



November 8, 2010

DHCS HCO 10- 6486

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

COPS-19 - APPROVED EDER REPORT – 9/24/2010 to 10/25/2010

Reference: Health Care Options Contract #07-65829 - 6.5.2.2.F.6

Dear Ms. Enriquez:

The purpose of the Approved EDER Report is to provide a summary of volume for the reporting period. EDER volumes are grouped by plan type (medical, dental), county, and plan. Totals are available for all EDER request types. This is a contractually required report detailed in Health Care Options Contract 07-65829.

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

Sincerely,



Benjamin R. Coss
Vice President
California Health Care Options

cc: Reports File
Admin File
DHCS HCO (1 copy)

COPS-19 – Approved EDER Report

Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code		E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D	
Plan Type, County Name, Plan of Last Transaction												
Dental	ALAMEDA	Access Dental Plan										
		HealthNet of California										
		Liberty Dental Plan of CA										
		Western Dental Services										
	CONTRA COSTA	Access Dental Plan										
	FRESNO	Access Dental Plan										
		HealthNet of California										
	KERN	Access Dental Plan										
		Western Dental Services										
	LOS ANGELES	Access Dental Plan		0					0	94		
		American Health Guard		0						12		
		Care 1st Health Plan								9		
		Community Dental Svc, Inc.								1		
		Health Net		0						11		
		HealthNet of California										
		Liberty Dental Plan of CA								1		
		SafeGuard Dental, Inc.								1		
	Western Dental Services							1	14			
	OUT OF STATE	Access Dental Plan										

EDER 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

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

Initiation Codes:

B - Bene
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Plan Type, County Name, Plan of Last Transaction														
Dental	ALAMEDA	Access Dental Plan					0							
		HealthNet of California					0							
		Liberty Dental Plan of CA					0							
		Western Dental Services					0							
	CONTRA COSTA	Access Dental Plan					0							
	FRESNO	Access Dental Plan					0							
		HealthNet of California							3					
	KERN	Access Dental Plan					0		2					
		Western Dental Services						0						
	LOS ANGELES	Access Dental Plan		2			0		28					1
		American Health Guard					0		2					
		Care 1st Health Plan							8					
		Community Dental Svc, Inc.							3					
		Health Net					0		10					
		HealthNet of California							1					
		Liberty Dental Plan of CA							6					
		SafeGuard Dental, Inc.			1				6					
	Western Dental Services							12						
	OUT OF STATE	Access Dental Plan							1					

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Plan Type, County Name, Plan of Last Transaction				
Dental	ALAMEDA	Access Dental Plan		0
		HealthNet of California		0
		Liberty Dental Plan of CA		0
		Western Dental Services		0
	CONTRA COSTA	Access Dental Plan		0
	FRESNO	Access Dental Plan		0
		HealthNet of California		3
	KERN	Access Dental Plan		2
		Western Dental Services		0
	LOS ANGELES	Access Dental Plan		125
		American Health Guard		14
		Care 1st Health Plan		17
		Community Dental Svc, Inc.		4
		Health Net		21
		HealthNet of California		1
		Liberty Dental Plan of CA		7
		SafeGuard Dental, Inc.		8
	Western Dental Services		27	
	OUT OF STATE	Access Dental Plan		1

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E02 = Prior Care	E11 = Other Health Coverage	F09 = Other Reason	D - DHCS
E03 = Enrolled Incorrectly Into a Plan	E12 = Moved Out Of County	F10 = No Reason Checked	P - Plan
E04 = Deceased	E13 = Pregnancy	I01 = IS-Generated Disenrollment	S - Social Services
E05 = Child Protective Services	F01 = Could Not Choose Doctor I Wanted	X01 = Waiver Programs exemption	
E06 = Foster Care/Adoption	F02 = Plan Did Not Cover Bene Needs	X02 = Dental Exemption	
E07 = Problem Using the HCP	F03 = Doctor Did Not Meet Beneficiary Needs	X03 = Indian Health Coverage	
E08 = Terminated By Plan	F04 = Too Far To Go	X04 = Medical Exemption	
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Plan Type, County Name, Plan of Last Transaction													
Dental	OUT OF STATE	Health Net											
		PLACER											
	RIVERSIDE	Access Dental Plan											
		Western Dental Services									1		
		Access Dental Plan											
		Care 1st Health Plan											
		Health Net											
		HealthNet of California											
		Western Dental Services											
	SACRAMENTO	Access Dental Plan										1	
		Community Dental Svc, Inc.										1	
		HealthNet of California											
		Liberty Dental Plan of CA										1	
		Western Dental Services			0					0		3	
	SAN BERNARDINO	Access Dental Plan										1	
		American Health Guard											
		Care 1st Health Plan											
		Health Net											
		HealthNet of California											
		Liberty Dental Plan of CA											
		Western Dental Services											

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Dental	OUT OF STATE	Health Net						1					
		PLACER	Access Dental Plan				0						
			Western Dental Services										
	RIVERSIDE		Access Dental Plan				0	4					
			Care 1st Health Plan				0						
			Health Net				0	3					
			HealthNet of California						0				
			Western Dental Services				0	2					
	SACRAMENTO		Access Dental Plan		1				6				
			Community Dental Svc, Inc.					0					
			HealthNet of California						8				
			Liberty Dental Plan of CA					0					
			Western Dental Services					0	6				
	SAN BERNARDINO		Access Dental Plan					0	1				
			American Health Guard						1				
			Care 1st Health Plan						3				
			Health Net					0	1				
			HealthNet of California					0					
			Liberty Dental Plan of CA					0					
			Western Dental Services					0	2				

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Dental	OUT OF STATE	Health Net		1
		PLACER	Access Dental Plan	0
		Western Dental Services		1
	RIVERSIDE	Access Dental Plan		4
		Care 1st Health Plan		0
		Health Net		3
		HealthNet of California		0
		Western Dental Services		2
	SACRAMENTO	Access Dental Plan		8
		Community Dental Svc, Inc.		1
		HealthNet of California		8
		Liberty Dental Plan of CA		1
		Western Dental Services		9
	SAN BERNARDINO	Access Dental Plan		2
		American Health Guard		1
		Care 1st Health Plan		3
		Health Net		1
		HealthNet of California		0
		Liberty Dental Plan of CA		0
		Western Dental Services		2

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Dental	SAN DIEGO	Care 1st Health Plan										
		Liberty Dental Plan of CA										
		Western Dental Services										
	SAN JOAQUIN	HealthNet of California										
		Liberty Dental Plan of CA										
	SANTA CLARA	Western Dental Services										
	STANISLAUS	Access Dental Plan										
		HealthNet of California									1	
	TULARE	HealthNet of California										
		Liberty Dental Plan of CA										
Total				0					1	152		
Medical	ALAMEDA	Alameda Alliance For Health		0				3		2		
		Anthem Blue Cross Partnrshp						3		4		
		Contra Costa Health Plan										
		Health Net Comm Solutions										
		Health Plan of San Joaquin										
		Inland Empire Health Plan										
		Kern Family Health Care										
		Molina Healthcare Partner										
		San Francisco Health Plan										

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Plan Type, County Name, Plan of Last Transaction													
Dental	SAN DIEGO	Care 1st Health Plan						2					
		Liberty Dental Plan of CA						1					
		Western Dental Services					0						
	SAN JOAQUIN	HealthNet of California						4					
		Liberty Dental Plan of CA					0						
	SANTA CLARA	Western Dental Services					0						
	STANISLAUS	Access Dental Plan							1				
		HealthNet of California											
	TULARE	HealthNet of California							1				
		Liberty Dental Plan of CA						0					
Total				4			0	129	0				1
Medical	ALAMEDA	Alameda Alliance For Health		6	0		0	30		2			
		Anthem Blue Cross Partnrshp					0						
		Contra Costa Health Plan					0	3					
		Health Net Comm Solutions						4					
		Health Plan of San Joaquin					0						
		Inland Empire Health Plan					0						
		Kern Family Health Care					0	2					
		Molina Healthcare Partner					0						
		San Francisco Health Plan					0	3					

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Plan Type, County Name, Plan of Last Transaction					
Dental	SAN DIEGO	Care 1st Health Plan		2	
		Liberty Dental Plan of CA		1	
		Western Dental Services		0	
	SAN JOAQUIN	HealthNet of California		4	
		Liberty Dental Plan of CA		0	
	SANTA CLARA	Western Dental Services		0	
	STANISLAUS	Access Dental Plan		1	
		HealthNet of California		1	
	TULARE	HealthNet of California		1	
		Liberty Dental Plan of CA		0	
	Total				287
	Medical	ALAMEDA	Alameda Alliance For Health		43
			Anthem Blue Cross Partnrshp	1	8
Contra Costa Health Plan				3	
Health Net Comm Solutions				4	
Health Plan of San Joaquin				0	
Inland Empire Health Plan				0	
Kern Family Health Care				2	
Molina Healthcare Partner				0	
San Francisco Health Plan				3	

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Plan Type, County Name, Plan of Last Transaction												
Medical	ALAMEDA	Santa Clara Family H.P.										
	CONTRA COSTA	Alameda Alliance For Health										
		Anthem Blue Cross Partnrshp									1	
		Contra Costa Health Plan			0							
		Health Net Comm Solutions										
		Kern Family Health Care										
		KP Cal, LLC										
		L.A. Care Health Plan										
		San Francisco Health Plan										
		Santa Clara Family H.P.										
	FRESNO	Anthem Blue Cross Partnrshp			0						25	
		Health Net Comm Solutions			0						18	
		Inland Empire Health Plan									1	
		Kern Family Health Care										
		L.A. Care Health Plan										
	KERN	Anthem Blue Cross Partnrshp										
		Care1st Partner Plan, LLC										
		Health Net Comm Solutions									1	
		Kern Family Health Care			0						2	
		L.A. Care Health Plan										

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Plan Type, County Name, Plan of Last Transaction													
Medical	ALAMEDA	Santa Clara Family H.P.					0	10					
		CONTRA COSTA	Alameda Alliance For Health					0	2				
	Anthem Blue Cross Partnrshp				0		0			1			
	Contra Costa Health Plan		1	3	0		0	13		1			
	Health Net Comm Solutions						0	3					
	Kern Family Health Care						0						
	KP Cal, LLC						0						
	L.A. Care Health Plan						0						
	San Francisco Health Plan						0						
	Santa Clara Family H.P.							4					
	FRESNO		Anthem Blue Cross Partnrshp	1		0		0				3	
		Health Net Comm Solutions			3				62		1		
		Inland Empire Health Plan					0						
		Kern Family Health Care							2				
		L.A. Care Health Plan					0						
	KERN	Anthem Blue Cross Partnrshp					0						
		Care1st Partner Plan, LLC					0						
		Health Net Comm Solutions		1	0		0	39		1	2		
		Kern Family Health Care			0		0	40					
		L.A. Care Health Plan					0	3					

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	Anthem Blue Cross Partnrshp			2
	Contra Costa Health Plan			18
	Health Net Comm Solutions			3
	Kern Family Health Care			0
	KP Cal, LLC			0
	L.A. Care Health Plan			0
	San Francisco Health Plan			0
	Santa Clara Family H.P.			4
	FRESNO		Anthem Blue Cross Partnrshp	
		Health Net Comm Solutions		84
		Inland Empire Health Plan		1
		Kern Family Health Care		2
		L.A. Care Health Plan		0
	KERN	Anthem Blue Cross Partnrshp		0
		Care1st Partner Plan, LLC		0
		Health Net Comm Solutions	1	45
		Kern Family Health Care		42
		L.A. Care Health Plan		3

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D
Plan Type, County Name, Plan of Last Transaction												
Medical	KERN	Molina Healthcare Partner										
	LOS ANGELES	Alameda Alliance For Health										
		Anthem Blue Cross Partnrshp										
		Care1st Partner Plan, LLC										
		Community Hlth Grp Partner									3	
		Contra Costa Health Plan										
		Health Net Comm Solutions		0			0		0	198	1	1
		Inland Empire Health Plan								3		
		Kern Family Health Care								1		
		L.A. Care Health Plan		7					1	400		3
		Molina Healthcare Partner										
		Santa Clara Family H.P.										
	MARIN	KP Cal, LLC										
	OUT OF STATE	Health Net Comm Solutions										
		Health Plan of San Joaquin										
		Inland Empire Health Plan										
		L.A. Care Health Plan										
	PLACER	Anthem Blue Cross Partnrshp										
		Health Plan of San Joaquin										
		Inland Empire Health Plan										

EDER 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
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California Health Care Options

Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E07P	E09P	E11B	E11P	E12B	E12P	E12S	E13B	E13P	F03	F10	
Plan Type, County Name, Plan of Last Transaction														
Medical	KERN	Molina Healthcare Partner					0	2						
		LOS ANGELES	Alameda Alliance For Health					0						
			Anthem Blue Cross Partnrshp					0						
			Care1st Partner Plan, LLC					0						
			Community Hlth Grp Partner					0	1					
			Contra Costa Health Plan					0						
			Health Net Comm Solutions	1	10	0		0	177		53	7	1	
			Inland Empire Health Plan			0		0	3					
			Kern Family Health Care					0	9					
			L.A. Care Health Plan	1	6	0		2	120		84		1	
			Molina Healthcare Partner					0	8		1			
			Santa Clara Family H.P.					0	4					
		MARIN	KP Cal, LLC			0								
		OUT OF STATE	Health Net Comm Solutions						4					
			Health Plan of San Joaquin					0						
			Inland Empire Health Plan							1				
			L.A. Care Health Plan							5				
		PLACER	Anthem Blue Cross Partnrshp					0						
			Health Plan of San Joaquin					0						
			Inland Empire Health Plan					0						

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 F03 = Doctor Did Not Meet Beneficiary Needs
 F04 = Too Far To Go
 F05 = Did Not Choose This Plan

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 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
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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			X04	Total
Plan Type, County Name, Plan of Last Transaction				
Medical	KERN	Molina Healthcare Partner		2
	LOS ANGELES	Alameda Alliance For Health		0
		Anthem Blue Cross Partnrshp		0
		Care1st Partner Plan, LLC		0
		Community Hlth Grp Partner		4
		Contra Costa Health Plan		0
		Health Net Comm Solutions	14	463
		Inland Empire Health Plan		6
		Kern Family Health Care		10
		L.A. Care Health Plan	11	636
		Molina Healthcare Partner		9
		Santa Clara Family H.P.		4
	MARIN	KP Cal, LLC		0
	OUT OF STATE	Health Net Comm Solutions		4
		Health Plan of San Joaquin		0
		Inland Empire Health Plan		1
		L.A. Care Health Plan		5
	PLACER	Anthem Blue Cross Partnrshp		0
		Health Plan of San Joaquin		0
		Inland Empire Health Plan		0

EDER Reason Codes:

Initiation Codes:

E01 = Incarcerated	E10 = CCS Not In PCCM Contract	F06 = Moving Out Of County	B - Bene
E02 = Prior Care	E11 = Other Health Coverage	F09 = Other Reason	D - DHCS
E03 = Enrolled Incorrectly Into a Plan	E12 = Moved Out Of County	F10 = No Reason Checked	P - Plan
E04 = Deceased	E13 = Pregnancy	I01 = IS-Generated Disenrollment	S - Social Services
E05 = Child Protective Services	F01 = Could Not Choose Doctor I Wanted	X01 = Waiver Programs exemption	
E06 = Foster Care/Adoption	F02 = Plan Did Not Cover Bene Needs	X02 = Dental Exemption	
E07 = Problem Using the HCP	F03 = Doctor Did Not Meet Beneficiary Needs	X03 = Indian Health Coverage	
E08 = Terminated By Plan	F04 = Too Far To Go	X04 = Medical Exemption	
E09 = Long Term Care	F05 = Did Not Choose This Plan	X05 = MER type E -Voluntary Aid Code or County	

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D	
Plan Type, County Name, Plan of Last Transaction													
Medical	PLACER	Molina Healthcare Partner											
		Santa Clara Family H.P.											
	RIVERSIDE	Care1st Partner Plan, LLC											
		Community Hlth Grp Partner											
		Health Net Comm Solutions									5		
		Health Plan of San Joaquin											
		Inland Empire Health Plan		0		1					10		
		L.A. Care Health Plan									2		
		Molina Healthcare Partner									22		
	SACRAMENTO	Alameda Alliance For Health											
		Anthem Blue Cross Partnrshp		0							3		
		Contra Costa Health Plan											
		Health Net Comm Solutions		0			0				1		
		Health Plan of San Joaquin											
		Inland Empire Health Plan											
		KP Cal, LLC		0							1		
		L.A. Care Health Plan											
		Molina Healthcare Partner		0						0			
		San Francisco Health Plan											
	Santa Clara Family H.P.												

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 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

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E07P	E09P	E11B	E11P	E12B	E12P	E12S	E13B	E13P	F03	F10	
Plan Type, County Name, Plan of Last Transaction														
Medical	PLACER	Molina Healthcare Partner						2						
		Santa Clara Family H.P.					0							
	RIVERSIDE	Care1st Partner Plan, LLC					0	2						
		Community Hlth Grp Partner					0	1						
		Health Net Comm Solutions					0	16						
		Health Plan of San Joaquin					0							
		Inland Empire Health Plan		8	0		0	26		4				
		L.A. Care Health Plan					0	6						
		Molina Healthcare Partner					0	17		4				
		SACRAMENTO	Alameda Alliance For Health					0	1					
	Anthem Blue Cross Partnrshp			1	0		0			3				
	Contra Costa Health Plan						0	1						
	Health Net Comm Solutions				0		0	19		2				
	Health Plan of San Joaquin						0							
	Inland Empire Health Plan						0							
	KP Cal, LLC				0									
	L.A. Care Health Plan						0	2						
	Molina Healthcare Partner				0		0	3		4				1
	San Francisco Health Plan						0							
	Santa Clara Family H.P.					0								

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- E04 = Deceased
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- 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
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- 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

Initiation Codes:

- B - Bene
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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			X04	Total
Plan Type, County Name, Plan of Last Transaction				
Medical	PLACER	Molina Healthcare Partner		2
		Santa Clara Family H.P.		0
	RIVERSIDE	Care1st Partner Plan, LLC		2
		Community Hlth Grp Partner		1
		Health Net Comm Solutions		21
		Health Plan of San Joaquin		0
		Inland Empire Health Plan	1	50
		L.A. Care Health Plan		8
		Molina Healthcare Partner		43
		SACRAMENTO	Alameda Alliance For Health	
	Anthem Blue Cross Partnrshp		6	13
	Contra Costa Health Plan			1
	Health Net Comm Solutions			22
	Health Plan of San Joaquin			0
	Inland Empire Health Plan			0
	KP Cal, LLC			1
	L.A. Care Health Plan			2
	Molina Healthcare Partner		1	9
	San Francisco Health Plan			0
	Santa Clara Family H.P.		0	

EDER Reason Codes:

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E03 = Enrolled Incorrectly Into a Plan	E12 = Moved Out Of County	F10 = No Reason Checked	P - Plan
E04 = Deceased	E13 = Pregnancy	I01 = IS-Generated Disenrollment	S - Social Services
E05 = Child Protective Services	F01 = Could Not Choose Doctor I Wanted	X01 = Waiver Programs exemption	
E06 = Foster Care/Adoption	F02 = Plan Did Not Cover Bene Needs	X02 = Dental Exemption	
E07 = Problem Using the HCP	F03 = Doctor Did Not Meet Beneficiary Needs	X03 = Indian Health Coverage	
E08 = Terminated By Plan	F04 = Too Far To Go	X04 = Medical Exemption	
E09 = Long Term Care	F05 = Did Not Choose This Plan	X05 = MER type E -Voluntary Aid Code or County	

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D	
Plan Type, County Name, Plan of Last Transaction													
Medical	SAN BERNARDINO	Anthem Blue Cross Partnrshp											
		Health Net Comm Solutions								2			
		Inland Empire Health Plan	2	0	1						13		
		Kern Family Health Care									1		
		L.A. Care Health Plan									5		
		Molina Healthcare Partner		0						0	2		
	SAN DIEGO	Anthem Blue Cross Partnrshp									1		
		Care1st Partner Plan, LLC									3		
		Community Hlth Grp Partner	1	1			0				14		2
		Health Net Comm Solutions		1							6		
		Inland Empire Health Plan											
		KP Cal, LLC		0									
		L.A. Care Health Plan									2		
	SAN FRANCISCO	Molina Healthcare Partner		1							13	0	
		Alameda Alliance For Health											
		Contra Costa Health Plan											
	SAN JOAQUIN	San Francisco Health Plan		0							0		
		Alameda Alliance For Health											
		Anthem Blue Cross Partnrshp							7				
			Contra Costa Health Plan										

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 I01 = IS-Generated Disenrollment
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COPS-19 – Approved EDER Report

Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E07P	E09P	E11B	E11P	E12B	E12P	E12S	E13B	E13P	F03	F10	
Plan Type, County Name, Plan of Last Transaction														
Medical	SAN BERNARDINO	Anthem Blue Cross Partnrshp						0						
		Health Net Comm Solutions					0	26						
		Inland Empire Health Plan	1	10	0		0	25		11				
		Kern Family Health Care					0	2						
		L.A. Care Health Plan					0	11						
		Molina Healthcare Partner			0		0	15		4				
	SAN DIEGO	Anthem Blue Cross Partnrshp						0						
		Care1st Partner Plan, LLC			1			0	2					
		Community Hlth Grp Partner			2	0	1	0	19					
		Health Net Comm Solutions			1	0		0	31		4	4		
		Inland Empire Health Plan						0	1					
		KP Cal, LLC			1									
		L.A. Care Health Plan						0	1					
	SAN FRANCISCO	Molina Healthcare Partner			0			1	6		2			
		Alameda Alliance For Health						0						
		Contra Costa Health Plan						0	1					
	SAN JOAQUIN	San Francisco Health Plan							15					
		Alameda Alliance For Health						0	2					
		Anthem Blue Cross Partnrshp			0			0						
			Contra Costa Health Plan			1			0					

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EDER Reason Code			X04	Total
Plan Type, County Name, Plan of Last Transaction				
Medical	SAN BERNARDINO	Anthem Blue Cross Partnrshp		0
		Health Net Comm Solutions		28
		Inland Empire Health Plan	1	64
		Kern Family Health Care		3
		L.A. Care Health Plan		16
		Molina Healthcare Partner	4	25
	SAN DIEGO	Anthem Blue Cross Partnrshp		1
		Care1st Partner Plan, LLC	2	8
		Community Hlth Grp Partner	1	41
		Health Net Comm Solutions	1	48
		Inland Empire Health Plan		1
		KP Cal, LLC		1
		L.A. Care Health Plan		3
		Molina Healthcare Partner	1	24
	SAN FRANCISCO	Alameda Alliance For Health		0
		Contra Costa Health Plan		1
		San Francisco Health Plan		15
	SAN JOAQUIN	Alameda Alliance For Health		2
		Anthem Blue Cross Partnrshp	1	8
		Contra Costa Health Plan		1

EDER Reason Codes:

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E03 = Enrolled Incorrectly Into a Plan	E12 = Moved Out Of County	F10 = No Reason Checked	P - Plan
E04 = Deceased	E13 = Pregnancy	I01 = IS-Generated Disenrollment	S - Social Services
E05 = Child Protective Services	F01 = Could Not Choose Doctor I Wanted	X01 = Waiver Programs exemption	
E06 = Foster Care/Adoption	F02 = Plan Did Not Cover Bene Needs	X02 = Dental Exemption	
E07 = Problem Using the HCP	F03 = Doctor Did Not Meet Beneficiary Needs	X03 = Indian Health Coverage	
E08 = Terminated By Plan	F04 = Too Far To Go	X04 = Medical Exemption	
E09 = Long Term Care	F05 = Did Not Choose This Plan	X05 = MER type E -Voluntary Aid Code or County	

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EDER Reason Code			E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D	
Plan Type, County Name, Plan of Last Transaction													
Medical	SAN JOAQUIN	Health Net Comm Solutions											
		Health Plan of San Joaquin						5					
		Inland Empire Health Plan											
		L.A. Care Health Plan											
		Molina Healthcare Partner											
		Santa Clara Family H.P.											
	SANTA CLARA	Alameda Alliance For Health											
		Anthem Blue Cross Partnrshp											
		Community Hlth Grp Partner											
		Contra Costa Health Plan											
		Health Net Comm Solutions											
		Health Plan of San Joaquin											
		Inland Empire Health Plan											
		L.A. Care Health Plan											
		Molina Healthcare Partner											
		Santa Clara Family H.P.			0						7		
	SONOMA	Health Net Comm Solutions											
	STANISLAUS	Alameda Alliance For Health											
		Anthem Blue Cross Partnrshp			1						1		
		Contra Costa Health Plan											

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California Health Care Options

Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E07P	E09P	E11B	E11P	E12B	E12P	E12S	E13B	E13P	F03	F10	
Plan Type, County Name, Plan of Last Transaction														
Medical	SAN JOAQUIN	Health Net Comm Solutions						10						
		Health Plan of San Joaquin		1	0		0	3						
		Inland Empire Health Plan					0							
		L.A. Care Health Plan					0							
		Molina Healthcare Partner					0							
		Santa Clara Family H.P.					0	3						
	SANTA CLARA	Alameda Alliance For Health					0	1						
		Anthem Blue Cross Partnrshp					0							
		Community Hlth Grp Partner						2						
		Contra Costa Health Plan					0							
		Health Net Comm Solutions						1						
		Health Plan of San Joaquin					0							
		Inland Empire Health Plan					0							
		L.A. Care Health Plan					0	2						
		Molina Healthcare Partner					0							
		Santa Clara Family H.P.		1	2		0	74			2			
	SONOMA	Health Net Comm Solutions					0							
	STANISLAUS	Alameda Alliance For Health					0							
		Anthem Blue Cross Partnrshp				0	0							
		Contra Costa Health Plan						4						

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code		X04	Total
Plan Type, County Name, Plan of Last Transaction			
Medical	SAN JOAQUIN	Health Net Comm Solutions	10
		Health Plan of San Joaquin	9
		Inland Empire Health Plan	0
		L.A. Care Health Plan	0
		Molina Healthcare Partner	0
		Santa Clara Family H.P.	3
	SANTA CLARA	Alameda Alliance For Health	1
		Anthem Blue Cross Partnrshp	0
		Community Hlth Grp Partner	2
		Contra Costa Health Plan	0
		Health Net Comm Solutions	1
		Health Plan of San Joaquin	0
		Inland Empire Health Plan	0
		L.A. Care Health Plan	2
		Molina Healthcare Partner	0
		Santa Clara Family H.P.	86
	SONOMA	Health Net Comm Solutions	0
	STANISLAUS	Alameda Alliance For Health	0
		Anthem Blue Cross Partnrshp	2
		Contra Costa Health Plan	4

EDER Reason Codes:

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 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

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E01P	E02B	E02D	E02P	E03B	E05S	E06B	E06S	E07B	E07D	
Plan Type, County Name, Plan of Last Transaction													
Medical	STANISLAUS	Health Net Comm Solutions								1			
		Health Plan of San Joaquin											
		Inland Empire Health Plan											
		L.A. Care Health Plan											
		Santa Clara Family H.P.											
	TULARE	Anthem Blue Cross Partnrshp									3		
		Health Net Comm Solutions		1									
		Kern Family Health Care											
	Total			3	12	1	1	0	18	1	777	1	6
	Total			3	12	1	1	0	18	2	929	1	6

EDER 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

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

Initiation Codes:

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California Health Care Options

Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			E07P	E09P	E11B	E11P	E12B	E12P	E12S	E13B	E13P	F03	F10	
Plan Type, County Name, Plan of Last Transaction														
Medical	STANISLAUS	Health Net Comm Solutions					0	16						
		Health Plan of San Joaquin					0							
		Inland Empire Health Plan					0							
		L.A. Care Health Plan					0							
		Santa Clara Family H.P.					0	9						
	TULARE	Anthem Blue Cross Partnrshp			1		0							
		Health Net Comm Solutions			1		0	19						
		Kern Family Health Care					0							
	Total			6	59	0	1	3	951		187	13	2	1
	Total			6	63	0	1	3	1,080	0	187	13	2	2

EDER 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
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 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

Initiation Codes:

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Data for dates 9/24/2010 12:00:00 AM through 10/25/2010

EDER Reason Code			X04	Total	
Plan Type, County Name, Plan of Last Transaction					
Medical	STANISLAUS	Health Net Comm Solutions	1	18	
		Health Plan of San Joaquin		0	
		Inland Empire Health Plan		0	
		L.A. Care Health Plan		0	
		Santa Clara Family H.P.		9	
	TULARE	Anthem Blue Cross Partnrshp		4	
		Health Net Comm Solutions	0	21	
		Kern Family Health Care		0	
	Total			47	2,090
	Total			47	2,377

EDER 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
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- F06 = Moving Out Of County
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