



**Contract Number**

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**SAP Number**  
Non-financial

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## Department of Public Health

<b>Department Contract Representative</b>	<u>Tarah Cendejas</u>
<b>Telephone Number</b>	<u>(909) 832-0807</u>
<b>Contractor</b>	<u>Kaiser Foundation Health Plan, Inc.</u>
<b>Contractor Representative</b>	<u>Celia Williams, Executive Director, Medicaid Care Delivery and Operations</u>
<b>Telephone Number</b>	<u>(818) 464-4000</u>
<b>Contract Term</b>	<u>February 10, 2026 through February 9, 2031</u>
<b>Original Contract Amount</b>	<u>\$0</u>
<b>Amendment Amount</b>	<u>\$0</u>
<b>Total Contract Amount</b>	<u>\$0</u>
<b>Cost Center</b>	<u>N/A</u>
<b>Grant Number (if applicable)</b>	<u>N/A</u>

**Briefly describe the general nature of the contract:**

Non-financial Memorandum of Understanding with Kaiser Foundation Health Plan, Inc. for Medi-Cal services, effective February 10, 2026 through February 9, 2031.

**FOR COUNTY USE ONLY**

Approved as to Legal Form

▶ \_\_\_\_\_  
Adam Ebright, Deputy County Counsel

Date \_\_\_\_\_

Reviewed for Contract Compliance

▶ \_\_\_\_\_

Date \_\_\_\_\_

Reviewed/Approved by Department

▶ \_\_\_\_\_  
Janki Patel, Acting Director

Date \_\_\_\_\_