

Fast Facts

Kaiser Permanente Single Medi-Cal Contract

Expanding Our Presence in Medi-Cal

Kaiser Permanente provides [high quality care](#) to over 900,000 Medi-Cal enrollees in 22 counties. This year, the Department of Health Care Services (DHCS) is negotiating standard contracts with Medi-Cal Managed Care health plans to advance its Medi-Cal transformation objectives – and as part of that process is asking Kaiser Permanente to do more for the Medi-Cal program.

Due to Kaiser Permanente's integrated structure and select geographic presence, DHCS has determined it would be beneficial for the program for Kaiser Permanente to be under a single contract to ensure Medi-Cal enrollees continue to have access to the state's [highest quality Medi-Cal plan](#). The proposed agreement with DHCS helps the state achieve its goals for the Medi-Cal program by:

Advancing Equity

The proposed agreement prioritizes equity by requiring Kaiser Permanente, over time, to serve more vulnerable populations with complex needs across our footprint in California, including foster children and dual-eligible, low-income seniors with both Medi-Cal and Medicare.

Increasing Access

The agreement will result in less fragmented care and ensure that more Medi-Cal enrollees in more of the counties we serve can access Kaiser Permanente for Medi-Cal. A single direct contract will also improve the consumer experience by removing confusing layers and making it easier for beneficiaries to enroll in Kaiser Permanente.

Improving Affordability

A single contract eliminates the need for the state to pay administrative fees to local plans, which then subcontract all services to Kaiser Permanente. This will reduce complexity, member confusion, and result in savings that will be used to reduce costs and invest in care.

Improving Quality

In addition to expanding access in Medi-Cal to our high quality integrated model, other key elements of the state's requirements in the [single contract](#) include:

- Bringing Kaiser Permanente's population health model to collaborations with Federally Qualified Health Centers (FQHC) and other safety net providers to improve quality.
- Helping expand virtual care and clinical capacity of FQHCs and other providers.
- Identify and fill the gaps in access to specialty care through piloting in-person, ambulatory-based, outpatient specialty care visits for the highest need patients.

Within this proposal, the state has prioritized strengthening and supporting the county model. We are committed to collaborating with local health plans on enrollment growth, implementing [CalAIM](#), and community health care delivery that supports our shared mission of providing high quality, affordable health care in California for all.