



## Legislation Details

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**File #:** 19-219      **Version:** 1      **Name:**

**Type:** Resolution      **Status:** Agenda Ready

**File created:** 3/6/2019      **In control:** BOARD OF SUPERVISORS

**On agenda:** 3/19/2019      **Final action:**

**Title:** Adopt Resolution Approving the Medi-Cal Administrative Activities (MAA) Provider Participation Agreement #19-96011 and Certification Statement between the County of Lake and the California Department of Health Care Services in the Amount of \$300,000 for Fiscal Years 2019/2020 through 2021/2022

**Sponsors:** Health Services

**Indexes:**

**Code sections:**

**Attachments:** 1. MAA Provider Participation Agreement Resolution 19.20-21.22, 2. Standard Agreement 213, 3. California Civil Rights Laws Certification, 4. Certification CCC 042017, 5. Signature Request Letter, 6. Exhibit A, 7. Exhibit B, 8. Exhibit D(F), 9. Exhibit E, 10. Exhibit F, 11. Exhibit G

Date	Ver.	Action By	Action	Result
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