



# Medi-Cal Access to Care Quarterly Monitoring Report #4 2012 Quarter 3



## **BENEFICIARY PARTICIPATION**

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California Department of Health Care Services  
Research and Analytic Studies Branch  
MS 1200, P.O. Box 997413  
Sacramento, CA 95899-7413

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# Medi-Cal FFS Beneficiary Participation Trends

## Introduction

Compared to those covered by private insurance, the Medi-Cal program provides health care coverage to a fairly heterogeneous and disadvantaged population. The Medi-Cal population is comprised of individuals with unique demographic characteristics, clinical needs, and benefit packages, which are reflective of complex eligibility and administrative rules.

Historically, Medi-Cal eligibility was subject to categorical restrictions that limited enrolled coverage to the elderly, persons with disabilities, members of families with dependent children, pregnant women and children, certain women with breast or cervical cancer, and uninsured

individuals with tuberculosis. To qualify, an individual's income and resources had to meet specific thresholds. While many of Medi-Cal's initial eligibility pathways were tied to receipt of cash assistance under programs such as Aid to Families with Dependent Children, or the Supplemental Security Income (SSI) program, changes in recent years have shifted eligibility determination to an income-based approach.

The range of benefits offered by the Medi-Cal program also varies among groups. For example, some groups may gain access to Medi-Cal services only after experiencing an acute care hospital admission, in which case individuals are not eligible for Medi-Cal at the time of admission, but gain it retroactively. Other groups, such as undocumented immigrants, are only entitled to a limited scope of health care services.

Understanding the unique complexities of the Medi-Cal subpopulations is crucial for administrators to develop suitable policies and processes that will ensure appropriate access to care for all beneficiaries. Population characteristics such as age and health care needs must be carefully evaluated when considering health system capacity and service use, since each subpopulation will present different clinical needs and

thus require specific services and provider types. In addition, how the population is distributed throughout the state geographically relative to providers is also vitally important. [Figure BP-1](#) shows the most prevalent clinical conditions affecting various Medi-Cal subpopulations.

The degree of responsibility for ensuring access to care may vary depending on the subpopulation and type of coverage afforded. For example, approximately 80% of the

### Highlights

FFS participation for full scope beneficiaries declined 8.6% from 1,251,960 to 1,143,773. This is primarily the result of Departmental policies that shifted several beneficiary subgroups into managed care plans.

Largest decrease by age and gender group occurred among individuals age 65 and older.

Two largest increases in FFS participation occurred among children in Foster Care (12.7%) and Adults in the Other category (9.8%).

Spanish is primary language for 49.1% and 47.1% reported English.

Hispanics represent 62.8% of the total FFS Medi-Cal Only population.

beneficiaries participating in Medi-Cal's traditional FFS system and not eligible for Medicare are undocumented aliens who are entitled only to pregnancy-related care and emergency services. For these beneficiaries, DHCS is responsible for ensuring access to prenatal care, obstetrical, and emergency department services only. The remaining beneficiaries participating in Medi-Cal's FFS system who are not eligible for Medicare qualify for full-scope services. Roughly one-third of this population is enrolled in Family aid categories, and less than 10% is enrolled in Blind/Disabled aid categories.

The distribution of beneficiaries enrolled in FFS and managed care was approximately fifty-fifty between 2004–2007. Since 2007, managed care has become the predominant health care delivery model, accounting for 62.8% of all Medi-Cal beneficiaries as of January 1, 2012.

Between January 2011–January 2012 there was a net shift of 575,695 beneficiaries, or 7.2%, of the Medi-Cal population from FFS to the managed care delivery model. Two developments are responsible for the shift in participation between the two health care delivery models:

1. Under the terms of California's Section 1115 "Bridge to Reform" waiver, beneficiaries enrolled in "Seniors and Persons with Disabilities" (SPDs) aid categories were required to enroll in managed care programs. From May 1, 2011–January 1, 2012, the number of SPD beneficiaries participating in Medi-Cal's FFS system decreased from 394,582 to 158,771.
2. An expansion in the number of counties that transitioned from the FFS to the managed care model. Between January 2011–January 2012, Ventura, Mendocino, and Marin Counties shifted a total of 140,944 Medi-Cal beneficiaries from the FFS to the managed care model.

**Figure BP-1 Top Reasons Medi-Cal FFS Beneficiaries Seek Care, by Age and Aid Category**

<b>Aid Category</b>	<b>Adults (21+ years)</b>	<b>Aid Category</b>	<b>Children (0–21 years)</b>
<b>Aged (65+ years)</b>	Essential hypertension Diabetes mellitus with and without complication Disorders of lipid metabolism Lower respiratory diseases Chest pain Deficiency and other Anemia Cardiac Dysrhythmias	<b>Blind/Disabled</b>	Rehabilitative care; fitting of prostheses Developmental disorders Paralysis Upper respiratory infections Other congenital anomalies Nutrition, endocrine, and other metabolic disorders Epilepsy
<b>Blind/Disabled</b>	Essential hypertension Spondylosis; intervertebral disc disorders; other back problems Diabetes mellitus without complications Lower respiratory diseases Non traumatic joint disease Abdominal pain	<b>Foster Care</b>	Upper respiratory infections Blindness and vision defects Attention-deficit conduct and disruptive behavior Medical exams and evaluations Asthma Developmental disorders
<b>Families</b>	Pregnancy-related conditions Medical exams, evaluations, and screening for suspected conditions Abdominal pain Spondylosis; intervertebral disc disorders; other back problems Contraceptive and procreative management Upper respiratory diseases	<b>Families</b>	Upper and lower respiratory infections Otitis media and related conditions Acute bronchitis Blindness and vision defects Liveborn infant care Disorders of the teeth and jaw
<b>Other</b>	Pregnancy-related conditions Medical exams, evaluations, and screening for suspected conditions Breast cancer Contraception and procreative management Diabetes Essential hypertension	<b>Other</b>	Upper and lower respiratory infections Liveborn infant care Hemolytic and perinatal jaundice Other perinatal conditions Otitis media and related conditions Normal pregnancy and delivery Nutritional, endocrine, and metabolic disorders
<b>Undocumented</b>	Pregnancy-related conditions Medical exams, evaluations and screening for suspected conditions Abdominal pain Injuries and conditions due to external causes Contraceptive and procreative management Chest Pain	<b>Undocumented</b>	Liveborn infant care Normal pregnancy and delivery Hemolytic and perinatal jaundice Other perinatal conditions Complications of pregnancy and birth Abdominal pain

## Methods

The access monitoring activities that DHCS has undertaken and described here are directed at beneficiaries participating in Medi-Cal's FFS delivery system only and exclude beneficiaries eligible for both Medicare and Medi-Cal. In addition, only those beneficiaries who become "certified" by meeting their monthly share of cost are included in the analysis.

Beneficiary participation summaries were derived from the Medi-Cal Eligibility System Monthly Extract File (MMEF). This data source provides information, on a monthly basis, regarding a beneficiaries' length of participation, aid category under which they are eligible for services, and demographic data, including age, gender, race/ethnicity, and primary language spoken. In addition, the MMEF file contains geographic variables, which allow examination of the data by county, metropolitan designation, or Medical Service Study Area (MSSA).

In this report, Medi-Cal participation in the FFS health care delivery system was measured as 'Member Months,' representing the number of months a beneficiary has been in the Medi-Cal FFS delivery system during the reporting period. Average quarterly member months were calculated for all Medi-Cal beneficiaries included in the selection criteria. To reveal potential differences in participation based on specific health care needs, beneficiaries participating in Medi-Cal's FFS system and not eligible for Medicare were grouped into homogeneous subpopulations based on one of six eligibility categories: Blind/Disabled, Families, Aged, Foster Care, Undocumented, and Other. See [Appendix B](#) for more detailed information on aid categories and codes.

Additional criteria include whether beneficiaries receive full or restricted scope of Medi-Cal services, and their age group (0–17, 18–65, 65+ years old). Statistics reflecting the gender, race/ethnicity, and primary language spoken among beneficiaries are also presented since these factors have been known to influence health service use. Furthermore, geographic variations in Medi-Cal enrollees were explored stratifying beneficiaries by county and metropolitan designation.<sup>1</sup>

Change in participation in the FFS health care delivery system was evaluated by calculating the difference in the number of Medi-Cal beneficiaries (average member months) across quarters, as a percentage of total beneficiaries participating from the fourth quarter of 2011 to the third quarter of 2012. Additional comparisons were made between the current quarter being studied and the previous quarter.

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<sup>1</sup> Metropolitan designations were identified using ERS Rural-Urban Continuum Codes. The Rural-Urban Continuum Codes are calculated by examining the size of a county and its proximity to a metropolitan area. Rural-Urban Continuum Codes form a classification scheme that distinguishes metropolitan (metro) counties by the population size of their metro area, and nonmetropolitan (nonmetro) counties by degree of urbanization and adjacency to a metro area or areas.

## Results

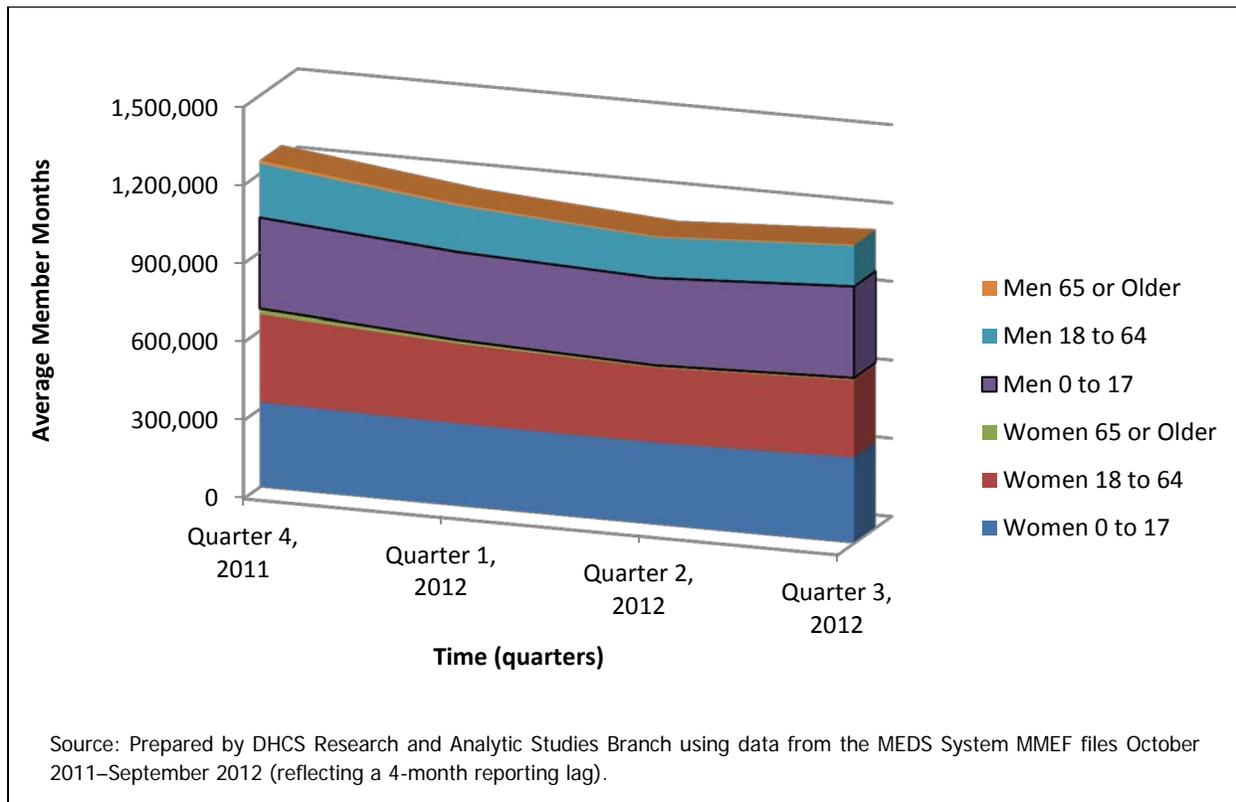
### Medi-Cal Full Scope Beneficiaries by Gender and Age

Participation in the FFS health care delivery system for Medi-Cal beneficiaries who were eligible for full scope services decreased during the 12-month period, from 1,251,960 to 1,143,775, or 8.6% (see Table BP-5). However, children's participation remained relatively unchanged from the fourth quarter of 2011 to the third quarter of 2012.

Overall FFS participation for full scope beneficiaries declined 8.6% from October 2011–September 2012.

FFS program participation decreased steadily from the fourth quarter of 2011 to the third quarter of 2012. However, in the last quarter there was a small increase in FFS participation of 3.6% from the previous quarter. This increase in participation occurred among children and adults under age 65. For people age 65 and older, FFS participation continued to decrease during the last quarter, but at a much smaller rate (1.4%) than was observed when comparing the most distant quarters (61.0%) (see Table BP-5).

**Figure BP-2 Quarterly Average Member Months for Full Scope FFS Beneficiaries, by Gender and Age Group, Quarter 4, 2011–Quarter 3, 2012**

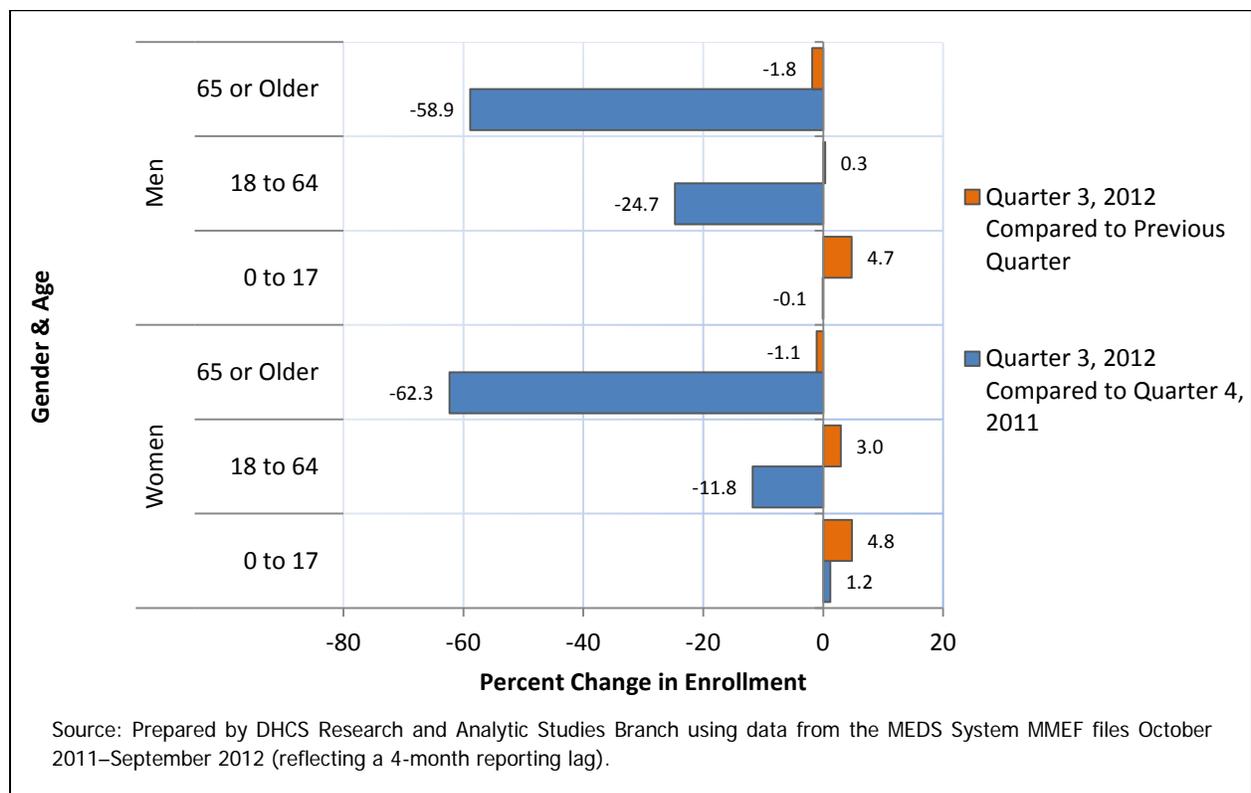


In Figure BP-3, the largest decrease in FFS participation from the fourth quarter of 2011 to the third quarter of 2012 was among females age 65 years and older (62.3%) and males age 65 and older (58.9%). Among young adults age 18–64, males experienced a larger decrease (24.7%) in FFS participation than women (11.8%) across this same 12-month study period.

Among adults age 18–64, FFS participation decreased more for males (24.7%) than females (11.8%).

A large number of beneficiaries participating in the FFS health care delivery system with full scope benefits are age 0-17, but this same group experienced only slight decreases in FFS participation during the 12-month study period (0.1% for males and 1.2% for females).

**Figure BP-3 Change in FFS Participation among Full Scope Beneficiaries, by Gender and Age, Quarter 4, 2011–Quarter 3, 2012**



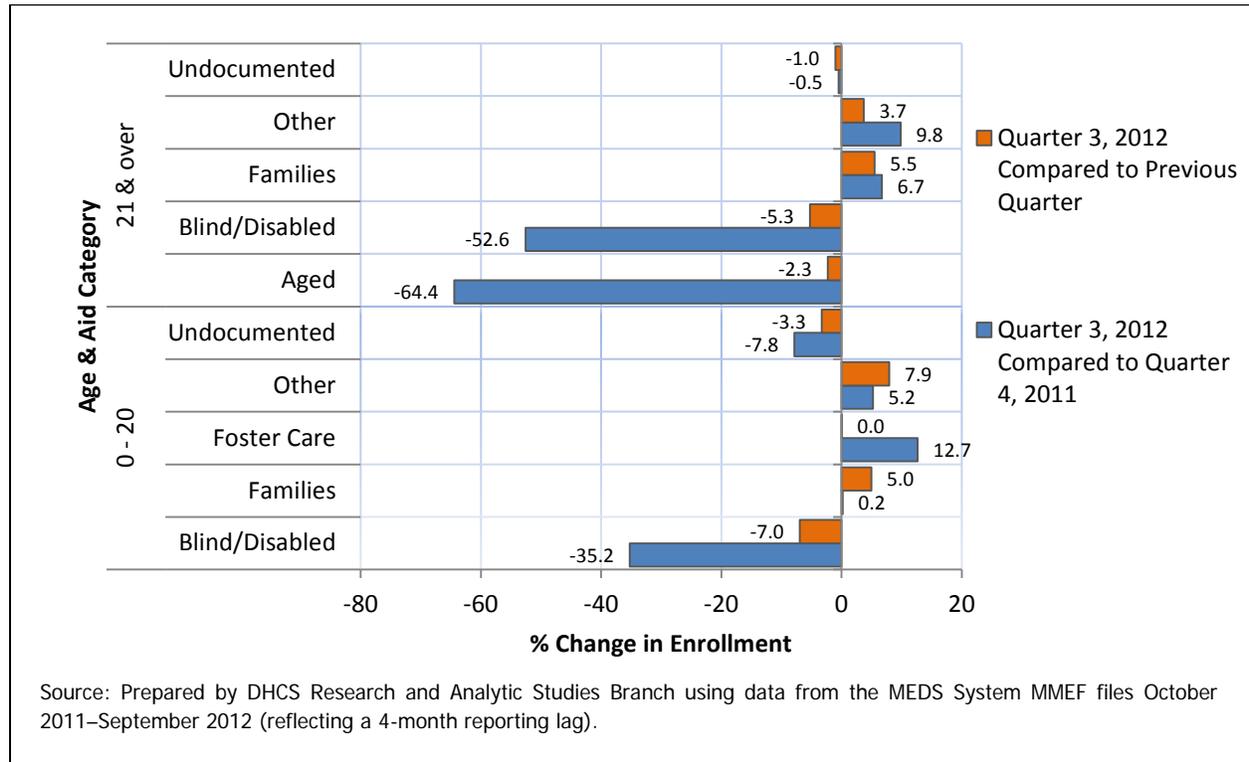
## Aid Category and Age

Table BP-7 displays the change in FFS participation for beneficiaries eligible for Medi-Cal only by age and aid category. When comparing participation changes from the fourth quarter of 2011 to the third quarter of 2012 among adults, there was a decline in FFS participation in the Blind/Disabled and Aged aid categories, and for children declines in FFS participation were observed among the Blind/Disabled and Undocumented aid categories.

The largest declines in FFS participation in this reporting period occurred for beneficiaries in the Aged aid category (64.4%) and Blind/Disabled adults (52.6%). By contrast, FFS participation increased in the Foster Care, Other, and Families aid categories.

The largest declines in FFS participation occurred for adult beneficiaries in the Aged (64.4%) and Blind/Disabled (52.6%) aid categories.

**Figure BP-4 Change in FFS Participation among All Beneficiaries, by Aid Category and Age, 2011 Quarter 4–2012 Quarter 3**



Evaluating FFS participation across the last two quarters in the study period revealed a continuous but modest decline in the Blind/Disabled, Aged, and Undocumented aid categories. This decline ranged from 7.0% in Blind/Disabled children to 1.0% in Undocumented adults. During the last two quarters of the study period, FFS participation increased, regardless of age, in the Families and Other aid categories.

The drop in FFS participation among the Aged and Blind/Disabled populations reflects the implementation of the Bridge to Reform Waiver in which seniors and persons with disabilities (SPDs) were mandatorily shifted from the traditional FFS to the managed care delivery model. These large shifts in beneficiary participation from FFS to managed care occurred predominantly in 2011, with only modest declines observed for during the most recent quarter studied.

FFS participation for beneficiaries in Foster Care aid codes increased 12.7% from October 2011–September 2012.

FFS participation for beneficiaries enrolled in Foster Care aid codes increased 12.7% from the fourth quarter of 2011 to the third quarter of 2012. This trend can be explained by Assembly Bill 12 (AB 12) California Fostering Connections to Success, effective January 1, 2012, which optionally extends foster care benefits up to age 21 if specific program conditions are met.

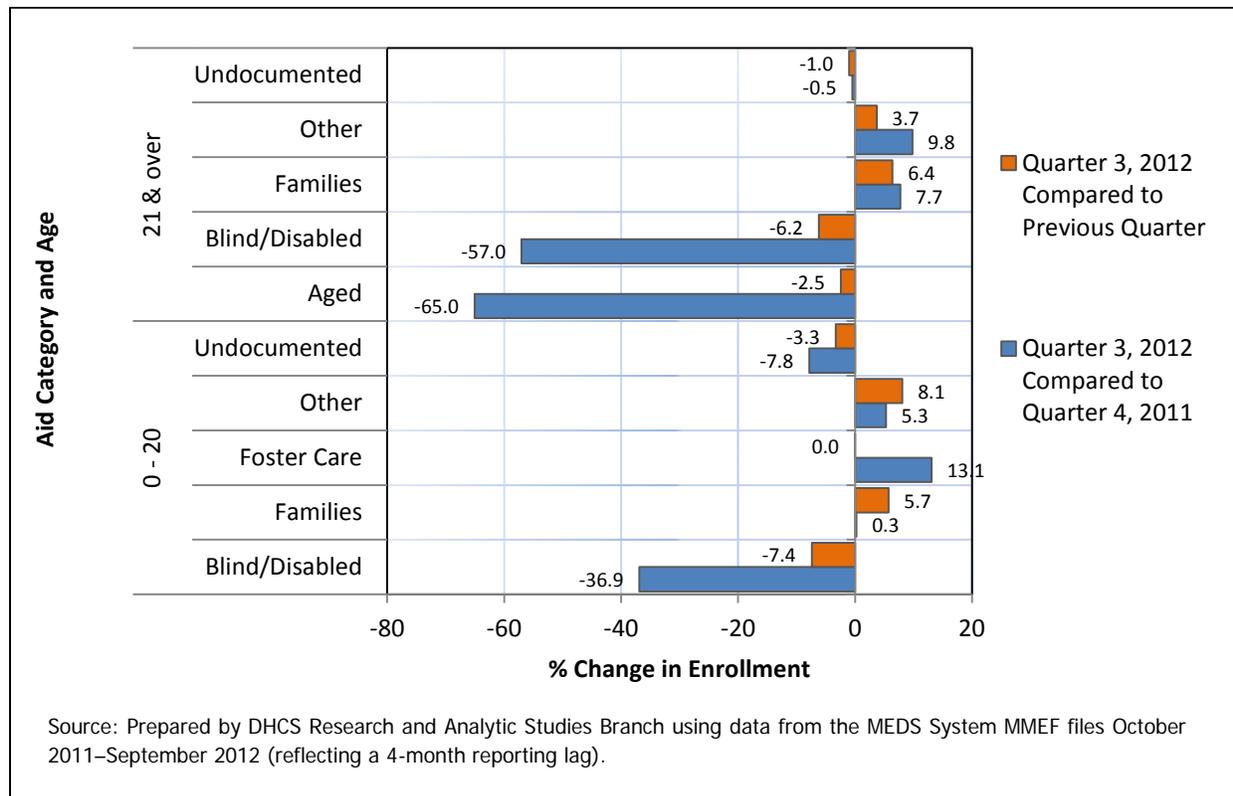
Participation by adults in FFS under the Other aid category rose by 9.8% during the reporting period. The Other aid category represents a variety of aid codes, including Refugee Assistance, Long-Term Care, and Breast and Cervical Cancer Treatment Program. DHCS hypothesizes that the increase in FFS participation for adults eligible under Other aid category might have been driven by beneficiaries in long-term care assistance programs who had been previously shifted from FFS to the managed care delivery system after implementation of the Bridge to Reform, and who later were “carved out” from managed care back into FFS in order to access long-term care benefits. Further evaluation will be needed in order to confirm this hypothesis.

## Participation in Metropolitan vs. Non-Metropolitan Counties

Overall, FFS participation decreased slightly from the fourth quarter of 2011 to the third quarter of 2012 among beneficiaries residing in metropolitan counties (6.5%), remaining virtually unchanged in non-metropolitan counties (0.1%) (see [Table BP-8](#) and [Table BP-9](#) in [Appendix A](#)). However, FFS participation differed substantially among the different subpopulations evaluated in both metropolitan and non-metropolitan counties.

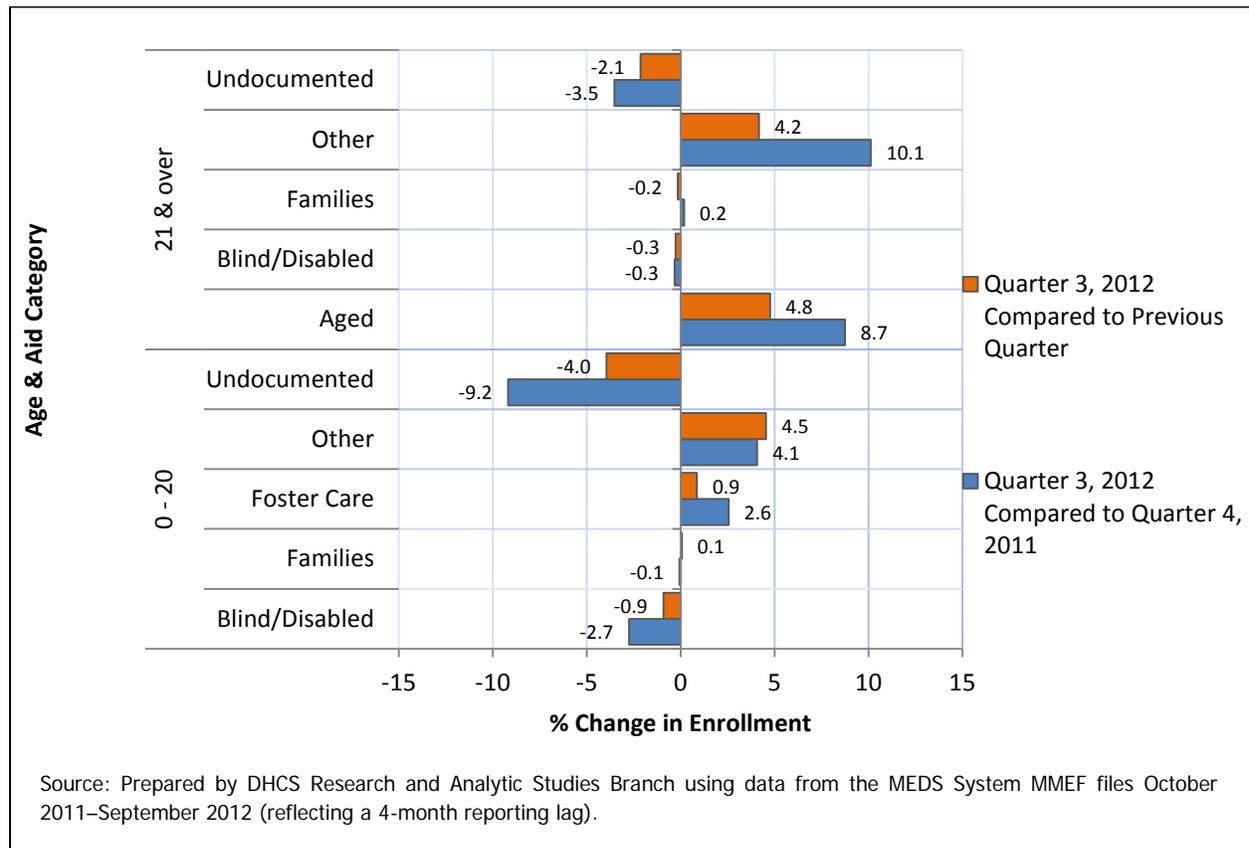
In Metropolitan areas, the largest decreases in FFS participation occurred among Aged adults (65.0%), and Blind/Disabled adults (57.0%) and children (36.9%).

**Figure BP-4 Change in FFS Participation among Medi-Cal Beneficiaries, by Aid Category and Age, Metropolitan Counties, 2011 Quarter 4–2012 Quarter 3**



For beneficiaries residing in metropolitan counties, participation across the four quarters studied followed a similar pattern as the one observed statewide. A substantial decrease occurred among Blind/Disabled adults (57.0%) and children (36.9%), and among Aged adults (65.0%), a modest decline was observed for children in the Undocumented aid category (7.8%), and a moderate increase was observed among adults in the Families (7.7%) and Other (9.8%) aid categories and among children in the Foster Care (13.1%) and Other (5.3%) aid categories (see [Figure BP-4](#)).

**Figure BP-5 Change in FFS Participation among Medi-Cal Beneficiaries, by Age and Aid Category, Non-Metropolitan Counties, 2011 Quarter 4–2012 Quarter 3**



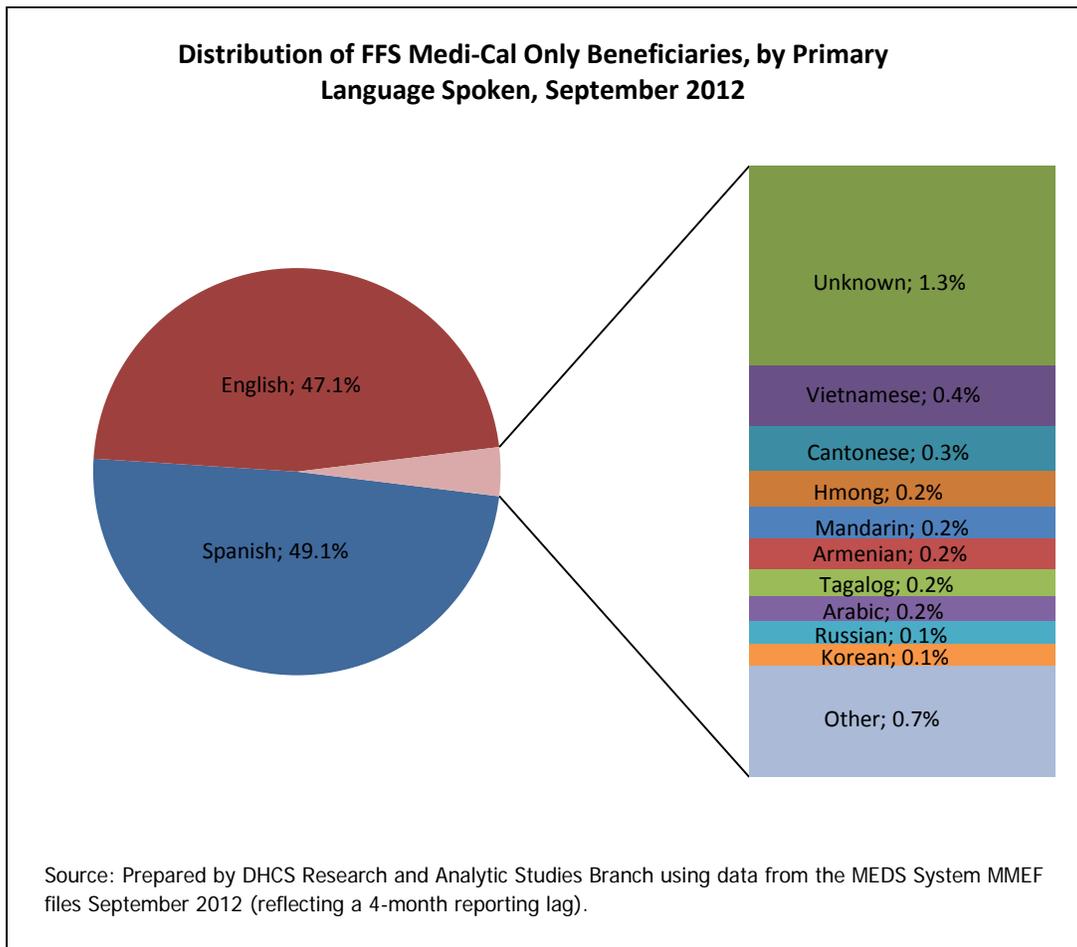
By contrast, FFS beneficiaries residing in non-metropolitan areas experienced smaller changes in FFS participation across the different subpopulations. For example, over the four quarters studied, changes in FFS participation varied from a 9.2% decline among Undocumented children, to a 10.1% increase among adults in the Other aid category (see Figure BP-5). Between the third quarter of 2012 and the previous quarter, small declines in participation were observed only among those in the Undocumented aid group (4.0% for children and 2.1% for adults), whereas participation increased slightly among adults and children in the Other aid category, and among adults in the Aged aid category (see Figure BP-5). Changes in FFS participation were negligible among Foster Care children, and both adults and children in the Families and Blind/Disabled aid categories.

In non-metropolitan areas, FFS participation changes were smaller than those in metropolitan areas, ranging from a 9.2% decline among Undocumented children to a 10.1% increase among adults in the Other aid category.

## Distribution of Medi-Cal Only FFS Beneficiaries, by Primary Language Spoken

As displayed in Figure BP-6, Spanish was self-reported as the primary language spoken by 49.1% of beneficiaries participating in FFS and eligible for Medi-Cal only for the third quarter of 2012. English was the primary language used by 47.1% of the beneficiaries participating in FFS and eligible for Medi-Cal only. The remaining 3.9% of beneficiaries spoke a variety of primary languages, including Vietnamese, Armenian, Hmong, Cantonese, Mandarin, Tagalog, and Russian.

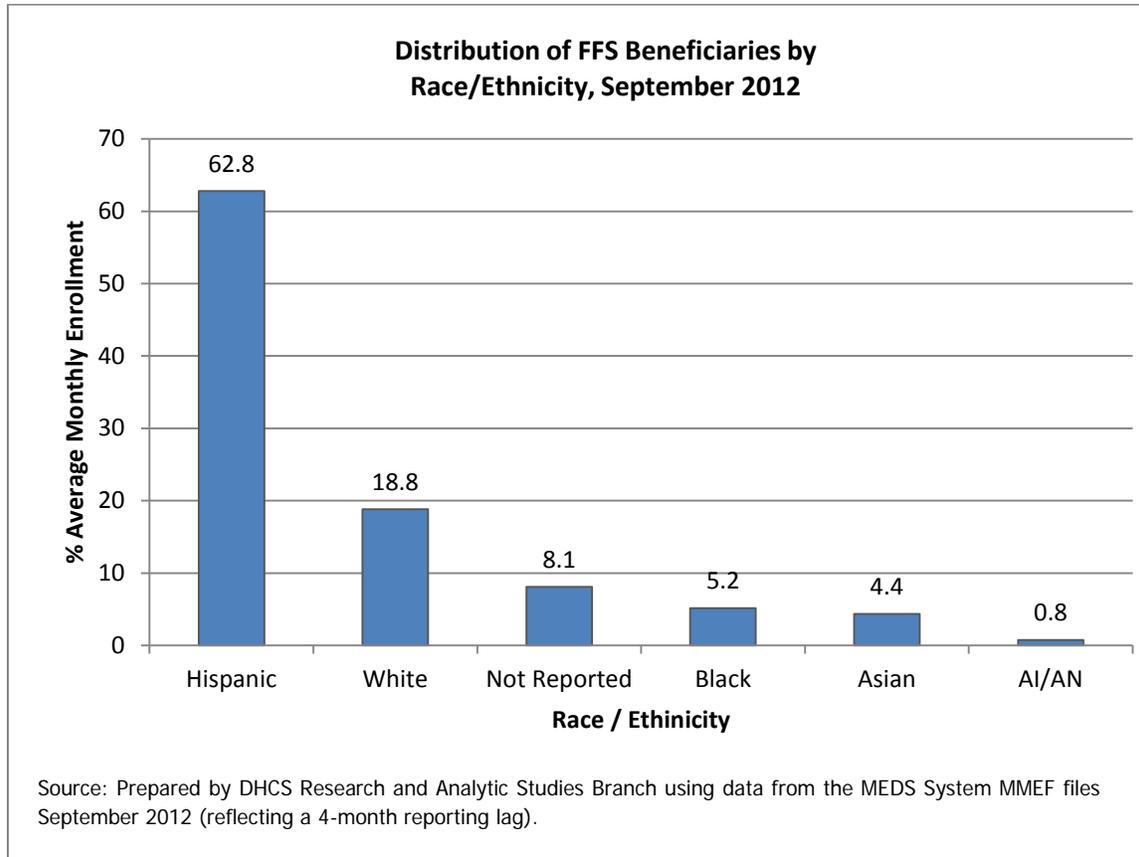
**Figure BP-6 Distribution of FFS Medi-Cal Only Beneficiaries, by Primary Language Spoken, 2012 Quarter 3**



## Distribution of Medi-Cal Only FFS Beneficiaries, by Race/Ethnicity

In Figure BP-7, Hispanics represented 62.8% of the total population participating in FFS and eligible for Medi-Cal only for the third quarter of 2012. Whites accounted for 18.8% of all FFS Medi-Cal beneficiaries, while African American and Asian/Pacific Islander beneficiaries represented a much smaller portion of the overall population (5.2% and 4.4%, respectively). An additional 8.1% of the FFS Medi-Cal population reported no race/ethnic data.

**Figure BP-7 Distribution of FFS Beneficiaries by Race/Ethnicity, 2012 Quarter 3**



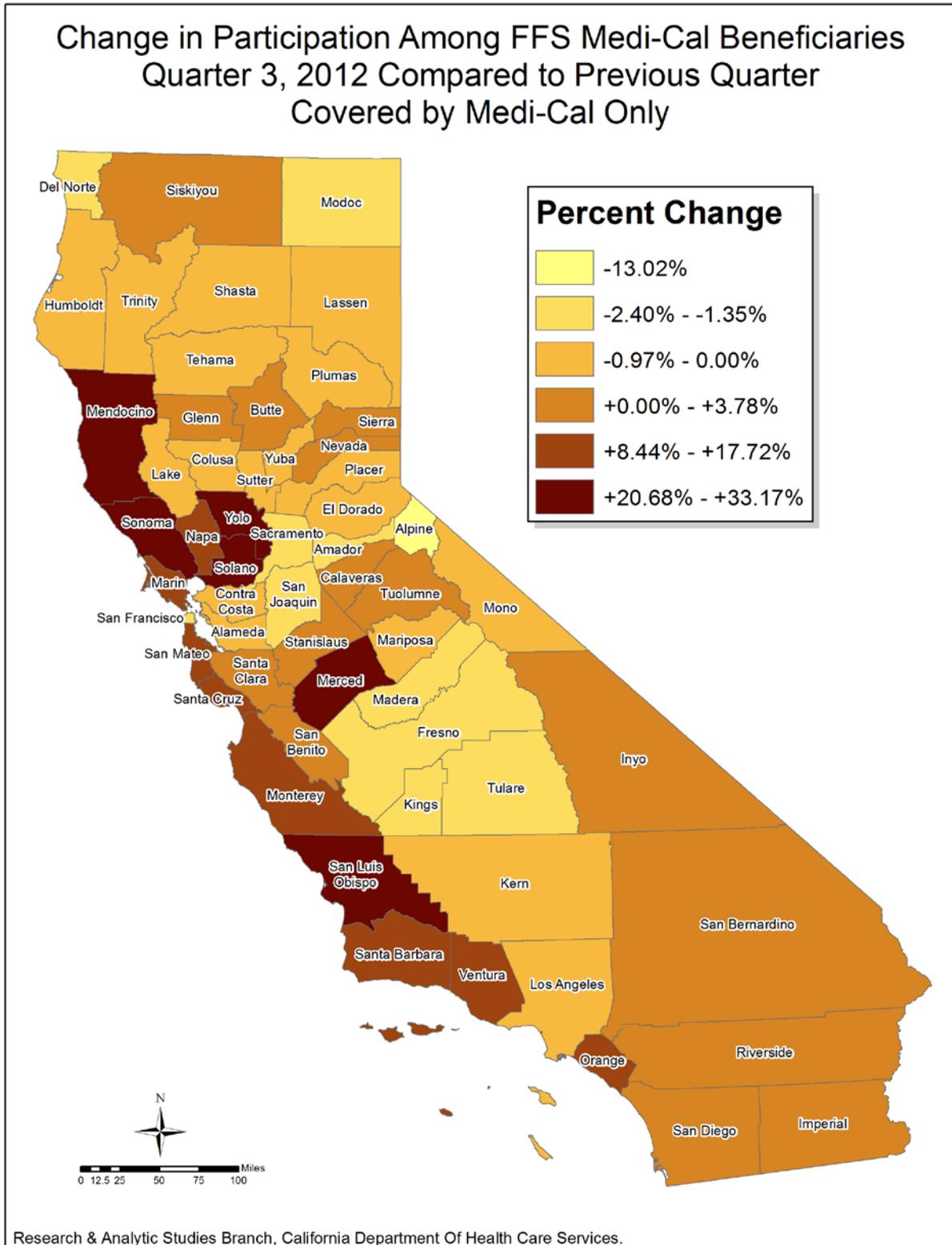
## Distribution of Medi-Cal Only FFS Beneficiaries, by County

As shown in [Figure BP-8](#), when comparing participation changes for all FFS beneficiaries across the entire 12-month study period, large variations were observed by county. About 40% of the counties experienced a decline in participation, with San Francisco, Sacramento, and San Joaquin Counties recognizing the largest decrease (24.5%, 15.7%, and 14.1%, respectively). Approximately a third of counties saw an increase in FFS participation, with Solano, San Luis Obispo, and San Mateo Counties recognizing the greatest increases (49.6%, 35.5%, and 30.0%). The remaining counties had no significant changes in participation.

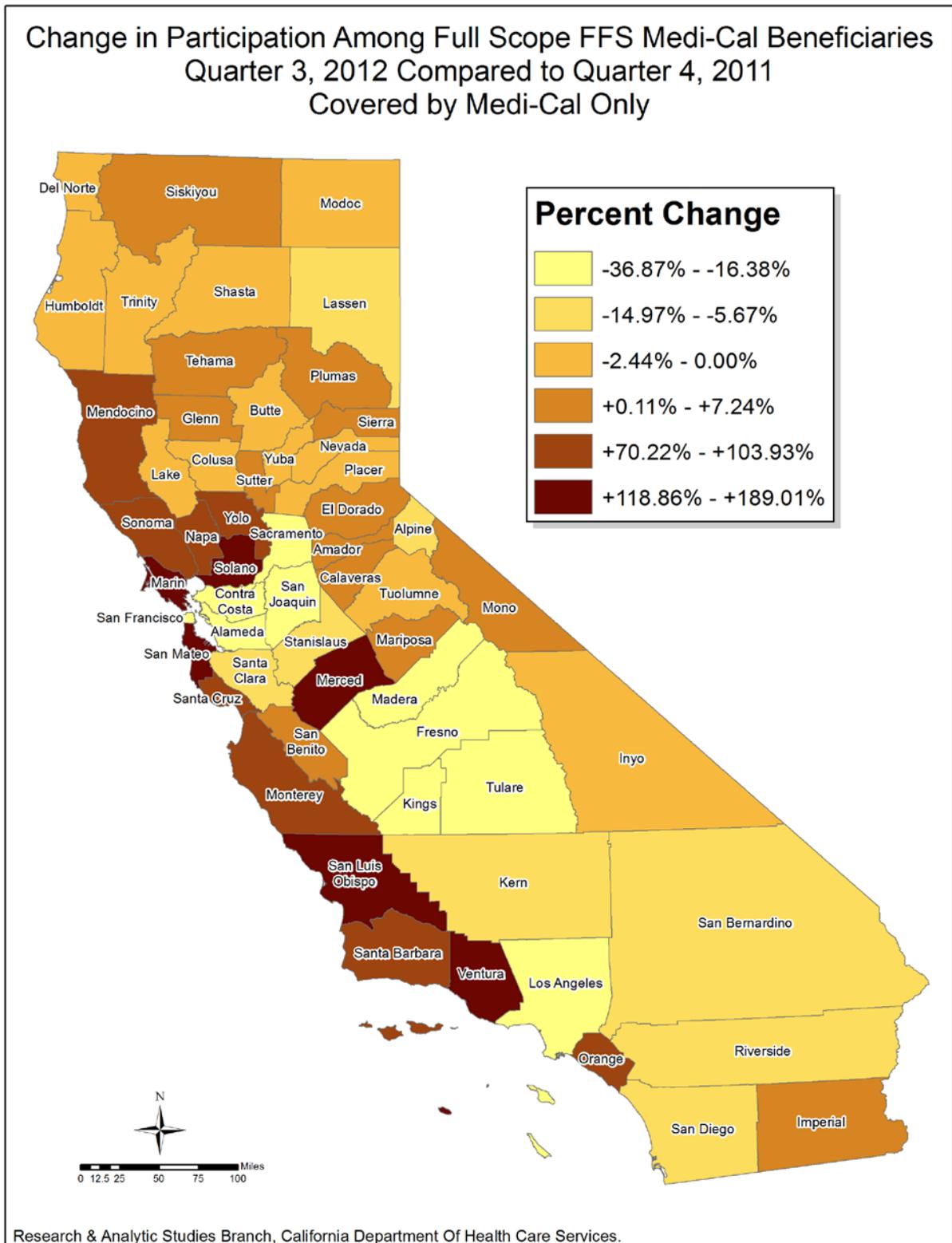
San Francisco, Sacramento, and San Joaquin Counties had the largest decreases in FFS participation.

When evaluating participation for Full Scope beneficiaries, similar patterns were observed, although the degree of change was more pronounced, ranging from -36.9% for San Francisco County to 189.0% in Solano County over the year under study (see [Table BP-2](#)).

**Figure BP-8 Comparison of FFS Participation by Medi-Cal Only Beneficiaries, 2012 Quarter 2-2011 Quarter 3**



**Figure BP-9 Comparison of FFS Participation by Medi-Cal Only Beneficiaries, 2012 Quarter 2 to Previous Quarter**



## Conclusions—Beneficiary Participation

1. Beneficiaries eligible for Medi-Cal only and participating in the FFS system are a culturally and ethnically diverse population. The majority describe themselves as Hispanic. About half speak Spanish as their primary language.
2. Several Medi-Cal subpopulations participating in FFS were transitioned into managed care plans. During late 2010 and 2011, Kings, Madera, Ventura, Mendocino, and Marin Counties were transitioned from FFS to managed care delivery models. In addition, roughly 300,000 seniors and persons with disabilities were mandatorily enrolled in managed care health plans in the Two-Plan and GMC counties. These changes to Medi-Cal's health delivery system resulted in a decline in the number of beneficiaries participating in the FFS health care model.
3. Overall, the number of FFS beneficiaries eligible for Medi-Cal only and entitled to full scope benefits increased 3.6% between the second and the third quarter of 2012, but decreased by 8.6% when comparing FFS participation to earlier quarters of the study period.
4. Decreases in FFS participation among Medi-Cal only beneficiaries were observed in the Aged, Blind/Disabled, and Undocumented aid categories. The decrease in participation among the first two subpopulations was expected, given the DHCS initiative of transitioning SPDs into managed care plans.
5. Increase in FFS participation affected those enrolled in Families, Foster Care, and Other aid categories.
6. Overall, participation trends for Medi-Cal's FFS population were different in metropolitan and non-metropolitan counties. In metropolitan areas, participation decreased steadily throughout all quarters under study, whereas in non-metropolitan areas, participation remained mainly constant over the last four quarters studied.
7. In metropolitan counties, beneficiaries enrolled in the Aged and Blind/Disabled aid categories experienced the greatest decline in FFS participation across all quarters. In metropolitan counties, children in Foster Care had the highest expansion, followed by adults enrolled under Other aid category. In both cases, this expansion was due solely to an increase in participation from the last quarter of 2011 and the third quarter of 2012.
8. In non-metropolitan counties, participation increased for some aid groups (Other, Aged, and Foster Care) and decreased for others (Undocumented children and adults, and Blind/Disabled children). Shifts in system participation (i.e., from FFS to managed care) were not responsible for the declines recognized in the undocumented population since

they are not eligible for Medi-Cal managed care participation. These declines are most likely the result of declining participation in the Medi-Cal program.

9. Children in the Foster Care aid category experienced an increase in FFS participation from 2011 to 2012, most likely the result of legislation effective January 1, 2012, which optionally extends foster care benefits up to age 21. FFS participation of adults in the "Other" aid category also increased, possibly as a result of the need for long-term care services which are only paid by managed care plans for the first 30 days. Beneficiaries enrolled in managed care plans and needing LTC services beyond 30 days are shifted back into the FFS delivery system to obtain these services.
10. During the third quarter of 2012, the downwards trend in FFS participation that had been observed in all counties during 2011 were reversed for some counties (e.g., Solano, Santa Cruz, and San Mateo), and stabilized for about half of counties.

## Appendix A—County-Level Tables

**Table BP-1 FFS Beneficiaries, Medi-Cal Only, Average Member Months per Quarter, by County**

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
Alameda	60,254	54,958	52,161	52,121	-13.5	-0.1
Alpine	162	173	169	147	-9.3	-13.0
Amador	3,650	3,675	3,700	3,637	-0.4	-1.7
Butte	41,425	41,269	41,062	41,227	-0.5	0.4
Calaveras	5,530	5,542	5,574	5,596	1.2	0.4
Colusa	3,965	3,980	3,966	3,937	-0.7	-0.7
Contra Costa	37,882	35,443	33,420	33,106	-12.6	-0.9
Del Norte	6,725	6,730	6,676	6,567	-2.3	-1.6
El Dorado	15,603	15,588	15,633	15,573	-0.2	-0.4
Fresno	63,439	60,918	57,985	57,202	-9.8	-1.4
Glenn	5,999	6,066	6,106	6,113	1.9	0.1
Humboldt	21,777	21,678	21,710	21,610	-0.8	-0.5
Imperial	46,091	45,972	46,025	46,644	1.2	1.3
Inyo	2,899	2,916	2,900	2,901	0.1	0.0
Kern	62,891	60,974	58,648	58,530	-6.9	-0.2
Kings	8,776	8,332	7,766	7,653	-12.8	-1.5
Lake	13,923	13,945	13,824	13,759	-1.2	-0.5
Lassen	4,199	4,101	3,984	3,971	-5.4	-0.3
Los Angeles	639,689	594,787	569,835	566,940	-11.4	-0.5
Madera	12,891	12,440	11,856	11,585	-10.1	-2.3
Marin	5,118	5,126	5,226	5,682	11.0	8.7
Mariposa	2,198	2,205	2,262	2,240	1.9	-1.0
Mendocino	2,493	2,488	2,566	3,159	26.7	23.1
Merced	10,178	10,282	10,924	13,183	29.5	20.7
Modoc	1,589	1,587	1,595	1,557	-2.0	-2.4
Mono	1,210	1,253	1,291	1,288	6.4	-0.2
Monterey	19,951	20,691	21,323	23,122	15.9	8.4
Napa	2,621	2,591	2,754	3,008	14.8	9.2
Nevada	9,213	9,161	9,060	9,146	-0.7	0.9
Orange	72,060	70,628	73,052	85,233	18.3	16.7
Placer	24,872	24,906	24,957	24,868	0.0	-0.4
Plumas	2,434	2,427	2,448	2,439	0.2	-0.4
Riverside	102,091	95,248	91,519	92,524	-9.4	1.1
Sacramento	65,340	60,481	55,983	55,100	-15.7	-1.6
San Benito	8,796	8,908	8,860	8,866	0.8	0.1
San Bernardino	125,853	119,133	116,288	116,359	-7.5	0.1
San Diego	113,309	104,763	99,122	99,945	-11.8	0.8
San Francisco	28,143	24,448	21,603	21,249	-24.5	-1.6

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
San Joaquin	40,627	38,061	35,770	34,912	-14.1	-2.4
San Luis Obispo	4,050	4,152	4,452	5,487	35.5	23.2
San Mateo	13,853	14,150	15,545	18,014	30.0	15.9
Santa Barbara	15,626	15,758	16,228	18,011	15.3	11.0
Santa Clara	69,287	66,585	63,005	63,773	-8.0	1.2
Santa Cruz	6,443	6,552	6,962	7,716	19.8	10.8
Shasta	32,745	32,557	32,548	32,482	-0.8	-0.2
Sierra	334	334	344	357	6.9	3.8
Siskiyou	8,277	8,350	8,393	8,416	1.7	0.3
Solano	6,714	6,640	7,540	10,041	49.6	33.2
Sonoma	8,841	8,670	9,310	11,284	27.6	21.2
Stanislaus	39,031	37,588	36,722	36,723	-5.9	0.0
Sutter	19,546	19,557	19,633	19,601	0.3	-0.2
Tehama	14,455	14,376	14,444	14,401	-0.4	-0.3
Trinity	2,217	2,204	2,196	2,188	-1.3	-0.4
Tulare	39,495	38,383	36,623	35,908	-9.1	-2.0
Tuolumne	6,378	6,391	6,320	6,349	-0.5	0.5
Ventura	19,606	19,453	20,617	24,271	23.8	17.7
Yolo	3,892	3,725	3,998	4,895	25.8	22.4
Yuba	17,559	17,352	17,264	17,238	-1.8	-0.2

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files, October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-2 FFS Full Scope Beneficiaries, Medi-Cal only Average Member Months, by County**

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
Alameda	39,254	33,910	31,099	31,233	-20.4	0.4
Alpine	162	173	169	147	-9.3	-13.0
Amador	3,537	3,568	3,610	3,541	0.1	-1.9
Butte	40,103	39,979	39,785	39,976	-0.3	0.5
Calaveras	5,370	5,380	5,420	5,445	1.4	0.5
Colusa	3,524	3,524	3,528	3,502	-0.6	-0.7
Contra Costa	23,575	21,320	19,279	19,073	-19.1	-1.1
Del Norte	6,540	6,558	6,519	6,408	-2.0	-1.7
El Dorado	14,506	14,507	14,555	14,543	0.3	-0.1
Fresno	34,230	31,524	28,468	28,298	-17.3	-0.6
Glenn	5,367	5,441	5,495	5,523	2.9	0.5
Humboldt	21,143	21,064	21,096	21,016	-0.6	-0.4
Imperial	45,029	44,952	45,056	45,708	1.5	1.4
Inyo	2,576	2,586	2,571	2,574	-0.1	0.1
Kern	39,547	37,492	35,032	35,344	-10.6	0.9
Kings	5,591	5,142	4,611	4,552	-18.6	-1.3
Lake	13,230	13,269	13,172	13,125	-0.8	-0.4
Lassen	4,074	3,984	3,865	3,843	-5.7	-0.6
Los Angeles	319,603	277,081	253,197	255,372	-20.1	0.9
Madera	5,645	5,195	4,650	4,664	-17.4	0.3
Marin	531	537	690	1,171	120.5	69.7
Mariposa	2,133	2,139	2,196	2,187	2.5	-0.4
Mendocino	740	712	783	1,457	96.9	86.1
Merced	2,179	2,310	2,935	5,257	141.3	79.1
Modoc	1,518	1,507	1,513	1,481	-2.4	-2.1
Mono	980	1,012	1,039	1,051	7.2	1.2
Monterey	2,802	2,779	3,293	5,714	103.9	73.5
Napa	636	609	809	1,168	83.6	44.4
Nevada	8,859	8,818	8,731	8,822	-0.4	1.0
Orange	15,423	14,130	16,704	29,164	89.1	74.6
Placer	23,746	23,747	23,805	23,708	-0.2	-0.4
Plumas	2,373	2,366	2,392	2,381	0.3	-0.5
Riverside	72,758	66,351	62,876	64,227	-11.7	2.1
Sacramento	50,891	46,002	41,570	40,894	-19.6	-1.6
San Benito	7,712	7,792	7,756	7,796	1.1	0.5
San Bernardino	92,566	86,416	83,464	83,818	-9.5	0.4

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
San Diego	87,141	78,876	73,519	74,796	-14.2	1.7
San Francisco	18,845	15,086	12,272	11,897	-36.9	-3.1
San Joaquin	26,112	23,607	21,381	20,782	-20.4	-2.8
San Luis Obispo	1,233	1,279	1,613	2,722	120.8	68.8
San Mateo	2,875	2,903	4,026	6,357	121.1	57.9
Santa Barbara	3,253	3,178	3,565	5,611	72.5	57.4
Santa Clara	35,664	33,090	29,496	30,324	-15.0	2.8
Santa Cruz	1,552	1,564	2,055	2,978	91.9	44.9
Shasta	32,298	32,139	32,150	32,104	-0.6	-0.1
Sierra	331	330	338	351	6.0	3.8
Siskiyou	8,112	8,182	8,231	8,247	1.7	0.2
Solano	1,856	1,798	2,762	5,364	189.0	94.2
Sonoma	2,772	2,639	3,309	5,301	91.2	60.2
Stanislaus	28,363	27,103	26,373	26,518	-6.5	0.5
Sutter	17,953	17,968	18,008	18,028	0.4	0.1
Tehama	13,444	13,400	13,505	13,478	0.3	-0.2
Trinity	2,202	2,188	2,181	2,172	-1.4	-0.4
Tulare	20,415	19,186	17,362	17,072	-16.4	-1.7
Tuolumne	6,319	6,334	6,265	6,297	-0.3	0.5
Ventura	4,603	4,540	5,850	10,074	118.9	72.2
Yolo	1,699	1,606	1,921	2,892	70.2	50.5
Yuba	16,474	16,275	16,210	16,235	-1.5	0.2

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-3 FFS Full Scope Children Age 0-17, Medi-Cal only, Average Member Months, by County**

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
Alameda	18,452	17,441	17,191	17,420	-5.6	1.3
Alpine	84	89	91	83	-1.2	-8.8
Amador	1,861	1,865	1,894	1,859	-0.1	-1.8
Butte	20,963	20,851	20,721	20,835	-0.6	0.6
Calaveras	2,802	2,790	2,826	2,853	1.8	1.0
Colusa	2,351	2,336	2,347	2,338	-0.6	-0.4
Contra Costa	11,649	11,388	11,000	10,914	-6.3	-0.8
Del Norte	3,334	3,363	3,329	3,292	-1.3	-1.1
El Dorado	8,083	8,084	8,165	8,125	0.5	-0.5
Fresno	17,956	17,561	16,736	16,812	-6.4	0.5
Glenn	3,380	3,398	3,427	3,444	1.9	0.5
Humboldt	11,002	10,926	10,990	10,967	-0.3	-0.2
Imperial	25,541	25,583	25,606	25,976	1.7	1.4
Inyo	1,518	1,507	1,496	1,514	-0.3	1.2
Kern	23,168	22,930	22,163	22,771	-1.7	2.7
Kings	3,290	3,164	2,937	2,985	-9.3	1.6
Lake	6,831	6,862	6,857	6,835	0.1	-0.3
Lassen	2,141	2,107	2,048	2,057	-3.9	0.4
Los Angeles	162,774	151,970	150,442	154,444	-5.1	2.7
Madera	3,386	3,173	2,916	3,031	-10.5	3.9
Marin	330	335	433	764	131.5	76.4
Mariposa	1,128	1,132	1,161	1,164	3.2	0.3
Mendocino	420	390	431	816	94.3	89.3
Merced	1,453	1,539	1,895	3,293	126.6	73.8
Modoc	817	804	808	799	-2.2	-1.1
Mono	673	681	698	711	5.6	1.9
Monterey	1,967	1,955	2,259	3,835	95.0	69.8
Napa	398	393	497	724	81.9	45.7
Nevada	4,657	4,632	4,605	4,674	0.4	1.5
Orange	10,850	9,665	11,024	19,025	75.3	72.6
Placer	13,802	13,871	13,887	13,870	0.5	-0.1
Plumas	1,280	1,248	1,254	1,271	-0.7	1.4
Riverside	43,674	41,362	40,405	41,495	-5.0	2.7
Sacramento	25,310	25,055	24,208	24,004	-5.2	-0.8
San Benito	4,904	4,950	4,939	4,968	1.3	0.6
San Bernardino	51,995	49,966	49,511	50,161	-3.5	1.3

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
San Diego	49,085	46,992	45,702	46,685	-4.9	2.2
San Francisco	5,788	5,599	5,303	5,334	-7.8	0.6
San Joaquin	14,190	13,647	13,098	12,978	-8.5	-0.9
San Luis Obispo	778	800	955	1,588	104.1	66.3
San Mateo	1,851	1,845	2,531	4,032	117.8	59.3
Santa Barbara	2,433	2,379	2,441	3,709	52.4	51.9
Santa Clara	17,406	17,670	16,645	17,280	-0.7	3.8
Santa Cruz	1,020	988	1,177	1,698	66.5	44.3
Shasta	16,788	16,649	16,684	16,740	-0.3	0.3
Sierra	157	161	164	173	10.2	5.5
Siskiyou	4,206	4,210	4,243	4,270	1.5	0.6
Solano	1,217	1,121	1,691	3,160	159.7	86.9
Sonoma	1,872	1,749	2,046	3,292	75.9	60.9
Stanislaus	14,971	14,825	14,979	15,201	1.5	1.5
Sutter	10,629	10,693	10,749	10,798	1.6	0.5
Tehama	7,792	7,753	7,785	7,835	0.6	0.6
Trinity	1,076	1,073	1,071	1,066	-0.9	-0.5
Tulare	11,603	11,336	10,751	10,622	-8.5	-1.2
Tuolumne	3,216	3,225	3,227	3,251	1.1	0.7
Ventura	3,027	2,979	3,743	6,499	114.7	73.6
Yolo	1,227	1,145	1,288	1,869	52.3	45.1
Yuba	9,268	9,149	9,120	9,179	-1.0	0.6

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-4 FFS Women Age 18–64, Medi-Cal Only, Average Member Months, by County**

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
Alameda	21,908	20,332	19,575	19,627	-10.4	0.3
Alpine	45	47	45	35	-22.2	-22.2
Amador	1,113	1,130	1,128	1,103	-0.9	-2.2
Butte	12,114	12,105	12,078	12,131	0.1	0.4
Calaveras	1,653	1,655	1,648	1,647	-0.4	-0.1
Colusa	1,005	1,020	1,007	1,001	-0.4	-0.6
Contra Costa	13,590	12,799	12,215	12,195	-10.3	-0.2
Del Norte	1,978	1,969	1,956	1,918	-3.0	-1.9
El Dorado	4,462	4,463	4,450	4,434	-0.6	-0.4
Fresno	23,970	23,016	22,130	21,887	-8.7	-1.1
Glenn	1,607	1,642	1,642	1,631	1.5	-0.7
Humboldt	6,432	6,441	6,415	6,368	-1.0	-0.7
Imperial	13,431	13,366	13,379	13,579	1.1	1.5
Inyo	815	826	823	814	-0.1	-1.1
Kern	21,350	20,672	20,000	19,793	-7.3	-1.0
Kings	2,993	2,790	2,605	2,543	-15.0	-2.4
Lake	4,141	4,127	4,077	4,050	-2.2	-0.7
Lassen	1,247	1,209	1,168	1,155	-7.4	-1.1
Los Angeles	254,311	240,781	231,500	229,000	-10.0	-1.1
Madera	4,894	4,818	4,713	4,555	-6.9	-3.4
Marin	2,591	2,624	2,618	2,704	4.4	3.3
Mariposa	655	647	659	635	-3.1	-3.6
Mendocino	1,061	1,072	1,097	1,245	17.3	13.5
Merced	4,543	4,598	4,786	5,319	17.1	11.1
Modoc	445	452	451	443	-0.4	-1.8
Mono	301	323	341	334	11.0	-2.1
Monterey	9,597	9,971	10,153	10,444	8.8	2.9
Napa	1,266	1,256	1,295	1,336	5.5	3.2
Nevada	2,799	2,775	2,725	2,742	-2.0	0.6
Orange	36,123	36,100	36,853	39,566	9.5	7.4
Placer	6,763	6,766	6,809	6,771	0.1	-0.6
Plumas	724	735	745	729	0.7	-2.1
Riverside	33,958	31,868	30,735	31,053	-8.6	1.0
Sacramento	22,157	19,933	18,269	18,087	-18.4	-1.0
San Benito	2,410	2,463	2,422	2,422	0.5	0.0
San Bernardino	42,675	40,500	39,656	39,604	-7.2	-0.1
San Diego	38,252	35,339	33,698	33,964	-11.2	0.8
San Francisco	10,605	9,437	8,647	8,537	-19.5	-1.3
San Joaquin	13,967	13,122	12,233	11,935	-14.5	-2.4
San Luis Obispo	1,798	1,845	1,948	2,236	24.4	14.8
San Mateo	6,537	6,679	6,993	7,549	15.5	8.0
Santa Barbara	7,541	7,645	7,899	8,317	10.3	5.3
Santa Clara	26,814	26,082	25,285	25,501	-4.9	0.9

County	Average Member Months				Percent Change	
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
Santa Cruz	3,197	3,307	3,456	3,667	14.7	6.1
Shasta	9,695	9,654	9,655	9,564	-1.4	-0.9
Sierra	96	97	102	106	10.4	3.9
Siskiyou	2,442	2,485	2,480	2,479	1.5	0.0
Solano	2,944	2,981	3,220	3,932	33.6	22.1
Sonoma	4,137	4,096	4,334	4,867	17.6	12.3
Stanislaus	13,021	12,500	12,080	12,046	-7.5	-0.3
Sutter	5,190	5,165	5,186	5,155	-0.7	-0.6
Tehama	4,013	4,018	4,045	3,989	-0.6	-1.4
Trinity	687	674	664	665	-3.2	0.2
Tulare	14,410	14,064	13,587	13,377	-7.2	-1.5
Tuolumne	1,968	1,951	1,911	1,920	-2.4	0.5
Ventura	9,418	9,398	9,712	10,418	10.6	7.3
Yolo	1,495	1,474	1,559	1,766	18.1	13.3
Yuba	4,941	4,888	4,854	4,831	-2.2	-0.5

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-5 FFS Full Scope, Average Member Months, by Gender and Age**

Gender	Age Category	Average Member Months				Percent Change	
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtrr
Women	0 to 17	325,196	315,590	314,034	329,093	1.2	4.8
	18 to 64	337,321	307,470	289,087	297,636	-11.8	3.0
	65 or Older	21,639	13,530	8,241	8,153	-62.3	-1.1
Men	0 to 17	348,627	335,766	332,555	348,296	-0.1	4.7
	18 to 64	206,396	176,600	154,849	155,342	-24.7	0.3
	65 or Older	12,781	8,183	5,352	5,255	-58.9	-1.8
All	0 to 17	673,823	651,356	646,589	677,389	0.5	4.8
	18 to 64	543,717	484,070	443,936	452,978	-16.7	2.0
	65 or Older	34,420	21,713	13,593	13,408	-61.0	-1.4
<b>Total</b>		1,251,960	1,157,139	1,104,118	1,143,775	-8.6	3.6

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-6 FFS Restricted Scope, Average Member Months, by Gender and Age**

Gender	Age Category	Average Member Months				Percent Change	
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Qtr 3, 2012 Compared to Qtr 4, 2011	Qtr 3 2012 Compared to Previous Qtr
Women	0 to 17	64,082	62,164	60,417	58,306	-9.0	-3.5
	18 to 64	406,976	406,723	406,631	402,085	-1.2	-1.1
	65 or Older	10,902	11,015	11,072	11,078	1.6	0.1
Men	0 to 17	65,712	63,583	61,912	59,706	-9.1	-3.6
	18 to 64	219,124	220,472	221,993	219,313	0.1	-1.2
	65 or Older	5,438	5,555	5,591	5,573	2.5	-0.3
All	0 to 17	129,794	125,747	122,329	118,012	-9.1	-3.5
	18 to 64	626,100	627,195	628,624	621,398	-0.8	-1.1
	65 or Older	16,340	16,570	16,663	16,651	1.9	-0.1
<b>Total</b>		772,234	769,512	767,616	756,061	-2.1	-1.5

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-7 FFS Beneficiaries, Average Member Months, by Age and Aid Category**

Age	Aid Category	Average Member Months				Percent Change	
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
0 - 20	Blind/Disabled	61,535	53,567	42,841	39,860	-35.2	-7.0
	Families	411,342	392,609	392,707	412,216	0.2	5.0
	Foster Care	86,623	97,736	97,570	97,594	12.7	0.0
	Other	199,278	190,436	194,304	209,685	5.2	7.9
	Undocumented	167,425	163,190	159,533	154,284	-7.8	-3.3
21 & over	Aged	30,720	18,744	11,187	10,933	-64.4	-2.3
	Blind/Disabled	205,577	146,531	102,908	97,495	-52.6	-5.3
	Families	201,017	200,428	203,325	214,518	6.7	5.5
	Other	55,871	56,960	59,167	61,361	9.8	3.7
	Undocumented	604,809	606,310	608,084	601,777	-0.5	-1.0
<b>Total</b>		2,024,197	1,926,511	1,871,626	1,899,723	-6.1	1.5

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

**Table BP-8 FFS Average Member Months, by Age and Aid Category, Metropolitan Counties**

Age	Aid Category	Average Member Months				Percent Change	
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
0 - 20	Blind/Disabled	58,547	50,597	39,908	36,953	-36.9	-7.4
	Families	358,921	340,187	340,349	359,828	0.3	5.7
	Foster Care	83,218	94,314	94,108	94,102	13.1	0.0
	Other	190,410	181,767	185,477	200,457	5.3	8.1
	Undocumented	165,499	161,301	157,712	152,536	-7.8	-3.3
21 & over	Aged	30,457	18,477	10,915	10,647	-65.0	-2.5
	Blind/Disabled	189,458	130,405	86,798	81,429	-57.0	-6.2
	Families	174,066	173,365	176,285	187,519	7.7	6.4
	Other	54,350	55,371	57,560	59,685	9.8	3.7
	Undocumented	599,646	601,152	602,994	596,796	-0.5	-1.0
<b>Total</b>		1,904,572	1,806,936	1,752,106	1,779,952	-6.5	1.6

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files July 2011–June 2012. Data reflects a 4-month reporting lag

**Table BP-9 FFS Average Member Months by Age and Aid Category, Non-Metropolitan Counties**

Age	Aid Category	Average Member Months				Percent Change	
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	2012 Qtr 3 Compared to 2011 Qtr 4	2012 Qtr 3 Compared to Previous Qtr
0 - 20	Blind/Disabled	2,988	2,970	2,933	2,906	-2.7	-0.9
	Families	52,421	52,421	52,357	52,388	-0.1	0.1
	Foster Care	3,405	3,422	3,462	3,492	2.6	0.9
	Other	8,868	8,669	8,827	9,228	4.1	4.5
	Undocumented	1,926	1,889	1,821	1,749	-9.2	-4.0
21 & over	Aged	263	267	273	286	8.7	4.8
	Blind/Disabled	16,119	16,126	16,110	16,066	-0.3	-0.3
	Families	26,951	27,064	27,041	26,999	0.2	-0.2
	Other	1,521	1,590	1,608	1,675	10.1	4.2
	Undocumented	5,163	5,158	5,090	4,981	-3.5	-2.1
<b>Total</b>		119,625	119,576	119,522	119,770	0.1	0.2

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012. Data reflects a 4-month reporting lag.

## Appendix B—Medi-Cal Aid Codes

Aid codes are assigned to each Medi-Cal beneficiary based on how they become eligible for Medi-Cal services. Factors such as age, income, or disability status are some of the criteria used to assess an individual's eligibility for program services. There are over 170 different aid codes that enable DHCS to gain an understanding of how beneficiaries might use Medi-Cal program services.

The aid code categories used for this analysis were intended to group beneficiaries with similar ages, disability status, and benefit scope into groups that might place similar demands on program services. However, some aid categories represent a heterogeneous population that might use Medi-Cal services in quite different ways.

For example, beneficiaries in the Families aid category are mostly comprised of no- or low-income young adults with children who have routine health care needs. However, this aid category also includes families who earn incomes above the Medi-Cal limit, but have a “Medically Needy” individual with one or more serious conditions requiring medical treatment exceeding the family's income. This subpopulation would place stronger demands on program services than others in the Families aid category. Likewise, the Other aid category is comprised of a diverse population, such as individuals in the Breast and Cancer Cervical Treatment Program who have access to a restricted scope of benefits, long-term care recipients, and the medically indigent, among other populations. See table below.

A more detailed breakdown of aid codes within each category can be found at [http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part1/aidcodes\\_z01c00.doc](http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part1/aidcodes_z01c00.doc)

<b>Detail Aid Category</b>	<b>Rolled up Aid Category</b>	<b>Aid Codes</b>
<b>BCCTP</b>	Other	OL, OM, ON, OP, OR, OT, OU, OV, OW, OX, OY
<b>Inmates</b>	Other	F1, F2, F3, F4, G1, G2, G3, G4
<b>Hurricane Katrina Evacuees</b>	Other	65
<b>MI - Adoption or Foster Care</b>	Foster Care	03, 04, 06, 45, 46, 4A, 4K, 4M, 5K
<b>MI – Adult</b>	Other	81, 86, 87
<b>MI - Child</b>	Other	82, 83, 5E, 7T, 8U, 8V, 8W
<b>MI - LTC</b>	Other	53
<b>MN - Aged</b>	Aged	14, 17, 1D, 1H, 1X, 1Y
<b>MN - Blind</b>	Blind/Disabled	24, 27, 2D, 2H
<b>MN - Disabled</b>	Blind/Disabled	64, 67, 6D, 6H, 6S, 6V, 6W, 6X, 6Y, 8G
<b>MN - Families</b>	Families	34, 37, 39, 54, 59, 3D, 3N, 5X, 6J, 6R, 7J
<b>MN - LTC</b>	Other	13, 23, 63
<b>Other</b>	Other	01, 02, 08, 44, 47, 51, 52, 56, 57, 71, 72, 73, 76, 79, 80, 0A, 2A, 2V, 4V, 5V, 6G, 7A, 7F, 7G, 7H, 7M, 7N, 7P, 7R, 7V, 8E, 8P, 8R
<b>PA - Adoption or Foster Care</b>	Foster Care	40, 42, 43, 77, 78, 4C, 4F, 4G, 4H, 4L, 4T
<b>PA - Aged</b>	Aged	10, 16, 18, 1E
<b>PA - Blind</b>	Blind/Disabled	20, 26, 28, 2E, 6A
<b>PA - Disabled</b>	Blind/Disabled	36, 60, 66, 68, 6C, 6E, 6N, 6P
<b>PA - Families</b>	Families	30, 32, 33, 35, 38, 3A, 3C, 3E, 3G, 3H, 3L, 3M, 3P, 3R, 3U, 3W
<b>Undocumented</b>	Undocumented	07, 48, 49, 55, 58, 69, 70, 74, 75, 1U, 3T, 3V, 5F, 5G, 5J, 5N, 5R, 5T, 5W, 6U, 7C, 7K, 8N, 8T, C1, C2, C3, C4, C5, C6, C7, C8, C9, D1, D2, D3, D4, D5, D6, D7, D8, D9, 5H, 5M, 5Y