

Policy Number	Policy Title, Purpose, Revision, and Program	Policy Review and/or Revision Date
Administrative		
GA.3400	Annual Investments	
GA.8012	Conflicts of Interest	
GA.8037	Leave of Interest	
GA.8042	Supplemental Compensation	
GA.8054 Title Revision	Injury and Illness Prevention Program	
GA.8057	Compensation Program	
AA.1100	Finance Glossary of Terms	
Medi-Cal		
AA.1000	Medi-Cal Glossary of Terms	
AA.1207a Transfer	CalOptima Health Auto-Assignment	
AA.1207b Transfer	Performance-based Health Network and CalOptima Health Community Network Auto-Assignment Allocation Methodology	
AA.1207c Transfer	Performance-based Community Health Center Auto-Assignment Allocation Methodology	
DD.2003	Member Identification and Eligibility Verification	
DD.2008	Health Network Community Network Selection Process	
DD.2012 Title Revision	Member Notification of Change in Location or Availability of Providers or Covered Services	
FF.1004	Payment for Hospitals Contracted to Serve a CalOptima Health Direct Member, CalOptima Health Community Network Member, or a Member Enrolled in a Shared Risk Group	
FF.2001	Claims Processing for Covered Services for which CalOptima Health is Financially Responsible	
GG.1101	California Children's Services (CCS)/Whole-Child Model – Coordination with County CCS Program	
GG.1301	Comprehensive Care Management Process	
GG.1308	Monitoring Health Network Compliance via Case Management Reports	
GG.1313	Coordination of Care for Transplant Members	
GG.1318	Coordination of Care for Hemophilia Members	
GG.1325	Continuity of Care for Members Transitioning into CalOptima Health Services	

GG.1353	CalAIM Enhanced Care Management Service Delivery
GG.1547	Maintenance and Transportation
GG.1600 Transfer	Access and Availability Standards
GG.1613	Initial Health Appointment
GG.1652	DHCS Notification of Change in the Availability or Location of Covered Services
GG.1667	CalAIM Population Health Management Program
GG.1704	Breastfeeding Promotion
GG.1707	Doula Services
HH.1101	CalOptima Health Provider Complaint
FF.1014	Payment for Covered Services Rendered to a Member Enrolled in a Health Network
GG.1352	Private Duty Nursing Care Management
GG.1548	Authorization and Monitoring of Behavioral Health Treatment (BHT) Services
HH.1108	State Hearing Process and Procedures
Multiple Programs	
HH.3023 New Policy	Information Sharing
AA.1219a Transfer	Member Advisory Committee
AA.1250 New Title	Disability Awareness and Sensitivity, Cultural Competency, Diversity, Equity, Inclusion, and Bias Staff Training
EE.1103	Provider Network Training
EE.1116	Contracted Provider Notification to CalOptima Health of Changes Affecting the Legal Status of the Contract
EE.1141	CalOptima Health Provider Contracts
GG.1114	Authorization for Disposable Incontinence Supplies
GG.1119	Direct Access to OB/GYN Practitioner Service
GG.1130	Community Based Adult Services (CBAS) Eligibility, Authorization, Availability, and Care Coordination Processes
GG.1355	CalAIM Community Supports
GG.1356	CalAIM Enhanced Care Management Administration
GG.1505	Transportation; Emergency, Non-Emergency, and Non-Medical
GG.1516 New Title	Hospital Acute Administrative Days

GG.1517	Transgender Services
GG.1546	Home Health Services
GG.1550	Palliative Care Services
GG.1605	Delegation and Oversight of Credentialing and Recredentialing Activities
GG.1615	Corrective Action Plan for Practitioners and Organizational Providers
GG.1616	Fair Hearing Plan for Practitioners
GG.1619	Delegation Oversight
GG.1822	Process for Transitioning CalOptima Health Members Between Levels of Care
GG.1828	Community Based Adult Services (CBAS) Reauthorization Process
HH.2003	Health Network and Delegated Entity Reporting
HH.2015	Health Networks Claims Processing
HH.2025	Health Network Subdelegation and Subcontracting
MA.3101	Claims Processing
MA.9006 New Title	Contracted Provider Complaint Process
MA.9009 New Title	Non-Contracted Provider Complaint Process
MA.9110	Auditing and Monitoring of Hierarchical Condition Categories (HCC) Coding
FF.2014	Delegation and Oversight of Claims Activities
DD.2002	Cultural and Linguistic Services
EE.1111	Health Network Encounter Reporting Requirements
GG.1109	CalOptima Health and Health Network Newborn and Prenatal Genetic Screening Services
GG.1120	Inpatient Length of Stay for Obstetrical Delivery
GG.1206	Readability and Suitability of Written Health Education Materials
GG.1320	Elder or Dependent Adult Abuse Reporting
GG.1502	Criteria and Authorization Process for Durable Medical Equipment (DME), Excluding Wheelchairs
GG.1809	Retroactive Authorization Request for Long Term Care Facility
HH.1104	Complains of Discrimination
HH.1106	Pay and Educate Criteria – Provider Complaints
HH.1109	Complaints Decision Matrix
HH.2027	Annual Risk Assessment (FDR)

HH.3022	Business Associate Agreements	
HH.4001	Delegation Oversight Committee	
PA.5110	Emergency Care	
GG.1706	Child Abuse Report	
One Care		
MA.4015	Medicare Secondary Payer (MSP) / Part D Coordination of Benefits (COB)	10/01/21
OneCare Connect		
CMC.1818	Treatment in Place (TIP) for CalOptima Community Network (CCN) Members Residing in Long Term Care Facilities	11/01/21