

October 3, 2005

DHS HCO 05-5567

Mr. Jerry D. Stanger, Chief
California Department of Health Services
Payment Systems Division
MS 4700
P.O. Box 997413
Sacramento, CA 95899-7413

SUBJECT: DISENROLLMENT REPORT BY REASON AND PLAN
Effective Date 10/1/05

Reference: Contract Section 3.10.5.2.3 (5)(c) and 3.10.5.2.3 (7)(l)

Dear Mr. Stanger:

The purpose of this letter is to provide Department of Health Services with the current version of the reports listed below.

- MSC-B-M05 Disenrollment by Reason and Plan – Medical
- MSC-B-M05D Disenrollment by Reason and Plan – Dental

If you have any questions, please contact Harry Gill at (916) 364-6620.

Sincerely,

Signature on Original Copy

Benjamin R. Coss
Project Director
California Health Care Options

cc: Reports File
Admin File – ID#1232



Data Provision Disclaimer

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MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 8/25/2005 - 9/23/2005

EFFECTIVE 10/1/2005

MAXIMUS

2 PLAN & GMC COUNTIES																				
COUNTY	PLAN NAME	REASONS																		
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X04	X05	TOTAL ¹
ALAMEDA	ALAMEDA ALLIANCE	0	14	13	3	2	6	0	10	125	0	0	0	0	0	0	0	1	0	174
	BLUE CROSS	0	16	12	7	7	13	0	11	155	0	0	0	0	0	0	0	0	0	221
	COUNTY TOTAL	0	30	25	10	9	19	0	21	280	0	0	0	0	0	0	0	1	0	395
CONTRA COSTA	BLUE CROSS	0	16	7	1	4	30	0	14	59	0	0	0	0	0	0	0	0	0	131
	CONTRA COSTA HEALTH	0	14	6	2	1	7	5	8	60	0	0	0	0	0	0	0	0	0	103
	COUNTY TOTAL	0	30	13	3	5	37	5	22	119	0	0	0	0	0	0	0	0	0	234
FRESNO	BLUE CROSS	0	4	3	1	1	0	14	5	80	0	0	0	0	0	0	0	0	0	108
	HEALTH NET	0	9	19	2	0	44	1	38	213	0	0	0	0	0	0	0	0	0	326
	COUNTY TOTAL	0	13	22	3	1	44	15	43	293	0	0	0	0	0	0	0	0	0	434
KERN	HEALTH NET	0	20	114	4	13	13	8	21	181	0	0	0	0	0	0	1	0	0	375
	KERN FAMILY HEALTH	0	5	30	1	6	7	0	3	44	0	0	0	1	0	0	0	0	0	97
	COUNTY TOTAL	0	25	144	5	19	20	8	24	225	0	0	0	1	0	0	0	1	0	472
LOS ANGELES	HEALTH NET	0	90	264	77	73	113	40	229	994	0	0	0	0	0	0	0	38	0	1,918
	LA CARE	0	88	140	73	70	88	63	226	836	0	0	0	0	0	0	0	38	4	1,626
	COUNTY TOTAL	0	178	404	150	143	201	103	455	1,830	0	0	0	0	0	0	0	76	4	3,544
RIVERSIDE	INLAND EMPIRE HEALTH	0	11	5	10	10	4	8	21	198	0	0	0	0	0	0	0	3	0	270
	MOLINA	0	18	24	10	22	40	5	36	301	0	0	0	11	0	0	1	5	0	473
	COUNTY TOTAL	0	29	29	20	32	44	13	57	499	0	0	0	11	0	0	1	8	0	743
SACRAMENTO	BLUE CROSS (190 PLAN)	0	20	33	10	5	11	3	21	122	0	0	0	0	0	0	2	3	0	230
	CARE FIRST	0	8	1	0	3	7	0	5	41	0	0	0	0	0	0	0	0	0	65
	HEALTH NET	0	18	19	22	4	17	0	37	120	0	0	0	0	0	0	2	3	0	242
	KAISER	0	0	3	1	2	2	0	3	22	0	0	0	0	0	0	0	0	0	33
	MOLINA	0	8	30	9	0	13	0	16	84	0	0	0	0	0	0	0	4	0	164
	WESTERN ADVANTAGE	0	8	13	4	3	16	0	15	64	0	0	0	0	0	0	0	0	0	123
COUNTY TOTAL	0	62	99	46	17	66	3	97	453	0	0	0	0	0	0	4	10	0	857	
SAN BERNARDINO	INLAND EMPIRE	0	11	25	9	9	11	11	34	252	0	0	0	0	0	0	1	3	0	366
	MOLINA	0	22	56	15	9	32	4	44	203	0	0	4	11	0	1	0	3	0	404
	COUNTY TOTAL	0	33	81	24	18	43	15	78	455	0	0	4	11	0	1	1	6	0	770
SAN DIEGO	BLUE CROSS	0	17	21	2	6	12	1	16	78	0	0	0	0	0	0	4	1	0	158
	COMMUNITY HEALTH	0	20	24	10	6	5	2	28	77	0	0	0	0	0	0	3	0	1	176
	HEALTH NET	0	10	12	5	3	12	0	9	77	0	0	0	0	0	0	3	1	1	133
	KAISER	0	2	6	0	3	11	0	2	29	0	0	0	0	0	0	1	0	0	54
	MOLINA	0	34	92	8	4	23	5	37	194	0	0	0	0	0	0	2	3	0	402
	SHARP ADVANTAGE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	UNIVERSAL CARE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COUNTY TOTAL	0	83	155	25	22	63	8	92	455	0	0	0	0	0	0	13	5	2	923	

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 8/25/2005 - 9/23/2005

EFFECTIVE 10/1/2005

MAXIMUS

2 PLAN & GMC COUNTIES																				
COUNTY	PLAN NAME	REASONS																		
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X04	X05	TOTAL ¹
SAN FRANCISCO	BLUE CROSS	0	1	12	1	0	1	0	7	47	0	0	0	0	0	0	0	0	0	69
	SAN FRANCISCO HLTH	0	2	4	0	0	0	2	3	46	0	0	0	0	0	0	0	0	0	57
	COUNTY TOTAL	0	3	16	1	0	1	2	10	93	0	0	0	0	0	0	0	0	0	126
SAN JOAQUIN	BLUE CROSS	0	15	12	1	5	12	2	18	80	0	0	0	0	0	0	0	0	0	145
	SAN JOAQUIN HEALTH	0	5	15	3	5	1	5	16	89	0	0	0	0	0	0	0	0	0	139
	COUNTY TOTAL	0	20	27	4	10	13	7	34	169	0	0	0	0	0	0	0	0	0	284
SANTA CLARA	BLUE CROSS	0	11	6	5	2	15	10	6	95	0	0	0	0	0	0	0	1	0	151
	SANTA CLARA FAMILY	0	11	6	4	1	1	7	13	90	0	0	0	0	0	0	0	0	0	133
	COUNTY TOTAL	0	22	12	9	3	16	17	19	185	0	0	0	0	0	0	0	1	0	284
STANISLAUS	BLUE CROSS	0	38	12	3	2	24	4	27	170	0	0	0	0	0	0	0	2	0	282
	HEALTH NET	0	16	27	2	2	41	0	30	177	0	0	0	0	0	0	0	3	0	298
	COUNTY TOTAL	0	54	39	5	4	65	4	57	347	0	0	0	0	0	0	0	5	0	580
TULARE	BLUE CROSS	0	3	1	0	0	0	7	4	30	0	0	0	0	0	0	0	0	0	45
	HEALTH NET	0	3	28	1	0	28	1	7	80	0	0	0	0	0	0	0	0	0	148
	COUNTY TOTAL	0	6	29	1	0	28	8	11	110	0	0	0	0	0	0	0	0	0	193
2 PLAN & GMC COUNTIES TOTAL		0	588	1,095	306	283	660	208	1,020	5,513	0	0	4	23	0	1	19	113	6	9,839

VOLUNTARY COUNTIES																				
COUNTY	PLAN NAME	REASONS																		
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X04	X05	TOTAL ¹
MARIN	KAISER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SONOMA	KAISER	0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	3
	SONOMA PARTNERS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	3
VOLUNTARY COUNTIES TOTAL		0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	3
GRAND TOTAL		0	589	1,095	306	283	660	208	1,020	5,515	0	0	4	23	0	1	19	113	6	9,842

NOTE: MSC-B-M05 includes only regular disenrollments (Type 2 transactions) and does not include EDER disenrollments (Type 3 transactions). Please refer to MSC-B-M27—Approved Emergency Disenrollments by Reason & Plan for EDER disenrollments (Type 3 transactions).

REASON CODE

I01 = System Created
 F01 = Could Not Choose Dr
 F02 = Beneficiary Preferred/Health Plan Did Not Meet Needs
 F03 = Dr Did Not Meet Bene Needs
 F04 = Too Far To Go

F05 = Did Not Choose Plan
 F06 = Moving Out of County
 F09 = Other Reason
 F10 = No Reason Checked
 E07 = Problem Using HCP

E08 = Terminated By Plan
 E09 = Long Term Care
 E11 = Other Health Coverage
 E12 = Moved Out of County
 X01 = Waiver Program Exempt

X03 = Indian Health Coverage
 X04 = Medical Exempt
 X05 = MER type E -Voluntary Aid Code or County

Note 1: One Disenrollment transaction, which was an Exemption with no Exemption reason, was processed but not included in the Total column for Los Angeles County. The transaction was processed correctly, however an Exemption was entered in error and pending for a beneficiary, who had an approved Exemption already on file. On 10/3/05, the pending Exemption was denied due to a current exemption already being on file. This correction is not reflected in this report because it took place after the data extraction date of 9/28/05 from MAXSTAR®.

MSC-B-M05D DISENROLLMENTS BY REASON AND PLAN

ACCEPTED DENTAL DISENROLLMENTS 8/25/2005 - 9/23/2005

EFFECTIVE 10/1/2005

MAXIMUS

GMC MANDATORY DENTAL COUNTIES																			
COUNTY	PLAN NAME	REASONS																	
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X02	TOTAL
SACRAMENTO	ACCESS DENTAL	0	13	33	41	22	25	0	46	214	0	0	0	0	0	0	0	1	395
	COMMUNITY DENTAL	0	7	8	1	8	13	0	17	126	0	0	0	0	0	0	0	0	180
	LIBERTY DENTAL	0	10	24	6	17	11	0	13	104	0	0	0	0	0	0	1	1	187
	WESTERN DENTAL	0	11	30	26	22	22	0	36	163	0	0	0	0	0	0	2	1	313
	COUNTY TOTAL	0	41	95	74	69	71	0	112	607	0	0	0	0	0	0	3	3	1,075
GMC MANDATORY COUNTIES TOTAL		0	41	95	74	69	71	0	112	607	0	0	0	0	0	0	3	3	1,075
VOLUNTARY DENTAL COUNTIES																			
COUNTY	PLAN NAME	REASONS																	
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X02	TOTAL
LOS ANGELES	ACCESS DENTAL	0	102	119	64	117	69	4	75	554	0	0	0	0	0	0	0	0	1,104
	AMERICAN HEALTH	0	14	18	11	12	12	0	17	40	0	0	0	0	0	0	0	0	124
	COMMUNITY DENTAL	0	0	2	0	0	0	0	1	6	0	0	0	0	0	0	0	0	9
	LIBERTY DENTAL	0	1	0	0	1	0	0	3	5	0	0	0	0	0	0	0	0	10
	SAFEGUARD DENTAL	0	35	64	21	24	27	0	21	127	0	0	0	0	0	0	0	0	319
	UNITED HEALTH PLAN	0	13	14	11	13	7	0	20	64	0	0	0	0	0	0	0	0	142
	UNIVERSAL CARE	0	42	31	15	22	15	3	28	100	0	0	0	0	0	0	0	0	256
	WESTERN DENTAL	0	40	78	37	35	13	0	38	157	0	0	0	0	0	0	0	0	398
COUNTY TOTAL	0	247	326	159	224	143	7	203	1,053	0	0	0	0	0	0	0	0	2,362	
RIVERSIDE	SAFEGUARD DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SAN BERNARDINO	SAFEGUARD DENTAL	0	3	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	4
	UNITED HEALTH PLAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	3	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	4
VOLUNTARY COUNTIES TOTAL		0	250	326	159	224	143	7	203	1,054	0	2,366							
GRAND TOTAL		0	291	421	233	293	214	7	315	1,661	0	0	0	0	0	0	3	3	3,441

NOTE: MSC-B-M05D includes only regular disenrollments (Type 2 transactions) and does not include EDER disenrollments (Type 3 transactions). Please refer to MSC-B-M27D—Approved Emergency Disenrollments by Reason & Plan for EDER disenrollments (Type 3 transactions).

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