

Contract #: 164-M1310  
Index Code: 418000

# CONTRACT ROUTING SHEET

Date Prepared: 4/25/2014

Need Date: 5/22/14

**PROCESSING DEPARTMENT:**

Department: HHS  
Dept. Contact: Sharon Keoppel  
Phone #: 4811  
Department  
Head Signature: *[Signature]*  
Don Ashton, Director

**CONTRACTOR:**

Name: Anthem Blue Cross of California  
Address: 21555 Oxnard Street  
MS:CAAC08-8D  
Woodland Hills, CA 91367

**CONTRACTING DEPARTMENT:** Health and Human Services Agency

Service Requested: Participating Physician Agmt for Medi-Cal Beneficiaries  
Contract Term: Upon execution- until termed. Contract/Grant Value: Fee-for-Service  
Compliance with Human Resources requirements? N/A XX Yes No:  
Compliance verified by:

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved: X Disapproved: Date: 5/28/14 By: *[Signature]*  
Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL  
214 MAY 14 AM 10:46

**PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!**

**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

Approved: ✓ Disapproved: Date: 5/20/14 By: *[Signature]*  
Approved: Disapproved: Date: By:

**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

**NOTE:** All contracts that involve the acquisition of software or computer related items must be first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.

Departments:  
Approved: Disapproved: Date: By:  
Approved: Disapproved: Date: By:

*Battica Charles Heath* 6/4/14 *[Signature]* 6/9/14  
PM Review/Date Contracts Supe Review/Date  
*Charles Heath*

*[Signature]* 6/16/14  
14 MAY 29 PM 12:00  
RECEIVED DEPT. OF HUMAN RESOURCES  
Asst. Director of Admin & Finance Review/Date