

**AGREEMENT FOR HEART AND LUNG PHYSICAL EXAMINATIONS
FOR THE CITY OF NORTH LAS VEGAS POLICE OFFICERS, CORRECTIONAL
OFFICERS, AND FIREFIGHTERS**

This Agreement for Heart and Lung Physical Examinations for the City of North Las Vegas Police Officers, Correctional Officers, and Firefighters (this "Agreement") is effective as of _____ (the "Effective Date") by and between the City of North Las Vegas, a Nevada municipal corporation (the "City") and Gilbert, Gaetke and Associates of Nevada, MD LTD d/b/a ARC Health and Wellness Centers (the "Services Provider").

RECITALS

WHEREAS, the City desires to contract with the Services Provider to provide certain medical, health, administrative, and related professional services to the City's police officers, correctional officers, and firefighters (collectively, the "Services") at the City's Police Department South Area Command located at 2332 N. Las Vegas Blvd, Suite 200, North Las Vegas, Nevada, 89030 and other ARC designated locations (the "Site").

WHEREAS, the City is not required to competitively bid an agreement for professional services pursuant to NRS 332.115(1)(b).

WHEREAS, the City desires to have the Services Provider provide the Services, and the Services Provider agrees to such performance, upon the terms and conditions described in this Agreement.

NOW, THEREFORE, upon good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the City and the Services Provider agree to the following terms, conditions, and covenants:

**SECTION ONE
RESPONSIBILITY OF SERVICES PROVIDER**

In addition to any other obligations of the Services Provider under this Agreement, the Services Provider has the following responsibilities:

1.1. The Services Provider shall be responsible for the professional quality, technical accuracy, timely completion, and coordination of all the Services furnished by the Services Provider, by the Services Provider's principals, officers, employees, agents and independent contractors of the Services Provider.

1.2. The Services Provider hereby designates Paul Granstrom as the representative of the Services Provider who is (1) responsible for making sure the Scope of Work (as defined below) is performed in conformance with the terms of this Agreement, (2) the point-of-contact for the City for all matters concerning the Services, and (3) authorized to make all decisions and take all actions necessary to perform and deliver all obligations of the Services Provider pursuant to the terms and conditions of this Agreement.

1.3. The Services Provider shall not reproduce, display, or otherwise use the name, logo or any other intellectual property, including without limitation, any trade name, mark, patent or copyright, of the City without the City's prior written consent. The Services Provider shall not send or publish to any third party any information related to the Services or this Agreement without the City's prior written approval.

1.4. The Services Provider, and its principals, officers, employees, agents and independent contractors will cooperate with the City in the performance of this Agreement and will be available for consultation with the City at all times during the Site's operating hours.

1.5. The Services Provider will provide the Services as described in the following: (a) the Services Provided Exhibit attached hereto and incorporated herein as Exhibit A; and (b) the Services Provider's Pricing Proposal and Optional Components attached hereto and incorporated herein as Exhibit B. The Services Provider shall perform and deliver all the Services and other obligations set forth in Exhibit A and Exhibit B as it may be amended by mutual agreement of the City and the Services Provider from time to time, and all related additional or incidental tasks necessary to effectuate the intent of this Agreement (collectively, the "Scope of Work"). The Services Provider shall not perform any task that is not required by this Agreement or necessarily implied by it, without obtaining the prior written approval of the City. If the Services Provider chooses to perform any task without obtaining the City's prior written approval, the Services Provider does so at its own risk and expense.

1.6. The Services Provider shall at its own expense comply at all times with all municipal, county, state and federal laws, regulations, rules, codes, ordinances and other applicable legal requirements, including without limitation, the Americans with Disabilities Act, as such may be amended or modified from time to time (collectively, the "Legal Requirements") in performing the Scope of Work for the Services.

1.7. The Services Provider shall at its own expense obtain and maintain in full force and effect at all times all necessary permits, licenses and other governmental approvals required by applicable Legal Requirements to be obtained and maintained by the Services Provider with respect to the Services, the Scope of Work and/or the business and operations of the Services Provider (collectively, the "Governmental Approvals").

1.8. The Services Provider shall provide all tools, equipment and materials necessary to provide the Services as set forth in the Scope of Work. The Services Provider shall provide adequate staffing based on the requirements set forth in the Scope of Work.

1.9. Each employee, agent, or independent contractor of the Services Provider having access to personnel, data, information, personal property, or real property of the City must first submit to a background check performed by the City's Police Department, and must satisfactorily pass such background check, as determined by the City in its sole discretion, before performing any portion of the Services or the Scope of Work on behalf of the Services Provider. The City will not assess any fees or costs to the Services Provider for these background checks, nor will the Services Provider assess any fees or costs for time their employees, agents, or independent contractors must spend during the background check process.

**SECTION TWO
TERM AND RENEWAL**

2.1. The term of this Agreement commences on the Effective Date and shall continue for a period of three (3) years, unless earlier terminated as provided herein (the "Initial Term").

**SECTION THREE
PAYMENT TERMS**

3.1. The Services Provider shall provide to the City separate invoices for police officers/corrections officers and firefighters to the persons designated by the City. Prior to sending any invoice to the City to request payment under the terms of this Agreement, the Services Provider shall review and approve all invoices and statements to be paid by the City for the Services, whether from the Services Provider or other third party. Payment to the Services Provider shall be made within thirty (30) days after the City receives an invoice provided by the Services Provider to the City, provided that such invoice is complete, correct, and undisputed by the City, and that it contains the following information: detailed description of work, patient name, patient City ID, number of hours worked, itemized list of costs and any other information requested by the City. The Services Provider shall submit invoices only once per month, covering work performed in the prior month. Monthly payments will be calculated consistent with Exhibit B, as applicable. In the event of a dispute in a portion of an invoice submitted to the City, the City shall pay the entire undisputed portion of that invoice within such thirty (30) day period. All Heart and Lung Physicals, which take place in two parts- Lab work and physical exam will be invoiced together, in one invoice, after the physical has been completed.

3.2. The Services Provider represents and warrants that payment of any undisputed invoice represents the adequate, complete, and exclusive compensation for the Services Provider's timely, complete, and proper performance of the Scope of Work, the Services, and all requirements of this Agreement, including, without limitation, supplies, laboratory fees, technician fees, and radiologist "over-read" charges.

**SECTION FOUR
ACCESS TO RECORDS**

4.1. Unless prohibited by applicable Legal Requirements, the Services Provider shall provide to the City all medical records and any other non-confidential and non-privileged information related to the Services as set forth in the Scope of Work, as requested by the City (the "Records").

4.2. The Services Provider shall maintain and supply the Records to the City pertinent to the Services Provider's performance under this Agreement. The Services Provider shall also maintain the information and data used by the Services Provider in the preparation or support of all invoices of the Services Provider, and a copy of such invoices. The City, or any of its duly authorized representatives, shall have access to the Records, such information and data used by the Services Provider in the preparation or support of all invoices of the Services Provider, and a copy of such invoices, for the purpose of inspection, audit and copying. The Services Provider

will provide proper facilities for such access and inspection. Should such access and inspection be required at the Service Provider's offices or facilities outside of Clark County, the City shall be responsible for travel costs.

4.3. Records pursuant to Section 4.1 above shall be maintained and made available during performance under this Agreement and until three (3) years from the date of final payment for the Services. In addition, those records which relate to any dispute resolution, litigation or appeal, or the settlement of claims arising out of such performance, or costs or items to which an audit exception has been taken, shall be maintained and made available until three (3) years after the date of resolution of such dispute, litigation, appeal, claim or exception. Following termination of this Agreement, the City shall provide the Services Provider with access to any records prepared by the Services Provider and delivered to the City which are relevant to the preparation for third-party litigation in connection with the Services rendered by the Services Provider during the term of this Agreement. This Section 4.3 survives the completion of the Services and the termination or expiration of this Agreement.

4.4. At the Services Provider's sole expense, the Services Provider will maintain a secure online database with the records of all Services provided. Any tested police officers, detention officers and firefighters may access the database to review and download their personal information. The Services Provider shall design and maintain the database so that the tested police officers, detention officers and firefighters may only access their personal records and not the records of any other person. This database shall be available until three (3) years after the termination of this Agreement.

SECTION FIVE FISCAL FUNDING OUT

The City reasonably believes that sufficient funds can be obtained to make all payments during the term of this Agreement. Pursuant to NRS Chapter 354, if the City does not allocate funds to continue the function performed by the Services Provider obtained under this Agreement, this Agreement will be terminated when appropriated funds expire.

SECTION SIX REPRESENTATIONS AND WARRANTIES

6.1. The Services Provider hereby represents and warrants for the benefit of the City, in addition to any other representations and warranties made in this Agreement, with the knowledge and expectation of the City's reliance thereon, as follows:

(a) The Services Provider is a duly formed and validly existing professional services corporation and is in good standing pursuant to the laws of the State of Nevada and is duly qualified to do business in, and is in good standing in, Nevada, and has the full power, authority and legal right to execute, deliver and perform under this Agreement.

(b) The execution, delivery and performance of this Agreement and the taking of all other lawful actions necessary to consummate the Services contemplated hereunder, by the persons executing, delivering and performing the same on behalf of the Services Provider, have

been duly and validly authorized and this Agreement and the other agreements and instruments contemplated hereby, constitute legal, valid and binding obligations of the Services Provider, enforceable in accordance with their respective terms.

(c) No consent, approval or authorization of any governmental authority or private party is required in connection with the execution and performance of this Agreement by the Services Provider.

(d) The Services Provider is a sophisticated and qualified provider of the professional services required by the Scope of Work, and its personnel possess the level of professional expertise and experience that is necessary to properly perform the Scope of Work with an appropriate level of diligence, skill and care, and pursuant to the terms, specifications and conditions of this Agreement. The Services Provider has the necessary personnel, equipment, tools, supplies, materials, and facilities to properly perform the Scope of Work with an appropriate level of diligence, skill and care, and pursuant to the terms, specifications and conditions of this Agreement.

(e) The Services Provider shall require that each employee, agent or independent contractor performing any portion of the Services or the Scope of Work shall be required to comply with all obligations of the Services Provider to the City under this Agreement.

6.2. The representations and warranties made by the Services Provider herein survive the completion of the Services and the termination or expiration of the Agreement.

SECTION SEVEN INSURANCE

7.1. The Services Provider shall procure and maintain, and shall cause each subcontractor to procure and maintain at all times during the performance of the Services and for one year thereafter, at its own expense, the following insurances:

(a) Workers' Compensation Insurance as required by applicable Legal Requirements, covering all persons employed in connection with the matters contemplated hereunder and with respect to whom death or injury claims could be asserted against the City or the Services Provider.

(b) Comprehensive General Liability (bodily injury and property damage) insurance in a policy limit of not less than \$1,000,000 for each occurrence and \$2,000,000 in the aggregate. Such Comprehensive General Liability insurance policy shall be endorsed as to include the City as an additional insured.

(c) Professional Liability insurance, for the protection from claims arising out of performance of professional services caused by a negligent act, error, or omission for which the insured is legally liable; such Professional Liability insurance will provide for coverage in an amount of not less than \$1,000,000 for each occurrence and \$3,000,000 in the aggregate.

7.2. Certificates of Insurance indicating that such insurance is in effect shall be delivered to the City before work is begun under this Agreement. If the Services Provider is underwritten on a claims-made basis, the retroactive date shall be prior to or coincident with the commencement of the Initial Term, and the Certificate of Insurance shall state that coverage is claims-made and the retroactive date. The Services Provider shall provide the City annually with a Certificate of Insurance for each type of insurance required hereunder. It is further agreed that the Services Provider and/or any insurance carrier shall provide the City with 30-day advance written notice of policy cancellation of any insurance policy required to be maintained by the Services Provider.

7.3. All insurance policies required hereunder, and all renewals thereof, shall be provided by a company or companies, or their re-insurers, authorized to do business in Nevada and having an A.M. Best rating of A or higher, and shall expressly:

- (a) Waive subrogation against the City, its officers, agents, servants and employees;
- (b) Provide that they are primary and noncontributing with any insurance which the City may carry;
- (c) Include or be endorsed to cover the Services Provider's contractual liability to the City;
- (d) Be signed by a person authorized by that insurer and licensed by the State of Nevada; and
- (e) Disclose all deductibles and self-insured retentions in the Certificate of Insurance. No deductible or self-insured retention may exceed \$250,000 without the written approval of the City.

SECTION EIGHT TERMINATION

The City shall have the right to terminate this Agreement without cause upon thirty (30) days prior written notice and the City shall have no liability to the Services Provider for such termination except that the City shall pay the Services Provider for the reasonable value of Services provided by the Services Provider to the City up through and including the date of termination, provided that the Services Provider, within thirty (30) days following the date of the City's termination notice, submits an invoice for such services in a form acceptable to the City and such invoice is supplemented by such underlying source documentation as is requested by the City.

**SECTION NINE
INDEMNIFICATION**

Notwithstanding any of the insurance requirements herein above set forth or limits of liability set forth therein, the Services Provider shall defend, protect, indemnify and hold harmless the City, and its officers, agents, representatives and employees, from any liabilities, claims, damages, losses, expenses, proceedings, suits, actions, decrees, judgments, reasonable attorney fees, and court costs which the other party suffers, and/or its officers, agents or employees suffer, as a result of, or arising out of, the negligent or intentional acts or omissions of the other party, its independent contractors, agents, and employees, or anyone employed by any of them, in fulfillment or performance of the terms, conditions or covenants of this Agreement. This Section 9 survives the termination or expiration of this Agreement until such time as the applicable statutes of limitation expire.

**SECTION TEN
NOTICES**

10.1. All notices, demands, consents, approvals, and other instruments to be given pursuant to this Agreement shall be in writing and signed by the notifying party and shall be deemed to have been effective upon delivery in writing if served personally, including, without limitation, delivery by personal delivery, by overnight courier service, by facsimile or by overnight express mail, or upon posting if sent by registered or certified mail, postage prepaid, return receipt requested, and addressed as follows:

To City:	City of North Las Vegas Contracts Coordinator, Suite 700 2250 Las Vegas Blvd. North North Las Vegas, NV 89030
With a Copy to:	City of North Las Vegas Attention: City Manager and City Attorney 2250 Las Vegas Blvd. North North Las Vegas, NV 89030
To Services Provider:	Gilbert, Gaetke and Associates of Nevada, MD LTD d/b/a ARC Health and Wellness Centers, LLC Attention: Paul Granstrom, Executive Vice-President 82 E. Glendale Avenue Reno, NV 89431

10.2. The address to which any notice, demand or other writing may be delivered to any party as above provided may be changed by written notice given by such party as above provided.

SECTION ELEVEN GENERAL PROVISIONS

11.1. Nevada and City Law. The laws of the State of Nevada and the North Las Vegas Municipal Code govern the validity, construction, performance and effect of this Agreement, without regard to conflicts of law.

11.2. Assignment. Any attempt to assign this Agreement by the Services Provider without the prior written consent of the City shall be void.

11.3. Non-Waiver. The failure to enforce or the delay in enforcement of any provision of this Agreement by a party hereto or the failure of a party to exercise any right hereunder shall in no way be construed to be a waiver of such provision or right (or of any other provision or right) unless such party expressly waives such provision or right in writing.

11.4. Partial Invalidity. If any term, provision, covenant or condition of this Agreement, or any application thereof, should be held by a court of competent jurisdiction to be invalid, void or unenforceable, all provisions, covenants, and conditions of this Agreement, and all applications thereof, not held invalid, void or unenforceable, shall continue in full force and effect.

11.5. Attorney's Fees. In the event any action is commenced by either party against the other in connection herewith (including any action to lift a stay or other bankruptcy proceeding), the prevailing party shall be entitled to its costs and expenses, including reasonable attorneys' fees, as determined by the court. Reasonable attorney's fees include fees and costs of the City Attorney's Office. This Section 11.5 survives until the applicable statutes of limitation expire.

11.6. Entire Agreement. This Agreement constitutes the entire Agreement between the parties pertaining to the subject matter contained herein and supersedes all prior representations, agreements and understandings of the parties. No addition to or modification of this Agreement shall be binding unless executed in writing by the parties hereto.

11.7. Time of Essence. Time is of the essence in the performance of this Agreement and all terms, provisions, covenants and conditions hereof.

11.8. Ownership of documents. All medical records, summaries, reports, photographs, studies, estimates, or other like documents given, prepared or assembled by the Services Provider or any subcontractor and produced to the City during the term of this Agreement that are related to the performance of this Agreement are deemed to be a "Work made for Hire" and are the property of the City, except to the extent such is not allowed by applicable Legal Requirements.

11.9. Further Assurances. The parties shall each execute and deliver all such documents and perform such acts as are reasonably requested by the other party to effectuate the transactions contemplated by this Agreement.

11.10. Controlling Agreement. To the extent any of the terms of any Exhibit to this Agreement conflict with this Agreement, the terms and provisions of this Agreement govern and control.

11.11. Effect of Agreement Termination. In the event this Agreement is terminated, all rights and obligations of the parties hereunder shall cease, other than indemnity obligations and matters that by their terms survive the termination hereof.

11.12. Non-Compete Acknowledgment. The City acknowledges that the Services Provider has signed non-compete agreements with its employees which prohibit those employees from accepting employment with the City for a period of two (2) years after the date of termination of this Agreement.

11.13. Electronic Signatures. The use of facsimile, email or other electronic medium shall have the same force and effect as original signatures.

[Remainder of this page intentionally left blank]

[Signatures on the following page]

IN WITNESS WHEREOF, the City and the Services Provider have caused this Agreement to be executed as of the day and year first above written.

CITY
CITY OF NORTH LAS VEGAS,
Nevada municipal corporation

By: _____
John J. Lee, Mayor

ATTEST:

By: _____
Catherine A. Raynor, MMC, City Clerk

Approved as to Form:

By: _____
Micaela Rustia Moore, City Attorney

SERVICES PROVIDER
GILBERT, GAETKE AND ASSOCIATES OF NEVADA, MD LTD
D/B/A ARC HEALTH AND WELLNESS CENTERS.

By:  _____
Paul Granstrom, Manager

EXHIBIT A

SERVICES PROVIDED

Capitalized terms used herein and not defined have the meaning ascribed to them in the Agreement.

1. The Services Provider shall conduct and complete the heart and lung physical examinations, tests, and vaccinations for the City's police officers, correctional officers, and firefighters at the Site.
2. The Services Provider, at its sole expense, shall provide the necessary medical staffing to provide the Services at the Site including, without limitation, the board certified physicians. The Services Provider shall be available to provide the Services on the dates and times as directed by the City.
3. The City shall provide, at no charge to the Services Provider, the Site, utilities for the Site, and certain medical equipment owned by the City (the "Medical Equipment") and located on the Site, for use by the Services Provider to provide the Services. The City retains ownership rights to the Medical Equipment. The Services Provider shall not sell, trade or dispose of any of the Medical Equipment without the City's prior written consent. If the Medical Equipment is replaced, or otherwise at the termination of this Agreement, the Medical Equipment shall be returned to the City.
4. The Services Provider shall set up and test the Medical Equipment and determine what warranties and maintenance agreements are in effect. If the Medical Equipment is not in working order, but is under warranty or covered under a maintenance agreement, the Services Provider will coordinate the maintenance and repair of the Medical Equipment with the applicable vendor at no charge to the City. If the Medical Equipment is not under warranty or covered under a maintenance agreement, with the exception of the ultrasound machine, the Services Provider will have the option to either repair or replace the Medical Equipment at no charge to the City. In the event the Services Provider replaces any Medical Equipment and pays for the cost of the replaced equipment, the Services Provider may assume total ownership of the replaced equipment. The Services Provider shall pay for all costs associated with maintaining and servicing the Medical Equipment, with the exception of the ultrasound machine, during the Term of this Agreement. The Services Provider shall verify the performance of all of the Medical Equipment. The Services Provider shall indemnify the City for any misdiagnosis that may result due to a failure of the Medical Equipment to the full extent provided in Section 9 of this Agreement.
5. The City's provision of the Medical Equipment notwithstanding, the Services Provider shall provide all medical equipment and furnishings as needed without cost to the City to fully perform the Services and the Scope of Work under this Agreement.
6. The Services Provider will conduct individual physicals during two (2) scheduled visits, by appointment only, and scheduled in a manner mutually acceptable to both parties. The

Services Provider shall complete Part I of the physical which consists of the initial testing such as laboratory work (blood draw), pulmonary function testing, audiometric testing, chest x-ray, and vision testing during the first visit. The Services Provider shall complete Part II of the physical during the second visit which consists of the "resting" electrocardiogram (EKG), "stress" treadmill electrocardiogram, and the heart and lung examination with the physician.

7. Subject to all Legal Requirements, the Services Provider shall complete and submit electronically to the City the medical records pertaining to the physical examination, testing results and vaccinations, on forms provided by the City to both the employee and the employees' departments as requested by the City within fifteen (15) working days of the completion of the heart and lung physical.
8. Subject to all Legal Requirements, the Services Provider shall notify the City in writing if an employee has a medical physical condition of which the employee has been warned pursuant to NRS 617.455 and NRS 617.457.
9. Subject to all Legal Requirements, the Services Provider shall complete and submit to the City any other information required by the City. The City shall provide to the Services Provider any releases for medical records to be provided to the City which are required by law.
10. Standard Services are defined as those services that the City will pay for. Optional services are defined as services offered and available to employees that they will pay for.

EXHIBIT B

SERVICES PROVIDER'S PRICING PROPOSAL INCLUDING OPTIONAL SERVICES
[Attached]

North Las Vegas Panels (Fiscal Year 2017 - 2018)

Fire Department Panels	Itemized Cost			
	Physical	New Hire Physical	Annual Group I (Over 40)	Annual Group II (Under 40)
Physical Exam	\$ 48.50	\$ 48.50	\$ 48.50	\$ 48.50
Physicians Report of Results (ARC)	\$ 14.55	\$ 14.55	\$ 14.55	\$ 14.55
Full Vision Screening (Titmus)	\$ 40.00	\$ 40.00	Not Applicable	Not Applicable
Vision Test (Snellen)	Incl. w/ Physical	Not Applicable	\$ -	\$ -
Audiometry	\$ 24.25	\$ 24.25	\$ 24.25	\$ 24.25
Spirometry	\$ 36.86	\$ 36.86	\$ 36.86	\$ 36.86
Percent Body Fat (BMI Method) / Waist Circumference	Incl. w/ Physical	\$ -	\$ -	\$ -
Chest X-Ray, Single View with Overread	\$ 29.10	\$ 29.10	Not Applicable	Not Applicable
Chest X-Ray, Dual View with Overread	\$ 38.80	Not Applicable	\$ 38.80	\$ 38.80
Coronary Risk Profile II (CBC, Chem Panel, Lipid & UA)	\$ 35.89	\$ 35.89	\$ 35.89	\$ 35.89
ABO Group and RH	\$ 15.00	\$ 15.00	Not Applicable	Not Applicable
Hepatitis C Antibody	\$ 27.16	Not Applicable	\$ 27.16	\$ 27.16
Hepatitis Profile (A,B,C)	\$ 77.60	\$ 77.60	Not Applicable	Not Applicable
Prostate Specific Antigen Screening (if 40+)	\$ 15.00	Not Applicable	\$ 15.00	Not Applicable
HIV Screening	\$ 43.65	Not Applicable	\$ 43.65	\$ 43.65
Non DOT Urine Drug Screen	\$ 32.98	\$ 32.98	Not Applicable	Not Applicable
Specimen Handling	Incl. w/ Physical	\$ -	\$ -	\$ -
Treadmill Exercise Stress Test	\$ 111.55	\$ 111.55	\$ 111.55	\$ 111.55
OSHA Respirator Questionnaire and Clearance Letter	\$ 9.70	\$ 9.70	\$ 9.70	\$ 9.70
TB Skin Test (PPD)	\$ 4.85	\$ 4.85	\$ 4.85	\$ 4.85
PANEL PRICES	\$ 480.83	\$ 410.76	\$ 395.76	

Any additional tests/services requested by the Fire Department will use MSA # 3148 with State of Nevada as pricing fee schedule.

North Las Vegas Panels (Fiscal Year 2017 - 2018)

Police Department Panels	Itemized Cost		New Hire Physical		Annual Group I (Over 40)	Annual Group II (Under 40)
Physical Exam	\$	48.50	\$	48.50	\$	48.50
Physicians Report of Results (ARC)	\$	14.55	\$	14.55	\$	14.55
Full Vision Screening (Titmus)	\$	40.00	\$	40.00	Not Applicable	Not Applicable
Vision Test (Snellen)	Incl. w/ Physical	\$	-	\$	-	\$
Audiometry	\$	24.25	\$	24.25	\$	24.25
Spirometry	\$	36.86	\$	36.86	\$	36.86
Percent Body Fat (BMI Method) / Waist Circumference	Incl. w/ Physical	\$	-	\$	-	\$
Chest X-Ray, Single View with Overread	\$	29.10	\$	29.10	\$	29.10
Coronary Risk Profile II (CBC, Chem Panel, Lipid & UA)	\$	35.89	\$	35.89	\$	35.89
ABO Group and RH	\$	15.00	\$	15.00	Not Applicable	Not Applicable
Hepatitis C Antibody	\$	27.16	Not Applicable	\$	27.16	\$
Hepatitis Profile (A,B,C)	\$	77.60	\$	77.60	Not Applicable	Not Applicable
Non DOT Urine Drug Screen	\$	32.98	\$	32.98	Not Applicable	Not Applicable
Specimen Handling	Incl. w/ Physical	\$	-	\$	-	\$
Treadmill Exercise Stress Test	\$	111.55	\$	111.55	\$	111.55
TB Skin Test (PPD)	\$	4.85	\$	4.85	\$	4.85
Resting EKG	\$	38.80	Not Applicable	Not Applicable	Not Applicable	\$
PANEL PRICES	\$	471.13	\$	332.71	\$	259.96

Any additional tests/services requested by the Police Department will use MSA # 3148 with State of Nevada as pricing fee schedule.

Optional Employee Paid Items

Prostate Specific Antigen	\$	15.00
Ultrasound Screening	\$	40.00

Confirmation Charges on Hepatitis and HIV Screenings

Hep A - Hep A IgM	\$	36.86
Hep B Ag - Neutralization Assay	\$	175.00
Hep C - HCV Verification	\$	386.00
HIV 1/2 Differentiation	\$	70.00

Police / Fire Miscellaneous Pricing

Hepatitis A Vaccines	\$	72.75
Series of Two	\$	145.50
Hepatitis B Vaccines	\$	58.20
Series of Three	\$	174.60
TwinRix Hep. A&B Vaccines	\$	100.88
Series of Three	\$	302.64

Fire Optional Pricing Items

Ambulance Attendant License	\$	15.00
Urine Nicotine Cotinine Testing	\$	14.99
DOT Physical Paperwork in conjunction w/	\$	30.00
DOT Physical independent of Annual	\$	75.00

North Las Vegas Panels (Fiscal Year 2018-2020)

Fire Department Panels	New Hire Physical		Annual Group I (Over 40)	Annual Group II (Under 40)
	Itemized Cost	Physical		
Physical Exam	\$ 77.72	\$ 77.72	\$ 77.72	\$ 77.72
Physicians Report of Results (ARC)	\$ 14.55	\$ 14.55	\$ 14.55	\$ 14.55
Full Vision Screening (Timnus)	\$ 40.00	\$ 40.00	Not Applicable	Not Applicable
Vision Test (Snellen)	Incl. w/ Physical	Not Applicable	\$ -	\$ -
Audiometry	\$ 24.25	\$ 24.25	\$ 24.25	\$ 24.25
Spirometry	\$ 36.86	\$ 36.86	\$ 36.86	\$ 36.86
Percent Body Fat (BMI Method) / Waist Circumference	\$ 7.76	\$ 7.76	\$ 7.76	\$ 7.76
Chest X-Ray, Single View with Overread	\$ 29.10	\$ 29.10	Not Applicable	Not Applicable
Chest X-Ray, Dual View with Overread	\$ 38.80	Not Applicable	\$ 38.80	\$ 38.80
Coronary Risk Profile II (CBC, Chem Panel, Lipid & UA)	\$ 35.89	\$ 35.89	\$ 35.89	\$ 35.89
ABO Group and RH	\$ 15.00	\$ 15.00	Not Applicable	Not Applicable
Hepatitis C Antibody	\$ 27.16	Not Applicable	\$ 27.16	\$ 27.16
Hepatitis Profile (A,B,C)	\$ 77.60	\$ 77.60	Not Applicable	Not Applicable
Prostate Specific Antigen Screening (if 40+)	\$ 15.00	Not Applicable	\$ 15.00	Not Applicable
HIV Screening	\$ 43.65	Not Applicable	\$ 43.65	\$ 43.65
Non DOT Urine Drug Screen	\$ 32.98	\$ 32.98	Not Applicable	Not Applicable
Specimen Handling	Incl. w/ Physical	\$ -	\$ -	\$ -
Treadmill Exercise Stress Test	\$ 111.55	\$ 111.55	\$ 111.55	\$ 111.55
OSHA Respirator Questionaire and Clearance Letter	\$ 9.70	\$ 9.70	\$ 9.70	\$ 9.70
TB Skin Test (PPD)	\$ 4.85	\$ 4.85	\$ 4.85	\$ 4.85
PANEL PRICES	\$ 517.81	\$ 447.74	\$ 432.74	\$ 432.74

Any additional tests/services requested by the Fire Department will use MSA # 3148 with State of Nevada as pricing fee schedule.

North Las Vegas Panels (Fiscal Year 2018 - 2020)

Police Department Panels	Identified Cost				New Hire Physical		Annual Group I (Over 40)		Annual Group II (Under 40)	
Physical Exam	\$	77.72	\$	77.72	\$	77.72	\$	77.72	\$	77.72
Physicians Report of Results (ARC)	\$	14.55	\$	14.55	\$	14.55	\$	14.55	\$	14.55
Full Vision Screening (Titmus)	\$	40.00	\$	40.00	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Vision Test (Snellen)	Incl. w/ Physical		\$	-	\$	-	\$	-	\$	-
Audionometry	\$	24.25	\$	24.25	\$	24.25	\$	24.25	\$	24.25
Spirometry	\$	36.86	\$	36.86	\$	36.86	\$	36.86	\$	36.86
Percent Body Fat (BMI Method) / Waist Circumference	\$	7.76	\$	7.76	\$	7.76	\$	7.76	\$	7.76
Chest X-Ray, Single View with Overread	\$	29.10	\$	29.10	\$	29.10	\$	29.10	\$	29.10
Coronary Risk Profile II (CBC, Chem Panel, Lipid & UA)	\$	35.89	\$	35.89	\$	35.89	\$	35.89	\$	35.89
ABO Group and RH	\$	15.00	\$	15.00	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Hepatitis C Antibody	\$	27.16	Not Applicable	\$	27.16	\$	27.16	\$	27.16	Not Applicable
Hepatitis Profile (A,B,C)	\$	77.60	\$	77.60	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Non DOT Urine Drug Screen	\$	32.98	\$	32.98	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Specimen Handling	Incl. w/ Physical		\$	-	\$	-	\$	-	\$	-
Treadmill Exercise Stress Test	\$	111.55	\$	111.55	\$	111.55	\$	111.55	Not Applicable	Not Applicable
TB Skin Test (PPD)	\$	4.85	\$	4.85	\$	4.85	\$	4.85	\$	4.85
Resting EKG	\$	38.80	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	\$	38.80
PANEL PRICES			\$	508.11	\$	369.69	\$	296.94		

Any additional tests/services requested by the Police Department will use MSA # 3148 with State of Nevada as pricing fee schedule.

Optional Employee Paid Items

Prostate Specific Antigen	\$	15.00
Ultrasound Screening	\$	40.00

Confirmation Charges on Hepatitis and HIV Screenings

Hep A – Hep A Igm	\$	36.86
Hep B Ag – Neutralization Assay	\$	175.00
Hep C – HCV Verification	\$	386.00
HIV 1/2 Differentation	\$	70.00

Police / Fire Miscellaneous Pricing

Hepatitis A Vaccines	\$	72.75
Series of Two	\$	145.50
Hepatitis B Vaccines	\$	58.20
Series of Three	\$	174.60
TwinRix Hep. A&B Vaccines	\$	100.88
Series of Three	\$	302.64

Fire Optional Pricing Items

Ambulance Attendant License	\$	15.00
Urine Nicotine Cotinine Testing	\$	14.99
DOT Physical Paperwork in conjunction w/	\$	30.00
DOT Physical independent of Annual	\$	75.00

Name of Vendor: ARC Health & Wellness

Optional Components of a Physical Exam	Cost
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Hepatitis Testing

Hepatitis Profile Screening	\$ 77.60
Hepatitis A	\$ 33.95
Hepatitis B surface Ag	\$ 20.37
Hepatitis B surface Ab	\$ 19.40
Hepatitis B core Ab	\$ 19.40
Hepatitis C Ab	\$ 27.16

HIV Testing

HIV 1 & 2 Screen (AIDS Screening)	\$ 43.65
HIV 1 & 2 - Western Blot "New Name" - HIV 1/2 Differentiation	\$ 70.00
HIV 11 Screen - NOT APPLICABLE PHASED OUT	N/A
Immunoblot Confirmation - NOT APPLICABLE PHASED OUT	N/A

**Western Blot test has been phased out*

Confirmation Charges on Hepatitis (if Positive)

Hep A - Hep A IgM	\$ 36.86
Hep B Ag - Neutralization Assay	\$ 175.00
Hep C - HCV RIBA - "New Name" - HCV VERIFICATION	\$ 386.00

**RIBA has been phased out*

Hepatitis Inoculations

Hepatitis A inoculations (per Vaccine)	\$ 72.75
Hepatitis B inoculations (per Vaccine)	\$ 58.20
TwinRix (Hep A and B) inoculations (per Vaccine)	\$ 100.88

Respirator Clearance Exams

Respiratory Fit Test - Qualitative	\$ 29.10
OSHA Respirator Questionnaire	\$ 19.40
Pulmonary Function Test	\$ 38.80
Respirator Clearance Letter	\$ 9.70

Department of Transportation/CDL Exams

DOT Examinations	\$ 45.00
DOT Paperwork	\$ 30.00

New CDL requirements / registry / time involvement is cost increase

Drug and Alcohol Testing

DOT Urine Drug Screen	\$ 37.83
Non DOT Urine Drug Screen	\$ 32.98
DOT Breath Alcohol Test	\$ 24.25
Non DOT Breath Alcohol Test	\$ 24.25
Breath Alcohol Confirmation (if positive)	\$ 14.55

Individual Test Pricing (Not part of Heart and Lung Physical)

Audiometry with interpretation (air conduction or pure tone test)	\$ 29.10
Chest X-Ray (Single View)	\$ 58.20
Chest X-Ray (Dual View) includes radiologist over-read	\$ 67.90
Coronary Risk II (CBC + Chem. Panel + HDL + LDL)	\$ 46.56
Resting EKG	\$ 61.11
Stress EKG (Graded Exercise Test)	\$ 155.20
TB Skin Test	\$ 25.00
Nicotine Test (Cotinine Only) with Quant Levels	\$ 14.99
Per-Cent Body Fat (BMI Method)/Waist Circumference	\$ 14.55
Pulmonary Function Test	\$ 48.50
Normal Vision screening (Snellen, Far, Near)	\$ 14.55
Advanced Vision Screening (Ishihara, Depth, Peripheral)	\$ 24.25
Venipuncture	\$ 11.64

Psychological Screening and Interpretation

	Southern NV	Northern NV
Psychological Evaluation/Consultation/Interview	\$ 225.00	\$ 225.00
Psychological Evaluation 1	\$ 225.00	\$ 225.00
Psychological Evaluation 2	\$ 250.00	\$ 250.00

Cardiology

	Southern NV	Northern NV
Office visit- consultation	\$ 300.00	\$ 300.00
Office visit -New patient comprehensive	\$ 228.00	\$ 228.00
Follow-up office visit	\$ 210.00	\$ 210.00
24 Hour Holter Monitor Tech and Professional	\$ 188.00	\$ 188.00
24 Hour Holter Monitor interpretation	\$ 60.00	\$ 60.00
ECG Monitor 24 hr w/Scan & Recording	\$ 58.00	\$ 58.00
Treadmill Stress Test	\$ 309.00	\$ 309.00
Thallium Single View w/supplies	\$ 1,381.00	\$ 1,381.00
Echocardiogram complete	\$ 558.00	\$ 558.00
Catheterize left heart	\$ 3,751.00	\$ 3,751.00
Left ventricular angiogram	\$ 466.00	\$ 466.00
Imaging Cardiac Cath	N/A	N/A
Inject for coronary X-Ray	N/A	N/A
Imaging Cardiac supervision & interpretation	N/A	N/A
Catheterize Left "and Right" Heart complete*	\$ 4,211.00	\$ 4,211.00

*Includes right heart

Audiologist

	Southern NV	Northern NV
Consultation (Southern Nevada/Northern Nevada)	\$ 125.00	\$ 125.00

CT Scan

	Southern NV	Northern NV
CT Calcium Scoring	\$ 75.00	N/A
CT Chest with Contrast	\$ 375.00	\$ 456.00
CT Chest w/o Contrast	\$ 275.00	\$ 265.00
Coronary CTA	\$ 525.00	\$486*
Echo w/Rest & CV Stress	See Cardiology	See Cardiology

*Not available until 9/2015

Physical Assessment screening (Physical Therapy)

	Southern NV	Northern NV
Return to work examination	\$ 80.00	\$ 75.00
Functional Capacity Evaluation (per hour)	\$ 140.00	\$ 210.00
Musculoskeletal Evaluation	\$ 90.00	\$ 75.00
Physical Capacity Evaluation	\$ 85.00	\$ 640.00

Specialist Billing Fee Per Patient Encounter

	Southern NV	Northern NV
To cover administrative, postage, and handling costs.	\$ 25.00	\$ 25.00

Additional Services in the event the State needs these tests/services

Additional Physician related services	
Digital Rectal Exam / Hernia Check (<i>Males</i>)	\$ 15.00
Skin Cancer Screening	\$ 7.50
Expanded Physical Dictation (<i>cost in addition to current Physical</i>)	\$ 10.00
Expanded Physical (<i>cost in addition to current Physical</i>)	\$ 22.28
Ambulance Attendance Certification (<i>cost in addition to current Physical</i>)	\$ 15.00
Ambulance Attendance Certification and Physical Examination Bundle	\$ 92.72
Blood Pressure Check	\$ 15.00
Caliper	\$ 8.74
Hand's on Physical / Range of Motion	\$ 14.55
Physical Screening Fact Sheet	\$ 15.00

Additional Lab work	
Hemoglobin A1C	\$ 33.95
Hepatitis ABC Antibody Screening (Bundle to screen for infection to A,B,C only)	\$ 70.60
Hepatitis Profile (Bundle to screen for infection to A,B,C and Immunity Levels to A & B)	\$ 77.60
Prostate Specific Antigen	\$ 24.25
NMR Blood	\$ 75.00
HAZMAT Exam Blood (As, Cd, Hg, Pb/ZPP)	\$ 150.00
Serum Lead & ZPP Testing	\$ 57.23
Rabies Test	\$ 37.00
Hemocult for Stool Occult Blood (Slide Instant)	\$ 10.00
Hemocult for Stool Occult Blood (Lab Charge)	\$ 62.00
Thyroxine (T4)	\$ 25.24
Cortisol Testing	\$ 24.00
TSA	\$ 7.50
24 Hour Random Urine (As, Cd, Hg Pb)	\$ 125.00
Pap Smear	\$ 110.00
Anabolic Steroid Testing	\$ 90.00

Vaccines	
Influenza Vaccine	Market
Measles, Mumps, Rubella Vaccination	Market
Polio Vaccine	Market
T-DAP Vaccine	Market
Tetanus & Diphtheria Vaccine	Market
Varicella Vaccination	Market

Miscellaneous Testing	
3 View Chest X-Ray with interpretation	\$ 48.50
2 View Chest X-Ray with B-Reader (<i>Las Vegas only</i>)	\$ 125.00
Cardio Pulmonary Excercise (CPX) - VO2 Max Stress Testing	\$ 350.00
PET Scan (<i>Las Vegas only</i>)	\$ 2,675.00

Dedicated Mobile Special Run	
Special On-site using ARC Mobile Medical Unit (per employee)	\$ 125.00
<i>In the event, ARC is asked to provide a Special Mobile Run, outside of the normal monthly runs to rural locations then rural fee (physical conducted on site) should increase from \$90.00 to \$125.00, for example - travel to the Pioche Conservation Camp. Please note that minimum physical quantities apply.</i>	

Name of Vendor: ARC Health & Wellness

Termination Testing Components	Cost
Testing within 30 days of termination	
TB Skin Test	\$ 14.55
Hepatitis Profile Screening**	\$ 77.60
HIV 1 & 2 Screen**	\$ 43.65
Total 30 Day Termination Testing	\$ 135.80
Testing 90 Days of Termination	
TB Skin Test	\$ 14.55
Total 90 Day Termination Test	\$ 14.55
Testing 180 Days of Termination	
Hepatitis Profile Screening**	\$ 77.60
HIV 1 & 2 Screen**	\$ 43.65
Total 180 Days of Termination Testing	\$ 121.25
Testing at 365 Days of Termination	
Hepatitis Profile Screening**	\$ 77.60
HIV 1 & 2 Screen**	\$ 43.65
Total 365 Days Termination Testing	\$ 121.25
Total Cost of all Termination Testing	\$ 392.85

***Confirmation Testing Charges apply if State would like this confirmation option*