



October 8, 2013

DHCS HCO 13-16279

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-17 DISENROLLMENT SUMMARY REPORT – Data for 8/28/2013 through 9/25/2013

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

Dear Ms. Tatar:

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 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-17 – Disenrollment Summary Report

Data for 8/28/2013 through 9/25/2013

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

Transaction Type			Disenrollment												
Disenrollment Reason Code			E12B	F01	F02	F03	F04	F05	F06	F09	F10	I01	X03	X04	
Plan Type	County Name	Plan Name													
Dental	LOS ANGELES	Access Dental Plan		262	151	37	66	273	4	333	739				
		Health Net		188	91	33	45	163	5	202	602				
		Liberty Dental Plan of CA		65	30	16	13	41		83	195				
		County Subtotal		515	272	86	124	477	9	618	1,536				
	SACRAMENTO	Access Dental Plan		37	23	16	13	5		42	382		2		
		HealthNet of California		17	12	4	7	10		30	265		8		
		Liberty Dental Plan of CA		11	32	7	15	6	2	42	492		6		
		County Subtotal		65	67	27	35	21	2	114	1,139		16		
	Total				580	339	113	159	498	11	732	2,675		16	
	Medical	ALAMEDA	Alameda Alliance For Health		16	5	6	4	4	14	37	246	3		2
Anthem Blue Cross Partnrshp				36	13	4	4	8	8	31	199	2		1	
County Subtotal				52	18	10	8	12	22	68	445	5		3	
CONTRA COSTA		Anthem Blue Cross Partnrshp		22	14	2	7		5	29	115	2			
		Contra Costa Health Plan		9	11	2	1	2	8	25	176	4		1	
		County Subtotal		31	25	4	8	2	13	54	291	6		1	
FRESNO		Anthem Blue Cross Partnrshp		46	91	9	4	16	3	92	242	7			
		CalViva Health		15	29	6	3	3	13	28	181	6		1	

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=
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Initiation Codes:

F06 = Moving Out Of County=
 F09 = Other Reason=
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 I01 = IS-Generated Disenrollment=
 X01 = Waiver Programs exemption=
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COPS-17 – Disenrollment Summary Report

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Transaction Type			Disenrollment	Total	
Disenrollment Reason Code			X05		
Plan Type	County Name	Plan Name			
Dental	LOS ANGELES	Access Dental Plan		1,865	
		Health Net	1	1,330	
		Liberty Dental Plan of CA		443	
		County Subtotal	1	3,638	
	SACRAMENTO	Access Dental Plan		520	
		HealthNet of California	3	356	
		Liberty Dental Plan of CA	1	614	
		County Subtotal	4	1,490	
	Total			5	5,128
	Medical	ALAMEDA	Alameda Alliance For Health	1	338
Anthem Blue Cross Partnrshp				306	
County Subtotal			1	644	
CONTRA COSTA		Anthem Blue Cross Partnrshp		196	
		Contra Costa Health Plan		239	
		County Subtotal		435	
FRESNO		Anthem Blue Cross Partnrshp		510	
		CalViva Health		285	

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California Health Care Options

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Disenrollment Reason Code			E12B	F01	F02	F03	F04	F05	F06	F09	F10	I01	X03	X04	
Plan Type	County Name	Plan Name													
Medical	FRESNO	County Subtotal		61	120	15	7	19	16	120	423	13		1	
		KERN	Health Net Comm Solutions		53	33	16	16	16	1	33	312	2		2
			Kern Family Health Care		17	20	2	3	4	3	25	207	13		2
			County Subtotal		70	53	18	19	20	4	58	519	15		4
	KINGS	Anthem Blue Cross Partnrshp		5	7		6			1	34	50			1
		CalViva Health		1	1				1	3	7	50			
		County Subtotal		6	8		6	1	4	41	100				1
	LOS ANGELES	Health Net Comm Solutions			403	240	97	77	66	44	642	1,850	112		19
		L.A. Care Health Plan			206	176	70	53	41	85	520	1,938	117		40
		County Subtotal			609	416	167	130	107	129	1,162	3,788	229		59
	MADERA	Anthem Blue Cross Partnrshp			4	4	4		4	1	11	71			
		CalViva Health			1	3			2	2	5	70			1
		County Subtotal			5	7	4		6	3	16	141			1
	RIVERSIDE	Inland Empire Health Plan			16	8	7	7	7	35	54	455	24		4
		Molina Healthcare Partner			54	93	13	8	28	3	97	384	4	1	
		County Subtotal			70	101	20	15	35	38	151	839	28	1	4
	SACRAMENTO	Anthem Blue Cross Partnrshp			53	45	16	7	7	11	81	332	10	6	3
		Health Net Comm Solutions			54	45	29	10	19	5	66	413	7	11	7

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Disenrollment Reason Code			X05	
Plan Type	County Name	Plan Name		
Medical	FRESNO	County Subtotal		795
	KERN	Health Net Comm Solutions		484
		Kern Family Health Care		296
		County Subtotal		780
	KINGS	Anthem Blue Cross Partnrshp		104
		CalViva Health		63
		County Subtotal		167
	LOS ANGELES	Health Net Comm Solutions	9	3,559
		L.A. Care Health Plan	11	3,257
		County Subtotal	20	6,816
	MADERA	Anthem Blue Cross Partnrshp		99
		CalViva Health		84
		County Subtotal		183
	RIVERSIDE	Inland Empire Health Plan	1	618
		Molina Healthcare Partner		685
		County Subtotal	1	1,303
	SACRAMENTO	Anthem Blue Cross Partnrshp		571
		Health Net Comm Solutions		666

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Plan Type	County Name	Plan Name												
Medical	SACRAMENTO	KP Cal, LLC			2	2			1	1	22	1		
		Molina Healthcare Partner		22	51	12	4	13		36	264	12	4	1
		County Subtotal		129	143	59	21	39	17	184	1,031	30	21	11
	SAN BERNARDINO	Inland Empire Health Plan		19	18	12	19	13	48	65	512	23		12
		Molina Healthcare Partner		57	103	17	13	53	11	113	373	9		1
		County Subtotal		76	121	29	32	66	59	178	885	32		13
	SAN DIEGO	Care1st Partner Plan, LLC		151	126	12	4	29	5	516	319	5	4	
		Community Hlth Grp Partner		53	46	6	3	20	18	103	225	27	6	1
		Health Net Comm Solutions		92	76	9	19	33	6	171	249	5	3	2
		KP Cal, LLC		3	4		1		1	12	22	1		
		Molina Healthcare Partner		27	70	23	2	13	6	54	259	9	12	2
		County Subtotal		326	322	50	29	95	36	856	1,074	47	25	5
	SAN FRANCISCO	Anthem Blue Cross Partnrshp		5	8				4	5	9	71	1	
		San Francisco Health Plan		8	11	1	5	2	20	11	84	9		
		County Subtotal		13	19	1	5	6	25	20	155	10		
	SAN JOAQUIN	Health Net Comm Solutions		18	15	12	1	12		37	111			
		Health Plan of San Joaquin		7	6	2		6	16	12	212			1
		County Subtotal		25	21	14	1	18	16	49	323			1

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Disenrollment Reason Code			X05	
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Medical	SACRAMENTO	KP Cal, LLC		29
		Molina Healthcare Partner		419
		County Subtotal		1,685
	SAN BERNARDINO	Inland Empire Health Plan	1	742
		Molina Healthcare Partner		750
		County Subtotal	1	1,492
	SAN DIEGO	Care1st Partner Plan, LLC		1,171
		Community Hlth Grp Partner	1	509
		Health Net Comm Solutions		665
		KP Cal, LLC		44
		Molina Healthcare Partner	1	478
		County Subtotal	2	2,867
	SAN FRANCISCO	Anthem Blue Cross Partnrshp	1	104
		San Francisco Health Plan	1	152
		County Subtotal	2	256
	SAN JOAQUIN	Health Net Comm Solutions		206
		Health Plan of San Joaquin		262
		County Subtotal		468

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Plan Type	County Name	Plan Name													
Medical	SANTA CLARA	Anthem Blue Cross Partnrshp		17	23	6	5	16	9	43	197	1			
		Santa Clara Family H.P.		13	16		3	4	10	17	163	23	1	3	
		County Subtotal		30	39	6	8	20	19	60	360	24	1	3	
	STANISLAUS	Health Net Comm Solutions		34	21	5	3		12	57	211	2			
		Health Plan of San Joaquin		9	12	1	2	6	8	18	139	8			
		County Subtotal		43	33	6	5	6	20	75	350	10			
	TULARE	Anthem Blue Cross Partnrshp			14	20	5		1	1	43	157		1	
		Health Net Comm Solutions	1	7	3	1		4	3	46	130		1	1	
		County Subtotal	1	21	23	6		5	4	89	287		2	1	
	Total			1	1,567	1,469	409	294	457	425	3,181	11,011	449	50	108
	Total			1	2,147	1,808	522	453	955	436	3,913	13,686	449	66	108

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Transaction Type			Disenrollment	Total	
Disenrollment Reason Code			X05		
Plan Type	County Name	Plan Name			
Medical	SANTA CLARA	Anthem Blue Cross Partnrsbp	1	318	
		Santa Clara Family H.P.	1	254	
		County Subtotal	2	572	
	STANISLAUS	Health Net Comm Solutions		345	
		Health Plan of San Joaquin		203	
		County Subtotal		548	
	TULARE	Anthem Blue Cross Partnrsbp		242	
		Health Net Comm Solutions		197	
		County Subtotal		439	
	Total			29	19,450
	Total			34	24,578

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Transaction Type		Disenrollment												Total	
Disenrollment Reason Code		E12B	F01	F02	F03	F04	F05	F06	F09	F10	I01	X03	X04	X05	
Plan Type	Language														
Dental	Arabic		2						2	9					13
	Armenian		7			3	2		10	7					29
	Cambodian		1							1					2
	Chinese		13	6	1	7	8		17	128				1	181
	English		309	212	78	74	145	4	359	1,608		16		3	2,808
	Farsi		4		2				4	16					26
	Hmong			1						25					26
	Korean		12	21		3	1		4	14					55
	No Valid Data		1	6				1	2	6					16
	Russian		1	5				2	3	23					34
	Spanish		222	82	32	68	337	5	322	800					1,869
	Tagalog						2			3					5
	Vietnamese		8	6		4		2	9	35					64
Total			580	339	113	159	498	11	732	2,675		16		5	5,128
Medical	Arabic		9	13		1			47	52	1				123
	Armenian		38	15	6	1	2		80	50	1		6		199

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Plan Type	Language														
Medical	Cambodian			3		1			17	31	13				65
	Chinese		28	19	5	12	8	11	64	156	32		1		336
	English		996	1,025	313	193	333	330	1,801	7,656	199	49	75	22	12,992
	Farsi		19	6	3	1			11	32				1	73
	Hmong		5	18			2		18	46			1		90
	Korean		8	16		1	6		19	16	14		1		81
	No Response, Client declined to state		1	1			1		2	4					9
	No Valid Data		28	24	12	1	5		57	97	26		1		251
	Russian		11	18	2		2	1	24	61					119
	Spanish	1	378	285	63	79	93	76	1,004	2,638	140	1	21	4	4,783
	Tagalog		20	7	1	4	1	2	15	23	8		1	1	83
	Vietnamese		26	19	4		4	5	22	149	15		1	1	246
Total		1	1,567	1,469	409	294	457	425	3,181	11,011	449	50	108	29	19,450
Total		1	2,147	1,808	522	453	955	436	3,913	13,686	449	66	108	34	24,578

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 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=