

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
San Francisco Regional Office  
90 Seventh Street, Suite 5-300 (5W)  
San Francisco, CA 94103-6706



**DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS**

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June 30, 2015

Mari Cantwell, Chief Deputy Director  
California Department of Health Care Services  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract change orders for the COHS Managed Care model:

- Partnership Health Plan 08-85215 (A28)
- CenCal 08-85212 (A24)
- Central California Alliance 08-85216 (A25)
- CalOptima 08-85214 (A24)
- Health Plan of San Mateo 08-85213 (A28)
- Gold Coast 10-87128 (A17)

This letter is to inform you that the Centers for Medicare and Medicaid Services is granting California approval of the request to amend the above listed contracts. These contract change orders adjust capitation rates for Senate Bill 239 – Hospital Quality Insurance Fee. The period of adjustment is January 1, 2014 through June 30, 2014.

Our approval of all MCO contracts and their subsequent amendments is required under Title XIX of the Social Security Act, section 1903(m). We have previously reviewed these contracts for compliance with 42 CFR Part 438. Approval of contract changes does not extend Federal financial participation for costs associated with activities not meeting Federal requirements.

We appreciate the assistance your staff has provided during the approval process. If you have any questions, please contact Bev Hogaboom at (415) 744-3580 or [Beverly.Hogaboom@cms.hhs.gov](mailto:Beverly.Hogaboom@cms.hhs.gov).

Sincerely,

/s/

Hye Sun Lee  
Acting Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Hannah Katch, DHCS  
Javier Portela, DHCS

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Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract change orders for the Geographic Managed Care model:

- Community Health Group 09-86155 C10
- Health Net Community Solutions Inc. 09-86157 C10
- Molina Healthcare of California Partner Plan, Inc. 09-86161 C12
- Care 1st 09-86153 C10
- KP Cal LLC 09-86159 C10
- Health Net Community Solutions Inc. 07-65847 C11
- KP Cal LLC 07-65849 C12
- Molina Healthcare of California Partner Plan, Inc. 07-65851 C11
- Anthem Blue Cross Partnership Plan 07-65845 C11

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Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract change orders for the Regional/Rural model:

- Anthem Blue Cross Partnership Plan 13-90159 C05
- Anthem Blue Cross Partnership Plan 13-90163 C04
- California Health and Wellness Plan 13-90161 C05
- California Health and Wellness Plan 13-90157 C05
- Molina Healthcare of California Partner Plan, Inc. 13-90285 C05

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Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract change orders for the Two Plan Managed Care model:

Local Initiatives:

- Alameda Alliance for Health (04-35399 CO 28)
- Contra Costa Health Plan (04-36067 CO 25)
- Health Plan of San Joaquin (04-35401 CO 26)
- CalViva Health (10-87050 CO 11)
- Kern Family Health Care (03-76165 CO 26)
- Inland Empire Health Plan (04-35765 CO 24)
- LA Care Health Plan (04-36069 CO 24)
- Santa Clara Family Health Plan (04-35398 CO 27)
- San Francisco Health Plan (04-35400 CO 25)

Commercial Plans:

- Anthem Blue Cross Partnership Plan (03-76184 CO 26)
- Health Net Community Solutions, Inc. (12-89334 CO 10)
- Anthem Blue Cross Partnership Plan (10-87049 CO 11)
- Molina Healthcare (06-55498 CO 22)
- Health Net Community Solutions, Inc. (03-76182 CO 28)

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