



Contract Number

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative	William L. Gilbert
Telephone Number	(909) 580-6150
Contractor	Cal Med Physicians and Surgeons, Inc.
Contractor Representative	Dev Gnanadev, MD
Telephone Number	909-580-6334
Contract Term	January 1, 2024 – December 31, 2026
Original Contract Amount	\$31,362,150 (\$10,454,050 per annum) plus variables
Amendment Amount	
Total Contract Amount	\$31,362,150 (\$10,454,050 per annum) plus variables
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 Surgery ("Specialty"), and wishes to engage Cal Med Physician and Surgeons, Inc. hereinafter referred to as "Corporation" to provide services at Hospital, in Specialty, which includes the subspecialties of general surgery, trauma surgery, vascular surgery, burn, neurological surgery, oral and maxillofacial surgery, plastic surgery, and surgical

oncology (hereinafter all such services provided under this Contract are collectively referred to as the "Service" or "Services").

- 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 Service and operation of the Medical Staff Department of Surgery 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 Service ("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 Surgery 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 by the Hospital Director in conjunction with the Medical Executive Committee, the Hospital Director, with consultation by the Medical Executive Committee, may appoint an interim chair until either (1) the Hospital Director and the Medical Executive Committee 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 Hospital for administrative responsibilities. 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. Corporation shall take all commercially reasonable steps necessary to participate as an in-network provider for all managed care programs for which the Hospital serves as an in-network provider.
- 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 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 by the Hospital Director.

- C. Corporation shall 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. The Parties agree Corporation may utilize telehealth for outpatient clinic visits or consults where clinically appropriate. Notwithstanding the foregoing, the Hospital may review Corporation's use of telehealth to ensure coverage is provided as described in Appendix E and to accommodate patient needs and services at the Hospital and its Clinics.
- 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. Corporation shall provide Hospital 30-days prior written notice of any routine clinic cancellation days for a Practitioner when scheduled at the Hospital or any Clinic. When not practical to provide such advance notice due to circumstances beyond the Corporation's reasonable control, Corporation shall provide prompt notice as soon as practical. Routine cancellation is defined as any cancellation other than for an emergency or illness. Hospital may request that Corporation or its Practitioners discuss any non-routine cancellation 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 Hospital has included Hospital's Charity Care patients in its determination of compensation to Corporation for the Services.
- F. Practitioners are expected to be available to provide care during all clinical scheduled hours. Clinic Hours are outlined in Appendix "A", however can be modified via 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 for cause.
- 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 (or have an application submitted to become a) 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. If the Practitioner has submitted his/her application and is waiting for the approval process, Corporation will notify the Hospital Medical Staff Office and Hospital Director to ensure appropriate billing practices are followed.

- 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, unless and until (1) the Hospital has provided a review and written approval of extenuating circumstances justifying use of the Practitioner, and (2) Appendix C is amended to include the Practitioner before Corporation utilizes such Practitioner for the Services.

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 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, (2) in accordance with a reasonable request of the Hospital and consistent with accreditation standards.

2.06 Non-Clinical Personnel

Non-Clinical Personnel employed by the Corporation are expected to develop and maintain an amicable working relationship with Hospital management and staff. Such personnel 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. Hospital shall provide Corporation with access to Hospital data and documentation reasonably necessary for Corporation to comply with this Section 2.07.

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 during the Term of this Contract by any Practitioner while providing the Services under this Contract including any patients seen by Practitioners in the Hospital, any Hospital Clinic or any other County facility. The Hospital understands that Corporation provides professional medical services at one or more licensed health care facilities where County Patients may be seen but not at the request or referral of Corporation or its Practitioners. This Contract's 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 2.08 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 (except for the express preference of the patient), 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 Practitioner shall report such referral within 72 hours after the referral or as soon as practical.
- 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 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 and subject to review by Corporation's counsel.

2.17 Key Performance Indicators (KPIs)

Corporation shall work to improve the KPIs as outlined in Appendix D.

2.18 Marketing and Public Relations

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

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. The Parties will supply data relevant to contract compliance upon request of a party and within the timeframe requested. No failure by a party 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 following quarterly meetings. The Parties shall jointly ensure the letter reflects the meeting's agreed upon plan of action. A sample of the letter is set forth 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 supervised (in accordance with the ARMC policies and procedures for resident supervision) by or

in conjunction with faculty personnel of the Corporation or where such billing is not permitted by law.

- C. Compensation under this Contract includes consideration that Corporation is unable to bill for some 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 fifteen (15) days or fifteen (15) 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

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

The Parties 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 eligibility, billing and coding for the Services provided pursuant to this Contract. The Parties shall adopt and maintain billing and coding compliance policies and procedures to ensure 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.

Each party hereby agrees to indemnify, defend and hold harmless the other party, their respective officers, supervisors, employees and agents from and against all liability, cost, loss, penalty or expense (including without limitation, attorneys' fees and court costs) resulting from inaccurate and/or improper information furnished by a Party and relied on by the other party regarding professional services rendered by Corporation to Hospital patients.

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 is 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 the Services 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 actions and/or claims which seek to collect said taxes and workers compensation 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 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.

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.

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

- A. A Party is unable or unwilling to perform the duties required by this Contract other Party;
- B. A Party is suspended or excluded from the Medicare or Medi-Cal program;
- C. Material breach by a Party of any term or condition of this Contract, after thirty (30) days advance written notice specifying the nature of the breach and action required to cure the breach, if any. If after thirty (30) days the Party has not cured to the reasonable satisfaction of the other party, the Contract shall terminate unless the Parties reach a separate written agreement to extend time;
- D. A Party 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, or upon an assignment of a substantial portion of the assets for the benefit of creditors; or
- E. Any other basis for which immediate termination is explicitly permitted as specified in the terms of this Contract or where required by law.

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 Priority Mail with a Delivery Receipt Requested 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: Cal Med Physicians and Surgeons, Inc
410 Alabama Street, Suite 105
Redlands, CA 92374
Attention: President

Any such notice to any party shall be effective 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. This Contract also incorporates by reference Appendices A, B, C, D, E, and Exhibits A, B, C, D, E, F, 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.

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SAN BERNARDINO COUNTY

CAL MED PHYSICIANS AND SURGEONS, INC.

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

►

Dawn Rowe, Chair, Board of Supervisors

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

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

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

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

Title _____
(Print or Type)

By _____
Deputy

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

General Surgery
Vascular Surgery
Trauma Surgery
Burn
Neurological Surgery
Plastic Surgery
Oral and Maxillofacial Surgery

Outpatient Services and Clinics

Surgery Outpatient Clinic

- Monday: 7:30 am – 4:30 pm
- Tuesday: 7:30 am – 4:30 pm
- Wednesday: 7:30 am – 4:30 pm
- Thursday: 7:30 am – 4:30 pm
- Friday: 7:30 am – 4:30 pm
- Saturday: N/A
- Sunday: N/A

Cancer Care Center (Surgical Oncology):

- Monday: 8:00 am – 2:00 pm
- Tuesday: 8:00 am – 2:00 pm
- Wednesday: N/A
- Thursday: 8:00 am – 12:00 pm
- Friday: 9:00 am – 12:00 pm
- Saturday: N/A
- Sunday: N/A

Off-Hours are defined as all hours beyond the clinic hours above.

APPENDIX “B”
APPOINTMENTS OF CORPORATION LEADERSHIP

Chairperson (0.5 FTE): Dev Gnanadev, MD

Trauma Director (0.25 FTE): Brandon Woodward, MD

Burn Director (0.25 FTE): David Wong, MD

Director of Surgical Critical Care/ICU (0.25 FTE): David Wong, MD

Vascular Lab Director (0.20 FTE): Keith Glover, MD

Program Director(s) (0.50 FTE): Tommy Lee, MD

Associate Program Director (0.25) FTE: Samuel Schwartz, MD

Responsibilities:

Chairperson:

- a. Establish rules and regulations for the operation of the Department and appropriate Sections and Units.
- 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 a service for the care of patients with chronic and/or severe burn and other wounds both on an inpatient and ambulatory basis.
- e. Supervise the hyperbaric oxygenation unit for the treatment of patients suffering from severe burns or other wounds resistant to other modes of treatment.
- f. 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.
- g. 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.
- h. Establish in conjunction with the Program Directors of all Hospital’s Residency Training Program a core curriculum designed to meet the educational requirements for the teaching of Surgery and its subspecialties to said Residents.
- i. Ensure that such a core curriculum is established and presented on an annual basis and updated as is necessary.

- j. 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.
- k. Prepare and submit to the Program Directors a written evaluation of the performance of all Residents having performed in the Department. Such evaluation shall be submitted no later than the thirtieth day following the completion of each resident's service in the Department.
- l. 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.
- 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. Establish, implement, and oversee policies, procedures, protocols for the efficient operation of Hospital's Trauma Center.
- p. Establish, implement, and oversee protocols and policies for the efficient operation and continued designation of Hospital's Burn Center.
- q. Provide on an ongoing basis such administrative and educational management of Hospital's Residency Training Program in surgery and the surgical subspecialties necessary to train competent Board Qualified Physicians and to act as liaison between Arrowhead Regional Medical Center and affiliated Residency Training Programs.
- r. Coordinate and oversee all administrative, supervisory, and teaching activities provided by all Departments of Surgical Services including Departments of Orthopedic Surgery, Obstetrics and Gynecology, and any other Department or specialty surgical service which may be established.
- s. Review and make recommendations for approval of all budget requests for personnel, capital equipment etc. submitted by all surgical departments and sections.
- t. Coordinate and oversee Quality Assurance, Risk Management, and Medical Staff activities for all surgical departments and sections.
- u. Participate in all managed care programs sponsored by or approved by County and all group practice activities of the Hospital's Medical Staff.
- v. Oversee and assure the timely completion of medical records, operation notes, resident evaluations etc., by all surgical departments and section.
- w. Ensure that all Practitioners, physicians, physician assistants and non-professional staff of the Corporation comply with all relevant Federal and State laws and regulations and comply with applicable provisions of the following:
 1. Arrowhead Regional Medical Center Policy and Procedures
 2. County of San Bernardino Policy and Procedures
 3. California Code of Regulations – Title 22
 4. Centers for Medicare and Medicaid Services – Conditions of Participation
 5. Healthcare Facilities Accreditation Program
 6. The Health Insurance Portability and Accountability Act
 7. Joint Commission Accreditation Program

Supervision

- a. Supervise and, when necessary, render surgical care to all patients seeking or requiring surgical care at Hospital, whether seen initially in Surgical, Family Medicine, or Medical clinics.
- b. Supervise and, when necessary, render surgical care to all patients seeking or requiring such care at Hospital when seen in the Emergency Room, Trauma Center, and any other special surgical units or center, including the Burn Center, Neurological Surgery, Wound Care, and Hyperbaric Oxygenation Service.
- c. Supervise all clinical activities of all residents participating in Hospital-sponsored training programs, while serving in the Department of Surgery or the appropriate Section of Surgery.
- d. Supervise the clinical activities of specialty residents assigned by other medical schools for training in General Surgery, and any other appropriate Section, and Neurosurgery.
- e. Supervise all care rendered in all ambulatory care clinics pertinent to the Department and all its sections including those in Neurological Surgery, and the Wound Care Clinic.
- f. Supervise the clinical activities of all medical students assigned as clinical clerks for training in the Department and appropriate Sections.

Trauma Director:

- a. Facilitated in obtaining ARMC's Level 1 Trauma Designation from a Level 2 and works to maintain accreditation with ACS.
- b. Responsible for triage of patients and development of admission and discharge criteria for the unit, service, or department. Enforces compliance with admission and discharge criteria in conjunction with the Chair.
- c. Develops critical pathways, algorithms, or protocols applicable to unit, service, or department. Submits these pathways, algorithms, or protocols to the Chair as well as the Executive Committee of the Medical Staff for approval.
- d. Develops and implements appropriate quality improvement standards. Monitors and reports variance to Chair, Quality Control Council, Hospital Authority Medical Staff and Hospital Authority.
- e. Monitors compliance with medical staff bylaws and other applicable standards. Reports any variance.
- f. Communicates effectively with organization leadership, medical and hospital staff, internal and external referring physicians, and other community providers.
- g. Communicates with other departments and partnerships to ensure patient's needs are met.
- h. Manages trauma care in a multi-disciplinary system.
 - i. Ultimately has the administrative authority for all trauma patients and the Trauma Center
 - ii. Demonstrates individual accountability for clinical practice by participating in trauma care and following established practice.
 - iii. Management guidelines. Promotes consistency among trauma surgery service practice.
 - iv. Reviews the plan of care to ensure that PMGs were followed.
 - v. Attends 70% of Check Out Rounds Works in cooperation with the nursing administration to support the nursing needs of trauma patients.
- i. Participates in the education of staff and the community on current trauma care concepts.
 - i. Maintains current knowledge of trauma care via literature review and trauma CME.
 - ii. Provides inter-disciplinary internal and outreach trauma education
 1. Fulfills ATLS course director responsibilities
 - a. Is ultimately responsible for ensuring ATLS courses have required instructor staff

- b. Serves as ATLS course director for at least one course per year and attends for the duration of the course.
 - 2. Provides RTTD to the community by serving as course director.
 - 3. Responsible for generation of Trauma Lecture Series topics and speakers.
 - 4. Teaches other internal and external trauma courses as requested or assists in finding qualified instructors.
 - j. Coordinates and participates in trauma quality improvement activities.
 - i. Chairs the Trauma Multidisciplinary Performance Improvement and Patient Safety Committee (Trauma Peer and Systems Committees).
 - 1. Reviews the care provided to the trauma patient
 - 2. Identifies liaisons from neurosurgery, orthopedic surgery, anesthesiology, radiology, emergency medicine and other appropriate disciplines.
 - 3. Recommends trauma credentials to the Executive Medical Staff Committee
 - a. Authority to suspend or re-instate a surgeon's privileges to participate in trauma call
 - b. Oversees ongoing orientation for new attending surgeons and residents rotating on the trauma service
 - c. Participates in annual credentialing process of physicians on the trauma call panel
 - d. Ensures establishment of physician call schedules for all specialties including those that require a backup call schedule
 - 4. Develops trauma management practice management guidelines with the trauma team
 - ii. Actively involved in loop closure efforts for trauma related PIPS issues
 - iii. Utilizes chart review, case review, staff interviews, patient interviews and trauma rounds to identify issues, monitor and assess trauma care.
 - iv. Identifies cost saving measures including the utilization of TQIP best practices/PMGs where they apply.
 - v. Attends TQIP team meetings
 - vi. Assists in the process of evaluating the pre-hospital care of the trauma patient
 - vii. Participates in trauma patient/family satisfaction projects.
 - k. Ensures that prevention activities are an integral part of a trauma care delivery system.
 - i. Oversees trauma prevention activities
 - ii. Participates in community prevention activities
 - iii. Assists in publication of prevention research and prevention program evaluation
 - l. Provides leadership in trauma research activities
 - i. Ensures research activities to meet the ACS requirements of 20 peer reviewed articles published in journals included in the Index Medicus in each 3-year review period.
 - ii. Meets all requirements specified in the SOP for PI responsibilities
 - iii. Collaborates with the Trauma Program Manager (TPM) to meet the goals and objectives of the Trauma Program.
 - 1. Keeps an open line of communication with the Trauma Service by attending at least monthly, scheduled meetings with the TPM.
 - 2. Develops strategic relationships with referring hospitals and physicians.
 - 3. Maintains relationships with community organizations and legislative bodies whose activities relate to trauma care.
 - m. Participates in regional, state, and national trauma organizations

Burn Director:

- a. The Director is responsible for the organization of services and systems necessary for a multidisciplinary approach to providing care to injured patients and works both independently and in collaboration with the Trauma Program Medical Director.
- b. Provides an experience and environment of patient- and family-centered care.
- c. Manages and directs all activities within area of responsibility

- d. Maintains records related to operations and services that are complete, accurate, available, and in compliance with all legal, regulatory, and policy requirements
- e. Ensures effective facilitation of improvement teams and development of leadership skills to ensure overall effectiveness of the meetings.
- f. Remains current of new trends and best practices and incorporates into Burn Services practices and programs.
- g. Articulates and enforces standards for quality/safe patient care
- h. Develops and implements innovative systems and processes that improve staff and patient quality and safety
- i. Demonstrates achievable and measurable results and develop action plans for improvement
- j. Initiates, monitors, and enforces regulatory requirements
- k. Holds self and others accountable to policy, standards and commitments and provides timely follow through on questions and concerns
- l. Develops and implements clinical outcome measures for quality improvement and the implementation of evidence-based medicine.
- m. Effectively facilitates meetings at an organizational level.
 - i. Burn Committee (monthly)
 - ii. Participates in Mortality and Morbidity Conference
 - iii. Participates in Trauma Conference/Committees
- n. Articulates and presents data, information, and ideas in a clear and concise manner
- o. Contributes to a learning environment by providing educational and research experiences to students, residents, fellows, and faculty
- p. Leads and/or serves on a variety of appropriate internal and external committees to represent Burn Services.
- q. Conducts substantial research; provide patient care; teach fellows, residents, and medical students

Director of Surgical Critical Care/ICU:

- a. Patient Safety and Quality Assurance: Implements and maintains rigorous protocols and quality assurance programs to uphold patient safety, minimize surgical errors, and enhance surgical outcomes.
- b. Regulatory Compliance: Ensures compliance with all relevant healthcare regulations, accreditation standards, and licensure requirements, maintaining documentation and records as needed.
 - a. Actively participates in all activities related to accreditation preparations and plans, ensuring that areas of responsibilities are meeting all standards federal and state regulations.
- c. Performance Improvement: Continuously evaluates and improves the quality and efficiency of surgical services through performance metrics, audits, and feedback from surgical teams.
- d. Works diligently with the Nursing Leadership team to ensure the nursing division exceeds quality and patient care goals.
- e. Collaborates and implements necessary action plans to accomplish duties and responsibilities.
- f. Recommends staffing requirements based on volume, severity of illness and standard for care delivery.
- r. Participates in leading/directing patient care related projects/teams
- s. Develops policies and procedures consistent with clinical best practice.
- t. Actively provides input and feedback for Performance Improvement activities.
- u. Promotes an environment that supports Patient and Family Centered Care and continuously improves patient experience.
- v. Actively participates in service, departmental and hospital-wide committees as assigned
- w. Seeks out new program strategies and/or enhancements to expand and improve patient services
- x. Work requires the analytical ability necessary to resolve extremely complex problems requiring the application of scientific, mathematical, clinical and management principles, theories, and concepts and in-dept experienced-based knowledge

- y. Provides supervision, education, and learning objectives for residents and fellows on staff, both at ARMC and those from outside facilities that choose to rotate on service.

Vascular Lab Director:

- a. Ensures compliance with regulatory standards and guidelines set forth for an OSR and understand both vein and vascular procedures.
- b. Implements and maintains standards of care.
- c. Directs and coordinates selected delivery system of patient care.
- d. Provides support for critically ill patients and their families.
- e. Provides incorporation of regulatory mandates into laboratory practice.
- f. Provides delineation of needed knowledge, skills, and competencies of staff and provision for staff development.
- g. Provides incorporation of current research, new interventions, and technological advances into practice.
- h. Implements ongoing quality assurance activities.
- i. Conducts timely and periodic performance appraisals based on pre- established standards and following up appropriately.
- j. Establishes accurate laboratory productivity measures.
- k. Provides Leadership & Corporate Management Development, implementation, and evaluation of unit goals in concert with departmental and institutional goals.
- l. Establishes effective communication channels to assure coordinated patient care.
- m. Provides promotion of collaborative practice with other health care disciplines to assure an integrated approach to care of the patient.
- n. Provides implementation of a risk management program to prevent, minimize, or correct risks to patients and staff based on institutional policy and procedure.

Program Directors and Associate Program Directors: Program directors and Associate Program Directors shall perform duties in alignment with ACGME requirements and regulations.

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
GnanaDev, Dev MD	110493985
Davis, Joseph Vivian DO	1689781445
Glover, Keith MD	1053706663
Kim, Edwin MD	1790197051
Lee, Hyung-Suk Tommy MD	1811163058
Lee, Samuel MD	1720582836
Mitchell, Brianne MD	1841553716
Rahnemai Azar, Amir Ali MD	1023339496
Ramiscal, Judi Anne, MD	1326458845
Retamozo, Milton MD	1174630016
Reyes, Monique PA-C	1326636549
Schwartz, Samuel MD	1255563334
Wang, Betty PA-C	1124660923
Wong, David MD	1841307535
Woodward, Brandon MD	1851658389
Siddiqi, Javed MD	1407963176
Cortez, Vladimir MD	1629230065
Duong, Jason DO	1730593591
Noel, Jerry DO	1235334038
Miulli, Dan DO	1700993573
Schiraldi, Michael MD	1326418757
Shafizadeh, Stephen MD	1508177114
Tayag, Emilio MD	1356409312
Sweiss, Raed DO	1881858553
Wacker, Margaret MD	1992812671
Guerrero, Andre MD, DDS	1891937249
Herford, Alan MD, DDS	1980755419
Jacobs, Murray DDS	1558452607
Miller, Meagan DDS	1356507818
Moretta, Carlos, DDS	1356507818
Thakker, Jayini MD, DDS	1386847648
Viet, Chi Tonglien MD, DDS, PhD	1306157094

Corporation: _____

Date: _____

Approved

Hospital Director: _____

Date: _____

APPENDIX D
KEY PERFORMANCE INDICATORS

Key Performance Indicator	Benchmark	KPI Trigger
Administrative – 1) <i>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</i> 2) <i>Corporation leadership identified in Appendix B, shall attend required meetings in alignment with the Contract</i>	N/A 80%	N/A 85%
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>	70%	80%
Direct Care - 1) <i>Completion of History and Physicals within 24 hours</i>	70%	80%

APPENDIX E

Corporation shall be paid at the “Base” rate of compensation as set forth in the chart below for the first six months of this Contract. Then, Hospital will review Corporation’s performance against the KPI metrics in Appendix D after that first six months, and after every six months throughout the term of this Contract. At each of these six month intervals, if Corporation has satisfied the annual Trigger as outlined in Appendix D for the prior six month period, then Corporation shall be paid, during the next six months, at the annualized rate set forth in the chart below that corresponds to the trigger that was satisfied for the prior six month period. At each of these six month intervals, if the trigger was not satisfied for the prior six month period, then Corporation’s compensation for the next six months will remain at (or return to) the “Base” compensation as set forth in the chart below.

Position	Description	Base Annual	KPI Trigger Annual*
ARMC Direct Payments			
Administrative	FTEs Hours		
Chairman, Department of Surgery	0.50 1000	See Appendix B	\$ 229,824 \$ 239,400
Trauma Director	0.25 500	See Appendix B	\$ 103,824 \$ 108,150
Burn Director	0.25 600	See Appendix B	\$ 103,824 \$ 108,150
Director of Surgical ICU	0.25 500	See Appendix B	\$ 108,864 \$ 113,400
Vascular Lab Director	0.20 400	See Appendix B	\$ 85,680 \$ 89,250
Clinic Coordinator	1.00 2000		\$ 61,488 \$ 64,050
Surgery Scheduler			\$ 51,840 \$ 54,000
Secretarial Support			\$ 129,992 \$ 135,408
Sub-Total Administrative			\$ 875,336 \$ 911,808
Teaching and Other GME Activities	FTEs Hours		
General Surgery, ACGME, Program Director	0.50 940	See Appendix B	\$ 209,280 \$ 218,000
Associate Program Director, General Surgery	0.25 470	See Appendix B	\$ 120,000 \$ 125,000
Program Faculty (Core), General Surgery	1.20 2256	See Appendix B	\$ 519,276 \$ 540,913
Program Faculty (Core), Neurosurgery	0.80 1504	See Appendix B	\$ 654,000 \$ 654,000
Clerkship Director - CUSM Students	-- --	\$35 per week per student (Paid Quarterly)	Variable Variable
3rd Year CUSM Students	-- --	\$350 per week per student (Paid Quarterly)	Variable Variable
4th Year CUSM Students	-- --	\$200 per week per student (Paid Quarterly)	Variable Variable
3rd Year SGU and WUHS Students	-- --	\$350 per week per student (Paid Quarterly) as long as ARMC receives funds	Variable Variable
4th Year SGU and WUHS Students	-- --	\$200 per week per student (Paid Quarterly) as long as ARMC receives funds)	Variable Variable
Sub-Total Teaching and Other GME Activities			\$ 1,502,556 \$ 1,537,913
Direct Patient Care	cFTE Hours		
Trauma Coverage	0.97 1823.6	Subsidy for non-billable care	\$ 418,560 \$ 436,000
General Surgery Clinic and Surgery Coverage	3.50 6580	Subsidy for non-billable care	\$ 523,200 \$ 545,000
Plastic Surgery Clinic and Surgery Coverage	1.60 3008	Subsidy for non-billable care	\$ 680,160 \$ 708,500
Vascular Surgery Clinic and Surgery Coverage	1.68 3158.4	Subsidy for non-billable care	\$ 798,268 \$ 831,529
Neurological Surgery Clinic and Surgery Coverage	0.71 1334.8	Subsidy for non-billable care	\$ 151,728 \$ 158,050
Oral Surgery Clinic and Surgery Coverage	0.48 902.4	Subsidy for non-billable care	\$ 104,640 \$ 109,000
Oncology Surgery Clinic and Surgery Coverage	1.26 2368.8	Subsidy for non-billable care	\$ 627,840 \$ 654,000
Hyperbaric Medicine/Wound Care Clinic and Surgery C	1.50 2820	Subsidy for non-billable care	\$ 418,560 \$ 436,000
APP-Surgery-General	3.00 5640	Subsidy for non-billable care	\$ 521,280 \$ 543,000
APP-Neurosurgery	4.00 7520	Effective FY 25, Up to 4.0 cFTEs to offset Neurosurgery Residents. Positions to be pre-approved in writing by Hospital Director --	\$ 1,042,560 \$ 1,086,000
On-Call Coverage			
Trauma Call Coverage	-- --	24/7/365 Coverage	\$ 604,800 \$ 630,000
General Surgery Call Coverage	-- --	24/7/365 Coverage	\$ 90,720 \$ 94,500
Plastic Surgery Call Coverage	-- --	24/7/365 Coverage	\$ 151,200 \$ 157,500
Vascular Surgery Call Coverage	-- --	24/7/365 Coverage	\$ 300,000 \$ 312,500
Neurological Surgery Call Coverage	-- --	24/7/365 Coverage	\$ 1,103,760 \$ 1,149,750
Oral Surgery Call Coverage	-- --	24/7/365 Coverage	\$ 100,800 \$ 105,000
Sub-Total Direct Patient Care & On-Call Coverage before June 30, 2024			\$ 6,595,516 \$ 6,870,329
Sub-Total Direct Patient Care & On-Call Coverage after July 1, 2024 --			\$ 7,638,076 \$ 7,956,329
Total ARMC Annual Payments before June 30, 2024			\$ 8,973,408 \$ 9,320,050
Total ARMC Annual Payments after July 1, 2024 --			\$ 10,015,968 \$ 10,406,050
Contract Pass-Through Payments			
San Bernardino County Sheriff's Department			
Sheriffs Department Patients: Medical Care		Payable at current Medi-Cal Rates	Variable Variable
Sheriffs Department Patients: OMFS Services provided at detention center		Provided funds received from Sheriff's Department: \$4,000 per month	\$ 48,000 \$ 48,000
Sub-Total			\$ 48,000.00 \$ 48,000.00
Patton State Hospital			
Patton Patients		95% of negotiated professional fee rate	Variable Variable
Sub-Total			Variable Variable
County Pass-Through Payments Total			\$ 48,000.00 \$ 48,000.00
Total Annual Contract Amount until June 30, 2024			\$ 9,021,408 \$ 9,368,050
Total Annual Contract Amount after July 1, 2024			\$ 10,063,968 \$ 10,454,050

* Triggers are based on KPI Performance in Appendix D (note: the dollar amount indicated above for the Trigger would apply if the Trigger 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.

cFTE is equivalent to 1880 hours per year.

∞ This item is not effective until July 1, 2024.

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 Services Agreement (the "Contract") between the Hospital and Cal Med Physicians and Surgeons, Inc (the "Corporation") with a term beginning 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:

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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 provider (ex: Dept Chair, Trauma Director, Orthopedic Surgery Spine, Physician Faculty (Core), NP or PA, Secretary)

Practitioner: Name of provider 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 provider 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>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: _____

Cal Med Physicians and Surgeons, Inc.

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:

Dev Gnanadev, M.D.

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):

Dev Gnanadev, M.D.

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

Company Name	Relationship
Not applicable	

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Cal Med Physicians and Surgeons, Inc.	Dev Gnanadev, M.D.	

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):
Arrowhead Neurosurgical Medical Group, Inc.	Javed Siddiqi, M.D.	Javed Siddiqi, M.D.
Loma Linda School of Dentistry	Alan Herford, M.D.	Alan Herford, M.D.
3R Surgical, Inc.	Milton Retamozo, M.D.	Milton Retamozo, M.D.

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
Not applicable	

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