



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>Multiplan, Inc.</u>
Contractor Representative	<u>Cindy Barry</u>
Telephone Number	<u>949-639-3884</u>
Contract Term	<u>November 16, 2021 - September 30, 2026</u>
Original Contract Amount	<u></u>
Amendment Amount	<u></u>
Total Contract Amount	<u></u>
Cost Center	<u>8530</u>

Briefly describe the general nature of the contract: Reimbursement Agreement with Multiplan, Inc. to establish out-of-network reimbursement rates for certain out-of-network health plans for the period of November 16, 2021 through September 30, 2026.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Charles Phan, County Counsel

Date _____

Reviewed for Contract Compliance

►

Date _____

Reviewed/Approved by Department

►
William L. Gilbert, Director

Date _____