

Contract Number	
SAP Number	

Department of Behavioral Health

Department Contract Representative	Lisa Rivas-Ordaz	
Telephone Number	(909) 383-3940	
Contractor	County of Orange – Health Care Agency	
Contractor Representative	Alice Kim	
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Telephone Number	(714) 796-8285	
Contract Term	Upon Execution through June 30,	
	2029	
Original Contract Amount	\$199,999	
Amendment Amount	N/A	
Total Contract Amount	\$199,999	
Cost Center		
Grant Number (if applicable)		

Briefly describe the general nature of the contract:

Revenue Letter of Agreement (LOA) between County of Orange, through its Health Care Agency, and San Bernardino County to ensure that Specialty Mental Health Servies (SMHS) are provided for foster children when placed out of County. The LOA establishes the responsibility, process, and reimbursement for provision of SMHS for any County of Jurisdiction (COJ) foster child who is placed outside of the COJ and in a Community Treatment Facility, Group Home and/or Short Term Residential Treatment Program located in San Bernardino County.

FOR COUNTY USE ONLY		
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
>	▶	▶
Dawn Martin, Deputy County Counsel	Michael Shin, Contracts Manager	Georgina Yoshioka, Director
Date	Date	Date