2026-117

INTEGRIS HEALTHCARE OF OKLAHOMA, LLC d/b/a INTEGRIS HEALTH ENID HOSPITAL
AND
GRANT COUNTY HEALTH DEPARTMENT
CONTRACT AND MEMORANDUM OF AGREEMENT

This agreement shall be entered into between the **GRANT COUNTY HEALTH DEPARTMENT**, hereinafter referred to as **GRCHD**, by virtue of the authority vested in by Title 63, O.S. 1981, section 1-206 (b) (3) and **INTEGRIS HEALTHCARE OF OKLAHOMA, LLC d/b/a INTEGRIS HEALTH ENID HOSPITAL**, hereinafter referred to as **CENTER.**

CONTRACT PERIOD: The provisions of this contract are to become effective the **1st day of July 2026** and terminate on the **30th day of June 2027.**

GENERAL PURPOSE OF CONTRACT: The purpose of this contract is to provide radiology services to patients referred by **GRCHD**.

Specific purposes of this contract are outlined in Section I below:

The maximum total of this contract is $14,400.00.

SECTION I. CHEST X-RAYS:

1. Take and process two (2) chest x-rays (PA, Lateral and Lordotic) on each patient referred to facility **GRCHD**, unless indicated otherwise on patient referral.
2. A disc to be picked up by **GRCHD** and mailed to General Communicable Disease Division, Oklahoma State Department of Health (OSDH).
3. After interpretation, OSDH physician may refer to **CENTER** for other x-ray views.

In consideration of this portion of the contract, **GRCHD** agrees to pay a fee for chest x-ray services at the rate of $110.00 per x-ray exam. The maximum amount to be reimbursed to **CENTER** by **GRCHD** for chest x-rays during this period of contract shall not exceed $14,400.00.

Payment will not be made for any x-ray of not good (readable) quality which has been referred to **the CENTER** for re-take.

Payment shall be made upon receipt of itemized invoices each month, indicating the date service rendered, patient name, type of service and total amount. Invoices must be filed within thirty (30) days of delivery of services.

The **CENTER** hereby gives written affirmation to the **GRCHD** that it has posted copies of its affirmative action policy statement and the Civil Rights Act in a prominent place for employees review and that it has an Affirmative Action Plan. Failure to comply with these affirmative action requirements, to provide documents as specified above or to falsely affirm compliance with Title VII of the 1964 Civil Rights Act shall result in termination of this contract.

AMENDMENT: This contract may be modified, changed, or amended only by an instrument in writing, signed and dated by the parties and appended hereto as an identifiable amendment hereof.

CANCELLATION CLAUSE: This contract is subject to termination upon thirty (30) days advance written notice by either party. Written notice must be forwarded to one of the following applicable addresses by certified mail:

Grant County Health Department

103 s 2nd St.
Medford, Oklahoma 73759

Baptist Healthcare of Oklahoma, LLC, d/b/a
INTEGRIS Health Enid Hospital
600 South Monroe
Enid, Oklahoma 73701

With a copy to:
contractnotices@integrishealth.org

AUDIT CLAUSE: In accepting this contract with **GRCHD,** the **CENTER** agrees that financial records, documents, accounting procedures, or any other items of service relevant to the agreement will be maintained and available for five (5) years and are subject to examination by **GRCHD** representatives and the State Auditor and Inspector, or any other individual or entity authorized by law to review such records. This contract shall be governed by the laws of Oklahoma.

Incorporated herein in its entirety, and made a part of this contract, is the Business Associate Agreement signed between **GRCHD** and **CENTER** (attached).

Signed by:
Keaton Francis
0453B61B100D40E...

8/25/2026

Keaton Francis, Chief Hospital Executive
Baptist Healthcare of Oklahoma, LLC,
d/b/a INTEGRIS Health Enid Hospital

DATE

Signed by:
Maggie Jackson
C7CAD33183C546E...

8/25/2026

Maggie Jackson, Regional Administrative Director
Grant County Health Department

DATE

APPROVED:

GRANT COUNTY COMMISSIONER

GRANT COUNTY COMMISSIONER

GRANT COUNTY COMMISSIONER

GRANT COUNTY COMMISSIONER

Clerk