



Contract Number _____

SAP Number _____

Arrowhead Regional Medical Center

Department Contract Representative	<u>William L. Gilbert</u>
Telephone Number	<u>(909) 580-6150</u>
 Contractor	 <u>Loma Linda University Health (LLUH)</u>
Contractor Representative	<u>Marilyn Houghton</u>
Telephone Number	<u>(909) 558-6131</u>
Contract Term	<u>July 1, 2020, through June 30, 2025</u>
Original Contract Amount	<u>Estimated net cost of \$4,978,390</u>
Amendment Amount	<u>N/A</u>
Total Contract Amount	<u>Estimated net cost of \$4,978,390</u>
Cost Center	<u>8242</u>

Briefly describe the general nature of the contract: A reciprocal Resident Affiliation Agreement with Loma Linda University Health, for resident physicians to obtain clinical experience at the respective facilities of Arrowhead Regional Medical Center and Loma Linda University Health, for the period of July 1, 2020, through June 30, 2025, at an estimated net cost of \$4,978,390.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Michael Markel, Principal Assistant County Counsel

Date _____

Reviewed for Contract Compliance

►

Date _____

Reviewed/Approved by Department

►
William L. Gilbert, Director

Date _____