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August 8, 2013

DHCS HCO 13-15760

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

COPS-20 EXCEPTION TO PLAN ENROLLMENT SUMMARY REPORT – Data for 6/27/2013 through 7/25/2013

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

Dear Ms. Tatar:

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,

Benjamin R. Coss
Vice President
California Health Care Options

CC: Report File
Admin File

COPS-20 – Exception to Plan Enrollment Summary Report

Data for 6/27/2013 through 7/25/2013

Exception Reason		1	A	B	C	D	E	F	G	H	I	M	P	R	S	T	Z	Total	
Plan Type	County Name																		
Dental	CONTRA COSTA															1		1	
	EL DORADO															1		1	
	FRESNO															2		2	
	KERN															4		4	
	LOS ANGELES													62	11	23		96	
	OUT OF STATE															2		2	
	RIVERSIDE															1		1	
	SACRAMENTO											5			17	6	29	1	58
	SAN BERNARDINO														1	1	1		3
	SAN DIEGO																1		1
	TEHAMA																2		2
	TULARE																1		1
	Total											5			80	18	68	1	172
Medical	ALAMEDA		1				1	3		4	1	2	1	10	18	22		63	
	CONTRA COSTA				1		3	1		3				4	11	32		55	
	EL DORADO															1		1	
	FRESNO						1			1				73	13	20		108	
	IMPERIAL															1		1	
	KERN						2	1					1	1	3	15	92	115	
	KINGS				1											3	4	8	

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

California Health Care Options

Data for 6/27/2013 through 7/25/2013

Exception Reason		1	A	B	C	D	E	F	G	H	I	M	P	R	S	T	Z	Total
Plan Type	County Name																	
Medical	LOS ANGELES		26	5	66	14	48	6	9	96		66	80	304	166	233		1,119
	MADERA										4				1	4		9
	OUT OF STATE															7		7
	RIVERSIDE				2	1	3	1	1	5	2	4	2	45	25	54		145
	SACRAMENTO		4	1			4		1	6	11	16	10	2	26	54		135
	SAN BENITO															3		3
	SAN BERNARDINO	1	2		4		8	3	1	6		9	19	9	13	87		162
	SAN DIEGO		1	2	8		6	2		11	11	10		64	72	49		236
	SAN FRANCISCO		1		1		1	1		1	1	1			27	12		46
	SAN JOAQUIN						4			1		2	1	15	13	21		57
	SANTA CLARA				1		1			3		6			13	65		89
	STANISLAUS								1		2			3	7	26		39
	SUTTER															1		1
	TEHAMA															2		2
	TULARE				1		1				4	1	1	4	6	15		33
Total		1	35	8	85	15	83	19	12	139	34	118	115	536	429	805		2,434
Total		1	35	8	85	15	83	19	12	139	39	118	115	616	447	873	1	2,606

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