

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Fully Delegated Subcontractor, Partially Delegated Subcontractor, Administrative Subcontractor	County in which Subcontractor is delegated services.	Name for each of Subcontractor’s key personnel who is responsible for ensuring compliance.	Contact information for each of Subcontractor’s key personnel who is responsible for ensuring compliance <i>(Email &amp; Telephone Number)</i> .
Central California Alliance for Health	S1	AristaMD	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Jim Nathlich, Director of Security and Compliance	jnathlich@aristamd

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
			Clinical Functions	Administrative Functions	Administrative - Other
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	<p>The clinical function(s) Contractor is delegating to Subcontractor. Please select all delegated functions from the drop-down list.</p> <p>If a Subcontractor is delegated different functions in different counties, please duplicate the Subcontractor entry but specify in each row which functions are delegated in each county.</p>	<p>The administrative function(s) Contractor is delegating to Subcontractor. Please select all delegated functions from the drop-down list.</p> <p>If a Subcontractor is delegated different functions in different counties, please duplicate the Subcontractor entry but specify in each row which functions are delegated in each county.</p>	If 'Other' was selected in Column I, please describe.
Central California Alliance for Health	S1	AristaMD		Provider Credentialing	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Address1	Address2	City	ZIP Code
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	The address for location of the performance of Subcontractor’s functions.			
Central California Alliance for Health	S1	AristaMD	4660 LaJolla Village Dr	Ste 100 #1535	San Diego	92122

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Percentage of the total Medi-Cal Members assigned to the Subcontractor if applicable.	Proportion of total capitated rates for which the Subcontractor is at risk, if applicable.	Describe the purpose and the justification of the Subcontractor Agreement or Downstream Subcontractor Agreement.
Central California Alliance for Health	S1	AristaMD	N/A	N/A	The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with AristaMD since 2020 and began delegating the credentialing function to them when their contract was executed. AristaMD employs 145 rendering providers through the Network Provider/Subcontractor Agreement. Considering AristaMD employs 145 rendering providers, the Alliance has delegated credentialing to AristaMD of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Describe any pre-existing relationship, including any affiliation, parent entity, or prior existing contract between Contractor and Subcontractor, or Subcontractor and Downstream Subcontractor including the duration of such pre-existing relationship.	Indicate if Subcontractor or Downstream Subcontractor is permitted to sub-delegate any functions. If so, describe how <u>Contractor</u> will maintain oversight over delegated functions to Subcontractors and Downstream Subcontractors. Provide citations to provisions in the Subcontractor Agreement and Downstream Subcontractor Agreement to support Contractor’s assertions.
Central California Alliance for Health	S1	AristaMD	The Alliance held a vendor agreement with AristaMD for eConsult services prior to the execution of the Network Provider/Subcontractor Agreement	AristaMD is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 2.16 of the Network Provider/Subcontractor Agreement). The Network Provider/Subcontractor Agreement between the Alliance and AristaMD provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, AristaMD is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. AristaMD is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. AristaMD is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that AristaMD has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 2.16 of the Network Provider/SubcontractorAgreement).

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Describe the impact and benefit, if any, the Subcontractor Agreement or Downstream Subcontractor Agreement will have on Contractor’s operations, administrative capacity, and financial viability.	Describe Contractor’s administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor as applicable.
Central California Alliance for Health	S1	AristaMD	The Alliance’s agreement with AristaMD allows it to leverage AristaMD’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of AristaMD’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance.
				As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Describe Subcontractor’s and Downstream Subcontractor’s administrative capacity to perform each delegated function, including but not limited to Subcontractor’s and Downstream Subcontractor’s capacity to perform quality monitoring and community engagement, if applicable.
Central California Alliance for Health	S1	AristaMD	<p>On an ongoing, basis, the Alliance maintains a three-pronged approach to ensure its Subcontractors are able to meet the Alliance’s required performance expectations, and as such, are maintaining administrative capacity required to satisfactorily fulfill such delegated functions.</p> <p>Pre-delegation Assessment and Approval Process Prior to delegating functions to an entity, the Compliance Committee verifies that entities meet the appropriate Alliance standards for delegated activities based on the Medi-Cal Contract, National Committee for Quality Assurance (NCQA) standards and industry best practices. Directors of each department (or their designee) whose function has been delegated to an entity reviews the information provided to determine that the delegated health plan activities are consistent with Alliance standards for delegated activities. If the delegate has any sub-delegation agreements, the Alliance will, as appropriate, review the sub-delegate policies and procedures to determine that processes meet standards. Documentation reviewed varies based on whether the entity is Knox Keene licensed and/or accredited by NCQA or URAC, as described in policy 105-0004 – Delegate Oversight. Each reviewing Director or their designee shall prepare a recommendation to the Compliance Committee regarding the entity’s ability to perform the delegated activity. The Committee will take action based on the Director recommendation as to whether the entity meets appropriate Alliance standards for delegated activities. The outcome will be recorded in the Compliance Committee minutes.</p>
			<p>Ongoing Annual Verification of Delegation</p> <p>The Alliance performs ongoing monitoring of delegated activities to ensure that delegates meet Alliance standards as set forth in contracts, legislation and regulations. The process for ongoing verification is the same as for the pre-delegation assessment described above, with a focus on updates or changes to any previously reviewed policy and procedure, and commences for all entities during the first quarter of each year. Reviewing Directors (or their designees) will complete an Annual Review Assessment which verifies that the required information was received from the delegate and reviewed and which provides a recommendation for Compliance Committee’s approval.</p> <p>Continuous Oversight, Monitoring and Evaluation of Delegated Activities</p> <p>The Alliance provides oversight, monitoring, and evaluation of activities by monitoring regular reports from entities. Each reviewing Director bears responsibility for identifying, addressing and resolving concerns relating to their delegated function based on the information presented by the entity to ensure Alliance standards are met. Each reviewing Director or their designee shall prepare a recommendation on the Quarterly Review Assessment regarding the entity’s performance regarding the delegated activity. Through its Compliance Committee, the Alliance makes recommendations for approval and/or improvements or corrective action to entities where required and informs the Board of any relevant delegate oversight issues.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Detail how the Subcontractor Agreement and Downstream Subcontractor Agreement complies with, and ensures compliance, with all provisions of the Contract applicable to the delegated functions, including appropriate citations to the provisions in the Subcontractor Agreement and Downstream Subcontractor Agreement. Please complete Template C (Contract Requirements Grid) in Exhibit J to indicate which provisions are included in the Subcontractor Agreements and Downstream Subcontractor Agreements, as applicable for each Agreement.
Central California Alliance for Health	S1	AristaMD	Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Describe how Contractor will inform Subcontractor and Downstream Subcontractors of Contractor’s oversight policies and procedures.
Central California Alliance for Health	S1	AristaMD	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Contractor must include description of any financial arrangements it has with Subcontractor and Downstream Subcontractor.
Central California Alliance for Health	S1	AristaMD	AristaMD receives reimbursement for the services provided by it’s rendering providers to member at fee-for-service rates. AristaMD does not receive any compensation specific to the function of delegated credentialing.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Name of the Managed Care Plan with whom the Subcontractor has an Agreement	Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)	Name of the Subcontractor with whom Contractor has a Subcontractor Agreement	Include any other information that would assist DHCS in its review of Contractor’s delegated structure.	<b>(Applicable to annual submissions only)</b> If Contractor has previously submitted documentation to DHCS in connection with the Subcontractor Agreement or Downstream Subcontractor Agreement, either through the Request for Proposal (RFP) process or during the term of this Contract, Contractor must provide any such documentation.  Please submit any previously approved supplemental documentation with this completed Exhibit. Below, please indicate the title of the supplemental file along with a brief description of its contents.
Central California Alliance for Health	S1	AristaMD	No additional information at this time.	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Central California Alliance for Health	S2	Call the Car	Partially Delegated Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Richard Borden, Director of Compliance	rborden@callthecar.com
Central California Alliance for Health	S3	Carelon Behavioral Health of California	Partially Delegated Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Sheree Marzka, Compliance Officer	<u>sheree.marzka@carelon.com</u>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Central California Alliance for Health	S2	Call the Car		Non-Emergency Transportation	
Central California Alliance for Health	S3	Carelon Behavioral Health of California	Behavioral Health - Mild to Moderate, Behavioral Health - Moderate to Severe	Utilization Management Care Coordination Claims Processing Provider Credentialing Member Complaint and Grievance Resolution Other	Mental Health

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Address1	Address2	City	ZIP Code
Central California Alliance for Health	S2	Call the Car	21950 Copley Dr		Diamond Bar	91765
Central California Alliance for Health	S3	Carelon Behavioral Health of California	12898 Towne Center Drive		Cerritos	90730

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Central California Alliance for Health	S2	Call the Car	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) initially contracted with Call the Car in 2017, to help fulfill its obligations related to Non-Medical Transportation (NMT), which is a Medi-Cal covered benefit. The Alliance has subcontracted with Call the Car to provide roundtrip NMT services for the following: 1)Medically necessary Medi-Cal covered services, including services that are not administered by the Alliance, such as mental health services provided by the County Mental Health Plans; 2) Members picking up drug prescriptions that cannot be mailed directly to the member; and 3) Members picking up medical supplies, prosthetics, orthotics, and other equipment.</p> <p>As DHCS is aware, NMT was a new benefit beginning in 2017. Prior to executing its Subcontractor Agreement with Call the Car, the Alliance to immediate action to administer the NMT benefit through its network of Nonemergency Medical Transportation (NEMT) providers. Considering the NEMT network is already stretched thinly, and in anticipation of the increased volume of car rides needed with the newly implemented NMT benefit, the Alliance recognized the need for a new provider with increased capacity; thus, the Alliance began working with Call the Car.</p> <p>Executing this Subcontractor Agreement significantly decreased the Alliance’s utilization of NEMT providers for NMT services with a primary goal of complying with relevant timely access standards (i.e., Alliance members will have to wait less time for transportation to/from appointments for which NMT services are available).</p>
Central California Alliance for Health	S3	Carelon Behavioral Health of California	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) initially contracted with Beacon Health Strategies (Beacon) in 2014, when Medi-Cal managed care plans first became responsible for the mild-moderate mental health benefit. Due to the need to quickly develop a network and implement processes to enable the provision of that benefit, the Alliance opted to delegate the provision of mild-moderate mental health services and through an RFP process, selected Beacon.</p> <p>Beacon has specialized knowledge in behavioral health, including knowledge about how to navigate the delivery system and interact with the Mental Health Plans, clinical review for behavioral health services, and claims payment. During the 9 years since the mild-moderate mental benefit was first implemented, Beacon has met Alliance performance expectations or has responded adequately when deficiencies have been identified. They have also expanded the network of providers available to see Alliance members and we have seen increasing utilization of services in the Alliance service area. Note that since 2014, Beacon has been rebranded as Carelon.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Central California Alliance for Health	S2	Call the Car	As mentioned above, the Alliance worked with Call the Car beginning in 2017. However, the Alliance executed its more formal Subcontractor Agreement with Call the Car in October 2022. The Alliance executed its Subcontractor Agreement with Call the Car in 2022 because the utilization volume of this benefit grew beyond what the Alliance was capable of effectively providing, and compliance with the DHCS’ standards for call answer time was strained.	Call the Car may subcontract certain portions of its Subcontractor Agreement upon prior, written approval from both the Alliance and DHCS. The Alliance’s General Services Agreement and Statement of Work define and detail the functions which the Alliance may delegated to Call the Car as well as specific functions which Call the Car is currently responsible for performing, respectively. The Alliance’s General Services Agreement executed with Call the Car expressly states that Call the Car acknowledges and understands that, in performing the Services for the Alliance, Call the Car is subject to, and must comply with, certain Government Program Requirements and other laws and regulations imposed on subcontractors, sub-subcontractors, vendors and/or delegates of the Alliance or of Governmental Authorities with which the Alliance contracts or subcontracts as a participant in a Government Program. As a result of the Alliance’s participation in one or more Government Programs, Call the Car, too, may be considered a participant in such Government Program with respect to the performance of the Services contained in the General Services Agreement.
				Call the Car shall be solely responsible for compliance with all Government Program Requirements and any laws and regulations applicable thereto which are imposed on Call the Car in its performance of the Services. Contractor must comply with all such Government Program Requirements. Any contract terms or conditions which now or hereafter are required to be included in this Agreement by applicable federal or state laws and regulations, a Government Program or a Governmental Authority, shall be binding upon and enforceable against Call the Car, as applicable, and be deemed incorporated herein, irrespective of whether or not such provisions are expressly set forth in the Agreement.
Central California Alliance for Health	S3	Carelon Behavioral Health of California	The Alliance did not have a pre-existing relationship with Carelon prior to executing the existing Subcontractor Agreement.	Carelon may subcontract certain administrative services upon prior written review and approval of the Alliance. The Subcontractor Agreement between the Alliance and Carelon provides for extensive oversight functions to ensure ongoing compliance with the Subcontractor Agreement, Alliance policies, and applicable law and regulations. Carelon, and any of its Downstream Subcontractors, must at minimum adhere to the Alliance’s rights to monitor and inspect the following: copies of policies and procedures for Administrative Services as requested by Plan. In addition, Carelon shall maintain and provide at no cost to Plan, upon written request, any and all information required by Plan, the Medi-Cal Managed Care Contract, The California Department of Health Care Services or other government agencies. Books and records relating to the Medi-Cal product shall be maintained for a term of at least five (5) years from the close of the current Fiscal Year in which the date of service occurred; in which the record or data was created or applied and for which the financial record was created. Carelon and its subcontractors’ books and records relating to IHSS and services Beacon previously performed for Plan, including MCAP, shall be preserved according to 28 CCR §1300.85.1. Preservation of such books and records shall be for a period of not less than five (5) years, the last two (2) years of which shall be in an easily accessible place at the offices of the Plan or Carelon or its subcontractors. After such books and records have been preserved for two (2) years, they may be warehoused or stored, or microfilmed, subject to their availability to the Director of the Department of Managed Health Care within not more than five (5) days after request therefore. Carelon shall provide Plan, its duly authorized representatives or applicable governmental agencies, access to conduct unannounced inspections and examinations of all Carelon records, books and papers.



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Central California Alliance for Health	S2	Call the Car	As noted above, the primary impacts and benefits of the Alliance Subcontractor Agreement with Call the Car are, 1) to significantly decreased the Alliance’s utilization of NEMT providers for NMT services, and 2) to comply with relevant timely access standards (i.e., Alliance members will have to wait less time for transportation to/from appointments for which NMT services are available). Not subcontracting NMT services to Call the Car (or a similar subcontracted service provider) would have a negative impact on the Alliance’s finances and administrative spend as we would need to hire a significant number of additional personnel to administer this benefit, as well as a fleet of properly equipped vehicles extending across all the Alliance’s services areas.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.
Central California Alliance for Health	S3	Carelon Behavioral Health of California	As noted above, the Alliance’s agreement with Carelon allows it to leverage Carelon’s specialized knowledge. Bringing service delivery in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel with this specialized knowledge to administer the benefit.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Central California Alliance for Health	S2	Call the Car	See response for AristaMD
Central California Alliance for Health	S3	Carelon Behavioral Health of California	See response for AristaMD

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Central California Alliance for Health	S2	Call the Car	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S3	Carelon Behavioral Health of California	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Central California Alliance for Health	S2	Call the Car	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S3	Carelon Behavioral Health of California	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Central California Alliance for Health	S2	Call the Car	<p>Call the Car shall submit encounter-based claims data to the Plan within thirty (30) calendar days after the beginning of each calendar month of the Term for all Services performed in accordance with the Agreement during the preceding calendar month, payable net thirty (30) days after the Plan's receipt of invoice. The Plan is contracted with a clearing house, in which the Plan is responsible for the cost of each claim submission and transaction only. If any other clearing house is used, the Plan will not be responsible for fees incurred. Call the Car will be responsible for all associated costs. The Plan will provide contractor payment remittance in an X12 835 format. The Alliance will ensure all its decision-making employees are available to meet, to determine payment dispute resolution, within thirty (30) calendar days of written notification by Contractor.</p> <p>Call taking fee applies to a “Successful Interaction” between a Member and a Contractor Call Center Representative for both inbound and outbound calls. For the purposes of its Subcontractor Agreement, a Successful Interaction shall be defined as the completion of a Member telephone call to or from Contractor's Call Center in which the Contractor Call Center Representative has provided the member with the requested deliverables, completed on time, and which otherwise meets all the criteria required under this Agreement.</p> <p>No Show/Late Cancellation Rate – Will be applied for any trip where the Member is not at the pick-up address, or the trip was cancelled less than twenty-four (24) hours of the original pick-up time, not including cancellations by a member when the driver arrives past the fifteen-minute grace period.</p> <p>1/10 mileage shall be compensated for in the following method:</p> <ul style="list-style-type: none"><li>•0 – 0.499 shall be rounded down to the nearest whole mile.</li><li>•0.5 - 0.999 shall be rounded up to the nearest whole mile.</li></ul>
Central California Alliance for Health	S3	Carelon Behavioral Health of California	<p>For mild-moderate behavioral health services, payment to Carelon includes pass through payments on claims paid by Beacon on the Alliance’s behalf and a per member per month non-clinical administrative fee paid to Carelon for administering the benefit. The Alliance also pays an additional non-clinical administrative fee to Carelon for Medi-Cal members who are actively receiving behavioral health treatment (BHT) services to treat autism or pervasive developmental disorder. The Alliance’s agreement with Carelon includes performance guarantees and a withhold of a portion of administrative fees if Carelon does not meet the expected performance guarantees. All financial arrangements are included in the agreement with Carelon, as attached hereto.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Central California Alliance for Health	S2	Call the Car	No additional information at this time.	
Central California Alliance for Health	S3	Carelon Behavioral Health of California	No additional information at this time.	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	Partially Delegated Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Jack Way	Compliance@carenethealthcare.com
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	ASHLEY WILLINGHAM - PROGRAM MANAGER	PH: 559-353-5044 - EMAIL: AWILLINGHAM1@VALLEYCHILDRENS.ORG
Central California Alliance for Health	S6	Dignity Health Medical Foundation	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Teasha Fleming	teasha.fleming@communityspirit.org

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)		Other	Member Connections
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)		Provider Credentialing	
Central California Alliance for Health	S6	Dignity Health Medical Foundation		Provider Credentialing	



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Address1	Address2	City	ZIP Code
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	11845 Interstate 10 W		San Antonio, Tx	78230
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	9300 VALLEY CHILDRENS PLACE	M/S PCX 302	MADERA	93636
Central California Alliance for Health	S6	Dignity Health Medical Foundation	3400 Data Drive		Rancho Cordova	95670

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) initially contracted with CareNet in 2018, to help fulfill its obligations related to telephone triage for after-hours phone calls by Alliance members. CareNet operates a health call center from this headquarters in San Antonio, Texas, to provide the following:</p> <ul style="list-style-type: none"><li>•Answer inbound calls to the Nurse Advice Line. If the recommendation of care is an Urgent Visit, the Registered Nurse (RN) will provide the member information on which the Contracted Urgent Visit Access Office the member should go to. Nurses will search for an approved contracted Urgent Visit Access Office via the Alliance provider Directory and offered available sites.</li><li>•Direct members to resources, programs, or services using information provided by the Alliance.</li></ul>
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with ChildNet (CNET) for many years and began delegating the credentialing function to them in 2010. CNET employs 365 rendering providers through the Network Provider/Subcontractor Agreement. Considering CNET employs 365 rendering providers, the Alliance has delegated credentialing to CNET of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.</p>
Central California Alliance for Health	S6	Dignity Health Medical Foundation	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with Dignity Health Medical Group (DHMG) for many years and began delegating the credentialing function to them in 2023. DHMG employs 152 rendering providers. Considering DHMG employs 152 rendering providers, the Alliance has delegated credentialing to DHMG of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) initially contracted with CareNet in 2018, to help fulfill its obligations related to telephone triage for after-hours phone calls by Alliance members. CareNet operates a health call center from this headquarters in San Antonio, Texas, to provide the following:</p> <ul style="list-style-type: none"><li>•Answer inbound calls to the Nurse Advice Line. If the recommendation of care is an Urgent Visit, the Registered Nurse (RN) will provide the member information on which the Contracted Urgent Visit Access Office the member should go to. Nurses will search for an approved contracted Urgent Visit Access Office via the Alliance provider Directory and offered available sites.</li><li>•Direct members to resources, programs, or services using information provided by the Alliance.</li></ul>	CareNet may subcontract certain portions of its Subcontractor Agreement upon prior, written approval from both the Alliance and DHCS. The Alliance’s General Services Agreement and Statement of Work define and detail the functions which the Alliance delegated to CareNet as well as specific functions which CareNet is currently responsible for performing, respectively. The Alliance’s General Services Agreement executed with CareNet requires services outside of the scope of work defined in the Agreement be executed through a written, issued, and authorized Statement of Work. Further, the Agreement states that any Statements of Work (i.e., downstream subcontracting), are expressly subject to approval of DHCS.
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	The Alliance did not have a pre-existing relationship with CNET prior to executing the existing Network Provider/Subcontractor Agreement.	<p>CNET is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 9.2 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and CNET provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, CNET is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. CNET is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. CNET is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that CNET has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 7.3.c of the Network Provider/Subcontractor Agreement).</p>
Central California Alliance for Health	S6	Dignity Health Medical Foundation	The Alliance has restated and amended its Agreement with DHMG over the years, but otherwise did not have a pre-existing relationship with DHMG prior to executing the existing Network Provider/Subcontractor Agreement.	<p>DHMG is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 2.16 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and DHMG provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, DHMG is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. DHMG is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. DHMG is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that DHMG has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 2.16 of the Network Provider/Subcontractor Agreement).</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	As noted above, the primary impacts and benefits of the Alliance Subcontractor Agreement with CareNet are to provide Alliance members with after-hours telephone services, in compliance with the Alliance’s DHCS Contract requiring certain services be provided to Alliance members 24 hours a day, seven days a week. Not subcontracting CareNet’s after-hours call center services would have a negative impact on the Alliance’s finances and administrative spend as we would need to hire additional personnel to administer this benefit for Alliance members.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions. The Alliance’s Member Services staff receive monthly Performance Reporting – the criteria of which are detailed in the Alliance’s Agreement with CareNet – and review such reporting to ensure CareNet is providing sufficient service to Alliance members.
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	The Alliance’s agreement with CNET allows it to leverage CNET’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of CNET’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.
Central California Alliance for Health	S6	Dignity Health Medical Foundation	The Alliance’s agreement with DHMG allows it to leverage DHMG’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of DHMG’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	See response for AristaMD
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	See response for AristaMD
Central California Alliance for Health	S6	Dignity Health Medical Foundation	See response for AristaMD

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S6	Dignity Health Medical Foundation	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S6	Dignity Health Medical Foundation	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	<p>CareNet’s fee is based on a Per Member Per Month (PMPM) Model. The Alliance is charged for the ongoing use of the Carenet Nurse Advice Line Services based on the number of Members who have access to the Carenet Nurse Advice Line Services as set forth in the last Client data update multiplied by the per Member per month fee according to Table 2 below (“Carenet Nurse Advice Line Services Fee”). Table 2 fees will be based on the number of Members who have access to the Carenet Nurse Advice Line Services and the Annual Call Run Rate. Notwithstanding any other fee schedule or calculation listed in this Schedule 1, Carenet shall be paid a minimum fee for the Carenet Nurse Advice Line Services beginning on the Carenet Nurse Advice Line Services Launch Date. The minimum fee is \$7,500.00 per month.</p> <p>B. Call Equivalents are described below:</p> <p>Table 1 - Call Equivalents</p> <p>All Calls, E-Mails, Nurse Chats, and Online Symptom Advisor interactions</p> <p>1.00</p> <p>Navigation Survey0.50</p> <p>Audio Health Library1.00</p> <p>For purposes of calculating the Annual Call Run Rate, all calls received by Carenet will be assigned a Call Equivalent weighting as shown in Table 1.0 above. Call Equivalents will be multiplied by the number of calls received by service unit to arrive at total Call Equivalents used in the Annual Call Run Rate.</p> <p>By way of example: If during a month Carenet receives 800 Carenet Nurse Advice Line Services calls, 100 nurse chats, and 200 navigation surveys, then 1,000 Call Equivalents will be used in the Annual Call Run Rate calculation ((800 X 1.0) + (100 X 1.0) + (200 X 0.5) =1,000).</p> <p>C. Monthly Carenet Nurse Advice Line Services Fees are calculated as follows: (Total number of Members X price per Member in Table 2)</p> <p>By way of example, if during a month Carenet provided Carenet Nurse Advice Line Services for 285,000 Members (470 calls per month) and the annual call run rate for the month was 0.020, then the Monthly Carenet Nurse Advice Line Services Fees would be</p>
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	<p>CNET receives reimbursement for the services provided by its rendering providers to members. Case Managed Services provided by CNET’s PCP providers are reimbursed through a monthly capitation rates. The rest of Covered Services provided by CNET rendering providers are paid fee-for-service rates. CNET does not receive any compensation specific to the function of delegated credentialing.</p>
Central California Alliance for Health	S6	Dignity Health Medical Foundation	<p>DHMG receives reimbursement for the services provided by it’s rendering providers to members. Case Managed Services provided by DHMG’s PCP providers are reimbursed through a monthly capitation rates. The rest of Covered Services provided by DHMG rendering providers are paid fee-for-service rates. DHMG does not receive any compensation specific to the function of delegated credentialing.</p>



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Central California Alliance for Health	S4	CareNet (Infomedia Group, Inc.)	No additional information at this time.	
Central California Alliance for Health	S5	ChildNet (Valley Childrens Hospital)	No additional information at this time.	
Central California Alliance for Health	S6	Dignity Health Medical Foundation	No additional information at this time.	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Jennifer Clements, Director Managed Care Operations - Managed Care Department	Jclements@stanfordhealthcare.org
Central California Alliance for Health	S8	Palo Alto Medical Foundation	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Melissa Brendt, Chief Contracting Officer	Melissa.Brendt@sutterhealth.org
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Lisa Pfeifer, Chief Compliance Officer	408-885-3794 855-888-1550 Complianceofficer@hhs.sccgov.org
Central California Alliance for Health	S10	Stanford Medical Group	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Jennifer Clements, Director Managed Care Operations - Managed Care Department	Jclements@stanfordhealthcare.org

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)		Provider Credentialing	
Central California Alliance for Health	S8	Palo Alto Medical Foundation		Provider Credentialing	
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)		Provider Credentialing	
Central California Alliance for Health	S10	Stanford Medical Group		Provider Credentialing	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Address1	Address2	City	ZIP Code
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	300 Pasteur Drive, MC 5519		Sanford	94305
Central California Alliance for Health	S8	Palo Alto Medical Foundation	2200 River Place Dr		Sacramento	95833
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	2325 Enborg Lane, Suite 290		San Jose	95128
Central California Alliance for Health	S10	Stanford Medical Group	300 Pasteur Drive, MC 5519		Sanford	94305

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	N/A	N/A	The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with Lucille Packard Children’s Hospital (LPCH) for many years credentialing its own, large provider network. Considering LPHC employs 1757 rendering providers, the Alliance has delegated credentialing to LPHC of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.
Central California Alliance for Health	S8	Palo Alto Medical Foundation	N/A	N/A	The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with Palo Alto Medical Foundation (PAMF) for purposes of credentialing its own, large provider network. Considering PAMF employs 1714 rendering providers, the Alliance has delegated credentialing to PAMF of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	N/A	N/A	The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with Santa Clara Valley Medical Center (SCVMC) for many years and began delegating the credentialing function to them in 2003. The Alliance has subcontracted credentialing to SCVMC of its own, large provider network. Considering SCVMC employs 772 rendering providers, the Alliance has delegated credentialing to SCVMC of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.
Central California Alliance for Health	S10	Stanford Medical Group	N/A	N/A	The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Memorandum of Understanding with Stanford Medical Group (Stanford) for many years. Their MOU was modified into a Network Provider Agreement in 2019 and the Alliance and began delegating the credentialing function to them in 2022. The Alliance has subcontracted credentialing to Stanford of its own, large provider network. Considering Stanford employs 3035 rendering providers, the Alliance has delegated credentialing to Stanford of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	Over the years, the Alliance has amended and restated its Agreement with LPHC, but otherwise did not have a pre-existing relationship with LPCH prior to executing the existing Network Provider/Subcontractor Agreement.	<p>LPCH is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 2.16 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and LPCH provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, LPCH is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. LPCH is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. LPCH is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that LPCH has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 2.16 of the Network Provider/Subcontractor Agreement).</p>
Central California Alliance for Health	S8	Palo Alto Medical Foundation	The Alliance has restated and amended its Agreement with PAMF as appropriate throughout the duration of its relationship but did not have a pre-existing relationship with PAMF prior to executing the existing Network Provider/Subcontractor Agreement.	<p>PAMF is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 6.7.2 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and PAMF provides for extensive oversight functions to ensure ongoing compliance with the Subcontractor Agreement. On at least an annual basis the Alliance is able to monitor and oversee PAMF’s performance of Delegated Credentialing Activities. This may be conducted via an on-site audit (or off-site if mutually agreed to by the Parties) of the Professional Provider. The audit shall include, but not be limited to reviewing PAMF’s policies and procedures, credentialing committee minutes and credentialing and recredentialing files. PAMF shall cooperate, participate and comply with applicable governmental regulatory authorities and NCQA, acting on behalf of Plan, in evaluation and oversight activities. (Exhibit K, Section K.2.5)</p>
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	The Alliance did not have a pre-existing relationship with SCVMC prior to executing the existing Network Provider/Subcontractor Agreement.	<p>SCVMC is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 9.2 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and SCVMC provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, SCVMC is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. SCVMC is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. SCVMC is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that SCVMC has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 7.3.c of the Network Provider/Subcontractor Agreement).</p>
Central California Alliance for Health	S10	Stanford Medical Group	The Alliance did not have a pre-existing relationship with Stanford prior to executing the existing Network Provider/Subcontractor Agreement.	<p>Stanford is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 16 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and Stanford provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, Stanford is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. Stanford is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. Stanford is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that Stanford has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 16 of the Network Provider/Subcontractor Agreement).</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	The Alliance’s agreement with LPCH allows it to leverage LPCH’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of LPCH’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.
Central California Alliance for Health	S8	Palo Alto Medical Foundation	The Alliance’s agreement with PAMF allows it to leverage PAMF’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of PAMF’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	The Alliance’s agreement with SCVMC allows it to leverage SCVMC’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of SCVMC’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.
Central California Alliance for Health	S10	Stanford Medical Group	The Alliance’s agreement with Stanford allows it to leverage Stanford’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of Stanford’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	See response for AristaMD
Central California Alliance for Health	S8	Palo Alto Medical Foundation	See response for AristaMD
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	See response for AristaMD
Central California Alliance for Health	S10	Stanford Medical Group	See response for AristaMD



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S8	Palo Alto Medical Foundation	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>
Central California Alliance for Health	S10	Stanford Medical Group	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S8	Palo Alto Medical Foundation	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures
Central California Alliance for Health	S10	Stanford Medical Group	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	LPCH receives reimbursement for the services provided by it’s rendering providers to members. Case Managed Services provided by LPCH’s PCP providers are reimbursed through a monthly capitation rates. The rest of Covered Services provided by LPCH rendering providers are paid fee-for-service rates. LPCH does not receive any compensation specific to the function of delegated credentialing.
Central California Alliance for Health	S8	Palo Alto Medical Foundation	PAMF receives reimbursement for the services provided by it’s rendering providers to members. Case Managed Services provided by PAMF’s PCP providers are reimbursed through a monthly capitation rates. The rest of Covered Services provided by PAMF rendering providers are paid fee-for-service rates. PAMF does not receive any compensation specific to the function of delegated credentialing.
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	PAMF receives reimbursement for the services provided by it’s rendering providers to members. Case Managed Services provided by PAMF’s PCP providers are reimbursed through a monthly capitation rates. The rest of Covered Services provided by PAMF rendering providers are paid fee-for-service rates. PAMF does not receive any compensation specific to the function of delegated credentialing.
Central California Alliance for Health	S10	Stanford Medical Group	Stanford receives reimbursement for the services provided by it’s rendering providers to members at fee-for-service rates. Stanford does not receive any compensation specific to the function of delegated credentialing.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Central California Alliance for Health	S7	Lucile Packard Children's Hospital (LPCH)	No additional information at this time.	
Central California Alliance for Health	S8	Palo Alto Medical Foundation	No additional information at this time.	
Central California Alliance for Health	S9	SCVMC (Santa Clara Valley Medical Center)	No additional information at this time.	
Central California Alliance for Health	S10	Stanford Medical Group	No additional information at this time.	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Central California Alliance for Health	S11	University of California San Francisco	Administrative Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Vanessa Ridley, Chief Compliance & Chief Privacy Officer	vanessa.ridley@ucsf.edu

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Central California Alliance for Health	S11	University of California San Francisco		Provider Credentialing	



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Central California Alliance for Health	S11	University of California San Francisco	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) has held a Network Provider/Subcontractor Agreement with UCSF Medical Group (UCSF) for many years and began delegating the credentialing function to them in 2001. The Alliance has subcontracted credentialing to UCSF of its own, large provider network. Considering UCSF employs 4669 rendering providers, the Alliance has delegated credentialing to UCSF of its vast provider network to ensure Alliance members have timely access to necessary care and are not inhibited by what would otherwise be a burdensome credentialing process administered by the Alliance.</p>



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Central California Alliance for Health	S11	University of California San Francisco	The Alliance did not have a pre-existing relationship with UCSF prior to executing the existing Network Provider/Subcontractor Agreement.	<p>UCSF is not permitted to further delegate the credentialing function without the express written consent of the Plan (Section 9.2 of the Network Provider/Subcontractor Agreement).</p> <p>The Network Provider/Subcontractor Agreement between the Alliance and UCSF provides for extensive oversight functions to ensure ongoing compliance with the Network Provider/Subcontractor Agreement, UCSF is required to maintain credentialing and recredentialing records and shall permit the Alliance to audit and copy such information, upon request. UCSF is also required to provide reports related to the credentialing function as reasonably requested by the Alliance. UCSF is required to comply with the Alliance’s monitoring and oversight policies. The Alliance has the authority, in its sole discretion, to revoke the delegation of credentialing at any time in the event that the Alliance determines that UCSF has failed to meet it’s obligations under the Network Provider/Subcontractor Agreement. (Section 7.3.c of the Network Provider/Subcontractor Agreement).</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Central California Alliance for Health	S11	University of California San Francisco	The Alliance’s agreement with UCSF allows it to leverage UCSF’s credentialing team. Bringing the function in-house would have an impact on the Alliances’ finances and administrative spend as we would need to hire additional personnel to credential each of UCSF’s rendering providers.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Central California Alliance for Health	S11	University of California San Francisco	See response for AristaMD

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Central California Alliance for Health	S11	University of California San Francisco	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Central California Alliance for Health	S11	University of California San Francisco	The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Central California Alliance for Health	S11	University of California San Francisco	UCSF receives reimbursement for the services provided by it’s rendering providers to members. All Covered Services provided by UCSF rendering providers are paid fee-for- service rates. UCSF does not receive any compensation specific to the function of delegated credentialing.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Central California Alliance for Health	S11	University of California San Francisco	No additional information at this time.	

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Type of Subcontractor	Applicable County(ies)	Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>
Central California Alliance for Health	S12	Vision Service Plan	Partially Delegated Subcontractor	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Felicia Jackson, Chief Compliance Officer	<u>Felicia.Jackson@vsp.com</u>



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Central California Alliance for Health	S12	Vision Service Plan	Vision	Claims Processing Member Complaint and Grievance Resolution Provider Credentialing	

Template A1-B Page 58 of 147

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement
Central California Alliance for Health	S12	Vision Service Plan	N/A	N/A	<p>The Central California Alliance for Health (the “Alliance” or “Plan”) initially contracted with Vision Service Plan (VSP) in 1999, to help fulfill its obligations related to providing Alliance members with vision care. Through its extensive vision care network, VSP is able to provide Alliance members with licensed vision care specialists (optometrists and ophthalmologists). VSP is responsible for credentialing its specialist providers, arranging for and/or providing covered services throughout California, and performing quality assurance, improvement, and investigation activities related to the quality of Services provided by its VSP Network Providers. The Alliance has been contracted with VSP for 24 years and has accordingly developed and evolved its relationship with VSP throughout that time. VSP is one of the most robust and reputable vision health plans currently operating. Based on its longstanding relationship with VSP coupled with VSP’s highly specialized network of providers, the Alliance has not had to develop in-house clinical and administrative expertise to effectively administer vision-related covered services to Alliance members and, as such, relies heavily on VSP.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Pre-Existing Relationships	Sub-Delegation
Central California Alliance for Health	S12	Vision Service Plan	<p>The Alliance has held its relationship with VSP for 24 years. Most recently, in July 2017, the Alliance executed its Amended and Restated Allied Vision Services Agreement with VSP. Given the expansive time in which the Alliance and VSP have been in operating agreement, there have been iterations of such Agreements all related to vision services, as described herein.</p>	<p>The Alliance requires prior written consent before VSP may subcontract any duties or obligations contained in its Subcontractor Agreement. Assignment or delegation of the Alliance’s Agreement</p> <p>with VSP shall be void unless prior written approval is obtained from DHCS. Where both Plan and DHCS have given prior written consent to VSP to allow assignment or delegation of any duties or obligations under the Subcontractor Agreement, VSP must notify Plan when any such sub-delegation contract subject to the Agreement is terminated. The Alliance’s Subcontractor Agreement with VSP further states that VSP shall maintain and make available to DHCS, upon request, copies of all VSP’s subcontracts under the Agreement and to ensure that all such sub-subcontracts are in writing and require that such sub-subcontractor(s): (1) makes all premises, facilities, equipment, applicable books, records, contracts, computer, or other electronic systems related to this Agreement, available for audit, inspection, examination, or copying by DHCS, CMS, or the DHHS Inspector General, the Comptroller General, DOJ, and DMHC, or their designees and (2) retain all records and documents for a minimum of at least ten (10) years from the final date of the Agreement Term or from the date of completion of any audit, whichever is later.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Impact on Contractor	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor
Central California Alliance for Health	S12	Vision Service Plan	As noted above, the primary impacts and benefits of the Alliance Subcontractor Agreement with VSP, is that VSP maintains a robust network of specialist vision providers, credentials its providers, and conducts quality improvement related activities to positively impact Alliance members. Because VSP is one of the most robust and reputable vision health plans currently operating, the Alliance would not be able to provide the same level of services to its members should administration of vision related benefits be brought in- house. Given its longstanding reliance on VSP and considering the Alliance has not developed in-house clinical and administrative expertise to effectively administer vision- related covered services, the Alliance would need to hire a significant number of additional personnel to administer this benefit and develop its own network – an extremely timely and costly endeavor which uses funds that could otherwise be used for programs to improve member health outcomes.	The Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Central California Alliance for Health	S12	Vision Service Plan	See response for AristaMD

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions
Central California Alliance for Health	S12	Vision Service Plan	<p>Please see “Template C Contract Requirement Grid” for the Plan’s contractual requirements in the Subcontractor Agreement applicable to this Subcontractor. As mentioned, the Alliance maintains administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor performance through its comprehensive Delegate Oversight Program, further detailed in Alliance Policy and Procedure 105-0004 Delegate Oversight, which the Alliance has submitted to the DHCS for review and approval. Staff from the Alliance’s Compliance Department manage the process used to review delegate policies and procedures prior to delegation and on an annual basis, and to review reports from delegates on a quarterly basis. Documentation received from delegates are reviewed by subject matter experts (SMEs) in the departments whose functions are delegated and the SMEs document the outcomes of their review in Compliance’s system. Compliance Specialists within the Compliance Department support this process, and this duty is reflected in their position descriptions. Leadership from the SME departments are consistently trained and informed that SMEs from their departments must engage in this process, and to date, resource constraints have not prevented the ongoing review of delegate performance. As part of its initiative to comply with new Contract requirements effective January 1, 2024, the Alliance is revising is oversight policies and procedures to capture additional requirements related to Downstream Subcontractors, as may be applicable depending on the Subcontractor and its delegated functions.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Contractor’s Oversight Policy and Procedures
Central California Alliance for Health	S12	Vision Service Plan	<p>The Alliance will notify the delegate of its oversight policies and procedures as part of its annual delegate oversight review process. The annual delegate oversight review includes an initial notification to delegates of the Alliance’s intent to conduct a review of relevant policies and procedures, and confirm that Subcontractor will continue to meet the Alliance’s operating requirements and standards defined in its policies and procedures. Beginning in 2024, the Alliance will include its delegate oversight and sanctions policies in this notification of intent to conduct audit. As indicated in its Subcontractor Agreement, the delegate is contractually obligated to implement and comply with aforementioned Alliance oversight policies and procedures</p>



Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Financial Arrangement
Central California Alliance for Health	S12	Vision Service Plan	<p>The Alliance pays VSP on a capitated basis for Covered Services rendered to Members. VSP shall accept such amounts paid by Plan and any applicable Copayments, as payment in full. Pursuant to the State Medi-Cal Contract, there are no Copayments payable by Medi-Cal Members. VSP shall not charge any Copayments to Medi-Cal Members.</p> <p>The Alliance provides VSP with a list of Medi-Cal Members by the fifteenth (15th) day of each month, and pays VSP a Capitation rate for each Merced Medi-Cal Member, each Monterey Medi-Cal Member and each Santa Cruz Medi-Cal Member, by the fifteenth (15th) day of each month. The payment set forth is payment in full for all Covered Services that are Capitated Services that are provided to Medi-Cal Members, as well as any necessary administrative services.</p> <p>The Capitation rate is based upon VSP’s reimbursement to VSP Member Doctors for Covered Services provided to Members. VSP’s reimbursement to VSP Member Doctors is based on the prevailing Medi-Cal Fee Schedule. If, at any time during the term hereof, the State or Federal government increases or decreases the Medi-Cal Fee Schedule and VSP adjusts (resulting in a change to) VSP Member Doctor reimbursement, the parties reserve the right to renegotiate the rate payable by Plan under this Agreement. The rate adjustment and its effective date shall be as agreed by the parties.</p> <p>Retroactive eligibility changes and resulting retroactive Capitation adjustments are limited to the month in which notification is received by VSP, plus two prior months. Retroactive adjustments to Capitation for Members enrolled in Managed Care Plans which are government funded (including, without limitation, Medicare, Medicaid, public employees) shall be made within thirty (30) days after the adjustment is determined.</p>

Contractor/MCP Name	Sub-contractor ID #	Subcontractor Name	Other Information	Previously Approved Documents
Central California Alliance for Health	S12	Vision Service Plan	No additional information at this time.	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Applicable County(ies)	Downstream Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Downstream Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>	Type of Downstream Subcontractor
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	County in which Subcontractor is delegated services.	Name for each of the Downstream Subcontractor’s key personnel who is responsible for ensuring compliance.	Contact information for each of the Downstream Subcontractor’s key personnel who is responsible for ensuring compliance (Email & Telephone Number).	Downstream Fully Delegated Subcontractor, Downstream Partially Delegated Subcontractor, Downstream Administrative Subcontractor
S2	DS1	Call Center Services International, LLC (CCSI)	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Ismael Zepeda Ismael.zepeda@ccsi.com Jovan Muñoz jovan.munoz@ccsi.com Saravi Franco saravi.franco@ccsi.com Salvador Ramirez salvador.ramirez@ccsi.com Frank Esparza frank.esparza@ccsi.com Jorge Oros jorge.oros@ccsi.com	Ismael Zepeda Ismael.zepeda@ccsi.com Jovan Muñoz jovan.munoz@ccsi.com Saravi Franco saravi.franco@ccsi.com Salvador Ramirez salvador.ramirez@ccsi.com Frank Esparza frank.esparza@ccsi.com Jorge Oros jorge.oros@ccsi.com	Downstream Partially Delegated Subcontractor
S2	DS2	Ubiquity Global Services	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Christopher Engstrom -Operations Director  christopher.engstrom@ubiquity.com	Christopher Engstrom -Operations Director  christopher.engstrom@ubiquity.com	Downstream Partially Delegated Subcontractor
S2	DS3	Ubiquity Global Services SA de CV.	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Melissa Serrano - Site Operations Director melissa.serrano@ubiquity.com	Melissa Serrano - Site Operations Director melissa.serrano@ubiquity.com	Downstream Partially Delegated Subcontractor

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor's Downstream Subcontractor further delegates functions downstream	<b>Clinical Functions</b>  The clinical function(s) Contractor is delegating to Subcontractor. Please select all delegated functions.  <i>If a Downstream Subcontractor is delegated different functions in different counties, please duplicate the Subcontractor entry but specify in each row which functions are delegated in each county.</i>	<b>Administrative Functions</b>  The administrative function(s) Contractor is delegating to Subcontractor. Please select all delegated functions.  <i>If a Downstream Subcontractor is delegated different functions in different counties, please duplicate the Subcontractor entry but specify in each row which functions are delegated in each county.</i>	<b>Administrative - Other</b>  If 'Other' was selected in Column I, please describe.
S2	DS1	Call Center Services International, LLC (CCSI)		Other	Call Center
S2	DS2	Ubiquity Global Services		Other	Call Center
S2	DS3	Ubiquity Global Services SA de CV.		Other	Call Center

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Address1	Address2	City	ZIP	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	The address of the location of the performance of the Downstream Subcontractor’s functions.				Percentage of the total Medi-Cal Members assigned to the Downstream Subcontractor, if applicable.	Proportion of total capitated rates for which the Downstream Subcontractor, is at risk, if applicable.
S2	DS1	Call Center Services International, LLC (CCSI)	5405 Morehouse Dr. Suite 310		San Diego, CA	92121		
S2	DS2	Ubiquity Global Services	4101 South Shary Road		Mission, Texas	78572		
S2	DS3	Ubiquity Global Services SA de CV.	63 Ave Norte y Alameda Roosevelt	Torre A Nivel 10	Colonia Escalon, San Salvador, El Salvador	01101		

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement	Pre-Existing Relationships
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	Describe the purpose and the justification of the Subcontractor Agreement or Downstream Subcontractor Agreement.	Describe any pre-existing relationship, including any affiliation, parent entity, or prior existing contract between Contractor and Subcontractor, or Subcontractor and Downstream Subcontractor including the duration of such pre-existing relationship.
S2	DS1	Call Center Services International, LLC (CCSI)	To accommodate the increasing call volume and to better meet the needs of CCAH members.	N/A
S2	DS2	Ubiquity Global Services	To accommodate the increasing call volume and to better meet the needs of CCAH members.	N/A
S2	DS3	Ubiquity Global Services SA de CV.	To accommodate the increasing call volume and to better meet the needs of CCAH members.	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Sub-Delegation	Impact on Contractor
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	Indicate if Subcontractor or Downstream Subcontractor is permitted to sub-delegate any functions. If so, describe how <u>Contractor</u> will maintain oversight over delegated functions to Subcontractors and Downstream Subcontractors. Provide citations to provisions in the Subcontractor Agreement and Downstream Subcontractor Agreement to support Contractor’s assertions.	Describe the impact and benefit, if any, the Subcontractor Agreement or Downstream Subcontractor Agreement will have on Contractor’s operations, administrative capacity, and financial viability.
S2	DS1	Call Center Services International, LLC (CCSI)	N/A	N/A
S2	DS2	Ubiquity Global Services	N/A	N/A
S2	DS3	Ubiquity Global Services SA de CV.	N/A	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	Describe Contractor’s administrative capacity to oversee and monitor Subcontractor and Downstream Subcontractor as applicable.	Describe Subcontractor’s and Downstream Subcontractor’s administrative capacity to perform each delegated function, including but not limited to Subcontractor’s and Downstream Subcontractor’s capacity to perform quality monitoring and community engagement, if applicable.
S2	DS1	Call Center Services International, LLC (CCSI)	Call the Car oversees all functions of CCSI.	N/A
S2	DS2	Ubiquity Global Services	Call the Car oversees all functions of Ubiquity Services.	N/A
S2	DS3	Ubiquity Global Services SA de CV.	Call the Car oversees all functions of Ubiquity Global Services.	N/A



Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions	Contractor’s Oversight Policy and Procedures
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  <i>Use the same number assigned for each Subcontractor in Template A1, Column B .</i>	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	Detail how the Subcontractor Agreement and Downstream Subcontractor Agreement complies with, and ensures compliance, with all provisions of the Contract applicable to the delegated functions, including appropriate citations to the provisions in the Subcontractor Agreement and Downstream Subcontractor Agreement. Please complete Template C (Contract Requirements Grid) in Exhibit J to indicate which provisions are included in the Subcontractor Agreements and Downstream Subcontractor Agreements, as applicable for each Agreement.	Describe how Contractor will inform Subcontractor and Downstream Subcontractors of Contractor’s oversight policies and procedures.
S2	DS1	Call Center Services International, LLC (CCSI)	CCSI must follow is required to follow all Call the Car Policies and Procedures (HIPAA, etc.)	All Policies and Procedures are shared with CCSI as they are an extension of Call the Car.
S2	DS2	Ubiquity Global Services	Ubiquity Global Service is required to follow all Call the Car Policies and procedures (HIPAA, etc.).	All Policies and Procedures are shared with Ubiquity Global Services as they are an extension of Call the Car.
S2	DS3	Ubiquity Global Services SA de CV.	Ubiquity Global Services is required to follow all Call the Car Policies and Procedures (HIPAA, etc.).	All Policies and Procedures are shared with Ubiquity Global Services as they are an extension of Call the Car.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Financial Arrangement	Other Information
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	Contractor must include description of any financial arrangements it has with Subcontractor and Downstream Subcontractor.	Include any other information that would assist DHCS in its review of Contractor’s delegated structure.
S2	DS1	Call Center Services International, LLC (CCSI)	CCSI is paid by Call the Car for all services rendered.	N/A
S2	DS2	Ubiquity Global Services	Ubiquity Global Services is paid by Call the Car for all services rendered.	N/A
S2	DS3	Ubiquity Global Services SA de CV.	Ubiquity Global Services is paid by Call the Car for all services rendered.	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Previously Approved Documents
Assign each Subcontractor a different number using the format S#. Begin with S1 and proceed in numerical order (e.g. S2, S3, etc.)  Use the same number assigned for each Subcontractor in Template A1, Column B .	Assign a different number to each Downstream Subcontractor using the format DS#. Begin with DS1 and proceed numerically (DS2, DS3, etc.). Restart with DS1 for each separate Subcontractor.	Name of the Downstream Subcontractor with whom the Subcontractor has a Downstream Subcontractor Agreement; or the name of the Downstream Subcontractor with whom the Subcontractor’s Downstream Subcontractor further delegates functions downstream	<b>(Applicable to annual submissions only)</b> If Contractor has previously submitted documentation to DHCS in connection with the Subcontractor Agreement or Downstream Subcontractor Agreement, either through the Request for Proposal (RFP) process or during the term of this Contract, Contractor must provide any such documentation.  Please submit any previously approved supplemental documentation with this completed Exhibit. Below, please indicate the title of the supplemental file along with a brief description of its contents.
S2	DS1	Call Center Services International, LLC (CCSI)	
S2	DS2	Ubiquity Global Services	
S2	DS3	Ubiquity Global Services SA de CV.	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Applicable County(ies)	Downstream Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Downstream Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>	Type of Downstream Subcontractor
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Paulette Norris, Credentialing Manager	PH: 559-353-6115 EMAIL: PNORRIS@VALLEYCHILDRENS.ORG	Downstream Partially Delegated Subcontractor
S12	DS1	Gemini Diversified Services	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Carol Kurtz, Compliance Officer	ckurtz@aapan.org	Downstream Administrative Subcontractor
S3	DS1	Webb Mason	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Manix Bilog - VP of Compliance  Beth (Tillack) Berry	mbilog@webbmason.com  btillack@slwmco.com O: 410-785-1111, ext 1315 C: 804-516-5082	Downstream Partially Delegated Subcontractor
S3	DS2	CQ Fluency	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Leigh Marshall Turgut Alan Vernon VP of Healthcare	Leigh Marshall Turgut leigh.turgut@cqfluency.com Alan Vernon VP of Healthcare alan.vernon@cqfluency.com	Downstream Partially Delegated Subcontractor
S3	DS3	Culturalink	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Nancy Sung - Director of Language Services	<u>nsung@culturalink.com</u>  <u>888-695-1001, Ext. 941</u>	Downstream Partially Delegated Subcontractor
S3	DS4	Cyra Com (Voiance)	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Samuel Ballesteros Xavier Forns Director of Internal Compliance Audits  James Kent  Samuel Ballesteros	Samuel Ballesteros sballesteros@cyracom.com  Xavier Forns XForns@cyracom.com  James Kent jkent@cyracom.com  Samuel Ballesteros sballesteros@cyracom.com	Downstream Partially Delegated Subcontractor
S3	DS5	Language Line	Santa Cruz, Monterey, Merced, Mariposa, San Benito	John Reitano Strategic Account Executive  Sylvana Stratton	John Reitano jreitano@languageline.com  Sylvana Stratton sstratton@languageline.com	Downstream Partially Delegated Subcontractor

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
S5	DS1	Valley Children's Hospital - Medical Staff Services Department		Provider Credentialing	
S12	DS1	Gemini Diversified Services		Provider Credentialing	
S3	DS1	Webb Mason		Other	Written Translation of Document
S3	DS2	CQ Fluency		Other	Written Translation Services
S3	DS3	CulturaLink		Other	Interpretation Services
S3	DS4	Cyra Com (Voiance)		Other	Interpretation Services
S3	DS5	Language Line		Other	Translation services

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Address1	Address2	City	ZIP	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	9300 Valley Children's Place	M/S SC07	Madera, CA	93636	N/A	N/A
S12	DS1	Gemini Diversified Services	10055 Slater Avenue, #214		Fountain Valley, CA	92708		
S3	DS1	Webb Mason	10830 Gilroy Rd		Hunt Valley, MD	21031		
S3	DS2	CQ Fluency	2 University Plaza		Hackensack, New Jersey	07601		
S3	DS3	CulturaLink	5051 Peachtree Corners Circle Suite 200		Norcross, GA	30092		
S3	DS4	Cyra Com (Voiance)	2650 E Elvira Rd, Suite 132		Tucson, AZ	85756		
S3	DS5	Language Line	LanguageLine Solutions	LanguageLine Solutions One Lower Ragsdale Drive, Bldg. Two Monterey, CA 93940	Monterey, CA	93940		

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement	Pre-Existing Relationships
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	Valley Children's Hospital, through its Medical Staff services Department, has administrative experience in credentialing physicians and other health practitioners. ChildNet has obtained the administrative services and expertise of Valley Children’s Hospital's Medical Staff Services Department to collect and verify information regarding the credentials of, and the quality of care rendered by, physicians who are members of Medical Staff and who apply for membership in ChildNet or renewal thereof.	ChildNet and Valley Children's Hospital have had an Affiliation and Services Agreement in effect since 2001.
S12	DS1	Gemini Diversified Services	Delegate the administrative functions and primary source verification portions of the credentialing process.	Contract effective 12/1/2019
S3	DS1	Webb Mason	This vendor handles language document- translation services.	This vendor relationship existed prior the CCAH delegation contract.
S3	DS2	CQ Fluency	This vendor handles language interpretation and/or document translation services.	This vendor relationship existed prior the CCAH delegation contract.
S3	DS3	CulturaLink	This vendor handles language interpretation and/or document translation services.	This vendor relationship existed prior the CCAH delegation contract.
S3	DS4	Cyra Com (Voiance)	This vendor handles language interpretation and/or document translation services.	This vendor relationship existed prior the CCAH delegation contract
S3	DS5	Language Line	This vendor handles language interpretation and/or document translation services.	This vendor relationship existed prior the CCAH delegation contract.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Sub-Delegation	Impact on Contractor
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	N/a	Provision of complete credentialing activities without cost to the Alliance.
S12	DS1	Gemini Diversified Services	Not permitted	Efficiencies and cost savings associated with credentialing verification.
S3	DS1	Webb Mason	Vendor oversight is included in all standard language services contracts.	N/A
S3	DS2	CQ Fluency	Vendor oversight is included in all standard language services contracts.	Members receive interpretation/translation services from experienced translators.
S3	DS3	CulturaLink	Vendor oversight is included in all standard language services contracts.	Members receive interpretation/translation services from experienced translators.
S3	DS4	Cyra Com (Voiance)	Vendor oversight is included in all standard language services contracts.	Members receive interpretation/translation services from experienced translators.
S3	DS5	Language Line	Vendor oversight is included in all standard language services contracts	Members receive interpretation/translation services from experienced translators.



Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	Oversight by ChildNet's Board of Directors through monthly meetings, quarterly reporting, and annual audit.	Valley Children's Hospital, through its Medical Staff services Department, has administrative experience, expertise, and capacity to credential physicians and other health practitioners.
S12	DS1	Gemini Diversified Services	N/A	VSP has capacity and the resources needed to conduct appropriate oversight. GDS has capacity needed to complete all delegated functions and provide oversight of its work.
S3	DS1	Webb Mason	Members receive document translation services from experienced translators	This is outlined in our contracts with the vendors.
S3	DS2	CQ Fluency	. Vendors are contractually responsible for managing their subcontractors	This is outlined in our contracts with the vendors.
S3	DS3	CulturaLink	Vendors are contractually responsible for managing their subcontractors	This is outlined in our contracts with the vendors.
S3	DS4	Cyra Com (Voiance)	Vendors are contractually responsible for managing their subcontractors.	This is outlined in our contracts with the vendors.
S3	DS5	Language Line	Vendors are contractually responsible for managing their subcontractors	This is outlined in our contracts with the vendors.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions	Contractor’s Oversight Policy and Procedures
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	In performing services under the agreement, Valey Children's complies with credentialing, recredentialing policies and procedures for physicians and allied health professionals, and with all state, federal standards, including standards of the Joint Commission and the National Commission for Quality Assurance (NCQA)	Notifications via regular email communication and meetings.
S12	DS1	Gemini Diversified Services	Clearly stated in the contract and informed via notification of audit.	Clearly stated in the contract and informed via notification of audit.
S3	DS1	Webb Mason	Operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable level.	Vendors are obligated to hold their subcontractors to the same standards as we do them.
S3	DS2	CQ Fluency	Monthly operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable level	Vendors are obligated to hold their subcontractors to the same standards as we do them.
S3	DS3	CulturaLink	Monthly operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable level.	Vendors are obligated to hold their subcontractors to the same standards as we do them.
S3	DS4	Cyra Com (Voiance)	Monthly operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable level.	Vendors are obligated to hold their subcontractors to the same standards as we do them.
S3	DS5	Language Line	Monthly operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable	Vendors are obligated to hold their subcontractors to the same standards as we do them.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Financial Arrangement	Other Information
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	N/A	N/A
S12	DS1	Gemini Diversified Services	Payment is made for services rendered	
S3	DS1	Webb Mason	Vendor is paid per document translated.	N/A
S3	DS2	CQ Fluency	This is between the vendor and the subcontractor.	N/A
S3	DS3	CulturaLink	This is between the vendor and the subcontractor	N/A
S3	DS4	Cyra Com (Voiance)	This is between the vendor and the subcontractor.	N/A
S3	DS5	Language Line	This is between the vendor and the subcontractor	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Previously Approved Documents
S5	DS1	Valley Children's Hospital - Medical Staff Services Department	
S12	DS1	Gemini Diversified Services	
S3	DS1	Webb Mason	
S3	DS2	CQ Fluency	
S3	DS3	CulturaLink	
S3	DS4	Cyra Com (Voiance)	
S3	DS5	Language Line	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Applicable County(ies)	Downstream Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Downstream Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>	Type of Downstream Subcontractor
S3	DS6	Carelon Behavioral Health, Inc.	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Sheree Marzka Director II Compliance (US)	Sheree Marzka sheree.marzka@carelon.com 757 407-8802	Downstream Fully Delegated Subcontractor
S3	DS7	FIS Global	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Allyssa Colburn Richard Caddell	Allyssa Colburn allyssa.colburn@fisglobal.com (205) 784-5691 Richard Caddell richard.caddell@fisglobal.com (205) 307-9584	Downstream Partially Delegated Subcontractor
S3	DS8	Availity	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Deborah Davis Nicholas Courson	Deborah Davis- 818.822.6908 - Deborah.Davis@elevancehealth.com Nicholas Courson- 904.477.0858  - Nicholas.Courson@availity.com	Downstream Partially Delegated Subcontractor

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
S3	DS6	Carelon Behavioral Health, Inc.		Other	Annual Member & Provider Satisfaction Survey Claims and Provider Services. Certain Finance functions such as: invoicing, collections, accounts payable, payroll, cash management, creating and maintaining accurate financial records and backup. Member Services Credentialing/recredntialing (except network participation decisions) Provider Data Maintenance including provider directory
S3	DS7	FIS Global		Other	Paper claim conversions to electronic, mailing member/provider automated letters
S3	DS8	Availity		Claims Processing	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Address1	Address2	City	ZIP	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk
S3	DS6	Carelon Behavioral Health, Inc.	200 State Street, Suite 302		Boston MA,	02109		
S3	DS7	FIS Global	347 Riverside Ave		Jacksonville, FL	32204		
S3	DS8	Availity	5555 Gate Pkwy, Ste. 110		Jacksonville, FL	32256		

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement	Pre-Existing Relationships
S3	DS6	Carelon Behavioral Health, Inc.	The purpose of this downstream subcontractor is to provide key services not currently supported by Carelon Behavioral Health of California, Inc.	This is the parent company of Carelon Behavioral Health of California, Inc. The relationship has existed since the creation of the legal entity
S3	DS7	FIS Global	FIS Global provides front end mail room and scanning as well as claims data entry for digitization of paper documents.	FIS Global contract started in 2016
S3	DS8	Availity	The purpose of this downstream subcontractor is to supply an alternative web portal from pre-existing website owned by Carelon. The web portal was created with multiple functions (IE Claim Submission, Eligibility and Benefits Verification) that our provider population can use when servicing a member.	Parent company, Elevance Health (Previously Anthem) invested in Availity as a clearinghouse solution. The predecessor company, Beacon Health Options (BHO) did not hold a relationship with Availity until BHO was acquired by Anthem



Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Sub-Delegation	Impact on Contractor
S3	DS6	Carelon Behavioral Health, Inc.	The contract with CCAH permits downstream contracts with other vendors to satisfy business needs of the member population.	The subcontractor is the subject matter expert for the functions delegated and has several decades of experience with this type of arrangement and services.
S3	DS7	FIS Global	No Sub-delegation at this time	N/A
S3	DS8	Availity	Contract with CCAH permits downstream contracts with other vendors to satisfy business needs of the member population.	The downstream subcontractor may see expanded utilization of their web portal as new providers and facilities that service CCAH membership will be inclined to use a single clearinghouse for multiple payers.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
S3	DS6	Carelon Behavioral Health, Inc.	Carelon Behavioral Health of California receives reports no less than monthly on the contractor’s performance.	Vendors are obligated to hold their subcontractors to the same standards as we do them.
S3	DS7	FIS Global	Meeting with FIS Global meets are conducted monthly to review performance metrics	FIS has performed beyond expectations.
S3	DS8	Availity	Availity web portal provides access to dashboard functionality. The dashboard functions include volume of transactions as well as identification of providers, facilities or other third-party entities using functions available within Availity’s web portal	Multiple transaction types have been established that providers can engage in utilizing Availity. The only function that would require use of Availity is Electronic Claim Submission in ANSI X12 837 format. Records of all inbound files received at Availity as well as the outbound files Availity shares are housed within Availity’s data infrastructure for future consideration. The role Availity plays in the claim life cycle is that of a basic compliance check (SNIP levels 1 and 2) followed by submission of the files and then receipt of acknowledgement to make available to the providers.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions	Contractor’s Oversight Policy and Procedures
S3	DS6	Carelon Behavioral Health, Inc.	This is outlined in our contracts with the vendors.	Carelon Behavioral Health of California leadership has continued meetings with Carelon Behavioral Health, Inc. teams to ensure continued support of all functions. These meetings allow for discussion and changes to process as needed. Repeated violations are subject to corrective action plan requests.
S3	DS7	FIS Global	. FIS has SLA’s that they routinely meet. (see information provided)	As mentioned above, we meet monthly to review metrics.
S3	DS8	Availity	<p>The following SLA’s outline planned availability of the portal for EDI claim submission:</p> <ul style="list-style-type: none"><li>•Platform Planned<ul style="list-style-type: none"><li>•Network</li><li>•Availability</li></ul></li><li>•Performance level Target &gt;= 99.9%</li><li>•Performance level minimum &gt;= 99.8%<ul style="list-style-type: none"><li>•Measurement Period Monthly</li></ul></li><li>•Additional Notes = (Actual Hours) / (Available Hours)</li></ul> <p>•Platform Overall<ul style="list-style-type: none"><li>•Network</li><li>•Availability</li></ul></p> <ul style="list-style-type: none"><li>•Performance level Target &gt;= 99.5%</li><li>•Performance level minimum &gt;= 99%</li><li>•Measurement Period Weekly &amp; Monthly</li><li>•Additional Notes = (Actual Hours) / (Defined Hours)</li></ul> <p>oPer CORE rules, “Calendar Week” defined as 12:01 am Sunday to 12:00 am the following Sunday</p>	EDI Operations leadership has continued meetings with Availity teams to ensure continued support of all functions. These meetings allow for discussion and changes to process as needed.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Financial Arrangement	Other Information
S3	DS6	Carelon Behavioral Health, Inc.	This is between the vendor and the subcontractor.	N/A
S3	DS7	FIS Global	Subcontractor has set financial agreements by contract	Monthly meetings take place to discuss opportunities to improve quality and reduce costs and increase customer satisfaction
S3	DS8	Availity	The Availity contract does include a paper transaction fee for claim submissions	<p>The following is a description of transaction process with Availity relative to claim pre-processing</p> <ol style="list-style-type: none"><li>1. Provider uses Availity web portal to submit 837 claim files</li><li>2. Availity completes compliance review of snip levels 1 and 2</li><li>3. If accepted, Availity makes claim available for Carelon pickup</li><li>4. Carelon forwards 837 claim files to Edifecs for consideration.</li><li>5. Edifecs ingest claim file into Transaction Management platform.</li><li>6. Claim undergoes compliance validation.</li><li>7. Claim data is sent to Carelon to conduct member and provider lookup.</li><li>8. Upon completion of lookup, a notice is sent electronically to Edifecs from Carelon either accepting the claim record or rejecting the claim if the member cannot be identified.</li><li>9. Edifecs creates 277 acknowledgement and sends to clearinghouse for dissemination to providers.</li><li>10. Carelon loads claim to adjudication platform for processing and sends acknowledgement to Availity</li></ol>

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Previously Approved Documents
S3	DS6	Carelon Behavioral Health, Inc.	
S3	DS7	FIS Global	
S3	DS8	Availity	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Applicable County(ies)	Downstream Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Downstream Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>	Type of Downstream Subcontractor
S3	DS9	Edifecs, Inc.	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Steve Bowen Director Hosting Services  Greg Caris RVP Strategic Accounts	Steve Bowen steve.bowen@edifecs.com Office: 425-435-2703 Cell: 303-522-3544 Main 425-435-2000 Support 855-333-4462  Greg Caris RVP Strategic Accounts Greg.Caris@edifecs.com Cell: 480-399-7964	Downstream Partially Delegated Subcontractor
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Lisa Boston Sandy Garcia Michael Miccio	Lisa Boston lboston@qhr.com  Michael Miccio mmiccio@qhr.com 803-383-2209	Downstream Partially Delegated Subcontractor

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
S3	DS9	Edifecs, Inc.		Claims Processing	
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)		Other	Onsite Quality Assessments

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Address1	Address2	City	ZIP	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk
S3	DS9	Edifecs, Inc.	1756 114th Avenue SE.		Bellevue, WA	98004		
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	1573 Mallory Lane, Suite 200		Brentwood, TN	37027		



Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement	Pre-Existing Relationships
S3	DS9	Edifecs, Inc.	The purpose of this downstream subcontractor is to complete compliance validation of claim records ensuring files meet pre-established standards set forth in the 837 transaction implementation guides.	Relationship with Edifecs began in 2018
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	Compliance with NCQA site visit requirements for non-accredited and non-rural facilities	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Sub-Delegation	Impact on Contractor
S3	DS9	Edifecs, Inc.	No Sub-delegation at this time	The downstream subcontractor may see expanded utilization of their compliance services based on volume of claim receipts. Edifecs is used to support all business and is not specifically in place to service members covered under a CCAH policy.
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	. No	Staff not needed in house to perform site visits and remain in compliance with NCQA

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
S3	DS9	Edifecs, Inc.	Meetings to review Edifecs performance and support take place daily, weekly and monthly. Edifecs performance is reviewed during the monthly meeting to ensure claim pre-processing is managed within the timely standards and that any incidents requiring technical support are mitigated promptly.	Access to multiple dashboards are available for review within the Edifecs Transaction Management tool. The dashboards show performance at a trading partner level as well as a claim quality level. This visibility ensures we control the rationale used when determining if a claim should be accepted or rejected.
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	Annual desk review of policies and procedures, and comparison of requirements for site visits to remain in compliance with regulatory requirements	Subcontractor is a business that only performs site visits

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions	Contractor’s Oversight Policy and Procedures
S3	DS9	Edifecs, Inc.	<p>Edifecs provides support through a ticketing system that staff can enter the ticket into the Edifecs web-portal or open a ticket via email request. The following SLAs describe error severity and corresponding TAT for resolution:</p> <p>a. For a Severity 1 Errors: During Regular Hours, Edifecs will: (i) respond to Customer within two hours following Customer’s initial request for support of the Software, indicating that Edifecs has received the Error report; (ii) upon request, employ continuous effort to provide Customer with a Patch or Workaround; (iii) upon request, notify Customer periodically, but no less frequently than every eight (8) hours of its progress in resolving Severity 1 Errors; and (iv) use commercially reasonable efforts to provide a Patch, Service Pack, or a Workaround for Severity 1 Errors within twenty four (24) hours of reproduction of the Error.</p> <p>b. For a Severity 2 Errors: During Regular Hours, Edifecs will: (i) respond to Customer within four hours following Customer’s initial request for support of the Software, indicating that Edifecs has received the report of an Error; (ii) upon request, employ continuous efforts to provide Customer with a Patch or Workaround; (iii) upon request, notify Customer periodically, but no less frequently than every twenty four (24) hours of its progress in resolving Severity 2 Errors; and (iv) use commercially reasonable efforts to provide a Patch, Service Pack, or Workaround for Severity 2 Errors within seventy two (72) hours of reproduction of the Error.</p> <p>c. For Severity 3 Errors: Edifecs will use commercially reasonable efforts to: (i) verify reported Severity 3 Errors within one (1) business day, indicating that Edifecs has received the report of the Error; (ii) communicate the status of a reported Error to Customer when appropriate; and (iii) the Resolution Time to provide a Fix or a Workaround for Severity 3 Errors in the next Maintenance Release.</p> <p>d. For Severity 4 Errors: Edifecs will (i) acknowledge receipt of the reported Error within two (2) business days of the report; (ii) communicate the status of a reported Severity 4 Error to Customer as appropriate; and (iii) the Resolution Time to provide a Fix or Workaround at Edifecs’ discretion, based upon Edifecs’ then current priorities.</p>	EDI Operations leadership has continued meetings with the Edifecs team where we share best practices and drive changes to the operating model.
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	The agreement contains all items with which subcontractor must remain compliant.	Annual desk review of policies and procedures, and comparison of requirements for site visits to remain in compliance with regulatory requirements

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Financial Arrangement	Other Information
S3	DS9	Edifecs, Inc.	The specific count of how many transactions may occur are purchased in bulk. The overarching contract with Edifecs covers inbound claim transactions, inbound membership files as well as encounter support. The contract provides a license to utilize Edifecs services.	<p>The following is a description of the transaction process with Edifecs relative to claim pre-processing.</p> <ol style="list-style-type: none"><li>1. Receive claim file from Availity- primary clearinghouse.</li><li>2. Send 837 claim files to Edifecs for consideration.</li><li>3. Edifecs ingest claim file into Transaction Management platform.</li><li>4. Claim undergoes compliance validation.</li><li>5. Receive claim data from Edifecs to conduct member and provider lookup.</li><li>6. Send notice electronically, upon completion of lookup, to Edifecs either accepting the claim record or rejecting the claim if the member cannot be identified.</li><li>7. Receive 277 acknowledgement created and sent by Edifecs.</li><li>8. Load claim to adjudication platform for processing and sends acknowledgement to Availity</li></ol>
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	Vendor is paid by site visit (Initial payment was based on an assumption of previous number of site visits annually	Vendor delegation contract is in place

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Previously Approved Documents
S3	DS9	Edifecs, Inc.	
S3	DS10	Ovation Healthcare (Quorum Health Resources-QHR)	

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Applicable County(ies)	Downstream Subcontractor Key Personnel <i>(Previously Compliance Officer)</i>	Downstream Subcontractor Key Personnel Contact Information <i>(Previously Compliance Contact Information)</i>	Type of Downstream Subcontractor
S3	DS11	Press Ganey (SPH Analytics)	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Connie Cline Jennifer VonHatten Crystal Nava Midge Coker	connie.cline@pressganey.com , jennifer.vonhatten@SPHAnalytics.com crystal.nava@pressganey.com, midge.coker@pressganey.com	Downstream Partially Delegated Subcontractor
S3	DS12	Change Healthcare Solutions	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Monica McCullough  Lori Chadwick, Senior Client Executive	Monica McCullough mmccullough@changehealthcare.com  Lori Chadwick lchadwick@changehealthcare.com 732-859-9909 407-733-3225	Downstream Partially Delegated Subcontractor
S3	DS13	Zelis Healthcare	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Cari Kramer – Strategic Client Manager Megan Milner – Director National Strategic Client	Cari Kramer 513.206.4393 Megan Milner 615.414.7583	Downstream Fully Delegated Subcontractor
S3	DS14	Language Service Associates	Santa Cruz, Monterey, Merced, Mariposa, San Benito	Jodi Bralow, VP Contracting and Compliance  Jenny Lyle, Compliance, Contracting, Credentialing Manager	<u>Jodi.Bralow@lsa.inc</u>	Downstream Fully Delegated Subcontractor

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Delegated Function(s) <i>(Previously one field. Now split into three different columns)</i>		
S3	DS11	Press Ganey (SPH Analytics)		Other	Annual member & provider satisfaction surveys, provider directory audits
S3	DS12	Change Healthcare Solutions		Other	Paper claim conversions to electronic, mailing member/provider automated letters
S3	DS13	Zelis Healthcare		Claims Processing	
S3	DS14	Language Service Associates		Other	Translation services/Interpretation services via Telephone



Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Address1	Address2	City	ZIP	% of Total Medi-Cal Managed Care Members Assigned	Proportion of Capitated Rates at Risk
S3	DS11	Press Ganey (SPH Analytics)	44150 International Plaza Suite 900		Fort Worth, TX	76109		
S3	DS12	Change Healthcare Solutions	3055 Lebanon Pike		Nashville, TN	37214		
S3	DS13	Zelis Healthcare	149 Newbury Street	Fifth Floor	Boston, MA	02116		
S3	DS14	Language Service Associates	455 Business Center Dr, Suite 100		Horsham, PA	19044		

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Justification of Subcontractor Agreement or Downstream Subcontractor Agreement	Pre-Existing Relationships
S3	DS11	Press Ganey (SPH Analytics)	. Administration of the Member, Case Management and Provider Satisfaction surveys.	Contracted with Press Ganey (formerly SPH analytics) since 2016
S3	DS12	Change Healthcare Solutions	Change Health Care provides services to Carelon Behavioral Health of Printing and mailing of EOBs, checks, letters, etc. to member and provider. .Transactional Print ServicesPrinting and mailing of EOBs, checks, letters, etc. to member and provider Other ServicesEDI Clearinghouse for inbound claim submissions Data Retention Print and mail for letters and other correspondence Multiple ServicesElevance uses Change Healthcare in numerous ways, including Claims Xten, etc, .	Carelon Behavioral Health (CBH) (formerly Beacon Health Options) has had a long standing relationship w/ Change Health Care since 2003.
S3	DS13	Zelis Healthcare	Payspan /Zelis aids Carelon Behavioral Health (CBH) in processing of payments for healthcare services. Claims/EFT ProcessingProcessing and electronic payment of claims for FlexCare and Connects (89% of Provider payments are through EFT) Check PrintingPrinting and fulfillment of provider payments via check (11% of Provider payments go through check) 1099 FormsIRS 1099 Forms GBD-ClaimsPrinting/mailing of EOBs/EOPs. The EOBs/EOPs are for Freedom/AFC.	Payspan /Zelis aids Carelon Behavioral Health (CBH) in processing of payments for healthcare services. Claims/EFT ProcessingProcessing and electronic payment of claims for FlexCare and Connects (89% of Provider payments are through EFT) Check PrintingPrinting and fulfillment of provider payments via check (11% of Provider payments go through check) 1099 FormsIRS 1099 Forms GBD-ClaimsPrinting/mailing of EOBs/EOPs. The EOBs/EOPs are for Freedom/AFC.
S3	DS14	Language Service Associates	This vendor handles language interpretation and/or document translation services.	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Sub-Delegation	Impact on Contractor
S3	DS11	Press Ganey (SPH Analytics)	No sub-delegates agreements identified	Administration of Member, Case Management and Provider Satisfaction surveys on Contractor’s behalf.
S3	DS12	Change Healthcare Solutions	No Sub-delegation at this time.	N/A
S3	DS13	Zelis Healthcare	No Sub-delegation at this time.	N/A
S3	DS14	Language Service Associates	Vendor oversight is included in all standard language services contracts.	Members receive interpretation/translation services from experienced translators.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Contractor’s Administrative Capacity to Oversee and Monitor Subcontractor and Downstream Subcontractor	Subcontractor’s and Downstream Subcontractor’s Administrative Capacity
S3	DS11	Press Ganey (SPH Analytics)	Monitor Press Ganey for Compliance and Quality. Yearly oversight audit completed between Contractor and Subcontractor to ensure all contractual/regulatory obligations are met. Corrective Action Plans established should subcontractor not meet required standard.	N/A
S3	DS12	Change Healthcare Solutions	Change Health Care meets w/ CBH quarterly to review performance metrics.	Change Health Care has performed beyond expectations
S3	DS13	Zelis Healthcare	Payspan/Zelis meets w/ CBH monthly to review performance metrics.	Payspan/Zelis has performed beyond expectations
S3	DS14	Language Service Associates	Vendors are contractually responsible for managing their subcontractors	This is outlined in our contracts with the vendors.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Subcontractor’s and Downstream Subcontractors’ Compliance with Applicable Contractual Provisions	Contractor’s Oversight Policy and Procedures
S3	DS11	Press Ganey (SPH Analytics)	Yearly Vendor Oversight audit is completed between Contractor and Sub-Contractor to ensure contractual obligations are met. Corrective Action Plan established should any of these not be met	These are established through the contract and annual statement of work completed between the contractor and sub-contractor
S3	DS12	Change Healthcare Solutions	Change Health Care has SLA’s that they routinely meet.	As mentioned above, we meet monthly to review metrics.
S3	DS13	Zelis Healthcare	Below are subcontractors SLA’s that they routinely meet. Task Order #07 (Claims)03/23/10-08/20/2023Y, 120 days’ notice•SLAs: Payment Delivery Quality, TAT for successful processing of files Task Order #10 (Operating Agreement)07/15/22-08/31/23Y, 120 days’ notice•SLAs: Quality and TAT in place Task Order #09 (1099 Forms)10/01/20-10/01/22N•SLAs: TAT of file processing and Quality metric (error rate of .001 % or less)	As mentioned above, we meet monthly to review metrics.
S3	DS14	Language Service Associates	Monthly operational reviews are conducted with vendors to ensure they are meeting their obligations and performing at an acceptable level	Vendors are obligated to hold their subcontractors to the same standards as we do them.

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Financial Arrangement	Other Information
S3	DS11	Press Ganey (SPH Analytics)	Administration and reporting of the Member, Case Management, and Provider Satisfaction surveys is outlined in our annual statement of work which includes the annual agreement for cost of sub-contractor services.	N/A
S3	DS12	Change Healthcare Solutions	Subcontractor has set financial agreements by contract.	N/A
S3	DS13	Zelis Healthcare	Subcontractor and CBH have set financial agreements by contract.	CBH and subcontractor discuss opportunities to improve quality and reduce costs at monthly meeting to improve our customer satisfaction.
S3	DS14	Language Service Associates	Vendors are obligated to hold their subcontractors to the same standards as we do them.	N/A

Subcontractor ID #	Downstream Subcontractor ID #	Downstream Subcontractor Name	Previously Approved Documents
S3	DS11	Press Ganey (SPH Analytics)	
S3	DS12	Change Healthcare Solutions	
S3	DS13	Zelis Healthcare	
S3	DS14	Language Service Associates	

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name											
		1.1 Plan Organization and Administration										
		1.1.1 Legal Capacity	1.1.2 Key Personnel Disclosure Form	1.1.3 Conflict of Interest – Current and Former State Employees	1.1.4 Contract Performance	1.1.5 Medical Decisions	1.1.6 Medical Director	1.1.7 Chief Health Equity Officer	1.1.8 Key Personnel Changes	1.1.9 Administrative Duties/Responsibilities	1.1.10 Member Representation	1.1.11 Diversity, Equity, and Inclusion Training
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	Yes	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	Yes	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	Yes	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	Yes	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	Yes	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	Yes	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	Yes	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	Yes	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	Yes	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	Yes	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	Yes	No	No



Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name																
		1.0 Organization															
		1.2 Financial Information							1.3 Program Integrity and Compliance Program								
		1.2.1 Financial Viability and Standards Compliance	1.2.2 Contractor's Financial Reporting Obligations	1.2.3 Independent Financial Audit Reports	1.2.4 Cooperation with DHCS' Financial Audits	1.2.5 Medical Loss Ratio (MLR)	1.2.6 Contractor's Obligations	1.2.7 Community Reinvestment Plan and Report	1.3.1 Compliance Program	1.3.2 Fraud Prevention Program	1.3.3 Provider Screening, Enrolling, and Credentialing/Recredentialing	1.3.4 Contractor's Obligations Regarding Suspended, Excluded, and Ineligible Providers and Ineligible Providers	1.3.5 Disclosures	1.3.6 Treatment of Overpayment Recoveries	1.3.7 Federal False Claims Act Compliance and Support	2.1.1 Management Information System Capability	2.1.2 Encounter Data Reporting
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	Yes	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	Must not be delegated	No	No	Must not be delegated	No	Yes	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name								
		2.1 Management Information System							
		2.1.3 Participation in the State Drug Rebate Program	2.1.4 Network Provider Data Reporting	2.1.5 Program Data Reporting	2.1.6 Template Data Reporting	2.1.7 MIS/Data Audits	2.1.8 MIS/Data Correspondence	2.1.9 Tracking and Submitting Alternative Format Selections	2.1.10 Interoperability Application Programming Information System Requirements
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	2.0 Systems and Processes												
		2.2 Quality Improvement and Health Equity Transformation Program												
		2.2.1 QIHETP Overview	2.2.2 Governing Board	2.2.3 QIHEC	2.2.4 Provider Participation	2.2.5 Subcontractor and Downstream Subcontractor QI Activities	2.2.6 QIHETP Policies and Procedures	2.2.7 Quality Improvement and Health Equity Annual Plan	2.2.8 NCQA Accreditation	2.2.9 External Quality Review (EQR) Requirements	2.2.10 Quality Care for Children	2.2.11 Skilled Nursing Facilities - Long-Term Care	2.2.12 Disease Surveillance	2.2.13 Credentialing and Recredentialing
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	Yes	Yes	No	No	No	Must not be delegated	No	No	No	No	Yes
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name																
		2.3 Utilization Management Program				3.1 Network Provider Agreements, Subcontractor Agreements, Downstream Subcontractor Agreements, and Contractor's Oversight Duties											
		2.3.1 Prior Authorizations and Review Procedures	2.3.2 Timeframes for Medical Authorization	2.3.3 Review of Utilization Data	2.3.4 Delegating UM Activities	3.1.1 Overview of Contractor's Duties and Obligations	3.1.2 DHCS Approval of Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements	3.1.3 Contractor's Duty to Disclose All Delegated Relationships and to Submit a "Delegation, Oversight, and Compliance Plan"	3.1.4 Contractor's Duty to Ensure Subcontractor, Downstream Subcontractor, and Network Provider Compliance	3.1.5 Requirements for Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements	3.1.6 Financial Viability of Subcontractors, Downstream Subcontractors, and Network Providers	3.1.7 Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements with Federally Qualified Health Centers and Rural Health Clinics	3.1.8 Network Provider Agreements with Safety-Net Providers	3.1.9 Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements with Local Health Departments	3.1.10 Nondiscrimination in Provider Contracts	3.1.11 Public Records	3.1.12 Requirement to Post
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	Yes	Yes	Yes	No	No	No	No	Must not be delegated	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	3.0 Provider, Network Providers, Subcontractors, and Downstream Subcontractors													
		3.2 Provider Relations													
		3.2.1 Exclusivity	3.2.2 Provider Dispute Resolution Mechanism	3.2.3 Out-of-Network Provider Relations	3.2.4 Contractor's Provider Manual	3.2.5 Network Provider Training	3.2.6 Emergency Department Protocols	3.2.7 Prohibited Punitive Action Against the Provider	3.2.8 Submittal of Inpatient Days Information	3.3.1 Compensation and Value Based Arrangements	3.3.2 Capitation Arrangements	3.3.3 Provider Financial Incentive Program Payments	3.3.4 Identification of Responsible Payor	3.3.5 Claims Processing	3.3.6 Prohibited Claims
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	Yes	No	No	Yes	No	No	No	No	No	No	No	Yes	Yes
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name													
		3.3 Provider Compensation Arrangements												
		3.3.7 Federally Qualified Health Center (FQHC), Rural Health Center (RHC), and Indian Health Service (IHS) Facilities	3.3.8 Non-Contracting Certified Nurse Midwife (CNM), Certified Nurse Practitioner (CNP), and Licensed Midwife (LN) Providers	3.3.9 Non-Contracting Family Planning Providers	3.3.10 Sexually Transmitted Disease (STD)	3.3.11 HIV Testing and Counseling	3.3.12 Immunizations	3.3.13 Community Based Adult Services (CBAS)	3.3.14 Major Organ Transplants	3.3.15 Long-Term Care Services	3.3.16 Emergency Services and Post-Stabilization Care Services	3.3.17 Provider-Preventable Conditions (PPCs)	3.3.18 Prohibition Against Payment to Excluded Providers	3.3.19 Compliance with Directed Payment Initiatives and Related Reimbursement Requirements
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No
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S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	Exhibit A, Attachment III													
		4.1 Marketing		4.2 Enrollments and Disenrollment		4.3 P									
		4.1.1 Training and Certification of Marketing Representatives	4.1.2 Marketing Plan	4.2.1 Enrollment	4.2.2 Disenrollment	4.3.1 Population Health Management (PHM) Program Requirements	4.3.2 Population Needs Assessment (PNA)	4.3.3 Data Integration and Exchange	4.3.4 PHM Service	4.3.5 Population Risk Stratification Segmentation (RSS) and Risk Tiering	4.3.6 Screening and Assessments	4.3.7 Care Management Programs	4.3.8 Basic Population Health Management	4.3.9 Other Population Health Requirements for Children	4.3.10 Transitional Care Services
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name													
		Population Health Management and Coordination of Care												
		4.3.11 Targeted Case Management (TCM) Services	4.3.12 Mental Health Services	4.3.13 Alcohol and SUD Treatment Services	4.3.14 California Children’s Services (CCS)	4.3.15 Services for Persons with DD	4.3.16 School-Based Services	4.3.17 Dental	4.3.18 Direct Observed Therapy (COT) for Treatment of Tuberculosis (TB)	4.3.19 Women, Infants, and Children (WIC) Supplemental Nutrition Program	4.3.20 HCBS Waiver Programs	4.3.21 IHSS	4.3.22 Indian Health Services	4.3.23 Justice Involved Reentry Coordination
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	Yes	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No



Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name																
		4.0 Member															
		4.4 Enhanced Care Management															
		4.4.1 Contractor's Responsibilities for Administration of ECM	4.4.2 Populations of Focus for ECM	4.4.3 ECM Providers	4.4.4 ECM Provider Capacity	4.4.5 Model of Care (MOC)	4.4.6 Member Identification for ECM	4.4.7 Authorizing Members for ECM	4.4.8 Assignment to an ECM Provider	4.4.9 Initiating Delivery of ECM	4.4.10 Discontinuation of ECM	4.4.11 Core Service Components of ECM	4.4.12 Data System Requirements and Data Sharing to Support ECM	4.4.13 Oversight of ECM Providers	4.4.14 Payment of ECM Providers	4.4.15 DHCS Oversight of ECM	4.4.16 ECM Quality and Performance Incentive Program
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name														
		4.5 Community Supports													
		4.5.1 Contractor's Responsibility for Administration of Community Supports	4.5.2 DHCS Pre-Approved Community Supports	4.5.3 Community Supports Providers	4.5.4 Community Supports Provider Capacity	4.5.5 Community Supports Model of Care (MOC)	4.5.6 Identifying Members for Community Supports	4.5.7 Authorizing Members for Community Supports and Communication of Authorization Status	4.5.8 Referring Members to Community Supports Providers for Community Supports	4.5.9 Data System Requirements and Data Sharing to Support Community Supports	4.5.10 Oversight of Community Supports Providers	4.5.11 Delegation of Community Supports Administration to Subcontractors and Downstream Subcontractors	4.5.12 Payment of Community Supports Providers	4.5.13 DHCS Oversight of Community Supports	4.5.14 Community Supports Quality and Performance Incentive Program
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name														
		4.6 Member Grievance and Appeal System									5.1 Member Services				
		4.6.1 Grievance and Appeal Program Requirements	4.6.2 Grievance Process	4.6.3 Discrimination Grievances	4.6.4 Notice of Action	4.6.5 Appeal Process	4.6.6 Responsibilities in Expedited Appeals	4.6.7 State Fair Hearings and Independent Medical Reviews	4.6.8 Continuation of Services Until Appeal and State Fair Hearing Rights Are Exhausted	4.6.9 Grievance and Appeal Reporting and Data	5.1.1 Members Rights and Responsibilities	5.1.2 Member Services Staff	5.1.3 Member Information	5.1.4 Primary Care Service Provider Selection	5.1.5 Notices of Action for Denial, Deferral, or Modification of Prior Authorization Requests
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	Yes	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	Yes	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	Yes	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	Yes	No	No	No
S3	Carelon Behavioral Health of California	Yes	Yes	No	Yes	Yes	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name															
		5.2 Network and Access to Car														
		5.2.1 Access to Network Providers and Covered Services	5.2.2 Network Capacity	5.2.3 Network Composition	5.2.4 Network Ratios	5.2.5 Network Adequacy Standards	5.2.6 Access to Emergency Service Providers and Emergency Services	5.2.7 Out-of-Network Access	5.2.8 Specific Requirements for Access to Programs and Covered Services	5.2.9 Network and Access Changes to Covered Services	5.2.10 Access Rights	5.2.11 Cultural and Linguistic Programs and Committees	5.2.12 Continuity of Care for Seniors and Persons with Disabilities	5.2.13 Network Reports	5.2.14 Site Review	5.2.15 Street Medicine
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	Yes	No	Yes	No	Yes	No	No	No	No	Yes	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	5.0 Services - Scope and Delivery												
		5.3 Scope of Services												
		5.3.1 Covered Services								5.4 Community Based Adult Services				
		5.3.1 Covered Services	5.3.2 Medically Necessary Services	5.3.3 Initial Health Appointment	5.3.4 Services for Members less than 21 Years of Age	5.3.5 Services for Adults	5.3.6 Pregnant and Postpartum Members	5.3.7 Services for All Members	5.3.8 Investigational Services	5.4.1 Covered Services	5.4.2 Coordination of Care	5.4.3 Required Reports for the CBAS Program	5.4.4 Community Participation	5.4.5 Community Based Adult Services Program Integrity
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	Yes	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name																
											6.0 Emergency Preparedness and Response						7.0 Operations Deliverables and Requirements
		5.5 Mental Health and Substance Use Disorder Benefits					5.6 MOUs with Local Government Agencies, County Programs, and				6.1 General Guidance	6.2 Business Continuity Emergency Plan	6.3 Member Emergency Preparedness Plan	6.4 California's Standardized Emergency Management System	6.5 Reporting Requirements During an Emergency	6.6 DHCS Emergency Directives	
		5.5.1 Mental Health Parity Requirements	5.5.2 Non-specialty Mental Health Services and Substance Use Disorder Services	5.5.3 Non-specialty Mental Health Services Providers	5.5.4 Emergency Mental Health and Substance Use Disorder Services	5.5.5 Mental Health and Substance Use Disorder Services Disputes	5.5.6 No Wrong Door for Mental Health Services	5.6.1 MOU Purpose	5.6.2 MOU Requirements	5.6.3 MOU Oversight and Compliance							
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	Yes	Yes	Yes	No	No	Yes	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name															
		1.1 Governing Law	1.2 DHCS Guidance	1.3 Contract Interpretation	1.4 Assignments, Mergers, Acquisitions	1.5 Independent Contractor	1.6 Amendment and Change Order Process	1.7 Delegation of Authority	1.8 Authority of the State	1.9 Fulfillment of Obligations	1.10 Obtaining DHCS Approval	1.11 Certifications	1.12 Notices	1.13 Term	1.14 Service Area	1.15 Contract Extension
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Must not be delegated	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	Exhibit E														
		1.0 Program Terms and Conditions														
		1.16 Termination	1.17 Phaseout Requirements	1.18 Indemnification	1.19 Sanctions	1.20 Liquidated Damages	1.21 Contractor's Dispute Resolution Requirements	1.22 Inspection and Audit of Records and Facilities	1.23 Confidentiality of Information	1.24 Pilot Projects	1.25 Cost Avoidance and Post-Payment Recovery (PPR) of Other Health Coverage (OHC)	1.26 Third-Party Tort and Workers' Compensation Liability	1.27 Litigation Support	1.28 Equal Opportunity Employer	1.29 Federal and State Nondiscrimination Requirements	1.30 Discrimination Prohibitions
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No



Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name						
		1.31 Small Business Participation and Disabled Veteran Business Enterprises (DVBE) Reporting Requirements	1.32 Conflict of Interest Avoidance Requirements	1.33 Guaranty Provision	1.34 Priority of Provisions	1.35 Additional Incorporated Provisions - Proposals	1.36 Miscellaneous Provisions
For Subcontractors, use the same # assigned in Template A1, Column B.  For Downstream Subcontractors, use a combination of the #s assigned in Template A2, Columns A and B (e.g. S1DS2).	Name of the Subcontractor or Downstream Subcontractor with whom Contractor has a Subcontractor Agreement, or with whom the Subcontractor has a Downstream Subcontractor agreement.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.	Select "Yes" or "No" for each delegated function.
S1	AristaMD	No	No	No	No	No	No
S2	Call the Car	No	No	No	No	No	No
S2DS1	Call Center Services International, LLC (CCSI)	No	No	No	No	No	No
S2DS2	Ubiquity Global Services	No	No	No	No	No	No
S2DS3	Ubiquity Global Services SA de CV.	No	No	No	No	No	No
S3	Carelon Behavioral Health of California	No	No	No	No	No	No
S3DS1	Webb Mason	No	No	No	No	No	No
S3DS10	Ovation Healthcare (Quorum Health Resources-QHR)	No	No	No	No	No	No
S3DS11	Press Ganey (SPH Analytics)	No	No	No	No	No	No
S3DS12	Change Healthcare Solutions	No	No	No	No	No	No
S3DS13	Zelis Healthcare	No	No	No	No	No	No
S3DS14	Language Service Associates	No	No	No	No	No	No
S3DS2	CQ Fluency	No	No	No	No	No	No
S3DS3	CulturaLink	No	No	No	No	No	No
S3DS4	Cyra Com (Voiance)	No	No	No	No	No	No
S3DS5	Language Line	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name											
		1.1 Plan Organization and Administration										
		1.1.1 Legal Capacity	1.1.2 Key Personnel Disclosure Form	1.1.3 Conflict of Interest – Current and Former State Employees	1.1.4 Contract Performance	1.1.5 Medical Decisions	1.1.6 Medical Director	1.1.7 Chief Health Equity Officer	1.1.8 Key Personnel Changes	1.1.9 Administrative Duties/Responsibilities	1.1.10 Member Representation	1.1.11 Diversity, Equity, and Inclusion Training
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	Yes	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	Yes	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	Yes	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	Yes	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	1.0 Organization																
		1.2 Financial Information							1.3 Program Integrity and Compliance Program									
		1.2.1 Financial Viability and Standards Compliance	1.2.2 Contractor's Financial Reporting Obligations	1.2.3 Independent Financial Audit Reports	1.2.4 Cooperation with DHCS' Financial Audits	1.2.5 Medical Loss Ratio (MLR)	1.2.6 Contractor's Obligations	1.2.7 Community Reinvestment Plan and Report	1.3.1 Compliance Program	1.3.2 Fraud Prevention Program	1.3.3 Provider Screening, Enrolling, and Credentialing/Recredentialing	1.3.4 Contractor's Obligations Regarding Suspended, Excluded, and Ineligible Providers and Ineligible Providers	1.3.5 Disclosures	1.3.6 Treatment of Overpayment Recoveries	1.3.7 Federal False Claims Act Compliance and Support	2.1.1 Management Information System Capability	2.1.2 Encounter Data Reporting	
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	Yes	No	No	No	No	No	No	
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	Must not be a	No	No	Must not be a	No	No	No	No	No	No	No	No	
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S6	Dignity Health Medical Foundation	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S8	Palo Alto Medical Foundation	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S10	Stanford Medical Group	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S11	University of California San Francisco	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	
S12	Vision Service Plan	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	Yes	No	No	No	No	No	
S12DS1	Gemini Diversified Services	No	No	No	No	Must not be a	No	No	Must not be a	No	Yes	No	No	No	No	No	No	

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name								
		2.1 Management Information System							
		2.1.3 Participation in the State Drug Rebate Program	2.1.4 Network Provider Data Reporting	2.1.5 Program Data Reporting	2.1.6 Template Data Reporting	2.1.7 MIS/Data Audits	2.1.8 MIS/Data Correspondence	2.1.9 Tracking and Submitting Alternative Format Selections	2.1.10 Interoperability Application Programming Information System Requirements
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	2.0 Systems and Processes												
		2.2 Quality Improvement and Health Equity Transformation Program												
		2.2.1 QIHETP Overview	2.2.2 Governing Board	2.2.3 QIHEC	2.2.4 Provider Participation	2.2.5 Subcontractor and Downstream Subcontractor QI Activities	2.2.6 QIHETP Policies and Procedures	2.2.7 Quality Improvement and Health Equity Annual Plan	2.2.8 NCQA Accreditation	2.2.9 External Quality Review (EQR) Requirements	2.2.10 Quality Care for Children	2.2.11 Skilled Nursing Facilities - Long-Term Care	2.2.12 Disease Surveillance	2.2.13 Credentialing and Recredentialing
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No
S12	Vision Service Plan	No	No	Yes	Yes	No	No	No	Must not be d	No	No	No	No	Yes
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name																
		2.3 Utilization Management Program				3.1 Network Provider Agreements, Subcontractor Agreements, Downstream Subcontractor Agreements, and Contractor's Oversight Duties											
		2.3.1 Prior Authorizations and Review Procedures	2.3.2 Timeframes for Medical Authorization	2.3.3 Review of Utilization Data	2.3.4 Delegating UM Activities	3.1.1 Overview of Contractor's Duties and Obligations	3.1.2 DHCS Approval of Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements	3.1.3 Contractor's Duty to Disclose All Delegated Relationships and to Submit a "Delegation, Oversight, and Compliance Plan"	3.1.4 Contractor's Duty to Ensure Subcontractor, Downstream Subcontractor, and Network Provider Compliance	3.1.5 Requirements for Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements	3.1.6 Financial Viability of Subcontractors, Downstream Subcontractors, and Network Providers	3.1.7 Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements with Federally Qualified Health Centers and Rural Health Clinics	3.1.8 Network Provider Agreements with Safety-Net Providers	3.1.9 Network Provider Agreements, Subcontractor Agreements, and Downstream Subcontractor Agreements with Local Health Departments	3.1.10 Nondiscrimination in Provider Contracts	3.1.11 Public Records	3.1.12 Requirement to Post
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	Must not be d	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	3.0 Provider, Network Providers, Subcontractors, and Downstream Subcontractors													
		3.2 Provider Relations													
		3.2.1 Exclusivity	3.2.2 Provider Dispute Resolution Mechanism	3.2.3 Out-of-Network Provider Relations	3.2.4 Contractor's Provider Manual	3.2.5 Network Provider Training	3.2.6 Emergency Department Protocols	3.2.7 Prohibited Punitive Action Against the Provider	3.2.8 Submittal of Inpatient Days Information	3.3.1 Compensation and Value Based Arrangements	3.3.2 Capitation Arrangements	3.3.3 Provider Financial Incentive Program Payments	3.3.4 Identification of Responsible Payor	3.3.5 Claims Processing	3.3.6 Prohibited Claims
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	Yes	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	Yes	No	No	Yes	No	No	No	No	No	No	No	Yes	Yes
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name													
		3.3 Provider Compensation Arrangements												
		3.3.7 Federally Qualified Health Center (FQHC), Rural Health Center (RHC), and Indian Health Service (IHS) Facilities	3.3.8 Non-Contracting Certified Nurse Midwife (CNM), Certified Nurse Practitioner (CNP), and Licensed Midwife (LN) Providers	3.3.9 Non-Contracting Family Planning Providers	3.3.10 Sexually Transmitted Disease (STD)	3.3.11 HIV Testing and Counseling	3.3.12 Immunizations	3.3.13 Community Based Adult Services (CBAS)	3.3.14 Major Organ Transplants	3.3.15 Long-Term Care Services	3.3.16 Emergency Services and Post-Stabilization Care Services	3.3.17 Provider-Preventable Conditions (PPCs)	3.3.18 Prohibition Against Payment to Excluded Providers	3.3.19 Compliance with Directed Payment Initiatives and Related Reimbursement Requirements
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No



Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	Exhibit A, Attachment III													
		4.1 Marketing		4.2 Enrollments and Disenrollment		4.3 P									
		4.1.1 Training and Certification of Marketing Representatives	4.1.2 Marketing Plan	4.2.1 Enrollment	4.2.2 Disenrollment	4.3.1 Population Health Management (PHM) Program Requirements	4.3.2 Population Needs Assessment (PNA)	4.3.3 Data Integration and Exchange	4.3.4 PHM Service	4.3.5 Population Risk Stratification Segmentation (RSS) and Risk Tiering	4.3.6 Screening and Assessments	4.3.7 Care Management Programs	4.3.8 Basic Population Health Management	4.3.9 Other Population Health Requirements for Children	4.3.10 Transitional Care Services
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name													
		Population Health Management and Coordination of Care												
		4.3.11 Targeted Case Management (TCM) Services	4.3.12 Mental Health Services	4.3.13 Alcohol and SUD Treatment Services	4.3.14 California Children’s Services (CCS)	4.3.15 Services for Persons with DD	4.3.16 School-Based Services	4.3.17 Dental	4.3.18 Direct Observed Therapy (COT) for Treatment of Tuberculosis (TB)	4.3.19 Women, Infants, and Children (WIC) Supplemental Nutrition Program	4.3.20 HCBS Waiver Programs	4.3.21 IHSS	4.3.22 Indian Health Services	4.3.23 Justice Involved Reentry Coordination
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	4.0 Member															
		4.4 Enhanced Care Management															
		4.4.1 Contractor's Responsibilities for Administration of ECM	4.4.2 Populations of Focus for ECM	4.4.3 ECM Providers	4.4.4 ECM Provider Capacity	4.4.5 Model of Care (MOC)	4.4.6 Member Identification for ECM	4.4.7 Authorizing Members for ECM	4.4.8 Assignment to an ECM Provider	4.4.9 Initiating Delivery of ECM	4.4.10 Discontinuation of ECM	4.4.11 Core Service Components of ECM	4.4.12 Data System Requirements and Data Sharing to Support ECM	4.4.13 Oversight of ECM Providers	4.4.14 Payment of ECM Providers	4.4.15 DHCS Oversight of ECM	4.4.16 ECM Quality and Performance Incentive Program
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name														
		4.5 Community Supports													
		4.5.1 Contractor's Responsibility for Administration of Community Supports	4.5.2 DHCS Pre-Approved Community Supports	4.5.3 Community Supports Providers	4.5.4 Community Supports Provider Capacity	4.5.5 Community Supports Model of Care (MOC)	4.5.6 Identifying Members for Community Supports	4.5.7 Authorizing Members for Community Supports and Communication of Authorization Status	4.5.8 Referring Members to Community Supports Providers for Community Supports	4.5.9 Data System Requirements and Data Sharing to Support Community Supports	4.5.10 Oversight of Community Supports Providers	4.5.11 Delegation of Community Supports Administration to Subcontractors and Downstream Subcontractors	4.5.12 Payment of Community Supports Providers	4.5.13 DHCS Oversight of Community Supports	4.5.14 Community Supports Quality and Performance Incentive Program
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name														
		4.6 Member Grievance and Appeal System									5.1 Member Services				
		4.6.1 Grievance and Appeal Program Requirements	4.6.2 Grievance Process	4.6.3 Discrimination Grievances	4.6.4 Notice of Action	4.6.5 Appeal Process	4.6.6 Responsibilities in Expedited Appeals	4.6.7 State Fair Hearings and Independent Medical Reviews	4.6.8 Continuation of Services Until Appeal and State Fair Hearing Rights Are Exhausted	4.6.9 Grievance and Appeal Reporting and Data	5.1.1 Members Rights and Responsibilities	5.1.2 Member Services Staff	5.1.3 Member Information	5.1.4 Primary Care Service Provider Selection	5.1.5 Notices of Action for Denial, Deferral, or Modification of Prior Authorization Requests
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	Yes	Yes	No	Yes	Yes	Yes	No	Yes	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name															
		5.2 Network and Access to Car														
		5.2.1 Access to Network Providers and Covered Services	5.2.2 Network Capacity	5.2.3 Network Composition	5.2.4 Network Ratios	5.2.5 Network Adequacy Standards	5.2.6 Access to Emergency Service Providers and Emergency Services	5.2.7 Out-of-Network Access	5.2.8 Specific Requirements for Access to Programs and Covered Services	5.2.9 Network and Access Changes to Covered Services	5.2.10 Access Rights	5.2.11 Cultural and Linguistic Programs and Committees	5.2.12 Continuity of Care for Seniors and Persons with Disabilities	5.2.13 Network Reports	5.2.14 Site Review	5.2.15 Street Medicine
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	Yes	No	Yes	No	Yes	No	No	No	No	Yes	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	5.0 Services - Scope and Delivery												
		5.3 Scope of Services								5.4 Community Based Adult Services				
		5.3.1 Covered Services	5.3.2 Medically Necessary Services	5.3.3 Initial Health Appointment	5.3.4 Services for Members less than 21 Years of Age	5.3.5 Services for Adults	5.3.6 Pregnant and Postpartum Members	5.3.7 Services for All Members	5.3.8 Investigational Services	5.4.1 Covered Services	5.4.2 Coordination of Care	5.4.3 Required Reports for the CBAS Program	5.4.4 Community Participation	5.4.5 Community Based Adult Services Program Integrity
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	5.5 Mental Health and Substance Use Disorder Benefits5.6 MOUs with Local Government Agencies, County Programs, and									6.0 Emergency Preparedness and Response						7.0 Operations Deliverables and Requirements
		5.5.1 Mental Health Parity Requirements	5.5.2 Non-specialty Mental Health Services and Substance Use Disorder Services	5.5.3 Non-specialty Mental Health Services Providers	5.5.4 Emergency Mental Health and Substance Use Disorder Services	5.5.5 Mental Health and Substance Use Disorder Services Disputes	5.5.6 No Wrong Door for Mental Health Services	5.6.1 MOU Purpose	5.6.2 MOU Requirements	5.6.3 MOU Oversight and Compliance	6.1 General Guidance	6.2 Business Continuity Emergency Plan	6.3 Member Emergency Preparedness Plan	6.4 California’s Standardized Emergency Management System	6.5 Reporting Requirements During an Emergency	6.6 DHCS Emergency Directives	
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No



Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name															
		1.1 Governing Law	1.2 DHCS Guidance	1.3 Contract Interpretation	1.4 Assignments, Mergers, Acquisitions	1.5 Independent Contractor	1.6 Amendment and Change Order Process	1.7 Delegation of Authority	1.8 Authority of the State	1.9 Fulfillment of Obligations	1.10 Obtaining DHCS Approval	1.11 Certifications	1.12 Notices	1.13 Term	1.14 Service Area	1.15 Contract Extension
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name	Exhibit E														
		1.0 Program Terms and Conditions														
		1.16 Termination	1.17 Phaseout Requirements	1.18 Indemnification	1.19 Sanctions	1.20 Liquidated Damages	1.21 Contractor's Dispute Resolution Requirements	1.22 Inspection and Audit of Records and Facilities	1.23 Confidentiality of Information	1.24 Pilot Projects	1.25 Cost Avoidance and Post-Payment Recovery (PPR) of Other Health Coverage (OHC)	1.26 Third-Party Tort and Workers' Compensation Liability	1.27 Litigation Support	1.28 Equal Opportunity Employer	1.29 Federal and State Nondiscrimination Requirements	1.30 Discrimination Prohibitions
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Subcontractor or Downstream Subcontractor ID #	Subcontractor or Downstream Subcontractor Name						
		1.31 Small Business Participation and Disabled Veteran Business Enterprises (DVBE) Reporting Requirements	1.32 Conflict of Interest Avoidance Requirements	1.33 Guaranty Provision	1.34 Priority of Provisions	1.35 Additional Incorporated Provisions - Proposals	1.36 Miscellaneous Provisions
S3DS6	Carelon Behavioral Health, Inc.	No	No	No	No	No	No
S3DS7	FIS Global	No	No	No	No	No	No
S3DS8	Availity	No	No	No	No	No	No
S3DS9	Edifecs, Inc.	No	No	No	No	No	No
S4	CareNet (Infomedia Group, Inc.)	No	No	No	No	No	No
S5	ChildNet (Valley Childrens Hospital)	No	No	No	No	No	No
S5DS1	Valley Children's Hospital - Medical Staff Services Department	No	No	No	No	No	No
S6	Dignity Health Medical Foundation	No	No	No	No	No	No
S7	Lucile Packard Children's Hospital (LPCH)	No	No	No	No	No	No
S8	Palo Alto Medical Foundation	No	No	No	No	No	No
S9	SCVMC (Santa Clara Valley Medical Center)	No	No	No	No	No	No
S10	Stanford Medical Group	No	No	No	No	No	No
S11	University of California San Francisco	No	No	No	No	No	No
S12	Vision Service Plan	No	No	No	No	No	No
S12DS1	Gemini Diversified Services	No	No	No	No	No	No