

**EIGHTH
AMENDMENT
TO MEDI-CAL PHYSICIAN SERVICES PROVIDER AGREEMENT,
FEDERALLY QUALIFIED HEALTH CENTER**

This Eighth Amendment further amends the Medi-Cal Physician Services Provider Agreement, Federally Qualified Health Center, as amended, ("Agreement") between the **Santa Barbara San Luis Obispo Regional Health Authority**, dba CenCal Health, ("CenCal Health"), and **County of Santa Barbara**, an organization approved by the State Department of Health Care Services as a Federally Qualified Health Center ("County").

RECITALS:

- A. County and CenCal Health are parties to the Agreement and seven amendments, effective January 1, 2012 through December 31, 2018, pursuant to which County is to deliver certain medical services to CenCal Health Members.
- B. County and CenCal Health wish to amend the Agreement to update Attachment A-1 – Services Included in Guaranteed Payment/Encounter Procedures For Capitated Members in the Sixth Amendment.
- C. County and CenCal Health wish to delete Exhibit D – PMPM Rate for January 1, 2015 Through December 31, 2016 in the Third Amendment to the Agreement dated February 1, 2015 in its entirety, and amend the language regarding payment for non-capitated Covered Services.
- D. County and CenCal Health have continued performance under the Agreement and seven amendments and now desire to extend the term of the Agreement to the period from January 1, 2019 through December 31, 2021.

NOW, THEREFORE, the parties agree as follows:

1. The above Recitals are true and correct.
2. This Eighth Amendment shall be effective on January 1, 2019 for all Covered Services rendered on and after January 1, 2019.
3. The effective term of the Agreement as described in **Section 9.1** of the Agreement is hereby extended through December 31, 2021.
4. **Section 4.1.2.1** of the Third Amendment to the Agreement is hereby replaced in its entirety as follows:

4.1.2.1 CenCal Health shall reimburse County on a monthly basis for all non-Capitated Services (those that are not outlined in Section 4.1.1 and Attachment A-1) rendered on and after January 1, 2015. Reimbursement shall be on a monthly basis at the per-member-per-month (PMPM) rate of \$6.52 PMPM. The PMPM shall be calculated based on County's same assigned membership used for reimbursement under Attachment A-2 "Payment Addendum" to Exhibit

A, Protocols For Primary Care Physicians, of the Agreement; however, County shall accept this payment as payment in full for such services rendered to any CenCal Health Member regardless of whether the Member is assigned to County. The monthly payment shall be made on or near the 15th of each month, or if the 15th day falls on a weekend or holiday, by the next business day.

5. **Attachment A-1 – Services Included in Guaranteed Payment/Encounter Procedures For Capitated Members**, of the Sixth Amendment dated July 1, 2016, is hereby deleted in its entirety and is replaced by **Attachment A-1 – Services Included in Guaranteed Payment/Encounter Procedures For Capitated Members**, dated January 1, 2019, attached herein and incorporated by reference.
6. **Exhibit D – PMPM Rate For January 1, 2015 Through December 31, 2016**, in the Third Amendment, dated February 1, 2015, is hereby deleted in its entirety.
7. Except as amended by this Eighth Amendment, all other provisions of the Agreement shall remain in full force and effect.
8. This Eighth Amendment may be executed in several counterparts, all of which taken together shall constitute a single agreement between the parties.

Eighth Amendment to Medi-Cal Physician Services Provider Agreement, Federally Qualified Health Center between the **County of Santa Barbara** and **CenCal Health**.

IN WITNESS WHEREOF, the parties have executed this Eighth Amendment to be effective on the dates set forth herein.

ATTEST:

Mona Miyasato
County Executive Officer
Clerk of the Board

By: 
Deputy Clerk

COUNTY OF SANTA BARBARA:

Steve Lavagnino

By: 
Chair, Board of Supervisors

Date: 2.12.19


RECOMMENDED FOR APPROVAL:

Van Do-Reynoso, MPH, PhD

By: 
Department Head

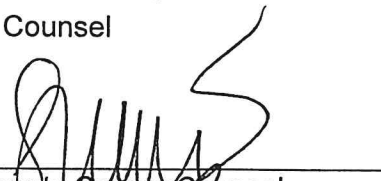
APPROVED AS TO ACCOUNTING FORM:

Betsy M. Schaffer, CPA
Auditor-Controller

By: 
Deputy

APPROVED AS TO FORM:

Michael C. Ghizzoni
County Counsel

By: 
Deputy County Counsel

APPROVED AS TO FORM:

Risk Management

By: 
Risk Management

Eighth Amendment to Medi-Cal Physician Services Provider Agreement, Federally Qualified Health Center between the **County of Santa Barbara** and **CenCal Health**.

IN WITNESS WHEREOF, the parties have executed this Eighth Amendment to be effective on the dates set forth herein.

SANTA BARBARA SAN LUIS OBISPO REGIONAL HEALTH AUTHORITY
dba CENCAL HEALTH

By:



Name:

Robert S. Freeman

Title:

Chief Executive Officer

APPROVED AS TO FORM



Caitlin Larsen, Director of Legal Affairs

ATTACHMENT A-1

Services Included in Guaranteed Payment/Encounter Procedures For Capitated Members

Descriptions provided for the Current Procedural Terminology /Healthcare Common Procedure Coding System (“CPT/HCPCS”) codes listed in this Attachment A-1 are included for reference only. Any subsequent changes to the CPT/HCPCS codes referenced below, as they are amended from time to time by the State, are hereby incorporated and the prevailing codes shall be included as determined by CenCal Health and posted on CenCal Health’s website.

MEDICAL SERVICES - OFFICE

99201 through 99205	Office Visit, New, Level 1 through 5
99211 through 99215	Office Visit, Established, Level 1 through 5
99391	Periodic preventive medicine evaluation: under 1 year
99392	Periodic preventive medicine evaluation: 1 through 4 years
99393	Periodic preventive medicine evaluation: 5 through 11 years
99394	Periodic preventive medicine evaluation: 12 through 17 years
99395	Periodic preventive medicine evaluation: 18 through 39 years

MEDICAL SERVICES - HOSPITAL

99221 through 99223	Hospital Care, Initial, Level 1 through 3
99231 through 99233	Hospital Care, Subsequent, Level 1 through 3
99238	Hospital Discharge Management, 30 minutes or less
99291	Critical Care, Evaluation and Management, First 30-74 minutes
99292	Critical Care, Each Additional 30 minutes

SURGICAL PROCEDURES

10060	Drainage and Incision of Skin Abscess, simple or single
11100	Biopsy of Skin, Subcutaneous Tissue, single lesion
11101	Biopsy Each Separate and Additional Lesion
11740	Evacuation of Sublingual Hematoma
12001	Simple Repair of Superficial Wound to 2.5 Cm - Extremities
12011	Simple Repair of Superficial Wound to 2.5 CM - Face, etc.
16000	Initial Treatment First Degree Burn
16020	Dressing / Debridement of Burn, less than 5% of total body surface area
69210	Removal Impacted Cerumen - one/both Ears

LABORATORY SERVICES

81000	Urinalysis by dip stick or tablet reagent, non-automated with microscopy
81002	Urinalysis; non-automated, without microscopy
81005	Urinalysis, qualitative or semi-quantitative
81015	Urinalysis, qualitative or semi-quantitative, microscopic only
88271	Test for blood, other source.

CHDP COVERED PREVENTIVE SERVICES

All CHDP Covered Services as outlined in the State Manual for eligible Members are included in the Guaranteed Payment. Providers may refer to the State Manual for details on CHDP services.