

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

Contract Number

22-997 A-1

SAP Number

San Bernardino County Fire Protection District

Department Contract Representative	Dan Munsey
Telephone Number	387-5779
Contractor	California Department of Health Care Services
Contractor Representative	Vivian Beeck
Telephone Number	
Contract Term	January 1, 2021 through June 30, 2024
Original Contract Amount	
Amendment Amount	
Total Contract Amount	
Cost Center	

Briefly describe the general nature of the contract:

This is to approve Amendment No. 1 to Agreement No. 22-997 with the California Department of Health Care Services, updating contribution increments as reflected in Exhibit 1, allowing transfer of funds required to obtain federal matching funds for eligible costs of providing emergency medical ground transport for Medi-Cal managed care patients enrolled with Molina Healthcare of California Partner Plan, Inc. and the Inland Empire Health Plan during the state-established claim period of January 1, 2021, through December 31, 2021, with a contract term effective January 1, 2021, through June 30, 2024.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Scott Runyan, Principal Assistant County Counsel

Date _____

Reviewed for Contract Compliance

►

Date _____

Reviewed/Approved by Department

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Date _____