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

**Contract Number** 



**SAP Number** 

## San Bernardino County Fire Protection District

Department Contract Representative Telephone Number	Dan Munsey 387-5779
Contractor	California Department of Health Care Services
Contractor Representative	Vivian Beeck
Telephone Number	916-345-8271
Contract Term	
Original Contract Amount	
Amendment Amount	
Total Contract Amount	
Cost Center	
Grant Number (if applicable)	

## Briefly describe the general nature of the contract:

This is to approve Intergovernmental Agreement Regarding Transfer of Public Funds (State Contract No. IGT-24-0090) with the California Department of Health Care Services, allowing San Bernardino County Fire Protection District to transfer funds to the California Department of Health Care Services to obtain federal matching funds for the 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 retroactive state-established claim period of January 1, 2024, through December 31, 2024, with a contract term effective January 1, 2024, through June 30, 2027.

FOR COUNTY USE ONLY			
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department	
•	►	•	
Rick Luczak, Deputy County Counsel			
Date	Date	Date	