1 AGREEMENT BETWEEN 2 **COUNTY OF STANISLAUS dba** 3 STANISLAUS COUNTY EMS AGENCY 4 **AND** 5 SUTTER VALLEY HOSPITALS dba MEMORIAL MEDICAL CENTER 6 FOR DESIGNATION AS A 7 PRIMARY STROKE RECEIVING CENTER 8 9 10 This Agreement ("Agreement") is made effective, by and between County of Stanislaus 11 doing business as Stanislaus County Emergency Medical Services Agency ("Agency") and Sutter Valley Hospitals, a California nonprofit public benefit corporation doing 12 13 business as Memorial Medical Center ("Hospital") which maintains an acute care 14 hospital located at 1700 Coffee Rd., Modesto, CA 95355. 15 16 WHEREAS, Agency has implemented a Stroke Critical Care System; and, 17 18 WHEREAS, Agency wishes to assure a high quality of care by directing Stroke patients 19 from the pre-hospital environment, as defined below, to facilities committed to meeting 20 Primary Stroke Center (PSC) designation standards; and 21 22 WHEREAS, Agency has found that Hospital meets Agency PSC designation standards; 23 and 24 25 WHEREAS, Hospital is willing to accept designation as a PSC; and 26 27 WHEREAS, Hospital by virtue of the parties' execution of this Agreement, will be 28 designated by Agency as a PSC under the terms of the Agreement; 29 30 NOW THEREFORE, in consideration of the recitals and the mutual obligations of the 31 parties expressed herein, both Agency and Hospital do hereby expressly agree as follows: 32 33 **1. Definitions**. For the purpose of the agreement: 34 35 a. "Clinical Stroke Team" means a neurologist, neurosurgeon, interventional neuro-radiologist, or emergency physician who is board certified in 36 neurology, neurosurgery, endovascular neurosurgical radiology, or other 37 board-certified physician with sufficient experience and expertise in 38 39 managing patients with acute cerebral vascular disease as determined by the hospital credentials committee. 40 41 42 "Stroke Patient" means a patient evaluated by pre-hospital, physician, 43 nursing, or other clinical personnel according to the policies and procedures established by the Agency, as may be amended from time to 44 45 time, and been found to require PSC, or Comprehensive Stroke Center 46 services. 47

{01718859 v.5} Page **1** of **13** 

- c. "Stroke Critical Care System" means a subspecialty care component of the EMS system developed by Stanislaus County Emergency Medical Services Agency. This critical care system links prehospital and hospital care to deliver optimal treatment to the population of stroke patients.
- d. "Stroke Critical Care System Advisory Committee" means the multi-disciplinary peer-review committee, comprised of representatives from each Stanislaus Accredited Stroke Center, including Hospital, and other professionals designated by the Agency, which audits the Stroke Critical Care System making recommendations for system improvements, and functioning in an advisory capacity on other Stroke Critical Care System issues. Committee members designated by the Agency may include, but are not limited to, Stanislaus County Accredited Stroke Center medical directors and program managers, representatives from other local non-Stroke Center hospitals, Neurologists, emergency medicine subspecialists, and representatives from ALS First Response, ground ambulance providers and flight emergency service providers.
- e. "Primary Stroke Center" (PSC) means a hospital in the Agency's region designated as a Stroke Receiving Center. The designated PSC is certified by The Joint Commission and participates in American Heart Association's "Get With The Guidelines."
- f. "Comprehensive Stroke Center" (CSC) means a hospital with specific abilities to receive, diagnose and treat all stroke cases and provide the highest level of care for stroke. The designated CSC is certified by The Joint Commission and participates in American Heart Association's Get With The Guidelines".

#### 2. Term

This Agreement shall begin April 1, 2024 and continue until December 31, 2027, unless earlier terminated pursuant to this Agreement.

#### 3. Designation

- a. Agency hereby designates, subject to conditions set forth in Stanislaus County EMS Policy 522.00 (ww.stanems.com), Hospital as a Primary Stroke Receiving Center.
- b. Designation will continue and be contingent on the following:
  - i. Continued ability to meet PSC standards as required and verified by the American Heart Association (AHA), The Joint Commission or other certification mutually agreed upon by the parties.

#### 4. Designation and Monitoring Fee

{01718859 v.5} Page **2** of **13** 

6. Hospital Responsibilities

- a. Agency has established an application fee per Stanislaus County Board of Supervisors approved EMS Fee Schedule (Exhibit A) for hospital(s) desiring to be designated as a Stroke Receiving Facility
- b. Hospital shall pay Agency an annual monitoring fee per the approved EMS Fee Schedule (Exhibit A) for the Stoke Receiving Facility Designation. The fee shall be used to pay the Agency's costs of administering and evaluating the Stroke Systems of Care. Payments can be made in full by July 31st on a one-time annual basis or on a quarterly basis in four installments due by the 15th of each of the following months; July, October, January, and April. In the event of the termination of this Agreement by Agency without cause, Agency shall return to Hospital a prorated amount of the annual fee paid by Hospital for that year. The fee is not otherwise refundable in whole or in part.

#### 5. Agency Responsibilities

- a. Provide medical direction to and review of components of the prehospital Stroke Critical Care System.
- b. Evaluate protocols, policies, and procedures for the EMS system, in compliance with the California Code of Regulations (CCR), Title 22, Division 9, and make appropriate changes as necessary. Agency shall notify Hospital Stroke Program Manager when Agency desires to adopt, change or modify the protocols, policies and procedures which make up the prehospital Stroke Critical Care System. Prior to adopting any protocol, policy, and/or procedure or amendment to same, Agency shall meet and confer with Hospital about its effect on Hospital. Should Hospital wish to terminate the Agreement based upon any policy, procedure, or protocol that is adopted or amended by Agency, Hospital shall have the right to deliver to Agency, within thirty (3) days after adoption, written notice of termination of this Agreement, which termination shall be effective thirty (30) days after such delivery to Agency, unless a later date is specified in the notice.
- c. Maintain an advisory committee to monitor, evaluate and report on the quality of Stroke Critical Care System.
- d. Provide leadership for continuous quality improvement focusing on optimizing the overall effectiveness of the Stroke Critical Care System and its individual components through the development of performance measurements and for the system function (both process and outcomes measures) and by utilizing continuous quality improvement strategies and collaboration with stakeholders.

142 143 a. Maintain all services and personnel necessary to comply with the standards set forth in the CCR, Title 22, Division 9, Chapter 7.2. 144 145 146 b. Maintain all services and personnel necessary to comply with the standards set forth in this Agreement and standards set forth in Stanislaus 147 County EMS Agency Policy 522.00, and as subsequently amended or 148 revised. 149 150 151 c. Hospital shall accept all Stroke patients regardless of patient's ability to pay for medical care or hospitalization. This requirement shall include, 152 but is not limited to, unsponsored or medically indigent patients; patients 153 who are insured under Medicare or Medi-Cal; other third-party insurers; 154 Covered California; or self-insurers. 155 156 157 d. Hospital shall ensure no Stroke patient is transferred to another hospital 158 based in whole or in part on the financial status of a patient or their ability to pay for care and services except as provided below: 159 160 161 i. Patients who are members of health maintenance organizations or managed care payers will be promptly transferred to a hospital of 162 that organization when such transfer is deemed prudent and 163 medically indicated by the physician in charge of the patient's 164 165 medical care in consultation with a physician representing the health maintenance organization. 166 167 168 e. Hospital shall monitor compliance with PSC Standards (Stanislaus County EMS Policy 522.00) on a regular and ongoing basis. Documentation of 169 such efforts shall be made available to the Agency upon request. 170 171 f. Hospital shall notify the Agency, in writing, within twenty-four (24) hours 172 of becoming aware of any failure to meet the PSC Standards in Stanislaus 173 174 County EMS Policy 522.00 and take corrective action within a reasonable 175 period of time determined by the Agency to correct the failure. 176 177 g. Hospital shall notify Agency immediately of any circumstance(s) that will prevent Hospital from providing PSC services. 178 179 180 h. Hospital shall comply with any Agency plan of correction, regarding any identified breach of the PSC Standards in Stanislaus County EMS Policy 181 522.00, within a reasonable timeline established by the Agency. 182 183 184 i. Hospital shall maintain a designated telephone number to facilitate rapid 185 access to an on-site physician for consultation with community physicians 186 and other providers regarding care and transfer of Stroke patients. 187

{01718859 v.5} Page **4** of **13** 

j. Hospital shall actively and cooperatively participate as a member of the Stroke Critical Care System Advisory Committee, and such other related committees that may, from time to time, reasonably be named and organized by the Agency in cooperation with, and subject to mutual agreement of, Hospital and other Stanislaus County accredited Stroke Centers.

k. Hospital shall participate in web-based patient outcome reporting in the Coverdell/Stroke Registry and Get With The Guidelines (GWTG), and at a minimum, collect and maintain the data specified in Stanislaus County EMS Policy 522.00.

l. Hospital shall maintain a current Joint Commission PSC Certification.

m. Abide by all pertinent Agency EMS Policies and Procedures and to participate in the process by which those policies are created and amended.

## 7. Financial Responsibility

Except as provided in Section 16 (Indemnification), Agency shall not be liable for any costs or expenses incurred by Hospital to satisfy Hospital's responsibilities under this Agreement, including any costs or expenses incurred by Hospital for services provided to Stroke patients lacking the ability to pay for services.

#### 8. Audits and Inspections

With the provision of at least thirty (30) calendar days written notice and to the extent permitted by law, dully authorized representatives of Agency shall have right of access during normal business hours to Hospital's non-privileged fines and records relating to the services performed hereunder. Agency agrees to treat such files and records as confidential information subject to Section 22 (Confidentiality) of this Agreement and shall not make copies or remove such files or records from Hospital's premises.

#### 9. Entire Agreement; Changes and Amendments

This Agreement and Stanislaus County EMS Policy 522.00 Exhibit A and references contained herein fully express all understandings of the parties concerning the matters covered herein. No addition to or alteration of the terms and conditions of this Agreement, and no verbal understanding of the parties, or their officers, agents or employees, shall be valid unless made in the form of a written amendment to this Agreement that is signed by all parties.

#### 10. Termination for Cause

{01718859 v.5} Page **5** of **13** 

224	P- A		
234 235	a. <b>By Agency.</b> Agency may terminate this Agreement upon written notice to		
236	Hospital, subject to Hospitals opportunity to cure as set forth below, upon		
237	the occurrence of any one or more of the following events:		
237	i. Any material breach of this Agreement by Hospital.		
239			
240	local ordinances.		
241	iii. Any failure to meet the Hospital Stroke Care Requirements defined		
242	in the California Health and Safety Codes, Title 22, Division 9		
243	Chapter 7.2, article 4, section 100270.223.		
244	iv. Any failure to make available sufficient personnel and Hospital		
245	resources needed to provide the specialty care services required by		
246	Stanislaus County EMS Policy 522.00.		
247	v. Gross misrepresentation or fraud.		
248	vi. Loss or suspension of licensure as an acute care hospital, loss or		
249	suspension of any existing or future special permits required to		
250	perform Hospital's obligations hereunder.		
251	vii. Failure to submit specified reports, Stroke related data, or other		
252	information required under this Agreement, provided that such		
253	submission of data is clearly permitted by law.		
254	h. Dr. Hagnital Hagnital may tampinata this A ansamant young written nation		
255	b. <b>By Hospital.</b> Hospital may terminate this Agreement upon written notice		
256	to Agency, subject to opportunity to cure as set forth below, upon the		
257	occurrence of any one or more of the following events:		
258	i. Any material breach of this Agreement by Agency		
259	i. Any material breach of this Agreement by Agency		
260	11 Tampination without Causa		
261	11. Termination without Cause		
262 263	The Agency may terminate this Agreement without cause your ninety (00) days		
263 264	The Agency may terminate this Agreement without cause upon ninety (90) days		
265	written notice to Hospital. Hospital may terminate this Agreement without cause upon one hundred eighty (180) days written notice to the Agency.		
266	upon one nundred eighty (180) days written notice to the Agency.		
267	12. Bypass or Diversion		
268	12. Dypass of Diversion		
269	a. The Agency enforces a "No diversion or bypass" policy for all hospitals		
209	a. The Agency enforces a "No diversion or bypass" policy for all hospitals within Stanislaus County except for the following unforeseen		
270	circumstances:		
271	circumstances.		
272	i. Internal Disaster		
273 274	ii. Inoperable CT scan		
275	iii. Inoperative Cardiac Cath Lab or other Hospital unit that houses		
276	appropriate equipment for stroke patients.		
277	appropriate equipment for stroke patients.		
277	b. In the event Hospital meets one of the two criteria above, the Agency Duty		
278	Officer must be contacted immediately, and an Unusual Occurrence		
280	Report (UOR) must be filed with the Agency within 24 hours of event.		

{01718859 v.5} Page **6** of **13** 

281 282 13. Opportunity to Cure

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Prior to the exercise of the Agency's right to terminate for cause, the terminating party shall give the other party at least thirty (30) days written notice ("Correction Period") specifying in reasonable detail the grounds for termination and all deficiencies requiring correction and shall allow the other party the opportunity to cure. The Agency may shorten the Correction Period to immediate suspension if the Agency determines that Hospital's action or inaction has seriously threatened, or will seriously threaten, public health and safety. If Hospital has not remedied each deficiency prior to the end of the Correction Period to the satisfaction of the Agency, or the Agency has not approved a plan of correction within the Correction Period, the Agency may terminate this Agreement upon written notice to Hospital, specifying the effective date of termination. No opportunity to cure is required prior to the Agency's termination of this Agreement for failure by Hospital to complete any plan of correction imposed by the Agency.

14. Maintenance of Records

Hospital shall maintain patient care records as required by law. Such records shall be maintained in such a fashion as to be able to separately identify Stroke Patients from all other patients.

#### 15. Reports, Evaluations and Research Studies

Hospital shall, as may be reasonably requested by the Agency, participate in evaluations and/or research designed to show the effectiveness of the Stroke Care System; and shall submit reports and materials on Stroke services as reasonably requested by the Agency. These reports, evaluations and studies shall be used by the Agency to analyze and generate aggregate statistical reports on the Stroke Care system performance.

#### 16. Indemnification

Each party (the "Indemnifying Party") agrees to defend, indemnify, and hold harmless the other party (the "Indemnified Party) and its directors, trustees, members, shareholders, partners, officers, employees and agents from and against any and all liability, loss, expense (including reasonable attorneys' fees) or claims for injury or damages arising out of the performance of this Agreement, but only in proportion to and to the extent such liability, loss, expense or claim for injury or damages is caused by or results from the negligent or intentional acts or omissions of the Indemnifying Party or its directors, trustees, members, shareholders, partners, officers, employees or agents.

#### 17. Insurance

{01718859 v.5} Page **7** of **13** 

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- a. Hospital and Agency shall provide and maintain the following programs of insurance, as specified in this Agreement. Such insurance may include alternative risk management programs, including self-insurance or a combination of insurance and self-insurance, provided that such alternative risk management programs provide protection equivalent to that specified under this Agreement.

b. During the term of this Agreement, Hospital and Agency shall each at all times maintain, each at its sole cost and expense, commercial general liability insurance with per occurrence limits of not less than Two Million Dollars (\$2,000,000.00) and annual aggregate limits not less than Four Million Dollars (\$4,000,000.00). Hospital and Agency shall each also arrange, each at its sole cost and expense, professional liability insurance, which includes coverage for each of their respective employees having limits of not less than Five Million Dollars (\$5,000,000.00) on claims made basis and an annual aggregate limit of not less than Fifteen Million Dollars (\$15,000,000.00). The parties acknowledge and agree that physicians and other clinicians are not employees or agents of Hospital by virtue of being on Hospital's medical staff, and therefore such practitioners are not covered by Hospital's professional liability insurance.

c. Any policy of insurance that Agency or Hospital is required to maintain pursuant to this section shall be reasonably acceptable to the other party provided that any such policy obtained from a company duly licensed to do business in the State of California and having a Standard and Poor's or A.M. Best rating of at least A (or an equivalent or comparable rating from another rating agency) shall be deemed acceptable. Agency and Hospital shall each provide to the other evidence of coverage required by this section within thirty (30) days after execution of this Agreement and at least annually thereafter or more frequently upon request.

d. Each Party shall maintain in full force and effect appropriate workers' compensation protection and unemployment insurance as required by law.

## 18. Conflicts of Interest

Neither Hospital nor the Agency shall exert any direct or indirect influence that would cause or contribute to the transport of Stroke patients to a facility other than the closest Stroke Receiving Facility, except as specifically authorized by Agency policies or procedures. Hospital and Agency shall comply with all applicable federal, state, and local conflict of interest laws and regulations.

# 19. Compliance Obligations

The parties shall comply with applicable federal, state, and local laws, rules and regulations, and Agency policies and procedures in effect at the inception of this Agreement or that become effective during the term of this Agreement, pursuant

{01718859 v.5} Page **8** of **13** 

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413 414 to the provisions of this Agreement including, but not limited to, facility and professional licensing, and/or certifications laws and regulations, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 [42 U.S.C. section 1320d et seg.], and the Emergency Medical Treatment and Active Labor Act (EMTALA)[42 U.S.C. section 1395dd].

# 20. Exclusion Lists Screening

Agency certifies that neither it, nor any of its employees, nor any subcontractor providing services, is currently named as an excluded entity or individual on the "List of Excluded Individuals/Entities" of the Department of Health and Human Services Office of the Inspector General ("OIG List"), the "Excluded Parties List System" of the System for Award Management ("EPLS"), the "Specially Designated Nationals List" ("SDN List") or the "Foreign Sanctions Evaders List" ("FSE List") of the Office of Foreign Assets Control, or any State debarment of exclusion list, including, but not limited to, the California Department of Health Care Services Medi-Cal Program Suspended and Ineligible Provider List or any other sanctions list that would make Agency, or any of its employees or subcontractors ineligible to participate in any federal or state funded programs (collectively, "Lists"). Agency shall immediately notify Hospital if any point during the Term Agency, or any of its employees, or any subcontractor providing services under this Agreement is named as an excluded entity or individual on any of the Lists.

#### 21. Nondiscrimination

Hospital shall comply with all applicable federal, state, and local laws including Agency equal opportunity requirements. Such laws include but are not limited to the following: Title VII of the Civil Rights Act of 1964 as amended; Americans with Disabilities Act of 1990; The Rehabilitation Act of 1973 (Sections 503 and 504); California Fair Employment and Housing Act (Government Code sections 12900 et seq.); California Labor Code sections 1101 and 1102. Hospital will not discriminate against any subcontractor, employee, or applicant for employment because of age, race, color, national origin, ancestry, religion, sex/gender, sexual orientation, mental disability, physical disability, medical condition, political beliefs, organizational affiliations, or marital status in the recruitment, selection for training including apprenticeship, hiring, employment, utilization, promotion, layoff, rates of pay other forms of compensation. Nor will Hospital discriminate in the provision of services provided under this Agreement because of age, race, color, national origin, ancestry, religion, sex/gender, sexual orientation, mental disability, physical disability, medical condition, political beliefs, organizational affiliations, or marital status.

#### 22. Confidentiality

The parties agree to maintain the confidentiality of all patient information and records obtained in the course of providing services under this Agreement, in

{01718859 v.5} Page 9 of 13

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accordance with all applicable federal and state statutes and regulations and local ordinances. Such information shall be divulged only as provided by law. The Agency represents that it is a "Health Oversight Agency" under HIPAA and, therefore, a Business Associate Agreement is not necessary. Nothing in this agreement shall require Hospital to provide or disclose to Agency, or anyone else, the following: (1) documents generated solely in anticipation of litigation, (2) privileged documents, and (3) documents by, or for the use of, any medical staff committee having the responsibility of evaluation and improvement of the quality of care rendered in the hospital. Disclosure of any medical staff document to Agency shall not constitute a waiver by Hospital of the protections afforded by California Evidence Code Section 1157 or any other protections. If any disclosure of information contained in a medical staff committee document is sought from the Agency by a third party, the Agency shall notify Hospital and shall rise all applicable objections or defenses to the demand for disclosure.

23. Mutual Cooperation

for such landing privileges.

It is agreed that mutual non-competition among the designated Stroke Receiving facilities, as well as their associated helicopter services, is vital to providing optimal medical care under the Stroke Care System. In furtherance of such cooperation, Hospital agrees to provide access to the helipad, if any, located at Hospital to all helicopter services, to the extent necessary to triage and/or transport Stroke patients to Hospital. Hospital will not charge helicopter services

24. Notices

Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served on the other party by giving the party such notice, or may be served by certified mail, postage prepaid, return receipt requested, or by national overnight delivery service to the following representatives at the addresses cited below:

To Hospital: Tracy Roman, CEO
Memorial Medical Center
1700 Coffee Road
Modesto, CA 95355

Copy: Chief Legal Officer, Valley Area

Sutter Health, Office of the General Counsel

2200 River Plaza Drive Sacramento, CA 95833

To Agency: Chad Braner, Director

Stanislaus County EMS Agency

3705 Oakdale Road Modesto, CA 95357

{01718859 v.5} Page **10** of **13** 

25. Governing Law

This Agreement has been executed and delivered in, and will be construed and enforced in accordance with, the laws of the State of California.

#### 26. Conformance with Rules and Regulations

Hospital shall comply with Stroke regulations issued by California State Emergency Medical Services Authority when and as applicable.

#### 27. Ownership, Publication, Reproduction and Use of Material

Subject to the confidentiality provision of Section 22 herein, Agency and Hospital shall have unrestricted authority to publish, disclose, distribute, and otherwise use, copyright or patent, in whole or in part, any such reports, studies, data, statistics, forms or other materials or properties produced under this Agreement. Hospital shall have the right to review and approve, comment on, or reject (i.e., identify as confidential and not subject to disclosure per Section 22 (Confidentiality) of this Agreement) any hospital specific data prior to public dissemination of the data, unless the data is otherwise deemed public information. Agency shall acknowledge Hospital's contribution and Hospital shall acknowledge Agency's contribution in any materials published or issued as a result of this Agreement unless either Agency or Hospital request not to be so acknowledged or identified.

#### 28. Assignment

Hospital shall not delegate its duties and responsibilities or assign its rights hereunder, or both, either in whole or in part, without the prior written consent of the Agency. This provision shall not be applicable to service agreements or contracts, or similar arrangements usually and customarily entered into by medical facilities to obtain or arrange for professional medical services, administrative support, equipment, supplies or technical support.

#### 29. No Third-Party Beneficiaries

The parties do not intend to confer, and this Agreement shall not be construed to confer any rights to any person, group, corporation, or entity other than the parties.

#### 30. Severability

If any provision of this Agreement is found by a court of competent jurisdiction to be void, invalid or unenforceable, the same will either be reformed to comply with applicable law or stricken if not so conformable, so as not to affect the validity or enforceability of this Agreement.

{01718859 v.5} Page **11** of **13** 

#### 31. Waiver 515 516 517 No delay or failure to require performance of any provision of this Agreement 518 shall constitute a waiver of that provision as to that or any other instance. Any waiver granted by a party must be in writing and shall apply to the specific 519 instance expressly stated. 520 521 522 32. Surviving Obligations 523 524 All obligations under this Agreement which are continuing in nature shall survive 525 the termination or conclusion of this Agreement, including but not limited to, the 526 provisions concerning indemnification and confidentiality. 527 528 33. Counterparts 529 530 This Agreement may be executed in counterparts, each of which will be an 531 original and all of which together will constitute one and the same instrument. A photocopy, scanned, or electronically signed version of the executed Agreement 532 may be used as if it were the original Agreement. 533 534 535 34. Execution 536 537 By their signatures below, each of the signatories to this Agreement represent that they have the authority to execute this agreement and to bind the party on whose 538 behalf their execution is made. 539 540 541 542 **Stanislaus County EMS Agency: Sutter Valley Hospital dba Memorial Medical Center:** 543 544 DocuSigned by: 545 546 By: By: Name: Chad R. Braner Name: Tracy Roman 547 548 **Title: Executive Director Title: Chief Executive Officer** 549 550 551 **Date:** 3/28/2024 552 Date:

{01718859 v.5} Page **12** of **13** 

#### 31. Waiver 515 516 517 No delay or failure to require performance of any provision of this Agreement 518 shall constitute a waiver of that provision as to that or any other instance. Any waiver granted by a party must be in writing and shall apply to the specific 519 instance expressly stated. 520 521 522 32. Surviving Obligations 523 524 All obligations under this Agreement which are continuing in nature shall survive 525 the termination or conclusion of this Agreement, including but not limited to, the 526 provisions concerning indemnification and confidentiality. 527 528 33. Counterparts 529 530 This Agreement may be executed in counterparts, each of which will be an 531 original and all of which together will constitute one and the same instrument. A photocopy, scanned, or electronically signed version of the executed Agreement 532 may be used as if it were the original Agreement. 533 534 535 34. Execution 536 537 By their signatures below, each of the signatories to this Agreement represent that they have the authority to execute this agreement and to bind the party on whose 538 behalf their execution is made. 539 540 541 542 **Stanislaus County EMS Agency: Sutter Valley Hospital dba Memorial Medical Center:** 543 544 DocuSianed by: 545 546 By: Name: Tracy Roman 547 Name: ChadoReoBraner **Title: Chief Executive Officer** 548 **Title: Executive Director** 549 550 551 **Date:** 3/31/2024 552 Date:

{01718859 v.5} Page **12** of **13** 

# Exhibit A



# AGENCY FEE SCHEDULE Effective July 1, 2022

# **Specialty Center**

Stroke			
Primary Stroke Center Application	\$5,600.00		
Primary Stroke Center Annual Fee	\$64,303.00		
Comprehensive Stroke Center Annual Fee	\$66,786.00		

{01718859 v.5} Page **13** of **13**