

December 1, 2006

DHS HCO 06-7218

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

DISENROLLMENT REPORT BY REASON AND PLAN — Effective Date 12/1/06

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 11/1/06, Care 1st Health Plan will replace UHP Healthcare as a Dental Managed Care PHP in Los Angeles County. (Ref: H-Letters #0606-2329 and #0706-2377)

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 10/26/2006 - 11/27/2006

EFFECTIVE 12/1/2006

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 For Health	0	7	17	2	1	3	17	1	79	0	0	1	0	4	0	0	4	0	136
	Blue Cross of CA Partnrshp	0	2	29	0	7	10	7	17	124	0	0	0	0	0	0	0	0	0	196
	COUNTY TOTAL	0	9	46	2	8	13	24	18	203	0	0	1	0	4	0	0	4	0	332
CONTRA COSTA	Blue Cross of CA Partnrshp	0	15	10	0	9	33	4	6	81	0	0	0	0	1	0	0	0	0	159
	Contra Costa Health Plan	0	1	6	0	1	4	8	5	65	0	0	0	0	1	0	0	0	0	91
	COUNTY TOTAL	0	16	16	0	10	37	12	11	146	0	0	0	0	2	0	0	0	0	250
FRESNO	Blue Cross of CA Partnrshp	0	3	9	0	0	1	2	5	84	0	0	0	0	0	0	0	1	0	105
	Health Net Comm Solutions	0	6	19	0	2	24	2	23	202	0	0	0	0	0	0	0	2	0	280
	COUNTY TOTAL	0	9	28	0	2	25	4	28	286	0	0	0	0	0	0	0	3	0	385
KERN	Health Net Comm Solutions	0	29	25	6	4	10	0	8	138	0	0	0	0	0	0	0	0	0	220
	Kern Family Health Care	0	47	28	1	0	1	2	10	66	0	0	1	1	0	0	0	0	0	157
	COUNTY TOTAL	0	76	53	7	4	11	2	18	204	0	0	1	1	0	0	0	0	0	377
LOS ANGELES	Health Net Comm Solutions	0	77	233	137	59	91	48	259	1,033	0	0	0	0	0	0	1	30	3	1,971
	L.A. Care Health Plan	0	37	97	59	72	63	86	152	783	0	0	0	0	0	0	0	36	3	1,388
	COUNTY TOTAL	0	114	330	196	131	154	134	411	1,816	0	0	0	0	0	0	1	66	6	3,359
RIVERSIDE	Inland Empire Health Plan	0	6	5	2	11	2	16	19	196	1	0	0	0	0	0	3	6	0	267
	Molina Healthcare Partner	0	23	28	27	6	44	13	26	208	0	0	0	8	0	0	0	5	0	388
	COUNTY TOTAL	0	29	33	29	17	46	29	45	404	1	0	0	8	0	0	3	11	0	655
SACRAMENTO	Blue Cross of CA Partnrshp	0	18	66	20	14	15	1	61	163	0	0	0	0	0	0	8	5	0	371
	Care1st Partner Plan, LLC	0	10	6	2	3	13	1	14	50	0	0	0	0	0	0	0	2	0	101
	Health Net Comm Solutions	0	21	18	11	8	4	6	20	94	0	0	0	0	0	0	1	0	0	183
	KP Cal, LLC	0	4	1	0	0	0	0	4	12	0	0	0	0	0	0	0	0	0	21
	Molina Healthcare Partner	0	11	10	17	11	16	2	16	80	0	0	0	0	0	0	0	1	0	164
	COUNTY TOTAL	0	76	115	59	39	61	10	126	513	0	0	0	0	0	0	9	10	0	1,018
SAN BERNARDINO	Inland Empire Health Plan	0	7	10	6	2	6	13	33	265	0	0	0	0	0	0	0	5	1	348
	Molina Healthcare Partner	0	19	23	11	17	44	4	36	252	0	0	0	29	0	0	0	1	0	436
	COUNTY TOTAL	0	26	33	17	19	50	17	69	517	0	0	0	29	0	0	0	6	1	784
SAN DIEGO	Blue Cross of CA Partnrshp	0	9	14	2	3	9	4	8	78	0	0	0	0	0	0	0	1	0	128
	Care1st Partner Plan, LLC	0	9	11	0	0	10	0	3	54	0	0	0	0	0	0	0	3	1	91
	Community Hlth Grp Partner	0	13	38	5	7	10	2	17	113	1	0	0	0	0	0	1	2	0	209
	Health Net Comm Solutions	0	3	13	2	2	19	0	10	51	0	0	0	0	0	0	0	3	1	104
	KP Cal, LLC	0	1	5	1	1	0	0	3	17	0	0	2	0	0	0	0	0	0	30
	COUNTY TOTAL	0	54	139	26	16	65	6	59	442	1	0	2	0	0	0	5	10	3	828

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 10/26/2006 - 11/27/2006

EFFECTIVE 12/1/2006

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 of CA Partnrshp	0	6	3	3	1	4	0	10	27	0	0	0	0	0	0	0	0	0	54
	San Francisco Health Plan	0	2	3	0	0	1	0	4	34	0	0	0	0	0	0	2	2	0	48
	COUNTY TOTAL	0	8	6	3	1	5	0	14	61	0	0	0	0	0	0	2	2	0	102
SAN JOAQUIN	Blue Cross of CA Partnrshp	0	13	5	2	8	7	1	12	85	0	0	0	0	0	0	0	0	0	133
	Health Plan of San Joaquin	0	2	2	0	3	1	5	3	72	0	0	2	0	0	0	0	0	0	90
	COUNTY TOTAL	0	15	7	2	11	8	6	15	157	0	0	2	0	0	0	0	0	0	223
SANTA CLARA	Blue Cross of CA Partnrshp	0	8	13	9	0	10	3	13	107	0	0	0	0	0	0	0	0	0	163
	Santa Clara Family H.P.	0	5	10	3	0	0	6	7	76	0	0	0	0	0	0	0	0	0	107
	COUNTY TOTAL	0	13	23	12	0	10	9	20	183	0	0	0	0	0	0	0	0	0	270
STANISLAUS	Blue Cross of CA Partnrshp	0	24	15	4	2	1	4	21	75	0	0	0	0	0	0	0	0	0	146
	Health Net Comm Solutions	0	10	11	0	0	13	0	7	31	0	0	0	0	0	0	0	0	1	73
	COUNTY TOTAL	0	34	26	4	2	14	4	28	106	0	0	0	0	0	0	0	0	1	219
TULARE	Blue Cross of CA Partnrshp	0	2	5	2	0	0	0	6	66	0	0	0	0	0	0	0	0	0	81
	Health Net Comm Solutions	0	3	18	0	2	15	0	42	62	0	0	0	0	0	0	0	0	0	142
	COUNTY TOTAL	0	5	23	2	2	15	0	48	128	0	0	0	0	0	0	0	0	0	223
2 PLAN & GMC COUNTIES TOTAL		0	484	878	359	262	514	257	910	5,166	2	0	6	38	6	0	20	112	11	9,025

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	KP Cal, LLC	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	KP Cal, LLC	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
	Sonoma Partners	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
VOLUNTARY COUNTIES TOTAL		0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
GRAND TOTAL		0	484	878	360	262	514	257	910	5,166	2	0	6	38	6	0	20	112	11	9,026

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 10/26/2006 - 11/27/2006

EFFECTIVE 12/1/2006

MAXIMUS

GMC MANDATORY DENTAL COUNTIES																			
COUNTY	PLAN NAME	REASONS																	TOTAL
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X02	
SACRAMENTO	Access Dental Plan	0	31	37	61	27	13	2	20	201	0	0	0	0	0	0	0	0	392
	Community Dental Svc, Inc.	0	13	10	5	12	6	0	21	93	0	0	0	0	0	0	0	0	160
	Liberty Dental Plan of CA	0	19	17	2	10	10	1	20	134	0	0	0	0	0	0	0	2	215
	Western Dental Services	0	30	41	52	24	6	3	31	202	0	0	0	0	0	0	0	6	395
	COUNTY TOTAL	0	93	105	120	73	35	6	92	630	0	8	1,162						
GMC MANDATORY COUNTIES TOTAL		0	93	105	120	73	35	6	92	630	0	8	1,162						

VOLUNTARY DENTAL COUNTIES																			
COUNTY	PLAN NAME	REASONS																	TOTAL
		I01	F01	F02	F03	F04	F05	F06	F09	F10	E07	E08	E09	E11	E12	X01	X03	X02	
LOS ANGELES	Access Dental Plan	0	302	116	48	61	76	0	70	478	0	0	0	0	0	0	0	0	1,151
	American Health Guard	0	30	21	10	24	16	0	28	151	0	0	0	0	0	0	0	0	280
	Care 1st Health Plan	0	20	18	15	7	3	1	20	69	0	0	0	0	0	0	0	0	153
	Community Dental Svc, Inc.	0	4	16	7	4	1	0	10	35	0	0	0	0	0	0	0	0	77
	Health Net	0	32	43	13	22	28	3	32	137	0	0	0	0	0	0	0	0	310
	Liberty Dental Plan of CA	0	4	6	4	5	5	0	4	30	0	0	0	0	0	0	0	0	58
	SafeGuard Dental, Inc.	0	41	29	20	24	8	0	15	84	0	0	0	0	0	0	0	0	221
	Western Dental Services	0	47	65	31	37	8	1	54	212	0	0	0	0	0	0	0	0	455
COUNTY TOTAL	0	480	314	148	184	145	5	233	1,196	0	0	0	0	0	0	0	0	2,705	
RIVERSIDE	SafeGuard Dental, Inc.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western Dental Services	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							
SAN BERNARDINO	SafeGuard Dental, Inc.	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
	UHP Healthcare	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western Dental Services	0	0	0	0	3	0	0	0	2	0	0	0	0	0	0	0	0	5
	COUNTY TOTAL	0	0	0	0	3	0	0	0	3	0	6							
VOLUNTARY COUNTIES TOTAL		0	480	314	148	187	145	5	233	1,199	0	2,711							
GRAND TOTAL		0	573	419	268	260	180	11	325	1,829	0	8	3,873						

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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