



Contract Number

SAP Number

Department of Behavioral Health

Department Contract Representative	<u>Shane Hibbard-Miller</u>
Telephone Number	<u>(909) 386-8264</u>
Contractor	<u>California Mental Health Services Authority</u>
Contractor Representative	<u>Dr. Amie Miller, Psy.D., MFT</u>
Telephone Number	<u>(831) 869-7020</u>
Contract Term	<u>July 1, 2025 through June 30, 2026</u>
Original Contract Amount	<u>\$2,401,392</u>
Amendment Amount	<u>N/A</u>
Total Contract Amount	<u>\$2,401,392</u>
Cost Center	<u>9203131000</u>
Grant Number (if applicable)	<u></u>

Briefly describe the general nature of the contract:

Participation Agreement with the California Mental Health Services Authority (Agreement No. 12730-SBR-PICR-25_26), for Psychiatric Inpatient Concurrent Review in the amount not to exceed \$2,401,392, for the contract period of July 1, 2025 through June 30, 2026.

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
▶ Dawn Martin, County Counsel	▶ Michael Shin, Administrative Manager	▶ Georgina Yoshioka, Director
Date _____	Date _____	Date _____