



October 1, 2008

DHS HCO 08-9930

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 10/1/08

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 8/26/2008 - 9/23/2008

EFFECTIVE 10/1/2008

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	5	4	0	0	0	4	11	153	0	0	0	0	0	0	0	2	0	179
	Blue Cross of CA Partnrshp	0	12	1	0	4	7	6	13	98	0	0	0	0	0	0	0	0	0	141
	COUNTY TOTAL	0	17	5	0	4	7	10	24	251	0	0	0	0	0	0	0	2	0	320
CONTRA COSTA	Blue Cross of CA Partnrshp	0	8	6	2	5	12	2	9	135	0	0	0	0	0	0	0	0	0	179
	Contra Costa Health Plan	0	6	2	0	2	2	7	14	129	0	0	0	0	0	0	0	0	0	162
	COUNTY TOTAL	0	14	8	2	7	14	9	23	264	0	0	0	0	0	0	0	0	0	341
FRESNO	Blue Cross of CA Partnrshp	0	42	128	3	5	9	2	1,042	319	0	0	0	0	0	0	0	0	0	1,550
	Health Net Comm Solutions	0	17	26	10	1	5	5	31	214	0	0	0	0	0	0	0	0	0	309
	COUNTY TOTAL	0	59	154	13	6	14	7	1,073	533	0	0	0	0	0	0	0	0	0	1,859
KERN	Health Net Comm Solutions	0	15	30	8	2	9	2	12	123	0	0	0	0	0	0	0	1	0	202
	Kern Family Health Care	0	25	38	2	8	7	6	11	160	0	0	0	0	0	0	0	0	0	257
	COUNTY TOTAL	0	40	68	10	10	16	8	23	283	0	0	0	0	0	0	0	1	0	459
LOS ANGELES	Health Net Comm Solutions	0	64	154	62	55	75	29	208	713	0	0	0	0	0	0	0	30	9	1,399
	L.A. Care Health Plan	0	106	158	54	82	63	70	869	1,090	0	0	0	0	0	0	0	44	4	2,540
	COUNTY TOTAL	0	170	312	116	137	138	99	1,077	1,803	0	0	0	0	0	0	0	74	13	3,939
RIVERSIDE	Inland Empire Health Plan	0	2	19	5	7	5	23	18	265	0	0	0	0	0	0	0	4	1	349
	Molina Healthcare Partner	0	23	37	3	8	39	7	32	279	0	0	0	0	0	0	1	1	0	430
	COUNTY TOTAL	0	25	56	8	15	44	30	50	544	0	0	0	0	0	0	1	5	1	779
SACRAMENTO	Blue Cross of CA Partnrshp	0	70	53	19	6	18	4	132	440	0	0	0	0	0	0	10	2	0	754
	Health Net Comm Solutions	0	5	20	13	8	5	0	27	134	0	0	0	0	0	0	0	5	0	217
	KP Cal, LLC	0	0	1	4	0	0	0	1	28	0	0	1	0	0	0	0	0	0	35
	Molina Healthcare Partner	0	5	22	7	1	10	0	18	121	0	0	0	0	0	0	2	1	0	187
	WHA Community Health Plan	0	14	1	8	1	6	0	5	124	0	0	0	0	0	0	0	0	0	159
COUNTY TOTAL	0	94	97	51	16	39	4	183	847	0	0	1	0	0	0	12	8	0	1,352	
SAN BERNARDINO	Inland Empire Health Plan	0	4	4	4	13	12	38	43	313	0	0	0	0	0	0	0	2	2	435
	Molina Healthcare Partner	0	39	36	12	11	57	6	66	278	0	0	0	0	0	0	0	3	1	509
	COUNTY TOTAL	0	43	40	16	24	69	44	109	591	0	0	0	0	0	0	0	5	3	944
SAN DIEGO	Care1st Partner Plan, LLC	0	13	9	1	2	9	0	25	71	0	0	0	0	1	0	0	0	0	131
	Community Hlth Grp Partner	0	33	42	5	4	10	13	39	137	0	0	0	0	0	0	2	1	0	286
	Health Net Comm Solutions	0	22	23	2	7	16	0	33	146	0	0	0	0	0	0	1	1	0	251
	KP Cal, LLC	0	6	11	2	15	3	0	6	28	0	0	0	0	0	0	0	0	0	71
	Molina Healthcare Partner	0	22	33	9	5	11	0	86	153	0	0	0	0	0	0	0	2	0	321
COUNTY TOTAL	0	96	118	19	33	49	13	189	535	0	0	0	0	1	0	3	4	0	1,060	

MSC-B-M05 DISENROLLMENTS BY REASON AND PLAN

ACCEPTED MEDICAL DISENROLLMENTS 8/26/2008 - 9/23/2008

EFFECTIVE 10/1/2008

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	3	0	1	5	1	0	4	39	0	0	0	0	0	0	0	0	0	53
	San Francisco Health Plan	0	3	1	1	0	2	8	1	58	0	0	1	0	4	0	2	0	0	81
	COUNTY TOTAL	0	6	1	2	5	3	8	5	97	0	0	1	0	4	0	2	0	0	134
SAN JOAQUIN	Blue Cross of CA Partnrshp	0	9	8	6	3	10	0	22	147	0	0	0	0	0	0	0	0	0	205
	Health Plan of San Joaquin	0	4	6	1	2	1	4	16	90	0	0	2	0	0	0	0	0	0	126
	COUNTY TOTAL	0	13	14	7	5	11	4	38	237	0	0	2	0	0	0	0	0	0	331
SANTA CLARA	Blue Cross of CA Partnrshp	0	5	29	0	7	9	6	41	147	0	0	0	0	0	0	0	0	0	244
	Santa Clara Family H.P.	0	11	10	2	3	4	5	11	102	0	0	0	0	0	0	0	1	1	150
	COUNTY TOTAL	0	16	39	2	10	13	11	52	249	0	1	1	394						
STANISLAUS	Blue Cross of CA Partnrshp	0	5	10	2	0	1	6	8	104	0	0	0	0	0	0	0	0	0	136
	Health Net Comm Solutions	0	6	15	1	0	4	0	11	29	0	0	0	0	0	0	0	0	0	66
	COUNTY TOTAL	0	11	25	3	0	5	6	19	133	0	0	0	202						
TULARE	Blue Cross of CA Partnrshp	0	6	23	1	0	1	6	19	119	0	0	1	0	0	0	0	0	0	176
	Health Net Comm Solutions	0	4	13	2	1	3	5	45	109	0	0	0	0	0	0	0	0	0	182
	COUNTY TOTAL	0	10	36	3	1	4	11	64	228	0	0	1	0	0	0	0	0	0	358
2 PLAN & GMC COUNTIES TOTAL		0	614	973	252	273	426	264	2,929	6,595	0	0	5	0	5	0	18	100	18	12,472

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	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2
	COUNTY TOTAL	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2
SONOMA	KP Cal, LLC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
VOLUNTARY COUNTIES TOTAL		0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2
GRAND TOTAL		0	615	973	252	273	426	264	2,930	6,595	0	0	5	0	5	0	18	100	18	12,474

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 8/26/2008 - 9/23/2008

EFFECTIVE 10/1/2008

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	21	46	34	22	6	1	28	288	0	0	1	0	0	0	7	0	454
	Community Dental Svc, Inc.	0	4	6	10	26	7	0	6	141	0	0	0	0	0	0	0	0	200
	HealthNet of California	0	0	0	3	4	1	0	1	45	0	0	0	0	0	0	0	0	54
	Liberty Dental Plan of CA	0	3	9	18	12	3	0	12	171	0	0	0	0	0	0	2	0	230
	Western Dental Services	0	9	59	45	31	2	1	33	329	0	0	0	0	0	0	5	0	514
COUNTY TOTAL		0	37	120	110	95	19	2	80	974	0	0	1	0	0	0	14	0	1,452
GMC MANDATORY COUNTIES TOTAL		0	37	120	110	95	19	2	80	974	0	0	1	0	0	0	14	0	1,452

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	151	53	109	138	2	126	544	0	0	0	0	0	0	0	0	1,424
	American Health Guard	0	45	35	18	29	48	0	65	447	0	0	0	0	0	0	0	0	687
	Care 1st Health Plan	0	24	16	9	13	14	0	31	108	0	0	0	0	0	0	0	0	215
	Community Dental Svc, Inc.	0	7	16	4	3	4	0	18	25	0	0	0	0	0	0	0	0	77
	Health Net	0	26	54	25	18	25	1	40	161	0	0	0	0	0	0	0	0	350
	Liberty Dental Plan of CA	0	4	14	7	15	2	0	7	49	0	0	0	0	0	0	0	0	98
	SafeGuard Dental, Inc.	0	15	41	9	11	7	0	39	70	0	0	0	0	0	0	0	0	192
	Western Dental Services	0	57	70	47	41	19	0	85	235	0	0	0	0	0	0	0	0	554
COUNTY TOTAL		0	479	397	172	239	257	3	411	1,639	0	0	3,597						
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	0	0	0	0	0	0	0
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	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3
	Western Dental Services	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	2
	COUNTY TOTAL	0	0	3	0	1	0	0	0	1	0	0	5						
VOLUNTARY COUNTIES TOTAL		0	479	400	172	240	257	3	411	1,640	0	0	3,602						
GRAND TOTAL		0	516	520	282	335	276	5	491	2,614	0	0	1	0	0	0	14	0	5,054

NOTE: MSC-B-M05D includes only regular disenrollments (Type 2 transactions) and does not include EDER disenrollments (Type 3 transactions).
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