the direct supervision of the Corporation. The Corporation is ultimately responsible for all documentation in the medical record, including entries made by scribes. Corporation must ensure that all documentation in the medical record conforms to the Hospital policy, and all legal/regulatory requirements. Under no circumstances may scribes provide clinical services. Corporation and its subcontractor scribe(s) shall comply with all applicable Hospital policies, including, but not limited to Hospital's policy on the utilization of scribes. In utilizing scribes, Corporation shall comply with all terms and conditions of this Contract, including, but not limited to, Part VIII. Corporation shall be fully responsible for the acts and omissions of the scribes that its Practitioners utilize for medical record documentation.

6.04 Subcontracting

Corporation agrees not to enter into any subcontracts for work contemplated under the Contract without first obtaining written approval from Hospital. Any subcontractor shall be subject to the same terms and conditions as Corporation. Corporation shall be fully responsible for the performance and payments of any subcontractor's contract.

6.05 Taxes and Workers' Compensation

Corporation shall assume sole and exclusive responsibility for payment of its federal and state income taxes, its federal social security taxes, and for maintaining insurances as specified in this Contract, including, but not limited to, workers' compensation insurance. Corporation agrees that County shall not be responsible for providing for the above taxes and insurance on behalf of Corporation; and the Corporation agrees to defend, indemnify, and hold harmless County from any and all actions and/or claims which seek to collect said taxes and insurance from County.

Without in any way affecting the indemnity herein provided and in addition thereto, the Corporation shall secure and maintain throughout the contract term the following Workers' Compensation/Employers Liability insurance with limits as shown:

Workers' Compensation/Employers Liability

A program of Workers' Compensation insurance or a State-approved Self-Insurance Program in an amount and form to meet all applicable requirements of the Labor Code of the State of California, including Employer's Liability with two hundred- and fifty-thousand-dollar (\$250,000) limits, covering all persons, including volunteers, providing Services on behalf of the Corporation and all risks to such persons under this Contract.

If Corporation has no employees, it may certify or warrant to County that it does not currently have any employees or individuals who are defined as "employees" under the Labor Code and the requirement for Workers' Compensation coverage will be waived by the County's Director of Risk Management.

With respect to contractors that are non-profit corporations organized under California or Federal law, volunteers for such entities are required to be covered by Workers' Compensation insurance.

6.06 Other Indemnity/Insurance

A. Professional Liability Indemnity

County shall indemnify Corporation as is provided by the Professional Liability Indemnity Clause, which is attached hereto as Exhibit "C" and is incorporated herein by this reference. Coverage shall be provided to Corporation/subcontractors as detailed in "Breakdown of Coverage for Corporations and Subcontractors" hereto attached as Exhibit "D." Notwithstanding any other provisions in this Contract, a Practitioner shall not be indemnified as provided in Exhibit "C" until such Practitioner is granted clinical privileges as a Medical Staff member of the Hospital and is approved by the Hospital Director as a Practitioner on Appendix C. For the avoidance of doubt, if a Practitioner is not listed on Appendix C, County has no duty to defend or indemnify the Practitioner.

B. General Liability Insurance

Throughout the term of this Contract, Corporation shall carry general liability insurance covering all operations performed by or on behalf of Corporation providing coverage for bodily injury and property damage with a combined single limit of not less than one million dollars (\$1,000,000), per occurrence. The policy coverage shall include:

- a. Premises operations and mobile equipment.
- b. Products and completed operations.
- c. Broad form property damage (including completed operations).
- e. Personal injury.
- f. Contractual liability.
- g. \$2,000,000 general aggregate limit.

C. Insurance Requirements

Corporation's general liability policy shall contain additional endorsements naming the County and its officers, employees, agents and volunteers as additional named insured with respect to liabilities arising out of the performance of Services hereunder. The additional insured endorsements shall not limit the scope of coverage for the County to vicarious liability but shall allow coverage for the County to the full extent provided by the policy. Such additional insured coverage shall be at least as broad as Additional Insured (Form B) endorsement form ISO, CG 2010.11 85. Corporation shall require the carriers of required coverages to waive all rights of subrogation against the County, its officers, employees, agents, volunteers, contractors and subcontractors. All general liability insurance coverage provided

shall not prohibit Corporation and Corporation's employees or agents from waiving the right of subrogation prior to a loss or claim. Corporation hereby waives all rights of subrogation against the County. Unless otherwise approved by County Risk Management, Corporation's insurance policies shall be written by insurers authorized to do business in the State of California and with a minimum "Best" Insurance Guide rating of "A- VII". Upon Hospital's request, Corporation shall furnish Certificates of Insurance evidencing the insurance coverages and additional endorsements required under this Contract.

6.07 Disagreement

Any questions or disagreement concerning standards of professional practice or the character of Services furnished in the Department shall be processed according to the Hospital's Medical Staff Bylaws as are in effect from time to time.

6.08 Status of Parties

- A. The parties hereby expressly understand and agree that this Contract is not intended and shall not be construed to create a relationship of agent, servant, employee, partnership, joint venture, or association between Corporation and County but is rather a Contract by and between independent contractors.
- B. The parties hereby expressly understand and agree that their employees, agents, and independent contractors are not the employees or agents of the other party for any purpose, including, but not limited to, compensation for services, employee welfare and pension benefits, health insurance, other fringe benefits of employment, or workers' compensation insurance.

6.09 Assignment

Nothing contained in this Contract shall be construed to permit assignment or delegation by Corporation of any rights or duties under this Contract and such assignment or delegation is expressly prohibited without the written consent of the County.

6.10 Contract Amendments

Corporation agrees that any alterations, variations, modifications, or waivers of the provisions of the Contract shall be valid only when they have been reduced to writing, duly signed by both parties and attached to the original of the Contract and approved by the required persons and/or organizations. No waiver by any party of any term or condition of this Contract, in any one or more instances, shall be deemed to be or construed as a waiver of the same or any other term or condition of this Contract on any future occasion. All remedies, either under this Contract or by law or otherwise afforded, will be cumulative and not exclusive.

6.11 Rules of Construction

The language in all parts of this Contract shall in all cases be construed as a whole, according to its fair meaning, and not strictly for or against either the County or the Corporation. Section headings in this Contract are for convenience only and are not to be construed as a part of this Contract or in any way limiting or amplifying the provisions hereof. All pronouns and any variations thereof shall be deemed to refer to the masculine, feminine, neuter, singular or plural, as the identifications of the person or persons, firm or firms, corporation or corporations may require.

6.12 Governing Law/Venue/Attorney's Fees.

This Contract is made and entered into in the State of California, and shall in all respects be interpreted, enforced and governed by and under the laws of the State of California. The parties acknowledge and agree that this Contract was entered into and intended to be performed in San Bernardino County, California. The parties agree that the venue of any action or claim brought by any party to this Contract will be the Superior Court of California, County of San Bernardino, San Bernardino District. Each party hereby waives any law or rule of the court, which would allow them to request or demand a change of venue. If any action or claim concerning this Contract is brought by any third-party and filed in another venue, the parties hereto agree to use their best efforts to obtain a change of venue to the Superior Court of California, County of San Bernardino, San Bernardino District. If any legal action is instituted to enforce any party's rights hereunder, each party shall bear its own costs and attorney's fees, regardless of who is the prevailing party.

6.13 Severability

The provisions of this Contract are specifically made severable. If any clause, provision, right and/or remedy provided herein is unenforceable or inoperative, the remainder of this Contract shall be enforced as if such clause, provision, right and/or remedy were not contained herein.

6.14 Alternative Dispute Resolution

- A. In the event the Hospital determines that service is unsatisfactory, or in the event of any other dispute, claim, question or disagreement arising from or relating to this Contract or breach thereof, the parties hereto shall use their best efforts to settle the dispute, claim, question or disagreement. To this effect, they shall consult and negotiate with each other in good faith and, recognizing their mutual interests, attempt to reach a just and equitable solution satisfactory to both parties.
- B. Notwithstanding the above, nothing herein shall preclude either party from pursuing its legal remedies at law in the event a mutually satisfactory solution is not reached.

6.15 Term of Contract

This Contract shall be effective January 1, 2024 ("Effective Date"), and shall remain in effect through December 31, 2026, unless otherwise terminated pursuant to Section 6.16.

6.16 Termination

This Contract may be terminated by either party for any reason or no reason upon one hundred twenty (120) days prior written notice to the other party.

County shall also have the right to terminate this Contract immediately upon the occurrence of any one or more of the following events; however, all of the County's remedies shall survive such termination:

- A. Corporation is unable or unwilling to perform the duties required by this Contract, as determined in the reasonable discretion of the Hospital;
- B. Corporation is suspended or excluded from the Medicare or Medi-Cal program;
- C. Material breach, by Corporation, of any term or condition of this Contract. Unless the breach cannot be cured, Hospital shall provide thirty (30) days advance written notice to Corporation specifying the nature of the breach. Corporation shall have thirty (30) days from the date of the notice in which to remedy the breach. If after thirty (30) days Corporation has not cured the breach to the satisfaction of the County, County may terminate this Contract upon notice to the Corporation;

- D. Corporation becomes insolvent, files a petition to declare bankruptcy or for reorganization under the bankruptcy laws of the United States, a trustee in bankruptcy or a receiver is appointed by appropriate authority for Corporation, or upon an assignment of a substantial portion of the assets of Corporation for the benefit of creditors; and
- E. Any other basis for which immediate termination is explicitly permitted as specified in the terms of this Contract.

Corporation understands that Hospital has no control over the County Departments and whether those departments will need to utilize Corporation's Services for the entire term of this Contract. As such, Hospital and County reserves the right to terminate Corporation's provision of Services to any County Department without cause with thirty (30) days written notice.

The Hospital Director is authorized to terminate this Contract or any services rendered by Corporation to the County Departments.

6.17 Changes in Healthcare Coverage, Delivery and/or Reimbursement

In the event that any legislative or regulatory change in healthcare coverage, delivery or reimbursement (including any change in Medicare or Medicaid policies or rules), whether state or federal, has, or is reasonably anticipated by either party to have, a significant adverse impact on a party hereto, the affected party shall have the right to require that the other party renegotiate the terms of this Contract. If after a good faith effort by each of the parties to resolve that significant adverse impact, it is determined that this Contract cannot be modified to address the significant adverse impact in a manner satisfactory to each of the parties consistent with applicable laws, then either party may terminate this Contract by giving thirty (30) days written notice to the other.

6.18 Notices

All written notices provided for in this Contract or which either party desires to give to the other shall be deemed fully given, when made in writing and either served personally, or deposited in the United States mail, postage prepaid, or by courier services or messenger, and addressed to the other party as follows:

To County: Arrowhead Regional Medical Center
400 North Pepper Avenue
Colton, California 92324-1819
Attention: Hospital Director

To Corporation: CEP America - California
2100 Powell Street, Suite 400
Emeryville, CA 94608-1803
Attention: David Birdsall, COO
cc: Legal Dept.

Any such notice to any party deposited in the mail for delivery by the United States Postal Service shall be deemed for all purposes of this Contract to have been given 48 hours after such deposit. Notice delivered by personal service, courier or messenger shall be deemed given upon delivery.

6.19 Former County Officials

Corporation agrees to provide or has already provided information on former San Bernardino County administrative officials (as defined below) who are employed by or represent Corporation. The

information provided includes a list of former County administrative officials who terminated County employment within the last five years and who are now officers, principals, partners, associates or members of the business. The information also includes the employment with or representation of Corporation. For purposes of this provision, "County administrative official" is defined as a member of the Board of Supervisors or such officer's staff, County Administrative Officer, or member of such officer's staff, County department or group head, assistant department or group head, or any employee in the Exempt Group, Management Unit, or Safety Management Unit. If during the course of administration of this Contract, the County determines that the Corporation has made a material misstatement or misrepresentation or that materially inaccurate information has been provided to County, this Contract may be immediately terminated. If this Contract is terminated according to this provision, the County is entitled to pursue any available legal remedies.

6.20 Inspection of Records

Corporation agrees that only to the extent required by Section 952 of Public Law 96-499, and the regulations promulgated thereunder, those portions of the books and records of the Corporation which relate to the Corporation's activities pursuant to this Contract will be available to the Secretary of Health and Human Services or the Comptroller-General for a period of four (4) years after the relevant services are furnished. If Corporation provides services hereunder through a subcontract with a related party, the subcontract must allow similar access by the Secretary of Health and Human Services or the Comptroller-General, and their duly authorized representatives to the subcontract and the subcontractor's books, documents, and records.

6.21 Disability or Death

Within thirty (30) days of the approval of this Contract, Corporation shall submit a plan to provide for the continuity of Services to Hospital in the event of the death or disability of any Practitioner(s) providing services under this Contract. The parties agree that at any time it is decided that the primary responsible Practitioner or Department Chair, as the case may be, is permanently disabled or otherwise unable to perform his or her duties under the Contract, Corporation shall have three (3) months from the disability date to provide the services of another Practitioner acceptable to County in accordance with this Contract. Further, County shall have the right from the date of disability to select or otherwise approve an acting chair, subject to any restrictions or process in the Medical Staff Bylaws, to serve in such capacity until the expiration of the Contract or his or her replacement is approved in accordance with this Contract or the Medical Staff Bylaws, whichever is applicable. The parties expressly agree that at all times County shall receive the Services and be provided with all personnel as set forth and required in this Contract.

6.22 Discrimination

During the term of the Contract, Corporation shall not discriminate against any employee or applicant for employment, patient or person because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual orientation, age, or military and veteran status. Corporation shall comply with Executive Orders 11246, 11375, 11625, 12138, 12432, 12250, 13672, Title VI and VII of the Civil Rights Act of 1964, the California Fair Employment and Housing Act and other applicable Federal, State and County laws and regulations and policies relating to equal employment and contracting opportunities, including laws and regulations hereafter enacted. Corporation shall also comply with Exhibit "B."

6.23 Incorporation by Reference

This Contract incorporates by reference any and all other Contracts in effect between the Corporation and County, to the extent applicable and permitted by law, for services to County on behalf of Hospital

but not other County departments or agencies (except as stated in his Contract). This Contract also incorporates by reference Appendices A, B, C, D, E, F, G, H, I, and Exhibits A, B, C, D, E, F, G, and completed and signed Attachment A's, all of which are referenced in and considered part of this Contract. This Contract also incorporates by reference the recitals.

6.24 Entire Contract

This Contract contains the final, complete and exclusive Contract between the parties hereto. Any prior Contract promises, negotiations or representations relating to the subject matter of this Contract not expressly set forth herein are of no force or effect. This Contract is executed without reliance upon any promise, warranty or representation by any party or any representative of any party other than those expressly contained herein. Each party has carefully read this Contract and signs the same of its own free will.

6.25 Improper Consideration

Corporation shall not offer (either directly or through an intermediary) any improper consideration such as, but not limited to, cash, discounts, service, the provision of travel or entertainment, or any items of value to any officer, employee or agent of the County in an attempt to secure favorable treatment regarding any Contract awarded by County.

The County, by written notice, may immediately terminate any Contract if it determines that any improper consideration as described in the preceding paragraph was offered to any officer, employee or agent of the County with respect to the proposal and award process. This prohibition shall apply to any amendment, extension, or evaluation process once a Contract has been awarded.

Corporation shall immediately report any attempt by a County officer, employee or agent to solicit (either directly or through an intermediary) improper consideration from Corporation. The report shall be made to the supervisor or manager charged with supervision of the employee or to the County Administrative Office. In the event of a termination under this provision, the County is entitled to pursue any available legal remedies.

6.26 Authorization

The undersigned individuals represent that they are fully authorized to execute this Contract on behalf of the named parties.

6.27 Excluded Practitioners

Corporation shall comply with the United States Department of Health and Human Services (HHS), Office of Inspector General (OIG) requirements related to eligibility for participation in federal and state health care programs. State and federal law prohibits any payment to be made by Medicare, Medi-Cal or any other federal health care program for any item or service that has been furnished by an individual or entity that has been excluded or has been furnished at the medical direction or prescription of a Practitioner, or other authorized person, who is excluded when the person furnishing the item or service knew or had reason to know, of the exclusion.

Corporation represents that it has screened all current and prospective employees, Practitioners, partners and persons having five percent (5%) or more of direct ownership or controlling interest of the Corporation for eligibility against the OIG's List of Excluded Individuals/Entities ("LEIE") to ensure that ineligible persons are not employed or retained to provide services related to this contract, and will continue to periodically screen such individuals and/or entities against the LEIE. The OIG's website can be accessed at: <http://oig.hhs.gov/fraud/exclusions.asp>.

Corporation shall have a policy regarding sanctioned or excluded employees, Practitioners, partners and owners that includes the requirement for these individuals to notify the Corporation should the individual become sanctioned or excluded by OIG.

Corporation shall immediately notify the Hospital's Chief Compliance Officer should an employee, Practitioner, partner or owner become sanctioned or excluded by OIG and/or HHS and prohibit such person from providing any services, either directly or indirectly, related to this Contract.

6.28 Master List

The Hospital represents and warrants to the Corporation that this Contract, together with any other contracts between the Hospital and the Corporation, and between the Hospital and any Practitioner providing services on behalf of Corporation, will be included on the master list of Practitioner contracts maintained by the Hospital.

6.29 Signatures

This Contract may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Contract. The parties shall be entitled to sign and transmit an electronic signature of this Contract (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Contract upon request.

PART VII

CONFLICT OF INTEREST

7.01 Conflict of Interest

A. Statement of Economic Interests

As provided in Section 2.02(G) of this Contract, Corporation and Practitioners shall comply with all applicable conflict of interest laws, rules and requirements, including, but not limited to, Government Code section 1090 et seq., the County's Conflict of Interest Code, and this Part VII.

Corporation shall cause its Practitioner employees, Practitioners otherwise affiliated or attached to it and Practitioners who subcontract with it or who subcontract with its subcontractors, and who are members of the Hospital Active and Provisional Medical Staff, and who as a part of their duties under this Contract make or participate in making decisions regarding the procurement or use of medical equipment or supplies, or other decisions having a material financial effect, to complete an annual Statement of Economic Interests as required by San Bernardino County.

Corporation shall inform Hospital of any ownership, investment or compensation interest or arrangement of Corporation which may present a professional, financial, Stark Law, or any other federal or state conflict of interest or materially interferes with Corporation's performance of its duties under this Contract.

B. Political Contributions

Corporation has disclosed to the County using Exhibit E, whether it has made any campaign contributions of more than \$250 to any member of the County Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, Auditor-Controller/Treasurer/Tax Collector and the District Attorney] within the earlier of: (1) the date of the submission of Corporation's proposal to the

County (if applicable), or (2) 12 months before the date this Contract was approved by the County Board of Supervisors. Corporation acknowledges that under Government Code section 84308, Corporation is prohibited from making campaign contributions of more than \$250 to any member of the Board of Supervisors or County elected officer for 12 months after the County's consideration of the Contract.

In the event of a proposed amendment to this Contract, the Corporation will provide the County a written statement disclosing any campaign contribution(s) of more than \$250 to any member of the Board of Supervisors or other County elected officer within the preceding 12 months of the date of the proposed amendment.

Campaign contributions include those made by any agent/person/entity on behalf of the Corporation or by a parent, subsidiary or otherwise related business entity of Corporation.

PART VIII

PRIVACY AND SECURITY OF HEALTH RECORDS

8.01 The Corporation and the Hospital shall protect the privacy and provide for the security of patient identifiable health information and patient financial information disclosed to them in compliance with all applicable state laws and the Federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the regulations promulgated thereunder by the U.S. Department of Health and Human Services ("HIPAA"), the California Confidentiality of Medical Information Act ("CMIA") and all other applicable laws.

Any unauthorized acquisition, access, use, or disclosure of protected health information by Corporation or its staff may result in disciplinary action up to and including termination of privileges and services at Hospital.

8.02 Corporation and Hospital shall enter into written agreements with agents and subcontractors to whom the Corporation or Hospital discloses or provides access to patient identifiable health information that impose the same restrictions and conditions on such agents and subcontractors that apply to Corporation or Hospital with respect to such PHI, and that require compliance with all appropriate safeguards as required by HIPAA. Corporation and Hospital shall also enter into a separate business associate agreement if required by law.

8.03 In addition to complying with all applicable federal and state laws governing the privacy and security of patient information, including, without limitation, HIPAA and CMIA, the parties also acknowledge and agree that Hospital is a "covered entity," as such term is defined under HIPAA, and that with respect to all services provided to patients of Hospital, Corporation shall participate as a covered entity in an Organized Health Care Arrangement ("OHCA") with Hospital, and shall comply with Hospital's health information privacy and security policies and procedures, and with its notice of privacy practices.

8.04 Corporation shall maintain and use appropriate and administrative, technical and physical safeguards, in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security regulations and any other applicable implementing regulations issued by the U.S. Department of Health and Human Services, and all other laws and regulations relating to privacy and confidentiality of PHI, reasonably designed (i) to ensure the integrity, confidentiality, security and availability of PHI (ii) to prevent any reasonably anticipated unauthorized or prohibited use or disclosure of PHI received from Hospital; (iii) to protect against any reasonably anticipated threats or hazards to the security or integrity of such information; and (iv) to ensure compliance with this Contract by Corporation's employees. Corporation agrees to keep these security measures current and to document these security measures in written policies, procedures or guidelines. Specifically, without limitation, each

party shall properly use all necessary security procedures to ensure that all transmissions of data are authorized and to protect the data from improper access, use or disclosure.

SAN BERNARDINO COUNTY

►

Dawn Rowe, Chair, Board of Supervisors

Dated: _____
SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

By _____
Deputy

CEP AMERICA - CALIFORNIA

(Print or type name of corporation, company, contractor, etc.)

By ► _____
(Authorized signature - sign in blue ink)

Name _____
(Print or type name of person signing contract)

Title _____
(Print or Type)

Dated: _____

Address _____

FOR COUNTY USE ONLY

Approved as to Legal Form
► _____
Charles Phan, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
► _____
Date _____

Reviewed/Approved by Department
► _____
William L. Gilbert, Hospital Director
Date _____

APPENDIX "A"
Provider Services

Inpatient Services

- N/A

Outpatient Services and Clinics

- Emergency Department – 24 hours a day, 7 days a week
- ARMC Family Health Center – Redlands (Redlands, CA)*
 - Monday: 8:00am – 5:00pm
 - Tuesday: 8:00am – 5:00pm
 - Wednesday: 8:00am – 5:00pm
 - Thursday: 8:00am – 5:00pm
 - Friday: 8:00am – 5:00pm
 - Saturday: Closed
 - Sunday: Closed
- Mobile Medicine
- Street Medicine
- Baker-2-Vegas Law Enforcement Relay Race
- West Valley Detention Center (Rancho Cucamonga, CA)
- Central Detention Center (San Bernardino, CA)
- Glen Helen Rehabilitation Center (Devore, CA)
- High Desert Detention Center (Adelanto, CA)
- San Bernardino County Probation Services
- San Bernardino County Fire District Medical Directorship Services

*Hours can be modified based on clinic need as mutually agreed upon by Corporation and the Hospital Director.

Off-hours is defined as all hours beyond the clinic hours set forth above.

APPENDIX “B”
APPOINTMENTS OF CORPORATION LEADERSHIP

- Department Chairperson (1.0 FTE): Rodney Borger, MD
- ACGME Program Director, Emergency Medicine (0.9 FTE): Carol Lee, MD
- ACGME Associate Program Director, Emergency Medicine (0.5 FTE): Benjamin Archambeau, DO and Gregory Fenati, DO
- PA Program Director, EM PA Fellowship (0.5 FTE): Dennis Tankersley, PA-C
- Designated Institutional Officer (DIO) (1.0 FTE): Carol Lee, MD
- Sheriff/Coroner/Public Administrator Detention Center Chief Medical Officer (1.0FTE): Jeff Haga, MD
- San Bernardino County Probation Department Chief Medical Officer (1.0 FTE): Michael Neeki, DO
- San Bernardino County Fire Protection District Medical Director (0.6 FTE): Troy Pennington, DO

People in the various positions can be changed upon mutual agreement of Corporation and the Hospital Director

Responsibilities:

Department Chairperson:

- A. Establish rules and regulations for the operation of the Department and appropriate Sections and Units within the Department
- B. Establish criteria for the issuing of clinical privileges in the Department and all of its Sections for approval by the Medical Executive Committee of the Hospital’s Medical Staff and Governing Body.
- C. Review credentials of all physicians applying for clinical privileges in the Department and all its Sections and make appropriate recommendations to the Credentials and Medical Executive Committees of the Medical Staff.
- D. Establish proctoring of the clinical and educational performance and activities of all newly acquired clinical privileges for all physicians of the Department and all its Sections in accordance with any applicable rules and regulations, including those of the Hospital and of its Departments, Divisions, and Sections.
- E. Review, on an annual basis, the clinical and educational performances of all staff physicians with clinical privileges in the Department and of all its Sections.
- F. Establish in conjunction with the DIO a core curriculum designed to meet the educational requirements for the teaching of Emergency Medicine and its subspecialties to said Residents, to include providing the services of one and a half (1.5) FTE Resident Coordinators.
- G. Ensure that such a core curriculum is established and presented on an annual basis and updated as is necessary.
- H. Ensure that the medical records of all patients treated by physician members of the Department and all its Sections are completed in a timely and accurate manner.
- I. Prepare and submit to the DIO a written evaluation of the performance of all Residents having performed in the Department.
- J. Such evaluation shall be submitted timely in accordance with GME policy.
- K. Meet all pertinent requirements and performing all duties and functions relating to the Department which may be necessary to meet the terms of affiliation agreements established between Hospital and medical schools, universities, colleges and other institutions or agencies.
- L. Cover any other appropriate units or responsibilities as designated by the Chair of the Department and the Hospital’s Medical Director and accepted by the Corporation.
- M. Participate and cooperate in Hospital’s Quality Assurance Program.
- N. Carry out all additional duties and functions of the Department Chairs and Vice-Chairs as delineated in the Bylaws of the Hospital’s Medical Staff as are in effect from time to time.
- O. Establishing, implementing, and overseeing protocols for rendering medical care to prisoner patients in the Emergency Room.

- P. Establishing and implementing protocols for care rendered in the CCA and the Trauma Area.
- Q. Overseeing the management and medical care rendered in the CCA and the Trauma Area.
- R. Establishing, implementing, and overseeing an adequate Quality Assurance Program.
- S. Supervising the activities of the appointed Emergency Department Physicians.
- T. Providing management and patient care in the NCA for those patients that cannot be seen in a timely manner in the Ambulatory clinics.
- U. Ensure that all Practitioners and non-professional staff in the Department comply with all relevant Federal and State laws and regulations and comply with applicable provisions of the following:
 - a. Arrowhead Regional Medical Center Policy and Procedures
 - b. County of San Bernardino Policy and Procedures
 - c. California Code of Regulations – Title 22
 - d. Centers for Medicare and Medicaid Services – Conditions of Participation
 - e. Healthcare Facilities Accreditation Program
 - f. The Health Insurance Portability and Accountability Act
 - g. Joint Commission Accreditation Program

PA Program Director ACGME, EM PA Fellowship:

- A. At the direction of the Medical Director and under the supervision of the Lead Physician Assistant, the EMPA Fellowship Program Director shall perform all responsibilities necessary for the successful operation of the EMPA Fellowship Program.
- B. Minimum Qualifications:
 - a. Must be employed by CEP as a Physician Assistant
 - b. Must hold current and unrestricted NCCPA and California State PA License.
 - c. Must have experience as a Physician Assistant in the ACC or ED setting
 - d. Ability to organize priorities and execute multiple objectives
 - e. Ability to lead and mentor peer group
 - f. Superior oral and written communication skills, ability to negotiate
 - g. Preferred; Graduate level education in Physician Assistant Studies or Management related field
 - h. Skill in exercising initiative, judgment, discretion and decision-making to achieve program objectives.
 - i. Skill in establishing and maintaining effective working relationships with PA Fellows and physicians.
- C. Typical Physical Demands:
 - a. Must be physically capable to complete clinical and surgical duties.
 - b. Requires sitting and walking, prolonged standing, with daily occasional stooping, reaching, and bending.
 - c. Occasional lifting up to fifty pounds.
 - d. Hearing must be in the normal range for telephone and personal communication.
 - e. Requires manual dexterity sufficient to operate keyboards and other office equipment.
 - f. Must have the ability to communicate effectively and clearly.
- D. Responsibilities

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| <ul style="list-style-type: none"> a. Organizes & coordinates the Fellowship’s master schedule. b. Coordinates the recruitment and marketing activities for the Fellowship c. Evaluates and processes applications to the Fellowship d. Performs periodic reviews program curricula e. Evaluates EMPA Fellow’s performance. f. Communicates with Medical Director and Program Faculty the status and needs of the program. | <p>Time Requirement 60 Hours / month</p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|

- g. Establishes a core curriculum designed to meet educational requirements on an annual basis in conjunction with the Medical Director and assigned Program Faculty.
- h. Develops and updates as needed protocols for the proper functioning of the program
- i. Coordinates fellow schedule with the emergency room providers to ensure coverage.
- j. Monitors the schedule of the physician lectures and their contents to ensure that fellows are receiving the necessary instruction serves as a member of hospital/clinic committees when appointed.
- k. Represents the EMPA Fellowship Program at departmental meetings
- l. Responsible for fiscal management of EMPA Fellowship Program
- m. Represents the EMPA Fellowship in local, regional, and national professional organizations
- n. Maintains proper records and documentation of fellow's performance.
- o. Performs final evaluation, review of cumulative performance, and assessment of competency with all graduating fellows.
- p. Performs other EMPA related functions as directed by Lead PA.

ACGME Associate Program Director, Emergency Medicine

- A. At the direction of the Medical Director & Lead PA and under the supervision of the EMPA Fellowship Program Director, the EMPA Fellowship Program Associate Director shall perform Duties necessary for the day to day operations of the Fellowship with a focus on the development and delivery of educational material.
- B. Minimum Qualifications:
 - a. Must be employed by CEP as a Physician Assistant
 - b. Must hold current and unrestricted NCCPA and California State PA License.
 - c. Must have experience as a Physician Assistant in the ACC or ED setting
 - d. Ability to organize priorities and execute multiple objectives
 - e. Ability to lead and mentor peer group
 - f. Superior oral and written communication skills, ability to negotiate
 - g. Preferred; Graduate level education in Physician Assistant Studies or Management related field
 - h. Skill in exercising initiative, judgment, discretion and decision-making to achieve program objectives.
 - i. Skill in establishing and maintaining effective working relationships with PA Fellows and physicians.
- C. Typical Physical Demands:
 - a. Must be physically capable to complete clinical and surgical duties.
 - b. Requires sitting and walking, prolonged standing, with daily occasional stooping, reaching, and bending.
 - c. Occasional lifting up to fifty pounds.
 - d. Hearing must be in the normal range for telephone and personal communication.
 - e. Requires manual dexterity sufficient to operate keyboards and other office equipment.
 - f. Must have the ability to communicate effectively and clearly.
- D. Responsibilities

| | |
|---------------------------------------------------------------------------------------------|------------------|
| | Time Requirement |
| a. Builds / maintains didactic curriculum | 20-30 Hours / |
| b. Organizes lecture schedule | Month |
| c. Develops and edits didactic educational material | |
| d. Is primary presenter for didactic sessions, is responsible for securing guest lecturers. | |

- e. Is present for all didactic sessions unless approved by Program Director.
- f. Counsels Fellows on progress through educational pathway
- g. Co-evaluates Fellows during quarterly evaluation sessions
- h. Monitors for & reports performance / learning difficulties
- i. Performs additional EMPA Fellowship related duties as assigned by Program Director.

ACGME Program Director and Associate Program Director:

The program director and associate program director shall perform duties in alignment with ACGME requirements and regulations.

Designated Institutional Official (DIO):

- a. Ensure compliance with the Accreditation Council for Graduate Medical Education's (ACGME) Institutional Requirements as well as other accredited programs, to support the institutional, common, and specialty-/subspecialty-specific program requirements, as well as applicable policies and procedures;
- b. Provide oversight and administration of the residents, medical students, and other students under the purview of the Graduate Medical Education (GME) Department;
- c. Support accreditation and regulatory activities in collaboration with GME program staff;
- d. Direct and manage the program review process;
- e. Monitor and evaluate the quality of the program, the performance of the residents, medical students, and opportunities for program improvement;
- f. Serve as liaison with ACGME and other accredited programs to ensure readiness for all institutional reviews.
- g. Work with residency programs to foster research and scholarly activity;
- h. Support and implement new Quality Improvement (QI) services in partnership with ARMC's patient safety officer physician and quality improvement leaders;
- i. Research, inform and guide Quality Control (QC) teams;
- j. Understand, utilize and teach Plan, Do, Study, Act (PDSAs) model;
- k. Ensure medical students, residents, and program directors are aligned with ARMC's and San Bernardino's strategic initiatives;
- l. Serve as a team member of the ARMC Institutional Review Board (IRB);
- m. Lead ARMC's diversity, equity, and inclusion program for GME and medical students;
- n. Serve as a member on ARMC's management team. Participate in the development of departmental programs, policies, budgets, goals, strategic planning and objectives
- o. Provide the management team with a clinical perspective on all matters relating to services in the Graduate Medical Education Department;
- p. Meet goals to improve employee engagement, patient satisfaction, and other quality measures;
- q. Collaborate with department chairs and medical directors to ensure service delivery is both timely and appropriate;
- r. Represent ARMC on various standing committees and at meetings and events, both Countywide and nationally, as requested by Hospital Administration;
- s. Participate in medical and administrative rounds to ensure the highest quality of care is provided hospital-wide;
- t. Assist in aspects of quality improvement and patient safety throughout ARMC;
- u. Support and enforce the regulatory and accreditation requirements for the ACGME, The Joint Commission (TJC), Center for Medicare/Medicaid Services (CMS) Conditions of Participation, the California Department of Health, and all other applicable regulatory and/or accrediting agencies.
- v. Provide periodic educational forums for staff physicians and students;
- w. Support ARMC on all legal actions relative to care, treatment and services at ARMC;
- x. Perform other duties as assigned by the ARMC Hospital Director and or designee.

Base Station Physician

This role involves providing medical oversight and guidance to pre-hospital emergency care providers, including paramedics and emergency medical technicians (EMTs). The Base Station Physician is involved in protocol development, quality assurance, and education for EMS personnel.

- Cooperate with ARMC prehospital liaison designee regarding MICN education, quality improvement (QI) programs and the prehospital EMS and trauma education.
- Help with the QI process for referred and QI cases for in-depth review and improvement of the quality of patient care.
- Actively participates in ARMC trauma and EMS committees.
- Review cases referred by the trauma committee for the quality improvement and improve patient quality of care and education.
- Actively participate in ARMC trauma committee meetings.
- Represent ARMC Base station in the regional and state trauma meeting and conferences.

Research Program Coordinator/Grant Writer

This role oversees the planning and execution of research projects and helps search for funding for research and quality improvement endeavors by identifying suitable opportunities. The incumbent performs a combination of research coordination and grant writing tasks, depending on the organization's structure and needs.

- Coordinates and manages all aspects of research projects, including timelines, resources, and deliverables
- Monitors progress and addresses any issues or challenges that may arise with timelines
- Provides training and mentorship to research assistants, residents, and students involved in research projects
- Fosters a supportive and educational environment for individuals gaining research experience
- Collaborates with researchers to prepare manuscripts, presentations, and other materials for the dissemination of research findings
- Fosters teamwork among attending physicians, resident doctors, and medical students for emergency medicine research
- Supports peer-reviewed publications in medical journals
- Develops and maintains standard operating procedures for research activities.
- Ensures compliance with reporting deadlines and requirements.

APD - Director of Research

This role serves as the key leader responsible for shaping and overseeing the research program within the Arrowhead Regional Medical Center Emergency Medicine Department. This role involves strategic planning and program management to facilitate high-quality research initiatives. The director ensures compliance with ethical and regulatory standards, fosters collaboration among multidisciplinary teams, and supports researchers in disseminating findings through publications and presentations. Additionally, responsibilities include mentorship, community engagement, and addressing the unique healthcare needs of the local population. The director plays a vital role in advancing evidence-based practices and contributing to the overall improvement of emergency medical care.

- Develops and implements a strategic vision research in emergency medicine, aligning with the ARMCs goals and priorities.
- Oversees and manages the research program, including the planning, initiation, and execution of research projects. This involves coordinating with researchers, clinicians, and support staff.

- Facilitates collaboration between researchers, physicians, and other healthcare professionals to foster a multidisciplinary approach to research in emergency medicine.
- Ensures that all research activities comply with ethical standards, regulatory requirements, and institutional policies.
- Implements and monitoring quality assurance measures to maintain high research standards. This involves conducting audits, evaluating data integrity, and ensuring adherence to research protocols.
- Oversees the dissemination of research findings through publications, presentations, and other avenues. This includes supporting researchers in preparing manuscripts and presentations for conferences.
- Provides guidance and mentorship to researchers, residents, and other staff involved in research activities.
- Organizes training programs for Emergency Medicine residents and students.
- Establishes connections with the local community and collaborates on research projects that address the specific healthcare needs and challenges faced by the population served by the ARMC and community partners.

APD - Director of Ultrasound

This role oversees and manages the ultrasound education, training and quality of care in the Emergency department at ARMC.

- Provides leadership and direction to the students, residents, fellows with ultrasound education, including technicians and support personnel.
- Stays updated on advancements in ultrasound technology and integrate new practices into departmental protocols.
- Collaborates with physicians, radiologists, and other healthcare professionals to optimize patient care through effective use of ultrasound.
- Facilitates communication and coordination between the ultrasound department and other healthcare departments.
- Contributes to the educational and training initiatives for ultrasound department staff.
- Participates in research projects related to ultrasound applications, contributing to the advancement of knowledge in the field.
- Explores and implements innovative approaches to improve the efficiency and effectiveness of ultrasound services.

Full-Time Practitioners of the Department of Emergency Medicine

The full-time Practitioners shall be administratively and clinically responsible for all activities occurring in the Department during their shift. These shall include, but not be limited to the following:

A. Administrative

- a. Resolve the day-to-day problems that arise in the Department.
- b. Administrative responsibility for the Emergency Department in both the CCA and Trauma Area so as to increase the efficiency of rendering care to all patients seeking treatment in the Emergency Room.
- c. Provide interim care and follow-up for those patients requiring further work-up and diagnostic studies until the patient's appointment with their primary care provider. Follow established procedures and protocols.
- d. Inform and consult with the Department's Chair or Clinical Director regarding any problems or issues in the Department.
- e. Assist the Clinical Director in supervising and providing education to the residents, medical students, and P.A. students assigned to the Department.

- f. Be a resource for residents, medical students, P.A. students, nurse practitioners, and nursing personnel.
 - g. Participate in Continuous Quality Improvement Programs (CQIP) and Continuous Quality Management (CQM) of the institution and the Department of Emergency Medicine.
 - h. Participate in hospital's committees and department meetings, etc.
 - i. Any other duties assigned by the Department's Chair.
- B. Clinical
- a. Provide direct patient care to all patients requiring care in the CCA.

Full Time Practitioners shall:

- Maintain 80% attendance record for all department/committee meetings to which the Practitioner has been assigned
- Actively contribute to department/committee in a collaborative manner
- Arrive on time and stay throughout entire department/committee meetings (applies to all department chairs, program directors, vice chairs, and section directors as designated pursuant to Parts I, II, and III of this Contract).

Sheriff/Coroner/Public Administrator Detention Center Chief Medical Officer

- Collaborate with Sheriff's Health Care Administrator to plan and develop the health care program in detention facilities
- Review and approve policies and procedures in coordination with Sheriff's Health Care Administrator, including: nursing, physician, pharmacy and ancillary services.
- Review and approve standardized procedures for the nursing staff.
- Assist in the implementation of the Quality Improvement Program.
- All other duties and responsibilities as outlined in Appendix F.

In the event Corporation fails to provide such coverage, the parties agree that compensation due to Corporation, pursuant to Part IV of this Contract for administration of these positions, shall be reduced in proportion to the actual reduction in coverage of these positions.

APPENDIX "C"
CORPORATION PRACTITIONERS

| Practitioner Name | NPI Number |
|--------------------------|-------------------|
| Andrew Crouch | 1073877254 |
| Arnold Sin | 1649212408 |
| Benjamin Archambeau | 1831583442 |
| Carol Lee | 1043251143 |
| Colin MacNeil | 1790021285 |
| Deepak Chandwani | 1144264177 |
| Edward Pillar | 1295750941 |
| Gregory Fenati | 1033480165 |
| Ho-wang Yuen | 1275744369 |
| Jamshid Mistry | 1770897266 |
| Jeffrey Tsai | 1528003779 |
| Jessica Fujimoto | 1972953537 |
| Joel Labha | 1467837740 |
| Lisa Kinney-Ham | 1568635399 |
| Louis Tran | 1124135512 |
| Michael Neeki | 1982668430 |
| Nicholas Gastelum | 1528402948 |
| Nicholas Miniel | 1134311517 |
| Owen Kemp | 1528564226 |
| Pamela Lux | 1427090323 |
| Ricardo Padilla | 1417451592 |
| Rodney Borger | 1619917465 |
| Scott Meeker | 1548720659 |
| Troy Pennington | 1356366009 |
| PA/ PA Fellow | |
| Allison Kraft | 1831651736 |
| Anthony Yvanovich | 1841327491 |
| Brian Jimenez | 1255972436 |
| Christine Le | 1619544046 |
| Daniel Dubrow | 1851940423 |
| Ernest Newton | 1942604236 |
| Estefany Duarte | 1619531464 |
| Gary Felix | 1801296611 |
| James Stuart | 1073823035 |
| James Tankersley | 1174697551 |
| James Zapata | 1407414477 |
| Jiani Yu | 1558896225 |
| Jonathan Brummond | 1821104506 |
| Lawrence Gates | 1023059318 |
| Renee Lee | 1336729151 |
| Samad Sohail | 1831867159 |
| Scott McEvoy | 1649625526 |
| Sebastien Denis | 1588155543 |
| Tamara Gibbs | 1912345711 |
| Tanya Schrobilgen | 1578814117 |
| Thomas Chi | 1497220768 |

| | |
|------------------------------|------------|
| Travis Taggart | 1639540131 |
| Vy Lien | 1093040933 |
| Brenda Villarreal, PA FELLOW | 1932823697 |
| Juan Diaz, PA FELLOW | 1770269912 |
| Kevin Tyan, PA FELLOW | 1740862887 |
| Natalie Lam, PA FELLOW | 1417647751 |
| Noor Dakkak, PA FELLOW | 1265898126 |
| DET | |
| Ashok Melvani | 1447334099 |
| Brian Jarman | 1275971079 |
| Brian Jimenez | 1255972436 |
| Cuong Tran | 1750900635 |
| Cyrus Nguyen | 1750965448 |
| Danielle Weck | 1386263200 |
| Edward Pillar | 1295750941 |
| Elvin Chiang | 1194346106 |
| James Zapata | 1407414477 |
| Jason Calinisan | 1144583857 |
| Jeffrey Haga | 1902847320 |
| Jenny Rios | 1346283942 |
| Jiani Yu | 1558896225 |
| John Brewington | 1295357416 |
| John Yee | 1699788265 |
| Johnny Siu | 1346652179 |
| Jordan Storkersen | 1114580651 |
| Joshua Powers | 1790202141 |
| Joseph Kim | 1013413707 |
| Katharine McManus | 1396368189 |
| Lyn Pintelon | 1669467148 |
| Michael Tomkins | 1386914778 |
| Nancy Chung | 1275053688 |
| Niluk Senewiratne | 1043894835 |
| Rolando Uykimpang | 1992782163 |
| Rosemary Chequer | 1821068784 |
| Sabrina Uddin | 1407275217 |
| Sabry Ghaly | 1588706105 |
| Shin Liong | 1326150111 |
| Suvesh Chandiook | 1235112608 |
| Tegan Schmidt | 1144849902 |
| Thuy-My Le | 1821672445 |
| Thanh Ngo | 1124381231 |
| Tracey Wee | 1710920640 |
| Victor Cao | 1912572520 |
| Victoria Bennett | 1497066286 |
| Wendalee Rivera-Pacheco | 1083934400 |
| Xavier Bermudez | 1124414651 |
| Yuwen Cheng | 1114595337 |
| Yuliya Matolina | 1942867809 |
| REDLANDS | |
| Christina Tadrous | 1780922468 |
| Diem Trinh Le | 1780159806 |
| Edward Pillar | 1295750941 |

| | |
|--------------------|------------|
| Irina Turlea | 1407535933 |
| Jennifer Luong | 1548640899 |
| John Brewington | 1295357416 |
| Jonathan Siu | 1346652179 |
| Kenneth Herrick | 1629576244 |
| Manuel Alex Cruz | 1699302455 |
| Ower Castro | 1588950216 |
| Rodney Borger | 1619917465 |
| Sabry Ghaly | 1588706105 |
| Shantela Stanfield | 1083233894 |
| Thanh Ngo | 1124381231 |
| Timothy Ortiz | 1558149112 |
| Xavier Bermudez | 1124414651 |

Corporation: _____

Date: _____

Approved

Hospital Director: _____

Date: _____

APPENDIX D
KEY PERFORMANCE INDICATORS

| Key Performance Indicator | Benchmark | Trigger 1 | Trigger 2 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|
| Administrative – 1) <i>Corporation and its practitioners must participate in the Hospital's Physician Ongoing and Focused Physician Performance Evaluation process in accordance with the hospital's policies and procedures</i> | N/A | N/A | N/A |
| 2) <i>Corporation leadership identified in Appendix B, shall attend required meetings in alignment with the Contract</i> | 80% | 89% | 95% |
| Teaching – 1) <i>Corporation all complete all resident and/or medical student evaluations within the timeframes outlined by ACGME and/or the agreements with the different medical schools</i> | 90% | 95% | 100% |
| Direct Care - 1) <i>Completion of outpatient encounters within 72 hours</i> | 80% | 85% | 90% |

| Contract Pass-Through Payments | | | | | | |
|-------------------------------------------------------|---------------|--------------|------------------------------------------------------------------------------------------------------|----------------------|----------------------|----------------------|
| SBC Probation Services | FTEs* | Hours | | | | |
| Chief Medical Officer | 0.96 | 2000 | Rate of \$200/hour, up to 2,000 hours | \$ 499,000 | \$ 499,000 | \$ 499,000 |
| Clinical Services | | | CCHP-P required | \$ 740,000 | \$ 740,000 | \$ 740,000 |
| Sub-Total | | | | \$ 1,239,000 | \$ 1,239,000 | \$ 1,239,000 |
| SBC Sheriff's Department | cFTEs* | Hours | | | | |
| Clinical Services to Inmates at SBC Detention Centers | 19.10 | 35908 | Breakdown in Exhibit G | \$ 9,162,400 | \$ 9,162,400 | \$ 9,162,400 |
| Clinical Expansion | 2.00 | 3760 | Up to 3,760 clinical hours at \$240/hour to be pre-approved in writing by the Sheriff for expansion. | Variable | Variable | Variable |
| Sub-Total | | | | \$ 9,162,400 | \$ 9,162,400 | \$ 9,162,400 |
| SBC Fire Service | FTE | Hours | | | | |
| Chief Medical Officer | 0.57 | 1144 | \$220 per hour, not to exceed 1,144 hours | \$ 251,680 | \$ 251,680 | \$ 251,680 |
| Sub-Total | | | | \$ 251,680 | \$ 251,680 | \$ 251,680 |
| SBC Behavioral Health | cFTEs* | Hours | | | | |
| Psychiatrist/APP Coverage | 4.56 | 8581 | \$324.43 per hour, not to exceed 8,581 hours | \$ 2,783,934 | \$ 2,783,934 | \$ 2,783,934 |
| Substance Use Disorder and Recovery Services - APP | 1.00 | 1880 | | \$ 350,000 | \$ 350,000 | \$ 350,000 |
| Sub-Total | | | | \$ 3,133,934 | \$ 3,133,934 | \$ 3,133,934 |
| County Pass-Through Payments Total | | | | \$ 13,787,014 | \$ 13,787,014 | \$ 13,787,014 |
| Total Contract Amount per Year | | | | \$ 21,687,573 | \$ 21,939,719 | \$ 22,191,864 |

*FTEs are based on 2,080 hours, Clinical FTEs (cFTE) is defined at 1,880 hours

* Triggers are based on KPI Performance in Appendix D (note: the dollar amount indicated above for Trigger 1 would apply if the Trigger 1 rate is paid for a full year, and the dollar amount indicated above for Trigger 2 would apply if the Trigger 2 rate is paid for a full year; however, actual payment to Corporation during the term of this Contract will be based on Corporation's performance against the KPI metrics, as set forth in Appendix D, for the relevant time period.

** Total annual cost indicated does not include variable costs associated with this Contract.

APPENDIX F

DUTIES OF CORPORATION AT SHERIFF/CORNER/PUBLIC ADMINISTRATOR DETENTION CENTERS

1.01 Obligations at the San Bernardino County Sheriff's Department Detention Facilities

Corporation shall provide the medical services of Practitioners to the Sheriff/Coroner/Public Administrator (hereinafter referred to as the Sheriff) detention facilities for the term of this Contract. It shall be the responsibility of the Corporation to provide the Sheriff with reasonably sufficient numbers of qualified Practitioners and non-professional individuals to provide services at the detention facilities and to serve under the terms and conditions set forth in this Appendix F.

1.02 Chief Medical Officer (CMO)

Corporation shall designate a physician from the Corporation to serve as the Chief Medical Officer (CMO) for the San Bernardino County Sheriff's detention facilities who will be assigned to the detention facilities on a full time basis and will have overall responsibility for the operations of the medical program at the detention facilities. The CMO will be responsible to assure the quality of health care services provided to detainees/inmates and to also supervise the practice of mid-level practitioners or other ancillary personnel, should such personnel be utilized. In the absence of the CMO, Corporation shall designate a physician to act as a liaison person who will carry out all of the assigned responsibilities of the CMO. The CMO will serve as Responsible Physician as defined in the California Code of Regulations, Title 15, Sections 1200 et seq, and will be responsible, at a minimum for the following:

Administrative Responsibilities

- a. Collaborate with Sheriff's Health Care Administrator to plan and develop the health care program in the detention facilities.
- b. Review and approve policies and procedures in coordination with Sheriff's Health Care Administrator, including: nursing, physician, pharmacy and ancillary services.
- c. Review and approve standardized procedures for the nursing staff.
- d. Chair the Continuous Quality Improvement (CQI) Committee.
- e. Meet on a regular basis with other County physicians at Hospital, Department of Public Health, DBH, Probation and any other inmate health care providers to discuss common medical issues and conduct peer review.
- f. Participate in Health Education programs for inmates and staff
- g. Arrange for annual peer review, or other peer review required hereunder.
- h. Review the Sheriff's Drug Formulary at least annually; actively participate in quarterly Pharmacy & Therapeutics meetings.
- i. In the event the CMO is on leave or vacation, h/she will provide notification to the Detention Center leadership prior to vacation to ensure continuity of services.

Clinical Activities

- a. Maintain responsibility for clinical services in the detention facilities.
- b. Provide direct clinical services for inmates during regularly scheduled clinic, including history, physical assessment and plan.
- c. Assist Sheriff's Health Care Administrator with the supervision of contract physicians and mid-level practitioners.
- d. Review and co-sign standardized orders written in medical records by nurses.
- e. Review cases with nurse practitioners each week.
- f. Review, approve and co-sign all consult requests as prepared by nurses and nurse practitioners.
- g. Provide a procedure to handle all urgent medical care to inmates during non-clinic hours.
- h. Provide oversight to the self-medication program.

- i. Follow hospitalized inmates' care to ensure the inmate will return to custody as soon as medically possible.
- j. Review and co-sign Health Appraisals done by nursing staff.
- k. Update the Sheriff's Electronic Health Record system (E.H.R.) after each patient visit and no later than end of shift.

1.03 On-site Primary Care Services at the Sheriff's Detention Facilities

Corporation will provide Practitioners to provide on-site primary care services at the Sheriff's Detention Facilities under the direction of the CMO and the guidelines provided by the Sheriff's Health Care Administrator per the Schedule of Primary Care Services attached hereto and incorporated herein by reference as **Exhibit G**, and will be responsible for the following:

- a. Assure program meets applicable state and local regulations as well as any voluntary requirements such as those for the National Commission on Correctional Health Care (NCCHC) accreditation.
- b. Analyze, evaluate and make recommendations regarding treatment programs.
- c. Monitor weekly services provided by non-physician providers within the jail, to include:
 - 1. Quality of medical records, including those documented in the E.H.R.
 - 2. Pharmaceutical practices
 - 3. Implementation and adherence to protocols
- d. Provide primary on-call services and back-up on call to health services staff 24 hours per day seven days per week with staff assigned exclusively for Sheriff's Detention's facilities.
- e. Consult with nursing staff on all conditions falling outside of protocol parameters.
- f. Provide a variety of direct medical services, including daily sick call, taking of medical history, physical examinations, diagnosis, and treatment.
- g. Review and co-sign records of patients seen and treated by APPs in accordance with California regulations and Registered Nurses (RN) (under standardized procedures within 72 hours).
- h. Co-sign all verbal and telephone orders within 72 hours.
- i. Upon pre-approval of the Sheriff's Health Care Administrator arrange for, coordinate, and follow-up on treatment of patients transferred to other medical facilities through existing agreements between the Hospital and those facilities or providers. The Corporation and its Providers under this Contract agree that they shall not compete with the Hospital by re-directing County Patients (as defined herein) to private practice ventures (i.e. non-County providers or facilities). For purposes of this Section 1.04.i "patients" shall include any and all patients from or housed at a County detention facility, initially seen by any Provider while providing services under this Contract in or at a County facility. This requirement to make referrals to the County shall not apply if the patient's insurer determines the provider, practitioner or supplier. In addition, the parties agree that referral requirement in this section relates solely to the Provider's services covered by the scope of the Contract and the referral requirement is reasonably necessary to effectuate the legitimate business purposes of the Contract.
- j. Appear in court proceedings as required.
- k. Adhere to the Sheriff's Drug Formulary; provide written justification for ordering non-formulary stock to the CMO.
- l. Exhibit G is based on 19.1 FTE at 1880 hours per FTE. It is intended to be an average guideline for staffing and can be changed by mutual consent and does not account for holiday alterations, etc. PA/Physician positions can be substituted as long as the ratio stays approximately 65% physician to 35% NP/PA. The hours are to be an average over a one year time frame and may change based on seasonal demands.

1.04 Chronic Disease Clinic

Corporation will designate chronic disease physicians ("Specialist") to review and monitor the special chronic medical conditions of the inmate population at the detention facilities. The Specialist(s) shall

work closely with the Sheriff's case management nurse who is responsible to manage these patients. Care plans needs to be in alignment with the NCCHC guidelines for chronic disease management.

1.05 Peer Review

Corporation will arrange for at least quarterly Peer Review relating to the medical service provided by the Practitioners at the detention facilities.

1.06 Staffing

Corporation shall provide adequate medical personnel to provide the services required herein.

- a. Corporation shall maintain the staffing pattern and availability as detailed on Exhibit G as the minimum staffing level. Any modification of the staffing pattern shall require notification and justification by Corporation or Sheriff and mutual written agreement by Sheriff and Corporation.
- b. For continuity and quality of care, the Providers assigned to the Sheriff's Detention Facilities will be dedicated to work a minimum of 16 hours a week. This does not include per diem, or specialty physicians who are providing weekend, vacation, or sick coverage.
- c. Each Provider will be required to successfully complete the assigned electronic health records training at the first available opportunity when being credentialed to start in any Sheriff's detention facility. The Sheriff's Health Care Administrator will be responsible for coordinating, verifying, and documenting the training.
- d. Physicians employed by the Corporation shall provide necessary supervision to the mid-levels and ancillary personnel.
- e. The Sheriff will perform background checks of Corporation's Practitioners and employees as a condition of granting them access to the Sheriff's detention facilities. Sheriff shall have sole discretion to determine security acceptability of all Corporation Practitioners and personnel at any time during the Contract period, and individuals found to be unacceptable security risks shall not be given access to facilities.
- f. All Corporation's Practitioners and employees will wear identification badges while on Sheriff's premises.
- g. All providers must go through National Commission on Correctional Health Care (NCCHC) certified clinical provider accreditation training.
- h. Corporation shall provide a dedicated provider for on-call services.
- i. Where clinically appropriate, tele-health services can be considered for care and treatment vs. direct on-site care management.
- j. Corporation shall provide a provider in the intake area at West Valley Detention Center (WVDC) to assist with medical triage and appointments. This will be provided Monday through Friday with hours to be determined based on mutual agreement between Corporation and San Bernardino County Sheriff's Department

1.07 Time and Attendance

Corporation shall be responsible for time and attendance accountability and provide appropriate time records (Exhibit "A") to the Sheriff as supporting documentation for monthly invoices submitted in accordance with Section 4.04.

1.08 Legal Compliance

Corporation will comply with all federal, state, local and municipal laws, ordinances, rules and regulations, including the provisions of the California Code of Regulations, Title 15.

1.09 Facilities and Equipment

Sheriff will provide office space for the CMO at West Valley Detention Center, and the County shall provide the space, housekeeping, linen, furniture, fixtures, utilities, telephone, security, and other items necessary for the efficient operation of the health care delivery system.

Corporation is authorized to use County's medical equipment currently on the premises. Corporation agrees to safeguard said equipment. Said equipment is to be used only by those persons trained and qualified in its use.

APPENDIX G

DUTIES OF CORPORATION RELATIVE TO SAN BERNARDINO COUNTY PROBATION DEPARTMENT

1.01 Chief Medical Officer Responsibilities

1. Corporation shall appoint a mutually agreed upon physician to serve as Probation's Chief Medical Officer ("CMO-Probation").
 - a. The CMO-Probation should have at least seven years of licensed physician experience, and be Board certified in Emergency Medical/Trauma.
 - b. The CMO-Probation will be certified as a Correctional Care Health Provider (CCHP-P)
 - c. The CMO-Probation shall submit to law enforcement screening requirements including, but not limited to fingerprints, mandatory training and current licensure.
 - d. It is desired that the CMO-Probation have experience with the law enforcement community, wound/trauma management, response to high-level emergencies and ballistic events, and as a trainer in emergency response.
2. The CMO-Probation shall advise Probation on all aspects of the infection control program, and participate in its development, review, and amendment of such programs.
3. The CMO-Probation will develop educational programs, as needed, including but not limited to Probation Annual Training on Correctional Healthcare (PATCH), Narcan, Stop the Bleed, and Medical Core for nursing staff and other medical providers, and provide continuing education on specified topics required to satisfy minimum training requirements for Probation staff.
 - a. Probation will make available required materials and training space necessary for the completion of required classes under this contract.
 - b. Depending on certifications and qualifications, the CMO-Probation may train Probation Officers in tactical combat casualty care (TCCC) standards.
4. The CMO-Probation, or designee, will directly supervise medical services provided by APP at the Juvenile Detention and Assessment Centers (JDAC) and Treatment Facilities.
5. The CMO-Probation shall participate in programs aimed at increasing correctional health knowledge and shall attain necessary correctional health certifications, specifically defined by Title 15 State Regulations and National Commission on Correctional Health Care (NCCHC) standards.
6. The CMO-Probation serves as the medical consultant during emergency, disaster, or when a state of emergency is declared locally, and shall be available for consultation pertaining to emergency preparedness and participate in related activities.
 - a. Probation's liability insurance will indemnify the corporation in the event of an emergency disaster in which the Corporation functions as an agent of the department in response to such event.
7. The CMO-Probation will provide support and consultation for nursing staff at the Day Reporting Centers, including medical programs.
8. The CMO-Probation will advise in quality improvement activities to ensure standards of care are maintained as well as intercede where corrective measures are necessary.
9. The CMO-Probation will consult with the Chief Probation Officer, or designee, prior to internal policy changes or business ventures which may have legal implications for the department.
10. As necessary, the Corporation shall intervene to resolve conflicts, in the event of disagreements between treating physician and an external care provider.
11. The CMO-Probation will assist in maintaining NCCHC accreditation and participate in all survey and/or corrective action activities applicable to the responsibilities mentioned in this Contract. The CMO-Probation shall comply with all applicable NCCHC requirements pertaining to the delivery of medical services delineated within this Contract that are necessary for Probation to maintain accreditation, including, but no limited to, the following:
 - a. The CMO-Probation shall participate in committee/group meetings as requested by the Chief Probation Officer, specifically the Juvenile Detention and Assessment Centers (JDACs) and

Treatment Facilities (TF) Operations or Detention Corrections Bureau Management meetings on a quarterly basis.

- b. The CMO-Probation shall Chair the Operation and Quality Improvement Committee.
- c. The CMO-Probation shall provide peer review consistent with accreditation requirements.

12. Probation will make available office space for use by the CMO-Probation while performing the duties required under this contract.

13. Probation shall review ongoing performance of the CMO-Probation on a quarterly basis, at minimum, and provide feedback on opportunities for improvement.

1.02 Physician Services

1. Corporation shall provide Physicians and APPs to assess and treat youth and shall visit and attend to such youth at JDAC and TF as requested by the Chief Probation Officer, or designee.
2. Corporation will ensure that all providers providing care in the JDAC and TF are licensed, properly oriented, and maintain professionalism. Proof of the above shall be provided at the request of the Chief Probation Officer, or designee.
 - a. Providers shall submit to law enforcement screening requirements for hire including, but not limited to fingerprints, mandatory training and current licensure.
 - b. Corporation shall comply with the national standards to prevent detect, and respond to prison rape, including monitoring and reporting requirements, pursuant to the Prison Rape Elimination Act (PREA) of 2003, 28 C.F.R. Part 115, Subpart D--Standards for Juvenile Facilities. Contractor and its employees are required to complete PREA Training prior to providing services and receive continuous PREA Training bi-annually which will be provided by the County.
3. Corporation will provide the services of a Physician and sufficient APP to fulfill medical responsibilities at the JDACs and Treatment facilities. The Corporation will ensure that personnel designated for clinics remain onsite for the assigned duration.
 - a. The Corporation will provide physician/APP to maintain a standard schedule of Monday, Wednesday, Friday 8-hours/day at the Central Valley Juvenile Detention and Assessment Center (CVJDAC) clinic location and Monday and Thursday at the High Desert ARISE (HD-ARISE) clinic location to meet the healthcare needs of the confined population, during regular business hours.
 - b. The Corporation and Probation shall mutually agree to adjust the schedule to meet the needs of the juvenile population in the detention centers and treatment facilities, while taking into consideration time-sensitive regulatory requirements for patient screenings/examinations, targeted patient population needs, and even work distribution throughout the work week.
 - c. If/when physician/APP schedules are to be adjusted (as referenced in item 'b'), the Corporation will ensure a minimum of 24 hours of physician/APP presence is provided during said work week at the CVJDAC; and 16 hours of physician/APP presence at the HDARISE.
 - d. A break in physician/APP coverage shall not exceed 84 hours per 7-day work week at the CVJDAC site or 96 hours per 7-day work week at the HD-ARISE site.
 - e. Physician/APP will be available during the times listed above on Mondays, Wednesdays, and Fridays at CVJDAC, and no less than Mondays and Thursdays at HD-ARISE. CMO-Probation will provide coverage for the remainder of the work week, including after-hours averaged over one month's time.
 - f. Corporation will provide telecommunication (phone, email, web), consultation twenty-four hours a day, seven days a week.
 - g. Corporation will provide coverage for duties of Corporation personnel when absent because of vacation, illness, or any other reason, at Corporation's expense.
 - h. Corporation shall ensure that any substituting provider is fully qualified and properly licensed to perform service(s) under this Contract and must be cleared as indicated in item 2 above. Notice of such coverage shall be given to the Probation Health Services Manager or designee

prior to the time of absence, including any substituting provider's name and contact information.

4. The services rendered by the Corporation shall include examination, chronic care, sick call follow-up treatment, as well as reproductive health services to both males and females with appropriate referrals, as necessary. Corporation shall ensure that all youth receive professional care including, but not limited to medical, dental and optometry services by conducting periodic reviews of records and treatment regimens.
5. Corporation will comply with and utilize Probation's Electronic Health Record (TechCare) for the documentation of, but not limited to the following: medical examinations, progress notes, physician order entry for any needed laboratory or diagnostic tests, referral services, and other patient related interactions or documentation needs.
6. Corporation personnel shall consult with other physicians or other paramedical professionals as indicated/required regarding the care and treatment of patients. This shall include, but is not limited to, medical and diagnostic work performed at Arrowhead Regional Medical Center and other hospitals, for utilization review and care issues for applicable Probation youth.
7. Corporation personnel responsibilities and duties shall include any appearances in any legal proceedings on behalf of the County of San Bernardino, without any additional compensation for such duties. The need for such appearances arises out of the Corporation's work for the County under this contract.
8. Corporation will advise in recruitment, contract negotiations, and quality improvement activities to ensure standards of care are maintained as well as intercede where corrective measures are necessary.
9. Corporation will assist with reviewing medical procedures and training plans consistent with Title 15 and NCCHC requirements.
10. County and Corporation shall work jointly regarding observed breaches relating to the provision of Corporation's services to the Probation Department ("Probation Breaches") and County shall identify opportunities for "flexibility", where warranted relating to Corporation's services to the Probation Department. If Probation Breaches are not cured to the reasonable mutual satisfaction of the parties, refer to Non-Performance, Section (11) below.
11. Non-Performance - In the event any of the following situations occur in any given month as it relates to Corporation services to the Probation Department under this Contract, Corporation agrees to submit to the County an invoice for services to include the following reduction in the monthly payment for:
 - a. Each occurrence that Corporation cancels a clinic in the Probation Department not initiated by the County that is not rescheduled within one week's time, a reduction in the amount of \$500.00 for ½ clinic day and \$750.00 for a full clinic day.
 - b. Each occurrence that CMO-Probation fails to attend the required in-person, pre-scheduled Operations or Quality Improvement quarterly meetings, in the amount of \$200.00.
 - c. Each occurrence that Corporation fails to provide peer review consistent with NCCHC accreditation requirements, in the amount of \$50.00. The Corporation is responsible to ensure that peer reviews of the providers and the CMO-Probation are completed and submitted quarterly and are consistent with regulatory standards. Each occurrence of peer review failure results in breach of regulatory requirement and this Contract.

APPENDIX H
DUTIES OF CORPORATION AT SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH – ALCOHOL AND DRUG SERVICES

1.01 Obligations at the San Bernardino County Department of Behavioral Health – Alcohol and Drug Services and Outpatient Services

Corporation shall provide to the Department of Behavioral Health – Alcohol and Drug Services (hereinafter referred to as DBH-ADS) the services of up to three (3) FTE qualified Practitioners for the term of this Contract. The duties of the Practitioners at DBH-ADS shall be mutually agreed upon by Corporation and DBH Director. It shall be the responsibility of the Corporation to provide the services under the terms and conditions set forth in this Contract, including specifically this Appendix H.

1.02 Medical Services

Corporation shall designate up to three (3) physicians who will be assigned to the DBH-ADS on a full time basis and will have overall responsibility for the medical provisions of the Substance Use Disorder (SUD) treatment services provided at DBH-ADS SUD Clinics (“SUD Clinics”). Upon approval of the Medical Director of DBH, a APP (Nurse Practitioner or Physician Assistant) may be substituted for a physician with compensation at 75 percent of the physician rate.

Administrative Responsibilities

- a. Collaborate with DBH-ADS to plan and develop health services in the SUD Clinics.
- b. Ensure Practitioner’s services are being provided in accordance with Title 22 California Code of Regulations 51341.1.
- c. Review and approve policies and procedures in coordination with DBH-ADS.
- d. Review and approve standardized procedures at DBH-ADS.
- e. Assist and participate in the SUD Clinic Case Review meetings to discuss patient’s progress in treatment and provide recommendations, as necessary
- f. Meet on a regular basis with other County physicians at Hospital, Department of Public Health, and DBH and any other health care providers to discuss common medical issues and conduct peer review.
- g. Participate in Health Education programs for clients and staff at DBH.
- h. Arrange for annual peer review, or other peer review required hereunder at DBH.
- i. Review the Drug Medi-Cal and Medi-Cal Formulary at least annually; actively participate on quarterly Pharmacy & Therapeutics meetings.

Clinical Activities

- j. Provide medical consultation for any patients who present a physical health concern while seeking treatment or during a treatment episode.

Physical Examination Requirements:

- a. If a patient has a physical examination within the twelve (12) month period prior to the patient’s admission to treatment date, Practitioner shall review documentation of the patient’s most recent physical examination within thirty (30) calendar days of the patient’s admission to treatment date. If the SUD Clinic is unable to obtain documentation of a patient’s most recent physical examination, the SUD Clinic shall describe the efforts made to obtain this documentation in the patient’s individual patient record.
- b. As alternative to complying with paragraph (a) or in addition to complying with Paragraph (a) above, the physician, a registered nurse practitioner, or a physician’s assistant may

perform a physical examination of the patient within thirty (30) calendar days of the patient's admission to treatment date.

- c. If the physician has not reviewed the documentation of the patient's physician examination as provided for in Paragraph (a) or the physician does not perform a physical examination of the patient as provided for in Paragraph (b), then the SUD Clinic shall include in the patient's initial and updated treatment plans the goal of obtaining a physical examination, until this goal has been met.

Treatment Plan Requirements:

1. The designated Practitioner shall review the initial treatment plan to determine whether the services are medically necessary. This determination shall be consistent with Title 22 CCR Section 51303. If the Practitioner determines the services in the initial treatment plan are medically necessary, the Practitioner shall type or legibly print their name, and sign and date the treatment plan within fifteen (15) calendar days of signature by the therapist or counselor.
 2. The Practitioner shall review each updated treatment plan to determine whether the services are medically necessary. This determination shall be consistent with Title 22 CCR Section 51303. If the Practitioner determines the services in the updated treatment plan are medically necessary, the Practitioner shall type or legibly print their name, and sign and date the updated treatment plan, within fifteen (15) calendar days of signature by the therapist or counselor. If the Practitioner has not prescribed medication, a psychologist licensed by the State of California Board of Psychology may review for medical necessity, type or legibly print their name and sign and date an updated treatment plan.
- k. Maintain responsibility for evaluating patient's medical history and physical condition; provide and document the diagnosis (DSM Code) that is utilized to assist in establishing patient's medical necessity for SUD treatment.
 - l. Provide an assessment of patient's treatment need based on established medical necessity.
 - m. The Practitioner is the only individual who can waive, based on a clinical determination of the patient; minimum participation requirements in treatment.
 - n. Determine medical necessity for patients for continued services every six (6) months.
 - o. Provide limited Medication Assisted Treatment (MAT) as deemed medically necessary.
 - p. Provide all appropriate documentation for treatment services and billing purposes.
 - q. Provide to DHB for its approval of all monthly timesheets of Practitioners providing services to DBH
 - r. Other outpatient duties as assigned by the Department of Behavioral Health

1.03 Time and Attendance

Corporation shall be responsible for time and attendance accountability and provide appropriate records to DBH-ADS upon demand.

APPENDIX I
DUTIES OF CORPORATION AT SAN BERNARDINO COUNTY FIRE PROTECTION DISTRICT

1.01 Obligations with San Bernardino County Fire Protection District

Corporation shall provide administrative medical services to the San Bernardino County Fire Protection District (hereinafter referred to as "SBCFPD") for the term of this Contract. It shall be the responsibility of the Corporation to provide the services of qualified professional personnel as set forth herein.

1.02 Medical Director – Fire and Paramedics

Corporation shall designate a qualified physician who will be assigned to SBCFPD, to act as the Chief Medical Director – Fire and Paramedics (CMD). The CMD will be responsible for the quality of emergency medical services (EMS) provided and provide agreed upon administrative services. The CMD will serve as a responsible physician and will be responsible for the following:

- a. Collaborate with the EMS staff in the development of Standard Operating Procedures in relationship to the provision of premier pre-hospital care.
- b. Provide medical direction for SBCFPD Public Access Automatic External Defibrillator Program.
- c. Represent SBCFPD at local, regional and state committee levels as the Medical Director.
- d. Collaborate and participate in the development of continuing education for Basic and Advanced Life Support Providers within SBCFPD, both in the classroom and field levels
- e. Provide on-call availability on an as needed basis.
- f. Provide the EMS Training Division Nurses with a field scope of practice.
- g. Supervise the maintenance of narcotics licenses for SBCFPD.
- h. Maintain licensure and accreditation necessary to provide medical direction to SBCFPD.
- i. Develop a joint benefit program including training, education, and ride along programs with ARMC's Emergency Physician Residency Program.
- j. Arrange for the ARMC pharmacy to provide narcotics to support each DEA license and invoice each DEA license location directly with a copy provided to the Department EMS Supervisor for accountability.
- k. Arrange for the ARMC pharmacy to provide for this disposal of outdated, expired drugs at no cost to SBCFPD.
- l. Establish innovative and evidence-based programs and clinical protocols for SBCFPD in coordination with regulatory and other agencies.
- m. Establish and/or maintain relationships with ICEMA and other organizations to ensure seamless coordination in care delivery.

1.03 Timesheet

The CMD shall submit monthly timesheets for SBCFPD at the end of each calendar month, reflecting the hours and services provided to SBCFPD for review and approval.

ATTACHMENT A
PRACTITIONER ACKNOWLEDGMENT

The undersigned (each a "Practitioner") acknowledge that they provide services to San Bernardino County, through Arrowhead Regional Medical Center (the "Hospital") under the terms of a Professional Service Agreement (the "Contract") between the Hospital and CEP America - California (the "Corporation") with a term commencing on January 1, 2024 ("Effective Date"). Accordingly, the undersigned acknowledges that:

1. The following representations made in Section 2.03 of the Contract are true and accurate, as to Practitioner, as of the date hereof:

- a. Practitioner maintains an unlimited, unrestricted license to practice in the state of California;
- b. Is board certified or is eligible for board certification, or was an active member of the Hospital's Medical Staff or Advanced Practice Professional Staff as of the Effective Date;
- c. Maintains membership on the Medical Staff or Advanced Practice Professional staff of Hospital, with appropriate clinical privileges and/or practice prerogatives;
- d. Is a participating Practitioner in the Medicare and Medi-Cal programs, participates in all payor contracts Hospital enters, and in other government health plans in which Hospital participates;
- e. Agrees it will not participate in billing practices that are competitive with the billing practices of the Hospital and will adhere to all Hospital billing guidelines and practices in accordance with applicable laws and regulations;
- f. Participates in continuing education as necessary to maintain licensure, professional competence and skills commensurate with the standards of the medical community and as otherwise required by Corporation's continuing medical education policy;
- g. Is not an excluded, debarred or suspended Practitioner for any state or federal health care program, federal procurement program or of the U.S. Food and Drug Administration;
- h. Has never been convicted of a felony, or of a misdemeanor involving patient care issues, violation of healthcare laws or moral turpitude, or has been subject to exclusion from participating as a Practitioner in either the Medicare, or a state Medicaid program; and
- i. Has never had his/her privileges or prerogatives to practice at any health care facility, medical staff membership, or license to practice in any state been limited, suspended, revoked or voluntarily relinquished.

2. Practitioner agrees that while providing services under the Contract he or she shall not compete with the Hospital by re-directing County Patients (as defined herein) to private practice ventures (i.e. non-County providers or facilities). For purposes of this paragraph, "County Patients" shall include any and all patients initially seen by the Practitioner while providing services under the Contract including any patients seen by Practitioner in the Hospital, any Hospital Clinic or any other County facility. This requirement to make referrals to the County shall not apply if: (1) the patient expresses a preference for a non-County provider or facility; (2) the patient's insurer determines the provider, practitioner or supplier; or (3) the referral is not in the patient's best medical interests in the Practitioner's judgment. In addition, Practitioner agrees that referral requirement in this paragraph relates solely to the Practitioner's services covered by the scope of the Contract and the referral requirement is reasonably necessary to effectuate

the legitimate business purposes of the Contract. In no event shall the Practitioner be required to make referrals that relate to services that are not provided by the Practitioner under the scope of the Contract.

3. The Contract gives the Hospital the right to immediately remove a Practitioner from the list of approved Practitioners by written notice to the Corporation, effectively immediately or at such later date as specified in such notice, at any time during the term of this Contract with or without cause. If removed from the list of approved Practitioners, a Practitioner may no longer furnish services under the Contract and the Corporation, and the Hospital will work together to ensure appropriate continuity of care for any affected patients. Removal of a Practitioner from the list of approved Practitioners does not affect the Practitioner's medical staff membership or clinical privileges, and does not generate hearing rights under the Hospital's Medical Staff Bylaws.

4. Practitioner agrees to abide by the terms of the Contract.

Agreed and acknowledged:

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

By: _____
Date: _____

Month: Month the services were provided

Year: Year the services were provided

Department: Name of department on contract

Position per Contract: Name of the position held by the practitioner (ex: Dept Chair, Trauma Director, Orthopedic Surgery Spine, Physician Faculty (Core), NP or PA, Secretary)

Practitioner: Name of practitioner completing this timesheet

Type of service: Identify the type of service you perform (ex: General Surgery Coverage, Neurological Surgery Coverage, Orthopedic Surgery Hand, Clinic Coordinator)

Signature: Signature of practitioner completing this timesheet

Please print Dept Chair Name: Name of your Dept Chair

Signature reviewed by Dept Chair: Signature of Dept Chair

Date: List the dates you provided services

Shift: List the shift worked on that day

Teaching Hours: List all hours spent preparing and presenting didactic lectures, conferences, seminars, ACGME required hours, teaching rounds and other activities necessary to carry out the established core curriculum for the teaching in the Specialty and liaison Hospital's residents and Hospital-contracted university-affiliated medical students.

Admin Contract Hours: List all contract billable Admin hours. Please note: Only those positions identified in the contract should document Admin time.

Patient Care Hours Inpatient/Outpatient: List all hours spent performing direct face-to-face care of patients with or without any resident involvement, charting, handling patient-care related messages, transmitting and evaluating patient medication refills, completing patient-care related paperwork, speaking with patients regarding their care and coordinating patient care.


On-Call Hours: List the number of on-Call hours for the specific date

Other: State the number of hours worked and describe any hours worked that do not fall into the other categories listed on the timesheet with an explanation of what services were provided.

Total Hours: The total number of hours listed for that day

Grand Total: The total of all hours listed on this timesheet

EXHIBIT "B"

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
|  | <p align="center">COUNTY OF SAN BERNARDINO POLICY MANUAL</p> | <p>No. 07-01 PAGE 1 OF 4 EFFECTIVE DATE March 20, 2018</p> |
| <p>POLICY PROHIBITING DISCRIMINATION, HARASSMENT AND RETALIATION</p> | | <p>APPROVED ROBERT LOVINGOOD Chair, Board of Supervisors</p> |
| <p><u>POLICY STATEMENT AND PURPOSE</u> The County of San Bernardino (County) is committed to providing an environment free of discrimination, harassment, including sexual harassment, and retaliation.</p> <p><u>DEPARTMENTS AFFECTED</u> Board of Supervisors, Elected Officials, all County Agencies and Departments, Board-Governed Special Districts, and Board-Governed Entities.</p> <p><u>POLICY</u> The County prohibits discrimination, harassment and retaliation by all persons involved in or related to the County's business or operations, which includes, but is not limited to: any County elected official; any employee of the County, including supervisors, managers, and co-workers; applicants; contract employees; temporary agency employees; interns; volunteers; contractors; all persons providing services pursuant to a contract, including suppliers and customers; and all other persons with whom individuals come into contact while working. Conduct does not need to rise to the level of a violation of law in order to violate this Policy.</p> <p>The County prohibits and will not tolerate discrimination, harassment and/or retaliation on the basis of:</p> <ul style="list-style-type: none"> • Race • Religion (includes religious dress and grooming practices) • Color • National Origin (includes language use restrictions and possession of a driver's license issued pursuant to California Vehicle Code section 12801.9 [authorizing the DMV to issue a driver's license to a person who is unable to prove that their presence in the United States is authorized under federal law]) • Ancestry • Disability (mental and physical, including HIV and AIDS, cancer and genetic characteristics) • Medical Condition (genetic characteristics, cancer or a record or history of cancer) • Genetic Information • Marital Status/Registered Domestic Partner Status • Sex/Gender (includes pregnancy, childbirth, breastfeeding and/or related medical conditions) • Gender Identity/Gender Expression/Sex Stereotype/Transgender (includes persons who are transitioning, have transitioned, or are perceived to be transitioning) • Sexual Orientation • Age (40 and above) • Military and Veteran Status • Any other basis protected by applicable federal, state or local law or ordinance or regulation. <p>These classes and/or categories are the "Protected Class(es)" covered under this Policy. For more information, visit www.dfeh.ca.gov/Employment.</p> <p>The County also prohibits and will not tolerate discrimination, harassment and retaliation based on the perception that an individual is a member of one or more of the Protected Classes, or is associated with a person who is or is perceived to be a member of one or more of the Protected Classes.</p> | | |

The County also prohibits and will not tolerate retaliation against individuals who raise complaints of discrimination or harassment or who participate in workplace investigations, hearings, or other proceedings regarding a complaint under this Policy.

1. DISCRIMINATION PROHIBITED

The County prohibits discrimination against any employee, job applicant or unpaid intern in hiring, training, promotions, assignments, termination, or any other term, condition, or privilege of employment on the basis of a Protected Class.

Discrimination can also include failing to reasonably accommodate qualified individuals with disabilities or an individual's religious beliefs and practices (including the wearing or carrying of religious clothing, jewelry or artifacts, and hair styles, facial hair, or body hair, which are part of an individual's observance of their religious beliefs) where the accommodation does not pose an undue hardship. Individuals needing an accommodation should contact their immediate supervisor or Human Resources Officer and discuss their need(s). The County will engage in an interactive process to identify possible accommodations. Absent undue hardship, the County will reasonably accommodate employees and applicants with disabilities to enable them to perform the essential functions of a job and will reasonably accommodate the religious beliefs and practices of an employee, applicant and unpaid intern.

Pay discrimination between employees of the opposite sex or between employees of another race or ethnicity performing substantially similar work, as defined by the California Fair Pay Act and federal law, is also prohibited. Pay differentials, however, may be valid in certain situations as defined by law. Employees will not be retaliated against for inquiring about or discussing wages.

2. PROHIBITED HARASSMENT, INCLUDING SEXUAL HARASSMENT

The County prohibits harassment against any employee, job applicant, unpaid intern, volunteer, contractor and any other person providing services to the County pursuant to a contract.

Prohibited harassment is not just sexual harassment but harassment based on any Protected Class.

Prohibited harassment may be made in general or directed to an individual, or a group of people. Prohibited harassment may occur regardless of whether the behavior was intended to harass. Harassing behavior is unacceptable in the workplace as in all other work-related settings, such as business trips and business-related social events.

Forms of prohibited harassment include, but are not limited to, the following:

Verbal Harassment - derogatory jokes or comments, epithets or slurs; unwanted sexual advances, invitations, comments, posts or messages; derogatory or graphic comments; sexually degrading words; suggestive or obscene messages, notes or invitations; repeated romantic overtures, sexual jokes and comments or prying into one's personal affairs.

Physical Harassment - assault; impeding or blocking movement; following/stalking; unwelcome touching or any physical interference with normal work or movement when directed at an individual.

Visual Harassment - derogatory, prejudicial, stereotypical, sexually-oriented or suggestive or otherwise offensive text or email messages, web pages, screen savers and other computer images, online communications, social media tags and postings, posters, photographs, pictures, cartoons, notes, notices, bulletins or drawings and gestures; displaying sexually suggestive objects; staring or leering; or communication via electronic media of any type that includes any conduct that is prohibited by any state and/or federal law or by County Policy.

Sexual Harassment - Sexual harassment is a form of discrimination based on sex/gender (including

pregnancy, childbirth, or related medical conditions), gender identity, gender expression, or sexual orientation. Sexual harassment includes verbal, physical and visual harassment, as well as unwanted sexual advances. Individuals of any gender can be the target of sexual harassment. Sexual harassment does not have to be motivated by sexual desire to be unlawful or to violate this Policy. For example, hostile acts toward an employee because of his/her gender can amount to sexual harassment, regardless of whether the treatment is motivated by any sexual desire. Sexual harassment may involve harassment of a person of the same gender as the harasser, regardless of either person's sexual orientation or gender identity.

There are two types of Sexual Harassment:

"Quid Pro Quo" sexual harassment is when someone conditions a job, promotion, or other work benefit on your submission to sexual advances or other conduct based on sex.

"Hostile Work Environment" sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interfere with your work performance or create an intimidating, hostile, or offensive work environment. You may experience sexual harassment even if the offensive conduct was not aimed directly at you.

3. COMPLAINT PROCESS AND REMEDIAL ACTION

Anyone who believes they have been the subject of, becomes aware of, or observed discrimination, harassment, retaliation or other prohibited conduct, should report or make a complaint (either orally or in writing) to their supervisor, the supervisor of the offending party, a representative from the County's Equal Employment Opportunity (EEO) Office or to a Human Resources Officer as soon as possible after the incident. Individuals may bring their report or complaint to any of these individuals. Employees are not required to confront or approach the person who is discriminating against, harassing or retaliating against them. The County's EEO Office can be reached at **1-909-387-5582 (or, TDD 7-1-1)**. Human Resources Officers can be reached by calling the County's Employee Relations Division at **1-909-387-5564 (or, TDD 7-1-1)**. For more information, visit www.sbcounty.gov/hr.

Individuals who believe they have been discriminated against or harassed, have been retaliated against for resisting or complaining about discrimination or harassment or for participating in an investigation may also file a complaint with the Federal Equal Employment Opportunity Commission (EEOC) and the California Department of Fair Employment and Housing (DFEH). The EEOC and DFEH investigate and prosecute complaints of prohibited discrimination, harassment, and retaliation in employment. The nearest EEOC office can be found by calling **1-800-669-4000 (or, TTY, 1-800-669-6820)**. For more information about the EEOC, visit www.eeoc.gov. The nearest DFEH office can be found by calling **1-800-884-1684 (or, TTY, 1-800-700-2320)**. For more information about the DFEH, visit www.dfeh.ca.gov.

When the County receives allegations of misconduct, it will immediately undertake a fair, timely, thorough and objective investigation of the allegations that provides all parties appropriate due process. The County will reach reasonable conclusions based on the evidence collected.

The County will maintain confidentiality to the extent possible and consistent with the rights of employees under the County's Personnel Rules and relevant laws. However, the County cannot promise complete confidentiality. The County's duty to investigate and take corrective action may require the disclosure of information to individuals with a need to know.

Complaints will be:

- Responded to in a timely manner;
- Kept confidential to the extent possible;
- Investigated impartially by qualified personnel in a timely manner;
- Documented and tracked for reasonable progress;

- Given appropriate options for remedial action and resolution; and
- Closed in a timely manner

The County prohibits behavior that is or may be perceived as discriminatory, harassing and/or retaliatory. If the County determines that harassment, discrimination or retaliation or other prohibited conduct occurred, appropriate and effective correction and remedial action will be taken. The County will also take appropriate action to deter future misconduct.

Any employee determined by the County to be responsible for discrimination, harassment, retaliation or other prohibited misconduct will be subject to appropriate disciplinary action, up to, and including termination of employment. Employees who engage in unlawful harassment can be held personally liable for the misconduct.

4. SUPERVISOR/MANAGER RESPONSIBILITY

Supervisors and managers who are aware of or receive complaints of discrimination, harassment, and/or retaliation, even if the occurrence is not directly within their line of supervision or responsibility, must immediately report such conduct or complaint to the Human Resources Officer assigned to their department or any representative of the County's EEO Office so the County can try to resolve the complaint.

5. TRAINING OF SUPERVISORS/MANAGERS AND ELECTED OFFICIALS

All supervisors, managers, elected officials or other persons with supervisory authority will receive and must complete mandatory harassment prevention training as required by California law.

6. RETALIATION PROHIBITED

The County will not retaliate against anyone who reports an alleged violation of this Policy, files or assists another with a complaint under this Policy, causes information to be provided, participates (as witnesses or the accused) in an investigation, hearing or other proceeding regarding a complaint under this Policy or otherwise opposes discrimination, harassment or retaliation. The County will not retaliate against anyone who requests a reasonable accommodation and will not knowingly tolerate or permit retaliation by elected officials, management, employees or co-workers.

LEAD DEPARTMENT

Human Resources

APPROVAL HISTORY

Adopted June 7, 1994 (Item Number 71);

Amended January 26, 1999 (Item Number 11); December 16, 2003 (Item Number 104); August 30, 2005 (Item Number 113); March 20, 2018 (Item Number 22)

REVIEW DATES

MARCH 2023

EXHIBIT "C"

PROFESSIONAL LIABILITY INDEMNITY

1. As an additional element of compensation to the Corporation under this Contract, the County shall indemnify the Corporation as is provided below.
2. For purposes of this Part (Professional Liability Indemnity), the term "Corporation" shall include:
 - a. The Corporation itself;
 - b. The Corporation's Practitioner board members and Practitioner employees;
 - c. Paraprofessionals, paramedical personnel, Practitioner extenders and all other persons employed by the Corporation who are providing services required of the Corporation by this Contract;
 - d. Medical professional corporations, partnerships or other legal entities which, or individuals who, subcontract with the Corporation to perform services required of the Corporation by this Contract ("first tier subcontractor(s)"), including all Practitioners and other employees of such first tier subcontractor(s) who render services required of the Corporation by this Contract; and
 - e. Medical professional corporations, partnerships or other legal entities which, or individuals who, subcontract with first tier subcontractors to perform services required of the Corporation by this Contract ("second tier subcontractors"), including all Practitioners and other employees of such second tier subcontractors who render services required of the Corporation under this Contract. The County's obligation to indemnify the first tier or second tier subcontractors or their employees as provided in subparagraphs (d) and (e) of this paragraph 2 herein above is contingent upon the following: (1) a written Contract or provision of a written Contract executed by the Corporation and such first tier or second tier subcontractor(s), which Contract or provision requires that the first tier or second tier subcontractor(s) adhere to the terms and conditions of this Part (Professional Liability Indemnity); and (2) the approval in writing by the Hospital's Director of said Contract or provision of Contract.

Notwithstanding the foregoing, the term "Corporation" for purposes of this Part, does not include a physician or APP that is not identified on Appendix C, as amended from time-to-time in accordance with the terms of the Contract. For sake of clarity, any physician or APP that is not listed in Appendix C, as amended from time-to-time in accordance with the terms of the Contract, is not entitled to indemnity under this Contract.
3. The County shall, subject to the terms, limitations, exclusions, and conditions of this Contract, indemnify, defend, and hold harmless the Corporation for any and all sums which the Corporation shall by law be held liable to pay for damages arising out of any demand for money or services by any patient, or anyone claiming damages on account of bodily injury or mental injury to or death of any patient caused by or alleged to have been caused by error, omission, or negligence, active or passive, in professional services rendered or that should have been rendered by Corporation exclusively at the Hospital or County-sponsored facilities provided always that:
 - a. Such malpractice results in a claim being made or legal action commenced against the Corporation, and notice of such claim or action has been given in accordance with the provisions contained in paragraph 9 of this Part (Professional Liability Indemnity);

- b. There shall be no liability hereunder for any claim or action against the Corporation for malpractice committed or alleged to have been committed prior to the operational date or subsequent to the term of this Contract. The date that a claim is made shall not determine the coverage under this Part. Any claim of malpractice or alleged malpractice that occurs during the term of this Contract shall be indemnified against, regardless of the date on which the claim is made or the action is filed.
4. The indemnification promised hereby shall include all theories of liability against the Corporation regardless of whether said liability is founded on negligence or strict liability or any other rule or law attributing liability to the Corporation. Such indemnification as is afforded by this Contract is extended to include the Corporation only while it is acting within the scope of duty pursuant to the terms of this Contract and shall not apply to acts or omissions by or at the direction of the Corporation committed with actual malice or any acts of abuse or molestation. In addition, the indemnification promised hereby shall not include any exemplary or punitive damages levied against the Corporation, any act committed in violation of any laws or ordinances resulting in criminal conviction, services rendered while under the influence of intoxicants or narcotics, or any practice or service not required by the terms of this Contract.
5. In providing for such indemnification, it is not the intent of either party to waive any applicable statutory or other immunity from liability or any of claims requirements of the Government code. Such indemnification shall not exceed one million (\$1,000,000) per occurrence or claim for any single act or omission indemnifiable hereunder, or the sum of three million (\$3,000,000) aggregate, which shall occur in any single operating year of this Contract. For purposes of this Part (Professional Liability Indemnity), said operating year shall run from July 1 to June 30.
6. The County shall provide the indemnification referred to above through a program of self-insurance. The Corporation shall follow the guidelines and procedures contained in any risk management plan which may be established by the County, upon being informed in writing by the County of such guidelines and procedures.
7. As respects the indemnity afforded by this Contract, the County shall, in the name of and on behalf of the Corporation, diligently investigate and defend any and all claims or suits within the scope of this Part made or brought against Corporation, shall retain as legal counsel attorney(s) skilled in investigation, defense, and settlement of medical malpractice claims, and shall pay all costs and expenses incurred in any such investigation and defense, including, but not limited to attorneys' fees, expert witness fees, and court costs. In addition to and not inconsistent with any other provision of this Part (Professional Liability Indemnity) the Corporation may, at its option and sole expense, participate in the investigation, settlement or defense of any claim or suit against the Corporation. The County will not settle any claims without the written consent of the Corporation (written consent shall not be required upon dismissal of the Corporation). If, however, the Corporation in any such claim or suit refuses to consent to any settlement recommended in writing by the County and elects to contest or continue any legal proceedings, then the liability of the County shall not exceed the amount for which the claim or suit could have been so settled plus the cost and expense incurred with its consent up to the date of such refusal. Any judgment rendered against the Corporation in excess of the settlement figure recommended in writing by the County shall be the sole responsibility of the Corporation with respect to said excess amount, including all costs plus all attorneys' fees, relating to such excess amount.
8. If a payment in excess of the amount of indemnity available under this Professional Liability Indemnify clause must be made to dispose of a claim, then the liability of the County for costs and expenses incurred with its consent shall be in such proportion hereof as the amount of indemnity available under this clause bears to the amount paid to dispose of the claim.
9. The following are conditions precedent to the right of the Corporation to be defended and/or indemnified under this Part (Professional Liability Indemnity) provided that the County may not disclaim such

defense and/or indemnification if it has not been materially prejudiced by the nonperformance of such condition(s):

- a. Corporation shall, within ten (10) business days, after receiving knowledge of any event described in this subparagraph (a) of this Section 9, give to the person or persons designated by the County notice in writing of:
 - (1) Any conduct or circumstances which the Corporation should reasonably believe may give rise to a claim that may be subject to indemnity under this Part being made against the Corporation, or
 - (2) Any claim that may be subject to indemnity under this Part made against the Corporation, or
 - (3) The receipt of notice from any person of any intention to hold the Corporation responsible for any malpractice.
- b. The Corporation shall at all times without charge to the County:
 - (1) Give to the County or its duly appointed representatives such information, assistance, and signed statements as the County may require; and
 - (2) Assist, without cost to the Corporation, in the County's defense of any claim, including without limitation, cooperating with the County, and upon the County's request, attending hearings and trials, assisting in effecting settlements, securing and giving evidence, obtaining the attendance of witnesses and in the conduct of suits.
- c. The Corporation shall not, without the written consent of County's duly appointed representative, admit liability for or settle any claim, or
 - (1) Incur on behalf of the County any cost or expense in connection with such claim, or
 - (2) Give any material or oral or written statements to anyone in connection with admitting or settling such claim.

10. If the County becomes liable for any payment under this Part (Professional Liability Indemnity), the County shall be subrogated to the extent of such payment, to all the rights and remedies of the Corporation against any party in respect of such loss and shall be entitled at its own expense to sue in the name of the Corporation. The Corporation shall give to the County all such assistance as the County may require to secure its rights and remedies and, at the County's request, shall execute all documents necessary to enable the County effectively to bring suit in the name of the Corporation.

EXHIBIT "D"

BREAKDOWN OF COVERAGE FOR CORPORATIONS AND SUBCONTRACTORS

This sheet references "tiers" of Corporation/subcontractors as provided in **Exhibit C** of this Contract. The use of the word "tier" refers to the levels of Corporation and subcontractors. The use of the word "tier" does not imply any quality rating of Practitioners, just the levels from the County to Corporation to subcontractors. The County will only provide coverage down to the tier II level and not any further. All Corporations must have written subcontracts with their subcontractors performing services at the Hospital.

San Bernardino County contracts with healthcare Practitioner corporation.

1. Tier Ø – Is a Practitioner corporation that has a written contract with the County of San Bernardino to provide services at the Hospital.

Coverage will be provided to:

- Partners of the Corporation
- Direct employees of the Corporation

2. Tier I – Is a Practitioner subcontractor (Practitioner, partnership or corporation) that has a written subcontract with a Tier Ø Practitioner Corporation to render services that the Tier Ø Practitioner Corporation is required to perform pursuant to its contract with the County, obligating the Tier I Practitioner subcontractor to perform all or a portion of said services on behalf of the Tier Ø Corporation.

Coverage will be provided to:

- Partners of the Tier I subcontractor
- Direct employees of the Tier I subcontractor

3. Tier II – Is a Practitioner subcontractor (Practitioner, partnership or corporation) that has a written subcontract with a Tier I Practitioner subcontractor to render services that the Tier I Practitioner subcontractor is required to perform pursuant to its contract with the Tier Ø Practitioner Corporation, obligating the Tier II Practitioner subcontractor to perform all or a portion of said services on behalf of the Tier I Practitioner subcontractor.

Coverage will be provided to:

- Partners of the Tier II subcontractor
- Direct employees of the Tier II subcontractor

There is no coverage for any subcontracting below the Tier II level or for any entity that does not have a WRITTEN contract between different tiers.

Notwithstanding anything to the contrary, any physician or APP that is not listed in Appendix C, as amended from time-to-time in accordance with the terms of the Contract, is not entitled to indemnity under this Contract.



EXHIBIT E

Campaign Contribution Disclosure (SB 1439)

DEFINITIONS

Actively supporting the matter: (a) Communicate directly with a member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, District Attorney, Auditor-Controller/Treasurer/Tax Collector] for the purpose of influencing the decision on the matter; or (b) testifies or makes an oral statement before the County in a proceeding on the matter for the purpose of influencing the County's decision on the matter; or (c) communicates with County employees, for the purpose of influencing the County's decision on the matter; or (d) when the person/company's agent lobbies in person, testifies in person or otherwise communicates with the Board or County employees for purposes of influencing the County's decision in a matter.

Agent: A third-party individual or firm who, for compensation, is representing a party or a participant in the matter submitted to the Board of Supervisors. If an agent is an employee or member of a third-party law, architectural, engineering or consulting firm, or a similar entity, both the entity and the individual are considered agents.

Otherwise related entity: An otherwise related entity is any for-profit organization/company which does not have a parent-subsidary relationship but meets one of the following criteria:

- (1) One business entity has a controlling ownership interest in the other business entity;
- (2) there is shared management and control between the entities; or
- (3) a controlling owner (50% or greater interest as a shareholder or as a general partner) in one entity also is a controlling owner in the other entity.

For purposes of (2), "shared management and control" can be found when the same person or substantially the same persons own and manage the two entities; there are common or commingled funds or assets; the business entities share the use of the same offices or employees, or otherwise share activities, resources or personnel on a regular basis; or there is otherwise a regular and close working relationship between the entities.

Parent-Subsidiary Relationship: A parent-subsidiary relationship exists when one corporation has more than 50 percent of the voting power of another corporation.

Contractors must respond to the questions on the following page. All references to "Contractor" in this Exhibit refer to Corporation. If a question does not apply respond N/A or Not Applicable.

1. Name of Contractor: CEP America-California dba Vituity

2. Is the entity listed in Question No.1 a nonprofit organization under Internal Revenue Code section 501(c)(3)?
 Yes If yes, skip Question Nos. 3-4 and go to Question No. 5
 No

3. Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, if the individual actively supports the matter and has a financial interest in the decision: N/A

4. If the entity identified in Question No.1 is a corporation held by 35 or less shareholders, and not publicly traded ("closed corporation"), identify the major shareholder(s): N/A

5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above):

| Company Name | Relationship |
|------------------------------|--------------|
| MedAmerica, Inc. dba Vituity | subsidiary |
| | |

6. Name of agent(s) of Contractor:

| Company Name | Agent(s) | Date Agent Retained (if less than 12 months prior) |
|--------------|----------|----------------------------------------------------|
| N/A | | |
| | | |

7. Name of Subcontractor(s) (including Principal and Agent(s)) that will be providing services/work under the awarded contract if the subcontractor (1) actively supports the matter and (2) has a financial interest in the decision and (3) will be possibly identified in the contract with the County or board governed special district.

| Company Name | Subcontractor(s): | Principal and/or Agent(s): |
|--------------|-------------------|----------------------------|
| N/A | | |
| | | |

8. Name of any known individuals/companies who are not listed in Questions 1-7, but who may (1) actively support or oppose the matter submitted to the Board and (2) have a financial interest in the outcome of the decision:

| Company Name | Individual(s) Name |
|--------------|--------------------|
| N/A | |
| | |

9. Was a campaign contribution, of more than \$250, made to any member of the San Bernardino County Board of Supervisors or other County elected officer on or after January 1, 2023, by any of the individuals or entities listed in Question Nos. 1-8?

No If **no**, please skip Question No. 10.

Yes If **yes**, please continue to complete this form.

10. Name of Board of Supervisor Member or other County elected officer: _____

Name of Contributor: _____

Date(s) of Contribution(s): _____

Amount(s): _____

Please add an additional sheet(s) to identify additional Board Members/County elected officer to whom anyone listed made campaign contributions.

By signing the Contract, Contractor certifies that the statements made herein are true and correct. Contractor understands that the individuals and entities listed in Question Nos. 1-8 are prohibited from making campaign contributions of more than \$250 to any member of the Board of Supervisors or other County elected officer while award of this Contract is being considered and for 12 months after a final decision by the County.

EXHIBIT F

Contract Compliance Letter



400 N. Pepper Avenue, Colton, California 92324-1819 | Phone: 909.580.1000

The Heart of a Healthy Community™

www.arrowheadregional.org

DATE

CONTRACT HOLDER

ADDRESS

ADDRESS

Contract Number: XXXX

Contract Name: Professional Service Agreement with XXXX

Contract Review Period: XX/XX/XXXX to XX/XX/XXXX

Quarterly Review Semi-Annual Review

Dear CONTRACT HOLDER:

On XX/XX/XXXX, representatives from Arrowhead Regional Medical Center (ARMC) met with XXXX from FULL NAME OF PHYSICIAN GROUP ("Corporation") to review contract compliance in accordance with Section 3.03 of the above referenced contract as well as the Key Performance Indicators listed in Appendix D.

Section 3.03: Contract Compliance

ARMC reviews certain aspects of the following areas to establish contract compliance:

- Abides by applicable laws, regulations, or organizational policy in the provisions of its care, treatment, and service;
Abides by applicable standards of accrediting or certifying agencies that the organization itself must adhere to;
Provides a level of care, treatment and services that are outlined in the contract terms and Appendix E of your contract;
Actively participates in the hospital's quality improvement program, tracks and trends key performance indicators (Appendix D), responds to concerns regarding care, treatment, and services rendered, and undertakes corrective actions necessary to address issues identified;
Assures that care, treatment, and service are provided in a safe, effective, efficient, and timely manner emphasizes the need to - as applicable to the scope and nature of the contract service - improve health outcomes and prevent and reduce medical errors.

Based on our review of the information presented to us and the factors that we evaluated during this review period, it appears that the services provided by Corporation are: in compliance not in compliance.

If not in compliance, the following areas were identified as out of compliance: N/A

Appendix D: Key Performance Indicators

Per the terms of the contract, ARMC will meet with the Corporation semi-annually (every six months) to review the Key Performance Indicators which is aligned with the contract compensation scheduled as outlined in Appendix E. The performance period under review is between XX/XX/XXX and XX/XX/XXXX which covers the previous quarterly review in addition to the current quarterly review period.

Based on the review of the Key Performance Indicators, Corporation has performed as outlined below:

BOARD OF SUPERVISORS

COL. PAUL COOK (RET.) Vice Chair, First District

JESSE ARMENDAREZ Second District

DAWN ROWE Chair, Third District

CURT HAGMAN Fourth District

JOE BACA, JR. Fifth District

LUTHER SNOKE Interim Chief Executive Officer

Administrative

Corporation and its providers must participate in the Hospital's Physician Ongoing and Focused Physician Performance Evaluation Process in accordance with the Hospital's policies and procedures

In Compliance Not in Compliance Not applicable during this period

Corporation leadership identified in Appendix B, shall attend required meetings in alignment with the Contract

Base Target: 80% Trigger 1 Target: XX% Trigger 2 Target: XX%

Outcome: _____

Payment Trigger for the following period: XX/XX/XXXX to XX/XX/XXXX will be at Trigger #___

Teaching

Corporation shall complete all resident and/or medical student evaluations within the timeframes outlined by ACGME and/or agreements within the different medical schools

Base Target: XX% Trigger 1 Target: XX% Trigger 2 Target: XX%

Outcome: _____

Payment Trigger for the following period: XX/XX/XXXX to XX/XX/XXXX will be at Trigger #___

Direct Care

Corporation providers shall complete H&Ps within 24 hours of the patient being seen

Base Target: XX% Trigger 1 Target: XX% Trigger 2 Target: XX%

Outcome: _____

Payment Trigger for the following period: XX/XX/XXXX to XX/XX/XXXX will be at Trigger #___

ARMC reserves all rights under the Contract and applicable laws.

It is a pleasure working with you and your corporation. Please let us know if you have any questions.

Sincerely,

NAME

Arrowhead Regional Medical Center

Cc: ARMC Fiscal Services
 ARMC Physician Contracting Office

EXHIBIT G

| Position | S | M | T | W | T | F | S | Hrs | Facility |
|-----------------------------------|----------------------------------------|----------|----------|----------|----------|----------|----------|------------|--------------------|
| Chief Medical Officer | | | | 40 | | | | 40 | All Facilities |
| Assistant CMO | | | | 20 | | | | 20 | |
| Chief Clinical Officer | | | | 20 | | | | 20 | |
| MAT | | | | 60 | | | | 60 | |
| CDMD | | 40 | 40 | 40 | 40 | 40 | | 200 | |
| FP/Derm/Neuro | 20 | 32 | 32 | 32 | 32 | 32 | 20 | 200 | WVDC |
| Intake | | 8 | 8 | 8 | 8 | 8 | | 40 | WVDC |
| NP/PA (urgent/ambulatory care) | 10 | 24 | 24 | 24 | 24 | 24 | 10 | 140 | WVDC |
| NP/PA (urgent/ambulatory care) | | | 8 | | 8 | 8 | | 24 | CDC |
| Family Practice Physician | | 8 | | 8 | | | | 16 | CDC |
| NP/PA (urgent/ambulatory care) | | 8 | | 8 | | | | 16 | GHRC |
| Family Practice Physician | | | | | 8 | 4 | | 12 | GHRC |
| NP/PA (urgent/ambulatory care) | 8 | 12 | 12 | 12 | 12 | 12 | 8 | 76 | HDDC |
| Family Practice Physician | | 20 | 10 | 20 | 10 | 20 | | 80 | HDDC |
| Physician On-Call | Twenty-Four Hours a Day, 7 Days a Week | | | | | | | | All Facilities |
| | | | | | | | | 944 | Grand Total |