

AGREEMENT

This is an Agreement by and between the City of Cookeville, hereinafter referred to as the "City" and Cookeville Regional Medical Center, hereinafter referred to as "Provider".

Whereas, the Provider operates an employee health clinic staffed by Nurse Practitioners licensed in the state of Tennessee and supervised by a licensed physician, and

Whereas, City is interested in utilizing the services of the employee health clinic at Provider for employees of the City,

Now therefore the above named parties enter into the following Agreement.

1. **Obligation of Provider**

1.1 Provider will offer the following services through the employee health clinic of Provider to the employees of the City.

1.1.1 Evaluation and treatment by a Certified Nurse Practitioner for sick visits related to cold, flu, allergies, sprains, strains and injuries requiring basic wound closure.

1.1.2 Well visits for preventive health issues including but not limited to blood pressure and cholesterol education counseling.

1.1.3 Preventive vaccinations such as flu, tetaneous and Hep B are not included in this program. Those vaccinations are available through the industrial contract between CRMC and the City.

2. **Billing**

2.1 On each visit employee will sign a City payroll deduction form payable to the City in the amount of \$20.00 and Provider will fax the forms weekly to the City representative.

2.2 Provider will bill the City \$50.00 for each visit by an employee of the City. The City will be billed within 10 days following the end of the previous month for all visits by City employees for the previous month. City will reimburse Provider within 14 days of receipt of an invoice.

2.3 The costs of the following laboratory tests, if ordered, are included in the above fees.

2.3.1 Strep, mono, pregnancy, flu , glucose (sugar) and urinalysis.

2.4 The costs of the following injections, if ordered, are included in the above fees:

2.4.1 Injections

1. Kenalog and Decadron (steroids)
2. Toradol (non-narcotic for pain)
3. Rocephen (antibiotic)
4. Phenergan (nausea)
5. Bicillin LA (antibiotic)
6. tetanus update as part of treatment for open wound

2.5 Attachment 2.5 is a list of laboratory tests available from CRMC laboratory when order by Employee Health Clinic as well as the charge for each test. The cost for any of these tests will be billed to the City on a monthly basis as described in 2.2 above. These costs are in addition to the \$50.00 visit charge.

3. Miscellaneous

3.1 The city will provide employee health with an updated list of all employees on a weekly basis, however, each employee must have a city employee picture ID for presentation for each clinic visit. If an employee does not have an ID with them and it is after hours and his or her employment cannot be verified telephonically, the most current list of city employees will govern. If the name appears on the City list, the city will be responsible for the \$50.00 visit charge.

3.2 All notices, requests, demands or other communications hereunder shall be in writing and shall be deemed to have been given or delivered if either personally delivered or mailed by registered mail, return receipt requested, postage prepaid to the following addresses:

If to City: Gail Fowler
45 E. Broad
Cookeville, TN 38501

If to Hospital: Cookeville Regional Medical Center
Attn: Bernard Mattingly
1 Medical Center Blvd
Cookeville, TN 38501

(signature page to follow)

Signed and agreed to by the authorized representatives of each party.

HOSPITAL

CITY

Bernard Mattingly, CEO

Jim Shipley, City Manager