



# **Stanislaus County**

## **Emergency Medical Services Agency**

**AGREEMENT WITH ACTIVE TRANSPORT MEDICAL SERVICES, LLC  
TO PROVIDE NON-EMERGENCYGROUND AMBULANCE SERVICE FOR INTER-  
FACILITY TRANSFERS (IFT)**

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THIS AGREEMENT, entered February 24, 2023 and ending on February 28, 2025 by and between the Stanislaus County EMS Agency, hereinafter called "AGENCY" and Active Transport Medical Services, LLC hereinafter called "CONTRACTOR".

### RECITALS OF AUTHORITY

Whereas, pursuant to California Health and Safety Code, Section 1797.200, the County of Stanislaus has designated the AGENCY to be the local EMS agency.

**NOW, THEREFORE, THE PARTIES HERETO AGREE as follows:**

### SECTION 1: ADMINISTRATION OF THE AGREEMENT AND TERMS

#### **1.1 Contract Administration**

The AGENCY Executive Director shall serve as the Contract Administrator and shall represent the County in all matters pertaining to this Agreement and shall administer this Agreement on behalf of the County. The Contract Administrator or his/her designee may:

- A. Audit and inspect the CONTRACTOR'S financial records, operational records, and patient care records;
- B. Monitor the CONTRACTOR'S service delivery for compliance with standard of care as defined through law, medical protocols, and policies;
- C. Investigate any unusual occurrence reports; and
- D. Provide technical guidance, as the Contract Administrator deems appropriate.

#### **1.2 Term of Agreement**

The term of this Agreement shall commence at 0001 on February 24, 2023 and terminate at 2400 hours on February 28, 2025 unless terminated earlier pursuant to the terms and

conditions of this Agreement.

### **1.3 Contract Response Area**

- A. All requirements described in this Agreement apply to the provision of Non-Emergency Basic Life Support (BLS), Advance Life Support (ALS), and Critical Care Transport (CCT) Inter-Facility Transfer (IFT) services in and out of Stanislaus County.
- B. The Contract Response Area shall not include responses to 9-1-1 generated calls or dispatched calls arising from emergency response requests within any defined Exclusive Operating Area in Stanislaus County unless so directed by the County's LEMSA or MHOAC (Medical Health Operational Area Coordinator).

### **1.4 Notices**

All notices, demands, requests, consents, approvals, waivers, or communications ("notices") that either party desires or is required to give to the other party or any other person shall be in writing and either personally delivered or sent by prepaid postage, first class mail. Notices shall be addressed as appears below for each party, provided that if either party gives notice of a change of name or address, notices to the giver of that notice shall thereafter be given as demanded in that notice.

Contractor: Clayton Brown, Co-Owner  
Jimmy Urrutia, Co-Owner  
Active Transport Medical, LLC  
24 Oxford Ave  
Clovis, CA 93612

Agency: Chad Braner, Executive Director  
Stanislaus County EMS Agency  
3705 Oakdale Rd  
Modesto, CA95357

## **1.5 BLS,ALS, and CCT Ambulance Service Authorization**

In consideration for providing ambulance services in accordance with the terms described herein, CONTRACTOR is entitled to be a BLS, ALS, and/or CCT Ground Ambulance Service Provider for Non-Emergency IFT requests in and out of Stanislaus County.

### SECTION 2: ROLES AND RESPONSIBILITIES

#### **2.1 Agency's Functional Responsibilities**

The AGENCY seeks to ensure that reliable, BLS, ALS, and/or CCT medical care and transport services

are provided on an uninterrupted basis. To accomplish this purpose, the AGENCY shall:

- A. Monitor the CONTRACTOR'S operation as a Non-Emergency BLS, ALS, and CCT ambulance provider within Stanislaus County;
- B. Monitor and evaluate contract performance and compliance; and
- C. Provide medical direction and control of the EMS system, to include EMS dispatch.
- D. Investigate and Report on any unusual occurrence report involving CONTRACTOR, according to SCEMSA UOR Policy 620.20.

#### **2.2 Contractor's Functional Responsibilities**

During the Service Period of this Agreement, as defined in Section 1.2, the CONTRACTOR shall do all the following:

- A. Provide Non-Emergency BLS, ALS, and/or CCT Ground Ambulance for IFT requests in Stanislaus County. Services and care delivered must be evaluated by the CONTRACTOR'S internal quality improvement program and as deemed by the

Agency to be necessary, through the AGENCY'S quality improvement program in order to improve and maintain effective clinical performance, to detect and correct performance deficiencies and to continuously upgrade the performance and reliability of CONTRACTOR'S services;

- B. Provide all ambulances, as well as other vehicles and equipment that are necessary for the provision of services required under this Agreement;
- C. Furnish supplies and replacements for those used by the CONTRACTOR'S personnel;
- D. Establish a recruitment, hiring and retention system consistent with ensuring a quality workforce of clinically competent employees that are appropriately certified;
- E. Comply with all training requirements established by the State of California;
- F. Comply with the "AB 389 (2021) Factors" inclusive of a demonstration that Contractor's employees will receive wages and benefits generally consistent with those provided to ambulance service employees in the same geographic region and that staffing levels will be comparable to the staffing levels under the previous contracts serving Stanislaus County.
- G. Comply with AGENCY policies and procedures;
- H. Maintain neat, clean, and professional appearance of all personnel, facilities, and equipment;
- I. Submit, in a timely manner, reports, which are supported by documentation or other verifiable information, as required by the AGENCY;
- J. Respond to AGENCY inquiries about service complaints and reports of investigation within 10 calendar days of notification; and
- K. Notify the AGENCY of all incidents in which the CONTRACTOR'S personnel fail to comply with protocols and/or contractual requirements as set forth herein and as established by the AGENCY.

- L. CONTRACTOR assumes full responsibility for Non-Emergency BLS, ALS, and CCT Ground Ambulance IFT services provided by CONTRACTOR.
- M. Electronic Patient Care Report (ePCR) technology will be NEMESIS compliant with revision V3.4 or higher data dictionary reporting standards
- N. Participate in AGENCY's monitoring of Non-Emergency BLS, ALS, and CCT IFTs through AGENCY'S determined vendor (in process), at CONTRACTOR's cost. The AGENCY will notify the CONTRACTOR 30 days prior to implementation.

### SECTION 3: OPERATIONS

#### **3.1 Dispatch Requirements**

- A. The CONTRACTOR shall maintain a contract with any of the following dispatch centers which meets the requirements of AGENCY Policy "Non-Emergency Medical Service Dispatch Center Standards":
  - 1. An Existing Authorized EMS Dispatch Center
  - 2. An Existing Authorized Non-Emergency EMS Dispatch Center
  - 3. CONTRACTOR'S Non-Emergency EMS Dispatch Center
  
- B. Upon determining that a patient may not be transported by CONTRACTOR based upon the criteria in Exhibit-B, CONTRACTOR's dispatch personnel shall:
  - 1. Record the patients name, address, and call-back number;
  - 2. Tell the requesting party to hang up and dial 911;
  - 3. Call the Authorized EMS/EMD Dispatch Center at (800) 913-9113, and



provide the patient's name, address, and callback number.

- C. CONTRACTOR shall obtain, install, and maintain in CONTRACTOR'S ambulances all such communication equipment as is determined through AGENCY policy to be necessary for the effective and efficient dispatch of ambulances. CONTRACTOR shall be financially responsible for installation; purchase/rental and maintenance of communication equipment provided in Section 3.2 (C) of this agreement.
- D. CONTRACTOR shall establish policies that ensure that upon receipt of a private request for ambulance services, that pertinent information, including callback number, location, and nature of the incident, is ascertained, and immediately transferred to the Authorized EMS Dispatch Center.
- E. CONTRACTOR shall ensure that a Record of Calls, as defined in 13 C.C.R, Division 2, Chapter 5, Article 1, Section 1100.7 is maintained. In addition, CONTRACTOR shall ensure a record of all requests for ambulance service is maintained by the Authorized EMS Dispatch Center.

### **3.2 Equipment and Supplies**

- A. Non-Emergency Ground Ambulances shall not be kept in service to respond to Non-Medical Emergencies when the vehicle mileage exceeds 250,000 miles without the written approval of the AGENCY.
- B. CONTRACTOR shall maintain, and provide to the Contract Administrator, a complete listing of all ambulances (including reserve ambulances) to be used in the performance of the Agreement including their license and vehicle identification numbers, and the name and address of the lien holder, if any.
- C. Changes in the lien holder, as well as the transfer of ownership, purchase, or sale of ambulances used under the agreement shall be reported to the Contract Administrator on the quarterly report.
- D. Vehicle Maintenance Program - The CONTRACTOR shall maintain all ambulances. The CONTRACTOR'S vehicle maintenance program shall be designed and conducted to achieve the highest standards of reliability appropriate to a modern emergency

service and shall contain at a minimum the following provisions:

1. Any vehicle with any deficiency that compromises, or may compromise, its performance shall be immediately removed from service.
2. Interior and exterior appearance of vehicles shall be clean and operational.
3. All damaged vehicles shall be removed from service immediately and shall not return to service until performance deficiencies are removed.
4. Repairs to any damaged vehicle shall be conducted in a timely manner.
5. CONTRACTOR shall develop and maintain a fleet management plan, maintain a record of the preventative maintenance, repairs and strategic replacement of equipment and vehicles and shall make such plan and records available to the AGENCY upon request

E. Vehicle Failure - In each instance of a BLS, ALS, and/or CCT Ambulance vehicle failure on a call resulting in the inability to continue the response to or transport of the patient, CONTRACTOR shall submit an Unusual Occurrence Report which at a minimum shall include:

1. The time it took for another BLS or ALS and/or CCT Ambulance to respond to the same call; which Ambulance Provider responded;
2. the reason or suspected reason(s) for vehicle failure and/or malfunction, and actions CONTRACTOR has taken to prevent similar failures.
3. In each instance where the mode of patient transport changes due to vehicle failure or malfunction, the CONTRACTOR will require that ambulance personnel on vehicle(s) which fail and the personnel on vehicle(s) which transport(s) the patient submit distinct separate Patient Care Records.

F. Ambulance Equipment and Supplies - Each ambulance shall, always, maintain an equipment and supply inventory sufficient to meet federal, State, and local requirements for BLS, ALS, and/CCT level ambulances, including the requirements of Agency

Equipment and Drug Inventory Policy. CONTRACTOR shall be responsible for stocking all expendable supplies.

1. All ambulance vehicles shall, as a minimum, meet all standards of 13 C.C.R., Federal Communications Commission (FCC) regulations and mandates, and AGENCY'S timeline with respect to implementation of regulations or mandates set forth by AGENCY, FCC or in the C.C.R.
2. A fine of \$500.00 per day will be paid by the CONTRACTOR for every day CONTRACTOR is past the deadline set forth by AGENCY, FCC, or California regulations and mandates.
3. CONTRACTOR shall ensure that each BLS, ALS, and CCT Ambulance carries equipment and supplies pursuant to AGENCY policy. Vehicles, equipment, and supplies shall be maintained in clean, sanitary, and safe mechanical conditions always.

G. Inspections: The AGENCY Medical Director or his/her designee(s) may at any time, without prior notice, inspect CONTRACTOR'S ambulances in order to verify compliance with this Agreement.

1. An inspection may be postponed if it is shown that the inspection would unduly delay an ambulance from responding to an ambulance request.
2. A memorandum of the inspection specifying any deficiencies, date of inspection, ambulancenumbr, and names of participating crew shall be provided to the CONTRACTOR.
3. CONTRACTOR must show proof of correction for any deficiencies noted in said memorandum of inspection as specified by the AGENCY, prior to resuming operation.
4. A deficient ambulance may be immediately removed from service if, in the opinion of the EMS Medical Director or his/her designee(s), one or more deficiencies are

a danger to the health and safety of the public or if the deficiencies in a previously issued memorandum of inspection have not been corrected in the time specified.

5. AGENCY agrees to place any unit that has been removed from service back in service immediately following the documented correction of the defined deficiency.
6. Contractor shall develop and maintain a fleet management plan, maintain a record of the preventative maintenance, repairs, and strategic replacement of equipment and vehicles and shall make such plan and records available to the AGENCY upon request.

### **3.3 Disaster Preparedness**

- A. Disaster Plan - CONTRACTOR shall have a plan for the immediate recall of personnel to staff units during multi-casualty situations or declared disaster situations. This plan shall include the ability of the CONTRACTOR to page and alert off-duty personnel. The CONTRACTOR shall participate in training programs and exercises designed to upgrade, evaluate, and maintain readiness of the system's disaster and multi-casualty response system.
- B. If requested to respond to the scene of a Multi-Casualty Incident (MCI), the CONTRACTOR'S personnel shall perform as part of the Incident Command System (ICS) structure and in accordance with the California Emergency Response System's Standardized Emergency Management System (SEMS) and in accordance with AGENCY policies and procedures.

## SECTION 4: PERSONNEL

### **4.1 Clinical and Staffing Standards**

- A. The AGENCY expects that the provision of Non-Emergency ambulance services shall conform to the highest professional standards and shall comply with all applicable Statelaws and regulations and AGENCY policies, procedures, and field treatment guidelines. All persons employed by the CONTRACTOR in the performance of work under this agreement shall be competent and shall hold appropriate and current valid certificates as established by the State of California and the AGENCY for their level of certification. The CONTRACTOR shall be held accountable for its employees' certification, performance, and actions.
- B. Contractor's Personnel Policy - CONTRACTOR shall provide the AGENCY with CONTRACTOR'S current personnel policy and procedure manual(s) upon request, which shall address, at a minimum, staffing and shift scheduling, avoidance of crew fatigue, crew quarters, conduct at a scene, conduct during patient care management, use of safety apparel, identification, driver training and company orientation.
- C. Ambulance Staffing - When responding to a Non-Medical Emergency interfacility Transfer, a BLS, ALS and/or CCT Non-Emergency Ground Ambulance shall be staffed in accordance with AGENCY Response and Transport Policies.
1. CONTRACTOR shall have an enforceable policy that prohibits CONTRACTOR'S employees from performing any services as contemplated herein while under the influence of any alcoholic beverage, illegal drug, or narcotic. In addition, policy shall prohibit CONTRACTOR'S employees from performing such services under the influence of any other substances, including prescription or non-prescription medications, which impairs their physical or mental performance.
  2. CONTRACTOR shall maintain a current list of pre-hospital personnel including their addresses, phone numbers, qualifications, and certificates, with expiration dates and provide it to the AGENCY upon request.

3. CONTRACTOR shall ensure that all personnel wear appropriate and clean uniform attire and comply with CONTRACTOR'S standards for grooming.
4. CONTRACTOR shall have in place policies which require EMS personnel to follow all AGENCY Policies, Procedures and Protocols. CONTRACTOR shall require that patient care records be completed by CONTRACTOR'S personnel per AGENCY policy.
5. Field personnel may be required to obtain any other specialized training mutually agreed upon by the CONTRACTOR and AGENCY or as mandated by State or Federal law.

D. Management and Supervision - CONTRACTOR shall provide the management personnel necessary to administer and oversee all aspects of emergency and non-emergency ambulance service. AGENCY shall be entitled to all information regarding the administration and management by the CONTRACTOR to ensure compliance with all applicable laws and AGENCY policies.

E. Orientation of New Personnel - CONTRACTOR shall ensure that field personnel are properly oriented before being assigned to respond to Non-Emergency medical requests.

- a. The orientation shall include, at a minimum, an EMS system overview; EMS policies and procedures including patient destination, and patient treatment protocols; radio communications with and between the ambulance, receiving facilities, and dispatch center; map reading skills, including key landmarks, routes to receiving facilities; and ambulance equipment utilization and maintenance, in addition to the CONTRACTOR'S policies and procedures. CONTRACTOR shall be responsible for ensuring that this standard is met.
- b. CONTRACTOR shall maintain an on-going e m e r g e n c y vehicle operations course for ambulance personnel.
- c. CONTRACTOR shall notify Contract Administrator in writing of any changes

made to the new employee orientation program and will submit, as part of CONTRACTOR'S Annual Report, a report listing all new employee orientation activities for the preceding twelve (12) months.

- F. Preparation for Multi-Casualty Response - CONTRACTOR shall ensure that all ambulance personnel/supervisory staff are trained and prepared to assume their respective roles and responsibilities under the Region IV Multi-Casualty Medical Incident (MCI) Plan and any future MCI policy/plan amendments. CONTRACTOR shall ensure that its personnel are trained as follows:
1. Hazardous materials first responder awareness training for all field employees;
  2. Training requirements outlined in AGENCY NIMS Compliance Policy.

## **4.2 Compensation/Working Conditions for Ambulance Personnel**

### **A. Work Schedules and Conditions**

1. CONTRACTOR shall utilize reasonable work schedules and shift assignments to provide reasonable working conditions for ambulance personnel.  
CONTRACTOR shall ensure that ambulance personnel working extended shifts, and/or voluntary or mandatory overtime are not fatigued to an extent that might impair their judgment or motor skills.
2. CONTRACTOR agrees, within twelve (12) months of the beginning date of their agreement, to maintain a crew quarters at any location where ambulance crews and student/trainees are normally scheduled to work shifts exceeding twelve (12) hours.
3. Ambulance crew quarters, at locations where ambulance crews are normally scheduled to work shifts exceeding twelve (12) hours, shall include security, shower, toilet, kitchen, day room, sleeping facilities and shall be maintained in a safe and clean condition.
4. CONTRACTOR shall make available to all personnel all notices and bulletins from the AGENCY directed to field personnel. In addition, the CONTRACTOR agrees to have a current AGENCY Policies and Procedures Manual accessible to all personnel.

- B. New Employee Recruitment and Screening Process - The CONTRACTOR shall operate a program of personnel recruitment and screening designed to attract and retain field personnel.

#### **4.3 Safety and Infection Control**

- A. CONTRACTOR shall provide personnel with training, equipment, and immunizations necessary to ensure protection from illness or injury when responding to a non-medical emergency interfacility transfer request or other agency approved emergency request
- B. CONTRACTOR shall notify the AGENCY within five (5) calendar days of any Cal/OSHA (Division of Occupational Safety and Health) major enforcement actions, and of any claim, litigation, or other legal or regulatory proceedings in progress or being brought against CONTRACTOR'S Stanislaus County operations.
- C. CONTRACTOR shall, upon request, furnish documentation satisfactory to Stanislaus County's Health Officer, of the absence of tuberculosis disease for any employee or volunteer who provides services under this Agreement.
- D. The CONTRACTOR shall have an AGENCY approved Communicable Disease Policy that complies with all Occupational Safety and Health Administration (OSHA) requirements and other regulations related to prevention, reporting of exposure, and disposal of medical waste. All pre-hospital personnel shall be trained in prevention and universal precautions.

### **SECTION 5: QUALITY/PERFORMANCE**

#### **5.1 Inquiries and Complaints**

CONTRACTOR shall provide good faith effort to respond to inquiries and complaints from the general public by meeting, phone call, or in writing to the inquiring or complaining party within 7 calendar days of inquiry or complaint. Such responses shall be subject to the limitations imposed by patient confidentiality restrictions.



## **5.2 Unusual Occurrences**

- A. CONTRACTOR shall complete an unusual occurrence report for personnel involved in an unusual occurrence, in accordance with AGENCY policies and procedures.
- B. CONTRACTOR shall notify AGENCY immediately upon knowledge of any unusual occurrence as defined in Exhibit C. or a violation of law by CONTRACTOR or CONTRACTOR personnel.
- C. Any disciplinary actions or investigations involving CONTRACTOR personnel shall be subject to review and oversight by the AGENCY.
- D. Agency shall have the discretion to direct, manage and control any investigation of an unusual occurrence or violation of law by CONTRACTOR personnel.

## **5.3 Training Officer**

- A. CONTRACTOR shall designate an EMT, Paramedic or Registered Nurse (RN) (approved by the AGENCY) to act as Training Officer who shall oversee the required training and orientation of all new EMTs employed by the CONTRACTOR.
- B. The Training Officer shall submit to the AGENCY, when requested, a written evaluation of each new EMT verifying that orientation requirements have been completed. These orientation requirements shall include all local policies and procedures, and any additional training required by the AGENCY within six months of hire.
- C. The Training Officer(s) shall attend scheduled training meetings as required by the AGENCY and provide training to CONTRACTOR'S ambulance personnel as deemed necessary by AGENCY.

## SECTION 6: DATA AND REPORTING

### 6.1 Data System Hardware and Software

The AGENCY is developing a tracking process for collecting data as it relates to IFTs. The AGENCY will notify the CONTRACTOR 30 days prior to implementation. Once the implementation date is effective the CONTRACTOR must adhere to the following:

- A. CONTRACTOR will submit required data elements in an electronic format acceptable to the AGENCY.
  
- B. CONTRACTOR shall provide Patient Care Record (PCR) information for each call that requires the generation of a PCR per AGENCY policy. The daily submission of electronic PCR information shall include data not later than three (3) calendar days following the date of the call. For submissions occurring on weekends and holidays, the deadline for submissions of PCR information shall be extended to four calendar days. . Submission of PCR information shall continue monthly until such time AGENCY and CONTRACTOR are compatible and capable of daily transmission and final protocols are established for transmission including addendums and corrections. Electronic PCRs shall utilize data elements outlined in Provider AGENCY/Ambulance Data Requirements Policy and any other data elements requested by the AGENCY.

1. Once process has been put in place the following will be applicable: Failure to provide ninety-five percent (95%) of this data in compliance with this requirement will result in a fine charge of \$500.00 payable by CONTRACTOR to AGENCY each day until the data is received by AGENCY. The charges referenced in this section will be payable to the AGENCY on the first day of the following month. Nothing herein shall be construed to require CONTRACTOR to violate any applicable state or federal law governing patient confidentiality. In the event of any conflict between this Agreement and any superseding applicable Law, the latter shall control.

## **6.2 Use and Reporting Responsibilities**

- A. CONTRACTOR is responsible for Authorized EMS Dispatch Center reporting computer-aided dispatch data to the AGENCY, in an electronic format acceptable to the AGENCY, on a daily basis .
- B. Computer-aided dispatch (CAD) data shall include, at a minimum, records for all Non-Emergency ambulance requests received at the CONTRACTOR'S dispatch center.
- C. Each computer-aided dispatch record submitted to the AGENCY shall, at a minimum, contain the data fields required by AGENCY Data Collection and System Evaluation Policies.
- D. The EMS data system shall be used for documentation of patient medical records, continuous quality improvement, and reporting aggregate data as required by AGENCY.
- E. The EMS data system shall contain all EMS responses and patient records. These patient records shall contain a unique identifier for each patient (e.g., Patient Care Report (PCR) number), automated dispatch system information for the response, pre-hospital personnel for the response, patient name, address, insurance type (e.g. private insurance, Medicare, Medi-Cal, Self-Pay), patient history and physical findings, treatment rendered, and disposition.
- F. The CONTRACTOR shall comply with the requirements for the PCR as identified in AGENCY policy. The CONTRACTOR shall utilize an EMS data system, approved by the AGENCY, that includes all the fields required by AGENCY Data Collection and System Evaluation Policies.

## **6.3 Other Reporting Responsibilities**

- A. CONTRACTOR shall maintain current records related to EMT certification, accreditation, and continuing education.
- B. Upon request, CONTRACTOR shall provide the AGENCY with a list of staff currently employed by the CONTRACTOR. Information shall include, but not be limited to, name and certification or licensure number.
- C. CONTRACTOR shall complete, maintain, and provide to AGENCY the

reports listed in Exhibit A.

#### **6.4 Audits and Inspections**

- A. CONTRACTOR shall retain and make available for inspection by the AGENCY, during the term of the Agreement and for at least a three-year period from expiration of the Agreement, all documents and records required and described herein.
- B. All records of disciplinary actions and investigations involving unusual occurrences shall be retained for seven years and shall be made available to the AGENCY for copying and inspection.
- C. CONTRACTOR shall have a retention policy and educate all personnel regarding the preservation of electronic records with emphasis on record retention involving Unusual Occurrences.
- D. At any time during normal business hours, and as often as may reasonably be deemed necessary, the AGENCY'S representatives, including EMS AGENCY representatives and the EMS Medical Director, may observe the CONTRACTOR'S operations.
- E. Additionally, the CONTRACTOR shall make available for AGENCY examination and audit, all contracts (including union contracts), invoices, materials, payrolls, inventory records, records of personnel (except for confidential personnel records), daily logs, conditions of employment and other data related to all matters covered by the Agreement.
- F. AGENCY representatives may, at any time, and without notification, directly observe and inspect the CONTRACTOR'S operation, ride as "third person" on any of the CONTRACTOR'S ambulance units, provided however, that in exercising this right to inspection and observation, such representatives shall conduct themselves in a professional and courteous manner, shall not interfere in any way with the CONTRACTOR'S employees in the performance of their duties, and shall, always, be respectful of the CONTRACTOR'S employer/employee relationship.
- G. The AGENCY'S right to observe and inspect the CONTRACTOR'S business office' operations or records shall be restricted to normal business hours, except as provided above.

- H. Annual Financial Review - CONTRACTOR shall complete financial records in an auditable form and content according to Generally Accepted Accounting Principles. Financial records shall include report (Exhibit A). The AGENCY shall protect the financial records and any information taken there from as confidential and shall not disclose such records or information except as required by law.
- I. Upon written request of the AGENCY, CONTRACTOR shall prepare and submit written reports on any incident arising out of services provided under this Agreement. AGENCY recognizes that any report generated pursuant to this paragraph is confidential in nature and shall not be released, duplicated, or made public without the written permission of CONTRACTOR or upon request to AGENCY by the State EMS Authority, a subpoena or other legal order compelling disclosure.

**6.5 Health Insurance Portability and Accountability Act of 1996, Public Law 104-191**

- A. Patient's privacy and confidentiality shall be protected in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other applicable laws related to privacy. Employees shall not disclose patient medical information to any person not providing medical care to the patient.
- B. During the term of this Agreement, each party may receive from the other party, or may receive or create on behalf of the other party, certain confidential health or medical information (Protected Health Information "PHI", as further defined below). This PHI is subject to protection under state and/or federal law, including the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (HIPAA) and regulations promulgated there under by the U.S. Department of Health and Human Services (HIPAA Regulations).
- C. Each party represents that it has in place policies and procedures that will adequately safeguard any PHI it receives or creates, and each party specifically agrees to safeguard and protect the confidentiality of PHI consistent with applicable law. Without limiting the generality of the foregoing, each party agrees that it shall have in place all policies and procedures required to comply with HIPAA and the HIPAA Regulations prior to the date on which such compliance is required. CONTRACTOR shall require subcontractors to abide by the requirements of this

section.

- D. For purposes of this section, Protected Health Information means any information, whether oral or recorded in any form or medium: (a) that relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to any individual; or the past, present or future payment for the provision of health care to an individual, and (b) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual. This section shall be interpreted in a manner consistent with HIPAA, the HIPAA Regulations and other state or federal laws applicable to PHI.

## **SECTION 7: ADMINISTRATIVE REQUIREMENTS**

### **7.1 Insurance**

- A. CONTRACTOR, at its sole cost and expense, shall obtain, maintain, and comply with all AGENCY insurance coverage and requirements. Such insurance shall be occurrence based or claims made with tail coverage or shall be in a form and format acceptable to Stanislaus County Counsel and Stanislaus County Risk Management and shall be primary coverage as respects County.
- B. Worker's compensation insurance providing full statutory coverage, in accordance with the California Labor Code, for any and all of the CONTRACTOR'S personnel who will be assigned to the performance of the Agreement by the CONTRACTOR in accordance with the California Labor Code.
- C. Such insurance policies shall name the County of Stanislaus, its officers, agents, and employees, and the AGENCY, its officers, Board of Supervisors, agents and employees, as an additional named insured (except for worker's compensation insurance). Such coverage for said additional named insured shall be primary insurance and any other insurance, or self-insurance, maintained by the County of Stanislaus, its officer, agents, and employees, the AGENCY, its officers, Board of Supervisors, agents and employees, shall be secondary and excess only and not contributing with insurance provided under the CONTRACTOR'S policies herein.
- D. This insurance shall not be canceled or changed to restrict coverage without a

minimum of thirty (30) calendar day's written notice given to the AGENCY and the County Risk Management Division.

- E. If such insurance policies have a deductible, or if a Self-Insured Retention has a deductible, such deductible shall be in an amount not less than ten thousand dollars (\$10,000) per occurrence unless approved by Contract Administrator. For Workers' Compensation Insurance, the insurance carrier shall agree to waiver rights of subrogation against the AGENCY, the County, and their respective officers, officials and employees for losses arising from the performance of or the omission to perform any term or condition of this Agreement by the CONTRACTOR.
- F. CONTRACTOR shall provide certificates of insurance on the foregoing policies as required herein to the AGENCY annually, which state or show that such insurance coverage has been obtained and is in full force and effect.
- G. Without limiting the County of Stanislaus or the AGENCY'S right to obtain indemnification from the CONTRACTOR or any third parties, subject to the CONTRACTOR'S right to seek subrogation for indemnification paid to the County of Stanislaus and AGENCY under the Agreement and to the extent such indemnification is paid pursuant to this paragraph, the CONTRACTOR, at its/their sole expense, shall maintain or cause to be maintained in full force and effect the insurance requirements as provided in Exhibit "B" throughout the term of the Agreement:

## **7.2 Indemnification**

- A. CONTRACTOR shall exonerate, indemnify, defend, and hold harmless AGENCY or Stanislaus County from and against all claims, damages, losses, judgments, liabilities, expenses, and other costs including litigation costs and attorney's fees arising out of, resulting from any negligent or wrongful act or omission of CONTRACTOR or its agents, officers, or employees in connection with the performance of this Agreement.
- B. CONTRACTOR'S obligation to defend, indemnify, and hold the AGENCY and the County of Stanislaus, and their agents, officers, and employees harmless under the provisions of the paragraphs in this section is not limited to or restricted by any requirement in this Agreement for CONTRACTOR to procure and maintain a policy of insurance.
- C. AGENCY agrees to defend, indemnify, save and hold harmless the CONTRACTOR and its

officers, employees and agents, from any and all claims, damages, losses, judgments, liabilities, expenses, and other costs including litigation costs and attorney's fees arising out of, resulting from, any negligent or wrongful act or omission of AGENCY or its agents, officers, or employees in connection with the performance of this Agreement.

- D. AGENCY shall save and hold harmless CONTRACTOR and its officers, directors, shareholders, agents, and employees, from any and all liability for damages, including but not limited to, monetary loss, judgments, orders of a court, and any other detriment or liability that may arise from any injury to a person or persons and for damages to property arising from or out of AGENCY'S promulgation of official rules, regulations, or AGENCY Policies and Procedures not in existence as of the date of this Agreement.

### **7.3 Business Office, Billing and Collection System**

- A. Telephone access: CONTRACTOR shall provide a toll-free telephone number that allows patients to speak to a customer service representative at CONTRACTOR'S regional billing office.
- B. Billing and collections system: CONTRACTOR shall utilize a billing and collections system that is fully integrated, not reliant upon an analysis of separate systems, preferably combining CRM, EMR, and RCM in one interface, and utilizing a patient portal for customer inquiry. The system shall minimize the effort required to obtain reimbursement from third party sources for which they may be eligible and is capable of electronically filing Medicare and Medi-Cal billing claims.

### **7.4 Non-Discrimination Policy**

- A. AGENCY and CONTRACTOR shall abide by all Federal and State non-discrimination laws regarding governmental agency contracts and sub-contracts.
- B. Compliance with Non-Discrimination Laws. During the performance of this Agreement, CONTRACTOR will comply with Title VII of the Civil Right Act of 1964 and that no person shall, on the grounds of race, creed, color, disability, sex, gender (including gender identity and gender expression), national origin, ancestry, physical or mental disability, medical condition (including genetic characteristics), marital status, sexual orientation, age, religion, political affiliation, or any other non-merit factors, be excluded from participation in, be denied



the benefits of, or be otherwise subjected to discrimination under this Agreement.

- C. CONTRACTOR shall comply with all applicable Federal, State and local laws and regulations related to non-discrimination and equal opportunity, including without limitation the AGENCY'S and County's nondiscrimination policy; the Fair Employment and Housing Act (Government Code sections 12900 et seq.); California Labor Code sections 1101, 1102 and 1102.1; the Federal Civil Rights Act of 1964 (P.L. 88-352), as amended; and all applicable regulations promulgated in the California Code of Regulations or the Code of Federal Regulations.

## **SECTION 8: FISCAL REQUIREMENTS**

### **8.1 General Provisions**

- A. As compensation for services, labor, equipment, supplies, and materials furnished under this Agreement, CONTRACTOR shall collect revenues as permitted in this section.
- B. All financial reports provided by CONTRACTOR shall be in accordance with Generally Accepted Accounting Principles and be based on an accrual system.
- C. Fiscal year for reporting purposes of this Agreement will be the CONTRACTOR'S fiscal year.
- D. CONTRACTOR shall maintain copies of all financial statements, records and receipts that support and identify operations for a minimum of five (5) years from the end of the reporting period to which they pertain. CONTRACTOR will provide AGENCY or its designee access to all records for analytical purposes.

### **8.2 Billing and Collections**

- A. Medicare and Medi-Cal - CONTRACTOR shall accept Medicare and Medi-Cal assignment.

### **8.3 Reporting Responsibilities**

- A. During the Service Period, CONTRACTOR shall provide the documents and reports as shown in Exhibit A.

## SECTION 9: GENERAL AGREEMENT REQUIREMENTS

### **9.1 Termination for Cause**

Either party may terminate this Agreement at any time for cause or for Major Breach of its provisions consistent with the provisions herein. Certain conditions and circumstances shall, as determined by Contract Administrator, constitute a Major Breach of this Agreement by the CONTRACTOR, these conditions and circumstances include, but are not limited to:

- A. Failure of CONTRACTOR to operate its ambulances and non-emergency medical services program in a manner which enables AGENCY and CONTRACTOR to remain in substantial compliance with the requirements of Federal, State, and local laws, rules and regulations;
- B. Falsification of information supplied by CONTRACTOR in its proposal and during the consideration, implementation, and subsequent operation of its ambulance and non-emergency medical services program, including, but not limited to, dispatch data, and patient reporting data, as relates to this Agreement;
- C. Persistent failure of CONTRACTOR'S employees to conduct themselves in a professional and courteous manner where reasonable remedial action has not been taken by CONTRACTOR;
- D. Failure to substantially and consistently meet or exceed the various clinical and staffing standards required herein;
- E. Failure to maintain equipment or vehicles in accordance with good maintenance practices, or to replace equipment or vehicles in accordance with CONTRACTOR'S submitted and accepted Equipment Replacement Policy, except as extended use of such equipment is approved by AGENCY as provided for herein;
- F. Chronic or persistent failure to comply with conditions stipulated by AGENCY to correct any Major Breach conditions;
- G. Failure of CONTRACTOR to cooperate and assist AGENCY in the investigation

or correction of any Major Breach of the terms of this Agreement;

- H. Failure to comply with required payment of fees within thirty (30) calendar days of written notice of the imposition of such fee;
- I. Failure to maintain in force throughout the term of this Agreement, including any extensions thereof, the insurance coverage required herein;
- J. Any willful attempts by CONTRACTOR to intimidate or otherwise punish or dissuade personnel in cooperating with or reporting concerns, deficiencies, etc., to the AGENCY or other oversight agency;
- K. Any other willful acts or omissions of CONTRACTOR that endanger the public health and safety;
- L. Failure to timely prepare and submit the required monthly and annual report;
- M. Failure to enter into agreement with AGENCY's determined vendor for monitoring of Non-Emergency IFT's at CONTRACTORS cost to provide integration with CONTRACTORS Computer Automated Dispatch (CAD).

## **9.2 Opportunity to Cure**

Prior to a Declaration of Major Breach by Contract Administrator, Contract Administrator shall provide CONTRACTOR with no less than thirty (30) days advance written notice citing, with specificity, the basis for Major Breach. In the *event* CONTRACTOR cures the Major Breach within such thirty (30) day period, or such longer period as may be specified in the advance written notice, this Agreement shall remain in full force and effect. In the *event* Contract Administrator reasonably deems CONTRACTOR to remain in Major Breach as of the end of the notice period specified in the advance written notice, Contract Administrator shall provide CONTRACTOR with a notice of termination, setting for the specific reasons Contract Administrator believes CONTRACTOR remains in Major Breach and the effective date of termination, which shall be no less than thirty (30) days from the date of the termination notice.

### **9.3 Indemnification for Damages, Taxes and Contributions**

CONTRACTOR shall exonerate, indemnify, defend, and hold harmless AGENCY or Stanislaus County from and against any and all Federal, State and local taxes, charges, fees, or contributions required to be paid with respect to CONTRACTOR and CONTRACTOR'S officers, employees and agents engaged in the performance of this agreement (including, without limitation, unemployment insurance, and social security and payroll tax withholding).

### **9.4 Independent Contractor Status**

CONTRACTOR is an independent CONTRACTOR and not an employee of AGENCY or Stanislaus County. CONTRACTOR is responsible for all insurance (worker's compensation, unemployment, etc.) and all payroll related taxes. CONTRACTOR is not entitled to any employee benefits. AGENCY agrees that CONTRACTOR shall have the right to control the manner and means of accomplishing the result contracted for herein

### **9.5 Non-assignment and Non-delegation**

CONTRACTOR shall not assign or delegate this agreement without the prior written consent of AGENCY.

### **9.6 Monitoring Costs**

AGENCY will incur costs associated with oversight of Contractor's operational and clinical performance under this Agreement. CONTRACTOR shall pay the AGENCY for monitoring costs providing such oversight as established by the AGENCY's Fee Schedule.

### **9.7 Entire Agreement**

This Agreement and the exhibits attached hereto constitute the entire Agreement between AGENCY and CONTRACTOR and supersede all prior discussions and negotiations, whether oral or written. Any amendment to this Agreement, including an oral modification supported by new consideration, must be reduced to writing and signed by authorized representatives of both parties before it will be effective.

#### **9.11 Binding on Successors**

This Agreement ensures to the benefit of, and is binding on, the parties and their respective heirs, personal representatives, successors, and assigns (upon approval by AGENCY to accept assignment).

#### **9.12 Captions**

The captions heading the various sections of this Agreement are for the convenience and shall not be considered to limit, expand, or define the contents of the respective sections. Masculine, feminine, or neuter gender, and the singular and the plural number shall each be considered to include the other whenever the context so requires.

#### **9.13 Controlling Law**

This Agreement shall be interpreted under California law and according to its fair meaning and not in favor of or against any party.


#### **9.14 Venue**

Any action brought to enforce the terms or provisions of this Agreement shall have venue in the County of Stanislaus, State of California.

IN WITNESS, WHEREOF, the parties have executed this Agreement the date first written above:

**APPROVED:**


Stanislaus County EMS Agency

By:   
Name: Chad Braner  
Title: Director

Date: 02-23-2023

**APPROVED:**

Active Transport Medical, LLC

By:   
Name: Clayton Scott Brown  
Title: President

Date: 02/24/2023

IN WITNESS, WHEREOF, the parties have executed this Agreement the date first written above:

**APPROVED:**


Stanislaus County EMS Agency

By:   
Name: Chad Braner  
Title: Director

Date: 2/15/2023

**APPROVED:**

Active Transport Medical, LLC

By:   
Name: Clay Urrutia Brown  
Title: President

Date: 02/24/2023

APPROVED AS TO FORM:  
STANISLAUS COUNTY COUNSEL  
BY

Lori Sicard  
DATE: 2-15-23

## Exhibit A

Please submit the annual report to Stanislaus County EMS Agency (Attention: Contract Administrator) by the 31<sup>st</sup> of January for each prior contractual calendar year.

1. Year End Financials to include:

- Operating Revenue
- Operating Expenses
- Accounts Receivables
- Payer Mix
- Collection Rate

2. Personnel Manual

3. Union Contract

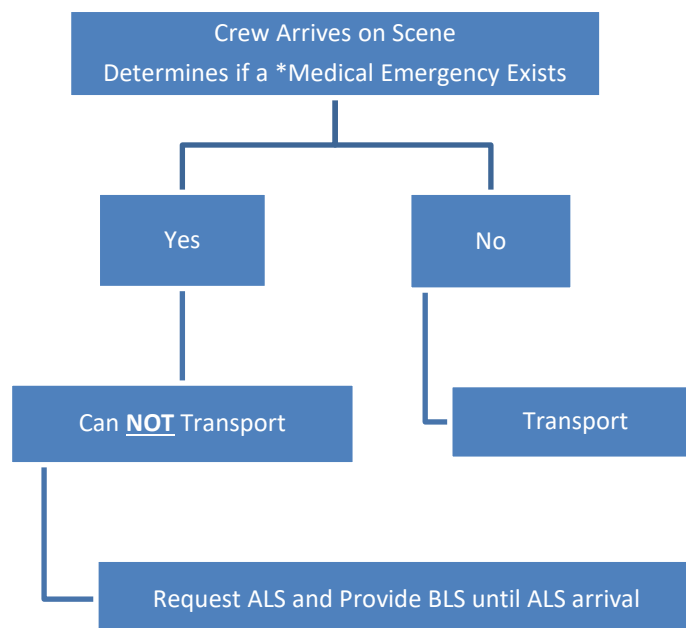
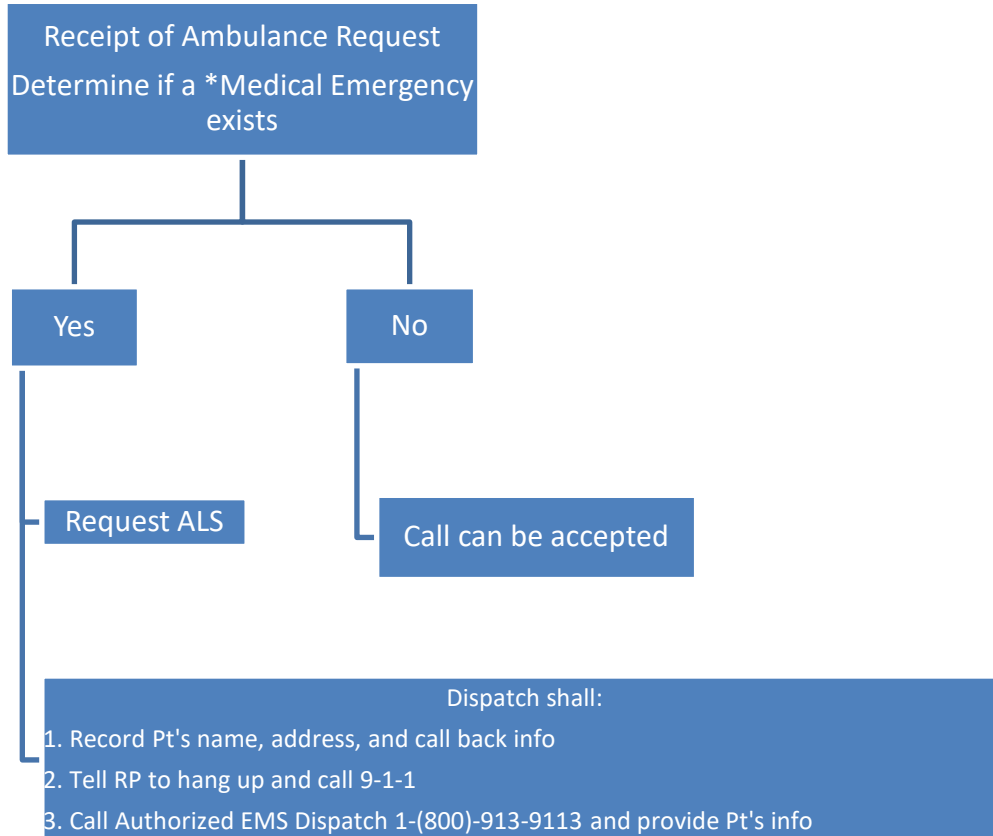
4. Employee List



## Exhibit B

### Dispatch Determination of a Medical Emergency

#### Exhibits



## **Exhibit C**

### **Definitions**

**Advanced Life Support (ALS)** Special services designed to provide definitive Prehospital emergency medical care as defined in California Health and Safety Code 1797.52.

**Advanced Life Support (ALS) Ambulance** A ground ambulance which provides transport of the sick and injured and is staffed and equipped to provide advanced life support consistent with the California Health and Safety Code, Division 2.5, Section 1797.52 and AGENCY policies and procedures.

**Agency Policies, Procedures and Protocols** All policy, procedure and protocol documents developed through the process described in AGENCY policies (131.00 through 133.00).

**Authorized ALS Ambulance Provider** An ambulance provider that is authorized to provide ALS Ground Ambulance Services within Stanislaus County pursuant to an ambulance provider agreement with the AGENCY.

**Authorized EMS Dispatch Center** A dispatch center recommended by the Local EMS AGENCY and approved and authorized by the Board of Supervisors to dispatch the Emergency Ground Ambulances of the Authorized ALS Ambulance Provider under contract to provide Emergency Ground Ambulance Services within Stanislaus County.

**Basic Life Support Ambulance** An ambulance staffed and equipped to provide basic life support in full compliance with the California Health and Safety Code, Division 2.5, Section 1797.60, all regulations of the State of California, and AGENCY Policies, Procedures and Protocols.

**Bay Area Consumer Price Index (CPI)** The CPI for "All Urban Consumers" as noted in April of each year from the U.S. Bureau of Labor Statistics for "San Francisco - Oakland - San Jose, CA."

**CQI** Continuous Quality Improvement.

<b>Dispatched</b>	The time that the ambulance is assigned a call by the Authorized EMS Dispatch Center
<b>Emergency</b>	As defined in California Health and Safety Code 1797.70, emergency means a condition or situation in which an individual has a need for immediate medical attention, or where the potential for such need is perceived by emergency medical personnel or a public safety agency.
<b>Emergency Ground Ambulance</b>	An ambulance staffed and equipped in compliance with the AGENCY Policies, Procedures and Protocols.
<b>Emergency Medical Dispatch (EMD)</b>	A nationally recognized set of standards used by specially trained dispatch personnel that focus upon four main functions: (1) To receive and process telephone calls; (2) To dispatch and coordinate EMS resources based upon prioritization principles that consider the level of the emergency and availability of local EMS resources; (3) To provide medical instruction to callers (pre-arrival instructions) and scene information to EMS crews (post-dispatch); and (4) To coordinate with other public safety agencies.
<b>Emergency Medical Personnel</b>	All public safety first responders, Emergency Medical Dispatchers, EMTs and Paramedics functioning within the Emergency Medical Services System.
<b>Emergency Medical Technician (EMT)</b>	As defined in California Health and Safety Code Section 1797.80.
<b>Paramedic</b>	As defined in California Health and Safety Code Section 1797.84.
<b>First Responder</b>	A fire department vehicle or police vehicle with personnel capable of providing appropriate Prehospital care.
<b>HIPAA</b>	Health Insurance Portability and Accountability Act of 1996.
<b>Hospital</b>	A licensed acute care hospital (as referenced by Division 2.5 Health and Safety Code section 1797.88)

**Life Threatening  
Emergency**

The term used to denote a condition or situation in which an individual has a need for immediate medical attention requiring a Code Three response based upon the patient's reported medical condition, or where the potential for such need is perceived by public safety personnel or Emergency Medical Personnel at the scene of an emergency or dispatch personnel at an Authorized EMS Dispatch Center or an Authorized ALS Ambulance Provider.

**Major Breach**

The failure to comply with this Agreement (including but not limited to CONTRACTOR'S failure to comply with AGENCY'S Policies, Procedures, and Protocols). The determination of a Major Breach of the Agreement shall be by action of Contract Administrator and shall result in corrective action, suspension, or termination of this Agreement.

**Medical Director**

A physician with experience in emergency medical systems who provides medical oversight to the Stanislaus County EMS System, pursuant to Section 1797.204 of the Health and Safety Code.

**Non-Emergency  
interfacility Transfer**

The term used to denote a condition or situation in which an individual has not experienced a sudden or unexpected change in their medical condition and does not meet the EMO protocol for a life threatening or non-life threatening emergency, and where the potential for such need is not perceived by Emergency Medical Personnel at the scene of an emergency, dispatch personnel at an Authorized EMS Dispatch Center, or an Authorized ALS Ambulance Provider.

**Non-Life  
Threatening  
Emergency**

The term used to denote a condition or situation in which an individual has a need for medical attention requiring a Code Two response based upon the patient's reported medical condition, or where the potential for such need is not perceived by Emergency Medical Personnel at the scene of an emergency, dispatch personnel at an Authorized EMS Dispatch Center, or an Authorized ALS Ambulance Provider.

**Quality Improvement Program**

Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.

**Unusual Occurrence**

Any occurrence or allegation of any of the following;

- A. Breach of the standard of care
- B. Care beyond the appropriate scope of practice
- C. Any alleged or known injury to a patient as a result of actions by EMS personnel
- D. Serious injury to EMS personnel
- E. Motor Vehicle Collision with all but minor property damage to ambulance, ALS First Response Vehicle, or Supervisor vehicle
- F. Critical vehicle failure that interferes with response, transport, or treatment
- G. Communication system failure that interferes with response, transport, or treatment
- H. Major biomedical equipment failure directly related to the care of the patient
- I. Serious complaints against employees
- J. Drug adulteration or diversion
- K. Suspected violations of Division 2.5 Health & Safety Code
- L. Failure to follow AGENCY policies/procedures
- M. Any recognition of exceptional effort or service provided by EMS personnel.

## **Exhibit D**

### **Monitoring Fees**

#### **Non-Emergency Transport Call Volume Fee**

Fees for non-emergency ambulance patient transports will be assessed on a quarterly basis. CONTRACTOR will be required to submit a report of patient transport call volume for the previous quarter and pay a fee of \$2.00 for each patient transport.

AGENCY will do periodic validation of the number of calls submitted. Payment will be due 30 calendar days following the end of the quarter.