

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>	
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/ 888	\$170,527.23	Marin	Charles S. Koch	Nathan Nau (916) 449-5000
				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/ 183	\$18,739.65	Marin	Charles S. Koch	Nathan Nau (916) 449-5000
				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/ 1071	\$189,266.88			

(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/ 1,071

\$189,266.88

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PHP (DENTAL)															
<u>LOS ANGELES COUNTY (19)</u>															
Access Dental Plan, Inc. (05-45001), A9 8890 Cal Center Drive Sacramento, CA 95826	#409	01/01/10	06/30/11	Over 21 years old						Reza Abbaszadeh	Lenatte Blouin (916) 464-0379				
				FAMILY	\$10.51	unlimited/ 18,892	\$48,741.36	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								130,129	\$1,452,239.64		
				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: 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						David Kutner	Abbigail Aban (916) 464-0390				
				FAMILY	\$10.51	unlimited/ 2,478	\$6,393.24	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								6,721	\$75,006.36		
				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), A5 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#406	01/01/10	06/30/11	Over 21 years old						Paula Lopez	Lenatte Blouin (916) 464-0379				
				FAMILY	\$10.51	unlimited/ 8,152	\$21,032.16	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								10,902	\$121,666.32		
				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) 425-4518															
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						David Meadows	Brian Nanoo (916) 464-3784				
				FAMILY	\$10.51	unlimited/ 18,857	\$48,651.06	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								26,366	\$294,244.56		
				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: Eileen McGee-Davidson (909) 890-4129															

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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						Dr. George Weingarter Medical Director	Abbigail Aban (916) 464-0390				
				FAMILY	\$10.51	unlimited/ 5,856	\$15,108.48	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								10,443	\$116,543.88		
				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														
Western Dental Services (05-45704), A6 530 South Main Street, Sixth Floor Orange, CA 92863 CONTACT: Kelley Duniven (714) 571-3488	#413	01/01/10	06/30/11	Over 21 years old						Samuel H. Gruenbaum President/CEO	Brian Nanoo (916) 464-3784				
				FAMILY	\$10.51	unlimited/ 20,261	\$52,273.38	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								31,743	\$354,251.88		
				FAMILY	\$10.51										
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				MI CHILD	\$10.51										
				MI ADULT	\$10.51										
% OF POV	\$10.51														
BCCTP	\$11.16														
Liberty Dental Plan of CA, Inc. (05-45700), A6 3200 El Camino Real, Ste. 290 Irvine, CA 92602 CONTACT: Amir Neshat, DDS, 949-223-8929	#416	01/01/10	06/30/11	Over 21 years old						Amir Neshat, DDS President/CEO	Lenatte Blouin (916) 464-0379				
				FAMILY	\$10.51	Unlimited/ 3,508	\$9,050.64	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								4,456	\$49,728.96		
				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														
Community Dental Services, Inc. #417 (05-45699), A5 2 Mac Athur Place, Suite 700 Santa Ana, CA 92707 CONTACT: Thuy Pham (714) 263-3410		01/01/10	06/30/11	Over 21 years old						Joseph Sivori President	Brian Nanoo (916) 464-3784				
				FAMILY	\$10.51	Unlimited/ 1,430	\$3,689.40	Los Angeles							
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								2,037	\$22,732.92		
				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														
LOS ANGELES				SUBTOTAL	Over 21 yrs. old	<u>79,434</u>	<u>204,939.72</u>								
				SUBTOTAL	Under 21 yrs. old	<u>222,797</u>	<u>2,486,414.52</u>								

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RIVERSIDE COUNTY (33)															
Western Dental Services, Inc. #414 (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 Brian Nanoo President/CEO (916) 464-3784				
				FAMILY	\$10.51	unlimited/ 50	\$129.00								
				AGED	\$10.51										
				BLIND/DISABLED	\$10.51										
				Under 21 years old								68	\$758.88		
				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										
				Safeguard Health Plans, Inc. #407											
				(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 Lenatte Blouin Director State Gov (916) 464-0379
FAMILY	\$10.51	unlimited/ 26	\$67.08												
AGED	\$10.51														
BLIND/DISABLED	\$10.51														
Under 21 years old								29	\$323.64						
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														
RIVERSIDE COUNTY								SUBTOTAL	Over 21 yrs. old	76	\$196.08				
								SUBTOTAL	Under 21 yrs. old	97	\$1,082.52				

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SAN BERNARDINO COUNTY (36)													
Western Dental Services, Inc. (05-45704), A6 530 South Main Street, Sixth Floor Orange, CA 92863	#415	01/01/10	06/30/11	Over 21 years old						Samuel H. Gruenbaum President/CEO	Brian Nanoo (916) 464-3784		
				FAMILY	\$10.51	unlimited/ 130	San Bernardino	\$335.40					
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				Under 21 years old								86	\$959.76
				FAMILY	\$10.51								
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				MI CHILD	\$10.51								
				MI ADULT	\$10.51								
CONTACT: Kelley Duniven (714) 571-3488				% OF POV	\$10.51								
				BCCTP	\$10.51								
Care 1st Health Plan (05-45702), A6 601 Potrero Grande Drive Monterey Park, CA 91755	#404	01/01/10	06/30/11	Over 21 years old						Dr. Gorge Weingartenf Medical Director	Abbigail Aban (916) 464-0390		
				FAMILY	\$10.51	unlimited/ 67	San Bernardino	\$172.86					
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				Under 21 years old								46	\$513.36
				FAMILY	\$10.51								
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				MI CHILD	\$10.51								
				MI ADULT	\$10.51								
CONTACT: Walter Gray (323) 889-6638				% OF POV	\$10.51								
				BCCTP	\$10.51								
Safeguard Health Plans, Inc. (05-45701), A5 95 Enterprise, Suite 100 Aliso Viejo, CA 92656-2605	#408	01/01/10	06/30/11	Over 21 years old						Paula Lopez	Lenatte Blouin (916) 464-0379		
				FAMILY	\$10.51	unlimited/ 170	San Bernardino	\$438.60					
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				Under 21 years old								162	\$1,807.92
				FAMILY	\$10.51								
				AGED	\$10.51								
				BLIND/DISABLED	\$10.51								
				MI CHILD	\$10.51								
				MI ADULT	\$10.51								
CONTACT: Paula Lopez, Director State Gov Programs (949) 425-4518				% OF POV	\$10.51								
				BCCTP	\$10.51								
**Rates do not reflect Hyde abortion rates effective August 2003													
SAN BERNARDINO COUNTY				SUBTOTAL	OVER 21	Over 21 yrs. old	367	\$946.86					
				SUBTOTAL	UNDER 21	Under 21 yrs. old	294	\$3,281.04					
				TOTAL PHP (DENTAL)	OVER 21		79,877	\$206,082.66					
				TOTAL PHP (DENTAL)	UNDER 21		223,188	\$2,490,778.08					
				TC TOTAL PHP (DENTAL)			303,065	\$2,696,860.74					

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COUNTY COHS									
MARIN COUNTY (21)	#510	07/01/11	?		N/A/ 0	\$0.00	Marin		? (916) 449-5000
dba Partnership Health Plan of CA Central California Alliance for Health				FAMILY/MI CHILD \$0.00 AGED \$0.00 DISABLED/BLIND \$0.00 LTC \$0.00					
ADDRESS ??				MI ADULT \$0.00 REFUGEES/% POV \$0.00 BCCTP \$0.00					
				MEDICARE PART D					
(Note): HCP # 081 will roll over to HCP# 510 07/01/11				AGED \$0.00	NA/ 0	\$0.00			
CONTACT:				DISABLED/BLIND \$0.00 LTC \$0.00					
MENDOCINO COUNTY (23)	#512	07/01/11	?		N/A/ 0	\$0.00	Mendocino		? (916) 449-5000
dba Partnership Health Plan of CA				FAMILY/MI CHILD \$0.00 AGED \$0.00 DISABLED/BLIND \$0.00 LTC \$0.00					
ADDRESS ??				MI ADULT \$0.00 REFUGEES/% POV \$0.00 BCCTP \$0.00					
				MEDICARE PART D					
CONTACT:				AGED \$0.00	NA/ 0	\$0.00			
				DISABLED/BLIND \$0.00 LTC \$0.00					
MERCED COUNTY (24)									
Santa Cruz-Monterey-Merced , Managed Medical Care Commission dba Central California Alliance for Health (08-85216) A6 ADDRESS ??	#514	01/01/11	12/31/13	FAMILY/MI CHILD \$149.87 AGED \$486.68 DISABLED/BLIND \$761.12 LTC \$7,721.99 MI ADULT \$149.87 REFUGEES/% POV \$149.87 BCCTP \$1,296.40	N/A/ 66,108	\$14,326,952.50	Merced		Jane Marine (916) 449-5000
				MEDICARE PART D					
CONTACT:				AGED \$268.57	NA/ 8,864	\$3,898,888.29			
				DISABLED/BLIND \$181.15 LTC \$4,987.51					
MONTEREY COUNTY (27)									
Santa Cruz-Monterey Managed Medical Care Commission dba Central California Alliance for Health (08-85216) A6 1600 Green Hills Road ADDRESS ??	#508	01/01/11	12/31/13	FAMILY/MI CHILD \$139.02 AGED \$592.63 DISABLED/BLIND \$893.41 LTC \$6,924.94 MI ADULT \$139.02 REFUGEES/% POV \$139.02 BCCTP \$1,392.52	N/A/ 64,724	\$13,450,595.28	Monterey	Allan McKay	Jane Marine (916) 449-5000
				MEDICARE PART D					
CONTACT: Alan McKay (831) 457-3850 ext 4330				AGED \$201.57	NA/ 9,847	\$4,310,414.92			
				DISABLED/BLIND \$189.66 LTC \$5,210.38					

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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/ 11,536	\$3,533,600.18	Solano-Napa	Jack Horn	Acting: Jane Marine (916) 449-5000									
				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														
				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/ 306,858	\$66,620,262.76	Orange	Richard Chambers	Acting: Jane Marine (916) 449-5000									
				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														
				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/ 24,181	\$5,219,556.46	Santa Luis Obispo	Lyle Lyman	O.Z. Kamara (916) 449-5000
													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																		
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/ 45,212	\$16,124,195.94	San Mateo	Maya Altman	Chrissy Corbin (916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$343.94 DISABLED/BLIND \$384.48 LTC \$6,581.50 AIDS \$355.84 AGNEWS \$1,004.78	NA/ 15,738	\$11,603,260.20			
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/ 55,477	\$12,374,069.53	Santa Barbara	Lyle Lyman	O. Z. Kamara (916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$199.11 DISABLED/BLIND \$186.69 LTC \$5,412.45 AIDS \$310.68	NA/ 9,984	\$5,174,504.67			
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/ 29,616	\$7,670,603.41	Santa Cruz-Monterey	Alan McKay	Jane Marine (916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$216.66 DISABLED/BLIND \$198.76 LTC \$4,575.59	NA/ 6,204	\$2,837,613.01			
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/ 53,105	\$15,082,850.64	Solano-Napa	Jack Horn	Acting: Jane Marine (916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$208.26 DISABLED/BLIND \$229.36 LTC \$4,667.25 OBRA \$298.85	NA/ 10,345	\$4,154,039.28			
CONTACT: Jack Horn (707) 863-4261									
<u>SONOMA COUNTY (49)</u>									
Sonoma County Partnership Health Plan of CA dba: (08-85215, A6 ADDRESS ??	#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/ 42,784	\$10,468,851.49	Sonoma	Lyle Luman	Acting: Jane Marine (916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$272.06 DISABLED/BLIND \$181.50 LTC \$3,847.43 OBRA \$0.00	NA/ 11,170	\$7,161,159.80			
Note: KP CAL LLC NorCal) #87 (03-75341 rolled over to #513 effective 10/2/2009.									
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		(916) 449-5000
				<u>MEDICARE PART D</u>					
				AGED \$0.00 DISABLED/BLIND \$0.00 LTC \$0.00 OBRA \$0.00	NA/ 0	\$0.00			
CONTACT:									

DEPARTMENT OF HEALTH SERVICES

MANAGED CARE CAPITATION REPORT

<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/ 22,770	\$6,418,872.71	Yolo	Jack Horn	Acting: Jane Marine (916) 449-5000
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/ 4,989	\$2,501,548.93			
				AGED	200.41					
				DISABLED/BLIND	248.25					
				LTC	4268.74					
				OBRA	272.39					
CONTACT: Jack Horn (707) 863-4100										
				TOTAL COUNTY COHS		N/A/ 881,799	\$246,911,618.51			

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>	
SPECIAL PROJECTS										
ALAMEDA COUNTY (01)										
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	MEDICAL ONLY		1,600/ 4	\$23,108.72	Fremont	Robert Edmondson	Joseph Billingsley (916) 449-5000
				FAMILY/AGED/REF.	\$5,777.18					
				DISA/LTC/AIDS	\$5,777.18					
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	MEDICARE PART D		1,600/ 85	\$358,909.95	Fremont	Robert Edmondson	Joseph Billingsley (916) 449-5000
				FAMILY/AGED/REF.	\$4,222.47					
				DISA/LTC/AIDS	\$4,222.47					
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	MEDICAL ONLY		560/ 43	\$253,351.70	Oakland	Peter Szutu	Joel Weeden (916) 449-5000
				FAMILY/AGED/REF.	\$5,891.90					
				DISA/LTC/AIDS	\$5,891.90					
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	MEDICARE PART D		560/ 421	\$1,819,881.96	Oakland	Peter Szutu	Joel Weeden (916) 449-5000
				FAMILY/AGED/REF.	\$4,322.76					
				DISA/LTC/AIDS	\$4,322.76					
ALAMEDA COUNTY				SUBTOTAL		4,320/ 553	\$2,455,252.33			

<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/ 7	\$41,243.30	Berkeley	Peter Szutu	Joel Weeden (916) 449-5000
				DISA/LTC/AIDS	\$5,891.90					
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	MEDICARE PART D		560/ 28	\$121,037.28	Berkeley	Peter Szutu	Joel Weeden (916) 449-5000
				FAMILY/AGED/REF.	\$4,322.76					
				DISA/LTC/AIDS	\$4,322.76					
CONTRA COSTA COUNTY				SUBTOTAL		1,120/ 35	\$162,280.58			

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/ 3,101	\$247,583.84	Los Angeles	David Schmidt	Joseph Billingsley (916) 449-5000
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/ 1,830	\$1,754,622.30	Los Angeles	David Schmidt	Joseph Billingsley (916) 449-5000
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/ 120	\$709,183.20	Los Angeles	Castulo de la Rocha	Delmira Rosas-Pettit (916) 449-5000
CONTACT: Jennifer Spalding (323) 728-0411									
MEDICARE PART D									
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/ 671	\$2,277,367.29	Los Angeles	Castulo de la Rocha	Delmira Rosas-Pettit (916) 449-5000
CONTACT: Jennifer Spalding (323) 728-0411									
LOS ANGELES COUNTY				SUBTOTAL	11,650/ 5,722	\$4,988,756.63			

DEPARTMENT OF HEALTH SERVICES

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>									
MEDICARE PART D									
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	AGED \$72.80 BLIND/DISABLED \$72.80	5,000/ 993	\$72,290.40	Riverside	David Schmidt	Joseph Billingsley (916) 449-5000
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	#205	01/01/09	12/31/12	LTC \$940.10	5,000/ 671	\$630,807.10	San Bernardino	David Schmidt	Joseph Billingsley (916) 449-5000
CONTACT: Becky Learner (562) 989-5143									
RIVERSIDE COUNTY					SUBTOTAL	10,000/ 1,664	\$703,097.50		
<u>SACRAMENTO COUNTY (34)</u>									
MEDICAL ONLY									
Sutter Senior Care (07-65710) A1 7000 Franklin Blvd., Suite 1020 Sacramento, CA 95823	#50	01/01/09	12/31/12	FAMILY/AGED/REF. \$5,217.42 DISA/LTC/AIDS \$5,217.42	280/ 5	\$26,087.10	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 449-5000
CONTACT: William Clearwater (916) 424-8412									
MEDICARE PART D									
Sutter Senior Care (07-65710) A1 7000 Franklin Blvd., Suite 1020 Sacramento, CA 95823	#50	01/01/09	12/31/12	FAMILY/AGED/REF. \$3,608.80 DISA/LTC/AIDS \$3,608.80	280/ 222	\$801,153.60	Sacramento	William Clearwater	Delmira Rosas-Pettit (916) 449-5000
CONTACT: William Clearwater (916) 424-8412									
SACRAMENTO COUNTY					SUBTOTAL	560/ 227	\$827,240.70		

<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>
<u>SAN BERNARDINO COUNTY (36)</u>									
MEDICARE PART D									
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/ 623	\$52,113.95	Riverside	David Schmidt	Joseph Billingsley (916) 449-5000
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	#207	01/01/09	12/31/12	LTC \$913.48	5,000/ 333	\$304,188.84	San Bernardino	David Schmidt	Joseph Billingsley. (916) 449-5000
CONTACT: Becky Learner (562) 989-5143									
SAN BERNARDINO COUNTY				SUBTOTAL	10,000/ 956	\$356,302.79			
<u>SAN DIEGO COUNTY (37)</u>									
MEDICAL ONLY									
Community Elder Care of San Diego dba: St. Paul's PACE (07-65711) A2 328 Maple Street San Diego, CA 92103	#57	01/01/09	12/31/12	FAMILY/AGED/REF. \$5,059.84 DISA/LTC/AIDS \$5,059.84	200/ 20	\$101,196.80	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 449-5000
CONTACT: Carol Hubbard (619) 677-3888									
MEDICARE PART D									
Community Elder Care of San Diego dba: St. Paul's PACE (07-65711) A2 328 Maple Street San Diego, CA 92103	#57	01/01/09	12/31/12	FAMILY/AGED/REF. \$3,569.67 DISA/LTC/AIDS \$3,569.67	200/ 125	\$446,208.75	San Diego	Cheryl Wilson	Delmira Rosas-Pettit (916) 449-5000
CONTACT: Carol Hubbard (619) 677-3888									
SAN DIEGO COUNTY				SUBTOTAL	400/ 145	\$547,405.55			

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/ 35	\$213,973.20	San Francisco	Robert Edmondson	Joseph Billingsley (916) 449-5000
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/ 856	\$3,766,237.36	San Francisco	Robert Edmondson	Joseph Billingsley (916) 449-5000
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/ 107	\$197,816.25	San Francisco	Miriam Martinez, DHI Director	Sunita Kapoor (916) 449-5000
MEDICARE PART D									
				FAMILY/AGED/REF. \$1,848.75 DISA/LTC/AIDS \$1,848.75	500/ 1	\$1,848.75			
CONTACT: Gary Zombalt (415) 206-7600									
SAN FRANCISCO COUNTY				SUBTOTAL	3700/ 999	\$4,179,875.56			
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/ 3	\$16,002.60	San Jose	Robert Edmondson	Joseph Billingsley (916) 449-5000
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/ 72	\$290,057.76	San Jose	Robert Edmondson	Joseph Billingsley (916) 449-5000
CONTACT: Sue Wong (415) 292-8720									
SANTA CLARA COUNTY				SUBTOTAL	3,200/ 75	\$306,060.36			

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>
YOLO COUNTY (57)									
MEDICAL ONLY									
Sutter Senior Care (07-65710) A1 1234 U Street Sacramento, CA 95818	#53	01/01/09	12/31/12	FAMILY/AGED/REF. DISA/LTC/AIDS	5,217.42 5,217.42	280/ 0	\$0.00	Sacramento	William Clearwater Delmira Rosas-Pettit (916) 449-5000
CONTACT: William Clearwater (916) 424-8412									
Sutter Senior Care (07-65710) A1 1234 U Street Sacramento, CA 95818 (Deactive 03/01/2011)	#53	01/01/09	12/31/12	MEDICARE PART D FAMILY/AGED/REF. DISA/LTC/AIDS	3,608.80 3,608.80	280/ 0	\$0.00	Sacramento	William Clearwater Delmira Rosas-Pettit (916) 449-5000
CONTACT: William Clearwater (916) 424-8412									
YOLO COUNTY				SUBTOTAL		<u>280/ 0</u>	<u>\$0.00</u>		
TOTAL SPECIAL PROJECT						<u>45,230/ 10,376</u>	<u>\$14,526,272.00</u>		

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>
PCCM									
<u>LOS ANGELES COUNTY (19)</u>									
				<u>Public Assistance</u>					
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	FAMILY \$103.27 AGED \$466.85 DISABLED \$622.09 MI CHILD \$103.27 MI ADULT \$265.28 REFUGEES \$103.27 AIDS \$1,767.86 BCCTP \$517.08	2,000/ 452	\$272,209.50	Los Angeles	Michael Weinstein	Sunita Kapoor (916) 449-5000
CONTACT: Donna Stidham (323) 860-5231									
				<u>MEDICARE PART D</u>					
				<u>Public Assistance</u>					
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	FAMILY \$103.27 AGED \$243.89 DISABLED \$339.33 MI CHILD \$103.27 MI ADULT \$265.28 REFUGEES \$103.27 AIDS \$230.19 BCCTP \$517.08	2,000/ 344	\$115,207.56	Los Angeles	Michael Weinstein	Sunita Kapoor (916) 449-5000
CONTACT: Donna Stidham (323) 860-5231									
LOS ANGELES COUNTY				SUBTOTAL	<u>4,000/ 796</u>	<u>\$387,417.06</u>			
TOTAL PCCM					<u>4,000/ 796</u>	<u>\$387,417.06</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>									
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/ 62,056	\$9,835,008.49	County of Contra Costa	Jonathan Prince (916) 449-5000									
				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													
				AGED	\$130.59													
				DISABLED	\$154.21													
				MI ADULT	\$130.13													
REFUGEES/FAMILY	\$130.13																	
AIDS	\$202.06																	
BCCTP	\$768.60																	
MATERNITY	\$5,795.09																	
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/ 11,441	\$1,458,632.73	Contra Costa	Blue Cross of California	Marc Lewis (916) 449-5000								
				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													
				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/ 76,409	\$11,710,614.92											

<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/ -8	(\$4,299.84)	Fresno	Blue Cross of California	Marc Lewis (916) 449-5000
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/ 8	\$1,164.96	Fresno	Blue Cross of California	Marc Lewis (916) 449-5000
(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/ 78,704	\$9,704,000.18	Fresno	Blue Cross of California	(916) 449-5000
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/ 2,327	\$304,666.92	Fresno	Blue Cross of California	(916) 449-5000
(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/ 131,620	\$14,567,215.38	Fresno	Blue Cross of California	Marc Lewis (916) 449-5000
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/ 1,698	\$184,889.41	Fresno	Blue Cross of California	Marc Lewis (916) 449-5000
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/ -18	Fresno	Health Net	Myreca Singh (916) 449-5000							
				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/ 6	\$634.56	Fresno	Health Net	Myreca Singh (916) 449-5000		
				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				SUBTOTAL	unlimited/ 214,337	\$24,754,565.22										

(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/ 33,575	\$4,188,708.82	Kern	Health Net	Myreca Singh (916) 449-5000
				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/ 702	\$84,522.54	Kern	Health Net	Myreca Singh (916) 449-5000
				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/ 108,866	\$12,144,820.94	Kern	Kern Health Systems	Jonathan Prince (916) 449-5000
				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/ 2,088	\$264,131.72	Kern	Kern Health Systems	Jonathan Prince (916) 449-5000
				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/ 145,231	\$16,682,184.02			

<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/ 12,910	Kings		(916) 449-5000
	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/ 157	Kings		(916) 449-5000
	AGED			\$111.96					
	DISABLED			\$130.53					
	MI ADULT			\$103.96					
	REFUGEES/FAMILY			\$103.96					
	AIDS			\$197.07					
	BCCTP			\$774.89					
MATERNITY	\$6,104.12								
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 (Note: HCP #351 rools over to HCP# 363)		03/01/11	02/29/16	FAMILY	\$103.96	unlimited/ 9,365	Kings		(916) 449-5000
	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/ 147	Kings		(916) 449-5000
	AGED			\$111.96					
	DISABLED			\$130.53					
	MI ADULT			\$103.96					
	REFUGEES/FAMILY			\$103.96					
	AIDS			\$197.07					
	BCCTP			\$774.89					
MATERNITY	\$6,104.12								
MEDICARE PART D									
KINGS COUNTY				SUBTOTAL		0/ 22,579		\$2,485,482.46	

<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>	
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/ 439,545	\$42,857,785.02	Los Angeles	Health Net	Myreca Singh (916) 449-5000
				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/ 6,239	\$669,852.02	Los Angeles	Health Net	Myreca Singh (916) 449-5000
				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/ 859,200	\$98,746,400.34	Los Angeles	LA Care Health Plan	Mary Cobb (916) 449-5000
				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/ 13,745	\$1,598,003.35	Los Angeles	LA Care Health Plan	Mary Cobb (916) 449-5000
				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/ 1,318,729	\$143,872,040.73				

<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/ 16,140	Madera		(916) 449-5000
	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/ 169	Madera		(916) 449-5000
	AGED			\$112.89					
	DISABLED			\$121.63					
	MI ADULT			\$100.50					
	REFUGEES/FAMILY			\$100.50					
	AIDS			\$197.07					
	BCCTP			\$775.47					
MATERNITY	\$5,916.55								
MEDICARE PART D									
Anthen Blue Cross of CA #364 dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 383-1704		03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 10,140	Madera		(916) 449-5000
	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 #364 dba: Partnership Plan, Inc. (10-87049) 5151-A Camino Ruiz Camarillo, CA 93012 CONTACT: (805) 3831704		03/01/11	02/29/16	FAMILY	\$100.50	unlimited/ 86	Madera		(916) 449-5000
	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/ 26,535		\$2,805,560.24	

<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/ 198,467	\$24,256,352.17	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 449-5000
				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/ 3,745	\$455,374.25	Riverside	Inland Empire Health Plan	Stephanie Hopkins (916) 449-5000
				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/ 40,859	\$4,793,883.97	Riverside	Stephen T. O'Dell Molina, M.D.	Sarah Reed (916) 449-5000
				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/ 485	\$59,534.56	Riverside	Stephen T. O'Dell Molina, M.D.	Sarah Reed (916) 449-5000
				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/ 243,556	\$29,565,144.95			

<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/ 226,002	\$27,845,624.38	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 449-5000
				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/ 4,040	\$515,865.41	San Bernardino	Inland Empire Health Plan	Stephanie Hopkins (916) 449-5000
				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/ 56,806	\$6,672,581.32	San Bernardino	Joann Zarza-Garrido Molina, M.D.	Sarah Reed (916) 449-5000
				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/ 718	\$91,265.69	San Bernardino	Joann Zarza-Garrido Molina, M.D.	Sarah Reed (916) 449-5000
				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/ 287,566	\$35,125,336.80			

<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/ 11,075	\$1,279,503.01	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5000								
				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/ 482	\$51,685.22	San Francisco	Blue Cross of California	Mark Lewis (916) 449-5000			
				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/ 40,167	\$6,253,978.88	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Lin McCaul (916) 449-5000								
				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/ 1,737	\$252,723.77	San Francisco	San Francisco Health Authority dba San Francisco Health Plan	Lin McCaul (916) 449-5000			
				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/ 53,461	\$7,837,890.88											

<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/ 82,331	\$10,598,297.00	San Joaquin	?	Stephanie Hopkins (916) 449-5000
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/ 2,055	\$272,428.90	San Joaquin	?	Stephanie Hopkins (916) 449-5000
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/ 27,043	\$2,924,765.48	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5000
MEDICARE PART D									
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/ 557	\$61,806.74	San Joaquin	Blue Cross of California	Mark Lewis (916) 449-5000
SAN JOAQUIN COUNTY				SUBTOTAL	unlimited/ 111,986	\$13,857,298.12			

DEPARTMENT OF HEALTH SERVICES

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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 AGED \$407.82 DISABLED \$407.82 MI ADULT \$101.41 REFUGEES/FAMILY \$101.41 AIDS \$896.01 BCCTP \$793.84	unlimited/ 33,126	\$3,923,806.52	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5000
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	MEDICARE PART D FAMILY \$101.41 AGED \$107.28 DISABLED \$126.38 MI ADULT \$101.41 REFUGEES/FAMILY \$101.41 AIDS \$200.70 BCCTP \$793.84 MATERNITY \$6,127.31	unlimited/ 1,009	\$115,009.31	Santa Clara	Blue Cross of California	Mark Lewis (916) 449-5000
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 AGED \$497.71 DISABLED \$497.71 MI ADULT \$125.45 REFUGEES/FAMILY \$125.45 AIDS \$841.08 BCCTP \$744.23 AGNEWS \$3,070.16	123,000/ 100,651	\$14,644,795.31	Santa Clara	Santa Clara Family Health Plan	David Mora (916) 449-5000
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	MEDICARE PART D FAMILY \$125.45 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	123,000/ 5,622	\$859,913.91	Santa Clara	Santa Clara Family Health Plan	David Mora (916) 449-5000
SANTA CLARA COUNTY				SUBTOTAL	246,000/ 140,408	\$19,543,525.05			

<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	#310	01/01/11	12/31/11	FAMILY	\$110.41	unlimited/ 50,368	\$6,837,211.06	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5000								
				AGED	\$552.07													
				DISABLED	\$552.07													
				MI ADULT	\$110.41													
				REFUGEES/FAMILY	\$110.41													
				AIDS	\$878.44													
				BCCTP	\$804.01													
				MEDICARE PART D														
				FAMILY	\$110.41						unlimited/ 1,371	\$162,419.03	Stanislaus	Blue Cross of California	Marc Lewis (916) 449-5000			
				AGED	\$118.05													
				DISABLED	\$120.91													
MI ADULT	\$110.41																	
REFUGEES/FAMILY	\$110.41																	
AIDS	\$200.01																	
BCCTP	\$804.01																	
MATERNITY	\$5,734.13																	
Health Net Community #361																		
Solutions, Inc. (03-76182), A12a, C14 11971 Foundation Place Rancho Cordova, CA 95670 CONTACT: Sean O'Brien (626) 683-6246	#361	01/01/11	06/30/11	FAMILY	\$107.74	unlimited/ 24,173	\$2,884,081.22	Stanislaus	Health Net	Myreca Singh (916) 449-5000								
				AGED	\$477.69													
				DISABLED	\$477.69													
				MI ADULT	\$107.74													
				REFUGEES/FAMILY	\$107.74													
				AIDS	\$936.48													
				BCCTP	\$775.44													
				MEDICARE PART D														
				FAMILY	\$107.74						unlimited/ 332	\$39,724.56	Stanislaus	Health Net	Myreca Singh (916) 449-5000			
				AGED	\$103.25													
				DISABLED	\$128.75													
MI ADULT	\$107.74																	
REFUGEES/FAMILY	\$107.74																	
AIDS	\$202.38																	
BCCTP	\$775.44																	
MATERNITY	\$5,734.13																	
STANISLAUS COUNTY				SUBTOTAL		unlimited/ 76,244	\$9,923,435.87											

<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/ 37,276	\$3,725,237.11	Tulare	Health Net	Myreca Singh (916) 449-5000
				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/ 72,355	\$8,067,324.12	Tulare	Blue Cross of California	Marc Lewis (916) 449-5000
				AGED	\$576.12					
				DISABLED	\$576.12					
				MI ADULT	\$92.47					
				REFUGEES/FAMILY	\$92.47					
				AIDS	\$871.85					
				BCCTP	\$781.16					
				MEDICARE PART D						
				FAMILY	\$92.47					
				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		<u>unlimited/ 111,560</u>	<u>\$12,010,992.79</u>			
TOTAL 2-PLAN						<u>1,384,740/ 2,964,833</u>	<u>\$351,511,211.47</u>			

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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>
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 AGED/DISABLED/B \$592.76 ADULT/REFUGEE/€ \$130.36 BCCTP \$1,110.33 MEDICARE PART D AGED \$129.96 DISABLED/BLIND \$148.12 MATURNITY \$8,143.50	160,000/ 28,719	\$4,539,302.35	Sacramento		Cheryl Bates (916) 449-5000
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 AGED/DISABLED/B \$0.00 ADULT/REFUGEE/€ \$0.00 BCCTP \$0.00 MEDICARE PART D AGED \$0.00 DISABLED/BLIND \$0.00 MATURNITY \$0.00	15,750/ 0	\$0.00	Sacramento		Nathan Nau (916) 449-5000
CONTACT: Rhonda West-Peters (916) 614-6002									
Health Net Community Solutions, Inc. (07-65847) A5 11971 Foundation Place, Bldg D Rancho Cordova, CA 95670	#150	01/01/11	12/31/12	FAMILY/MI CHILD \$99.58 AGED/DISABLED/BI \$440.73 ADULT/REFUGEE/€ \$99.58 BCCTP \$776.37 MEDICARE PART D AGED \$114.93 DISABLED/BLIND \$132.40 MATURNITY \$7,755.44	168,600/ 52,327	\$6,203,799.29	Sacramento		Peter Thomas (916) 449-5000
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 AGED/DISABLED/B \$616.78 ADULT/REFUGEE/€ \$134.60 BCCTP \$1,027.52 MEDICARE PART D AGED \$124.72 DISABLED/BLIND \$146.12 MATURNITY \$8,150.52	20,000/ 26,068	\$4,991,438.40	Sacramento	Charles S. Koch	Nathan Nau (916) 449-5000
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 AGED/DISABLED/B \$593.16 ADULT/REFUGEE/€ \$131.21 BCCTP \$1,026.44 MEDICARE PART D AGED \$130.83 DISABLED/BLIND \$142.77 MATURNITY \$7,971.87	168,600/ 89,433	\$14,229,323.86	Sacramento	Jeff Flick Regional Manager, SSB West	Philip Jimenez (916) 449-5000
CONTACT: Cindy Metcho (805) 384-7662									
TOTAL GMC-MEDICAL (Sacramento)					<u>532,950/ 203,409</u>	<u>\$30,898,508.34</u>			

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GEOGRAPHIC MANAGED CARE (GMC-MEDICAL)									
SAN DIEGO COUNTY (37)									
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/ 106,509	San Diego	Ann Warren Chief Member& Govt Relations Officer	Philip Jimenez (916) 449-5000
				AGED/DISABLED/B	\$532.54				
				MI ADULT/REFUGE	\$140.62				
				BCCTP	\$997.00				
				MEDICARE PART D					
AGED	\$127.10	2,600	\$359,063.04						
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/ 32,698	San Diego	David Friedman	Peter Thomas (916) 449-5000
				AGED/DISABLED/B	\$580.32				
				MI ADULT/REFUGE	\$135.27				
				BCCTP	\$1,056.50				
				MEDICARE PART D					
AGED	\$120.63	477	\$65,604.95						
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/ 12,833	San Diego	William Caswell	Nathan Nau (916) 449-5000
				AGED	\$540.65				
				BLIND/DISABLED	\$540.65				
				MI ADULT	\$132.29				
				BCCTP	\$1,019.46				
MEDICARE PART D									
AGED	\$123.25	1,245	\$177,190.89						
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/ 63,915	San Diego	Stephen T. O'Dell President & CEO	Cheryl Bates (916) 449-5000
				AGED	\$0.00				
				DISABLED/BLIND	\$0.00				
				MI ADULT	\$0.00				
				BCCTP	\$0.00				
MEDICARE PART D									
AGED	\$0.00	1,043	\$126,691.21						
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/ 17,960	San Diego	Anna Tran Chief Operating Officer	Peter Thomas (916) 449-5000
				AGED/DISABLED/B	\$584.13				
				MI ADULT/REFUGE	\$137.48				
				BCCTP	\$1,026.90				
				MEDICARE PART D					
AGED	\$125.98	313	\$45,489.87						
DISABLED/BLIND	\$160.85								
MATURNITY	\$7,850.00								
TOTAL GMC-MEDICAL (SAN DIEGO)						<u>704,000/ 239,593</u>		<u>\$35,486,800.12</u>	
TOTAL ENROLLMENT (PHP, PHP-DENTAL, COHS, SP, PCCM, 2-PLAN, GMC-MEDICAL-(SAC), GMC-MEDICAL (SD))						<u>2,675,236/ 4,604,942</u>		<u>\$682,607,955.12</u>	

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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	\$10.51	Over 21	160,000/ 33,003	\$81,741.83	Sacramento	Samuel H. Gruenbau President/CEO	Brian Nanoo (916) 464-3784
				\$10.51	Under 21	57,325	\$614,157.12			
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	\$10.51	Over 21	100,000/ 18,976	\$46,999.76	Sacramento	Reza Abbaszadeh Chief Executive Officer	Lenatte Blouin (916) 464-0379
				\$10.51	Under 21	33,360	\$357,405.70			
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	\$10.51	Over 21	100,000/ 9,945	\$24,631.78	Sacramento	Dr. Amir Neshat Chief Executive Officer	Lenatte Blouin (916) 464-0379
				\$10.51	Under 21	17,989	\$192,726.95			
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	\$10.51	Over 21	90,000/ 3,808	\$9,431.65	Sacramento	Joseph Sivori President	Brian Nanoo (916) 464-3784
				\$10.51	Under 21	7,878	\$84,401.74			
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	\$10.51	Over 21	0/ 10,622	\$26,308.57	Sacramento	David Meadows	Brian Nanoo (916) 464-3784
				\$10.51	Under 21	16,821	\$180,213.47			
CONTACT: Eileen McGee-Davidson (909) 890-4129										
TOTAL GMC-DENTAL						<u>450,000/ 209,727</u>	<u>\$1,618,018.57</u>			

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