



Aitkin County Health & Human Services

204 FIRST STREET NW
AITKIN, MINNESOTA 56431-1291
PHONE 1-800-328-3744 or 1-218-927-7200
FAX # 1-218-927-7210

Contract

Riverwood Healthcare Center 2019 Family Planning Contract--Revised

Objective

To coordinate efforts to provide family planning method services for no/low income individuals seeking family planning medical services in Aitkin County through age 19.

Opportunity

Residents, age 19 or under, with low or no income will have access to voluntary family planning services.

Existing or New Contract

Existing contract in place

Changes to Existing Contract

Language clarification for discounted rates. "Effective March 1, 2019, above prices will receive a 27% discount at the time of billing per negotiated agreement with Heidi Price."

Timeline for Execution

January 1, 2019-December 31, 2019 (Revised pricing for March 1, 2019)

Conclusion

We are requesting that the County Board of Commissioners support this agreement



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FAMILY PLANNING CONTRACT

THIS AGREEMENT between **Aitkin County Health and Human Services**, 204 1st Street NW, Aitkin, MN 56431, hereafter referred to as ACH&HS and **Riverwood HealthCare Center**, 200 Bunker Hill Drive, Aitkin, MN 56431, hereinafter referred to as Riverwood enter into this contract for the period from January 1, 2019 to December 31, 2019.

WHEREAS, ACH&HS and Riverwood agree to coordinate efforts to provide family planning method services for no/low income individuals seeking family planning medical services in Aitkin County through age 19.

WHEREAS, Riverwood represents that it is duly qualified and willing to perform such services;

WHEREAS, Medical services shall be rendered by an M.D., a Nurse Practitioner or Licensed Physician's Assistant under the supervision of Licensed Physicians. Laboratory tests with prior authorization shall be conducted by personnel trained to conduct such tests.

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth, ACH&HS and RIVERWOOD agree as follows:

I. Medical services with prior authorization shall include:

- A. Social and medical/surgical history with emphasis on the reproductive system
- B. Height, weight, and blood pressure measurements
- C. Bimanual pelvic exam for females
- D. Breast examinations and instructions on self-examination for females.
- E. Pap Smear
- F. Include with written authorization as indicated by history and/or symptoms, pregnancy test, STI testing and treatment (Chlamydia &/or GC &/or Syphilis only).

II. Riverwood shall:

- A. Provide family planning method services utilizing approved standards of medical practices to:
 - 1. Ensure that counseling was provided prior to provision of selected method.
 - 2. Ensure voluntary selection of method by service recipient.

3. Inform on the advisability of females obtaining a gynecological examination with pap smear prior to initiating any family planning method.
 4. Educate on the use of selected family planning method, including risks and benefits of the method and will not prescribe methods if in the physician's judgment, the client is high-risk.
 5. Include methods as requiring medical intervention for:
 1. Prescription
 2. Fitting
 3. Insertion procedures
- B. Collect information and maintain records of patients receiving family planning services as necessary.
- C. Coordinate family planning methods services a patient receives with other family planning services by the individual as provided by ACH&HS through follow-up with the family planning worker.
- D. Bill ACH&HS for services with written authorization provided by the medical services to patients who have no/low income for payment including:

PROCEDURE/CLINIC BILLING	CODES	2019 PRICES
Pelvic + Physical Exam-New Patient	99384	236.00
	99385	319.50
Pelvic + Physical Exam-Est. Patient	99394	228.00
	99395	264.00
Office Visit	99201	122.50
	99202	152.00
	99203	211.50
	99204	326.00
	99211	69.50
	99212	99.50
	99213	143.50
	99214	210.00
	99215	280.00
Depo Povera Serum	90782(J1050)	53.00
Administer Injection (Depo)	96372	16.00
Nexplanon	J7307	709.50
Insert	11981	336.50
Removal	11982	380.50
PROCEDURE/HOSPITAL BILLING		
Pregnancy Test	81025	79.00
PAP	88142	106.00
Chlamydia & GC	87491	241.00
	87591	241.00
RPR Syphilis serology	86592	92.50

****Effective March 1, 2019, above prices will receive a 27% discount at the time of billing per negotiated agreement with Heidi Price.**

- E. Make available upon request, with written authorization from patient to Public Health, all case management and financial management records maintained by the medical services as pertaining to clients receiving family planning services.

III. ACH&HS shall:

- A. Provide outreach, information/referral, counseling, education and follow-up regarding all methods and all choices for the medical services as pertaining to clients receiving family planning services.
- B. Coordinate family planning services a client receives with medical services received by the individual as provided by the physician through follow-up through the physician with the patient.
- C. Reimburse the medical service for the family planning method services provided to eligible individuals.

IV. Entire Agreement

This agreement shall have an interagency evaluation of the services on or before May 31, 2019. Termination of this agreement may be made with sixty (60) days written notice of intention to the other party. This agreement may be amended by written consent of both parties and all amendments shall be attached to this agreement and made part thereof.

IN WITNESS WHEREOF, ACH&HS and Riverwood agree that this agreement is effective from January 1, 2019 to December 31, 2019.

BY: _____ Date: _____
Cynthia Bennett, Director, Aitkin County Health & Human Services

BY: _____ Date: _____
Chairperson, Aitkin County Board of Commissioners

BY: _____ Date: _____
Casey Johnson, CFO, Riverwood HealthCare Center

APPROVED AS TO FORM AND EXECUTION:

BY: _____ Date: _____
Jim Ratz, Aitkin County Attorney