

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

FEBRUARY 2010, Page 1 of 31

<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation</u> <u>Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
PHP									
<u>MARIN COUNTY (21)</u>									
KP CAL LLC (NorCal) (03-75341), A12 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Cathy Lurty (818) 557-7955	#81	10/01/09	03/31/10	FAMILY	\$115.40	734/ 668	\$136,932	Marin	Charles S. Koch Nathan Nau (916) 341-7031
				AGED	\$457.37				
				BLIND/DISABLED	\$457.37				
				ADULT	\$115.40				
				REFUGEES FAMILY	\$115.40				
				BCCTP	\$912.48				
				AIDS	\$1,574.79				
				BCCTP	\$912.48				
<u>MARIN COUNTY (21)</u>									
KP CAL LLC (NorCal) (03-75341), A12 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Cathy Lurty (818) 557-7955	#81	10/01/09	03/31/10	<u>MEDICARE PART D</u>		734/ 148	\$15,115	Marin	Charles S. Koch Nathan Nau (916) 341-7031
				FAMILY	\$115.40				
				AGED	\$104.41				
				BLIND/DISABLED	\$101.27				
				ADULT	\$115.40				
				REFUGEES FAMILY	\$115.40				
				BCCTP	\$912.48				
				AIDS	\$303.53				
MARIN COUNTY				SUBTOTAL		1,468/ 816	\$152,047		
<u>SONOMA COUNTY (49)</u>									
KP CAL LLC (NorCal) (03-75341), A11 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Cathy Lurty (818) 557-7955	#87	01/01/09	12/31/09	FAMILY	\$100.94	1,424/ 0	\$0	Sonoma	Charles S. Koch Nathan Nau (916) 341-7031
				AGED	\$354.08				
				DISABLED	\$456.70				
				ADULT	\$450.31				
				REFUGEES FAMILY	\$100.94				
				BCCTP	\$797.15				
				AIDS	\$1,598.44				
				<u>SONOMA COUNTY (49)</u>					
KP CAL LLC (NorCal) (03-75341), A11 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Cathy Lurty (818) 557-7955 (Note: HCP #87, Rolled over to COHS (Partnership of CA HCP #513) became effective in Sonoma Co. 49) Plan Deactivated 10/01/09)	#87	01/01/09	12/31/09	<u>MEDICARE PART D</u>		1,424/ 0	\$0	Sonoma	Charles S. Koch Nathan Nau (916) 341-7031
				FAMILY	\$100.94				
				AGED	\$100.36				
				DISABLED	\$92.15				
				ADULT	\$450.31				
				REFUGEES FAMILY	\$100.94				
				BCCTP	\$797.15				
				AIDS	\$303.53				
SONOMA COUNTY				SUBTOTAL		2,848/ 0	\$0		
TOTAL PHP						4,316/ 816	\$152,047		

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
PHP (DENTAL)										
<u>LOS ANGELES COUNTY (19)</u>										
Access Dental Plan, Inc. (05-45001), A6 8890 Cal Center Drive Sacramento, CA 95826	#409	01/01/09	06/30/11	Public Assistance	unlimited/ 118,854	\$1,249,156	Los Angeles	Mike Betker,CEO	Lenatte Blouin (916) 464-0379	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						\$10.51
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Corina Lena (916) 563-6044						
American Health Guard Corp. (05-45698), A4 30 East Santa Clara, Suite D Arcadia, CA 91006	#410	01/01/09	06/30/11	Public Assistance	unlimited/ 14,752	\$155,044	Los Angeles	David Kutner	Brian Nanoo (916) 464-3784	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Rod Zalunardo (626) 821-5500						
Safeguard Health Plans Inc. (05-45701), A4 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#406	01/01/09	06/30/11	Public Assistance	unlimited/ 20,751	\$218,093	Los Angeles	Paula Lopez	Lenatte Blouin (916) 464-0379	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Paula Lopez, Director State Gov Programs						

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
LOS ANGELES COUNTY (19)										
Health Net Community Solutions, Inc. (05-45703), A5 11971 Foundation Place, Bldg D Rancho Cordova, CA 95670-4502	#405	01/01/09	06/30/11	Public Assistance	unlimited/ 35,531	\$373,431	Los Angeles	David Meadows	Brian Nanoo (916) 464-3784	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: David Meadows 916-935-1435						
Care 1st Health Plan (05-45702), A5 601 Potrero Grande Drive Monterey Park, CA 91755	#403	01/01/09	06/30/11	Public Assistance	unlimited/ 17,276	\$181,571	Los Angeles	Dr. Reginal Moore	Lenatte Blouin (916) 464-0379	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Dr. Jorge Weingarten 626-299-5275						
Western Dental Services (05-45704), A5 530 South Main Street, Sixth Floor Orange, CA 92863	#413	01/01/09	06/30/11	Public Assistance	unlimited/ 55,397	\$582,222	Los Angeles	Stan Andrakowicz Vice President	Brian Nanoo (916) 464-3784	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						\$10.51
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Kelley Duniven (714) 571-3488						
Liberty Dental Plan of CA, Inc. (05-45700), A5 3200 El Camino Real, Ste. 290 Irvine, CA 92602	#416	01/01/09	06/30/11	Public Assistance	Unlimited/ 7,570	\$79,561	Los Angeles	Amir Neshat, DDS President/CEO	Lenatte Blouin (916) 464-0379	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Amir Neshat, DDS, 949-223-8929						
Community Dental Services, Inc. #417 (05-45699), A4 2 Mac Athur Place, Suite 700 Santa Ana, CA 92707		01/01/09	06/30/11	Public Assistance	Unlimited/ 4,194	\$44,079	Los Angeles	Susan Klarner Senior Executive/VP	Brian Nanoo (916) 464-3784	
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				Medically Needy						
				FAMILY						\$10.51
				AGED						\$10.51
				BLIND/DISABLED						\$10.51
				MI CHILD						\$10.51
				MI ADULT						\$10.51
				% OF POV						\$10.51
				BCCTP						\$10.51
				CONTACT: Carolyn Miller, 714-708-5360						
LOS ANGELES				SUBTOTAL	unlimited/ 274,325	2,883,157				

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>			
<u>RIVERSIDE COUNTY (33)</u>												
Western Dental Services, Inc. (05-45704), A5 530 South Main Street, Sixth Floor Orange, CA 92863	#414	01/01/09	06/30/11	Public Assistance								
				FAMILY	\$10.51							
				AGED	\$10.51							
				BLIND/DISABLED	\$10.51							
				Medically Needy								
				FAMILY	\$10.51							
				AGED	\$10.51							
				BLIND/DISABLED	\$10.51							
				MI CHILD	\$10.51							
				MI ADULT	\$10.51							
				% OF POV	\$10.51							
				BCCTP	\$10.51							
				CONTACT: Kelley Duniven (714) 571-3488								
				Safeguard Health Plans, Inc. (05-45701), A4 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#407	01/01/09	06/30/11	Public Assistance				
FAMILY	\$10.51											
AGED	\$10.51											
BLIND/DISABLED	\$10.51											
Medically Needy												
FAMILY	\$10.51											
AGED	\$10.51											
BLIND/DISABLED	\$10.51											
MI CHILD	\$10.51											
MI ADULT	\$10.51											
% OF POV	\$10.51											
BCCTP	\$10.51											
CONTACT: Paula Lopez, Director State Gov Programs (949) 425-4177												
RIVERSIDE COUNTY								SUBTOTAL	unlimited/ 211	\$2,218		

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
<u>SAN BERNARDINO COUNTY (36)</u>										
Western Dental Services, Inc. (05-45704), A5 530 South Main Street, Sixth Floor Orange, CA 92863	#415	01/01/09	06/30/11	Public Assistance		unlimited/ 271	\$2,848	San Bernardino	Stan Andrakowicz Vice President	Brian Nanoo (916) 464-3784
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				Medically Needy						
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				MI CHILD	\$10.51					
				MI ADULT	\$10.51					
				% OF POV	\$10.51					
				BCCTP	\$10.51					
				CONTACT: Kelley Duniven (714) 571-3488						
Care 1st Health Plan (05-45702), A5 601 Potrero Grande Drive Monterey Park, CA 91755	#404	01/01/09	06/30/11	Public Assistance		unlimited/ 104	\$1,093	San Bernardino	Dr. Reginal Moore	Lenatte Blouin (916) 464-0379
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				Medically Needy						
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				MI CHILD	\$10.51					
				MI ADULT	\$10.51					
				% OF POV	\$10.51					
				BCCTP	\$10.51					
				CONTACT: Dr. Jorge Weingarten 626-299-5275						
Safeguard Health Plans, Inc. (05-45701), A4 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#408	01/01/09	06/30/11	Public Assistance		unlimited/ 432	\$4,540	San Bernardino	Paula Lopez	Lenatte Blouin (916) 464-0379
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				Medically Needy						
				FAMILY	\$10.51					
				AGED	\$10.51					
				BLIND/DISABLED	\$10.51					
				MI CHILD	\$10.51					
				MI ADULT	\$10.51					
				% OF POV	\$10.51					
				BCCTP	\$10.51					
				CONTACT: Paula Lopez, Director State Gov Programs 949-425-4177						
**Rates do not reflect Hyde abortion rates effective August 2003										
SAN BERNARDINO COUNTY				SUBTOTAL		unlimited/ 807	\$8,481			
TOTAL PHP (DENTAL)						unlimited/ 275,343	\$2,893,856			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
COUNTY COHS									
<u>MERCED COUNTY (24)</u>									
Santa Cruz-Monterey-	514	10/01/09	12/31/13	FAMILY/MI CHILD	\$141.37	N/A/ 70,181	Merced		
Merced, Managed Medical Care Commission				AGED	\$469.37				
dba Central California Alliance for Health				DISABLED/BLIND	\$735.45				
(08-85216) A3				LTC	\$7,640.77				
				MI ADULT	\$141.37				
				REFUGEES/% POV	\$141.37				
				BCCTP	\$1,484.49				
				<u>MEDICARE PART B</u>					
				AGED	\$260.12				
				DISABLED/BLIND	\$175.07				
CONTACT:				LTC	\$4,409.95				
<u>MONTEREY COUNTY (27)</u>									
Santa Cruz-Monterey	#508	07/01/09	12/31/13	FAMILY/MI CHILD	\$134.64	N/A/ 68,683	Monterey	Allan McKay	Jane Marine
Managed Medical Care Commission				AGED	\$587.31				(916) 449-5113
dba Central California Alliance for Health				DISABLED/BLIND	\$946.51				
(08-85216) A3				LTC	\$6,637.54				
1600 Green Hills Road				MI ADULT	\$134.64				
				REFUGEES/% POV	\$134.64				
				BCCTP	\$1,357.34				
				<u>MEDICARE PART B</u>					
				AGED	\$199.76				
				DISABLED/BLIND	\$200.93				
CONTACT: Alan McKay (831) 457-3850 ext 4330				LTC	\$4,994.13				
<u>NAPA COUNTY (28)</u>									
Solano-Napa County	#507	07/01/09	12/31/13	FAMILY/MI CHILD	\$180.46	N/A/ 13,272	Napa	Jack Horn	Louie Sanchez
Commission on Medical Care				AGED	\$478.19				(916) 449-5115
dba Partnership Health Plan of				DISABLED/BLIND	\$893.11				
California				LTC	\$4,796.48				
(08-85215) A3				MI ADULT	\$180.46				
360 Campus Lane, Suite 100				REFUGEES/% POV	\$180.46				
Fairfield, CA 94534-4036				BCCTP	\$1,515.11				
				OBRA	\$289.34				
				<u>MEDICARE PART B</u>					
				AGED	\$187.16				
				DISABLED/BLIND	\$234.27				
CONTACT: Jack Horn (707) 863-4261				LTC	\$3,770.17				
				OBRA	\$289.34				
<u>ORANGE COUNTY (30)</u>									
Orange County Organized	#506	01/01/09	12/31/13	FAMILY/MI CHILD	\$117.67	N/A/ 348,480	Orange	Richard Chambers	Rachael Arruda-deCell
Health System				AGED	\$462.73				(916) 449-5094
dba CalOptima				DISABLED/BLIND	\$686.10				
(08-85214) A2				LTC	\$6,532.38				
1120 West La Veta Ave, 5th Floor				MI ADULT	\$586.90				
Orange, CA 92868-4220				REFUGEES/% POV	\$117.67				
				BCCTP	\$1,346.21				
				<u>MEDICARE PART B</u>					
				AGED	\$191.50				
				DISABLED/BLIND	\$195.60				
CONTACT: Richard Chambers (714) 246-8458				LTC	\$4,330.42				

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COUNTY COHS									
<u>SAN LUIS OBISPO COUNTY (40)</u>									
SBSLORHA/SLO Santa Barbara San Luis Obispo Regional Health Authority dba CenCal Health (08-85212) A3 110 Castillian Dr. Goleta, CA 93117	#501	07/01/09	12/31/11	FAMILY/MI CHILD \$131.24 AGED \$438.75 DISABELED/BLIND \$710.67 LTC \$5,614.82 MI ADULT \$131.24 REFUGEES/% POV \$131.24 BCCTP \$1,420.61 AIDS \$2,256.98	N/A/ 27,581		Santa Luis Obispo	Lyle Lyman	O.Z. Kamara (916) 449-5084
				<u>MEDICARE PART B</u> AGED \$154.87 DISABLED/BLIND \$135.35 LTC \$3,513.96 AIDS \$366.41					
CONTACT: Bob Freeman (805) 685-9525									
<u>SAN MATEO COUNTY (41)</u>									
San Mateo Health Commission dba Health Plan of San Mateo (08-85213) A3 701 Gateway Blvd., Suite 400 South San Francisco, CA 94080	#503	07/01/09	12/31/13	FAMILY/MI CHILD \$168.66 AGED \$573.13 DISABLED/BLIND \$874.47 LTC \$2,027.15 MI ADULT \$168.66 REFUGEES/% POV \$168.66 BCCTP \$1,490.66 AIDS \$2,439.32	N/A/ 56,672		Sacramento	Maya Altman	Gerlinda Hightower (916) 449-5093
				<u>MEDICARE PART B</u> AGED \$164.99 DISABLED/BLIND \$175.90 LTC \$255.02 AIDS \$345.70 AGNEWS \$4,919.00					
CONTACT: Maya Altman (650) 616-2145									
<u>SANTA BARBARA COUNTY (42)</u>									
SBSLORHA Santa Barbara Regional Health Authority dba CenCal Health Initiative (08-85212) A3 110 Castillian Dr. Goleta, CA 93117-3028	#502	07/01/09	12/31/11	FAMILY/MI CHILD \$135.13 AGED \$536.46 DISABELED/BLIND \$788.55 LTC \$8,334.22 MI ADULT \$135.13 REFUGEES/% POV \$135.13 BCCTP \$1,281.63 AIDS \$2,481.35	N/A/ 61,518		Santa Barbara	Lyle Lyman	O. Z. Kamara (916) 449-5084
				<u>MEDICARE PART B</u> AGED \$200.05 DISABLED/BLIND \$172.05 LTC \$5,568.36 AIDS \$401.73					
CONTACT: Bob Freeman (805) 685-9525 ext 1011									

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COUNTY COHS									
<u>SANTA CRUZ COUNTY (44)</u>									
Santa Cruz-Monterey Managed Medical Care Commission dba Central California Alliance for Health (08-85216) A3 1600 Green Hills Road Scotts Valley, CA 95066-9998	#505	07/01/09	12/31/13	FAMILY/MI CHILD \$131.68 AGED \$526.01 DISEABLED/BLIND \$837.52 LTC \$6,300.94 MI ADULT \$131.68 REFUGEES/% POV \$131.68 BCCTP \$1,211.10	N/A/ 33,910		Santa Cruz	Alan McKay	Jane Marine (916) 449-5113
				<u>MEDICARE PART B</u> AGED \$207.22 DISABLED/BLIND \$187.32 LTC \$4,606.54					
CONTACT: Alan McKay (831) 457-3850 ext. 4330									
<u>SOLANO COUNTY (48)</u>									
Solano-Napa County Commission on Medical Care dba Partnership Health Plan of California (08-85215) A3 360 Campus Lane, Suite 100 Fairfield, CA 94534-4036	#504	07/01/09	12/31/13	FAMILY/MI CHILD \$163.29 AGED \$558.72 DISEABLED/BLIND \$869.54 LTC \$5,787.51 MI ADULT \$163.29 REFUGEES/% POV \$163.29 BCCTP \$1,316.97 OBRA \$279.10	N/A/ 60,485		Solano	Jack Horn	Louie Sanchez (916) 449-5115
				<u>MEDICARE PART B</u> AGED \$210.80 DISABLED/BLIND \$231.32 LTC \$4,579.51					
CONTACT: Jack Horn (707) 863-4261									
<u>SONOMA COUNTY (49)</u>									
Sonoma County Partnership Health Plan of CA dba: (08-85215, A3 Note: KP CAL LLC NorCal) #87 (03-75341 rolled over to #513 effective 10/2/2009.	#513	10/01/09	12/31/13	FAMILY/MI CHILD \$115.18 AGED \$627.12 DISEABLED/BLIND \$867.47 LTC \$6,173.42 MI ADULT \$115.18 REFUGEES/% POV \$115.18 BCCTP \$1,174.81 OBRA \$0.00	N/A/ 48,984		Sonoma		
				<u>MEDICARE PART B</u> AGED \$259.12 DISABLED/BLIND \$168.66 LTC \$3,348.50 OBRA \$0.00					
CONTACT:									
<u>YOLO COUNTY (57)</u>									
Solano-Napa County Commission on Medical Care dba Partnership Health Plan of California (08-85215) A3 360 Campus Lane, Suite 100 Fairfield, CA 94534-4036	#509	07/01/09	12/31/13	FAMILY/MICHILD \$136.35 AGED \$598.36 DISEABLED/BLIND \$907.58 LTC \$6,236.74 MI ADULT \$136.35 REFUGEES/FAMIL\ \$136.35 BCCTP \$1,186.91 OBRA \$249.10	N/A/ 26,592		Yolo	Jack Horn	Louie Sanchez (916) 449-5115
				<u>MEDICARE PART B</u> AGED 206.38 DISABLED/BLIND 224.51 LTC 4217.15					
CONTACT: Jack Horn (707) 863-4100									

TOTAL COUNTY COHS

N/A/ 816,358

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation</u> <u>Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
SPECIAL PROJECTS									
<u>ALAMEDA COUNTY (01)</u>									
On Lok Senior Health Services #56 dba On Lok Lifeways (07-65707) A1 1333 Bush Street San Francisco, CA 94109 CONTACT: Robert Edmondson (209) 292-8883		04/01/08	12/31/12	<u>MEDICAL ONLY</u>		1,600/ 3	\$16,533	Alameda	Robert Edmondson Della Cabrera (916) 440-7532
				FAMILY/AGED/REF.	\$5,511.03				
				DISA/LTC/AIDS	\$5,511.03				
On Lok Senior Health Services #56 dba On Lok Lifeways (07-65707) A1 1333 Bush Street San Francisco, CA 94109 CONTACT: Robert Edmondson (209) 292-8883		04/01/08	12/31/12	<u>MEDICARE PART D</u>		1,600/ 83	\$350,465	Alameda	Robert Edmondson Della Cabrera (916) 440-7532
				FAMILY/AGED/REF.	\$4,222.47				
				DISA/LTC/AIDS	\$4,222.47				
Center for Elders #51 Independence (07-65708) 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150		04/01/08	12/31/12	<u>MEDICAL ONLY</u>		560/ 55	\$317,803	Alameda	Peter Szutu Della Cabrera (916) 440-7532
				FAMILY/AGED/REF.	\$5,778.23				
				DISA/LTC/AIDS	\$5,778.23				
Center for Elders #51 Independence (07-65708) 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150		04/01/08	12/31/12	<u>MEDICARE PART D</u>		560/ 355	\$1,534,580	Alameda	Peter Szutu Della Cabrera (916) 440-7532
				FAMILY/AGED/REF.	\$4,322.76				
				DISA/LTC/AIDS	\$4,322.76				
ALAMEDA COUNTY				SUBTOTAL		4,320/ 496	\$2,219,381		

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation</u> <u>Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
CONTRA COSTA COUNTY (07)									
MEDICAL ONLY									
Center for Elders Independence (07-65708) 1955 San Pablo Ave Oakland, CA 94612	#54	04/01/08	12/31/12	FAMILY/AGED/REF. \$5,778.23 DISA/LTC/AIDS \$5,778.23	560/ 6	\$34,669	Contra Costa	Peter Szutu	Della Cabrera (916) 440-7532
CONTACT: Peter Szutu (510) 433-1150									
MEDICARE PART D									
Center for Elders Independence (07-65708) 1955 San Pablo Ave Oakland, CA 94612	#54	04/01/08	12/31/12	FAMILY/AGED/REF. \$4,322.76 DISA/LTC/AIDS \$4,322.76	560/ 25	\$108,069	Contra Costa	Peter Szutu	Della Cabrera (916) 440-7532
CONTACT: Peter Szutu (510) 433-1150									
CONTRA COSTA COUNTY				SUBTOTAL	1,120/ 31	\$142,738			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>LOS ANGELES COUNTY (19)</u>									
				<u>MEDICARE PART D</u>					
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#200	01/01/09	12/31/12	AGED BLIND/DISABLED	\$77.88 \$77.88	5,000/ 3,104	\$241,740	Los Angeles	David Schmidt
CONTACT: David Schmidt (562) 989-5100									
				<u>MEDICARE PART D</u>					
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#201	01/01/09	12/31/12	LTC	\$935.31	5,000/ 1,879	\$1,757,447	Los Angeles	David Schmidt
CONTACT: David Schmidt (562) 989-5100									
				<u>MEDICAL ONLY</u>					
Altamed Hlth Services Corp. dba: Altamed Senior Buenacare (07-65709) A1 512 South Indiana Street Los Angeles, CA 90063	#052	07/01/08	12/31/12	FAMILY/AGED/REF. DISA/LTC/AIDS	\$5,909.86 \$5,909.86	825/ 132	\$780,102	Los Angeles	Castulo de la Rocha President Delmira Rosas-Pettit (916) 440-7543
CONTACT: Jennifer Spalding (323) 728-0411									
				<u>MEDICARE PART D</u>					
Altamed Hlth Services Corp. dba: Altamed Senior Buenacare (07-65709) A1 512 South Indiana Street Los Angeles, CA 90063	#052	07/01/08	12/31/12	FAMILY/AGED/REF. DISA/LTC/AIDS	\$3,393.99 \$3,393.99	825/ 553	\$1,876,876	Los Angeles	Castulo de la Rocha President Delmira Rosas-Pettit (916) 440-7543
CONTACT: Jennifer Spalding (323) 728-0411									
(SCAN on HOLD)									
LOS ANGELES COUNTY				SUBTOTAL		11,650/ 5,668	\$4,656,165		

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MANAGED CARE CAPITATION REPORT

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>RIVERSIDE COUNTY (33)</u>									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#204	01/01/09	12/31/12	<u>MEDICARE PART D</u>		5,000/ 987	\$70,097	Riverside	David Schmidt
				AGED	\$71.02				
				BLIND/DISABLED	\$71.02				
CONTACT: David Schmidt (562) 989-5100									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#205	01/01/09	12/31/12	<u>MEDICARE PART D</u>		5,000/ 609	\$558,490	San Bernardino	David Schmidt
				LTC	\$917.06				
				CONTACT: David Schmidt (562) 989-5100					
RIVERSIDE COUNTY				SUBTOTAL		10,000/ 1,596	\$628,587		
<u>SACRAMENTO COUNTY (34)</u>									
Sutter Senior Care (07-65710) 1234 U Street Sacramento, CA 95818	#50	04/01/08	12/31/12	<u>MEDICAL ONLY</u>		280/ 4	\$19,682	Sacramento	William Clearwater Delmira Rosas-Pettit (916) 440-7543
				FAMILY/AGED/REF.	\$4,920.49				
				DISA/LTC/AIDS	\$4,920.49				
CONTACT: William Clearwater (916) 424-8412									
Sutter Senior Care (07-65710) 1234 U Street Sacramento, CA 95818	#50	04/01/08	12/31/12	<u>MEDICARE PART D</u>		280/ 212	\$755,360	Sacramento	William Clearwater Delmira Rosas-Pettit (916) 440-7543
				FAMILY/AGED/REF.	\$3,563.02				
				DISA/LTC/AIDS	\$3,563.02				
CONTACT: William Clearwater (916) 424-8412									
(SCAN on HOLD)									
SACRAMENTO COUNTY				SUBTOTAL		560/ 216	\$775,042		

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation</u> <u>Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>SAN BERNARDINO COUNTY (36)</u>									
				<u>MEDICARE PART D</u>					
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#206	01/01/09	12/31/12	AGED \$81.60 BLIND/DISABLED \$81.60	5,000/ 547	\$44,635	Riverside	David Schmidt	
CONTACT: David Schmidt (562) 989-5100									
				<u>MEDICARE PART D</u>					
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A1 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#207	01/01/09	12/31/12	LTC \$891.09	5,000/ 313	\$278,911	San Bernardino	David Schmidt	
CONTACT: David Schmidt (562) 989-5100									
SAN BERNARDINO COUNTY				SUBTOTAL					
(SCAN on HOLD)				10,000/ 860		\$323,546			
<u>SAN DIEGO COUNTY (37)</u>									
				<u>MEDICAL ONLY</u>					
Community Elder Care of San Diego dba: St. Paul's PACE (07-65711) A1 328 Maple Street San Diego, CA 92103	#57	02/01/08	12/31/12	FAMILY/AGED/REF. \$4,761.40 DISA/LTC/AIDS \$4,761.40	200/ 18	\$85,705	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Alan Allgood (619) 677-3800									
				<u>MEDICARE PART D</u>					
Community Elder Care of San Diego dba: St. Paul's PACE (07-65711) A1 328 Maple Street San Diego, CA 92103	#57	02/01/08	12/31/12	FAMILY/AGED/REF. \$3,569.67 DISA/LTC/AIDS \$3,569.67	200/ 97	\$346,258	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Alan Allgood (619) 677-3800									
(SCAN on HOLD)									
SAN DIEGO COUNTY				SUBTOTAL					
				400/ 115		\$431,963			

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<u>SAN FRANCISCO COUNTY (38)</u>									
				<u>MEDICAL ONLY</u>					
OnLok Senior Health Services dba On Lok Lifeways (07-65707) A1 1333 Bush Street San Francisco, CA 94109	#55	04/01/08	12/31/12	FAMILY/AGED/REF. \$6,077.65 DISA/LTC/AIDS \$6,077.65	1600/ 30	\$182,330	San Francisco	Robert Edmondson	DellaCabrera (916) 440-7532
CONTACT: Robert Edmondson (209) 292-8883									
				<u>MEDICARE PART D</u>					
OnLok Senior Health Services, dba On Lok Lifeways (07-65707) A1 1333 Bush Street San Francisco, CA 94109	#55	04/01/08	12/31/12	FAMILY/AGED/REF. \$4,399.81 DISA/LTC/AIDS \$4,399.81	1600/ 845	\$3,717,839	San Francisco	Robert Edmondson	DellaCabrera (916) 440-7532
CONTACT: Robert Edmondson (209) 292-8883									
				<u>MEDICAL ONLY</u>					
San Francisco City & County Dept. of Public Health dba Family Mosaic Project 07-65815 A1 1309 Evans Avenue San Francisco, CA 94124	#601	01/01/08	12/31/12	FAMILY/BLIND \$1,848.75 DISA/CHILD/REF \$1,848.75	500/ 57	\$105,379	San Francisco	Miriam Martinez, DHI	Sunita Kapoor (916) 449-5104
CONTACT: Gary Zombalt (415) 206-7600									
SAN FRANCISCO COUNTY				SUBTOTAL	3700/ 932	\$4,005,548			
<u>SANTA CLARA COUNTY (43)</u>									
				<u>MEDICAL ONLY</u>					
On Lok Senior Health Services, dba: On Lok Lifeways For PACE 07-65707, A1 1333 Bush Street San Francisco, CA 94109-5611	#58	11/01/08	12/31/12	FAMILY/AGED/REF. 5145.76 DISA/LTC/AIDS 5145.76	1600/ 2	\$10,292	San Jose	Robert Edmondson	DellaCabrera (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
				<u>MEDICARE PART D</u>					
On Lok Senior Health Services, dba: On Lok Lifeways For PACE 07-65707, A1 1333 Bush Street San Francisco, CA 94109-5611	#58	11/01/08	12/31/12	FAMILY/AGED/REF. 4028.58 DISA/LTC/AIDS 4028.58	1600/ 27	\$108,772	San Jose	Robert Edmondson	DellaCabrera (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
SANTA CLARA COUNTY				SUBTOTAL	3,200/ 29	\$119,064			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>YOLO COUNTY (57)</u>									
<u>MEDICAL ONLY</u>									
Sutter Senior Care (07-65710) 1234 U Street Sacramento, CA 95818	#53	04/01/08	12/31/12	FAMILY/AGED/REF. 4,920.49 DISA/LTC/AIDS 4,920.49	280/ 0	\$0	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 440-7543
CONTACT: William Clearwater (916) 424-8412									
Sutter Senior Care (07-65710) 1234 U Street Sacramento, CA 95818	#53	04/01/08	12/31/12	<u>MEDICARE PART D</u> FAMILY/AGED/REF. 3,563.02 DISA/LTC/AIDS 3,563.02	280/ 2	\$7,126	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 440-7543
CONTACT: William YOLO COUNTY									
SUBTOTAL					<u>280/ 2</u>	<u>\$7,126</u>			
TOTAL SPECIAL PROJECT					<u>45,230/ 9,945</u>	<u>\$13,309,160</u>			

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PCCM

LOS ANGELES COUNTY (19)

AIDS Healthcare Foundation (01-16349) A-12 6255 W. Sunset Blvd., 16th Floor Los Angeles, CA 90028-7403	#915	01/01/10	12/31/10	Public Assistance						
				FAMILY	\$103.27	2,000/ 418	\$254,171	Los Angeles	Michael Weinstein	Sunita Kapoor
				AGED	\$466.85					(916) 449-5096
				DISABLED	\$622.09					
				MI CHILD	\$103.27					
				MI ADULT	\$265.28					
				REFUGEES	\$103.27					
				AIDS	\$1,767.86					
				BCCTP	\$517.08					

CONTACT: Donna Stidham (323) 860-5231

				<u>MEDICARE PART D</u>						
				Public Assistance						
AIDS Healthcare Foundation (01-16349) A-12 6255 W. Sunset Blvd., 16th floor Los Angeles, CA 90028-7403	#915	01/01/10	12/31/10	FAMILY	\$103.27	2,000/ 302	\$101,197	Los Angeles	Michael Weinstein	Sunita Kapoor
				AGED	\$243.89					(916) 449-5096
				DISABLED	\$339.33					
				MI CHILD	\$103.27					
				MI ADULT	\$265.28					
				REFUGEES	\$103.27					
				AIDS	\$230.19					
				BCCTP	\$517.08					

CONTACT: Donna Stidham (323) 860-5231

LOS ANGELES COUNTY

SUBTOTAL

4,000/ 720

\$355,368

TOTAL PCCM

4,000/ 720

\$355,368

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2-PLAN									
ALAMEDA COUNTY (01)									
Alameda Alliance for Health (04-35399), A8, C8 1240 South Loop Road Alameda, CA 94502	#300	10/01/09	12/31/10	FAMILY	\$111.12	180,000/ 89,040	\$12,888,676	Alameda	David Kears
				AGED	\$491.99				
				DISABLED	\$491.99				
				MI ADULT	\$111.12				
				REFUGEES	\$111.12				
				AIDS	\$1,007.69				
				BCCTP	\$814.52				
				AGNEWS	\$4,919.00				
CONTACT: Ingrid Lamirault (510) 747-4500									
Alameda Alliance for Health (04-35399), A8, C8 1240 South Loop Road Alameda, CA 94502	#300	10/01/09	12/31/10	MEDICARE PART D		180,000/ 4,613	\$645,866	Alameda	David Kears
				FAMILY	\$111.12				
				AGED	\$127.23				
				DISABLED	\$155.05				
				MI ADULT	\$111.12				
				REFUGEES	\$111.12				
				AIDS	\$239.43				
				BCCTP	\$814.52				
MATERNITY	\$6,042.63								
CONTACT: Ingrid Lamirault (510) 747-4500				AGNEWS	\$4,919.00				
Anthem Blue Cross Partnership Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012	#340	10/01/09	06/30/10	FAMILY	\$118.99	unlimited/ 26,242	\$3,953,104		California
				AGED	\$546.76				
				DISABLED	\$546.76				
				MI ADULT	\$118.99				
				REFUGEES/FAMILY	\$118.99				
				AIDS	\$1,025.21				
				BCCTP	\$813.63				
				CONTACT: Daniel Barzman (626) 405-6996					
Anthem Blue Cross Partnership Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012	#340	10/01/09	06/30/10	MEDICARE PART D		unlimited/ 813	\$115,573		California
				FAMILY	\$118.99				
				AGED	\$132.80				
				DISABLED	\$152.02				
				MI ADULT	\$118.99				
				REFUGEES/FAMILY	\$118.99				
				AIDS	\$226.96				
				BCCTP	\$813.63				
CONTACT: Daniel Barzman (626) 405-6996				MATERNITY	\$6,042.63				
ALAMEDA COUNTY				SUBTOTAL		360,000/ 120,708	\$17,603,219		

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CONTRA COSTA COUNTY (07)									
County of Contra Costa Contra Costa Hlth Plan (04-36067), A6, C8, 595 Center Avenue, Suite 100 Martinez, CA 94553 CONTACT: Milton Camhi (925) 313-6004	#301	10/01/09	12/31/10	FAMILY \$120.45 AGED \$490.75 DISABLED \$490.75 MI ADULT \$120.45 REFUGEES/FAMILY \$120.45 AIDS \$1,043.53 BCCTP \$832.10	unlimited/ 53,762	\$8,027,016		County of Contra Costa	Lin McCaul (916) 449-5104
				MEDICARE PART D					
County of Contra Costa Contra Costa Hlth Plan (04-36067), A6, C8, 595 Center Avenue, Suite 100 Martinez, CA 94553 CONTACT: Milton Camhi (925) 313-6004	#301	10/01/09	12/31/10	FAMILY \$120.45 AGED \$134.69 DISABLED \$148.13 MI ADULT \$120.45 REFUGEES/FAMILY \$120.45 AIDS \$231.06 BCCTP \$832.10 MATERNITY \$5,753.70	unlimited/ 2,256	\$318,204		County of Contra Costa	Lin McCaul (916) 449-5104
Anthem Blue Cross Partnership Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Laura Linebach (805) 384-7876	#344	10/01/09	06/30/10	FAMILY \$109.43 AGED \$430.93 DISABLED \$430.93 MI ADULT \$109.43 REFUGEES/FAMILY \$109.43 AIDS \$1,055.94 BCCTP \$824.06	unlimited/ 10,958	\$1,383,353	Contra Costa	Blue Cross of California	Marc Lewis (916) 449-5061
				MEDICARE PART D					
Anthem Blue Cross Partnership Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Laura Linebach (805) 384-7876	#344	10/01/09	06/30/10	FAMILY \$109.43 AGED \$125.23 DISABLED \$156.34 MI ADULT \$109.43 REFUGEES/FAMILY \$109.43 AIDS \$223.59 BCCTP \$824.06 MATERNITY \$5,753.70	unlimited/ 230	\$31,758	Contra Costa	Blue Cross of California	Marc Lewis (916) 449-5061
CONTRA COSTA COUNTY				SUBTOTAL	unlimited/ 67,206	\$9,760,331			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>																		
<u>FRESNO COUNTY (10)</u>																											
Anthem Blue Cross Partnership #341 Plan (03-76184), A10 ,C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	<table><tr><td>FAMILY</td><td>\$97.44</td></tr><tr><td>AGED</td><td>\$527.26</td></tr><tr><td>DISABLED</td><td>\$527.26</td></tr><tr><td>MI ADULT</td><td>\$97.44</td></tr><tr><td>REFUGEES/FAMILY</td><td>\$97.44</td></tr><tr><td>AIDS</td><td>\$1,064.14</td></tr><tr><td>BCCTP</td><td>\$809.80</td></tr></table>	FAMILY	\$97.44	AGED	\$527.26	DISABLED	\$527.26	MI ADULT	\$97.44	REFUGEES/FAMILY	\$97.44	AIDS	\$1,064.14	BCCTP	\$809.80	unlimited/ 95,950	\$11,445,146	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061				
FAMILY	\$97.44																										
AGED	\$527.26																										
DISABLED	\$527.26																										
MI ADULT	\$97.44																										
REFUGEES/FAMILY	\$97.44																										
AIDS	\$1,064.14																										
BCCTP	\$809.80																										
Anthem Blue Cross Partnership #341 Plan (03-76184,) A10 ,C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	<table><tr><td colspan="2">MEDICARE PART D</td></tr><tr><td>FAMILY</td><td>\$97.44</td></tr><tr><td>AGED</td><td>\$108.62</td></tr><tr><td>DISABLED</td><td>\$151.13</td></tr><tr><td>MI ADULT</td><td>\$97.44</td></tr><tr><td>REFUGEES/FAMILY</td><td>\$97.44</td></tr><tr><td>AIDS</td><td>\$216.75</td></tr><tr><td>BCCTP</td><td>\$809.80</td></tr><tr><td>MATERNITY</td><td>\$5,616.08</td></tr></table>	MEDICARE PART D		FAMILY	\$97.44	AGED	\$108.62	DISABLED	\$151.13	MI ADULT	\$97.44	REFUGEES/FAMILY	\$97.44	AIDS	\$216.75	BCCTP	\$809.80	MATERNITY	\$5,616.08	unlimited/ 2,437	\$329,608	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061
MEDICARE PART D																											
FAMILY	\$97.44																										
AGED	\$108.62																										
DISABLED	\$151.13																										
MI ADULT	\$97.44																										
REFUGEES/FAMILY	\$97.44																										
AIDS	\$216.75																										
BCCTP	\$809.80																										
MATERNITY	\$5,616.08																										
Health Net Community #351 Solutions, Inc. (03-76182), A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		10/01/09	06/30/10	<table><tr><td>FAMILY</td><td>\$86.67</td></tr><tr><td>AGED</td><td>\$425.97</td></tr><tr><td>DISABLED</td><td>\$425.97</td></tr><tr><td>MI ADULT</td><td>\$86.67</td></tr><tr><td>REFUGEES/FAMILY</td><td>\$86.67</td></tr><tr><td>AIDS</td><td>\$1,032.37</td></tr><tr><td>BCCTP</td><td>\$829.65</td></tr></table>	FAMILY	\$86.67	AGED	\$425.97	DISABLED	\$425.97	MI ADULT	\$86.67	REFUGEES/FAMILY	\$86.67	AIDS	\$1,032.37	BCCTP	\$829.65	unlimited/ 100,198	\$9,974,016	Fresno	Health Net	Myreca Singh (916) 449-5057				
FAMILY	\$86.67																										
AGED	\$425.97																										
DISABLED	\$425.97																										
MI ADULT	\$86.67																										
REFUGEES/FAMILY	\$86.67																										
AIDS	\$1,032.37																										
BCCTP	\$829.65																										
Health Net Community #351 Solutions, Inc. (03-76182), A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		10/01/09	06/30/10	<table><tr><td colspan="2">MEDICARE PART D</td></tr><tr><td>FAMILY</td><td>\$86.67</td></tr><tr><td>AGED</td><td>\$115.61</td></tr><tr><td>DISABLED</td><td>\$134.54</td></tr><tr><td>MI ADULT</td><td>\$86.67</td></tr><tr><td>REFUGEES/FAMILY</td><td>\$86.67</td></tr><tr><td>AIDS</td><td>\$220.88</td></tr><tr><td>BCCTP</td><td>\$829.65</td></tr><tr><td>MATERNITY</td><td>\$5,616.08</td></tr></table>	MEDICARE PART D		FAMILY	\$86.67	AGED	\$115.61	DISABLED	\$134.54	MI ADULT	\$86.67	REFUGEES/FAMILY	\$86.67	AIDS	\$220.88	BCCTP	\$829.65	MATERNITY	\$5,616.08	unlimited/ 962	\$116,761	Fresno	Health Net	Myreca Singh (916) 449-5057
MEDICARE PART D																											
FAMILY	\$86.67																										
AGED	\$115.61																										
DISABLED	\$134.54																										
MI ADULT	\$86.67																										
REFUGEES/FAMILY	\$86.67																										
AIDS	\$220.88																										
BCCTP	\$829.65																										
MATERNITY	\$5,616.08																										
FRESNO COUNTY				SUBTOTAL	unlimited/ 199,547	\$21,865,531																					

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>KERN COUNTY (15)</u>									
Health Net Community Solutions, Inc. (03-76182) A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#360	10/01/09	06/30/10	FAMILY	\$98.65	unlimited/ 29,751	\$3,465,231	Kern	Health Net
				AGED	\$442.73				
				DISABLED	\$442.73				
				MI ADULT	\$98.65				
				REFUGEES/FAMILY	\$98.65				
				AIDS	\$1,069.32				
				BCCTP	\$809.45				
<u>MEDICARE PART D</u>									
Health Net Community Solutions, Inc. (03-76182) A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#360	10/01/09	06/30/10	FAMILY	\$98.65	unlimited/ 641	\$82,748	Kern	Health Net
				AGED	\$113.33				
				DISABLED	\$142.24				
				MI ADULT	\$98.65				
				REFUGEES/FAMILY	\$98.65				
				AIDS	\$218.56				
				BCCTP	\$809.45				
MATERNITY	\$5,408.53								
Kern Health Systems dba Kern Family Health Care 03-76165, A7, C9 9700 Stockdale Highway Bakersfield, CA 93311-3617 CONTACT: Carol Sorrell (661) 391-4006	#303	10/01/09	12/31/10	FAMILY	\$92.09	115,000/ 100,097	\$10,793,499	Kern	Kern Health Systems
				AGED	\$396.51				
				DISABLED	\$396.51				
				MI ADULT	\$92.09				
				REFUGEES/FAMILY	\$92.09				
				AIDS	\$1,027.71				
				BCCTP	\$811.56				
<u>MEDICARE PART D</u>									
Kern Health Systems dba Kern Family Health Care 03-76165, A7, C9 9700 Stockdale Highway Bakersfield, CA 93311-3617 CONTACT: Carol Sorrell (661) 391-4006	#303	10/01/09	12/31/10	FAMILY	\$92.09	115,000/ 1,895	\$259,244	Kern	Kern Health Systems
				AGED	\$129.07				
				DISABLED	\$151.16				
				MI ADULT	\$92.09				
				REFUGEES/FAMILY	\$92.09				
				AIDS	\$212.23				
				BCCTP	\$811.56				
MATERNITY	\$5,408.53								
KERN COUNTY				SUBTOTAL		230,000/ 132,384	\$14,600,722		

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>LOS ANGELES COUNTY (19)</u>									
Health Net Community Solutions, Inc. (03-76182), A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#352	10/01/09	06/30/10	FAMILY	\$83.94	unlimited/ 436,854	\$41,591,898	Los Angeles	Health Net
				AGED	\$396.78				
				DISABLED	\$396.78				
				MI ADULT	\$83.94				
				REFUGEES/FAMILY	\$83.94				
				AIDS	\$1,016.33				
				BCCTP	\$800.22				
MEDICARE PART D				unlimited/ 5,632	\$675,129	Los Angeles	Health Net		
FAMILY	\$83.94								
AGED	\$111.19								
DISABLED	\$137.98								
MI ADULT	\$83.94								
REFUGEES/FAMILY	\$83.94								
AIDS	\$230.77								
BCCTP	\$800.22								
CONTACT: Sean O'Brien (626) 683-6246				MATERNITY	\$5,758.58	unlimited/ 786,633	\$84,687,318	Los Angeles	LA Care Health Plan
LA Care Health Plan (04-36069), A4, C8 555 W. Fifth Street, 19th Floor Los Angeles, CA 90013-3036 CONTACT: Howard Kahn (213) 694 -1250	#304	10/01/09	12/31/10	FAMILY	\$94.42				
				AGED	\$441.08				
				DISABLED	\$441.08				
				MI ADULT	\$94.42				
				REFUGEES/FAMILY	\$94.42				
				AIDS	\$1,037.35				
				BCCTP	\$856.41				
MEDICARE PART D				unlimited/ 11,617	\$1,415,799	Los Angeles	LA Care Health Plan		
LA Care Health Plan (04-36069), A4, C8 555 W. Fifth Street, 19th Floor Los Angeles, CA 90013-3036 CONTACT: Howard Kahn (213) 694 -1250	#304	10/01/09	12/31/10					FAMILY	\$94.42
								AGED	\$115.39
								DISABLED	\$135.06
								MI ADULT	\$94.42
								REFUGEES/FAMILY	\$94.42
								AIDS	\$225.72
				BCCTP	\$856.41				
CONTACT: Howard Kahn (213) 694 -1250				MATERNITY	\$5,758.58				
LOS ANGELES COUNTY				SUBTOTAL		unlimited/ 1,240,736	\$128,370,144		

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>RIVERSIDE COUNTY (33)</u>									
Inland Empire Health Plan (04-35765), A7, C8 PO BOX 19026 San Bernardino, CA 92423-9026	#305	10/01/09	12/31/10	FAMILY \$95.40 AGED \$444.20 DISABLED \$444.20 MI ADULT \$95.40 REFUGEES/FAMILY \$95.40 AIDS \$1,047.21 BCCTP \$833.43	unlimited/ 173,402	\$19,188,027	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
CONTACT: Richard Bruno, CEO (909) 890-2000									
Inland Empire Health Plan (04-35765), A7, C8 PO BOX 19026 San Bernardino, CA 92423-9026	#305	10/01/09	12/31/10	MEDICARE PART D FAMILY \$95.40 AGED \$115.21 DISABLED \$143.53 MI ADULT \$95.40 REFUGEES/FAMILY \$95.40 AIDS \$218.28 BCCTP \$833.43 MATERNITY \$5,319.64	unlimited/ 2,970	\$381,226	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
CONTACT: Richard Bruno, CEO (909) 890-2000									
Molina Healthcare of California Partner Plan, Inc. (06-55498), A5, C5 200 Oceangate, Ste. 100 Long Beach, CA 90802-4317	#355	10/01/09	03/31/11	FAMILY \$102.79 AGED \$452.39 DISABLED \$452.39 MI ADULT \$102.79 REFUGEES/FAMILY \$102.79 AIDS \$983.96 BCCTP \$827.10	83,038/ 38,873	\$4,330,672	Riverside	Stephen T. O'Dell Molina, M.D.	Mike Dutra (916) 449-5057
CONTACT: Greg Hamblin, CFO (562) 435-3666 ext. 127028									
Molina Healthcare of California Partner Plan, Inc. (06-55498), A5, C5 200 Oceangate Ste. 100 Long Beach, CA 90802-4317	#355	10/01/09	03/31/11	MEDICARE PART D FAMILY \$102.79 AGED \$127.80 DISABLED \$145.60 MI ADULT \$102.79 REFUGEES/FAMILY \$102.79 AIDS \$222.88 BCCTP \$827.10 MATERNITY \$5,319.64	83,038/ 339	\$44,332	Riverside	Stephen T. O'Dell Molina, M.D.	Mike Dutra (916) 449-5057
CONTACT: Greg Hamblin, CFO (562) 435-3666 ext. 127028									
RIVERSIDE COUNTY				SUBTOTAL	166,076/ 215,584	\$23,944,257			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
SAN BERNARDINO COUNTY (36)									
Inland Empire Health Plan (04-35765), A7, C8 PO BOX 19026 San Bernardino, CA 92423-9026	#306	10/01/09	12/31/10	FAMILY \$97.77 AGED \$444.59 DISABLED \$444.59 MI ADULT \$97.77 REFUGEES/FAMILY \$97.77 AIDS \$970.44 BCCTP \$794.41	unlimited/ 193,175	\$21,805,599	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
CONTACT: Richard Bruno, CEO (909) 890-2000									
Inland Empire Health Plan (04-35765), A7, C8 PO BOX 19026 San Bernardino, CA 92423-9026	#306	10/01/09	12/31/10	MEDICARE PART D FAMILY \$97.77 AGED \$124.44 DISABLED \$161.48 MI ADULT \$97.77 REFUGEES/FAMILY \$97.77 AIDS \$217.11 BCCTP \$794.41 MATERNITY \$5,097.25	unlimited/ 3,204	\$455,119	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
CONTACT: Richard Bruno, CEO (909) 890-2000									
Molina Healthcare of California Partner Plan, Inc. (06-55498), A5, C5 200 Oceangate Ste. 100. Long Beach, CA 90802-4317	#356	10/01/09	03/31/11	FAMILY \$104.22 AGED \$423.71 DISABLED \$423.71 MI ADULT \$104.22 REFUGEES/FAMILY \$104.22 AIDS \$984.81 BCCTP \$826.53	136,332/ 54,199	\$6,199,268	San Bernardino	Joann Zarza-Garrido Mike Dutra Molina, M.D. (916) 449-5057	
CONTACT: George Goldstein (562) 435-3666									
Molina Healthcare of California Partner Plan, Inc. (06-55498), A5, C5 200 Oceangate Ste. 100. Long Beach, CA 90802-4317	#356	10/01/09	03/31/11	MEDICARE PART D FAMILY \$104.22 AGED \$124.75 DISABLED \$149.10 MI ADULT \$104.22 REFUGEES/FAMILY \$104.22 AIDS \$222.75 BCCTP \$826.53 MATERNITY \$5,097.25	136,332/ 433	\$56,809	San Bernardino	Joann Zarza-Garrido Mike Dutra Molina, M.D. (916) 449-5057	
CONTACT: George Goldstein (562) 435-3666									
SAN BERNARDINO COUNTY				SUBTOTAL	272,664/ 251,011	\$28,516,795			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
<u>SAN FRANCISCO COUNTY (38)</u>										
Anthem Blue Cross Partnership #343 Plan (03-76184), A10 ,C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	FAMILY	\$97.33	unlimited/ 11,607	\$1,397,537	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5061
				AGED	\$451.60					
				DISABLED	\$451.60					
				MI ADULT	\$97.33					
				REFUGEES/FAMILY	\$97.33					
				AIDS	\$1,088.86					
				BCCTP	\$822.13					
<u>MEDICARE PART D</u>										
Anthem Blue Cross Partnership #343 Plan (03-76184), A10 ,C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	FAMILY	\$97.33	unlimited/ 450	\$57,506	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5061
				AGED	\$109.13					
				DISABLED	\$146.68					
				MI ADULT	\$97.33					
				REFUGEES/FAMILY	\$97.33					
				AIDS	\$224.23					
				BCCTP	\$822.13					
MATERNITY	\$5,842.73									
<u>MEDICARE PART D</u>										
San Francisco Hlth Authority #307 dba San Francisco Health Plan (04-35400), A7, C8 201 Third Street, 7th Floor San Francisco, CA 94103 CONTACT: Jean S. Fraser (415) 615-4202		10/01/09	12/31/10	FAMILY	\$129.89	55,000/ 35,427	\$5,356,768	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Mary Cobb (916) 449-5103
				AGED	\$520.70					
				DISABLED	\$520.70					
				MI ADULT	\$129.89					
				REFUGEES/FAMILY	\$129.89					
				AIDS	\$1,115.74					
				BCCTP	\$841.23					
<u>MEDICARE PART D</u>										
San Francisco Hlth Authority #307 dba San Francisco Health Plan (04-35400), A7, C8 201 Third Street, 7th Floor San Francisco, CA 94103 CONTACT: Jean S. Fraser (415) 615-4202		10/01/09	12/31/10	FAMILY	\$129.89	55,000/ 1,543	\$234,111	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Mary Cobb (916) 449-5103
				AGED	\$142.72					
				DISABLED	\$163.14					
				MI ADULT	\$129.89					
				REFUGEES/FAMILY	\$129.89					
				AIDS	\$222.63					
				BCCTP	\$841.23					
MATERNITY	\$5,842.73									
<u>MEDICARE PART D</u>										
SAN FRANCISCO COUNTY				SUBTOTAL		110,000/ 49,027	\$7,045,922			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
<u>SAN JOAQUIN COUNTY (39)</u>										
Health Plan of San Joaquin (04-35401), A7, C8 7751 S. Manthey Road French Camp, CA 95231 CONTACT: Terry Mack (209) 939-3500	#308	10/01/09	12/31/10	FAMILY	\$99.09	unlimited/ 71,897	\$8,720,812	San Joaquin	Stephanie Hopkins (916) 319-9041	
				AGED	\$452.27					
				DISABLED	\$452.27					
				MI ADULT	\$99.09					
				REFUGEES/FAMILY	\$99.09					
				AIDS	\$1,044.32					
				BCCTP	\$832.94					
<u>MEDICARE PART D</u>				unlimited/ 1,591	\$222,959	San Joaquin	Stephanie Hopkins (916) 319-9041			
FAMILY	\$99.09									
AGED	\$115.72									
DISABLED	\$158.67									
MI ADULT	\$99.09									
REFUGEES/FAMILY	\$99.09									
AIDS	\$220.04									
BCCTP	\$832.94									
CONTACT: Terry Mack (209) 939-3500				MATERNITY	\$5,938.46					
Anthem Blue Cross Partnership Plan (03-76184), A10 ,C8 5151– A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#358	10/01/09	06/30/10	FAMILY	\$90.84	unlimited/ 28,163	\$3,000,424	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5061
				AGED	\$412.90					
				DISABLED	\$412.90					
				MI ADULT	\$90.84					
				REFUGEES/FAMILY	\$90.84					
				AIDS	\$1,020.79					
				BCCTP	\$811.76					
<u>MEDICARE PART D</u>				unlimited/ 573	\$73,168	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5061		
FAMILY	\$90.84									
AGED	\$110.29									
DISABLED	\$146.70									
MI ADULT	\$90.84									
REFUGEES/FAMILY	\$90.84									
AIDS	\$224.99									
BCCTP	\$811.76									
CONTACT: Cindy Metcho (805) 384-7662				MATERNITY	\$5,938.46					
SAN JOAQUIN COUNTY				SUBTOTAL		unlimited/ 102,224	\$12,017,363			

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<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>
<u>SANTA CLARA COUNTY (43)</u>									
Anthem Blue Cross Partnership #345 Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	FAMILY \$103.84 AGED \$458.30 DISABLED \$458.30 MI ADULT \$103.84 REFUGEES/FAMILY \$103.84 AIDS \$1,091.67 BCCTP \$830.08	unlimited/ 32,762	\$4,039,040	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5061
				MEDICARE PART D					
Anthem Blue Cross Partnership #345 Plan (03-76184), A10, C8 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	06/30/10	FAMILY \$103.84 AGED \$113.19 DISABLED \$149.88 MI ADULT \$103.84 REFUGEES/FAMILY \$103.84 AIDS \$223.76 BCCTP \$830.08 MATERNITY \$5,719.42	unlimited/ 865	\$109,153	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5061
Santa Clara Family Health #309 Plan (04-35398), A8, C8 210 E. Hacienda Avenue Campbell, CA 95008-6617 CONTACT: Leona Butler (408) 874-1901		10/01/09	12/31/10	FAMILY \$117.77 AGED \$482.01 DISABLED \$482.01 MI ADULT \$117.77 REFUGEES/FAMILY \$117.77 AIDS \$1,067.96 BCCTP \$826.53 AGNEWS \$4,919.00	123,000/ 89,640	\$12,309,448	Santa Clara	Santa Clara Family Health Plan	Mary Cobb (916) 341-7035
				MEDICARE PART D					
Santa Clara Family Health #309 Plan (04-35398), A8, C8 210 E. Hacienda Avenue Campbell, CA 95008-6617 CONTACT: Leona Butler (408) 874-1901		10/01/09	12/31/10	FAMILY \$117.77 AGED \$115.39 DISABLED \$155.10 MI ADULT \$117.77 REFUGEES/FAMILY \$117.77 AIDS \$219.25 BCCTP \$826.53 MATERNITY \$5,719.42 AGNEWS \$4,919.00	123,000/ 5,654	\$744,475	Santa Clara	Santa Clara Family Health Plan	Mary Cobb (916) 341-7035
SANTA CLARA COUNTY				SUBTOTAL	246,000/ 128,921	\$17,202,116			

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<u>Plan Name and</u> <u>Contract Number</u>	<u>Code</u> <u>No.</u>	<u>Effective</u> <u>Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u> <u>Enrollment</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
STANISLAUS COUNTY (50)										
Anthem Blue Cross Partnership #310 Plan (04-35797), A7, C7 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	12/31/10	FAMILY	\$110.61	unlimited/ 47,523	\$6,505,272	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5061
				AGED	\$569.96					
				DISABLED	\$569.96					
				MI ADULT	\$110.61					
				REFUGEES/FAMILY	\$110.61					
				AIDS	\$1,047.89					
				BCCTP	\$859.66					
				MEDICARE PART D						
Anthem Blue Cross Partnership #310 Plan (04-35797), A7, C7 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		10/01/09	12/31/10	FAMILY	\$110.61	unlimited/ 1,244	\$178,471	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5061
				AGED	\$133.20					
				DISABLED	\$155.04					
				MI ADULT	\$110.61					
				REFUGEES/FAMILY	\$110.61					
				AIDS	\$224.38					
				BCCTP	\$859.66					
				MATERNITY	\$6,114.14					
Health Net Community #361 Solutions, Inc. (03-76182), A9, C10 11971 Foundation Place Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		10/01/09	06/30/10	FAMILY	\$109.98	unlimited/ 19,340	\$2,394,119	Stanislaus	Health Net	Myreca Singh (916) 449-5057
				AGED	\$542.19					
				DISABLED	\$542.19					
				MI ADULT	\$109.98					
				REFUGEES/FAMILY	\$109.98					
				AIDS	\$1,075.13					
				BCCTP	\$845.24					
				MEDICARE PART D						
Health Net Community #361 Solutions, Inc. (03-76182), A9, C10 11971 Foundation Place Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		10/01/09	06/30/10	FAMILY	\$109.98	unlimited/ 281	\$40,031	Stanislaus	Health Net	Myreca Singh (916) 449-5057
				AGED	\$125.47					
				DISABLED	\$162.78					
				MI ADULT	\$109.98					
				REFUGEES/FAMILY	\$109.98					
				AIDS	\$231.25					
				BCCTP	\$845.24					
				MATERNITY	\$6,114.14					
STANISLAUS COUNTY				SUBTOTAL		unlimited/ 68,388	\$9,117,893			

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TULARE COUNTY (54)									
Health Net Community Solutions, Inc. (03-76182), A9 C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#353	10/01/09	06/30/10	FAMILY	\$89.70	unlimited/ 25,322	\$2,517,733	Tulare	Health Net
				AGED	\$442.09				
				DISABLED	\$442.09				
				MI ADULT	\$89.70				
				REFUGEES/FAMILY	\$89.70				
				AIDS	\$984.77				
				BCCTP	\$809.20				
MEDICARE PART D									
Health Net Community Solutions, Inc. (03-76182), A9, C10 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#353	10/01/09	06/30/10	FAMILY	\$89.70	unlimited/ 263	\$32,008	Tulare	Health Net
				AGED	\$112.56				
				DISABLED	\$141.75				
				MI ADULT	\$89.70				
				REFUGEES/FAMILY	\$89.70				
				AIDS	\$225.49				
				BCCTP	\$809.20				
MATERNITY	\$5,719.97								
Anthem Blue Cross Partnership Plan (04-36068), A7, C7 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#311	10/01/09	12/31/10	FAMILY	\$95.54	unlimited/ 75,917	\$8,511,110	Tulare	Blue Cross of California
				AGED	\$543.40				
				DISABLED	\$543.40				
				MI ADULT	\$95.54				
				REFUGEES/FAMILY	\$95.54				
				AIDS	\$995.42				
				BCCTP	\$804.26				
MEDICARE PART D									
Anthem Blue Cross Partnership Plan (04-36068), A7, C7 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#311	10/01/09	12/31/10	FAMILY	\$95.54	unlimited/ 1,472	\$194,271	Tulare	Blue Cross of California
				AGED	\$112.36				
				DISABLED	\$150.26				
				MI ADULT	\$95.54				
				REFUGEES/FAMILY	\$95.54				
				AIDS	\$230.53				
				BCCTP	\$804.26				
MATERNITY	\$5,719.97								
TULARE COUNTY				SUBTOTAL		unlimited/ 102,974	\$11,255,122		
TOTAL 2-PLAN						1,384,740/ 2,678,710	\$301,299,415		

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GEOGRAPHIC MANAGED CARE (GMC-MEDICAL)									
<u>SACRAMENTO COUNTY (34)</u>									
Molina Healthcare of CA Partner Plan, Inc. (07-65851) A1 200 Oceangate Ste. 100. Long Beach, CA 90802-4317	#130	01/01/09	12/31/12		160,000/ 26,636		Sacramento		Nathan Nau (916) 341-7031
CONTACT: Lisa Rubino, President, (562) 491-7044									
Western Health Advantage Community Health Plan (07-65853) A4 2349 Gateway Oaks Drive, Suite 100 Sacramento, CA 95833-9754 (Deactivated 12/31/2009)	#140	01/01/09	12/31/12		15,750/ 0		Sacramento		Nathan Nau (916) 341-7031
CONTACT: Rhonda West-Peters (916) 614-6002									
Health Net Community Solutions, Inc. (07-65847) A2 11971 Foundation Place, Bldg D Rancho Cordova, CA 95670	#150	01/01/09	12/31/12		168,600/ 45,691		Sacramento		Nathan Nau (916) 341-7031
CONTACT: Lori Hill (916) 935-1447									
KP CAL, LLC (NorCal) (07-65849) A0-a 1800 Harrison Street, 25th Floor Oakland, CA 94512	#170	01/01/08	12/31/12		20,000/ 26,230		Sacramento	Charles S. Koch	Nathan Nau (916) 341-7031
CONTACT: Cathy Lurty (818) 557-7955									
Anthem Blue Cross Partnership Plan (07-65845) A1 5151 - A Camino Ruiz	#190	01/01/08	12/31/12		168,600/ 90,379		Sacramento	Jeff Flick Regional Manager, SSB West	Nathan Nau (916) 341-7031
CONTACT: Cindy Metcho (805) 384-7662									
TOTAL GMC-MEDICAL (Sacramento)					532,950/ 188,936				

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GEOGRAPHIC MANAGED CARE (GMC-MEDICAL)									
<u>SAN DIEGO COUNTY (37)</u>									
Community Health Group Partnership Plan, Inc. (05-46127), A6 740 Bay Blvd Chula Vista, CA 91910	#29	01/01/09	06/30/10		207,000/ 92,307		San Diego	Ann Warren Chief Member& Govt Relations Officer	Nathan Nau (916) 341-7031
CONTACT: Francisca Chavez (619) 498-6589									
Health Net Community Solutions, Inc. (05-46128), A6 11971 Foundation Place Bldg D Rancho Cordova, CA 95670	#68	01/01/09	06/30/10		180,000/ 30,043		San Diego	David Friedman	Nathan Nau (916) 341-7031
CONTACT: Lori Hill (916) 935-1447									
KP CAL, LLC (SoCal) (05-46129), A8 393 East Walnut Street, 7th Floor Pasadena, CA 91188	#79	01/01/09	06/30/10		10,000/ 13,451		San Diego	William Caswell	Nathan Nau (916) 341-7031
CONTACT: Cathy Lurty (818) 557-7955									
Molina Healthcare of California Partner Plan, Inc. (05-46130) A5 200 Oceangate, Ste. 100 Long Beach, CA 90802-4317	#131	01/01/09	06/30/10		100,000/ 59,026		San Diego	Stephen T. O'Dell President & CEO	Nathan Nau (916) 341-7031
CONTACT: Greg Hamblin, CFO (562) 435-3666 EXT 127028									
Care 1st Health Plan, LLC (05-46131), A7 601 Potrero Grande Drive Monterey Park, CA 91755	#167	01/01/09	06/30/10		207,000/ 10,639		San Diego	Anna Tran Chief Operating Officer	Raquel Kravitz (916) 449-5105
CONTACT: Sabra Matovsky (619) 528-4817									
(Blue Cross #48 Deactivated 12/31/07)									
TOTAL GMC-MEDICAL (SAN DIEGO)					704,000/ 205,466				
TOTAL ENROLLMENT (PHP, PHP-DENTAL, COHS, SP, PCCM, 2-PLAN, GMC-MEDICAL-(SAC), GMC-MEDICAL (SD))					2,675,236/ 4,176,294				

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GEOGRAPHIC MANAGED CARE (GMC-DENTAL)									
<u>SACRAMENTO COUNTY (34)</u>									
Western Dental Svcs., Inc. (07-65806) A1 530 South Main Street Orange, CA 92863	#424	01/01/09	12/31/12		160,000/ 86,691		Sacramento	Charles S. Koch Vice President	Brian Nanoo (916) 464-3784
CONTACT: Kelly Duniven (714) 571-3488									
Access Dental Plan, Inc. (07-65802) 8890 Cal Center Drive Sacramento, CA 95826	#421	05/01/08	12/31/12		100,000/ 52,322		Sacramento	Reza Abbaszadeh Chief Executive Officer	Lenatte Blouin (916) 464-0379
CONTACT: Corina Lena (916) 563-6044									
Liberty Dental Plan (07-65805) 3200 El Camino Real, Ste. 290 Irvine, CA 92602	#425	05/01/08	12/31/12		100,000/ 27,681		Sacramento	Dr. Amir Neshat Chief Executive Officer	Lenatte Blouin (916) 464-0379
CONTACT: Dr. Amir Nehat (949)-223-8929									
Community Dental Services (07-65803) 2 MacArthur Place, Suite 700 Santa Ana, CA 92707	#426	05/01/08	12/31/12		90,000/ 12,399		Sacramento	Susan Klarner	Brian Nanoo (916) 464-3784
CONTACT: Carolyn Miller (714)-708-5360									
Health Net of CA dba: CA Children Svcs. (07-65804) address unknown	#427	07/01/08	12/31/12		0/ 18,357		Sacramento		Brian Nanoo (916) 464-3784
CONTACT: unknown									
TOTAL GMC-DENTAL					450,000/ 197,450				

Capitation report updated by Susan Carey-Myers (916) 449-5045.
Please notify her if there are any corrections.