THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY

SAN BERNARDINO COUNTY

Contract Number
20-283 A-1

SAP Number

Arrowhead Regional Medical Center

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

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	Reviewed for Contract Compliance	Reviewed/Approved by Department
►	►	►
Charles Phan, Deputy County Counsel		William L. Gilbert, Director
Date 2/22/2022	Date	Date 2/22/22

COUNTY-BASED MEDI-CAL 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:
Brian Fitzgerald
FBFD974ADF5B849F...
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