

June 1, 2006

DHS HCO 06-6507

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 6/1/06

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

Note 1: Effective 4/1/06, Health Net will acquire Universal Care (UC) to become a Dental Managed Care PHP in Los Angeles County per H Letter #0306-2226.

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

Terms of Use:

The enclosed/attached information is provided by the Department of Health Services' Health Care Options Section (HCO), which takes full responsibility for its accuracy and completeness. The results of any subsequent manipulation of that information, however, are the full responsibility of the person or entity that performs that manipulation. Although those results can be said to be based on information supplied by HCO, the results themselves must in no way, explicitly or implicitly, be attributed to HCO.

The recipient of this file may not supply it, or the data it contains, in any electronic format, to any other party, without the expressed written consent of HCO. By accepting and using the enclosed/attached information, the user is also accepting these terms of use. HCO reserves the right to refuse to supply manipulable information (information in formats that allow the data contained to be manipulated) to any users who do not abide by these terms.

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 4/25/2006 - 5/24/2006

EFFECTIVE 6/1/2006

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
ALAMEDA	ALAMEDA ALLIANCE	0	7	11	2	3	6	2	21	171	0	0	0	0	10	0	0	3	0	236
	BLUE CROSS	0	15	19	6	6	4	0	6	138	0	0	1	0	0	0	0	4	0	199
	COUNTY TOTAL	0	22	30	8	9	10	2	27	309	0	0	1	0	10	0	0	7	0	435
CONTRA COSTA	BLUE CROSS	0	16	7	0	7	15	1	7	101	0	0	1	0	0	0	0	0	0	155
	CONTRA COSTA HEALTH	0	2	8	6	0	3	8	23	64	0	0	2	0	0	0	0	0	0	116
	COUNTY TOTAL	0	18	15	6	7	18	9	30	165	0	0	3	0	0	0	0	0	0	271
FRESNO	BLUE CROSS	0	6	4	0	2	1	1	9	112	0	0	0	0	0	0	0	0	0	135
	HEALTH NET	0	11	38	3	3	29	1	28	228	0	0	0	1	0	0	0	0	0	342
	COUNTY TOTAL	0	17	42	3	5	30	2	37	340	0	0	0	1	0	0	0	0	0	477
KERN	HEALTH NET	0	22	70	3	1	13	0	16	164	0	0	0	0	0	0	0	0	0	289
	KERN FAMILY HEALTH	0	4	18	2	0	2	3	9	102	0	0	0	0	0	0	0	2	0	142
	COUNTY TOTAL	0	26	88	5	1	15	3	25	266	0	0	0	0	0	0	0	2	0	431
LOS ANGELES	HEALTH NET	0	125	295	86	103	141	40	296	1,146	0	0	2	5	1	0	0	39	0	2,279
	LA CARE	0	68	122	61	78	92	62	173	898	0	0	1	0	2	0	0	43	4	1,604
	COUNTY TOTAL	0	193	417	147	181	233	102	469	2,044	0	0	3	5	3	0	0	82	4	3,883
RIVERSIDE	INLAND EMPIRE HEALTH	0	12	5	7	5	4	2	31	174	0	0	0	0	0	0	3	6	1	250
	MOLINA	0	12	49	14	14	27	4	37	290	0	0	0	53	1	0	0	4	0	505
	COUNTY TOTAL	0	24	54	21	19	31	6	68	464	0	0	0	53	1	0	3	10	1	755
SACRAMENTO	BLUE CROSS (190 PLAN)	0	30	38	6	14	11	3	22	135	0	0	1	0	0	0	6	0	0	266
	CARE FIRST	0	9	4	4	1	3	1	8	41	0	0	0	0	0	0	0	0	0	71
	HEALTH NET	0	24	48	7	8	13	0	25	170	0	0	0	0	0	0	2	1	0	298
	KAISER	0	2	2	3	7	0	0	8	19	0	0	0	0	0	0	0	1	0	42
	MOLINA	0	17	34	15	8	19	5	16	115	0	0	0	0	0	0	0	1	0	230
	WESTERN ADVANTAGE	0	9	14	11	5	15	3	14	84	0	0	0	0	0	0	0	0	0	155
COUNTY TOTAL	0	91	140	46	43	61	12	93	564	0	0	1	0	0	0	8	3	0	1,062	
SAN BERNARDINO	INLAND EMPIRE	0	15	11	3	9	7	28	32	229	0	0	0	0	0	0	0	9	0	343
	MOLINA	0	30	52	20	24	49	7	38	274	0	0	1	0	0	0	0	4	0	499
	COUNTY TOTAL	0	45	63	23	33	56	35	70	503	0	0	1	0	0	0	0	13	0	842
SAN DIEGO	BLUE CROSS	0	9	28	11	2	10	0	8	70	0	0	0	0	0	0	1	0	0	139
	CARE FIRST	0	20	4	4	2	7	0	6	36	0	0	0	0	0	0	0	1	0	80
	COMMUNITY HEALTH	0	17	39	9	7	5	0	16	80	0	0	0	0	0	0	0	1	0	174
	HEALTH NET	0	21	32	6	8	14	0	7	100	0	0	0	1	0	0	1	0	0	190
	KAISER	0	1	5	4	5	1	0	2	17	0	0	0	0	0	0	0	0	0	35
	MOLINA	0	23	99	4	5	42	0	31	164	0	0	0	0	0	0	2	0	0	370
COUNTY TOTAL	0	91	207	38	29	79	0	70	467	0	0	0	1	0	0	4	2	0	988	

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 4/25/2006 - 5/24/2006

EFFECTIVE 6/1/2006

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
SAN FRANCISCO	BLUE CROSS	0	4	1	1	0	3	0	7	38	0	0	0	0	0	0	0	0	0	54
	SAN FRANCISCO HLTH	0	4	4	0	0	0	5	7	39	0	0	0	0	0	0	0	0	0	59
	COUNTY TOTAL	0	8	5	1	0	3	5	14	77	0	0	0	0	0	0	0	0	0	113
SAN JOAQUIN	BLUE CROSS	0	8	14	6	1	9	1	7	93	0	0	0	0	0	0	0	0	0	139
	SAN JOAQUIN HEALTH	0	14	10	2	3	3	4	7	97	0	0	0	0	0	0	0	0	0	140
	COUNTY TOTAL	0	22	24	8	4	12	5	14	190	0	0	0	0	0	0	0	0	0	279
SANTA CLARA	BLUE CROSS	0	16	12	3	6	16	8	9	91	0	0	0	0	0	0	0	0	0	161
	SANTA CLARA FAMILY	0	4	6	0	11	7	6	20	73	0	0	0	0	1	0	0	1	0	129
	COUNTY TOTAL	0	20	18	3	17	23	14	29	164	0	0	0	0	1	0	0	1	0	290
STANISLAUS	BLUE CROSS	0	37	28	7	1	6	8	22	114	0	0	1	0	0	0	0	0	0	224
	HEALTH NET	0	6	37	5	0	9	1	9	85	0	0	0	0	0	0	0	1	0	153
	COUNTY TOTAL	0	43	65	12	1	15	9	31	199	0	0	1	0	0	0	0	1	0	377
TULARE	BLUE CROSS	0	2	8	0	1	0	1	3	45	0	0	0	0	0	0	0	0	0	60
	HEALTH NET	0	4	32	5	1	54	0	19	127	0	0	0	0	0	0	0	0	0	242
	COUNTY TOTAL	0	6	40	5	2	54	1	22	172	0	0	0	0	0	0	0	0	0	302
2 PLAN & GMC COUNTIES TOTAL		0	626	1,208	326	351	640	205	999	5,924	0	0	10	60	15	0	15	121	5	10,505

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
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	1	0	0	1	0	0	0	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	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	3
VOLUNTARY COUNTIES TOTAL		0	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	3
GRAND TOTAL		0	627	1,209	326	351	641	205	999	5,924	0	0	10	60	15	0	15	121	5	10,508

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

MSC-B-M05D DISENROLLMENTS BY REASON AND PLAN

ACCEPTED DENTAL DISENROLLMENTS 4/25/2006 - 5/24/2006

EFFECTIVE 6/1/2006

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	21	43	48	46	29	2	30	218	0	0	1	0	0	0	0	6	444
	COMMUNITY DENTAL	0	3	14	7	13	6	1	23	116	0	0	0	0	0	0	0	3	186
	LIBERTY DENTAL	0	16	20	11	18	10	1	16	153	0	0	0	0	0	0	0	0	245
	WESTERN DENTAL	0	14	27	31	47	12	0	31	180	0	0	0	0	0	0	0	3	345
	COUNTY TOTAL	0	54	104	97	124	57	4	100	667	0	0	1	0	0	0	0	12	1,220
GMC MANDATORY COUNTIES TOTAL		0	54	104	97	124	57	4	100	667	0	0	1	0	0	0	0	12	1,220
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	164	101	39	109	59	0	78	514	0	0	0	0	0	0	0	0	1,064
	AMERICAN HEALTH	0	12	21	17	3	15	0	12	83	0	0	0	0	0	0	0	0	163
	COMMUNITY DENTAL	0	17	13	10	10	4	0	6	27	0	0	0	0	0	0	0	0	87
	HEALTH NET ¹	0	47	40	20	29	18	1	21	142	0	0	0	0	0	0	0	0	318
	LIBERTY DENTAL	0	12	7	0	1	0	0	0	19	0	0	0	0	0	0	0	0	39
	SAFEGUARD DENTAL	0	31	25	23	34	19	0	25	114	0	0	0	0	0	0	0	0	271
	UNITED HEALTH PLAN	0	11	10	9	12	7	0	13	83	0	0	0	0	0	0	0	0	145
	WESTERN DENTAL	0	41	84	40	36	23	2	30	179	0	0	0	0	0	0	0	0	435
COUNTY TOTAL	0	335	301	158	234	145	3	185	1,161	0	0	0	0	0	0	0	0	2,522	
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	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2
	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	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2
VOLUNTARY COUNTIES TOTAL		0	335	302	159	234	145	3	185	1,161	0	2,524							
GRAND TOTAL		0	389	406	256	358	202	7	285	1,828	0	0	1	0	0	0	0	12	3,744

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).

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 = Wavier Program Exemption

X03 = Indian Health Coverage
 X02 = Dental Exempt

Note 1: Effective 4/1/06, Health Net will acquire Universal Care (UC) to become a Dental Managed Care PHP in Los Angeles County per H Letter #0306-2226.