



August 8, 2011

DHCS HCO 11-8981

Ms. Tanya Homman, Chief
Department of Health Care Services
Medi-Cal Managed Care Division
MS 4400
P.O. Box 997413
Sacramento, CA 95899-7413

COPS-19 APPROVED EDER REPORT – Data for 6/28/2011 through 7/25/2011

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

Dear Ms. Homman:

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 regarding this report, please contact Haiyong Li at (916) 364-6656.

Sincerely,

Benjamin R. Coss
Vice President
California Health Care Options

CC: Report File
Admin File
DHCS HCO (1 copy)

COPS-19 – Approved EDER Report

Data for 6/28/2011 through 7/25/2011

EDER Reason Code			E01B	E01P	E02B	E02P	E03B	E04P	E05S	E06B	E06S	E07B	
Plan Type, County Name, Plan of Last Transaction													
Dental	LOS ANGELES	Access Dental Plan			0							75	
		American Health Guard										7	
		Care 1st Health Plan										3	
		Community Dental Svc, Inc.										4	
		Health Net			0			2				15	
		Liberty Dental Plan of CA										1	
		SafeGuard Dental, Inc.										3	
		Western Dental Services			0						0	4	
	SACRAMENTO	Access Dental Plan										3	
		HealthNet of California			0							1	
		Liberty Dental Plan of CA										1	
		Western Dental Services										5	
	Total					0			2		0	122	
Medical	ALAMEDA	Alameda Alliance For Health			0							6	
		Anthem Blue Cross Partnrshp			1				2			4	
	CONTRA COSTA	Contra Costa Health Plan										1	
	FRESNO	Anthem Blue Cross Partnrshp											21
		CalViva Health			0	1							45
	KERN	Health Net Comm Solutions											

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
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Data for 6/28/2011 through 7/25/2011

EDER Reason Code			E07D	E07P	E09P	E11B	E12B	E12P	E13B	E13P	F10	X03	X04	
Plan Type, County Name, Plan of Last Transaction														
Dental	LOS ANGELES	Access Dental Plan					0	17						
		American Health Guard			1			3						
		Care 1st Health Plan					0	1						
		Community Dental Svc, Inc.						1						
		Health Net			1		0	29						
		Liberty Dental Plan of CA					0							
		SafeGuard Dental, Inc.			4			3						
	Western Dental Services					0	20							
	SACRAMENTO	Access Dental Plan					0	2						
		HealthNet of California						5						
		Liberty Dental Plan of CA					0	2						
		Western Dental Services			1		0	20						
	Total					7	0	103						
Medical	ALAMEDA	Alameda Alliance For Health		1	7	0	0	25					0	
		Anthem Blue Cross Partnrshp			1	0	0						2	
	CONTRA COSTA	Contra Costa Health Plan			5		0	30						
	FRESNO	Anthem Blue Cross Partnrshp			2	0	0							
		CalViva Health			2	0	0	54						
	KERN	Health Net Comm Solutions				0	0	16		1			2	

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- F06 = Moving Out Of County
- F09 = Other Reason
- F10 = No Reason Checked
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- X01 = Waiver Programs exemption
- X02 = Dental Exemption
- X03 = Indian Health Coverage
- X04 = Medical Exemption
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Plan Type, County Name, Plan of Last Transaction			
Dental	LOS ANGELES	Access Dental Plan	92
		American Health Guard	11
		Care 1st Health Plan	4
		Community Dental Svc, Inc.	5
		Health Net	47
		Liberty Dental Plan of CA	1
		SafeGuard Dental, Inc.	10
		Western Dental Services	24
	SACRAMENTO	Access Dental Plan	5
		HealthNet of California	6
		Liberty Dental Plan of CA	3
		Western Dental Services	26
	Total		
Medical	ALAMEDA	Alameda Alliance For Health	39
		Anthem Blue Cross Partnrshp	10
	CONTRA COSTA	Contra Costa Health Plan	36
	FRESNO	Anthem Blue Cross Partnrshp	23
		CalViva Health	102
	KERN	Health Net Comm Solutions	19

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Plan Type, County Name, Plan of Last Transaction													
Medical	KERN	Kern Family Health Care			1						3		
		KINGS	Anthem Blue Cross Partnrsbp										
		CalViva Health											
	LOS ANGELES	Health Net Comm Solutions	4		1		0	3			0	159	
		L.A. Care Health Plan			3						0	346	
	MADERA	Anthem Blue Cross Partnrsbp											
		CalViva Health			0			1					
	RIVERSIDE	Inland Empire Health Plan		1	0							28	
		Molina Healthcare Partner			0							10	
	SACRAMENTO	Anthem Blue Cross Partnrsbp			0							5	
		Health Net Comm Solutions			0							2	0
		KP Cal, LLC										1	
		Molina Healthcare Partner			0							1	
	SAN BERNARDINO	Inland Empire Health Plan			0						0	13	
		Molina Healthcare Partner			0							3	
	SAN DIEGO	Care1st Partner Plan, LLC			0							9	0
		Community Hlth Grp Partner			1							14	
		Health Net Comm Solutions										18	
		KP Cal, LLC										3	
		Molina Healthcare Partner		1	0							22	

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Plan Type, County Name, Plan of Last Transaction														
Medical	KERN	Kern Family Health Care				0	0	40						
		KINGS	Anthem Blue Cross PartnrsHP			1		0						
		CalViva Health					0	5						
	LOS ANGELES	Health Net Comm Solutions	1	1	16	0	0	166	19	4			2	
		L.A. Care Health Plan		2	19	0	1	29	40				19	
	MADERA	Anthem Blue Cross PartnrsHP					0							
		CalViva Health			3		0	4						
	RIVERSIDE	Inland Empire Health Plan			1	7	0	1	26					1
		Molina Healthcare Partner	1		2	0	0	21	1					
	SACRAMENTO	Anthem Blue Cross PartnrsHP			2	0	0		2					2
		Health Net Comm Solutions		1	1	0	0	23						0
		KP Cal, LLC												
		Molina Healthcare Partner			1	0	0	7	1					
	SAN BERNARDINO	Inland Empire Health Plan			2	4	0	0	27	3				1
		Molina Healthcare Partner			1	0	0	17						2
	SAN DIEGO	Care1st Partner Plan, LLC						0	11	2				1
		Community Hlth Grp Partner			6	0	0	15	2		0	2		1
		Health Net Comm Solutions						0	36	1	1			2
		KP Cal, LLC		1				0						0
		Molina Healthcare Partner			1	0	0	3						1

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Plan Type, County Name, Plan of Last Transaction			
Medical	KERN	Kern Family Health Care	44
		KINGS	1
	LOS ANGELES	Health Net Comm Solutions	376
		L.A. Care Health Plan	459
	MADERA	Antem Blue Cross PartnrsHP	0
		CalViva Health	8
	RIVERSIDE	Inland Empire Health Plan	65
		Molina Healthcare Partner	35
	SACRAMENTO	Antem Blue Cross PartnrsHP	11
		Health Net Comm Solutions	27
		KP Cal, LLC	1
		Molina Healthcare Partner	10
	SAN BERNARDINO	Inland Empire Health Plan	50
		Molina Healthcare Partner	23
	SAN DIEGO	Care1st Partner Plan, LLC	23
		Community Hlth Grp Partner	41
		Health Net Comm Solutions	58
		KP Cal, LLC	4
		Molina Healthcare Partner	28

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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	
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E07 = Problem Using the HCP	F03 = Doctor Did Not Meet Beneficiary Needs	X03 = Indian Health Coverage	
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Plan Type, County Name, Plan of Last Transaction													
Medical	SAN FRANCISCO	Anthem Blue Cross Partnrshp											
		San Francisco Health Plan									3		
	SAN JOAQUIN	Anthem Blue Cross Partnrshp			1				4		1		
		Health Plan of San Joaquin			0				2				
	SANTA CLARA	Anthem Blue Cross Partnrshp											
		Santa Clara Family H.P.											
	STANISLAUS	Anthem Blue Cross Partnrshp										11	
		Health Net Comm Solutions										1	
	TULARE	Anthem Blue Cross Partnrshp										7	
		Health Net Comm Solutions										1	
	Total			5	1	8	1	0	4	8	0	738	0
	Total			5	1	8	1	0	6	8	0	860	0

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Plan Type, County Name, Plan of Last Transaction														
Medical	SAN FRANCISCO	Anthem Blue Cross Partnrshp					0	1						
		San Francisco Health Plan			1		0	5					0	
	SAN JOAQUIN	Anthem Blue Cross Partnrshp					0							
		Health Plan of San Joaquin			9		1	7					1	
	SANTA CLARA	Anthem Blue Cross Partnrshp					0							
		Santa Clara Family H.P.			2	0	0	40						
	STANISLAUS	Anthem Blue Cross Partnrshp				0	0						2	
		Health Net Comm Solutions				0	0	13						
	TULARE	Anthem Blue Cross Partnrshp					0							
		Health Net Comm Solutions					0	31						
	Total			2	9	93	0	3	652	71	6	0	2	39
	Total			2	9	100	0	3	755	71	6	0	2	39

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EDER Reason Code			Total
Plan Type, County Name, Plan of Last Transaction			
Medical	SAN FRANCISCO	Anthem Blue Cross Partnrshp	1
		San Francisco Health Plan	9
	SAN JOAQUIN	Anthem Blue Cross Partnrshp	6
		Health Plan of San Joaquin	20
	SANTA CLARA	Anthem Blue Cross Partnrshp	0
		Santa Clara Family H.P.	42
	STANISLAUS	Anthem Blue Cross Partnrshp	13
		Health Net Comm Solutions	14
	TULARE	Anthem Blue Cross Partnrshp	7
		Health Net Comm Solutions	32
	Total		1,642
	Total		1,876

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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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