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**CALOPTIMA CLEARS MAJOR HURDLE TOWARD LAUNCHING
NEW PROGRAM FOR VULNERABLE SENIORS**

*Federal regulators lift the sanction on OneCare
after CalOptima demonstrates major improvements*

ORANGE, Calif. (February 5, 2015) — After completing a rigorous audit, the Centers for Medicare and Medicaid Services (CMS) notified CalOptima that the sanction on OneCare is lifted, effective immediately. CMS identified major improvements in OneCare, a Medicare Advantage Special Needs Plan that currently serves about 14,000 Orange County residents eligible for Medicare and Medi-Cal.

Clearing this major hurdle is essential to CalOptima's proposed launch of a Cal MediConnect plan, a pilot program designed to combine and simplify Medicare and Medi-Cal benefits for vulnerable seniors and people with disabilities. CalOptima must undergo a final readiness review before offering the new managed care program this summer.

"We are thrilled that CMS has validated CalOptima's improvements," said Mark Refowitz, Chairman of the CalOptima Board of Directors. "Staff members and provider networks partnered to make the positive changes, yet the true beneficiaries of the effort are our members. OneCare now has a stronger model of care with better coordinated services for members."

First announced in January 2014, the CMS sanction suspended marketing and enrollment into OneCare and delayed the launch of Cal MediConnect in Orange County. CalOptima worked diligently to correct the problems that led to the freeze, and as a result, CMS permitted enrollment to resume in November 2014. Today's action now removes remaining restrictions.

"In the past year, CalOptima has implemented permanent enhancements to our compliance and oversight capabilities," said Todd Spitzer, Chairman of the Orange County Board of Supervisors and a member of the CalOptima Board of Directors. "We built a new Audit and Oversight department and can now monitor the performance of our delegated health networks on a regular basis."

Spitzer and Refowitz serve on the CalOptima Board of Directors Ad Hoc Compliance Committee, created in May 2014 to monitor the progress on audit remediation. The committee provided oversight and worked with CalOptima leadership and staff on a weekly basis to effectively resolve the issues.

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“CalOptima continues to move forward toward providing innovative, coordinated care for Orange County’s vulnerable seniors,” said Mallory Vega, the representative for seniors on the CalOptima Member Advisory Committee and a member of the Orange County Aging Services Collaborative. “With the aging population increasing, CalOptima provides access to quality care that keeps seniors healthier and more independent in the community.”

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About CalOptima

A county organized health system, CalOptima provides publicly funded health care coverage for low-income children, adults, seniors and people with disabilities in Orange County, Calif. CalOptima’s mission is to provide members with access to quality health care services delivered in a cost-effective and compassionate manner. In total, CalOptima serves more than 700,000 members with a network of more than 7,000 primary care doctors and specialists, as well as 30 hospitals.