



September 10, 2013

DHCS HCO 13-16045

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-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT – Data for Month
Starting 9/1/2013**

Reference: Health Care Options Contract #07-65829 - 6.3.B

Dear Ms. Tatar:

The purpose of the HCO Monthly Plan Enrollment Status Report is to detail plan enrollment numbers and enrollment ceiling values for plans throughout the State. Additional history is provided regarding HCO Program default (auto-assignment) percentages and enrollment volume.

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-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

HCO MONTHLY PLAN ENROLLMENT STATUS REPORT 2-PLAN COUNTIES

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
ALAMEDA	300	L	Alameda Alliance For Health	149,234	148,819	415	0.28 %
ALAMEDA	340	C	Anthem Blue Cross Partnrshp	34,194	34,168	26	0.08 %
CONTRA COSTA	301	L	Contra Costa Health Plan	91,494	90,400	1,094	1.21 %
CONTRA COSTA	344	C	Anthem Blue Cross Partnrshp	14,846	14,743	103	0.70 %
FRESNO	315	L	CalViva Health	177,930	176,778	1,152	0.65 %
FRESNO	362	C	Anthem Blue Cross Partnrshp	71,044	71,365	-321	-0.45 %
KERN	303	L	Kern Family Health Care	131,388	130,912	476	0.36 %
KERN	360	C	Health Net Comm Solutions	52,892	52,706	186	0.35 %
KINGS	316	L	CalViva Health	15,076	15,066	10	0.07 %
KINGS	363	C	Anthem Blue Cross Partnrshp	13,633	13,734	-101	-0.74 %
LOS ANGELES	304	L	L.A. Care Health Plan	1,150,158	1,144,981	5,177	0.45 %
LOS ANGELES	352	C	Health Net Comm Solutions	571,032	566,510	4,522	0.80 %
MADERA	317	L	CalViva Health	21,785	21,707	78	0.36 %
MADERA	364	C	Anthem Blue Cross Partnrshp	13,159	13,173	-14	-0.11 %
RIVERSIDE	305	L	Inland Empire Health Plan	304,676	302,818	1,858	0.61 %
RIVERSIDE	355	C	Molina Healthcare Partner	50,105	50,136	-31	-0.06 %
SAN BERNARDINO	306	L	Inland Empire Health Plan	330,846	328,656	2,190	0.67 %
SAN BERNARDINO	356	C	Molina Healthcare Partner	62,483	62,658	-175	-0.28 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

HCO MONTHLY PLAN ENROLLMENT STATUS REPORT 2-PLAN COUNTIES

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
SAN FRANCISCO	307	L	San Francisco Health Plan	67,616	67,441	175	0.26 %
SAN FRANCISCO	343	C	Anthem Blue Cross Partnrshp	14,763	14,829	-66	-0.45 %
SAN JOAQUIN	308	L	Health Plan of San Joaquin	140,972	140,177	795	0.57 %
SAN JOAQUIN	354	C	Health Net Comm Solutions	8,699	8,706	-7	-0.08 %
SANTA CLARA	309	L	Santa Clara Family H.P.	148,241	148,243	-2	0.00 %
SANTA CLARA	345	C	Anthem Blue Cross Partnrshp	40,892	40,758	134	0.33 %
STANISLAUS	312	C	Health Plan of San Joaquin	45,285	43,938	1,347	3.07 %
STANISLAUS	361	C	Health Net Comm Solutions	51,042	51,264	-222	-0.43 %
TULARE	311	L	Anthem Blue Cross Partnrshp	75,390	75,343	47	0.06 %
TULARE	353	C	Health Net Comm Solutions	60,513	59,964	549	0.92 %
Total				3,909,388	3,889,993	19,395	0.50 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

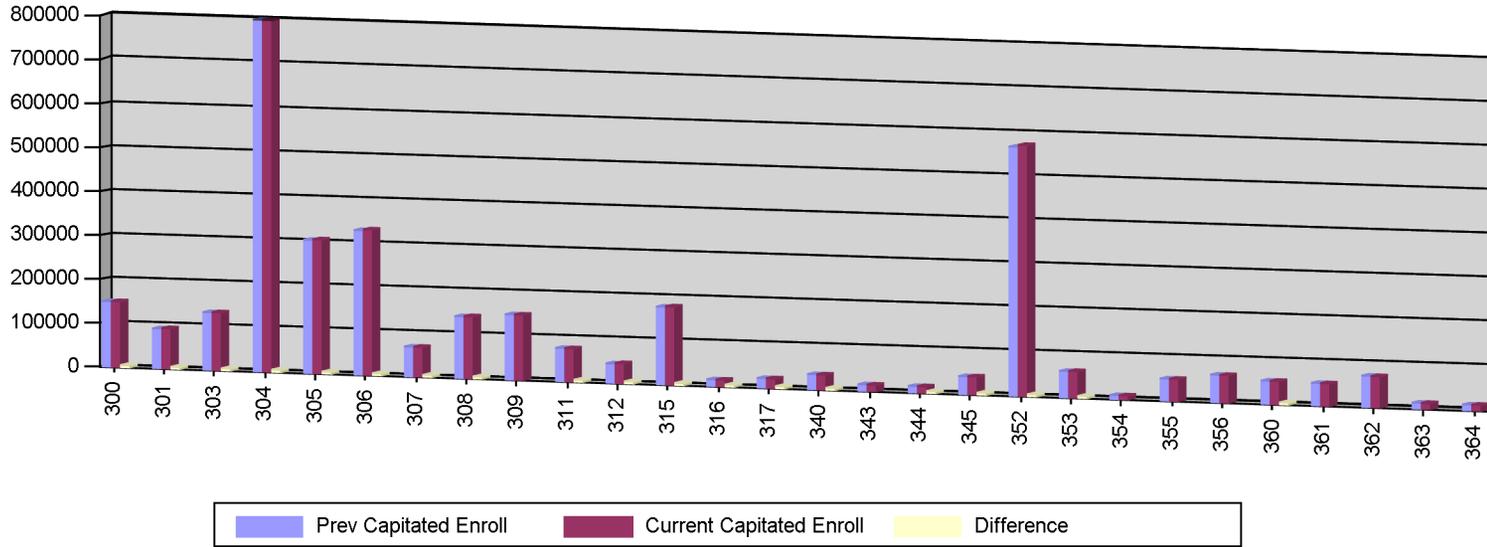
Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

2 Plan Enrollment Chart



Plan No.	300	301	303	304	305	306	307	308	309	311	312	315	316	317	340	343	344	345	352	353	354	355	356	360	361	362	363	364
Difference	415	1,094	476	5,177	1,858	2,190	175	795	-2	47	1,347	1,152	10	78	26	-66	103	134	4,522	549	-7	-31	-175	186	-222	-321	-101	-14
Current	149,234	91,494	131,388	1,150,158	304,676	330,846	67,616	140,972	148,241	75,390	45,285	177,930	15,076	21,785	34,194	14,763	14,846	40,892	571,032	60,513	8,699	50,105	62,483	52,892	51,042	71,044	13,633	13,159
Previous	148,819	90,400	130,912	1,144,981	302,818	328,656	67,441	140,177	148,243	75,343	43,938	176,778	15,066	21,707	34,168	14,829	14,743	40,758	566,510	59,964	8,706	50,136	62,658	52,706	51,264	71,365	13,734	13,173

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

GMC COUNTIES SAN DIEGO GMC MEDICAL HEALTH PLAN TOTAL CAPITATED ENROLLMENT

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
SAN DIEGO	029	M	Community Hlth Grp Partner	149,526	149,556	-30	-0.02 %
SAN DIEGO	068	M	Health Net Comm Solutions	45,232	44,992	240	0.53 %
SAN DIEGO	079	M	KP Cal, LLC	26,390	26,631	-241	-0.90 %
SAN DIEGO	131	M	Molina Healthcare Partner	94,206	93,730	476	0.51 %
SAN DIEGO	167	M	Care1st Partner Plan, LLC	32,758	32,823	-65	-0.20 %
Total				348,112	347,732	380	0.11 %

SACRAMENTO GMC MEDICAL HEALTH PLAN TOTAL CAPITATED ENROLLMENT

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
SACRAMENTO	130	M	Molina Healthcare Partner	37,995	38,076	-81	-0.21 %
SACRAMENTO	150	M	Health Net Comm Solutions	82,868	82,885	-17	-0.02 %
SACRAMENTO	170	M	KP Cal, LLC	41,882	41,661	221	0.53 %
SACRAMENTO	190	M	Anthem Blue Cross Partnrshp	99,126	99,232	-106	-0.11 %
Total				261,871	261,854	17	0.01 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

DENTAL MANAGED CARE PLANS (VOLUNTARY)

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
LOS ANGELES	405	D	Health Net	192,764	193,346	-582	-0.30 %
LOS ANGELES	409	D	Access Dental Plan	167,088	163,183	3,905	2.39 %
LOS ANGELES	416	D	Liberty Dental Plan of CA	50,345	50,431	-86	-0.17 %
Total				410,197	406,960	3,237	0.80 %

SACRAMENTO GMC DENTAL PLANS TOTAL CAPITATED ENROLLMENT

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
SACRAMENTO	421	D	Access Dental Plan	79,497	79,111	386	0.49 %
SACRAMENTO	425	D	Liberty Dental Plan of CA	100,337	101,150	-813	-0.80 %
SACRAMENTO	427	D	HealthNet of California	66,668	66,167	501	0.76 %
Total				246,502	246,428	74	0.03 %

MANAGED CARE PLAN MAXIMUM ENROLLMENT REPORT VOLUNTARY COUNTIES

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
Total						0	0.00 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

MANAGED CARE PLAN MAXIMUM ENROLLMENT REPORT SPECIAL PROJECTS

County	Plan No.	Plan Type	Plan Name	Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
ALAMEDA	051	M	CENTER FOR ELDERS INDEPENDEN	492	496	-4	-0.81 %
ALAMEDA	056	M	ON LOK LIFEWAYS (ALAMEDA)	141	137	4	2.92 %
ALAMEDA	703	M	Alameda Case Mgmt Org	1,358	1,351	7	0.52 %
CONTRA COSTA	054	M	CENTER FOR ELDERS INDEPENDEN	46	43	3	6.98 %
LOS ANGELES	052	M	ALTA MED SENIOR BUENACARE	1,429	1,396	33	2.36 %
LOS ANGELES	200	M	SCAN HEALTH PLAN (LOS ANGEL	3,434	3,463	-29	-0.84 %
LOS ANGELES	201	M	SCAN HEALTH PLAN (LOS ANGEL	1,618	1,611	7	0.43 %
LOS ANGELES	915	M	POSITIVE HEALTHCARE	834	838	-4	-0.48 %
RIVERSIDE	204	M	SCAN HEALTH PLAN (RIVE	1,086	1,075	11	1.02 %
RIVERSIDE	205	M	SCAN HEALTH PLAN (RIVE	527	529	-2	-0.38 %
SACRAMENTO	050	M	SUTTER SENIOR CARE	217	213	4	1.88 %
SAN BERNARDINO	206	M	SCAN HEALTH PLAN (SAN	740	715	25	3.50 %
SAN BERNARDINO	207	M	SCAN HEALTH PLAN (SAN	298	303	-5	-1.65 %
SAN FRANCISCO	055	M	ON LOK LIFEWAYS (SAN FRANC	887	883	4	0.45 %
SAN FRANCISCO	601	M	Family Mosaic Project	90	90	0	0.00 %
Total				13,197	13,143	54	0.41 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

MANAGED CARE PLAN MAXIMUM ENROLLMENT PLAN SUMMARY

				Current Monthly Capitated Enroll Total	Previous Monthly Capitated Enroll Total	Difference	%
Grand Total				5,176,070	5,152,967	23,103	0.45 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

ENROLLMENT DEFAULT PERCENTAGES

Month County	Oct 12	Nov 12	Dec 12	Jan 13	Feb 13	Mar 13	Apr 13	May 13	Jun 13	Jul 13	Aug 13	Sep 13
ALAMEDA	35 %	34 %	36 %	37 %	39 %	30 %	30 %	29 %	45 %	34 %	38 %	36 %
CONTRA COSTA	29 %	26 %	34 %	34 %	32 %	28 %	25 %	24 %	41 %	29 %	30 %	30 %
FRESNO	29 %	32 %	38 %	37 %	39 %	33 %	33 %	32 %	45 %	34 %	36 %	35 %
KERN	36 %	33 %	37 %	38 %	39 %	31 %	32 %	32 %	44 %	41 %	31 %	33 %
KINGS	37 %	30 %	42 %	45 %	43 %	28 %	35 %	32 %	49 %	41 %	39 %	37 %
LOS ANGELES	36 %	30 %	34 %	37 %	36 %	29 %	38 %	36 %	34 %	35 %	32 %	32 %
MADERA	23 %	28 %	31 %	22 %	35 %	22 %	26 %	27 %	42 %	35 %	32 %	31 %
RIVERSIDE	36 %	33 %	39 %	40 %	41 %	30 %	32 %	30 %	40 %	37 %	27 %	32 %
SACRAMENTO	28 %	26 %	32 %	32 %	32 %	26 %	28 %	23 %	35 %	29 %	28 %	24 %
SAN BERNARDINO	38 %	34 %	38 %	40 %	41 %	29 %	33 %	33 %	41 %	39 %	28 %	32 %
SAN DIEGO	37 %	32 %	34 %	40 %	36 %	27 %	32 %	30 %	41 %	37 %	29 %	32 %
SAN FRANCISCO	31 %	29 %	37 %	37 %	39 %	31 %	35 %	30 %	45 %	37 %	30 %	35 %
SAN JOAQUIN	25 %	23 %	7 %	14 %	33 %	46 %	29 %	30 %	37 %	34 %	28 %	28 %
SANTA CLARA	30 %	27 %	37 %	38 %	37 %	29 %	29 %	29 %	44 %	36 %	33 %	33 %
STANISLAUS	53 %	37 %	3 %	7 %	26 %	50 %	31 %	31 %	41 %	39 %	30 %	32 %
TULARE	36 %	34 %	50 %	46 %	43 %	36 %	39 %	36 %	52 %	41 %	41 %	43 %
Monthly Default Average	35 %	31 %	33 %	32 %	37 %	31 %	34 %	32 %	39 %	36 %	31 %	32 %

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other

COPS-25 HCO MONTHLY PLAN ENROLLMENT STATUS REPORT

Data for Month Starting 9/1/2013

MANAGED CARE PLAN MAXIMUM ENROLLMENT PLAN SUMMARY

Type	Month Total Group	Oct 12	Nov 12	Dec 12	Jan 13	Feb 13	Mar 13	Apr 13	May 13	Jun 13	Jul 13	Aug 13	Sep 13
Medical	2-PLAN-Medical	3,313,396	3,241,749	3,256,397	3,417,014	3,437,109	3,494,862	3,739,841	3,813,880	3,849,787	3,862,633	3,889,993	3,909,388
	GMC-Medical	498,827	503,212	505,097	550,216	552,786	568,095	582,242	593,533	598,719	601,768	609,586	609,983
	Medical Subtotal	3,812,223	3,744,961	3,761,494	3,967,230	3,989,895	4,062,957	4,322,083	4,407,413	4,448,506	4,464,401	4,499,579	4,519,371
Dental	GMC-Dental	215,035	215,843	126,299	215,895	216,483	229,266	240,607	242,542	245,532	246,015	246,428	246,502
	VOLUNTARY-Dental	283,055	280,182	276,884	257,151	272,521	285,203	388,471	432,144	289,731	409,120	406,960	410,197
	Dental Subtotal	498,090	496,025	403,183	473,046	489,004	514,469	629,078	674,686	535,263	655,135	653,388	656,699
Grand Total		4,310,313	4,240,986	4,164,677	4,440,276	4,478,899	4,577,426	4,951,161	5,082,099	4,983,769	5,119,536	5,152,967	5,176,070

Note 1: As of June 2009, the default percentages shown in the "Enrollment Default Percentages" table do not include "Prior Care" enrollments as choices, but as defaults. This has the effect of increasing the presented default rate and is a change from reports produced in May 2009 and before.

Note 2: The COPS-08 Auto-Assignment Summary Report can be used to find a breakdown of default transactions by type (ie. Regular, Prior Care)

Note 3: Effective May 24, 2010, beneficiaries identified with a "Bad Address" will remain on the default path for enrollment into a managed care health plan. (PA #10-05 037)

Note 4: Capitated enrollment ceiling is no longer relevant to procedures used for default/enrollment of beneficiaries into health plans.

Legend - Plan Types: C = Commercial Plan, D = Dental, L = Local Initiative, M = Medical, X = Other