

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**

---

December 30, 2016

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

Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract amendments for the COHS model:

- |  |          |            |
|--|----------|------------|
| • CalOptima                              | 08-85214 | <b>A30</b> |
| • CenCal Health                          | 08-85212 | <b>A30</b> |
| • Central California Alliance for Health | 08-85216 | <b>A31</b> |
| • Gold Coast Health Plan                 | 10-87128 | <b>A23</b> |
| • Health Plan of San Mateo               | 08-85213 | <b>A34</b> |
| • Partnership Health Plan of California  | 08-85215 | <b>A34</b> |

The Centers for Medicare and Medicaid Services (CMS) is approving the request to amend the above listed contracts effective July 1, 2014, which include rate adjustments for the period from July 1, 2014 through June 30, 2015.

Rates for this period include rate range updates and the impact of both the Hospital Quality Assurance Fee (HQAF) and SB 208 increases.

Our approval of all MCO contracts and their subsequent amendments is required under Title XIX of the Social Security Act, section 1903(m). Approval of contract changes does not extend federal financial participation (FFP) for costs associated with activities not meeting federal requirements.

Cantwell – page 2

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

Sincerely,

/s/

Henrietta Sam Louie  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Javier Portela, DHCS  
Sarah Brooks, DHCS  
Lindy Harrington, DHCS  
Jennifer Lopez, DHCS

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**

---

December 30, 2016

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

Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract amendments for the GMC model:

**Sacramento:**

- |  |          |            |
|--|----------|------------|
| • Anthem Blue Cross Partnership Plan                 | 07-65845 | <b>A16</b> |
| • Health Net Community Solutions, Inc.               | 07-65847 | <b>A16</b> |
| • KP Cal LLC   | 07-65849 | <b>A16</b> |
| • Molina Healthcare of California Partner Plan, Inc. | 07-65851 | <b>A15</b> |

**San Diego:**

- |  |          |            |
|--|----------|------------|
| • Care 1st Partner Plan, LLC                         | 09-86153 | <b>A15</b> |
| • Community Health Group Partnership Plan            | 09-86155 | <b>A13</b> |
| • Health Net Community Solutions, Inc.               | 09-86157 | <b>A14</b> |
| • KP Cal LLC   | 09-86159 | <b>A13</b> |
| • Molina Healthcare of California Partner Plan, Inc. | 09-86161 | <b>A13</b> |

The Centers for Medicare and Medicaid Services (CMS) is approving the request to amend the above listed contracts effective July 1, 2014, which include rate adjustments for the period from July 1, 2014 through June 30, 2015.

Rates for this period include rate range updates and the impact of both the Hospital Quality Assurance Fee (HQAF) and SB 208 increases. In addition, the Health Insurers Provider Fee (HIPF) has been updated for the commercial plans. The HIPF has also been added to the Hepatitis C rates and Behavioral Health Therapy rates.

Cantwell – page 2

Our approval of all MCO contracts and their subsequent amendments is required under Title XIX of the Social Security Act, section 1903(m). Approval of contract changes does not extend federal financial participation (FFP) 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 Beverly Hogaboom at (415) 744-3580 or [Beverly.Hogaboom@cms.hhs.gov](mailto:Beverly.Hogaboom@cms.hhs.gov).

Sincerely,

/s/

Henrietta Sam Louie  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Javier Portela, DHCS  
Sarah Brooks, DHCS  
Lindy Harrington, DHCS  
Jennifer Lopez, DHCS

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**

---

December 30, 2016

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

Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract amendments for the Regional model:

- Anthem Blue Cross Partnership Plan 13-90159 **A05**
- Anthem Blue Cross Partnership Plan 13-90163 **A05**
- California Health and Wellness Plan 13-90161 **A05**
- California Health and Wellness Plan 13-90157 **A05**
- Molina Healthcare of California Partner Plan, Inc. 13-90285 **A05**

The Centers for Medicare and Medicaid Services (CMS) is approving the request to amend the above listed contracts effective July 1, 2014, which include rate adjustments for the period from July 1, 2014 through June 30, 2015.

Rates for this period include rate range updates and the impact of both the Hospital Quality Assurance Fee (HQUAF) and SB 208 increases. In addition, the Health Insurers Provider Fee (HIPF) has been updated for the commercial plans. The HIPF has also been added to the Hepatitis C rates and Behavioral Health Therapy rates.

Our approval of all MCO contracts and their subsequent amendments is required under Title XIX of the Social Security Act, section 1903(m). Approval of contract changes does not extend federal financial participation (FFP) 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 Beverly Hogaboom at (415) 744-3580 or [Beverly.Hogaboom@cms.hhs.gov](mailto:Beverly.Hogaboom@cms.hhs.gov).

Sincerely,

/s/

Henrietta Sam Louie  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Javier Portela, DHCS  
Sarah Brooks, DHCS  
Lindy Harrington, DHCS  
Jennifer Lopez, DHCS

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**

---

December 30, 2016

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

Dear Ms. Cantwell:

Thank you for your submission of the following California Medicaid managed care contract amendments for the Two Plan model:

**Two-Plan – Commercial:**

- |  |          |     |
|--|----------|-----|
| • Anthem Blue Cross Partnership Plan                 | 03-76184 | A27 |
| • Anthem Blue Cross Partnership Plan                 | 10-87049 | A09 |
| • Health Net Community Solutions, Inc.               | 03-76182 | A28 |
| • Health Net Community Solutions, Inc.               | 12-89334 | A05 |
| • Molina Healthcare of California Partner Plan, Inc. | 06-55498 | A22 |

**Two-Plan – Local Initiative:**

- |   |          |     |
|---|----------|-----|
| • Alameda Alliance for Health                 | 04-35399 | A23 |
| • Anthem Blue Cross Partnership Plan (Tulare) | 04-36068 | A21 |
| • CalViva Health                              | 10-87050 | A09 |
| • Contra Costa Health Plan                    | 04-36067 | A20 |
| • Health Plan of San Joaquin                  | 04-35401 | A20 |
| • Inland Empire Health Plan                   | 04-35765 | A24 |
| • Kern Family Health Care                     | 03-76165 | A22 |
| • L.A. Care Health Plan                       | 04-36069 | A22 |
| • San Francisco Health Plan                   | 04-35400 | A21 |
| • Santa Clara Family Health Plan              | 04-35398 | A24 |

The Centers for Medicare and Medicaid Services (CMS) is approving the request to amend the above listed contracts effective July 1, 2014, which include rate adjustments for the period from July 1, 2014 through June 30, 2015.

Rates for this period include rate range updates and the impact of both the Hospital Quality Assurance Fee (HQUAF) and SB 208 increases. In addition, the Health Insurers Provider Fee (HIPF) has been updated for the commercial plans. The HIPF has also been added to the Hepatitis C rates and Behavioral Health Therapy rates.

Cantwell – page 2

Our approval of all MCO contracts and their subsequent amendments is required under Title XIX of the Social Security Act, section 1903(m). Approval of contract changes does not extend federal financial participation (FFP) 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 Beverly Hogaboom at (415) 744-3580 or [Beverly.Hogaboom@cms.hhs.gov](mailto:Beverly.Hogaboom@cms.hhs.gov).

Sincerely,

/s/

Henrietta Sam Louie  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Javier Portela, DHCS  
Sarah Brooks, DHCS  
Lindy Harrington, DHCS  
Jennifer Lopez, DHCS