



AGREEMENT

This agreement is entered into on July 1, 2024, by and among St. Catherine Hospital, Inc., St. Mary Medical Center, Inc. and Munster Medical Research Foundation, Inc. d/b/a The Community Hospital (collectively referred as "Powers Health") and Porter County Health Department ("PCHD") so as to memorialize and document certain agreements and understandings which have been reached between the parties to focus on reducing instances of undiagnosed diabetes in Porter County. The agreement is as follows:

1. That both parties are entering into this agreement to promote and protect the health and wellbeing of the citizens of Porter County by increasing community detection and education of prediabetes. Identifying and educating those that are prediabetic and/or diabetic early can help prevent many serious, often irreversible complications.
2. PCHD agrees to reimburse Powers Health for the purchase an A1C analyzer, carrying case and all needed supplies for performing the A1C test within PCHD's community outreach. Easy transportation of the A1C blood analyzer will make reaching difficult to reach populations feasible.
3. PCHD will reimburse Powers Health for the utilization of an outreach nurse at an hourly rate of \$60.00 and mileage at the current county rate at the time of reimbursement submission. Such payment and reimbursement will only be paid by PCHD to Powers Health when a written request has been made by PCHD to Powers Health for utilization of Powers Health's outreach nurse.
4. Powers Health agrees to screen patients using the diabetes questionnaire and weight or BMI, if available. Those considered high risk will be offered the A1C test. Results will be reviewed with participants along with recommendations for their next steps, which will vary depending on the result.
5. Powers Health shall submit a monthly invoice to PCHD within ten (10) days of the end of each month during the term, along with metrics required for monitoring and evaluation of this program, including the number of tests performed. PCHD shall remit payment within thirty (30) days of invoice receipt.
6. That the initial term of this agreement shall continue for one (1) year commencing on July 1, 2024 and terminating at Midnight on June 30, 2025.
7. This agreement may be terminated upon notification by one party to the other party with thirty (30) days' written notice, which shall specify the effective date of termination.

8. This Agreement may be changed or modified only in writing and must be signed by both parties.

Porter County Health Department
Signed by:

By: Alan Kumar
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Title: chief operating officer

Date: 7/9/2024 | 2:43 PM CDT

Porter County Health Department

By: Carrie Mosher

Title: Administrator

Date: 7/02/2024