



June 8, 2011

DHCS HCO 11-8442

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-20 EXCEPTION TO PLAN ENROLLMENT SUMMARY REPORT – Data for 4/26/2011 through 5/24/2011

Reference: Health Care Options Contract #07-65829 - 6.5.2.2.F.7

Dear Ms. Enriquez:

The purpose of the Exception to Plan Enrollment Summary Report is to provide a summary of volume over the reporting period. Data is grouped by plan type, county name, and exception reason codes. This is a contractually required report detailed in Health Care Options Contract 07-65829.

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

Sincerely,

for
Benjamin R. Coss
Vice President
California Health Care Options

CC: Report File
Admin File

COPS-20 – Exception to Plan Enrollment Summary Report

California Health Care Options

Data for 4/26/2011 through 5/24/2011

Exception Reason		A	B	C	D	E	F	G	H	I	M	P	R	S	T	U	W	Y
Plan Type	County Name																	
Dental	ALAMEDA														1			
	SACRAMENTO									27								
	Total									27					1			
Medical	ALAMEDA				1				2		2	5	8	5	19			1
	CONTRA COSTA					2			3			1		1	6			
	FRESNO			1	1	1						2	37	2	36			
	KERN	1		1	2	1		2	2		2	7		2	33			
	KINGS			1											8			
	LOS ANGELES	16	3	51	60	22	7	10	66	5	65	358	160	6	173	1	7	
	MADERA				1					8		1			6			
	RIVERSIDE			8	6	6	4		6	2	5	12	13	1	14			1
	SACRAMENTO	2	1	6		3		1	8	33	14	23		3	19			
	SAN BERNARDINO			5	8	2	2		3	1	6	40	2	4	19		1	
	SAN DIEGO	5	2	9	5	2	7	3	14	20	14	18	22	6	15	1		
	SAN FRANCISCO	1			1		1			1	1				4			3
	SAN JOAQUIN			1					1		2	2	10	1	1			
	SANTA CLARA			3	2	1			3		2	1			27			
	STANISLAUS							1			2		5					
	TULARE	1		1						1					21			
Total	26	6	87	87	40	21	17	108	71	115	470	257	31	401	2	8	5	

Exception Reason Codes:

1 = Exception reason unknown
 2 = Type of Waiver Program unknown
 A = Neurological disorder
 B = Hematological disorder
 C = Cancer therapy
 D = Renal dialysis
 E = Major organ transplant
 F = HIV/AIDS

G = Awaiting surgery or treatment
 H = Fair Hearing
 I = Indian Health Program
 J = Plan Initiated Disenrollment
 M = Other complex Medical/Dental condition
 N = Not Exempt
 P = Pregnant
 R = Temporary Exception -Foster care

S = Temporary Exception -Long term care
 T = Temporary Exception -Moved out of County
 U = Waiver -AIDS
 V = Waiver -Model
 W = Waiver -IHMC
 X = Sonoma Exception
 Y = Waiver -SNF
 Z = Dental Exception

COPS-20 – Exception to Plan Enrollment Summary Report

Data for 4/26/2011 through 5/24/2011

Exception Reason		Total
Plan Type	County Name	
Dental	ALAMEDA	1
	SACRAMENTO	27
	Total	28
Medical	ALAMEDA	43
	CONTRA COSTA	13
	FRESNO	80
	KERN	53
	KINGS	9
	LOS ANGELES	1,010
	MADERA	16
	RIVERSIDE	78
	SACRAMENTO	113
	SAN BERNARDINO	93
	SAN DIEGO	143
	SAN FRANCISCO	12
	SAN JOAQUIN	18
	SANTA CLARA	39
	STANISLAUS	8
TULARE	24	
Total	1,752	

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Plan Type	County Name																
Total	26	6	87	87	40	21	17	108	98	115	470	257	31	402	2	8	5

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COPS-20 – Exception to Plan Enrollment Summary Report

Data for 4/26/2011 through 5/24/2011

Exception Reason	Total
Plan Type County Name	
Total	1,780

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