PROFESSIONAL SERVICES AGREEMENT

This Professional Services Agreement (the "Agreement") entered into effective July 1, 2022 (the "Effective Date"), by and between the Regents of the University of California, a California Constitutional corporation, on behalf of the University of California, San Francisco, School of Medicine, Department of Medicine (hereinafter referred to as "UCSF"), and County of Monterey ("COUNTY") on behalf of Natividad Medical Center ("NATIVIDAD") sets forth the terms and conditions under which UCSF will provide professional medical services to NATIVIDAD.

RECITALS

A. County owns and operates NATIVIDAD, a general acute care teaching hospital facility located in Salinas, California and and various outpatient clinics (collectively, the **"Clinic"**) under its acute care license;

B. UCSF operates a School of Medicine which includes a Department of Medicine and employs or contracts with physicians ("Physicians") who are licensed to practice medicine in the State of California and are qualified to provide the services identified in this Agreement for NATIVIDAD patients;

C. NATIVIDAD desires to provide for Services to be performed for its patients and does not have the full health professional personnel capable of doing so; and

D. UCSF desires to provide those services through its Physicians as set forth in this Agreement. In doing so, UCSF shall support the mission of the University of California by providing clinical service, teaching, and community service. NOW, THEREFORE, for and in consideration of the mutual covenants, conditions and restrictions set forth herein, the parties agree as follows:

1. <u>RESPONSIBILITIES OF UCSF</u>

1.1 <u>Professional Services and Coverage</u>. During the term of this Agreement, UCSF Physicians shall provide professional services to NATIVIDAD patients as scheduled by NATIVIDAD in mutual agreement with UCSF. UCSF shall have authority and responsibility for providing the UCSF Physicians to NATIVIDAD (including recruiting, hiring, promoting, compensating, and disciplining) and for establishing the terms of his or her employment with UCSF. The UCSF Physicians shall be employees of UCSF and shall be carried on UCSF's payroll. The UCSF Physicians providing services under this Agreement are identified in **Exhibit 1.1**, attached hereto and incorporated herein by reference.

1.2 <u>Scope of Services</u>. The Services to be provided under this Agreement shall include inpatient services, outpatient services, and other services (collectively, the "Services"), all as described in greater detail in **Exhibit 1.2** attached hereto and incorporated herein by reference.

1.3 <u>Physician Qualifications</u>. UCSF Physicians providing services under this Agreement shall be licensed in California as a physician and surgeon and board certified in their specialty with medical staff privileges at NATIVIDAD.

1.4 <u>Scheduling</u>. UCSF will provide a family medicine physician to provide five (5) full days of professional services per week and call no more frequently than once weekly including weekends. NATIVIDAD will determine schedule, in mutual agreement with UCSF.

1.5 <u>Standards</u>. Each UCSF Physician providing services hereunder shall perform his or her professional medical duties in accordance with: (a) NATIVIDAD'S Medical Staff Bylaws, rules and regulations, and policies; and (b) all rules and regulations generally applicable to physicians practicing medicine in California.

1.6 <u>Time Reports</u>. UCSF Physician providing services shall maintain and submit to NATIVIDAD monthly time sheets that provide a true and accurate accounting of time spent on a daily basis providing the Services. Such time sheets shall be on the then-current form provided by NATIVIDAD attached hereto as <u>Exhibit 1.6</u>. UCSF shall submit all such time sheets to NATIVIDAD no later than the tenth (10th) day of each month for Services provided during the immediately preceding month.

2. <u>RESPONSIBILITIES OF NATIVIDAD</u>

NATIVIDAD shall provide the following space, equipment, services, supplies and personnel in this Article 2 in accordance with sound medical and legal practices and any applicable federal and state laws and regulations, including the requirements of the Medicare Conditions of Participation.

2.1 <u>Space</u>. NATIVIDAD shall provide UCSF Physicians with suitable space to perform the Services at the times set forth in Section 1.4 above. UCSF Physicians will perform the services for NATIVIDAD as set forth in this Agreement. NATIVIDAD shall remain responsible for the overall operation of its Clinics and shall maintain such space and facilities in good and sanitary order, condition, and repair.

2.2 <u>Equipment.</u> NATIVIDAD shall furnish all equipment and supplies necessary for UCSF Physicians to perform the Services [including but not limited to the specialized equipment described in **Exhibit 2.2** attached hereto and incorporated herein by this reference]. NATIVIDAD will be responsible for ensuring that the equipment used by UCSF Physicians pursuant to this Agreement is maintained in good operating order, including any necessary maintenance and/or repairs.

2.3 <u>Services and Supplies</u>. NATIVIDAD shall provide or arrange for the provision of janitorial services, housekeeping services, laundry and utilities, together with such other services, including medical records, administrative and engineering services, and expendable supplies as NATIVIDAD and UCSF agree is necessary for the proper operation and conduct of its Clinics.

2.4 <u>Personnel.</u> NATIVIDAD shall employ or otherwise retain all non-physician personnel, including nurses, technicians, therapists, and clerical personnel necessary for the proper operation and conduct of its Clinics. NATIVIDAD shall ensure that such personnel are appropriately trained and certified or licensed as necessary and are covered by NATIVIDAD insurance or have obtained equivalent coverage. NATIVIDAD shall be solely responsible for satisfying any and all obligations for any personnel it retains, employs or contracts with to assist it to perform this Agreement. Such obligations shall include, but are not limited to, paying all federal and state withholding taxes applicable to employees, complying with federal and state wage-hour obligations (including overtime), workers compensation obligations, unemployment insurance obligations, and other applicable taxes and contributions to government mandated employment related insurance and similar programs.

3. <u>COMPENSATION AND BILLING</u>

3.1 <u>Compensation to UCSF</u>. NATIVIDAD shall pay to UCSF the amount determined in accordance with Exhibit 3 (the "Compensation"), upon the terms and conditions set forth therein. The total amount payable by NATIVIDAD to UCSF under this Agreement shall not exceed the sum of Five Hundred Forty Thousand Dollars (\$540,000).

3.2 <u>Billing</u>. Other than as expressly set forth in 3.1 above, UCSF shall not bill and collect third party payments for professional services provided by UCSF physicians and NATIVIDAD shall retain all payments arising from such billings. NATIVIDAD shall bill for professional services provided by the UCSF Physicians and NATIVIDAD shall retain all payments arising from such billings. UCSF and the UCSF Physicians assigned to NATIVIDAD shall provide assignments and otherwise comply with applicable laws and customary professional practices governing billing for Medicare and Medi-Cal programs.

3.3 <u>Compliance with Laws</u>. NATIVIDAD represents that it maintains a compliance program designed to promote adherence to applicable federal and state laws, regulations, and interpretations. NATIVIDAD shall use its best efforts to ensure that all claims relating to the Services satisfy all applicable payor rules, regulations, and instructions. Without limiting the scope of the indemnification provided in Section 7.1 below, NATIVIDAD shall indemnify, defend and hold harmless UCSF and UCSF Physicians from any liability, loss, damage, claim, fine, or expense, including costs and reasonable attorneys' fees, arising from any actual or alleged billing errors, false claims, or insurance fraud relating to claims for any Service.

4. TERMS AND TERMINATION

4.1 <u>Term</u>. The term of this Agreement shall be for a two-year period beginning on July 1, 2022 and shall continue until June 30, 2024, unless terminated as set forth hereunder.

4.2 <u>Termination Without Cause</u>. After one year, either party may terminate this Agreement without cause upon at least thirty (30) days' prior written notice to the other party.

4.3 <u>Termination With Cause</u>. Either party may terminate this Agreement upon the material breach of this Agreement by the other party by giving the other party fifteen (15 days) days' prior written notice of such breach. If such breach is not cured by the breaching party within fifteen (15) days of receipt of this notice, this Agreement shall terminate at the end of such fifteen (15)-day period.

4.4 <u>Immediate Termination</u>. Notwithstanding any other provision herein, this Agreement may be terminated immediately by either party if: (a) UCSF Physicians or NATIVIDAD (including its individual physicians) have their respective license to practice medicine in the State of California suspended or revoked; (b) if the insurance coverage for UCSF physicians or NATIVIDAD, as required hereunder, is canceled or modified; or (c) if NATIVIDAD fails to meet the requirements of the Medicare conditions of participation.

4.5 <u>Compliance</u>. The Compliance Officer of either party, on advice of legal counsel, may terminate the Agreement at any time upon notice to the other party based upon a determination, in the Compliance Officer's reasonable discretion, that this Agreement presents a compliance risk for that party.

5. <u>MEDICAL RECORDS</u>

5.1 <u>Confidentiality</u>. The parties agree to maintain the confidentiality of all medical records pertaining to the provision of services under this Agreement in accordance with applicable federal and state laws and regulations including but not limited to the California Confidentiality of Medical Records Information Act, codified at Section 56.1 of the California Civil Code and California Evidence Code Sections 1156 and 1157.

5.2 <u>Ownership</u>. All medical records and charts created at NATIVIDAD by UCSF Physicians pursuant to this Agreement shall be and remain the property of NATIVIDAD; provided, however, UCSF and/or UCSF Physicians shall be entitled to inspect and/or obtain copies of all such records upon request.

5.3 <u>Notification of Disclosures</u>. Each Party agrees to notify the other Party's Privacy Office of the unauthorized access, use, or disclosure of any personally identifiable information, or protected health information known or suspected by such Party within two days of learning of the same in order to ensure that the reporting of such unauthorized access, use or disclosure of this information is reported within five days of detection to the California Department of Public Health (CDPH) and as appropriate, to the Office of Civil Rights (OCR) and Centers for Medicare and Medicaid Services (CMS). Each Party's Privacy Office will oversee the required notification to CDPH.

5.4 <u>Costs Associated with Disclosure</u>. Each Party agrees that if they fail to adhere to any of the privacy, confidentiality, and/or data security provisions set forth herein and, as a result, personally identifiable information or protected health information is unlawfully accessed, used or disclosed, that they agree to pay, upon written demand of the other Party, all costs associated with any notification to affected individuals required by law or deemed appropriate, and that they also agree to pay for any and all fines and/or administrative penalties imposed for

such unauthorized, access, use or disclosure of personally identifiable information or protected health information or for delayed reporting.

6. <u>STATUS OF THE PARTIES</u>

6.1 It is the express intention of the parties that the legal status of UCSF to NATIVIDAD shall be that of an independent practice, furnishing the services of its employees to NATIVIDAD under a contractual arrangement that constitutes neither a partnership, joint venture, or a cost-sharing arrangement. UCSF shall be solely responsible for paying or withholding all relevant taxes arising from the compensation of the UCSF Physicians, and UCSF shall be solely responsible for all other governmental requirements applicable to UCSF and the UCSF Physicians arising out of their employment relationship. The UCSF Physicians shall have no claim under this Agreement, or otherwise, against NATIVIDAD for workers' compensation, unemployment compensation, vacation pay, sick leave, retirement benefits, Social Security benefits, disability insurance benefits, unemployment insurance benefits, or any other employee benefits, all of which shall be the sole responsibility of UCSF.

7. INDEMNIFICATION AND INSURANCE

7.1 <u>Indemnification by NATIVIDAD</u>. NATIVIDAD shall defend, indemnify and hold UCSF, UCSF Physicians, its officers, employees and agents harmless 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, attorneys' fees or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of NATIVIDAD, its officers, employees, or agents.

7.2 <u>Indemnification by UCSF</u>. UCSF shall defend, indemnify and hold NATIVIDAD, its officers, employees, and agents harmless 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, attorneys' fees or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of UCSF, its officers, employees, or agents.

7.3 <u>Insurance for NATIVIDAD</u>. NATIVIDAD shall secure and maintain the insurance coverage described in **Exhibit 7.3**, a copy of which is attached hereto and incorporated herein by this reference.

7.4 <u>Insurance for UCSF Physicians</u>. The University of California shall secure and maintain professional medical and hospital insurance on behalf of UCSF Physicians in accordance with University policies and procedures described in **Exhibit 7.4**, attached hereto and incorporated herein by this reference.

8. <u>USE OF NAME AND MARKETING</u>

8.1 <u>Use of Name</u>. The parties agree that any use of the "UCSF," or the "University of California" name or other similar references to the University of California San Francisco, its physicians or facilities, shall be subject to the prior written approval of the Regents of the University of California in accordance with the provisions of applicable law, including but not limited to California Education Code Section 92000.

8.2 <u>Marketing of UCSF Physicians</u>. NATIVIDAD shall not advertise or use any of the UCSF Physician's names in any marketing materials without UCSF's prior written consent.

9. <u>COOPERATION IN DISPOSITION OF CLAIMS</u>.

NATIVIDAD and UCSF agree to cooperate with each other in the timely investigation and disposition of certain audits, disciplinary actions and third-party liability claims arising out of any services provided under this Agreement; provided, however, that nothing shall require either NATIVIDAD or UCSF to disclose any peer review documents, records or communications which are privileged under Section 1157 of the California Evidence Code, under the Attorney-Client Privilege or under the Attorney Work-Product Privilege. To the extent permissible at law and in accordance with the applicable institution policies, the parties shall notify one another as soon as possible of any adverse event that may result in liability to the other party. The failure to provide notice shall not be deemed a breach of the agreement, and such failure to do so shall not relieve the indemnifying party of its indemnity obligations if such delay does not prejudice the defense thereof.

It is the intention of the parties to fully cooperate in the disposition of all such audits, actions or claims. Such cooperation may include, but is not limited to, timely notice, joint investigation, defense, disposition of claims of third parties arising from services performed under this Agreement, and making witnesses available; provided, however only to the extent consistent with UC policies and only so long as any personnel assistance by UCSF does not materially interfere with any UCSF employee's performance of his or her UCSF employment responsibilities. The failure to provide notice shall not be deemed a breach of the agreement, and such failure to do so shall not relieve the indemnifying party of its indemnity obligations if such delay does not prejudice the defense thereof. UCSF shall be responsible for discipline of UCSF Physicians in accordance with UCSF's applicable policies and procedures.

To the extent allowed by law, NATIVIDAD and UCSF shall have reasonable and timely access to the medical records, charts, and/or de-identified quality assurance data of the other party relating to any claim or investigation related to services provided pursuant to this Agreement; provided, however, that nothing shall require either NATIVIDAD or UCSF to disclose any peer review documents, records or communications which are privileged under Section 1157 of the California Evidence Code, under the Attorney-Client Privilege or under the Attorney Work-Product Privilege.

10. <u>PATIENT RECORDS</u>.

Any and all of NATIVIDAD'S medical records and charts created at NATIVIDAD'S facilities as a result of performance under this Agreement shall be and shall remain the property

of NATIVIDAD. Both during and after the term of this Agreement, UCSF shall be permitted to inspect and/or duplicate, at UCSF's expense, any individual charts or records which are: (1) necessary to assist in the defense of any malpractice or similar claim; (2) relevant to any disciplinary action; (3) for educational or research purposes; and/or (4) necessary for UCSF to ensure compliance with all regulatory requirements. Such inspection and/or duplication shall be permitted and conducted pursuant to commonly accepted standards of patient confidentiality in accordance with applicable federal, state and local laws.

11. <u>COMPLIANCE WITH LAWS</u>

The parties shall comply with all applicable state and federal laws and regulations.

12. <u>GENERAL</u>

12.1 <u>Governing Law</u>. This Agreement shall be governed by and construed and enforced in accordance with and subject to the laws of the State of California without regard for its conflict-of-law provision.

12.2 <u>Severability</u>. If any term, provision, covenant or condition of this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remainder of the provisions hereto shall remain in full force and effect and shall in no way be affected, impaired or invalidated as a result of such decision.

12.3 <u>Assignment</u>. Neither party may assign, delegate or transfer in any manner the obligations and rights set forth in this Agreement.

12.4 <u>Amendments</u>. This Agreement or any part of it may be amended only by the mutual written consent of the duly authorized representatives of the parties unless otherwise provided in this Agreement.

12.5 <u>Entire Agreement</u>. This Agreement is the entire agreement between the parties relating to the subject matter of the Agreement and shall supersede all prior arrangements, negotiations, and understandings between the parties, whether oral or written. No waiver of any term, provision or condition of this Agreement shall be deemed to be, or shall constitute a waiver of any term, and no waiver of any present condition shall constitute a waiver of such condition occurring in the future.

12.6 <u>Notice</u>. Any written notification required hereunder shall be personally served or mailed by certified mail, return receipt requested, to the following:

If to UCSF:

Director – Government & Business Contracts Office of Sponsored Research University of California, San Francisco 3333 California Street, Suite 315 San Francisco, CA 94143-0962 (94118 for express mail)

If to NATIVIDAD: Chief Medical Officer Natividad Medical Center 1441 Constitution Boulevard Salinas, CA 93906

12.7 <u>Change in Law</u>. In the event that a change in state or federal law, statute, regulation, or enforcement or same materially affects this Agreement, the parties agree to negotiate immediately, in good faith, any necessary or appropriate amendment(s) to the terms of this Agreement. If the parties fail to reach a mutually agreeable amendment within thirty (30) days of such negotiation period, this Agreement shall terminate at the end of such thirty (30) day period.

12.8 <u>Third Parties</u>. This Agreement is not intended and shall not be construed to create any rights for any third party.

12.9 <u>Exhibits</u>. All Exhibits referred to herein are hereby incorporated herein. In the event that any provision of this Agreement conflicts with any Exhibit to this Agreement, the Exhibit shall control with respect to the subject matter of such Exhibit.

12.10 <u>Counterparts</u>. This Agreement may be executed in any number or counterparts, each of which shall be deemed an original, but all such counterparts together shall constitute but one and the same instrument.

12.11 <u>Ability to Enter Agreement</u>. Each party represents and warrants that it is free to enter into this Agreement and to perform each of the terms and conditions of the Agreement.

[signature page to follow]

IN WITNESS WHEREOF, the parties have executed this Agreement to be effective as of the day and year set forth in Article 4 above.

CONTRACTOR

THE REGENTS OF THE UNIVERSITY OF	
CALIFORNIA, on behalf of UCSF,	6/8/2022
Department of Madicine("UCSF")	Date:
By: Its:Neal Conen vice Dean	
By:	
Its: Vice Dean	
Acknowledged By:	
By: Margaret Fang Its: Chair of the Department of Hospital	
By:0	Date:6/8/2022
Its: Chair of the Department of Hospital	Dute
Medicine	
DocuSigned by:	
By: 4773B1B201E94E5	Date: ^{6/9/2022}
Its: UCSF Physician	
NATIVIDAD MEDICAL CENTER	
	Date:
Deputy Purchasing Agent	Date:
Deputy Purchasing Agent	Date:
Deputy Purchasing Agent	Date:
	Date:
APPROVED AS TO LEGAL PROVISIONS:	Date:
APPROVED AS TO LEGAL PROVISIONS:	
APPROVED AS TO LEGAL PROVISIONS:	
APPROVED AS TO LEGAL PROVISIONS:	Date: Date: 6/9/2022 1:48 PM PDT
APPROVED AS TO LEGAL PROVISIONS:	
APPROVED AS TO LEGAL PROVISIONS: DocuSigned by: Stary Satta COECE1B00F444A0 Stacy Saetta, Deputy County Counsel	
APPROVED AS TO LEGAL PROVISIONS:	
APPROVED AS TO LEGAL PROVISIONS: DocuSigned by: Stary Satta COECE1B00F444A0 Stacy Saetta, Deputy County Counsel	
APPROVED AS TO LEGAL PROVISIONS: DocuSigned by: Stacy Sautta COECETBOOF444A0 Stacy Saetta, Deputy County Counsel APPROVED AS TO FISCAL PROVISIONS: DocuSigned by:	6/9/2022 1:48 РМ РDT Date:
APPROVED AS TO LEGAL PROVISIONS: DocuSigned by: Stacy Satta COECEIBOOF444A0 Stacy Saetta, Deputy County Counsel APPROVED AS TO FISCAL PROVISIONS:	

EXHIBIT 1.1

UCSF PHYSICIANS PROVIDING SERVICES

The Physicians shall provide direct patient care services under the terms of this Contract, in accordance with the standards of care established by recognized medical care organizations, and in accordance with the policies and procedures of the NATIVIDAD Medical Staff Bylaws, Rules and Regulations.

This Contract is for the provision of professional medical services. Professional medical services shall be provided in an inpatient and outpatient setting, which include consultation services during evening and weekend shifts.

- The Physician will provide full time inpatient and outpatient care. The Physician's schedule will be determined based on a schedule determined and used by other physicians in like positions at NATIVIDAD.
- The Physician must have an excellent grasp of clinical care medicine.
- The Physician shall have particular and proven expertise in the inpatient care of patients with end stage renal disease, cardiac disease (including acute myocardial infarction), infectious diseases, and patients needing peri-operative management and medical consultation.
- The Physician must possess excellent communication and interpersonal skills to optimize the care of our inpatients.
- Handwriting must be legible.
- The Physician must prepare appropriate medical records for all patients seen to assure the accumulation and organization of all pertinent clinical data needed to provide comprehensive medical care. The physician shall use the Electronic Health Record in use at NATIVIDAD.
- The Physician will refer patients to appropriate contracted medical or other government facilities, providing full clinical information for care and diagnostic procedures that cannot be adequately provided here. The Physician will coordinate and integrate information obtained into the ongoing Health Care Program at NATIVIDAD and assures the provision of timely follow-up care as required.
- The Physician will work closely with allied health professionals (i.e., Community Health Nurse, Social Workers, Health Educator, etc.) to utilize and coordinate the services of other health care professionals in the management of the patient's medical, psychological and social problems.
- UCSF Physician(s): Ka-Ly Li, MD

EXHIBIT 1.2

DESCRIPTION OF SERVICES

The Physician shall complete clinical reports, including completing all notes, charting and any required attestation, according to the policies and procedures of NATIVIDAD and complete correspondence on patients under his/her care in a timely fashion. Clinical data reports for the records of each patient shall be maintained in compliance with CMS Standards.

NATIVIDAD will provide the facilities, equipment, tools, resources, and support necessary for the Physician to perform his/her duties as stated in this Contract.

QUALIFICATIONS

Physician's Certificates and Licenses must all be current.

The Physician must submit legible copies of the following documents and any other documents required for credentialing/privileging.

- ✓ A Valid, current, full and unrestricted license to practice medicine in any state or territory within the United States, District of Columbia, or the Commonwealth of Puerto Rico.
- ✓ Be Board eligible or Board Certified with the American Board of their field of specialty. If the physician is to perform outside the normal training parameters of his/her specialty, the physician shall provide certification of education, training or experience for such privileges in the additional field(s) of practice.
- ✓ Current and valid BLS certification.
- ✓ Copy of current required immunizations for MMR (within two years), TB skin test (within one year), Hepatitis B and evidence of receiving the flu vaccine.
- ✓ Current DEA (Drug Enforcement Agency) certification.

CREDENTIALING

The Physician must be credentialed and clinical privileges granted by the NATIVIDAD Board of Directors before providing services.

ACCREDITATION

The Physician agrees to perform in compliance with NATIVIDAD existing standards of care and quality, which comply with the standards adopted by the Joint Commission CMS. If Physician is present during preparation for or during any surveys or inspections by the CMS, Physician will cooperate with the NATIVIDAD participation in those surveys, as reasonably necessary.

CONDITIONS OF SERVICES

<u>Physician shall be subject to the same quality assurance, credentials, licensure, and other qualification standards as those required of NATIVIDAD personnel.</u>

EXHIBIT 1.6

TIME REPORT

┛	MEDICAL CENTER			ect		H	ospital Ad	ministrat	ions and	nd Teaching Services			Other Admin		Non-billable Activities				Total
			00001 Direct Patient Care Services			00002 Supervi-	00003 0 Utilization	00004	00005	00006	-	80000	000	009	00010 Non-Productive Hrs		00011	00012 Other	
Name: Employee #:								Super-					Confer-						
Dept Name: Cost Center:			Sched.	E In		sion & Training of	and Other f Comm-	Control,	vision of	ing of Interns	vision of Allied Hlth	Other Administ-	CME	ences	Paid Time			Non- Billable Activities	ł
			IP/ OP Care	House On-Call				Medical Review.						and Training	Off (Sick/ Vacation)	Holiday			TOTAL
	riod End	ling:	(PR)	(PR)		Techs, etc.	Meetings	Autopsy	idents	idents	ionals	(specify)	(PR)	(PR)	(PR)	(PR)	search	(specify)	HOURS
1	Date:	A Hospital & NMC Clinic Time																	
		B. Non-Hosp & Non-NMC Clinic Time									10 (0)								
2	Date:	A Hospital & NMC Clinic Time]			
		B. Non-Hosp & Non-NMC Clinic Time			_			·											
3	Date:	A Hospital & NMC Clinic Time										1							
		B. Non-Hosp & Non-NMC Clinic Time			-	·											-		
4	Date:	A Hospital & NMC Clinic Time		i.															
		B. Non-Hosp & Non-NMC Clinic Time						(I			•			·				-	
5	Date:	A Hospital & NMC Clinic Time																	
		B. Non-Hosp & Non-NMC Clinic Time						·			•			·			-		
6	Date:	A Hospital & NMC Clinic Time																	
		B. Non-Hosp & Non-NMC Clinic Time	6 10 T		-		-												
7	Date:	A Hospital & NMC Clinic Time	j.						1										
		B. Non-Hosp & Non-NMC Clinic Time			- a - i			·	-			- C		1.00	-		-		
8	Date:	A Hospital & NMC Clinic Time	1									1			·	1			
		B. Non-Hosp & Non-NMC Clinic Time						·						·					
9	Date:	A Hospital & NMC Clinic Time		1											·	-			
		B. Non-Hosp & Non-NMC Clinic Time				·		u			•			· · · · · · · · · · · · · · · · · · ·					<u> </u>
10	Date:	A Hospital & NMC Clinic Time	7				×					1			·	- 22			<u> </u>
		B. Non-Hosp & Non-NMC Clinic Time				·		·											
11	Date:	A Hospital & NMC Clinic Time	3	6			8 8											8	
		B. Non-Hosp & Non-NMC Clinic Time			-		-							·					
12	Date:	A Hospital & NMC Clinic Time					2						_		-	_			
1		B. Non-Hosp & Non-NMC Clinic Time	1 10 0					•			•			·				-	
13	Date:	A Hospital & NMC Clinic Time	-		-		-			-						-	-		
		B. Non-Hosp & Non-NMC Clinic Time														-	-	-	
14	Date:	A Hospital & NMC Clinic Time					1 10								-	-			
"	Dute:				-	·					•						<u> </u>	<u>.</u>	i
_	-	B. Non-Hosp & Non-NMC Clinic Time			ļ,					L								<u> </u>	i
		SIGN IN	BLUE	INK					T I	Loartifi	that the bo	urs and typ			BLUE I		and that	the emplo	100
ce	rtify that t	he above information is a true and accurate	e stateme	nt of the	hours an	d locations	indicated.					torily, meet				correct	and tridt	the emplo	Jes .
10	vider:								Service Director:										

REV. 4/20/2011

EXHIBIT 2.2

EQUIPMENT

No Specialized Equipment Required

EXHIBIT 3.1

COMPENSATION

1. <u>Compensation</u>. NATIVIDAD shall pay to UCSF the amount of Two Hundred Seventy Thousand Dollars (\$270,000) per contract year for Services rendered by UCSF under this Agreement (the "Compensation"); provided, however, that UCSF is in compliance with the terms and conditions of this Agreement. Such Compensation shall be paid monthly Twenty Two Thousand Five Hundred Dollars (\$22,500). For purposes of this Agreement, the term "Contract Year" shall mean each consecutive twelve (12) month period beginning on the Effective Date during the term of this Agreement.

2. <u>Timing.</u> NATIVIDAD shall pay the Compensation due for Contracted Services performed by UCSF after UCSF's submission of the monthly invoice of preceding month's activity and time report in accordance with this Agreement; provided, however, that if UCSF does not submit an invoice and time sheet within sixty (60) days of the end of the month during which Services were performed, NATIVIDAD shall not be obligated to pay UCSF for Contracted Services performed during that month. The County of Monterey Standard Payment Terms for contracts/PSAs and paying invoices is "30 days after receipt of the certified invoice in the Auditor-Controller's Office."

EXHIBIT 7.3

NATIVIDAD INSURANCE

NATIVIDAD, at its sole cost and expense, shall insure its activities in connection with this Agreement, and obtain, keep in force and maintain insurance as follows:

- 1. Professional Medical Liability Insurance with financially sound and reputable companies with limits of five million dollars (\$5,000,000) per occurrence and a general aggregate of ten million dollars (\$10,000,000). If such insurance is written on a claims-made form, it shall continue for five (5) years following termination of this Agreement. The insurance shall have a retroactive date prior to coinciding with the effective date of this Agreement and a deductible of no more than five hundred thousand dollars (\$500,000). In the event that a claims-made policy is canceled or non-renewed, then NATIVIDAD shall obtain extended reporting (tail) coverage for the remainder of the five (5)-year period.
- 2. Comprehensive or Commercial Form General Liability Insurance (contractual liability included) with a limit of (1) one million dollars (\$1,000,000) per occurrence (2) one million dollars (\$1,000,000) Personal and Advertising Injury; and (3) five million (\$5,000,000) General Aggregate. If such insurance is written on a claims-made form, it shall continue for five years following termination of this Agreement. The insurance shall have a retroactive date prior to or coinciding with the effective date of this Agreement.
- 3. Workers' Compensation Insurance in a form and amount covering NATIVIDAD'S full liability as required by law under the Workers' Compensation Insurance and Safety Act of the State of California as amended from time to time.
- 4. Such other insurance in such amounts which from time to time may be reasonably required by the mutual consent of the parties against other insurance risks relating to performance.

It should be expressly understood, however, that the coverages required under this Agreement shall not in any way limit the liability of NATIVIDAD.

NATIVIDAD, upon execution of this Agreement, shall furnish UCSF with Certificates of Insurance evidencing compliance with all requirements. Certificates shall further provide for thirty (30) days' advance written notice to UCSF of any modification, change or cancellation of any of the above insurance coverages.

EXHIBIT 7.4

UCSF PHYSICIANS' INSURANCE

The University warrants that it maintains a program of self-insurance that covers its activities in connection with this Agreement as follows:

- 1. Professional Medical Liability Insurance with self-insured retention of five million dollars (\$5,000,000) per occurrence, with a general aggregate of ten million dollars (\$10,000,000). If such insurance is written on a claims-made form, it shall continue for five years following termination of this Agreement. The insurance shall have a retroactive date prior to or coinciding with the effective date of this Agreement and a deductible of no more than five hundred thousand dollars (\$500,000). In the event that a claims-made policy is canceled or non-renewed, then University shall obtain extended reporting (tail) coverage for the remainder of the five (5) year period.
- 2. Comprehensive or Commercial Form General Liability Insurance (contractual liability included) with a limit of (1) one million dollars (\$1,000,000) per occurrence (2) one million dollars (\$1,000,000) Personal and Advertising Injury; and (3) five million (\$5,000,000) General Aggregate. If such insurance is written on a claims-made form, it shall continue for five years following termination of this Agreement. The insurance shall have a retroactive date prior to or coinciding with the effective date of this Agreement.
- 3. Worker's Compensation Liability Insurance with self-insured retention in amounts required by the State of California.
- 4. Such other insurance in such amounts from time to time may be reasonably required by the mutual consent of the parties against other insurance risks relating to performance.

It should be expressly understood, however, that the coverages required under this Agreement shall not in any way limit the liability of UCSF.

UCSF, upon execution of this Agreement, shall furnish NATIVIDAD with Certificates of Insurance evidencing compliance with all requirements. Certificates shall further provide for thirty (30) days' advance written notice to NATIVIDAD of any modification, change or cancellation of any of the above insurance coverages.

Certificate Of Completion

Envelope Id: 4FAC5FD64D9D4BFE89F67BB5E7591CE5 Subject: Please DocuSign: Natividad Med Ctr_UCSF HEAL_PSA_Renewal 2022.pdf Source Envelope: Document Pages: 16 Signatures: 2 Certificate Pages: 2 Initials: 0 AutoNav: Enabled EnvelopeId Stamping: Disabled Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Record Tracking

Status: Original 6/8/2022 2:25:21 PM

Signer Events

Margaret Fang margaret.fang@ucsf.edu Physician University of California, San Francisco Security Level: Email, Account Authentication (Optional)

Electronic Record and Signature Disclosure: Not Offered via DocuSign

Neal Cohen CohenN@ucsf.edu Vice Dean University of California, San Francisco Security Level: Email, Account Authentication (Optional)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Holder: Scott Mayhew Scott.Mayhew@ucsf.edu

Signature DocuSigned by: Margaret Fang 07A2AF439945403...

Signature Adoption: Pre-selected Style Signed by link sent to margaret.fang@ucsf.edu Using IP Address: 128.218.42.13



Signature Adoption: Pre-selected Style Signed by link sent to CohenN@ucsf.edu Using IP Address: 128.218.42.208 Sent: 6/8/2022 2:36:38 PM Viewed: 6/8/2022 2:37:55 PM Signed: 6/8/2022 2:38:15 PM

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps

DocuSign

Status: Completed

Envelope Originator: Scott Mayhew 1855 Folsom St Suite 566 San Francisco, CA 94103 Scott.Mayhew@ucsf.edu IP Address: 128.218.42.186

Location: DocuSign

Timestamp

Sent: 6/8/2022 2:36:38 PM Viewed: 6/8/2022 4:00:56 PM Signed: 6/8/2022 4:02:14 PM DocuSign Envelope ID: FA013034-752F-4507-B4E4-EB6A30DFD87F

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/8/2022 2:36:38 PM
Certified Delivered	Security Checked	6/8/2022 2:37:55 PM
Signing Complete	Security Checked	6/8/2022 2:38:15 PM
Completed	Security Checked	6/8/2022 4:02:14 PM
Payment Events	Status	Timestamps

DocuSign

Certificate Of Completion Envelope Id: E1488426768846308B3E0C82E399C195 Status: Completed Subject: Please DocuSign: Please_DocuSign_Natividad_Med_Ctr_UCSF_HEAL_.pdf Source Envelope: Document Pages: 18 Signatures: 1 Envelope Originator: Certificate Pages: 4 Initials: 0 Scott Mayhew AutoNav: Enabled 1855 Folsom St Suite 566 Envelopeld Stamping: Disabled Time Zone: (UTC-08:00) Pacific Time (US & Canada) San Francisco, CA 94103 Scott.Mayhew@ucsf.edu IP Address: 128.218.42.186 **Record Tracking** Status: Original Holder: Scott Mayhew Location: DocuSign 6/8/2022 4:05:13 PM Scott.Mayhew@ucsf.edu Signer Events Signature Timestamp DocuSigned by: Sent: 6/8/2022 4:06:45 PM Ka-Yi Li ka-Uili Ka-Yi.Li@bmc.org Viewed: 6/9/2022 11:35:00 AM 4773B1B201E94E5... Security Level: Email, Account Authentication Signed: 6/9/2022 11:36:19 AM (Optional) Signature Adoption: Pre-selected Style Signed by link sent to Ka-Yi.Li@bmc.org Using IP Address: 73.61.13.220 **Electronic Record and Signature Disclosure:** Accepted: 6/9/2022 11:35:00 AM ID: 467b29a2-8241-4d7e-817d-0b16f1666ea0 In Person Signer Events Signature Timestamp **Editor Delivery Events** Status Timestamp Agent Delivery Events Status Timestamp **Intermediary Delivery Events** Status Timestamp **Certified Delivery Events** Status Timestamp **Carbon Copy Events** Status Timestamp Witness Events Signature Timestamp Notary Events Signature Timestamp **Envelope Summary Events** Status Timestamps Envelope Sent Hashed/Encrypted 6/8/2022 4:06:45 PM Certified Delivered Security Checked 6/9/2022 11:35:00 AM Signing Complete Security Checked 6/9/2022 11:36:19 AM Completed Security Checked 6/9/2022 11:36:19 AM **Payment Events** Status Timestamps

Electronic Record and Signature Disclosure

CONSUMER DISCLOSURE

From time to time, University of California, San Francisco (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through your DocuSign, Inc. (DocuSign) Express user account. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. For such copies, as long as you are an authorized user of the DocuSign system you will have the ability to download and print any documents we send to you through your DocuSign user account for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of your DocuSign account. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use your DocuSign Express user account to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through your DocuSign user account all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact University of California, San Francisco:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows: To contact us by email send messages to: it-cloudapps@ucsf.edu

To advise University of California, San Francisco of your new e-mail address

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at it-cloudapps@ucsf.edu and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address.

In addition, you must notify DocuSign, Inc to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in DocuSign.

To request paper copies from University of California, San Francisco

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to it-cloudapps@ucsf.edu and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with University of California, San Francisco

To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your DocuSign account, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an e-mail to it-cloudapps@ucsf.edu and in the body of such request you must state your e-mail, full name, IS Postal Address, telephone number, and account number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Operating Systems:	Windows2000 or WindowsXP
Browsers (for SENDERS):	Internet Explorer 6.0 or above
Browsers (for SIGNERS):	Internet Explorer 6.0, Mozilla FireFox 1.0, NetScape 7.2 (or above)
Email:	Access to a valid email account
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

Required hardware and software

• Users accessing the internet behind a Proxy Server must enable HTTP
1.1 settings via proxy connection

** These minimum requirements are subject to change. If these requirements change, we will provide you with an email message at the email address we have on file for you at that time providing you with the revised hardware and software requirements, at which time you will have the right to withdraw your consent.

Acknowledging your access and consent to receive materials electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

By checking the 'I Agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify University of California, San Francisco as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by University of California, San Francisco during the course of my relationship with you.