



**Contract Number**  
20-283 A-1

**SAP Number**

## Arrowhead Regional Medical Center

|                                           |                                             |
|-------------------------------------------|---------------------------------------------|
| <b>Department Contract Representative</b> | <u>William L. Gilbert, Director</u>         |
| <b>Telephone Number</b>                   | <u>(909) 580-6150</u>                       |
| <br><b>Contractor</b>                     | <br><u>Department of Health Care</u>        |
|                                           | <u>Services</u>                             |
| <b>Contractor Representative</b>          |                                             |
| <b>Telephone Number</b>                   | <u>(669) 224-6513</u>                       |
| <b>Contract Term</b>                      | <u>July 1, 2020 continuing indefinitely</u> |
| <b>Original Contract Amount</b>           | <u></u>                                     |
| <b>Amendment Amount</b>                   | <u></u>                                     |
| <b>Total Contract Amount</b>              | <u></u>                                     |
| <b>Cost Center</b>                        | <u></u>                                     |

**Briefly describe the general nature of the contract:** The Provider Participation Agreement between the Department of Health Care Services and San Bernardino County allows the County to voluntarily participate in the Medi-Cal County Inmate Program. Amendment No. 1 adds an addendum that requires the County to comply with the American with Disabilities Act and to ensure that qualifying inmates with speech, hearing and/or vision disabilities receive material information in the formats that assist them in making informed choices.

**FOR COUNTY USE ONLY**

Approved as to Legal Form

  
Charles Phan, Deputy County Counsel

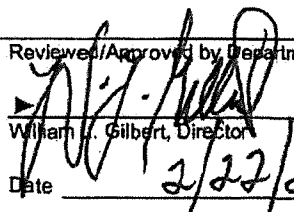
Date 2/22/2022

Reviewed for Contract Compliance



Date \_\_\_\_\_

Reviewed/Approved by Department

  
William L. Gilbert, Director

Date 2/22/22

**COUNTY-BASED MEDICAL ADMINISTRATIVE ACTIVITIES  
ADDENDUM TO  
PARTICIPATION AGREEMENT**

County: San Bernardino

20-MCIPSANBERNARDINO-36

The Department of Health Care Services (DHCS) and San Bernardino County agree that effective January 1, 2022; the addendum is incorporated into and hereby amends the Participation Agreement 20-MCIPSANBERNARDINO-36:

**ARTICLE XVI – ALTERNATIVE FORMATTING**

- A. San Bernardino County assures the state that it complies with the ADA, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA.
- B. San Bernardino County will ensure that deliverables developed and produced pursuant to this Agreement comply with federal and state laws, regulations or requirements regarding accessibility and effective communication, including the Americans with Disabilities Act (42 U.S.C. § 12101, et. seq.), which prohibits discrimination on the basis of disability, and section 508 of the Rehabilitation Act of 1973 as amended (29 U.S.C. § 794 (d)). Specifically, electronic and printed documents intended as public communications must be produced to ensure the visual-impaired, hearing-impaired, and other special needs audiences are provided material information in the formats needed to provide the most assistance in making informed choices. These formats include but are not limited to braille, large font, and audio.

Except as amended herein, all other terms and conditions of the PA 20-MCIPSANBERNARDINO-36 remain in full force and effect.



Contract's Authorized Person's Signature

Curt Hagman

Print Name

Chairman, Board of Supervisors of San Bernardino County  
on behalf of Arrowhead Regional Medical Center

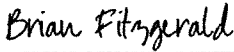
Title

385 N. Arrowhead Ave., San Bernardino, CA 92415

Address

Date

DocuSigned by:



California Department of Health Care Services  
Authorized Contact Person's Signature

Brian Fitzgerald

Print Name

Chief, Local Governmental Financing Division

Title

Department of Health Care Services

Name of Department

1501 Capitol Avenue, MS 2628, Sacramento, CA 95899-7413

Address

March 18, 2022

Date