

November 24, 2025

THIS LETTER SENT VIA EMAIL

Jeff Nkansah, Chief Executive Officer CalViva Health 7625 North Palm Avenue, Suite 109 Fresno, CA 93711

FINAL NOTICE OF MONETARY SANCTION FOR FAILURE TO MEET AND EXCEED MINIMUM PERFORMANCE LEVELS FOR MEDI-CAL MANAGED CARE ACCOUNTABILITY SET PERFORMANCE MEASURES

Dear Jeff Nkansah,

The Department of Health Care Services (DHCS) sends this Final Notice of Monetary Sanction Letter to CalViva Health (CalViva) for failure to meet and exceed the required minimum performance levels (MPLs) for measurement year 2024 (MY24)¹ Medi-Cal Managed Care Accountability Set (MCAS) performance measures (Managed Care Plan (MCP) Contract, Exhibit A, Attachment 3, section 2.2 Quality Improvement System, subsection 2.2.9 External Quality Review Requirements).

Under California Welfare and Institutions Code (W&I) section 14197.7 and the MCP contract, DHCS has the authority to impose monetary sanctions for CalViva's failure to meet and exceed required MPLs for MY24, which has directly impacted CalViva's Members (MCP Contract, Exhibit A, Attachment 3, section 2.2 Quality Improvement System, subsection 2.2.9 External Quality Review Requirements). Pursuant to W&I section 14197.7(f) and the MCP contract, DHCS is authorized to impose a \$25,000 sanction per violation of CalViva's contractual obligation to meet and exceed MPLs for each MCAS performance measure (MCP Contract, Exhibit E, Program Terms and Conditions, section 1.1.19 Sanctions; W&I section 14197.7(e)).

Successful administration of the Medi-Cal program requires a collaborative partnership between DHCS and CalViva. This collaboration includes the expectation that CalViva meet their contractual and programmatic requirements on an ongoing basis. DHCS provides CalViva with regular opportunities for collaboration on strategies for improving

¹ Measurement Year 2024 (MY 24) covered activities conducted from January 1, 2024, to December 31, 2024



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CalViva's MCAS performance measures required to meet and exceed MPLs, including engaging directly with CalViva on required Quality Improvement (QI) work, providing QI coaching, and providing opportunities to participate in statewide and regional quality improvement collaboratives.

On April 25, 2025, DHCS published APL 25-007 Attachment C², which provided MCPs with an overview of the MCAS monetary sanction methodology.

On August 21, 2025, DHCS received CalViva's reported MCAS rates through the External Quality Review Organization (EQRO).

On October 7, 2025, DHCS sent CalViva the Quality Sanction Bulletin via the Quality Monitoring Inbox, which provided a detailed overview of MCAS monetary sanction methodology for MY24.

DHCS determined that CalViva has 11 county-level measures below the MPL across two domain(s), triggering Tier 2 or Tier 3 quality sanctions in three county(ies). See Table 2 for enforcement tier designation triggers.

On October 16, 2025, DHCS notified CalViva that DHCS was imposing monetary sanctions in the amount of \$25,000.00 for CalViva's failure to comply with its obligations set forth in the contract. See Table 3 and/or 4 for CalViva's Sanction Determination Details.

CalViva did not request a meet and confer conference with DHCS within two business days of receiving the Notice of Intent to Impose Monetary Sanctions letter on October 16, 2025. This Final Notice of Monetary Sanction letter supersedes the Notice of Intent to Impose Monetary Sanctions letter and is made in accordance with W&I section 14197.7(g) and with the Quality Sanction Bulletin issued October 7, 2025.

As a result, DHCS determined that CalViva's final total sanction amount is **\$25,000.00**, which will be paid to DHCS via ACH/Wire or check payment. Please follow the included payment instructions to effectuate payment in full to DHCS. Please indicate the name of the MCP, MY, and the reason for payment when submitting your payment to DHCS. The effective date of this sanction is November 24, 2025. Payment for the MCAS MY24 Quality Sanctions is due immediately.

² Department of Health Care Services. Attachment C – Managed Care Accountability Set (MCAS) Monetary Sanction Methodology. APL 25-007, 2025.





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If CalViva does not pay within 30 business days, CalViva will receive a past due notice. Please provide notice of receipt and payment via email to DHCS' Quality Monitoring inbox at QualityMonitoring@dhcs.ca.gov. Please include the account number and check number, or wire transfer number, once payment has been sent. Notice of Appeal Rights is included in the letter below.

If you have any questions, send an email to the Quality Monitoring inbox at QualityMonitoring@dhcs.ca.gov.

Sincerely,

Original signed by

Pamela Riley, MD, MPH Assistant Deputy Director, Chief Health Equity Officer Quality and Population Health Management Department of Health Care Services Jeff Nkansah, Chief Executive Officer Page 4 November 24, 2025

ACH/Wire to:

Beneficiary Account Name: Department of Health Care Services

Bank Name: US Bank

Laurel Heights Branch

3471 California St

San Francisco, CA 94118

Routing Number: 122235821

Bank Account Number: 1-583-0005-7623

Reference: Sanction or any identifier

For Check Payment:

Payable to: Department of Health Care Services

Cash Receipts Unit 1501 Capitol Avenue MS 1101 PO Box 997415

Sacramento, CA 95899-7415

For check payment, please include the Final Notice of Monetary Sanction Letter and any backup documents that will identify the payment.



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CC

Michelle Baass Director Department of Health Care Services

Tyler Sadwith
State Medicaid Director
Chief Deputy Director, Health Care Programs
Department of Health Care Services

Lindy Harrington Assistant State Medicaid Director Department of Health Care Services

Palav Babaria, MD, MHS Deputy Director, Chief Quality Officer Quality and Population Health Management Department of Health Care Services

Judith Recchio
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> Mary Lourdes Leone, Chief Compliance Officer CalViva Health 7625 North Palm Avenue, Suite 109 Fresno, CA 93711

Maria Sanchez, Compliance Manager CalViva Health 7625 North Palm Avenue, Suite 109 Fresno, CA 93711

Sia Xiong-Lopez, Health Equity Officer CalViva Health 7625 North Palm Avenue, Suite 109 Fresno, CA 93711

Daniel Maychen, Chief Financial Officer CalViva Health 7625 North Palm Avenue, Suite 109 Fresno, CA 93711 Jeff Nkansah, Chief Executive Officer Page 7 November 24, 2025

NOTICE OF APPEAL RIGHTS

CalViva has the right to request a hearing in connection with any sanctions within fifteen (15) working days after the notice of the effective date of sanctions has been given. DHCS will stay the imposition of sanctions upon receipt of the request for a hearing until the effective date of a final decision from the Office of Administrative Hearings and Appeals (OAHA). CalViva may request a hearing by sending a letter so stating to the Office of Administrative Hearings and Appeals at the address below:

Chief Administrative Law Judge
Office of Administrative Hearings and Appeals
Department of Health Care Services
3831 N. Freeway Blvd., Suite 200
Sacramento, CA 95834

A copy of the hearing request must also be sent to:

Angelico Razon

Quality and Health Equity Measurement Monitoring Section Chief
Quality and Population Health Management
Department of Health Care Services
MS 0020
P.O. Box 997413
Sacramento CA 95899-7413

Judith Recchio
Deputy Director and Chief Counsel
Office of Legal Services
Department of Health Care Services
MS 0010
P.O. Box 997413
Sacramento CA 95899-74



Enclosure

TABLE 1: DOMAIN, MEASURE, & ACRONYM

Domain	Measure	Acronym
Behavioral Health (BH)	Follow-Up After ED Visit for Mental Illness— 30 days	FUM
	Follow-Up After ED Visit for Substance Use— 30 days	FUA
Children's	Child and Adolescent Well-Care Visits	WCV
Health (CH)	Childhood Immunization Status: Combination 10	CIS-10
	Developmental Screening in the First Three Years of Life	DEV
	Immunizations for Adolescents: Combination 2	IMA-2
	Lead Screening in Children	LSC
	Topical Fluoride for Children	TFL-CH
	Well-Child Visits in the First 30 Months of Life – 0 to 15 Months – Six or More Visits	W30-6+
	Well-Child Visits in the First 30 Months of Life – 15 to 30 Months – Two or More Visits	W30-2+
Reproductive Health	Chlamydia Screening in Women	CHL
and Cancer Prevention (RC)	Prenatal and Postpartum Care: Postpartum Care	PPC-Pst
	Prenatal and Postpartum Care: Timeliness of Prenatal Care	PPC-Pre
	Breast Cancer Screening	BCS-E
	Cervical Cancer Screening	CCS
	Asthma Medication Ratio	AMR
Chronic Disease	Controlling High Blood Pressure	CBP
Management (CD)	Glycemic Status Assessment for Patients with Diabetes (>9%)*	GSD

^{*}A lower rate is better for this measure.



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TABLE 2: QUALITY ENFORCEMENT TIER DESIGNATION TRIGGERS

Enforcement Tiers	Tier 1	Tier 2	Tier 3	
Triggers	One (1) measure below the MPL in any one (1) domain	Two (2) or more measures below the MPL in any one (1) domain	Three (3) or more measures below the MPL in two (2) or more domains	
Enforcement Action	Not subject to monetary sanction	Subject to monetary sanction	Subject to monetary sanction	

TABLE 3: CALVIVA MY24 MCAS QUALITY SANCTION DETERMINATION DETAILS

County	Measure	MCP Rate	MPL	Severity Factor	Trending Factor	Population Impacted	HPI Reduction Factor	Sanction per Measure Per County
Fresno	FUA	29.48%	36.18%	1.4	0.2	1115	50%	\$156.10
Fresno	FUM	42.94%	53.82%	1.4	0	667	50%	\$0.00
Fresno	W30-2	67.70%	69.43%	1.1	8.0	2018	50%	\$887.92
Fresno	W30-6	59.39%	60.38%	1	0.8	1123	50%	\$449.20
Kings	CIS-10	14.00%	27.49%	1.6	1.4	565	40%	\$759.36
Kings	DEV	7.48%	35.70%	2	0.6	1596	40%	\$1,149.12
Kings	W30-2	59.91%	69.43%	1.4	0.6	267	40%	\$134.57
Kings	W30-6	58.25%	60.38%	1.1	1	177	40%	\$116.82
Kings	WCV	49.28%	51.81%	1.1	0.4	7168	40%	\$1,892.35
Madera	FUA	30.70%	36.18%	1.2	0.2	79	40%	\$11.38
Madera	FUM	47.71%	53.82%	1.4	0	57	40%	\$0.00

TABLE 4: CALVIVA MY24 MCAS QUALITY SANCTION DETERMINATION DETAILS WITH AGGREGATION OF COUNTY-LEVEL RATES WITH SMALL DENOMINATORS USING RATING REGION GROUPINGS

Aggregated Counties*	Measure	Aggregated Rates	MPL	Severity Factor	Trending Factor	Population Impacted	HPI Reduction Factor	Sanction Per Measure Per County
No measures met criteria (i.e., small eligible population) for rate aggregation.								

^{*}See Table 5 for the detailed Quality Rating Regions and associated counties.



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TABLE 5: QUALITY RATING REGIONS

Quality Rating Region	Counties			
Central California	Mariposa, Merced, Monterey, Santa Cruz			
Central Coast	San Luis Obispo, Santa Barbara			
Inland Empire	Riverside, San Bernardino			
North Bay	Marin, Napa, Solano, Sonoma, Yolo			
Rural Central	Alpine, El Dorado			
Rural North	Del Norte, Humboldt, Lake, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Trinity			
Rural South	Amador, Calaveras, Inyo, Mono, Tuolumne			
Rural Upper Central	Butte, Colusa, Glenn, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Yuba			
San Joaquin Valley	San Joaquin, Stanislaus			
Tri County	Fresno, Kings, Madera			
Alameda	Alameda			
Contra Costa	Contra Costa			
Imperial	Imperial			
Kern	Kern			
Los Angeles	Los Angeles			
Orange	Orange			
Sacramento	Sacramento			
San Benito	San Benito			
San Diego	San Diego			
San Francisco	San Francisco			
San Mateo	San Mateo			
Santa Clara	Santa Clara			
Tulare	Tulare			
Ventura	Ventura			

Quality & Population Health Management

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