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



Contract Number
SAP Number

## **Department of Behavioral Health**

<b>Department Contract Representative</b>	Shane Hibbard-Miller	
Telephone Number	(909) 386-8264	
Contractor	Kaiser Foundation Health Plan, Inc.	
Contractor Representative	Celia Williams	
Telephone Number	(619) 597-8343	
Contract Term	October 21, 2025 through October	
	20, 2028	
Original Contract Amount	N/A	
Amendment Amount	N/A	
<b>Total Contract Amount</b>	N/A	
Cost Center	N/A	
Grant Number (if applicable)	N/A	

## Briefly describe the general nature of the contract:

The Memorandum of Understanding (MOU) with Kaiser Foundation Health Plan, Inc. (Kaiser), a Managed Care Plan (MCP), is intended to clarify roles and responsibilities between the MCP and the Department of Behavioral Health (DBH) as San Bernardino County's Mental Health Plan (MHP), support local engagement, facilitate care coordination and the exchange of information necessary to improve care coordination, and improve referral processes between the parties for the period of October 21, 2025 through October 20, 2028, with an option to extend for two (2) additional (1) one year periods.

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