



March 3, 2008

DHS HCO 08-9078

Mr. Jerry D. Stanger, Chief
Department of Health Care Services
Fiscal Intermediary & Contracts Oversight Division
MS 4700
P.O. Box 997413
Sacramento, CA 95899-7413

DIENROLLMENT REPORT BY REASON AND PLAN - Effective Date 3/1/08

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 Care Services with the current version of the reports listed below.

- MSC-B-M05 Disenrollments by Reason and Plan, Accepted Medical Disenrollments
- MSC-B-M05D Disenrollments by Reason and Plan, Accepted Dental Disenrollments

If you have any questions, please contact Eric Stewart at (916) 669-3573.

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 1/25/2008 - 2/22/2008

EFFECTIVE 3/1/2008

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	6	7	3	0	4	6	17	121	0	0	2	0	0	0	0	1	0	167
	Blue Cross of CA Partnrshp	0	14	12	5	4	4	3	19	132	0	0	0	0	0	0	0	0	0	193
	COUNTY TOTAL	0	20	19	8	4	8	9	36	253	0	0	2	0	0	0	0	1	0	360
CONTRA COSTA	Blue Cross of CA Partnrshp	0	22	13	0	13	11	0	18	90	0	0	0	0	0	0	0	1	0	168
	Contra Costa Health Plan	0	17	7	2	0	0	4	41	125	0	0	0	0	0	0	0	1	1	198
	COUNTY TOTAL	0	39	20	2	13	11	4	59	215	0	0	0	0	0	0	0	2	1	366
FRESNO	Blue Cross of CA Partnrshp	0	91	342	23	12	21	3	438	703	0	0	0	0	0	0	0	0	1	1,634
	Health Net Comm Solutions	0	9	18	5	0	12	1	48	158	0	0	0	0	0	0	0	0	0	251
	COUNTY TOTAL	0	100	360	28	12	33	4	486	861	0	0	0	0	0	0	0	0	1	1,885
KERN	Health Net Comm Solutions	0	29	35	6	4	20	0	18	127	0	0	0	0	0	0	0	0	0	239
	Kern Family Health Care	0	24	69	8	10	6	0	18	127	0	0	1	2	0	0	0	1	0	266
	COUNTY TOTAL	0	53	104	14	14	26	0	36	254	0	0	1	2	0	0	0	1	0	505
LOS ANGELES	Health Net Comm Solutions	0	93	190	64	69	76	34	231	1,042	0	0	0	0	0	0	0	23	0	1,822
	L.A. Care Health Plan	1	89	146	59	60	100	61	401	1,128	0	0	0	0	0	0	0	26	3	2,074
	COUNTY TOTAL	1	182	336	123	129	176	95	632	2,170	0	0	0	0	0	0	0	49	3	3,896
RIVERSIDE	Inland Empire Health Plan	0	12	9	2	11	3	13	78	245	0	0	0	0	0	0	7	2	1	383
	Molina Healthcare Partner	0	17	44	15	17	32	6	32	286	0	0	0	0	0	0	0	1	1	451
	COUNTY TOTAL	0	29	53	17	28	35	19	110	531	0	0	0	0	0	0	7	3	2	834
SACRAMENTO	Blue Cross of CA Partnrshp	0	9	26	12	6	8	5	92	210	0	0	0	0	0	0	6	0	2	376
	Health Net Comm Solutions	0	24	12	15	4	5	3	26	149	0	0	0	0	0	0	1	3	0	242
	KP Cal, LLC	0	1	4	3	0	0	0	2	20	0	0	3	0	0	0	0	0	0	33
	Molina Healthcare Partner	0	16	26	15	11	7	4	20	133	0	0	0	0	0	0	0	1	0	233
	WHA Community Health Plan	0	24	16	3	10	8	0	16	101	0	0	0	0	0	0	0	1	0	179
COUNTY TOTAL	0	74	84	48	31	28	12	156	613	0	0	3	0	0	0	7	5	2	1,063	
SAN BERNARDINO	Inland Empire Health Plan	0	4	11	8	18	3	25	32	312	0	0	0	0	0	0	0	4	0	417
	Molina Healthcare Partner	0	24	14	11	21	62	3	35	346	0	0	0	0	0	0	0	2	0	518
	COUNTY TOTAL	0	28	25	19	39	65	28	67	658	0	0	0	0	0	0	0	6	0	935
SAN DIEGO	Blue Cross of CA Partnrshp	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Care1st Partner Plan, LLC	0	23	33	9	5	74	1	63	235	0	0	0	0	0	0	1	0	0	444
	Community Hlth Grp Partner	0	38	28	10	6	46	6	85	174	0	0	0	0	1	0	1	3	1	399
	Health Net Comm Solutions	0	80	23	4	9	53	4	95	278	0	0	0	0	0	0	3	0	0	549
	KP Cal, LLC	0	0	3	0	1	4	0	7	57	0	0	0	0	0	0	0	0	0	72
	Molina Healthcare Partner	0	26	41	9	3	37	1	48	229	0	0	0	0	0	0	7	4	1	406
COUNTY TOTAL	0	167	128	32	24	214	12	298	973	0	0	0	0	1	0	12	7	2	1,870	

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 1/25/2008 - 2/22/2008

EFFECTIVE 3/1/2008

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	1	2	0	0	11	3	5	46	0	0	0	0	0	0	0	0	0	68
	San Francisco Health Plan	0	3	1	2	0	3	3	2	51	0	0	0	0	1	0	1	1	0	68
	COUNTY TOTAL	0	4	3	2	0	14	6	7	97	0	0	0	0	1	0	1	1	0	136
SAN JOAQUIN	Blue Cross of CA Partnrshp	0	11	24	11	1	8	3	11	147	0	0	0	0	0	0	0	0	1	217
	Health Plan of San Joaquin	0	15	3	3	2	4	0	4	112	0	0	0	0	0	0	0	2	0	145
	COUNTY TOTAL	0	26	27	14	3	12	3	15	259	0	2	1	362						
SANTA CLARA	Blue Cross of CA Partnrshp	0	9	7	6	6	14	6	30	86	0	0	0	0	0	0	0	0	0	164
	Santa Clara Family H.P.	0	6	5	1	8	2	1	13	97	0	0	0	0	0	0	0	1	0	134
	COUNTY TOTAL	0	15	12	7	14	16	7	43	183	0	1	0	298						
STANISLAUS	Blue Cross of CA Partnrshp	0	5	20	3	3	1	4	8	75	0	0	0	0	0	0	0	0	0	119
	Health Net Comm Solutions	0	5	13	0	4	5	0	12	75	0	0	0	0	0	0	0	0	0	114
	COUNTY TOTAL	0	10	33	3	7	6	4	20	150	0	0	0	233						
TULARE	Blue Cross of CA Partnrshp	0	27	84	6	0	3	10	50	163	0	0	0	0	0	0	0	0	0	343
	Health Net Comm Solutions	0	5	16	0	0	3	0	8	96	0	0	0	0	0	0	5	1	0	134
	COUNTY TOTAL	0	32	100	6	0	6	10	58	259	0	0	0	0	0	0	5	1	0	477
2 PLAN & GMC COUNTIES TOTAL		1	779	1,304	323	318	650	213	2,023	7,476	0	0	6	2	2	0	32	79	12	13,220

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	1	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	5
	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	1	0	0	0	0	0	4	0	0	0	5						
VOLUNTARY COUNTIES TOTAL		0	0	1	0	0	0	0	0	4	0	0	0	5						
GRAND TOTAL		1	779	1,305	323	318	650	213	2,023	7,480	0	0	6	2	2	0	32	79	12	13,225

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 1/25/2008 - 2/22/2008

EFFECTIVE 3/1/2008

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	11	54	24	33	9	1	22	298	0	0	0	0	0	0	3	0	455
	Community Dental Svc, Inc.	0	14	5	16	13	9	0	16	152	0	0	0	0	0	0	1	0	226
	Liberty Dental Plan of CA	0	30	16	14	20	3	0	13	191	0	0	0	0	0	0	1	0	288
	Western Dental Services	0	8	31	41	34	4	0	17	249	0	0	1	0	0	0	6	0	391
	COUNTY TOTAL	0	63	106	95	100	25	1	68	890	0	0	1	0	0	0	11	0	1,360
GMC MANDATORY COUNTIES TOTAL		0	63	106	95	100	25	1	68	890	0	0	1	0	0	0	11	0	1,360
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	301	134	28	69	96	4	78	608	0	0	0	0	0	0	0	0	1,318
	American Health Guard	0	41	43	19	6	63	2	46	431	0	0	0	0	0	0	0	0	651
	Care 1st Health Plan	0	33	22	15	21	6	0	26	123	0	0	0	0	0	0	0	0	246
	Community Dental Svc, Inc.	0	6	15	17	1	0	0	4	28	0	0	0	0	0	0	0	0	71
	Health Net	0	60	39	25	25	24	0	40	170	0	0	0	0	0	0	0	0	383
	Liberty Dental Plan of CA	0	18	16	3	6	4	0	14	28	0	0	0	0	0	0	0	0	89
	SafeGuard Dental, Inc.	0	33	40	9	10	19	0	19	98	0	0	0	0	0	0	0	0	228
	Western Dental Services	0	76	66	44	31	23	0	49	202	0	0	0	0	0	0	0	0	491
COUNTY TOTAL	0	568	375	160	169	235	6	276	1,688	0	0	0	0	0	0	0	0	3,477	
RIVERSIDE	SafeGuard Dental, Inc.	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
	Western Dental Services	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2
	COUNTY TOTAL	0	0	1	0	0	1	0	0	1	0	0	3						
SAN BERNARDINO	SafeGuard Dental, Inc.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	United Health Plan	0	0	0	0	0	1	0	0	3	0	0	0	0	0	0	0	0	4
	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	1	0	0	3	0	0	4						
VOLUNTARY COUNTIES TOTAL		0	568	376	160	169	237	6	276	1,692	0	0	3,484						
GRAND TOTAL		0	631	482	255	269	262	7	344	2,582	0	0	1	0	0	0	11	0	4,844

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

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 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: One disenrollment for Western Dental in Sacramento County was processed, but not included in the report total. The transaction was processed correctly, however, its Disenrollment Reason is unavailable as a dental option.