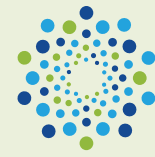


About Us



California Association of
Health Plans

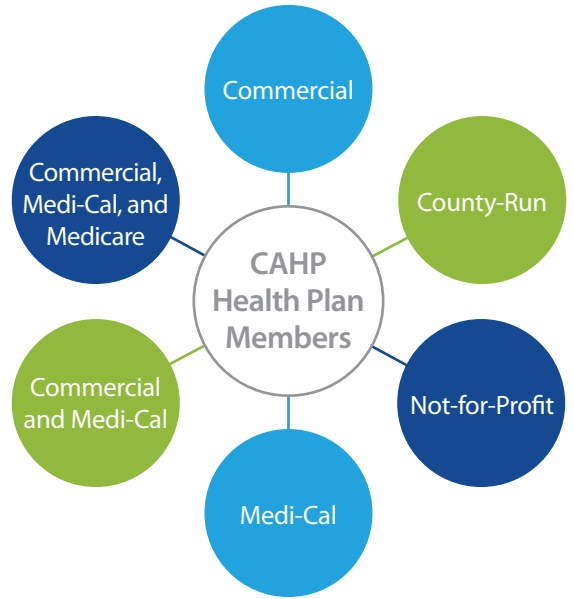
Who We Are

The California Association of Health Plans (CAHP) is a statewide trade association representing 42 full-service health care plans that provide coverage to more than 28 million Californians.

Most of our member plans provide coverage to Californians through the individual and group markets. Many of our member plans partner with the state by participating in government programs that provide health coverage to children, adults, and seniors.

Diversity of Health Plans

California's health plans provide comprehensive coverage through HMOs and PPOs, commercial health plans, public plans including county organized health systems and local initiatives, regional plans, and fully integrated health systems.



CAHP's 42 Members Offer Coverage Through

- Small Businesses
- Individual/Family Coverage
- Covered California
- Medi-Cal Managed Care
- Large Employers
- Medicare Advantage

23 + 12

Medi-Cal Managed Care Plans + Covered California Plans
Are Members of CAHP



Public Programs

Over the past decade, policymakers in California have increasingly relied on health plans to provide coverage for low-income Californians enrolled in Medi-Cal and other public programs.

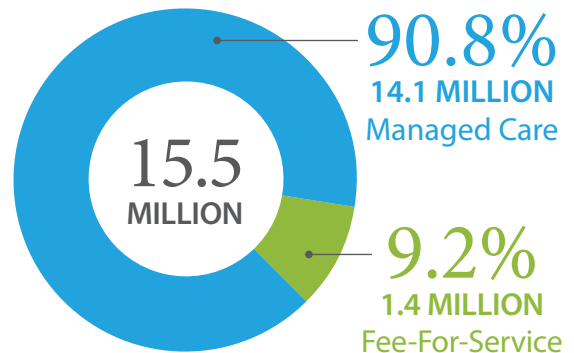


The Affordable Care Act expanded eligibility for Medi-Cal, which currently covers one in three Californians. Over 90 percent of members are enrolled in a managed care health plan.

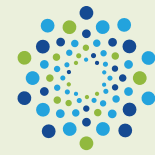
Many of CAHP's members offer coverage through Medicare Advantage (MA), an alternative to traditional Medicare that gives eligible beneficiaries the option to enroll in a private health plan.

	Medicare Enrollment	Medicare Advantage	Medicare Fee-for-Service
California		55%	45%
National Average		51%	49%

Estimated Medi-Cal Enrollment



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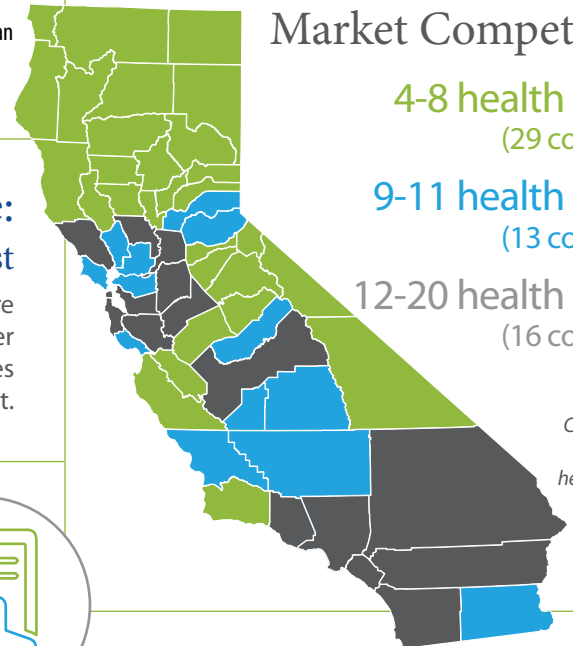
Health Plan Members

- Aetna Health of California, Inc.
- AIDS Healthcare Foundation
- Alameda Alliance for Health
- Alignment Health Plan
- Anthem Blue Cross
- Aspire Health Plan
- Blue Shield of California
- Cal Optima Health
- CalViva Health
- CenCal Health
- Central California Alliance for Health
- CCHP (Chinese Community Health Plan)
- Cigna Healthcare of California, Inc.
- Clever Care of Golden State
- Community Care Health Plan
- Community Health Group
- Contra Costa Health Plan
- Gold Coast Health Plan
- Health Net of California
- Health Plan of San Joaquin
- Health Plan of San Mateo
- Heritage Provider Network
- Inland Empire Health Plan
- Kaiser Permanente
- Kern Family Health Care
- L.A. Care Health Plan
- Memorial Care Select Health Plan
- Molina Healthcare of California
- OnLok PACE
- Partnership HealthPlan of California
- San Francisco Health Plan
- Santa Clara Family Health Plan
- SCAN Health Plan
- Scripps Health Plan
- Sharp Health Plan
- SIMNSA Health Plan
- Sutter Health Plus
- UnitedHealthcare of California
- Universal Care dba Bright Health Plan
- Valley Health Plan
- Ventura County Health Care Plan
- Western Health Advantage

Health Plans Offer Consumers Choice

Managed care is available in all markets and in all 58 counties in California. Even in the most rural areas, California health plans provide state-of-the-art technology and practices to improve access, such as telehealth services. This technology makes it easier for and more convenient for people to access quality care. California's health plans offer physician and hospital networks to ensure all members have access to high quality medical care.

California Enjoys Healthy Market Competition



**Includes Commercial and Public health plans.*



The Value Of Managed Care: Quality Care At a Lower Cost

Unlike the fragmented fee-for-service system of healthcare delivery – which pays doctors based on quantity rather than quality of care provided – managed care provides comprehensive, coordinated care at a lower cost.

Benefits of Managed Care

Health plans are subject to the Knox-Keene Health Care Service Plan Act of 1975 and are regulated by the Department of Managed Health Care. The DMHC oversees 95 percent of enrollment in California.

Improved Access to Care

- Guaranteed Access to a Network of Providers
- Timely Appointments and 24/7 Advice Lines
- Language Assistance

Care Coordination

- Patient-Centered Medical Homes
- Prevention and Wellness Programs
- Innovations in Chronic Care and Disease Management

Quality Assurance

- Evidence-Based Medicine
- Pay-for-Performance
- Federal Standards for Quality Measurement

Cost Savings

- Free Preventive Services such as Check-Ups and Immunizations
- Fixed Monthly Premiums and Out-of-Pocket Costs



Covered California:

All Californians will have two or more choices of carriers, 96% will be able to choose from three carriers or more, and 92% will have four or more choices.

Medi-Cal Managed Care:

1-11 choices in each of 58 counties