



Contract Number _____

SAP Number _____

Arrowhead Regional Medical Center

| | |
|---|------------------------------|
| Department Contract Representative | William L. Gilbert |
| Telephone Number | (909) 580-6150 |
| | |
| Contractor | WellSky Corporation |
| Contractor Representative | Chris Sojka |
| Telephone Number | (913) 378-8610 |
| Contract Term | July 1, 2024 – June 30, 2029 |
| Original Contract Amount | \$500,000 |
| Amendment Amount | |
| Total Contract Amount | \$500,000 |
| Cost Center | |

Briefly describe the general nature of the contract: Agreement WellSky Corporation for a patient placement referral system, in the not-to-exceed amount of \$500,000, for the contract period of July 1, 2024 through June 30, 2029.

FOR COUNTY USE ONLY

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| <p>Approved as to Legal Form</p> <p>► _____</p> <p>Bonnie Uphold, Supervising Deputy County Counsel</p> <p>Date _____</p> | <p>Reviewed for Contract Compliance</p> <p>► _____</p> <p>Date _____</p> | <p>Reviewed/Approved by Department</p> <p>► _____</p> <p>William L. Gilbert, Director</p> <p>Date _____</p> |
|---|--|---|