



**PUBLIC PROVIDER GROUND EMERGENCY MEDICAL TRANSPORTATION (PP-GEMT) PROGRAM
MANAGED CARE AND FEE FOR SERVICE — INVOICE**

Entity Information:
Entity Name: City Of Orange
NPI: 1922004555

Due Date:	1/16/2026
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Payment Details:		
Year:	2026	Contribution #: 1
Total Amount Due:	\$345,091.52	

Program/Payee Information:
Vendor Name: California Department of Health Care Services
PP-GEMT Program Email: AB1705@dhcs.ca.gov

Banking Information:	
Bank Name:	US Bank
<i>Please await Wire Request Memo for payment instructions</i>	
Payment Methods Accepted:	
ACH or Wire Transfer	

Payment Instructions:
Attention: Please review, sign, and submit the Intergovernmental Transfer (IGT) Certification form by **January 2, 2026**, to AB1705@dhcs.ca.gov. IGT Certification forms are required to be submitted prior to each collection due date. Once the IGT Certification form is received, DHCS will send a Wire Request Memo providing payment details and instructions. ***Please do not send your IGT payment until you have received the Wire Request Memo as payment details are subject to change.***

IGT Non-Federal Share (NFS) Breakdown By DHCS Delivery System			
<u>Managed Care (MC)</u>			
	MC NFS #1	\$	313,695.91
<u>Fee For Service (FFS)</u>			
	FFS NFS #1	\$	31,395.61
	Total* IGT Transfer Amount:		\$ 345,091.52

**Any differences are due to rounding.*

CY 2026 Invoicing Schedule		
CY 2026 Invoice #1	Invoice Packets Sent	12/2/2025
	IGT Certifications Due	1/2/2026
	Payment Due	1/16/2026
CY 2026 Invoice #2	Invoice Packets Sent	3/3/2026
	IGT Certifications Due	4/3/2026
	Payment Due	4/17/2026
CY 2024 FFS Recon #1	Date of Service	Jan - Jun 2024
CY 2025 MC Recon #1	Date of Service	TBD
CY 2026 Invoice #3	Invoice Packets Sent	6/2/2026
	IGT Certifications Due	7/3/2026
	Payment Due	7/17/2026
CY 2026 Invoice #4	Invoice Packets Sent	9/1/2026
	IGT Certifications Due	10/2/2026
	Payment Due	10/16/2026
CY 2024 FFS Recon #2	Date of Service	Jul - Dec 2024
CY 2025 MC Recon #2	Date of Service	TBD