



**Health & Human Services
Agency
COUNTY OF TULARE
AGENDA ITEM**

BOARD OF SUPERVISORS

KUYLER CROCKER
District One

PETE VANDER POEL
District Two

AMY SHUKLIAN
District Three

J. STEVEN WORTHLEY
District Four

MIKE ENNIS
District Five

AGENDA DATE: June 5, 2018

Public Hearing Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Published Notice Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Advertised Published Notice	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Meet & Confer Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Electronic file(s) has been sent	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Personnel Resolution attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s)	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

CONTACT PERSON: Timothy D. Durick, Psy.D. PHONE: 624-8000

SUBJECT: Approve an agreement with David E. Kilgore, M.D.

REQUEST(S):

That the Board of Supervisors:

1. Approve an agreement with David E. Kilgore, M.D., effective from July 1, 2018, through June 30, 2019, in the amount not to exceed \$227,000 for the provision of psychiatric services; and
2. Authorize the Chairman of the Board to sign three (3) copies of the agreement.

SUMMARY:

The Tulare County Health and Human Services Agency, Mental Health Branch, provides mandated psychiatric services to consumers who are part of the Mental Health Plan. Due to the countywide shortage of specialty psychiatric providers, it is essential that the County continues to be able to use contracted psychiatrists. Contracted psychiatrists perform services in a manner consistent with the level of care and skill ordinarily exercised by other like professionals practicing in the State of California. This contract will provide telepsychiatry coverage for the Tulare County Mental Health outpatient clinics. It is anticipated that in Fiscal Year 2018-2019, Dr. Kilgore will provide telepsychiatry services to approximately 300 adult mental health consumers.

This agreement did not include a Request for Proposal (RFP) process because the Central Valley is a mental health provider shortage area, as certified by the California Office of Statewide Health Planning and Development, therefore, it is difficult to recruit and retain psychiatric providers. David E. Kilgore, M.D., has

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provided competent psychiatric services as required by Tulare County since 2012. We aim to continue this relationship and ensure our consumer's continuity of care.

This agreement has been approved as to form by County Counsel. The following term deviates substantively from the standard County boilerplate: The County agrees to provide malpractice insurance to Contractor for services pursuant to this agreement.

FISCAL IMPACT/FINANCING:

The maximum reimbursement for this agreement is \$227,000 and will be included in the Fiscal Year 2018-2019 budget. These services are paid through Medi-Cal revenues. There is no additional net cost to the County General Fund.

LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:

The County's five-year strategic plan includes the Quality of Life Initiative to promote health and well being for the citizens of Tulare County by attracting and retaining a broad range of health and mental health service providers. This agreement will help fulfill this initiative by providing quality psychiatric services to our consumers.

ADMINISTRATIVE SIGN-OFF:



Timothy D. Durick, Psy.D.
Director of Mental Health

Cc: Auditor-Controller
County Counsel
County Administrative Office (2)

Attachment(s): Agreement

**BEFORE THE BOARD OF SUPERVISORS
COUNTY OF TULARE, STATE OF CALIFORNIA**

**IN THE MATTER OF APPROVE AN
AGREEMENT WITH DAVID E. KILGORE,
M.D.**

) Resolution No. _____
) Agreement No. _____
)

UPON MOTION OF SUPERVISOR _____, SECONDED BY
SUPERVISOR _____, THE FOLLOWING WAS ADOPTED BY THE
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD _____
_____, BY THE FOLLOWING VOTE:

AYES:
NOES:
ABSTAIN:
ABSENT:

ATTEST: MICHAEL C. SPATA
COUNTY ADMINISTRATIVE OFFICER/
CLERK, BOARD OF SUPERVISORS

BY: _____
Deputy Clerk

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