

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

**Contract Number**

19-367 A-1

**SAP Number**

N/A

## Arrowhead Regional Medical Center

|   |                                    |
|---|------------------------------------|
| <b>Department Contract Representative</b> | William L. Gilbert                 |
| <b>Telephone Number</b>                   | (909) 580-6150                     |
| <b>Contractor</b>                         | Network Providers, LLC             |
| <b>Contractor Representative</b>          | Maria Callan                       |
| <b>Telephone Number</b>                   | 818-676-6355                       |
| <b>Contract Term</b>                      | July 1, 2019 through June 30, 2024 |
| <b>Original Contract Amount</b>           | Revenue Only                       |
| <b>Amendment Amount</b>                   |                                    |
| <b>Total Contract Amount</b>              | Revenue Only                       |
| <b>Cost Center</b>                        | 9185304200                         |

**Briefly describe the general nature of the contract:** Amendment to correct the term of the Revenue Agreement with Network Providers, LLC, for the provision of medical services to California Department of Corrections and Rehabilitation inmates for the period of July 1, 2019 through June 30, 2024 per the Health Net Federal Services.

**FOR COUNTY USE ONLY**

Approved as to Legal Form

Charles Phan, Deputy County Counsel

Date \_\_\_\_\_

Reviewed for Contract Compliance

\_\_\_\_\_

Date \_\_\_\_\_

Reviewed/Approved by Department

William L. Gilbert, Director

Date \_\_\_\_\_