

<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									
MARIN COUNTY (21)									
KP CAL LLC (NorCal) (03-75341), A13 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Andrea Boughton (626) 421-8733	#81	10/01/09	12/31/11	FAMILY	\$115.40	734/ 861	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				
MARIN COUNTY (21)									
KP CAL LLC (NorCal) (03-75341), A13 1800 Harrison Street, 25th Floor Oakland, CA 94512 CONTACT: Andrea Boughton (626) 421-8733	#81	10/01/09	12/31/11	MEDICARE PART D		734/ 169	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/ 1030			\$187,094.12

(Note: HCP #87, Rolled over to COHS (Partnership of CA HCP #513) became effective in Sonoma Co. 49)
 Plan Deactivated 10/01/09)

(Note: Terminate HCP 081, KP Cal LLC Kaiser in Marin County effective 07/01/2011. will roll over to Marin Plan Partnership Health Plan of CA, HCP 510.

TOTAL PHP

4,316/ 1,030 \$187,094.12

<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), A8 8890 Cal Center Drive Sacramento, CA 95826	#409	01/01/10	06/30/11	Over 21 years old						unlimited/ 18,718	\$48,292.44	Los Angeles	Reza Abbaszadeh	Lenatte Blouin (916) 464-0379				
				FAMILY	\$2.58													
				AGED	\$2.58													
				BLIND/DISABLED	\$2.58													
				Under 21 years old														
				FAMILY	\$11.16			130,172	\$1,452,719.52									
				AGED	\$11.16													
				BLIND/DISABLED	\$11.16													
				MI CHILD	\$11.16													
				MI ADULT	\$11.16													
CONTACT: Terri Abbaszadeh (916) 563-6020																		
American Health Guard Corp. (05-45698), A5 30 East Santa Clara, Suite D Arcadia, CA 91006	#410	01/01/10	06/30/11	Over 21 years old						unlimited/ 2,468	\$6,367.44	Los Angeles	David Kutner	Abigail Aban (916) 464-0390				
				FAMILY	\$2.58													
				AGED	\$2.58													
				BLIND/DISABLED	\$2.58													
				Under 21 years old														
				FAMILY	\$11.16			7,384	\$82,405.44									
				AGED	\$11.16													
				BLIND/DISABLED	\$11.16													
				MI CHILD	\$11.16													
				MI ADULT	\$11.16													
CONTACT: Rod Zalunardo (626) 821-5500																		
Safeguard Health Plans Inc. (05-45701), A5 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#406	01/01/10	06/30/11	Over 21 years old						unlimited/ 8,215	\$21,194.70	Los Angeles	Paula Lopez	Lenatte Blouin (916) 464-0379				
				FAMILY	\$2.58													
				AGED	\$2.58													
				BLIND/DISABLED	\$2.58													
				Under 21 years old														
				FAMILY	\$11.16			11,027	\$123,061.32									
				AGED	\$11.16													
				BLIND/DISABLED	\$11.16													
				MI CHILD	\$11.16													
				MI ADULT	\$11.16													
CONTACT: Paula Lopez, Director State Gov Programs (949) 425-4518																		
Health Net Community Solutions, Inc. (05-45703), A6 11971 Foundation Place, Bldg D Rancho Cordova, CA 95670-4502	#405	01/01/10	06/30/11	Over 21 years old						unlimited/ 17,912	\$46,212.96	Los Angeles	David Meadows	Brian Nanoo (916) 464-3784				
				FAMILY	\$2.58													
				AGED	\$2.58													
				BLIND/DISABLED	\$2.58													
				Under 21 years old														
				FAMILY	\$11.16			26,186	\$292,235.76									
				AGED	\$11.16													
				BLIND/DISABLED	\$11.16													
				MI CHILD	\$11.16													
				MI ADULT	\$11.16													
CONTACT: Eileen McGee-Davidson (909) 890-4129																		

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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)											
Care 1st Health Plan (05-45702), A6 601 Potrero Grande Drive Monterey Park, CA 91755 CONTACT: Walter Gray (323) 889-6638	#403	01/01/10	06/30/11	Over 21 years old		unlimited/ 5,786	Los Angeles	Dr. George Weingarter Medical Director	Abigail Aban (916) 464-0390		
				FAMILY	\$2.58					\$14,927.88	
				AGED	\$2.58						
				BLIND/DISABLED	\$2.58						
				Under 21 years old						10,362	\$115,639.92
				FAMILY	\$11.16						
				AGED	\$11.16						
				BLIND/DISABLED	\$11.16						
				MI CHILD	\$11.16						
				MI ADULT	\$11.16						
% OF POV	\$11.16										
BCCTP	\$11.16										
Over 21 years old		unlimited/ 20,327	Los Angeles	Samuel H. Gruenbaum President/CEO	Brian Nanoo (916) 464-3784						
FAMILY	\$2.58										
AGED	\$2.58										
BLIND/DISABLED	\$2.58										
Under 21 years old						32,823	\$366,304.68				
FAMILY	\$11.16										
AGED	\$11.16										
BLIND/DISABLED	\$11.16										
MI CHILD	\$11.16										
MI ADULT	\$11.16										
% OF POV	\$11.16										
BCCTP	\$11.16										
Over 21 years old		Unlimited/ 3,378	Los Angeles	Amir Neshat, DDS President/CEO	Lenatte Blouin (916) 464-0379						
FAMILY	\$2.58										
AGED	\$2.58										
BLIND/DISABLED	\$2.58										
Under 21 years old						4,380	\$48,880.80				
FAMILY	\$11.16										
AGED	\$11.16										
BLIND/DISABLED	\$11.16										
MI CHILD	\$11.16										
MI ADULT	\$11.16										
% OF POV	\$11.16										
BCCTP	\$11.16										
Over 21 years old		Unlimited/ 1,412	Los Angeles	Joseph Sivori President	Brian Nanoo (916) 464-3784						
FAMILY	\$2.58										
AGED	\$2.58										
BLIND/DISABLED	\$2.58										
Under 21 years old						2,103	\$23,469.48				
FAMILY	\$11.06										
AGED	\$11.16										
BLIND/DISABLED	\$11.16										
MI CHILD	\$11.16										
MI ADULT	\$11.16										
% OF POV	\$11.16										
BCCTP	\$11.16										
LOS ANGELES				SUBTOTAL	Over 21 yrs. old			78,216	201,797.28		
				SUBTOTAL	Under 21 yrs. old			224,437	2,504,716.92		

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RIVERSIDE COUNTY (33)														
Western Dental Services, Inc. (05-45704), A6 530 South Main Street, Sixth Floor Orange, CA 92863 CONTACT: Kelley Duniven (714) 571-3488	#414	01/01/10	06/30/11	Over 21 years old						Riverside	Samuel H. Gruenbaum President/CEO	Brian Nanoo (916) 464-3784		
				FAMILY	\$2.58	unlimited/ 51	\$131.58							
				AGED	\$2.58									
				BLIND/DISABLED	\$2.58									
				Under 21 years old									70	\$781.20
				FAMILY	\$11.16									
				AGED	\$11.16									
				BLIND/DISABLED	\$11.16									
				MI CHILD	\$11.16									
				MI ADULT	\$11.16									
% OF POV	\$11.16													
BCCTP	\$11.16													
Safeguard Health Plans, Inc. (05-45701), A5 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605 CONTACT: Paula Lopez, Director State Gov Programs (949) 425-4518	#407	01/01/10	06/30/11	Over 21 years old						Riverside	Paula Lopez Director State Gov	Lenatte Blouin (916) 464-0379		
				FAMILY	\$2.58	unlimited/ 27	\$69.66							
				AGED	\$2.58									
				BLIND/DISABLED	\$2.58									
				Under 21 years old									30	\$334.80
				FAMILY	\$11.16									
				AGED	\$11.16									
				BLIND/DISABLED	\$11.16									
				MI CHILD	\$11.16									
				MI ADULT	\$11.16									
% OF POV	\$11.16													
BCCTP	\$11.16													
RIVERSIDE COUNTY				SUBTOTAL	Over 21 yrs. old	78	\$201.24							
				SUBTOTAL	Under 21 yrs. old	100	\$1,116.00							

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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)											
Western Dental Services, Inc. (05-45704), A6 530 South Main Street, Sixth Floor Orange, CA 92863 CONTACT: Kelley Duniven (714) 571-3488	#415	01/01/10	06/30/11	Over 21 years old		unlimited/ 138	San Bernardino	Samuel H. Gruenbaum President/CEO	Brian Nanoo (916) 464-3784		
				FAMILY	\$2.58					\$356.04	
				AGED	\$2.58						
				BLIND/DISABLED	\$2.58						
				Under 21 years old						90	\$1,004.40
				FAMILY	\$11.16						
				AGED	\$11.16						
				BLIND/DISABLED	\$11.16						
				MI CHILD	\$11.16						
				MI ADULT	\$11.16						
% OF POV	\$11.16										
BCCTP	\$11.16										
Over 21 years old		unlimited/ 57	San Bernardino	Dr. Gorge Weingartenf Medical Director	Abbigail Aban (916) 464-0390						
FAMILY	\$2.58										
AGED	\$2.58										
BLIND/DISABLED	\$2.58										
Under 21 years old						38	\$424.08				
FAMILY	\$11.16										
AGED	\$11.16										
BLIND/DISABLED	\$11.16										
MI CHILD	\$11.16										
MI ADULT	\$11.16										
% OF POV	\$11.16										
BCCTP	\$11.16										
Over 21 years old		unlimited/ 187	San Bernardino	Paula Lopez	Lenatte Blouin (916) 464-0379						
FAMILY	\$2.58										
AGED	\$2.58										
BLIND/DISABLED	\$2.58										
Under 21 years old						167	\$1,863.72				
FAMILY	\$11.16										
AGED	\$11.16										
BLIND/DISABLED	\$11.16										
MI CHILD	\$11.16										
MI ADULT	\$11.16										
% OF POV	\$11.16										
BCCTP	\$11.16										
**Rates do not reflect Hyde abortion rates effective August 2003											
SAN BERNARDINO COUNTY	SUBTOTAL			OVER 21	Over 21 yrs. old			382			\$985.56
	SUBTOTAL			UNDER 21	Under 21 yrs. old	295			\$3,292.20		
	TOTAL PHP (DENTAL)			OVER 21		78,676			\$202,984.08		
	TOTAL PHP (DENTAL)			UNDER 21		224,832			\$2,509,125.12		
	TC TOTAL PHP (DENTAL)					303,508			\$2,712,109.20		

<u>Plan Name and Contract Number</u>	<u>Code No.</u>	<u>Effective Date</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/Currency</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>									
COUNTY COHS																		
<u>NAPA COUNTY (28)</u>																		
Solano-Napa County Commission on Medical Care dba Partnership Health Plan of California (08-85215) A6 360 Campus Lane, Suite 100 Fairfield, CA 94534-4036	#507	01/01/11	12/31/13	FAMILY/MI CHILD	\$190.05	N/A/ 11,395	\$3,079,287.51	Solano-Napa	Jack Horn	Acting: Jane Marine (916) 449-5113								
				AGED	\$478.54													
				DISABLED/BLIND	\$893.60													
				LTC	\$4,801.23													
				MI ADULT	\$190.05													
				REFUGEES/% POV	\$190.05													
				BCCTP	\$1,595.64													
				OBRA	\$304.72													
				<u>MEDICARE PART D</u>														
				AGED	\$187.30						NA/ 3,034	\$1,702,697.77						
				DISABLED/BLIND	\$234.40													
				LTC	\$3,773.91													
				OBRA	\$304.72													
CONTACT: Jack Horn (707) 863-4261																		
<u>ORANGE COUNTY (30)</u>																		
Orange County Organized Health System dba CalOptima (08-85214) A5 1120 West La Veta Ave, 5th Floor Orange, CA 92868-4220	#506	01/01/11	12/31/13	FAMILY/MI CHILD	\$124.45	N/A/ 306,043	\$66,918,522.40	Orange	Richard Chambers	Acting: Jane Marine (916) 449-5113								
				AGED	\$420.88													
				DISABLED/BLIND	\$873.86													
				LTC	\$6,418.41													
				MI ADULT	\$124.45													
				REFUGEES/% POV	\$124.45													
				BCCTP	\$1,417.71													
				<u>MEDICARE PART D</u>														
				AGED	\$174.18						NA/ 72,256	\$29,522,259.50						
				DISABLED/BLIND	\$249.12													
				LTC	\$4,254.86													
				CONTACT: Richard Chambers (714) 246-8458														
				<u>SAN LUIS OBISPO COUNTY (40)</u>														
SBSLORHA/SLO Santa Barbara San Luis Obispo Regional Health Authority dba CenCal Health (08-85212) A5 110 Castillian Dr. Goleta, CA 93117	#501	01/01/11	12/31/11	FAMILY/MI CHILD	\$123.15	N/A/ 23,841	\$5,508,680.18	Santa Luis Obispo	Lyle Lyman	O.Z. Kamara (916) 449-5084								
				AGED	\$497.19													
				DISABELED/BLIND	\$764.70													
				LTC	\$6,811.85													
				MI ADULT	\$123.15													
				REFUGEES/% POV	\$123.15													
				BCCTP	\$1,333.04													
				AIDS	\$2,977.94													
				<u>MEDICARE PART D</u>														
				AGED	\$175.50						NA/ 5,807	\$2,852,459.23						
				DISABLED/BLIND	\$145.64													
				LTC	\$4,263.10													
				AIDS	\$314.01													
CONTACT: Bob Freeman (805) 685-9525																		

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COUNTY COHS									
<u>SAN MATEO COUNTY (41)</u>									
San Mateo Health Commission dba Health Plan of San Mateo (08-85213) A7 701 Gateway Blvd., Suite 400 South San Francisco, CA 94080	#503	01/01/11	12/31/13	FAMILY/MI CHILD \$178.58 AGED \$645.48 DISABLED/BLIND \$1,233.71 LTC \$6,353.90 MI ADULT \$178.58 REFUGEES/% POV \$178.58 BCCTP \$1,544.40 AIDS \$3,842.06 AGNEWS \$3,148.87	N/A/ 44,652	\$15,863,948.38	San Mateo	Maya Altman	Chrissy Corbin (916) 449-5094
				<u>MEDICARE PART D</u>					
				AGED \$343.94 DISABLED/BLIND \$384.48 LTC \$6,581.50 AIDS \$355.84 AGNEWS \$1,004.78	NA/ 15,415	\$11,782,529.74			
CONTACT: Maya Altman (650) 616-2145									
<u>SANTA BARBARA COUNTY (42)</u>									
SBSLORHA Santa Barbara Regional Health Authority dba CenCal Health Initiative (08-85212) A5 110 Castillian Dr. Goleta, CA 93117-3028	#502	01/01/11	12/31/11	FAMILY/MI CHILD \$143.90 AGED \$533.95 DISABELED/BLIND \$855.66 LTC \$8,100.86 MI ADULT \$143.90 REFUGEES/% POV \$143.90 BCCTP \$1,365.49 AIDS \$2,943.11	N/A/ 55,260	\$12,282,101.20	Santa Barbara	Lyle Lyman	O. Z. Kamara (916) 449-5084
				<u>MEDICARE PART D</u>					
				AGED \$199.11 DISABLED/BLIND \$186.69 LTC \$5,412.45 AIDS \$310.68	NA/ 9,916	\$5,092,691.99			
CONTACT: Bob Freeman (805) 685-9525 ext 1011									
<u>SANTA CRUZ COUNTY (44)</u>									
Santa Cruz-Monterey Managed medical Care Commission dba Central California Alliance for Health (08-85216) A6 1600 Green Hills Road Scotts Valley, CA 95066-9998	#505	01/01/11	12/31/13	FAMILY/MI CHILD \$151.54 AGED \$549.96 DISABELED/BLIND \$888.70 LTC \$6,258.60 MI ADULT \$151.54 REFUGEES/% POV \$151.54 BCCTP \$1,380.81	N/A/ 29,983	\$7,515,520.85	Santa Cruz-Monterey	Alan McKay	Jane Marine (916) 449-5113
				<u>MEDICARE PART D</u>					
				AGED \$216.66 DISABLED/BLIND \$198.76 LTC \$4,575.59	NA/ 6,297	\$3,086,006.00			
CONTACT: Alan McKay (831) 457-3850 ext. 4330									

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COUNTY COHS									
<u>SOLANO COUNTY (48)</u>									
Solano-Napa County Commission on Medical Care dba Partnership Health Plan of California (08-85215) A6 360 Campus Lane, Suite 100 Fairfield, CA 94534-4036	#504	1/1/2011	12/31/13	FAMILY/MI CHILD \$174.94 AGED \$551.97 DISABELED/BLIND \$862.18 LTC \$5,898.38 MI ADULT \$174.94 REFUGEES/% POV \$174.94 BCCTP \$1,410.12 OBRA \$298.85	NA/ 52,112	\$14,952,862.46	Solano-Napa	Jack Horn	Acting: Jane Marine (916) 449-5113
				<u>MEDICARE PART D</u> AGED \$208.26 DISABLED/BLIND \$229.36 LTC \$4,667.25 OBRA \$298.85	NA/ 10,360	\$4,123,278.60			
CONTACT: Jack Horn (707) 863-4261									
<u>SONOMA COUNTY (49)</u>									
Sonoma County Partnership Health Plan of CA dba: (08-85215, A6 ADDRESS ?? Note: KP CAL LLC NorCal) #87 (03-75341 rolled over to #513 effective 10/2/2009.	#513	01/01/11	12/31/13	FAMILY/MI CHILD \$119.21 AGED \$671.07 DISABELED/BLIND \$893.72 LTC \$5,118.71 MI ADULT \$119.21 REFUGEES/% POV \$119.21 BCCTP \$940.23 OBRA \$0.00	N/A/ 41,872	\$10,169,235.66	Sonoma	Lyle Luman	Acting: Jane Marine (916) 449-5113
				<u>MEDICARE PART D</u> AGED \$272.06 DISABLED/BLIND \$181.50 LTC \$3,847.43 OBRA \$0.00	NA/ 11,121	\$7,188,171.57			
CONTACT:									
<u>VENTURA COUNTY (56)</u>									
Ventura County Gold Coast Health Plan dba: (contract ? 220 Gonzales Road, Suite 200 Oxnard, CA 93035 Note: KP CAL LLC NorCal) #87 (03-75341 rolled over to #513 effective 10/2/2009.	#515	07/01/11	00/00/00	FAMILY/MI CHILD \$0.00 AGED \$0.00 DISABELED/BLIND \$0.00 LTC \$0.00 MI ADULT \$0.00 REFUGEES/% POV \$0.00 BCCTP \$0.00 OBRA \$0.00	N/A/ 0	\$0.00	Ventura		
				<u>MEDICARE PART D</u> AGED \$0.00 DISABLED/BLIND \$0.00 LTC \$0.00 OBRA \$0.00	NA/ 0	\$0.00			
CONTACT:									

<u>Plan Name and</u>	<u>Code</u>	<u>Effective</u>	<u>Term Date</u>	<u>Rates</u>	<u>Maximum/ Current</u>	<u>Capitation Due</u>	<u>Area</u>	<u>Contractor</u>	<u>Contract Manager</u>	
COUNTY COHS										
<u>YOLO COUNTY (57)</u>										
Solano-Napa County	#509	01/01/11	12/31/13	FAMILY/MICHILD	\$149.10	N/A/ 22,616		Jack Horn	Acting: Jane Marine (916) 449-5113	
Commission on Medical Care				AGED	\$581.08					
dba Partnership Health Plan				DISABELED/BLIND	\$1,003.56					
of California				LTC	\$6,313.03					
(08-85215) A6				MI ADULT	\$149.10					
360 Campus Lane, Suite 100				REFUGEES/FAMIL'	\$149.10					
Fairfield, CA 94534-4036				BCCTP	\$1,297.90					
				OBRA	\$272.39					
				<u>MEDICARE PART D</u>		NA/ 4,936				
				AGED	200.41					
				DISABLED/BLIND	248.25					
				LTC	4268.74					
				OBRA	272.39					
TOTAL COUNTY COHS						N/A/ 876,334	\$246,505,617.05			

CONTACT: Jack Horn (707) 863-4100

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

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SPECIAL PROJECTS									
ALAMEDA COUNTY (01)									
MEDICAL ONLY									
On Lok Senior Health Services #56 dba On Lok Lifeways (07-65707) A2 1333 Bush Street San Francisco, CA 94109 CONTACT: Sue Wang (209) 292-8883		01/01/09	12/31/12	FAMILY/AGED/REF. \$5,777.18 DISA/LTC/AIDS \$5,777.18	1,600/ 4	\$23,108.72	Fremont	Robert Edmondson	Joseph Billingsley (916) 440-7532
MEDICARE PART D									
On Lok Senior Health Services #56 dba On Lok Lifeways (07-65707) A2 1333 Bush Street San Francisco, CA 94109 CONTACT: Sue Wang (209) 292-8883		01/01/09	12/31/12	FAMILY/AGED/REF. \$4,222.47 DISA/LTC/AIDS \$4,222.47	1,600/ 87	\$367,354.89	Fremont	Robert Edmondson	Joseph Billingsley (916) 440-7532
MEDICAL ONLY									
Center for Elders #51 Independence (07-65708) A1 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150		01/01/09	12/31/12	FAMILY/AGED/REF. \$5,891.90 DISA/LTC/AIDS \$5,891.90	560/ 32	\$188,540.80	Oakland	Peter Szutu	Joel Weeden (916) 440-7545
MEDICARE PART D									
Center for Elders #51 Independence (07-65708) A1 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150		01/01/09	12/31/12	FAMILY/AGED/REF. \$4,322.76 DISA/LTC/AIDS \$4,322.76	560/ 428	\$1,850,141.28	Oakland	Peter Szutu	Joel Weeden (916) 440-7545
ALAMEDA COUNTY				SUBTOTAL	4,320/ 551	\$2,429,145.69			

<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>	
CONTRA COSTA COUNTY (07)										
MEDICAL ONLY										
Center for Elders Independence (07-65708) A1 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150	#54	01/01/09	12/31/12	FAMILY/AGED/REF.	\$5,891.90	560/ 8	\$47,135.20	Berkeley	Peter Szutu	Joel Weeden (916) 440-7545
				DISA/LTC/AIDS	\$5,891.90					
MEDICARE PART D										
Center for Elders Independence (07-65708) A1 1955 San Pablo Ave Oakland, CA 94612 CONTACT: Peter Szutu (510) 433-1150	#54	01/01/09	12/31/12	FAMILY/AGED/REF.	\$4,322.76	560/ 30	\$129,682.80	Berkeley	Peter Szutu	Joel Weeden (916) 440-7545
				DISA/LTC/AIDS	\$4,322.76					
CONTRA COSTA COUNTY				SUBTOTAL	1,120/ 38	\$176,818.00				

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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)									
MEDICARE PART D									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#200	01/01/09	12/31/12	AGED \$79.84 BLIND/DISABLED \$79.84	5,000/ 2,983	\$238,162.72	Los Angeles	David Schmidt	Joseph Billingsley (916) 440-7532
CONTACT: Becky Learner (562) 989-5143									
MEDICARE PART D									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#201	01/01/09	12/31/12	LTC \$958.81	5,000/ 1,716	\$1,645,317.96	Los Angeles	David Schmidt	Joseph Billingsley (916) 440-7532
CONTACT: Becky Learner (562) 989-5143									
MEDICAL ONLY									
Altamed Hlth Services Corp. dba: AltaMed Senior BuenaCare (07-65709) A1 500 Citadel Drive, Suite 490 Los Angeles, CA 90040	#052	07/01/08	12/31/12	FAMILY/AGED/REF. \$5,909.86 DISA/LTC/AIDS \$5,909.86	825/ 115	\$679,633.90	Los Angeles	Castulo de la Rocha	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Jennifer Spalding (323) 728-0411									
Altamed Hlth Services Corp. dba: Altamed Senior Buenacare (07-65709) A1 500 Citadel Drive, Suite 490 Los Angeles, CA 90040	#052	07/01/08	12/31/12	FAMILY/AGED/REF. \$3,393.99 DISA/LTC/AIDS \$3,393.99	825/ 686	\$2,328,277.14	Los Angeles	Castulo de la Rocha	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Jennifer Spalding (323) 728-0411									
LOS ANGELES COUNTY				SUBTOTAL	11,650/ 5,500	\$4,891,391.72			

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#204	01/01/09	12/31/12	MEDICARE PART D		5,000/ 960	\$69,888.00	Riverside	David Schmidt	Joseph Billingsley (916) 440-7532
				AGED	\$72.80					
CONTACT: Becky Learner (562) 989-5143										
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#205	01/01/09	12/31/12	MEDICARE PART D		5,000/ 648	\$609,184.80	San Bernardino	David Schmidt	Joseph Billingsley (916) 440-7532
				LTC	\$940.10					
CONTACT: Becky Learner (562) 989-5143										
RIVERSIDE COUNTY				SUBTOTAL		10,000/ 1,608	\$679,072.80			
<u>SACRAMENTO COUNTY (34)</u>										
Sutter Senior Care (07-65710) 7000 Franklin Blvd., Suite 1020 Sacramento, CA 95823	#50	04/01/08	12/31/12	MEDICAL ONLY		280/ (7)	(\$34,443.43)	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 440-7543
				FAMILY/AGED/REF.	\$4,920.49					
CONTACT: William Clearwater (916) 424-8412										
Sutter Senior Care (07-65710) 7000 Franklin Blvd., Suite 1020 Sacramento, CA 95823	#50	04/01/08	12/31/12	MEDICARE PART D		280/ 219	\$780,301.38	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 440-7543
				FAMILY/AGED/REF.	\$3,563.02					
CONTACT: William Clearwater (916) 424-8412										
SACRAMENTO COUNTY				SUBTOTAL		560/ 212	\$745,857.95			

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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>									
<u>MEDICARE PART D</u>									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#206	01/01/09	12/31/12	AGED \$83.65 BLIND/DISABLED \$83.65	5,000/ 599	\$50,106.35	Riverside	David Schmidt	Joseph Billingsley (916) 440-7532
CONTACT: Becky Learner (562) 989-5143									
<u>MEDICARE PART D</u>									
Scan Health Plan Senior Care (SCAN) Action Network (07-65712) A2 3780 Kilroy Airport Way, Suite 100 Long Beach, CA 90806	#207	01/01/09	12/31/12	LTC \$913.48	5,000/ 305	\$278,611.40	San Bernardino	David Schmidt	Joseph Billingsley. (916) 440-7532
CONTACT: Becky Learner (562) 989-5143									
SAN BERNARDINO COUNTY				SUBTOTAL	10,000/ 904	\$328,717.75			
<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/ 17	\$80,943.80	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Carol Hubbard (619) 677-3888									
<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/ 138	\$492,614.46	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 440-7543
CONTACT: Carol Hubbard (619) 677-3888									
SAN DIEGO COUNTY				SUBTOTAL	400/ 155	\$573,558.26			

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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 FRANCISCO COUNTY (38)									
MEDICAL ONLY									
OnLok Senior Health Services dba On Lok Lifeways (07-65707) A2 1333 Bush Street San Francisco, CA 94109	#55	01/01/09	12/31/12	FAMILY/AGED/REF. \$6,113.52 DISA/LTC/AIDS \$6,113.52	1600/ 29	\$177,292.08	San Francisco	Robert Edmondson	Joseph Billingsley (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
MEDICARE PART D									
OnLok Senior Health Services, dba On Lok Lifeways (07-65707) A2 1333 Bush Street San Francisco, CA 94109	#55	01/01/09	12/31/12	FAMILY/AGED/REF. \$4,399.81 DISA/LTC/AIDS \$4,399.81	1600/ 854	\$3,757,437.74	San Francisco	Robert Edmondson	Joseph Billingsley (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
MEDICAL ONLY									
San Francisco City & County Dept. of Public Health dba Family Mosaic Project 07-65815 A2 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/ 106	\$195,967.50	San Francisco	Miriam Martinez, Director	DHI Sunita Kapoor (916) 449-5104
MEDICARE PART D									
				FAMILY/AGED/REF. \$1,848.75 DISA/LTC/AIDS \$1,848.75	500/ 3	\$5,546.25			
CONTACT: Gary Zombalt (415) 206-7600									
SAN FRANCISCO COUNTY				SUBTOTAL	3700/ 992	\$4,136,243.57			
SANTA CLARA COUNTY (43)									
MEDICAL ONLY									
On Lok Senior Health Services, dba: On Lok Lifeways For PACE 07-65707, A2 1333 Bush Street San Francisco, CA 94109-5611	#58	01/01/09	12/31/12	FAMILY/AGED/REF. 5,334.20 DISA/LTC/AIDS 5,334.20	1600/ 4	\$21,336.80	San Jose	Robert Edmondson	Joseph Billingsley (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
MEDICARE PART D									
On Lok Senior Health Services, dba: On Lok Lifeways For PACE 07-65707, A2 1333 Bush Street San Francisco, CA 94109-5611	#58	01/01/09	12/31/12	FAMILY/AGED/REF. 4028.58 DISA/LTC/AIDS 4028.58	1600/ 71	\$286,029.18	San Jose	Robert Edmondson	Joseph Billingsley (916) 440-7532
CONTACT: Sue Wong (415) 292-8720									
SANTA CLARA COUNTY				SUBTOTAL	3,200/ 75	\$307,365.98			

<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>
YOLO COUNTY (57)									
MEDICAL ONLY									
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	\$0.00	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 (Deactive 03/01/2011)	#53	04/01/08	12/31/12	MEDICARE PART D FAMILY/AGED/REF. 3,563.02 DISA/LTC/AIDS 3,563.02	280/ 0	\$0.00	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 440-7543
CONTACT: William Clearwater (916) 424-8412									
YOLO COUNTY				SUBTOTAL		<u>280/ 0</u>	<u>\$0.00</u>		
TOTAL SPECIAL PROJECT						<u>45,230/ 10,035</u>	<u>\$14,268,171.72</u>		

<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>
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PCCM

LOS ANGELES COUNTY (19)

AIDS Healthcare Foundation (01-16349) A-14 6255 W. Sunset Blvd., 16th Floor Los Angeles, CA 90028-7403	#915	01/01/10	12/31/11	Public Assistance						
				FAMILY	\$103.27	2,000/ 438	\$264,019.06	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

MEDICARE PART D

AIDS Healthcare Foundation (01-16349) A-14 6255 W. Sunset Blvd., 16th floor Los Angeles, CA 90028-7403	#915	01/01/10	12/31/11	Public Assistance						
				FAMILY	\$103.27	2,000/ 350	\$117,102.92	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/ 788

\$381,121.98

TOTAL PCCM

4,000/ 788

\$381,121.98

<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>									
2-PLAN																		
ALAMEDA COUNTY (01)																		
Alameda Alliance for Health (04-35399), A10a, C12 1240 South Loop Road Alameda, CA 94502 CONTACT: Ingrid Lamirault (510) 747-4500	#300	01/01/11	12/31/11	FAMILY	\$124.37	180,000/ 98,999	\$15,853,184.83	Alameda	David Kears	Mary Cobb (916) 341-7035								
				AGED	\$525.14													
				DISABLED	\$525.14													
				MI ADULT	\$124.37													
				REFUGEES	\$124.37													
				AIDS	\$825.52													
				BCCTP	\$807.71													
				AGNEWS	\$2,930.25													
				MEDICARE PART D														
				FAMILY	\$124.37						180,000/ 6,000	\$818,506.40	Alameda	David Kears	Mary Cobb (916) 341-7035			
AGED	\$134.31																	
DISABLED	\$139.61																	
MI ADULT	\$124.37																	
REFUGEES	\$124.37																	
AIDS	\$208.03																	
BCCTP	\$807.71																	
MATERNITY	\$6,345.81																	
AGNEWS	\$977.28																	
Anthem Blue Cross Partnership Plan (03-76184), A14a, C11 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Daniel Barzman (626) 405-6996	#340	01/01/11	03/31/12	FAMILY	\$120.72	unlimited/ 28,244	\$4,244,431.51	California	Mark Lewis (916) 449-5061									
				AGED	\$563.03													
				DISABLED	\$563.03													
				MI ADULT	\$120.72													
				REFUGEES/FAMILY	\$120.72													
				AIDS	\$853.97													
				BCCTP	\$739.89													
				MEDICARE PART D														
				FAMILY	\$120.72					unlimited/ 764	\$94,413.72	California	Mark Lewis (916) 449-5061					
				AGED	\$108.63													
DISABLED	\$130.95																	
MI ADULT	\$120.72																	
REFUGEES/FAMILY	\$120.72																	
AIDS	\$198.25																	
BCCTP	\$739.89																	
MATERNITY	\$6,345.81																	
ALAMEDA COUNTY					SUBTOTAL		360,000/ 134,007	\$21,010,536.46										

<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>							
CONTRA COSTA COUNTY (07)																
County of Contra Costa Contra Costa Hlth Plan (04-36067), A8a, C11, 595 Center Avenue, Suite 100 Martinez, CA 94553 CONTACT: Milton Camhi (925) 313-6004	#301	01/01/11	12/31/11	FAMILY	\$130.13	unlimited/ 61,013	\$9,691,393.81	County of Contra Costa	Jonathan Prince (916) 449-3589							
				AGED	\$519.08											
				DISABLED	\$519.08											
				MI ADULT	\$130.13											
				REFUGEES/FAMILY	\$130.13											
				AIDS	\$879.66											
				BCCTP	\$768.60											
				MEDICARE PART D												
				FAMILY	\$130.13					unlimited/ 2,566	\$371,339.18	County of Contra Costa	Jonathan Prince (916) 449-3589			
				AGED	\$130.59											
				DISABLED	\$154.21											
				MI ADULT	\$130.13											
REFUGEES/FAMILY	\$130.13															
AIDS	\$202.06															
BCCTP	\$768.60															
MATERNITY	\$5,795.09															
CONTRA COSTA COUNTY																
Anthem Blue Cross Partnership Plan (03-76184), A14a, C11 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Laura Linebach (805) 384-7876	#344	01/01/11	03/31/12	FAMILY	\$109.83	unlimited/ 11,545	\$1,466,386.65	Contra Costa	Blue Cross of California Marc Lewis (916) 449-5061							
				AGED	\$415.53											
				DISABLED	\$415.53											
				MI ADULT	\$109.83											
				REFUGEES/FAMILY	\$109.83											
				AIDS	\$899.06											
				BCCTP	\$777.44											
				MEDICARE PART D												
				FAMILY	\$109.83					unlimited/ 231	\$29,240.48	Contra Costa	Blue Cross of California Marc Lewis (916) 449-5061			
				AGED	\$111.49											
				DISABLED	\$139.66											
				MI ADULT	\$109.83											
REFUGEES/FAMILY	\$109.83															
AIDS	\$198.29															
BCCTP	\$777.44															
MATERNITY	\$5,795.09															
CONTRA COSTA COUNTY																
SUBTOTAL					unlimited/ 75,355	\$11,558,360.12										

<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>
FRESNO COUNTY (10)									
Anthem Blue Cross of CA Partnership Plan, Inc. (03-76184), A14a ,C11 5151-A Camino Ruiz Camarillo, CA 93012	#341	01/01/11	06/30/11	FAMILY \$99.41 AGED \$537.48 DISABLED \$537.48 MI ADULT \$99.41 REFUGEES/FAMILY \$99.41 AIDS \$946.19 BCCTP \$779.03	unlimited/ 1,768	\$133,702.16	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061
CONTACT: Cindy Metcho (805) 384-7662									
Anthem Blue Cross of CA Partnership Plan, Inc. (03-76184,) A14a ,C11 5151-A Camino Ruiz Camarillo, CA 93012	#341	01/01/11	06/30/11	MEDICARE PART D FAMILY \$99.41 AGED \$118.12 DISABLED \$140.12 MI ADULT \$99.41 REFUGEES/FAMILY \$99.41 AIDS \$197.45 BCCTP \$779.03 MATERNITY \$5,819.44	unlimited/ 116	\$14,929.40	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061
(Note: Deactive HCP #341 03/01/11, roll over to 362 Contract (10-87049) CONTACT: Cindy Metcho (805) 384-7662									
Anthem Blue Cross of CA Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012	#362	03/01/11	02/29/16	FAMILY \$99.56 AGED \$545.56 DISABLED \$545.56 MI ADULT \$99.56 REFUGEES/FAMILY \$99.56 AIDS \$955.14 BCCTP \$786.22	unlimited/ 78,325	\$9,712,374.96	Fresno	Blue Cross of California	
CONTACT:									
Anthem Blue Cross of CA Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012	#362	03/01/11	02/29/16	MEDICARE PART D FAMILY \$99.56 AGED \$118.48 DISABLED \$140.46 MI ADULT \$99.56 REFUGEES/FAMILY \$99.56 AIDS \$199.04 BCCTP \$786.22 MATERNITY \$5,819.44	unlimited/ 2,231	\$292,063.08	Fresno	Blue Cross of California	
(Note: Deactive HCP #341 rolls over 10/01/10, to 362 Contract (10-87049) CONTACT:									
Fresno-Kings-Madera Regional # #315 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721		03/01/11	02/29/16	FAMILY \$97.87 AGED \$428.09 DISABLED \$428.09 MI ADULT \$97.87 REFUGEES/FAMILY \$97.87 AIDS \$896.65 BCCTP \$741.05	unlimited/ 124,229	\$13,812,487.31	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061
CONTACT: (559) 445-3461									
Fresno-Kings-Madera Regional # #315 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721		03/01/11	02/29/16	MEDICARE PART D FAMILY \$97.87 AGED \$112.76 DISABLED \$110.04 MI ADULT \$97.87 REFUGEES/FAMILY \$97.87 AIDS \$199.74 BCCTP \$741.05 MATERNITY \$5,819.44	unlimited/ 1,784	\$162,436.90	Fresno	Blue Cross of California	Marc Lewis (916) 449-5061
CONTACT: (559) 445-3461									

<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>							
FRESNO COUNTY (10)																
Health Net Community Solutions, Inc. (03-76182), A12, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#351	01/01/11	06/30/11	FAMILY	\$97.84	unlimited/ 3,194	Fresno	Health Net	Myreca Singh (916) 449-5057							
				AGED	\$424.15											
				DISABLED	\$424.15											
				MI ADULT	\$97.84											
				REFUGEES/FAMILY	\$97.84											
				AIDS	\$891.32											
				BCCTP	\$737.83											
				MEDICARE PART D												
				FAMILY	\$97.84					unlimited/ 133	Fresno	Health Net	\$14,207.38	Myreca Singh (916) 449-5057		
				AGED	\$112.54											
DISABLED	\$109.72															
MI ADULT	\$97.84															
REFUGEES/FAMILY	\$97.84															
AIDS	\$198.73															
BCCTP	\$737.83															
MATERNITY	\$5,819.44															
FRESNO COUNTY					unlimited/ 211,780	\$24,423,062.71										
SUBTOTAL																

(Note: Deactive HCP# 351, 03/01/11, rolls over to HCP#363 (contract #10-87049) Blue Cross of CA, dba: Partnership Plan, Inc. Eff 03/01/11, Term 02/29/16, address: 5151-A Camino Ruiz, Camarillo, CA 93012, telephone (805) 384-3511

<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>KERN COUNTY (15)</u>										
Health Net Community Solutions, Inc. (03-76182) A12a, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#360	01/01/11	06/30/11	FAMILY	\$107.24	unlimited/ 33,026	\$4,112,411.50	Kern	Health Net	Myreca Singh (916) 449-5057
				AGED	\$470.21					
				DISABLED	\$470.21					
				MI ADULT	\$107.24					
				REFUGEES/FAMILY	\$107.24					
				AIDS	\$887.18					
				BCCTP	\$750.33					
<u>MEDICARE PART D</u>										
Health Net Community Solutions, Inc. (03-76182) A12a, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#360	01/01/11	06/30/11	FAMILY	\$107.24	unlimited/ 665	\$80,396.88	Kern	Health Net	Myreca Singh (916) 449-5057
				AGED	\$108.94					
				DISABLED	\$128.08					
				MI ADULT	\$107.24					
				REFUGEES/FAMILY	\$107.24					
				AIDS	\$195.52					
				BCCTP	\$750.33					
MATERNITY	\$5,648.68									
Kern Health Systems dba Kern Family Health Care 03-76165, A10a, C12 9700 Stockdale Highway Bakersfield, CA 93311-3617 CONTACT: Carol Sorrell (661) 391-4006	#303	01/01/11	12/31/11	FAMILY	\$94.24	115,000/ 108,390	\$12,092,880.04	Kern	Kern Health Systems	Jonathan Prince (916) 445-3589
				AGED	\$443.84					
				DISABLED	\$443.84					
				MI ADULT	\$94.24					
				REFUGEES/FAMILY	\$94.24					
				AIDS	\$876.44					
				BCCTP	\$748.11					
<u>MEDICARE PART D</u>										
Kern Health Systems dba Kern Family Health Care 03-76165, A10a, C12 9700 Stockdale Highway Bakersfield, CA 93311-3617 CONTACT: Carol Sorrell (661) 391-4006	#303	01/01/11	12/31/11	FAMILY	\$94.24	115,000/ 2,010	\$254,920.15	Kern	Kern Health Systems	Jonathan Prince (916) 445-3589
				AGED	\$128.70					
				DISABLED	\$134.90					
				MI ADULT	\$94.24					
				REFUGEES/FAMILY	\$94.24					
				AIDS	\$195.91					
				BCCTP	\$748.11					
MATERNITY	\$5,648.68									
KERN COUNTY				SUBTOTAL		230,000/ 144,091	\$16,540,608.57			

<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>
KINGS COUNTY (16)									
Kings-Fresno-Madera Regional #316 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721 CONTACT: (559) 445-3461		03/01/11	02/29/16	FAMILY	\$103.96	unlimited/ 12,363	Kings		
				AGED	\$487.73				
				DISABLED	\$487.73				
				MI ADULT	\$103.96				
				REFUGEES/FAMILY	\$103.96				
				AIDS	\$887.98				
				BCCTP	\$774.89				
				MEDICARE PART D					
Kings -Fresno-Madera Regional #316 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721 CONTACT: (559) 445-3461		03/01/11	02/29/16	FAMILY	\$103.96	unlimited/ 152	Kings		
				AGED	\$111.96				
				DISABLED	\$130.53				
				MI ADULT	\$103.96				
				REFUGEES/FAMILY	\$103.96				
				AIDS	\$197.07				
				BCCTP	\$774.89				
				MATERNITY	\$6,104.12				
Anthen Blue Cross of CA #363 dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 383-1704 (Note: HCP #351 rools over to HCP# 363)		03/01/11	02/29/16	FAMILY	\$103.96	unlimited/ 8,397	Kings		
				AGED	\$487.73				
				DISABLED	\$487.73				
				MI ADULT	\$103.96				
				REFUGEES/FAMILY	\$103.96				
				AIDS	\$887.98				
				BCCTP	\$774.89				
				MEDICARE PART D					
Anthen Blue Cross of CA #363 dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 383-1704		03/01/11	02/29/16	FAMILY	\$103.96	unlimited/ 136	Kings		
				AGED	\$111.96				
				DISABLED	\$130.53				
				MI ADULT	\$103.96				
				REFUGEES/FAMILY	\$103.96				
				AIDS	\$197.07				
				BCCTP	\$774.89				
				MATERNITY	\$6,104.12				
KINGS COUNTY				SUBTOTAL		0/ 21,048		\$2,295,144.98	

<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. (03-76182), A12a, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#352	01/01/11	03/31/12	FAMILY	\$85.76	unlimited/ 439,805	\$42,764,597.38	Los Angeles	Health Net	Myreca Singh (916) 449-5057
				AGED	\$404.78					
				DISABLED	\$404.78					
				MI ADULT	\$85.76					
				REFUGEES/FAMILY	\$85.76					
				AIDS	\$927.12					
				BCCTP	\$750.20					
MEDICARE PART D										
Health Net Community Solutions, Inc. (03-76182), A12a, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#352	01/01/11	03/31/12	FAMILY	\$85.76	unlimited/ 6,060	\$650,165.16	Los Angeles	Health Net	Myreca Singh (916) 449-5057
				AGED	\$99.90					
				DISABLED	\$119.25					
				MI ADULT	\$85.76					
				REFUGEES/FAMILY	\$85.76					
				AIDS	\$186.55					
				BCCTP	\$750.20					
MATERNITY	\$5,656.38									
MEDICARE PART D										
LA Care Health Plan (04-36069), A7a, C11 555 W. Fifth Street, 19th Floor Los Angeles, CA 90013-3036 CONTACT: Howard Kahn (213) 694 -1250	#304	01/01/11	12/31/11	FAMILY	\$102.13	unlimited/ 852,514	\$97,757,242.99	Los Angeles	LA Care Health Plan	Mary Cobb (916) 341-7035
				AGED	\$437.50					
				DISABLED	\$437.50					
				MI ADULT	\$102.13					
				REFUGEES/FAMILY	\$102.13					
				AIDS	\$843.46					
				BCCTP	\$823.84					
MEDICARE PART D										
LA Care Health Plan (04-36069), A7a, C11 555 W. Fifth Street, 19th Floor Los Angeles, CA 90013-3036 CONTACT: Howard Kahn (213) 694 -1250	#304	01/01/11	12/31/11	FAMILY	\$102.13	unlimited/ 13,308	\$1,546,346.04	Los Angeles	LA Care Health Plan	Mary Cobb (916) 341-7035
				AGED	\$116.28					
				DISABLED	\$121.18					
				MI ADULT	\$102.13					
				REFUGEES/FAMILY	\$102.13					
				AIDS	\$201.61					
				BCCTP	\$823.84					
MATERNITY	\$5,656.38									
LOS ANGELES COUNTY				SUBTOTAL	unlimited/ 1,311,687	\$142,718,351.57				

<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>
MADERA COUNTY (20)									
Madera-Fresno-Kings Regional F #317 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721 CONTACT: (559) 445-3461		03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 15,466	\$1,621,162.29	Madera	Penny Farnell
				AGED	\$508.86				
				DISABLED	\$508.86				
				MI ADULT	\$100.50				
				REFUGEES/FAMILY	\$100.50				
				AIDS	\$888.65				
				BCCTP	\$775.47				
MEDICARE PART D									
Madera-Fresno-Kings Regional F #317 dba: CalViva (10-87050) 1315 Van Ness Avenue Fresno, CA 93721 CONTACT: (559) 445-3461		03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 145	\$16,169.07	Madera	Penney Farnell
				AGED	\$112.89				
				DISABLED	\$121.63				
				MI ADULT	\$100.50				
				REFUGEES/FAMILY	\$100.50				
				AIDS	\$197.07				
				BCCTP	\$775.47				
	MATERNITY	\$5,916.55							
Anthen Blue Cross of CA dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 383-1704	#364	03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 9,188	\$966,396.66	Madera	Penny Farnell
				AGED	\$508.86				
				DISABLED	\$508.86				
				MI ADULT	\$100.50				
				REFUGEES/FAMILY	\$100.50				
				AIDS	\$888.68				
				BCCTP	\$775.47				
MEDICARE PART D									
Anthen Blue Cross of CA dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 3831704	#364	03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 77	\$8,272.61	Madera	Penney Farnell
				AGED	\$112.89				
				DISABLED	\$121.63				
				MI ADULT	\$100.50				
				REFUGEES/FAMILY	\$100.50				
				AIDS	\$197.07				
				BCCTP	\$775.47				
	MATERNITY	\$5,916.55							
MADERA COUNTY				SUBTOTAL		unlimited/ 24,876	\$2,612,000.63		

<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>	
RIVERSIDE COUNTY (33)										
Inland Empire Health Plan #305 (04-35765), A9, C11 PO BOX 19026 San Bernardino, CA 92423-9026 CONTACT: Richard Bruno, CEO (909) 890-2000	#305	01/01/11	12/31/11	FAMILY	\$105.47	unlimited/ 194,700	\$23,769,952.26	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
				AGED	\$478.25					
				DISABLED	\$478.25					
				MI ADULT	\$105.47					
				REFUGEES/FAMILY	\$105.47					
				AIDS	\$866.01					
				BCCTP	\$745.17					
MEDICARE PART D										
Inland Empire Health Plan #305 (04-35765), A9, C11 PO BOX 19026 San Bernardino, CA 92423-9026 CONTACT: Richard Bruno, CEO (909) 890-2000	#305	01/01/11	12/31/11	FAMILY	\$105.47	unlimited/ 3,620	\$438,845.80	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
				AGED	\$102.12					
				DISABLED	\$133.27					
				MI ADULT	\$105.47					
				REFUGEES/FAMILY	\$105.47					
				AIDS	\$195.70					
				BCCTP	\$745.17					
MATERNITY	\$5,096.19									
Molina Healthcare of California #355										
Partner Plan, Inc. (06-55498), A8a, C8 200 Oceangate, Ste. 100 Long Beach, CA 90802-4317 CONTACT: Greg Hamblin, CFO (562) 435-3666 ext. 127028	#355	01/01/11	03/31/11	FAMILY	\$109.09	83,038/ 41,584	\$4,865,687.54	Riverside	Stephen T. O'Dell Molina, M.D.	Sarah Reed (916) 319-8517
				AGED	\$426.63					
				DISABLED	\$426.63					
				MI ADULT	\$109.09					
				REFUGEES/FAMILY	\$109.09					
				AIDS	\$864.62					
				BCCTP	\$735.80					
MEDICARE PART D										
Partner Plan, Inc. (06-55498), A8a, C8 200 Oceangate Ste. 100 Long Beach, CA 90802-4317 CONTACT: Greg Hamblin, CFO (562) 435-3666 ext. 127028	#355	01/01/11	03/31/11	FAMILY	\$109.09	83,038/ 451	\$55,190.69	Riverside	Stephen T. O'Dell Molina, M.D.	Sarah Reed (916) 319-8517
				AGED	\$108.77					
				DISABLED	\$136.76					
				MI ADULT	\$109.09					
				REFUGEES/FAMILY	\$109.09					
				AIDS	\$197.21					
				BCCTP	\$735.80					
MATERNITY	\$5,096.19									
RIVERSIDE COUNTY				SUBTOTAL		166,076/ 240,355	\$29,129,676.29			

<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 #306 (04-35765), A9, C11 PO BOX 19026 San Bernardino, CA 92423-9026 CONTACT: Richard Bruno, CEO (909) 890-2000	#306	01/01/11	12/31/11	FAMILY	\$107.05	unlimited/ 222,022	\$27,364,607.54	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
				AGED	\$471.09					
				DISABLED	\$471.09					
				MI ADULT	\$107.05					
				REFUGEES/FAMILY	\$107.05					
				AIDS	\$814.74					
				BCCTP	\$747.17					
MEDICARE PART D										
Inland Empire Health Plan #306 (04-35765), A9, C11 PO BOX 19026 San Bernardino, CA 92423-9026 CONTACT: Richard Bruno, CEO (909) 890-2000	#306	01/01/11	12/31/11	FAMILY	\$107.05	unlimited/ 3,878	\$495,252.59	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 319-9041
				AGED	\$112.49					
				DISABLED	\$138.74					
				MI ADULT	\$107.05					
				REFUGEES/FAMILY	\$107.05					
				AIDS	\$198.74					
				BCCTP	\$747.17					
MATERNITY	\$5,506.98									
Molina Healthcare of California #356										
Molina Healthcare of California #356 Partner Plan, Inc. (06-55498), A8a, C8 200 Oceangate Ste. 100. Long Beach, CA 90802-4317 CONTACT: George Goldstein (562) 435-3666	#356	01/01/11	03/31/11	FAMILY	\$106.71	136,332/ 57,469	\$6,733,212.00	San Bernardino	Joann Zarza-Garrido Molina, M.D.	Sarah Reed (916) 319-8517
				AGED	\$433.34					
				DISABLED	\$433.34					
				MI ADULT	\$106.71					
				REFUGEES/FAMILY	\$106.71					
				AIDS	\$863.23					
				BCCTP	\$767.45					
MEDICARE PART D										
Molina Healthcare of California #356 Partner Plan, Inc. (06-55498), A8a, C8 200 Oceangate Ste. 100. Long Beach, CA 90802-4317 CONTACT: George Goldstein (562) 435-3666	#356	01/01/11	03/31/11	FAMILY	\$106.71	136,332/ 702	\$88,977.34	San Bernardino	Joann Zarza-Garrido Molina, M.D.	Sarah Reed (916) 319-8517
				AGED	\$132.04					
				DISABLED	\$133.17					
				MI ADULT	\$106.71					
				REFUGEES/FAMILY	\$106.71					
				AIDS	\$197.15					
				BCCTP	\$767.45					
MATERNITY	\$5,506.98									
SAN BERNARDINO COUNTY				SUBTOTAL		272,664/ 284,071	\$34,682,049.47			

<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 FRANCISCO COUNTY (38)																		
Anthem Blue Cross Partnership #343 Plan (03-76184), A14a, C11 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		01/01/11	03/31/12	FAMILY	\$90.21	unlimited/ 11,145	\$1,289,518.61	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5061								
				AGED	\$460.30													
				DISABLED	\$460.30													
				MI ADULT	\$90.21													
				REFUGEES/FAMILY	\$90.21													
				AIDS	\$900.32													
				BCCTP	\$779.91													
				MEDICARE PART D														
				FAMILY	\$90.21						unlimited/ 462	\$49,424.90	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5061			
				AGED	\$96.55													
DISABLED	\$116.34																	
MI ADULT	\$90.21																	
REFUGEES/FAMILY	\$90.21																	
AIDS	\$197.69																	
BCCTP	\$779.91																	
MATERNITY	\$6,252.12																	
San Francisco Hlth Authority #307 dba San Francisco Health Plan (04-35400), A9a, C11 201 Third Street, 7th Floor San Francisco, CA 94103 CONTACT: Jean S. Fraser (415) 615-4202		01/01/11	12/31/11	FAMILY	\$134.84	55,000/ 39,218	\$6,094,511.32	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Lin McCaul (916) 449-5104								
				AGED	\$519.04													
				DISABLED	\$519.04													
				MI ADULT	\$134.84													
				REFUGEES/FAMILY	\$134.84													
				AIDS	\$1,014.53													
				BCCTP	\$780.02													
				MEDICARE PART D														
				FAMILY	\$134.84						55,000/ 1,662	\$242,064.87	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Lin McCaul (916) 449-5104			
				AGED	\$131.71													
DISABLED	\$159.18																	
MI ADULT	\$134.84																	
REFUGEES/FAMILY	\$134.84																	
AIDS	\$213.17																	
BCCTP	\$780.02																	
MATERNITY	\$6,252.12																	
SAN FRANCISCO COUNTY				SUBTOTAL		110,000/ 52,487	\$7,675,519.70											

<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 JOAQUIN COUNTY (39)									
Health Plan of San Joaquin (04-35401), A9a, C11 7751 S. Manthey Road French Camp, CA 95231 CONTACT: Terry Mack (209) 939-3500	#308	01/01/11	12/31/11	<u>FAMILY</u> \$108.21 AGED \$434.62 DISABLED \$434.62 MI ADULT \$108.21 REFUGEES/FAMILY \$108.21 AIDS \$921.09 BCCTP \$798.68	unlimited/ 80,466	\$10,346,469.32	San Joaquin	?	Stephanie Hopkins (916) 319-9041
MEDICARE PART D									
Health Plan of San Joaquin (04-35401), A9a, C11 7751 S. Manthey Road French Camp, CA 95231 CONTACT: Terry Mack (209) 939-3500	#308	01/01/11	12/31/11	<u>FAMILY</u> \$108.21 AGED \$126.86 DISABLED \$142.01 MI ADULT \$108.21 REFUGEES/FAMILY \$108.21 AIDS \$204.57 BCCTP \$798.68 MATERNITY \$5,978.59	unlimited/ 1,936	\$257,456.26	San Joaquin	?	Stephanie Hopkins (916) 319-9041
Anthem Blue Cross Partnership Plan (03-76184), A14a, C11 5151- A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#358	01/01/11	06/30/11	<u>FAMILY</u> \$94.36 AGED \$376.52 DISABLED \$376.52 MI ADULT \$94.36 REFUGEES/FAMILY \$94.36 AIDS \$850.37 BCCTP \$743.56	unlimited/ 26,710	\$2,894,190.08	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5061
Anthem Blue Cross Partnership Plan (03-76184), A14a, C11 5151- A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#358	01/01/11	06/30/11	<u>FAMILY</u> \$94.36 AGED \$92.64 DISABLED \$123.23 MI ADULT \$94.36 REFUGEES/FAMILY \$94.36 AIDS \$198.34 BCCTP \$743.56 MATERNITY \$5,978.59	unlimited/ 584	\$64,522.52	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5061
SAN JOAQUIN COUNTY				SUBTOTAL	unlimited/ 109,696	\$13,562,638.18			

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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>								
SANTA CLARA COUNTY (43)																	
Anthem Blue Cross Partnership #345 Plan (03-76184), A14a, C11 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		01/01/11	03/31/12	FAMILY	\$101.41	unlimited/ 33,116	\$3,913,600.12	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5061							
	AGED			\$407.82													
	DISABLED			\$407.82													
	MI ADULT			\$104.41													
	REFUGEES/FAMILY			\$101.41													
	AIDS			\$896.01													
	BCCTP			\$793.84													
	MEDICARE PART D																
	FAMILY			\$101.41	unlimited/ 986						\$112,480.19	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5061			
	AGED			\$107.28													
DISABLED	\$126.38																
MI ADULT	\$101.41																
REFUGEES/FAMILY	\$101.41																
AIDS	\$200.70																
BCCTP	\$793.84																
MATERNITY	\$6,127.31																
Santa Clara Family Health #309 Plan (04-35398), A10a, C12 210 E. Hacienda Avenue Campbell, CA 95008-6617 CONTACT: Leona Butler (408) 874-1901		01/01/11	12/31/11	FAMILY	\$125.45	123,000/ 98,582	\$14,297,003.72	Santa Clara	Santa Clara Family Health Plan	David Mora (916) 449-5092							
	AGED			\$497.71													
	DISABLED			\$497.71													
	MI ADULT			\$125.45													
	REFUGEES/FAMILY			\$125.45													
	AIDS			\$841.08													
	BCCTP			\$744.23													
	AGNEWS			\$3,070.16													
	MEDICARE PART D																
	FAMILY			\$125.45	123,000/ 5,609						\$856,272.72	Santa Clara	Santa Clara Family Health Plan	David Mora (916) 449-5092			
AGED	\$145.56																
DISABLED	\$165.82																
MI ADULT	\$125.45																
REFUGEES/FAMILY	\$125.45																
AIDS	\$200.92																
BCCTP	\$744.23																
MATERNITY	\$6,127.31																
AGNEWS	\$1,215.33																
SANTA CLARA COUNTY				SUBTOTAL		246,000/ 138,293	\$19,179,356.75										

<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>
STANISLAUS COUNTY (50)									
Anthem Blue Cross Partnership #310 Plan (04-35797), A10a, C10 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		01/01/11	12/31/11	<u>FAMILY</u> \$110.41 AGED \$552.07 DISABLED \$552.07 MI ADULT \$110.41 REFUGEEES/FAMILY \$110.41 AIDS \$878.44 BCCTP \$804.01	unlimited/ 49,502	\$6,718,188.02	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5061
Anthem Blue Cross Partnership #310 Plan (04-35797), A10a, C10 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662		01/01/11	12/31/11	<u>MEDICARE PART D</u> FAMILY \$110.41 AGED \$118.05 DISABLED \$120.91 MI ADULT \$110.41 REFUGEEES/FAMILY \$110.41 AIDS \$200.01 BCCTP \$804.01 MATERNITY \$5,734.13	unlimited/ 1,349	\$159,919.33	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5061
Health Net Community #361 Solutions, Inc. (03-76182), A12a, C14 11971 Foundation Place Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		01/01/11	06/30/11	<u>FAMILY</u> \$107.74 AGED \$477.69 DISABLED \$477.69 MI ADULT \$107.74 REFUGEEES/FAMILY \$107.74 AIDS \$936.48 BCCTP \$775.44	unlimited/ 23,847	\$2,832,310.23	Stanislaus	Health Net	Myreca Singh (916) 449-5057
Health Net Community #361 Solutions, Inc. (03-76182), A12a, C14 11971 Foundation Place Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246		01/01/11	06/30/11	<u>MEDICARE PART D</u> FAMILY \$107.74 AGED \$103.25 DISABLED \$128.75 MI ADULT \$107.74 REFUGEEES/FAMILY \$107.74 AIDS \$202.38 BCCTP \$775.44 MATERNITY \$5,734.13	unlimited/ 340	\$40,557.93	Stanislaus	Health Net	Myreca Singh (916) 449-5057
STANISLAUS COUNTY				SUBTOTAL	unlimited/ 75,038	\$9,750,975.51			

<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>	
TULARE COUNTY (54)										
Health Net Community Solutions, Inc. (03-76182), A12a, C14 3400 Data Drive, 1st Floor West Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#353	01/01/11	06/30/11	FAMILY	\$89.94	unlimited/ 34,651	\$3,466,871.41	Tulare	Health Net	Myreca Singh (916) 449-5057
				AGED	\$461.16					
				DISABLED	\$461.16					
				MI ADULT	\$89.94					
				REFUGEES/FAMILY	\$89.94					
				AIDS	\$915.71					
				BCCTP	\$761.17					
				MEDICARE PART D						
				FAMILY	\$89.94					
				AGED	\$105.41					
				DISABLED	\$126.47					
MI ADULT	\$89.94									
REFUGEES/FAMILY	\$89.94									
AIDS	\$199.14									
BCCTP	\$761.17									
MATERNITY	\$5,864.01									
Anthem Blue Cross Partnership Plan (04-36068), A9, C10 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: Cindy Metcho (805) 384-7662	#311	01/01/11	12/31/11	FAMILY	\$92.47	unlimited/ 72,992	\$8,112,480.27	Tulare	Blue Cross of California	Marc Lewis (916) 449-5061
				AGED	\$576.12					
				DISABLED	\$576.12					
				MI ADULT	\$92.47					
				REFUGEES/FAMILY	\$92.47					
				AIDS	\$871.85					
				BCCTP	\$781.16					
				MEDICARE PART D						
				FAMILY	\$92.41					
				AGED	\$106.57					
				DISABLED	\$121.73					
MI ADULT	\$92.47									
REFUGEES/FAMILY	\$92.47									
AIDS	\$198.21									
BCCTP	\$781.16									
MATERNITY	\$5,864.01									
TULARE COUNTY				SUBTOTAL		unlimited/ 109,492	\$11,788,242.91			
TOTAL 2-PLAN						<u>1,384,740/ 2,932,276</u>	<u>\$346,926,523.85</u>			

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

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GEOGRAPHIC MANAGED CARE (GMC-MEDICAL)									
SACRAMENTO COUNTY (34)									
Molina Healthcare of CA Partner Plan, Inc. (07-65851) A3 200 Oceangate Ste. 100. Long Beach, CA 90802-4317	#130	01/01/10	12/31/12	FAMILY/MI CHILD	\$130.36	160,000/ 28,071	Sacramento		Cheryl Bates (916) 558-1797
				AGED/DISABLED/B	\$592.76				
				ADULT/REFUGEE/:	\$130.36				
				BCCTP	\$1,110.33				
				MEDICARE PART D					
AGED	\$129.96	990	\$139,764.64						
DISABLED/BLIND	\$148.12								
MATURNITY	\$8,143.50								
CONTACT: Michele Marcotte (562) 435-6666 Ext. 127520									
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	12/30/09	FAMILY/MI CHILD	\$0.00	15,750/ 0	Sacramento		Nathan Nau (916) 341-7031
				AGED/DISABLED/B	\$0.00				
				ADULT/REFUGEE/:	\$0.00				
				BCCTP	\$0.00				
				MEDICARE PART D					
AGED	\$0.00	0	\$0.00						
DISABLED/BLIND	\$0.00								
MATURNITY	\$0.00								
CONTACT: Rhonda West-Peters (916) 614-6002									
Health Net Community Solutions, Inc. (07-65847) A4 11971 Foundation Place, Bldg D Rancho Cordova, CA 95670	#150	01/01/10	12/31/12	FAMILY/MI CHILD	\$107.32	168,600/ 51,631	Sacramento		Peter Thomas (916) 324-0278
				AGED/DISABLED/BI	\$558.87				
				ADULT/REFUGEE/:	\$107.32				
				BCCTP	\$1,091.97				
				MEDICARE PART D					
AGED	\$134.56	1,336	\$188,605.48						
DISABLED/BLIND	\$154.07								
MATURNITY	\$8,416.52								
CONTACT: Lori Hill (916) 935-1447									
KP CAL, LLC (NorCal) (07-65849) A3 1800 Harrison Street, 25th Floor Oakland, CA 94512	#170	01/01/10	12/31/12	FAMILY/MI CHILD	\$134.60	20,000/ 25,644	Sacramento	Charles S. Koch	Nathan Nau (916) 341-7031
				AGED/DISABLED/B	\$616.78				
				ADULT/REFUGEE/:	\$134.60				
				BCCTP	\$1,027.52				
				MEDICARE PART D					
AGED	\$124.72	2,073	\$290,227.68						
DISABLED/BLIND	\$146.12								
MATURNITY	\$8,150.52								
CONTACT: Andrea Broughton (626) 421-8733 Alt:Cathy Lurty (818) 557-7955									
Anthem Blue Cross Partnership Plan (07-65845) A4 5151 - A Camino Ruiz	#190	01/01/10	12/31/12	FAMILY/MI CHILD	\$131.21	168,600/ 89,021	Sacramento	Jeff Flick Regional Manager, SSB West	Philip Jimenez (916) 449-5105
				AGED/DISABLED/B	\$593.16				
				ADULT/REFUGEE/:	\$131.21				
				BCCTP	\$1,026.44				
				MEDICARE PART D					
AGED	\$130.83	2,309	\$319,857.89						
DISABLED/BLIND	\$142.77								
MATURNITY	\$7,971.87								
CONTACT: Cindy Metcho (805) 384-7662									
TOTAL GMC-MEDICAL (Sacramento)					<u>532,950/ 201,075</u>		<u>\$31,271,062.45</u>		

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

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GEOGRAPHIC MANAGED CARE (GMC-MEDICAL)									
<u>SAN DIEGO COUNTY (37)</u>									
Community Health Group #29 Partnership Plan, Inc. Calif. Children Svcs. (09-86155) A1 740 Bay Blvd Chula Vista, CA 91910 CONTACT: Francisca Chavez (619) 498-6589		07/01/10	06/30/15	FAMILY/MI CHILD	\$140.62	207,000/ 104,841	San Diego	Ann Warren Chief Member& Govt Relations Officer	Philip Jimenez (916) 449-5105
				AGED/DISABLED/B	\$532.54				
				MI ADULT/REFUGE	\$140.62				
				BCCTP	\$997.00				
				<u>MEDICARE PART D</u>					
AGED	\$127.10	2,522	\$348,941.06						
DISABLED/BLIND	\$145.50								
MATURNITY	\$8,015.42								
Health Net Community #68 Solutions, Inc. (09-86157) A1 11971 Foundation Place Bldg D Rancho Cordova, CA 95670 CONTACT: Lori Hill (916) 935-1447		07/01/10	06/30/15	FAMILY/MI CHILD	\$135.27	180,000/ 32,450	San Diego	David Friedman	Peter Thomas (916) 324-0278
				AGED/DISABLED/B	\$580.32				
				MI ADULT/REFUGE	\$135.27				
				BCCTP	\$1,056.50				
				<u>MEDICARE PART D</u>					
AGED	\$120.63	473	\$64,886.07						
DISABLED/BLIND	\$146.11								
MATURNITY	\$8,230.39								
KP CAL, LLC (SoCal) #79 (09-86159), A1 393 East Walnut Street, 7th Floor Pasadena, CA 91188 CONTACT: Andrea Broughton (626) 421-8733 Alt: Cathy Lurty (818) 557-7955		10/01/10	06/30/15	FAMILY/MI CHILD/F	\$132.29	10,000/ 12,653	San Diego	William Caswell	Nathan Nau (916) 341-7031
				AGED	\$540.65				
				BLIND/DISABLED	\$540.65				
				MI ADULT	\$132.29				
				BCCTP	\$1,019.46				
<u>MEDICARE PART D</u>									
AGED	\$123.25	1,186	\$166,847.68						
DISABLED/BLIND	\$148.65								
MATURNITY	\$7,775.00								
Molina Healthcare #131 of California Partner Plan, Inc. (09-86161) A1 200 Oceangate, Ste. 100 Long Beach, CA 90802-4317 (Confidential negotiated rates through December 2011) CONTACT: Michele Marcotte (562) 435-6666 Ext. 127520		01/01/11	06/30/15	FAMILY/MI CHILD/F	\$0.00	100,000/ 63,188	San Diego	Stephen T. O'Dell President & CEO	Cheryl Bates (916) 558-1797
				AGED	\$0.00				
				DISABLED/BLIND	\$0.00				
				MI ADULT	\$0.00				
				BCCTP	\$0.00				
<u>MEDICARE PART D</u>									
AGED	\$0.00	1,045	\$126,906.20						
DISABLED/BLIND	\$0.00								
MATURNITY	\$0.00								
Care 1st Health Plan, LLC #167 (09-86153) A1 601 Potrero Grande Drive Monterey Park, CA 91755 CONTACT: Kimberly Fritz (619) 528-4817 (Blue Cross #48 Deactivated 12/31/07)		07/01/10	06/30/15	FAMILY/MI CHILD	\$137.48	207,000/ 17,050	San Diego	Anna Tran Chief Operating Officer	Peter Thomas (916) 324-0278
				AGED/DISABLED/B	\$584.13				
				MI ADULT/REFUGE	\$137.48				
				BCCTP	\$1,026.90				
				<u>MEDICARE PART D</u>					
AGED	\$125.98	299	\$43,401.19						
DISABLED/BLIND	\$160.85								
MATURNITY	\$7,850.00								
TOTAL GMC-MEDICAL (SAN DIEGO)						<u>704,000/ 235,707</u>		<u>\$34,904,775.39</u>	
TOTAL ENROLLMENT (PHP, PHP-DENTAL, COHS, SP, PCCM, 2-PLAN, GMC-MEDICAL-(SAC), GMC-MEDICAL (SD))						<u>2,675,236/ 4,560,753</u>		<u>\$677,156,475.76</u>	

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

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GEOGRAPHIC MANAGED CARE (GMC-DENTAL)										
SACRAMENTO COUNTY (34)										
Western Dental Svcs., Inc. (07-65806) A2a 530 South Main Street Orange, CA 92863	#424	01/01/10	12/31/12	\$2.58	Over 21	160,000/ 32,667	\$82,595.24	Sacramento	Samuel H. Gruenbau President/CEO	Brian Nanoo (916) 464-3784
				\$11.16	Under 21	56,939	\$622,730.46			
CONTACT: Kelly Duniven (714) 571-3488										
Access Dental Plan, Inc. (07-65802) A2 8890 Cal Center Drive Sacramento, CA 95826	#421	01/01/10	12/31/12	\$2.58	Over 21	100,000/ 18,570	\$46,952.39	Sacramento	Reza Abbaszadeh Chief Executive Officer	Lenatte Blouin (916) 464-0379
				\$11.16	Under 21	33,493	\$366,306.24			
CONTACT: Terri Abbaszadeh (916) 563-6020										
Liberty Dental Plan (07-65805) A2 3200 El Camino Real, Ste. 290 Irvine, CA 92602	#425	01/01/10	12/31/12	\$2.58	Over 21	100,000/ 9,935	\$25,119.65	Sacramento	Dr. Amir Neshat Chief Executive Officer	Lenatte Blouin (916) 464-0379
				\$11.16	Under 21	17,879	\$195,539.05			
CONTACT: Dr. Amir Nehat (949)-223-8929										
Community Dental Services (07-65803) A2 2 MacArthur Place, Suite 700 Santa Ana, CA 92707	#426	01/01/10	12/31/12	\$2.58	Over 21	90,000/ 3,738	\$9,451.16	Sacramento	Joseph Sivori President	Brian Nanoo (916) 464-3784
				\$11.16	Under 21	7,865	\$86,017.93			
CONTACT: Thuy Pham (714) 263-3410										
Health Net of CA dba: CA Children Svcs. (07-65804) A2 address unknown	#427	01/01/10	12/31/12	\$2.58	Over 21	0/ 10,340	\$26,143.66	Sacramento	David Meadows	Brian Nanoo (916) 464-3784
				\$11.16	Under 21	16,328	\$178,576.07			
CONTACT: Eileen McGee-Davidson (909) 890-4129										
TOTAL GMC-DENTAL						<u>450,000/ 207,754</u>	<u>\$1,639,431.85</u>			

(Capitation Due is Less 4%)
 Capitation report updated by Susan Carey-Myers (916) 449-5045.
 Please notify her if there are any corrections.