



December 8, 2009

DHCS HCO 09-3467

Ms. Lauren Gomez, Chief
Department of Health Care Services
Fiscal Intermediary & Contracts Oversight Division
MS 4700
P.O. Box 997413
Sacramento, CA 95899-7413

COPS-17 - MONTHLY DISENROLLMENT REPORT- Effective Date of 12/8/09

Reference: Health Care Options Contract #07-65829 - 6.5.2.2.F.3-4
C #1009-0646, dated October 30, 2009

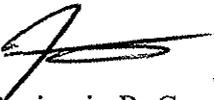
Dear Ms. Gomez:

The purpose of this report is to provide a comprehensive view of disenrollments over a reporting period. Volumes are categorized by disenrollment type and reason, while grouping are reported by choice type (medical, dental), county, plan, and language. This is a contractually required report detailed in Health Care Options Contract 07-65829.

Note: As of November 2009, volumes categorized by disenrollment type and ZIP Code, as referenced in 6.5.2.2.F.4, are available to run on an ad hoc basis from Reporting Services, per DHCS request via C #1009-0646.

If you have any questions, please contact Haiyong Li at (916) 364-6656.

Sincerely,


for
Benjamin R. Coss
Vice President
California Health Care Options

cc: Reports File
Admin File

COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Disenrollment Transactions by Plan Type (Medical, Dental), County Name, and Plan Name

Transaction Type			Disenrollment												
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Medical	ALAMEDA	Alameda Alliance For Health	3		3	4	7		1	3		10	32		
		Blue Cross of CA Partnrshp				15	10	2	5	3	1	13	81		
		Contra Costa Health Plan				2								17	
		Health Net Comm Solutions												7	
		Health Plan of San Joaquin				2						6		9	
		Inland Empire Health Plan									1			3	
		KP Cal, LLC												1	
		L.A. Care Health Plan										3		2	
		San Francisco Health Plan										2		5	
		Santa Clara Family H.P.												5	
	County Subtotal			3		3	23	17	2	6	6	13	23	162	
		CONTRA COSTA	Alameda Alliance For Health									2		26	
	Blue Cross of CA Partnrshp					10	4	4	1	5	1	9	69		
	Community Hlth Grp Partner													4	
	Contra Costa Health Plan				5		3	7	6	1	1		5	49	
	Health Net Comm Solutions													4	
	Health Plan of San Joaquin													4	

Disenrollment Reason Codes:

E01 = Incarcerated
 E02 = Prior Care
 E03 = Enrolled Incorrectly Into a Plan
 E04 = Deceased
 E05 = Child Protective Services
 E06 = Foster Care/Adoption
 E07 = Problem Using the HCP
 E08 = Terminated By Plan
 E09 = Long Term Care

E10 = CCS Not In PCCM Contract
 E11 = Other Health Coverage
 E12 = Moved Out Of County
 E13 = Pregnancy
 F01 = Could Not Choose Doctor I Wanted
 F02 = Plan Did Not Cover Bene Needs
 F03 = Doctor Did Not Meet Beneficiary Needs
 F04 = Too Far To Go
 F05 = Did Not Choose This Plan

Initiation Codes:

F06 = Moving Out Of County
 F09 = Other Reason
 F10 = No Reason Checked
 I01 = IS-Generated Disenrollment
 X01 = Waiver Programs exemption
 X02 = Dental Exemption
 X03 = Indian Health Coverage
 X04 = Medical Exemption
 X05 = MER type E -Voluntary Aid Code or County

B - Bene
 D - DHCS
 P - Plan
 S - Social Services

COPS-17.2 – Disenrollment Summary Report

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Transaction Type			Disenrollment		Total	
Disenrollment Reason Code			X04	X05		
Plan Type	County Name	Plan Name				
Medical	ALAMEDA	Alameda Alliance For Health	3	1	67	
		Blue Cross of CA Partnrshp			130	
		Contra Costa Health Plan			19	
		Health Net Comm Solutions			7	
		Health Plan of San Joaquin			17	
		Inland Empire Health Plan			4	
		KP Cal, LLC			1	
		L.A. Care Health Plan			5	
		San Francisco Health Plan			7	
		Santa Clara Family H.P.			5	
		County Subtotal		3	1	262
	CONTRA COSTA	Alameda Alliance For Health				28
		Blue Cross of CA Partnrshp				103
		Community Hlth Grp Partner				4
		Contra Costa Health Plan		1		78
		Health Net Comm Solutions				4
		Health Plan of San Joaquin				4

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Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Medical	CONTRA COSTA	Inland Empire Health Plan										1			
		KP Cal, LLC											1		
		Molina Healthcare Partner												3	
		San Francisco Health Plan												2	
		Santa Clara Family H.P.											3		
		County Subtotal		5			13	11	10	2	6	3	18	162	
	FRESNO	Alameda Alliance For Health												4	
		Blue Cross of CA Partnrshp				165	301	20	6	14	1	283	646		
		Community Hlth Grp Partner												5	
		Health Net Comm Solutions				13	10	5	1	7	10	9	170		
		Health Plan of San Joaquin							2					1	
		Inland Empire Health Plan				2						4		7	
		Kern Family Health Care												7	
		L.A. Care Health Plan													19
		Molina Healthcare Partner													3
		Santa Clara Family H.P.													8
	County Subtotal					180	311	25	9	21	15	292	870		
	KERN	Blue Cross of CA Partnrshp													20

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Transaction Type			Disenrollment		Total
			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	CONTRA COSTA	Inland Empire Health Plan			1
		KP Cal, LLC			1
		Molina Healthcare Partner			3
		San Francisco Health Plan			2
		Santa Clara Family H.P.			3
		County Subtotal	1		231
	FRESNO	Alameda Alliance For Health			4
		Blue Cross of CA Partnrshp	1	1	1,438
		Community Hlth Grp Partner			5
		Health Net Comm Solutions			225
		Health Plan of San Joaquin			3
		Inland Empire Health Plan			13
		Kern Family Health Care			7
		L.A. Care Health Plan			19
		Molina Healthcare Partner			3
		Santa Clara Family H.P.			8
	County Subtotal	1	1	1,725	
	KERN	Blue Cross of CA Partnrshp			20

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Plan Type	County Name	Plan Name												
Medical	KERN	Community Hlth Grp Partner											4	
		Health Net Comm Solutions				22	26	4	2	17		12	157	
		Health Plan of San Joaquin											1	
		Inland Empire Health Plan											23	
		Kern Family Health Care	2	4		13	26	3	1	8	1	6	107	
		L.A. Care Health Plan										2	40	
		Molina Healthcare Partner											9	
		County Subtotal	2	4		35	52	7	3	25	1	20	361	
	LOS ANGELES	Alameda Alliance For Health									2		3	
		Blue Cross of CA Partnrshp									4	3	26	
		Care1st Partner Plan, LLC											1	
		Community Hlth Grp Partner									2		6	
		Health Net Comm Solutions				58	113	102	38	69	4	551	933	1
		Inland Empire Health Plan							2		9	2	140	
		Kern Family Health Care											22	
		KP Cal, LLC											6	
		L.A. Care Health Plan	1			68	74	36	43	79	4	451	1,034	2
		Molina Healthcare Partner				2	1		1		6	5	40	

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			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	KERN	Community Hlth Grp Partner			4
		Health Net Comm Solutions	3		243
		Health Plan of San Joaquin			1
		Inland Empire Health Plan			23
		Kern Family Health Care	3		174
		L.A. Care Health Plan			42
		Molina Healthcare Partner			9
		County Subtotal	6		516
	LOS ANGELES	Alameda Alliance For Health			5
		Blue Cross of CA Partnrshp			33
		Care1st Partner Plan, LLC			1
		Community Hlth Grp Partner			8
		Health Net Comm Solutions	46	5	1,920
		Inland Empire Health Plan			153
		Kern Family Health Care			22
		KP Cal, LLC			6
		L.A. Care Health Plan	56	7	1,855
		Molina Healthcare Partner			55

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Plan Type	County Name	Plan Name													
Medical	LOS ANGELES	San Francisco Health Plan										1	1		
		Santa Clara Family H.P.											1		
		County Subtotal	1			128	188	138	84	148	31	1,013	2,213	3	
	MARIN	KP Cal, LLC	1												
		County Subtotal	1												
	OUT OF STATE	Health Net Comm Solutions											1		
		Inland Empire Health Plan												1	
		County Subtotal											1	1	
	PLACER	Molina Healthcare Partner						2							
		County Subtotal						2							
	RIVERSIDE	Alameda Alliance For Health												1	
		Blue Cross of CA Partnrshp										2		1	
		Care1st Partner Plan, LLC										2			
		Community Hlth Grp Partner												12	
		Health Net Comm Solutions				1			2		3	3	38		
		Inland Empire Health Plan				3	6	1	5	5	12	52	130		
		Kern Family Health Care												9	
	KP Cal, LLC												1		

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			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	LOS ANGELES	San Francisco Health Plan			2
		Santa Clara Family H.P.			1
		County Subtotal	102	12	4,061
	MARIN	KP Cal, LLC			1
		County Subtotal			1
	OUT OF STATE	Health Net Comm Solutions			1
		Inland Empire Health Plan			1
		County Subtotal			2
	PLACER	Molina Healthcare Partner			2
		County Subtotal			2
	RIVERSIDE	Alameda Alliance For Health			1
		Blue Cross of CA Partnrshp			3
		Care1st Partner Plan, LLC			2
		Community Hlth Grp Partner			12
		Health Net Comm Solutions			47
		Inland Empire Health Plan	5		219
		Kern Family Health Care			9
	KP Cal, LLC			1	

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Plan Type	County Name	Plan Name													
Medical	RIVERSIDE	L.A. Care Health Plan				1	1		2		5	3	44		
		Molina Healthcare Partner				37	62	4	17	18	2	80	268		
		County Subtotal				42	69	5	26	23	26	138	504		
	SACRAMENTO	Alameda Alliance For Health				1								6	
		Blue Cross of CA Partnrshp	1			40	122	9	9	5	2	75	389	1	
		Community Hlth Grp Partner												3	
		Contra Costa Health Plan												7	
		Health Net Comm Solutions				12	18	6	8	8		16	172	3	
		Health Plan of San Joaquin										2	14		
		Inland Empire Health Plan												17	
		Kern Family Health Care												2	
		KP Cal, LLC	1				3		3				1	22	
		L.A. Care Health Plan												17	
		Molina Healthcare Partner				11	22	6	12	9		34	138		
		San Francisco Health Plan											3	6	
		Santa Clara Family H.P.										1		5	
		County Subtotal	2				64	165	21	32	22	3	131	798	4
	SAN BERNARDINO	Blue Cross of CA Partnrshp										3		10	

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			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	RIVERSIDE	L.A. Care Health Plan			56
		Molina Healthcare Partner	4		492
		County Subtotal	9		842
	SACRAMENTO	Alameda Alliance For Health			7
		Blue Cross of CA Partnrshp	3		656
		Community Hlth Grp Partner			3
		Contra Costa Health Plan			7
		Health Net Comm Solutions	4		247
		Health Plan of San Joaquin			16
		Inland Empire Health Plan			17
		Kern Family Health Care			2
		KP Cal, LLC			30
		L.A. Care Health Plan			17
		Molina Healthcare Partner			232
		San Francisco Health Plan			9
		Santa Clara Family H.P.			6
		County Subtotal	7		1,249
		SAN BERNARDINO	Blue Cross of CA Partnrshp		

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Medical	SAN BERNARDINO	Community Hlth Grp Partner											4	
		Contra Costa Health Plan											4	
		Health Net Comm Solutions									8		65	
		Health Plan of San Joaquin									1			
		Inland Empire Health Plan				3	6	3	4	2	10	35	129	
		Kern Family Health Care											5	
		KP Cal, LLC											3	
		L.A. Care Health Plan				2			7		16	3	92	
		Molina Healthcare Partner			1	23	35	19	10	27		85	302	
	County Subtotal			1	28	41	22	21	29	38	123	614		
	SAN DIEGO	Blue Cross of CA Partnrshp											9	
		Care1st Partner Plan, LLC				14	22	6		12		24	60	1
		Community Hlth Grp Partner	1			16	23	8		10		120	128	7
		Health Net Comm Solutions				384	146	18	22	34	7	457	849	7
		Health Plan of San Joaquin											1	
		Inland Empire Health Plan									7		34	
		KP Cal, LLC	4			1	5		3			1	12	
	L.A. Care Health Plan									3		12		

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- E03 = Enrolled Incorrectly Into a Plan
- E04 = Deceased
- E05 = Child Protective Services
- E06 = Foster Care/Adoption
- E07 = Problem Using the HCP
- E08 = Terminated By Plan
- E09 = Long Term Care
- E10 = CCS Not In PCCM Contract
- E11 = Other Health Coverage
- E12 = Moved Out Of County
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- F01 = Could Not Choose Doctor I Wanted
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Initiation Codes:

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- I01 = IS-Generated Disenrollment
- X01 = Waiver Programs exemption
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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total
			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	SAN BERNARDINO	Community Hlth Grp Partner			4
		Contra Costa Health Plan			4
		Health Net Comm Solutions			73
		Health Plan of San Joaquin			1
		Inland Empire Health Plan	11		203
		Kern Family Health Care			5
		KP Cal, LLC			3
		L.A. Care Health Plan			120
		Molina Healthcare Partner	2	1	505
		County Subtotal	13	1	931
	SAN DIEGO	Blue Cross of CA Partnrshp			9
		Care1st Partner Plan, LLC	1		140
		Community Hlth Grp Partner	2	1	316
		Health Net Comm Solutions	5	1	1,930
		Health Plan of San Joaquin			1
		Inland Empire Health Plan			41
		KP Cal, LLC			26
		L.A. Care Health Plan			15

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment												
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Medical	SAN DIEGO	Molina Healthcare Partner	1			21	17	3	2	13		44	172	8	
		County Subtotal	6			436	213	35	27	69	17	646	1,277	23	
	SAN FRANCISCO	Alameda Alliance For Health												6	
		Blue Cross of CA Partnrshp				3	3	3	5	1			4	50	
		Contra Costa Health Plan												8	
		L.A. Care Health Plan												3	
		Molina Healthcare Partner												2	
		San Francisco Health Plan						2		1			1	13	1
		County Subtotal				3	5	3	6	1			5	82	1
	SAN JOAQUIN	Alameda Alliance For Health											3	28	
		Blue Cross of CA Partnrshp				18	11	2	10	3	1		61	165	
		Contra Costa Health Plan												13	
		Health Net Comm Solutions												12	
		Health Plan of San Joaquin				1	6		1				12	39	
		Inland Empire Health Plan												7	
		Kern Family Health Care												1	
		KP Cal, LLC												1	
	L.A. Care Health Plan												15		

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total
			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Medical	SAN DIEGO	Molina Healthcare Partner	2		283
		County Subtotal	10	2	2,761
	SAN FRANCISCO	Alameda Alliance For Health			6
		Blue Cross of CA Partnrshp	1		70
		Contra Costa Health Plan			8
		L.A. Care Health Plan			3
		Molina Healthcare Partner			2
		San Francisco Health Plan			18
		County Subtotal	1		107
		SAN JOAQUIN	Alameda Alliance For Health		
	Blue Cross of CA Partnrshp			1	272
	Contra Costa Health Plan				13
	Health Net Comm Solutions				12
	Health Plan of San Joaquin				59
	Inland Empire Health Plan				7
	Kern Family Health Care				1
	KP Cal, LLC				1
	L.A. Care Health Plan				15

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- E09 = Long Term Care
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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment												
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Medical	SAN JOAQUIN	Molina Healthcare Partner									2		6		
		Santa Clara Family H.P.										3	12		
		County Subtotal				19	17	2	11	3	3	79	299		
	SANTA CLARA	Alameda Alliance For Health					1						2	13	
		Blue Cross of CA Partnrshp				10	49	4	3	24	3	21	113		
		Contra Costa Health Plan												9	
		Health Net Comm Solutions												8	
		Health Plan of San Joaquin												4	
		Inland Empire Health Plan												2	
		L.A. Care Health Plan												1	
		Molina Healthcare Partner												4	
		San Francisco Health Plan												4	
		Santa Clara Family H.P.		1			8	24	5	5	1		5	23	
		County Subtotal		1			18	74	9	8	25	3	28	181	
	STANISLAUS	Alameda Alliance For Health											4	5	
		Blue Cross of CA Partnrshp				9	8	1	1		1	3	79		
		Contra Costa Health Plan												2	
		Health Net Comm Solutions				6	13	1		3		3	85		

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- X01 = Waiver Programs exemption
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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total	
			X04	X05		
Disenrollment Reason Code						
Plan Type	County Name	Plan Name				
Medical	SAN JOAQUIN	Molina Healthcare Partner			8	
		Santa Clara Family H.P.			15	
		County Subtotal		1		434
	SANTA CLARA	Alameda Alliance For Health				16
		Blue Cross of CA Partnrshp				227
		Contra Costa Health Plan				9
		Health Net Comm Solutions				8
		Health Plan of San Joaquin				4
		Inland Empire Health Plan				2
		L.A. Care Health Plan				1
		Molina Healthcare Partner				4
		San Francisco Health Plan				4
		Santa Clara Family H.P.				72
		County Subtotal				347
		STANISLAUS	Alameda Alliance For Health			
	Blue Cross of CA Partnrshp					102
	Contra Costa Health Plan					2
	Health Net Comm Solutions					111

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment												
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Medical	STANISLAUS	Health Plan of San Joaquin											2		
		Inland Empire Health Plan										1			
		Kern Family Health Care												1	
		KP Cal, LLC												4	
		Santa Clara Family H.P.												9	
		County Subtotal				15	21	2	1	3	1	11	187		
	TULARE	Blue Cross of CA Partnrshp						96		1	2		17	75	
		Health Net Comm Solutions				3	22		2	1	1	21	107		
		Inland Empire Health Plan					1				4				
		Kern Family Health Care					6							9	
		L.A. Care Health Plan												8	
		County Subtotal				3	125		3	3	5	38	200		
	Total			21	4	4	1,007	1,311	281	239	384	159	2,566	7,911	31
	Dental	LOS ANGELES	Access Dental Plan				203	190	45	125	244	1	159	772	
American Health Guard						37	23	15	8	28	1	40	197		
Care 1st Health Plan						20	10	4	2	14		18	97		
Community Dental Svc, Inc.						2	2	4	6			8	30		

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total
Disenrollment Reason Code			X04	X05	
Plan Type	County Name	Plan Name			
Medical	STANISLAUS	Health Plan of San Joaquin			2
		Inland Empire Health Plan			1
		Kern Family Health Care			1
		KP Cal, LLC			4
		Santa Clara Family H.P.			9
		County Subtotal			241
	TULARE	Blue Cross of CA Partnrshp			191
		Health Net Comm Solutions			157
		Inland Empire Health Plan			5
		Kern Family Health Care			15
		L.A. Care Health Plan			8
		Molina Healthcare Partner			1
	County Subtotal			377	
	Total			153	18
Dental	LOS ANGELES	Access Dental Plan			1,739
		American Health Guard			349
		Care 1st Health Plan			165
		Community Dental Svc, Inc.			52

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COPS-17.2 – Disenrollment Summary Report

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Transaction Type			Disenrollment												
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	
Plan Type	County Name	Plan Name													
Dental	LOS ANGELES	Health Net				17	26	17	10	11		34	143		
		Liberty Dental Plan of CA				2	7	7		2		12	27		
		SafeGuard Dental, Inc.				13	14	7	5	7		21	62		
		Western Dental Services				26	53	30	19	7		67	207		
		County Subtotal				320	325	129	175	313	2	359	1,535		
	OUT OF STATE	Western Dental Services						1							
		County Subtotal						1							
	PLACER	Liberty Dental Plan of CA												2	
		Western Dental Services												1	
		County Subtotal												3	
	RIVERSIDE	Care 1st Health Plan											1		
		County Subtotal											1		
	SACRAMENTO	Access Dental Plan		1			11	45	16	44	5		36	400	1
		Community Dental Svc, Inc.					2	7	6	4	3		16	151	
		HealthNet of California					4	4	7	2	8		6	130	
		Liberty Dental Plan of CA					11	33	10	10	10		24	207	
		Western Dental Services					10	45	13	17	4		44	404	
		County Subtotal		1			38	134	52	77	30		126	1,292	1

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total
			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Dental	LOS ANGELES	Health Net			258
		Liberty Dental Plan of CA			57
		SafeGuard Dental, Inc.			129
		Western Dental Services			409
		County Subtotal			3,158
	OUT OF STATE	Western Dental Services			1
		County Subtotal			1
	PLACER	Liberty Dental Plan of CA			2
		Western Dental Services			1
		County Subtotal			3
	RIVERSIDE	Care 1st Health Plan			1
		County Subtotal			1
	SACRAMENTO	Access Dental Plan			559
		Community Dental Svc, Inc.			189
		HealthNet of California			161
		Liberty Dental Plan of CA			305
		Western Dental Services			537
		County Subtotal			1,751

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COPS-17.2 – Disenrollment Summary Report

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Transaction Type			Disenrollment											
Disenrollment Reason Code			E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03
Plan Type	County Name	Plan Name												
Dental	Total		1			358	460	181	252	343	2	486	2,830	1
Total			22	4	4	1,365	1,771	462	491	727	161	3,052	10,741	32

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type			Disenrollment		Total
			X04	X05	
Disenrollment Reason Code					
Plan Type	County Name	Plan Name			
Dental	Total				4,914
Total			153	18	19,003

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Disenrollment Transactions by Plan Type (Medical, Dental) and Language

Transaction Type		Disenrollment													
Disenrollment Reason Code		E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	X04	X05
Plan Type	Language														
Medical	Arabic				8	11		1	2		99	96		1	1
	Armenian				4	6	2	1	2		40	22		2	
	Cambodian				6	4			1		25	38			
	Chinese				3	4	2	5	3	2	12	53			
	English	15	3	4	620	794	178	136	252	93	1,540	4,896	27	100	10
	Farsi				3	1	1	4	2	6	4	29			
	Hmong				3	46					27	74			
	Korean							2			2			1	
	No Response, Client declined to state								1		2	3			
	No Valid Data	3			10	14	1		5		16	35			2
	Russian				14	67	1				19	103			
	Spanish	3	1		319	320	92	82	115	57	745	2,432	4	49	5
	Tagalog				4	3		4		1	7	30			
Vietnamese				13	41	4	4	1		28	100				
Total		21	4	4	1,007	1,311	281	239	384	159	2,566	7,911	31	153	18
Dental	Arabic					2		2				4			

Disenrollment Reason Codes:

Initiation Codes:

E01 = Incarcerated
 E02 = Prior Care
 E03 = Enrolled Incorrectly Into a Plan
 E04 = Deceased
 E05 = Child Protective Services
 E06 = Foster Care/Adoption
 E07 = Problem Using the HCP
 E08 = Terminated By Plan
 E09 = Long Term Care

E10 = CCS Not In PCCM Contract
 E11 = Other Health Coverage
 E12 = Moved Out Of County
 E13 = Pregnancy
 F01 = Could Not Choose Doctor I Wanted
 F02 = Plan Did Not Cover Bene Needs
 F03 = Doctor Did Not Meet Beneficiary Needs
 F04 = Too Far To Go
 F05 = Did Not Choose This Plan

F06 = Moving Out Of County
 F09 = Other Reason
 F10 = No Reason Checked
 I01 = IS-Generated Disenrollment
 X01 = Waiver Programs exemption
 X02 = Dental Exemption
 X03 = Indian Health Coverage
 X04 = Medical Exemption
 X05 = MER type E -Voluntary Aid Code or County

B - Bene
 D - DHCS
 P - Plan
 S - Social Services

COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type		Total
Disenrollment Reason Code		
Plan Type	Language	
Medical	Arabic	219
	Armenian	79
	Cambodian	74
	Chinese	84
	English	8,668
	Farsi	50
	Hmong	150
	Korean	5
	No Response, Client declined to state	6
	No Valid Data	86
	Russian	204
	Spanish	4,224
	Tagalog	49
Vietnamese	191	
Total	14,089	
Dental	Arabic	8

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type		Disenrollment													
Disenrollment Reason Code		E09P	E11P	E12P	F01	F02	F03	F04	F05	F06	F09	F10	X03	X04	X05
Plan Type	Language														
Dental	Armenian				2			6				1			
	Cambodian											2			
	Chinese					4	1		2		1	19			
	English				118	214	101	100	89		216	1,386	1		
	Farsi				1							5			
	Hmong										8	30			
	Korean				1							1			
	No Valid Data		1		1	2	1	3			2	10			
	Russian				5	38	1	2	3		8	119			
	Spanish				229	200	77	139	249	2	243	1,212			
	Tagalog										2	7			
	Vietnamese				1						6	34			
	Total		1			358	460	181	252	343	2	486	2,830	1	
Total		22	4	4	1,365	1,771	462	491	727	161	3,052	10,741	32	153	18

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COPS-17.2 – Disenrollment Summary Report

Data for transactions between 10/27/2009 12:00:00 AM and 11/23/2009

Transaction Type		Total
Disenrollment Reason Code		
Plan Type	Language	
Dental	Armenian	9
	Cambodian	2
	Chinese	27
	English	2,225
	Farsi	6
	Hmong	38
	Korean	2
	No Valid Data	20
	Russian	176
	Spanish	2,351
	Tagalog	9
	Vietnamese	41
Total		4,914
Total		19,003

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