



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



Physician Supply

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Medi-Cal Physician Supply

Introduction

Physician availability is an important first step in accessing health care, increasing the likelihood that patients receive preventive services and timely referrals to needed care. Studies have reported that a higher supply of primary care physicians is associated with lower mortality rates, longer life expectancy, and better birth outcomes.

Highlights

Physician supply should not be used as the sole metric in assessing the adequacy of health care access; rather it must be combined with other access-related metrics to derive a holistic view of access.

Overall findings indicate that the statewide supply of physicians potentially available to beneficiaries eligible for Medi-Cal only and entitled to full scope health care services and participating in FFS continued to grow modestly.

Site-specific physician counts increased from 104,659 to 106,335, or 1.6%.

Site-specific primary care physician counts increased 1.7%, from 39,068 to 39,722.

Site-specific OB/GYN physician counts increased 0.7%, from 6,188 to 6,233.

Site-specific pediatrician counts increased 1.2%, from 10,708 to 10,841.

Consequently, physicians have been described as the epicenter of health care delivery, providing patients with a gateway into the health system and affecting how 90% of all health care dollars are spent.

Physician supply provides a measure of the number of physicians who are “potential” care providers, but does not represent the number of providers who are actively rendering care. Evaluating physician supply is designed to provide decision makers with a sense of whether Medi-Cal’s network of physicians is decreasing, increasing, or remaining stable over time. In addition, a system’s provider supply can also be evaluated by geographic region, allowing those charged with maintaining an adequate network to assess differences throughout the state. Significant changes in the supply of physicians combined with other information may provide insight into various aspects of health care access. Long-term trends may help decision makers evaluate policies that may be inhibiting physician supply.

The counts of physicians in this report represent physician supply, or the number of physicians potentially available to provide services to Medi-Cal beneficiaries. The term physician supply is not to be confused with the concept of physician participation. The concept of physician supply is prospective. It is a measure that

reports the number of physicians who enrolled and were potentially available to provide services. The concept of physician participation is retrospective. It reports the number of physicians who actually provided or rendered services to Medi-Cal beneficiaries as measured from paid claims data.

Readers should be aware that “physician supply” does not represent, in and of itself, a metric that can be used to assess the adequacy of health care access. Rather, it must be combined with an assessment of other access-related metrics to derive a holistic view of access.

In previous versions of the Access Quarterly Report, a beneficiary-to-provider ratio was calculated to reflect the number of beneficiaries enrolled under the FFS delivery of care model who have Medi-Cal only coverage for every provider. This metric has since been replaced with a simple calculation of the site-specific number of providers enrolled in the program. Site-specific physician counts are a system wide metric designed to alert Department management of changes in the number of providers and provider sites over time. Much like an internal control, this metric was designed to identify system wide trends that may adversely impact access to health care services in the future. Continuously monitoring these trends provides useful early warning signs that adverse changes may be materializing or that the supply of physicians has been stable over time.

Methods

Physician Enrollment Status

Physician supply metrics are based on those physicians who have gone through the Medi-Cal provider application and enrollment process¹ and who have a current “Active” (Billing) or “Indirect” (Rendering) enrollment status for the period reported. Physicians with an “Active” status directly bill Medi-Cal. Physicians with an “Indirect/Rendering” status render services on behalf of a medical group or clinic that bills for the services rendered.

Physicians who want to treat Medi-Cal beneficiaries must apply for a Medi-Cal provider number. Applications are reviewed and processed in accordance with Medi-Cal provider enrollment statutes. The review of a physician’s application package is a complex process that requires assessment of many elements of the application, including a review of the required supporting documentation, to determine eligibility for enrollment into the Medi-Cal program. DHCS may conduct a background check of an applicant for the purpose of verifying information. This background check may include an unannounced onsite inspection, a review of business records, and data searches to ensure that the applicant or provider meets enrollment criteria.^{2,3}

Data Source

The Medi-Cal Provider Master Enrollment File (PMF) was used as the primary data source for measuring physician supply. Physicians were identified in the PMF as providers with a provider type of “026” (physician). Primary care physicians were identified using the primary care indicator on the PMF and selecting from a narrow range of specialty areas: General Medicine, Family Practice, Gynecology, Obstetrics, Geriatrics, Internal Medicine, Pediatrics, and Clinics with mixed specialties.

Quarterly counts are presented in this report, based on the first month of each quarter. Only physicians enrolled and coded with a valid California county were included. The PMF presents providers in one of these enrollment statuses: 1-Active, 2-Inactive, 3-Pending, 4-Deceased, 5-Rejected, 6-Suspended, 7-Indirect/Rendering, or 9-Temp Suspension. This report presents only counts of physicians that have a current “Active” (Billing) or “Indirect” (Rendering) enrollment status for the period reported.

¹ “Provider Enrollment Regulations, California Code of Regulations, Title 22, Division 3; URL: https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-other/provappsenroll/05enrollment_regulations.pdf

² “Medi-Cal Provider Enrollment, Frequently Asked Questions,” URL: <http://www.dhcs.ca.gov/provgovpart/Pages/PEDFrequentlyAskedQuestions.aspx>

³ Medi-Cal Provider Agreement DHCS 6208 form; URL: <https://files.medi-cal.ca.gov/pubsdoco/forms.asp>

How Are Physicians Counted?

There are various ways to count physicians, each of which produces different totals. Physicians can be counted as the:

- Number of distinct individual physicians or physician groups;
- Number of physicians at distinct service locations; and
- Number of physicians at distinct service locations providing specific categories of service.

Some physicians may practice at multiple sites or locations. For the purpose of evaluating beneficiary access to care using physician counts, the last method is most appropriate, since geographic accessibility and appropriateness of care are two major elements of access. The reporting unit for physicians in this report is the unique combination of the physician provider ID, physician location identifier, and physician type. For individual physicians, the provider ID number is their license number as reported to the Medical Board of California. All other providers, including physician groups, are traced back to their original provider number, usually to one that predates the onset of the National Provider ID (NPI).

This method is necessary in order to avoid double-counting physicians who have successfully applied for multiple NPI's, a common occurrence that has a cumulative effect over time.

However, counting distinct physicians in combination with their location may overstate physician supply in some cases. For example, if a physician practices in one office location two days per week, and another office location the remainder of the week, but both offices are located within Sacramento County, the physician will be represented as two full-time equivalent physicians in the tables presented in this report. This scenario only modestly inflates overall as well as county-specific Medi-Cal physician supply in this report by a magnitude of roughly 400 physicians per quarter, or <1% of total physician counts.

Results–Physician Supply

The following tables report the number of physicians, primary care physicians, and other physician specialists. The tables cover four consecutive quarters from the fourth quarter of 2011 to the third quarter of 2012 and indicate the magnitude of change over this period

You can view county-level details in tables PS-6 to PS-10 in the [Appendix](#).

Table PS-1 Summary and Description of Physician Supply Tables

Table	Description
Table PS-2	All Enrolled Physicians with an Active or Indirect status at a given location. Includes both Primary Care and Specialty physicians.
Table PS-3	All Enrolled Primary Care Physicians with an Active or Indirect status at a given location. Primary Care Physicians include those with specialties listed as General Medicine, Family Practice, Gynecology, Obstetrics, Geriatrics, Internal Medicine, Pediatrics, and Clinics with mixed specialties.
Table PS-4	All Physicians with an OB/GYN Specialty and an Active or Indirect status at a given location.
Table PS-5	All Physicians with a Pediatrics Specialty and an Active or Indirect status at a given location.

DHCS calculated site-specific physician counts both by county and by plan model type, in order to detect changes over the four quarters and to discern differences between counties and between plan model types. Plan model type is determined by county of enrollment. [Figure PS-1](#) shows the distribution of plan model types by county.

Table PS-2 includes site-specific counts of all enrolled physicians identified in the Provider Master File. Table PS-3, Table PS-4, and Table PS-5 include only those physicians identified in the Provider Master File with a given specialty area. Due to a technical correction in the programming code used to count physicians, totals will be about three percent lower than previously reported.

Overall, the 28 primarily rural FFS counties have fewer physicians. This finding is consistent with other research and survey data that has reported that rural areas are also frequently health provider shortage areas. [Figure PS-2](#) displays the location of areas designated as primary care Health Provider Shortage Areas.

Figure PS-1 Health Plan Models by County, September 2012

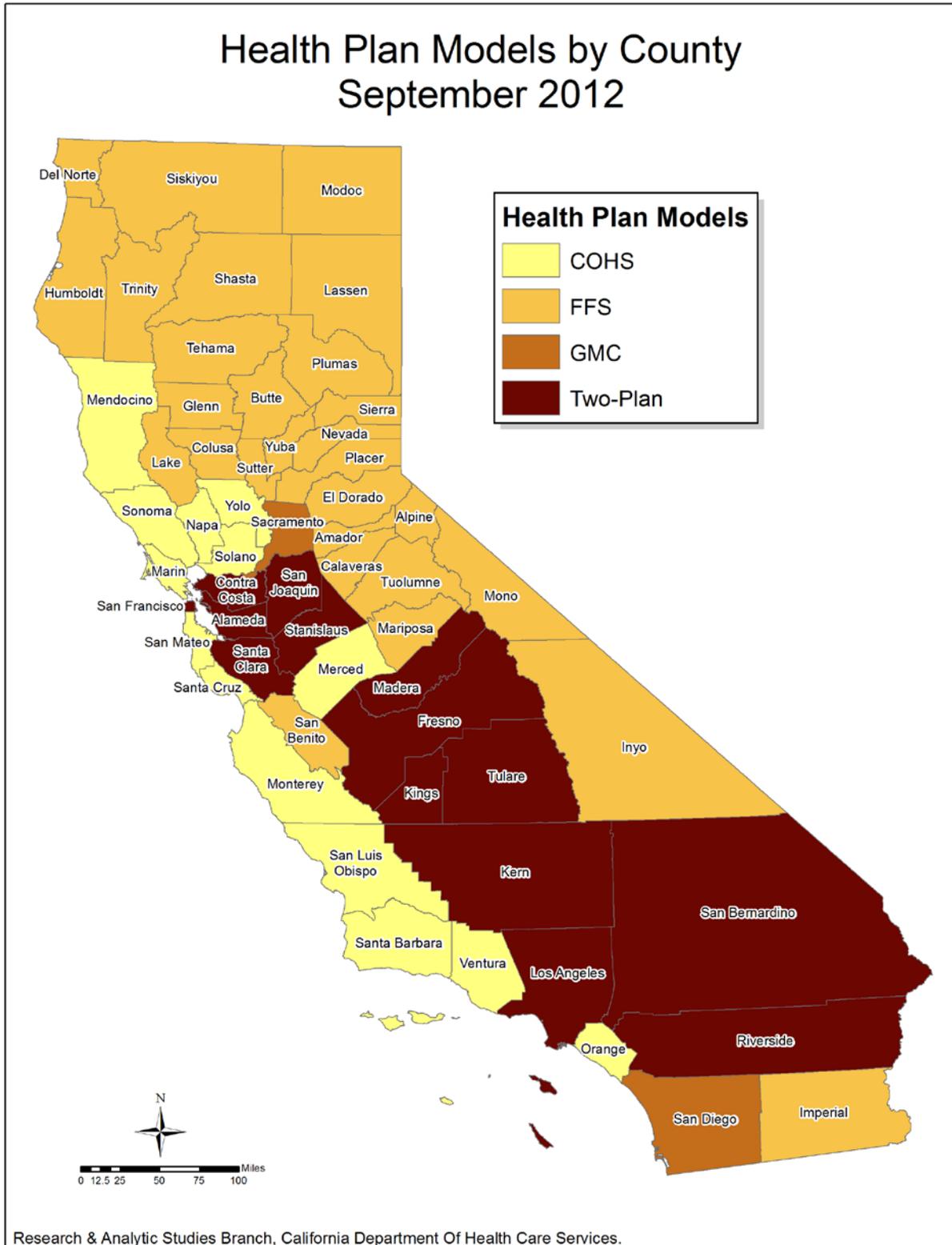
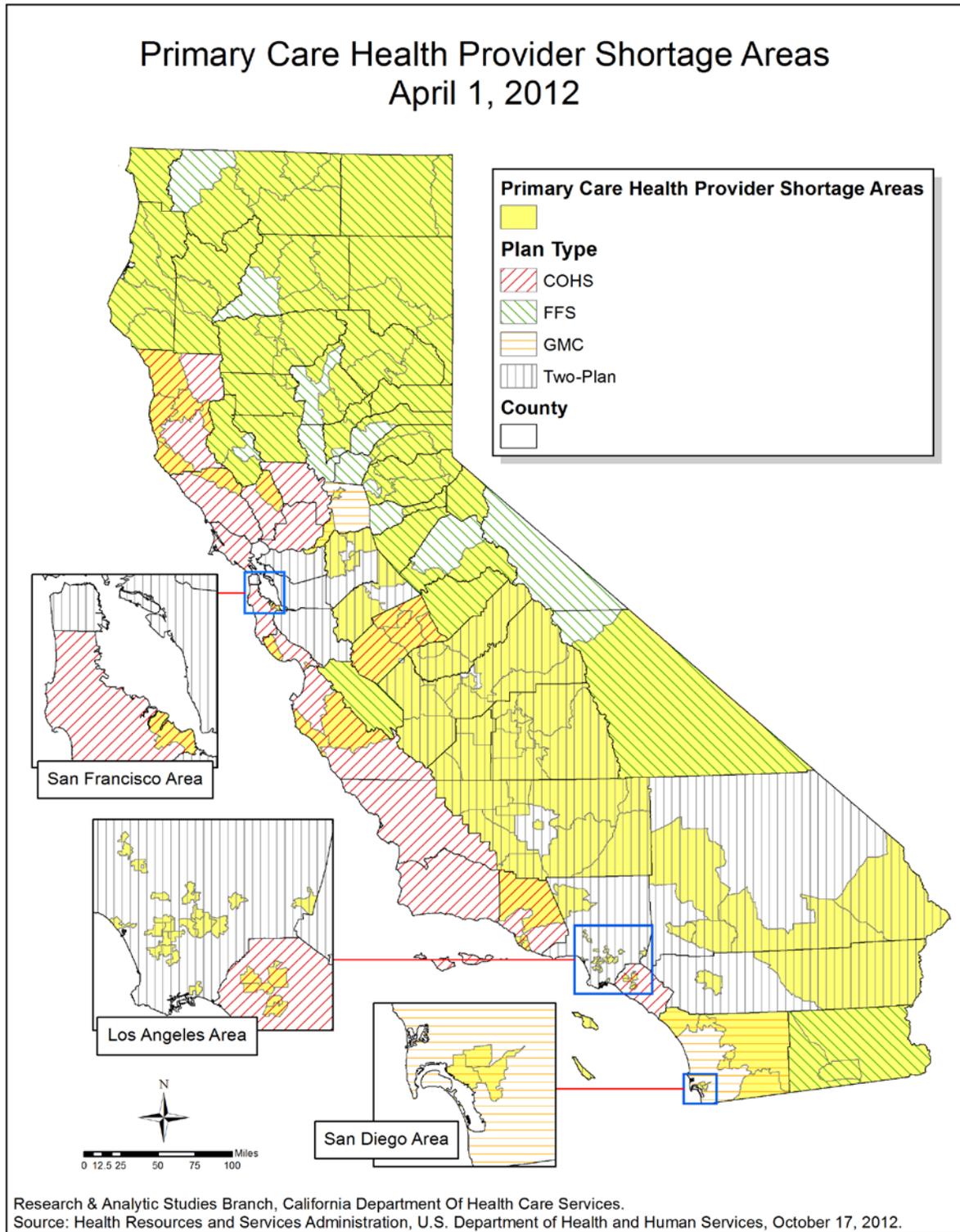


Figure PS-2 Primary Care Health Provider Shortage Areas, April 2012*



*Data identifying health provider shortage areas are from the Health Resources and Services Administration as of April 2012.

Number of Physicians

Table PS-2 presents site-specific counts of all enrolled physicians by county plan model type. Site-specific physician counts statewide increased from 104,659 to 106,335, or 1.6%.

Physician counts by Plan Type showed increases ranging from 0.5% for Fee-For-Service counties to 1.8% for Two-Plan counties. Average counts for counties over the four quarters ranged from as few as two in Alpine County and fewer than 20 in four other counties, to as high as 29,192 in Los Angeles County (see Table PS-6 in the [Appendix](#) for county level detail). Figure PS-3 and Figure PS-4 show all enrolled physicians and the change in all enrolled physicians during the study period.

Site-specific physician counts statewide increased 1.6% from 104,659 to 106,335.

Table PS-2 Physician Supply, All Enrolled Physician Sites, FFS, Medi-Cal Only

	Site-Specific Physician Counts				Percent Change In Number of Providers
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	
Statewide	104,659	105,608	106,373	106,335	1.6%
County Plan Model Type					
County Organized Health System (COHS)	19,598	19,742	19,885	19,854	1.3%
Fee-for-Service (FFS)	3,961	3,968	3,999	3,982	0.5%
Geographic Managed Care (GMC)	15,810	15,945	16,040	16,007	1.2%
Two-Plan (Commercial Plan and Local Initiative)	65,290	65,953	66,449	66,492	1.8%

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and counts of physicians with Active and Indirect enrollment status from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Figure PS-3 All Enrolled Physicians, by County, July 2012

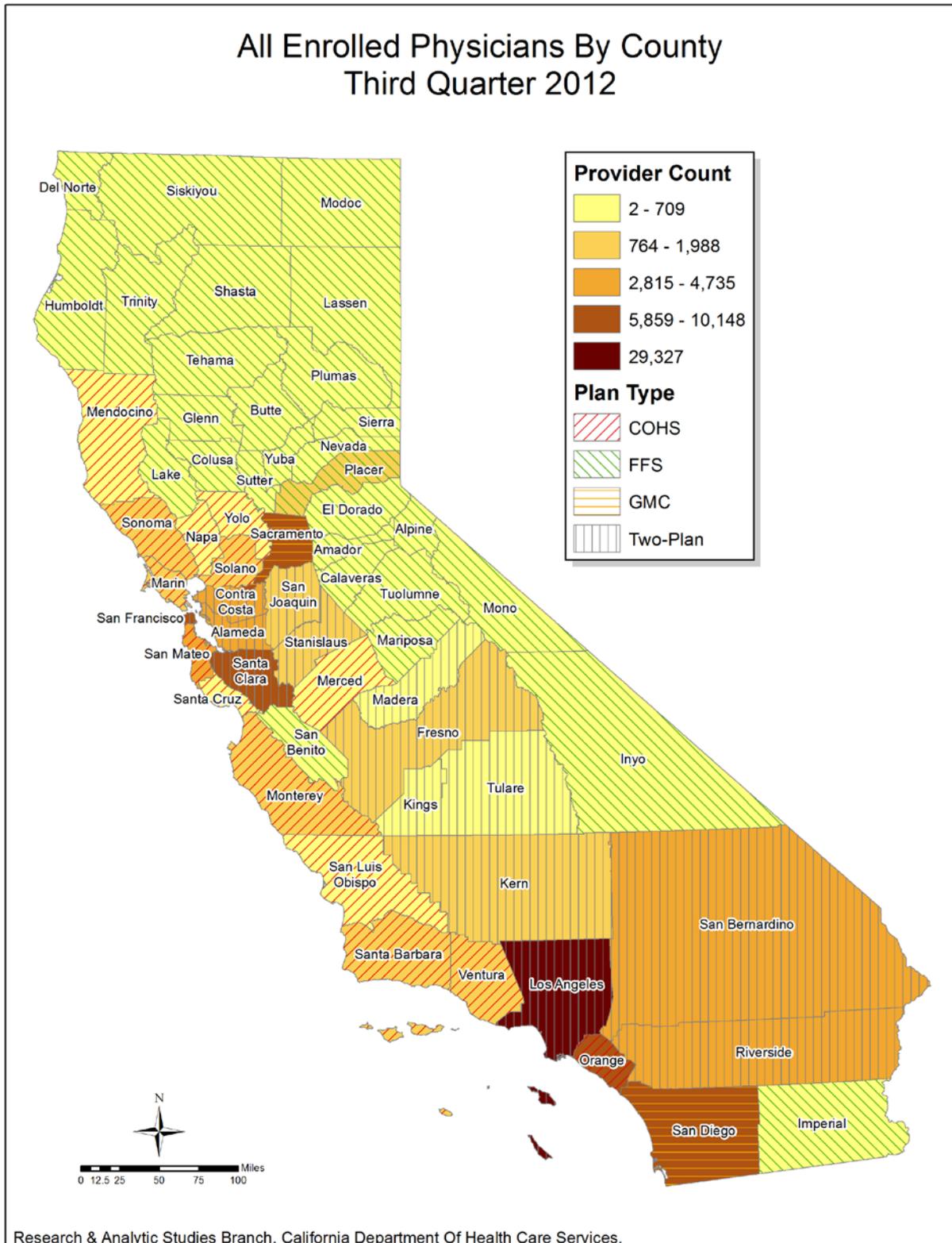
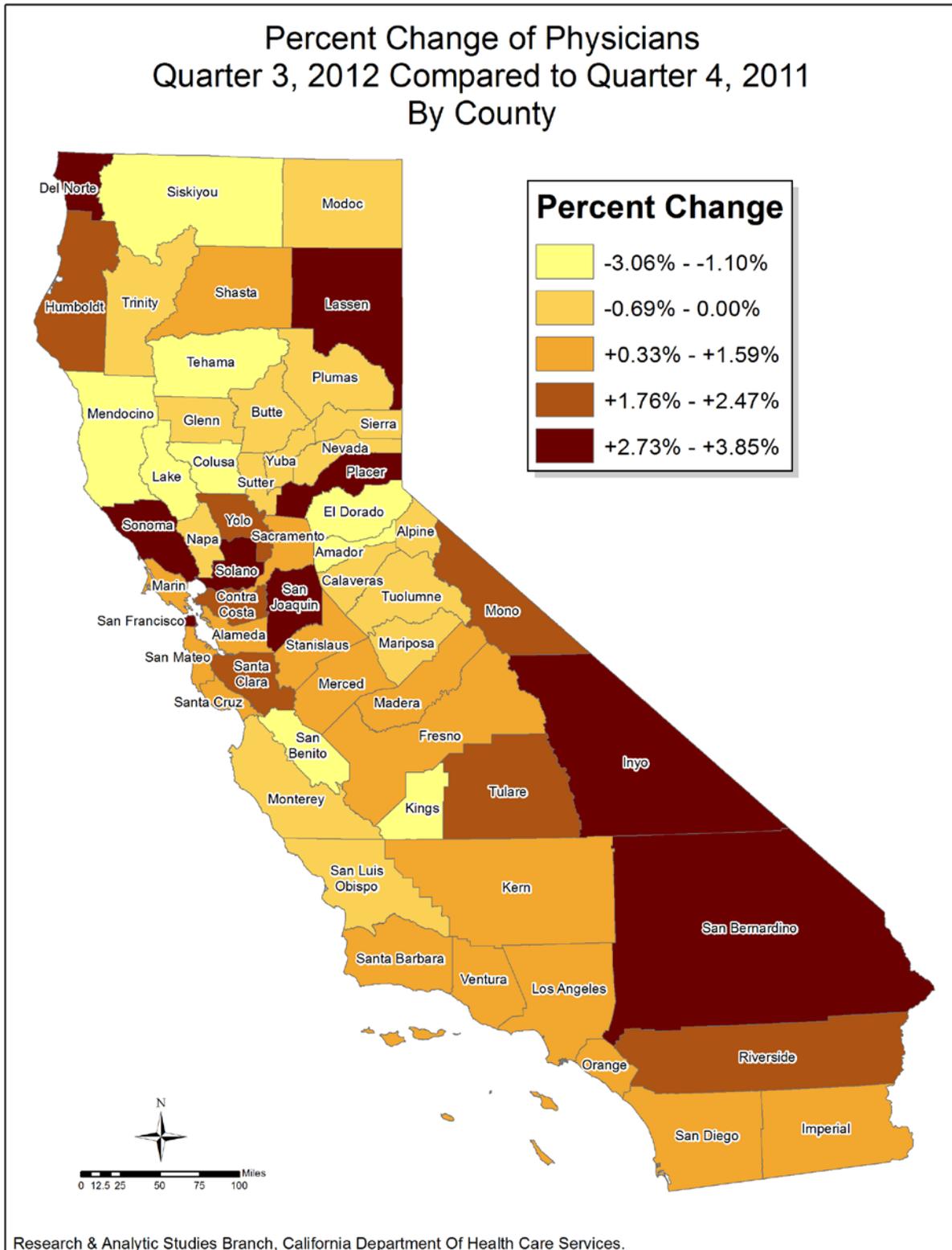


Figure PS-4 Change in All Enrolled Physicians, by County, Oct. 2011-Sept.2012



Primary Care Physicians

Table PS-3 includes site-specific counts of all enrolled primary care physicians by county and county plan model type. Statewide, primary care physician enrollment showed minor improvement from the fourth quarter of 2011 to the third quarter of 2012, increasing from 39,068 to 39,722, or 1.7%.

Physicians by Plan Type showed increases ranging from 0.8% for FFS counties to 1.9% for Two-Plan counties. Average counts ranged from one in Alpine County and fewer than 10 in Sierra, Trinity, and Glenn Counties (All such counties are primarily rural with small populations and offer only the FFS plan model) to 11,482.3 for Los Angeles County (see Table PS-7 in the [Appendix](#) for county level detail). It is important to note that, although there are counties with few registered primary care physicians, Federally Qualified Health Clinics (FQHC), Rural Health Clinics (RHC), and other clinics are able to provide primary care services in these communities. Table PS-10 displays the total number of clinics by county available to serve Medi-Cal beneficiaries.

Statewide, site-specific primary care physician counts showed minor improvement from the fourth quarter of 2011 to the third quarter of 2012, increasing 1.7% from 39,068 to 39,722.

Table PS-3 Primary Care Physicians, All Enrolled Physician Sites, FFS, Full Scope, Medi-Cal Only

	Site-Specific Physician Counts				Percent Change In Number of Providers
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	
Statewide	39,068	39,426	39,747	39,722	1.7%
County Plan Model Type					
County Organized Health System (COHS)	7,369	7,425	7,503	7,488	1.6%
Fee-for-Service (FFS)	1,758	1,759	1,772	1,772	0.8%
Geographic Managed Care (GMC)	5,458	5,494	5,531	5,518	1.1%
Two-Plan (Commercial Plan and Local Initiative)	24,483	24,748	24,941	24,944	1.9%

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and counts of primary care physicians with Active and Indirect enrollment status from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Note: This table was updated using new methodology as outlined in the 2012 Quarter 4 report.

OB/GYN Physicians

Table PS-4 presents site-specific counts of all enrolled OB/GYN physicians. Statewide, OB/GYN physicians increased 0.7% from 6,188 to 6,233 during the study period.

Statewide, OB/GYN physician counts increased 0.7% from 6,188 to 6,233.

GMC counties showed no change over the four quarters. Other Plan Types showed increases from 0.7% for Two-Plan counties to 1.2% for COHS counties. Los Angeles County had an average of 1720 OB/GYNs enrolled in Medi-Cal (see Table PS-8 in the [Appendix](#) for county level detail). However, 21 counties had ten or fewer, and four counties had no physicians with an OB/GYN designation. All such counties are primarily rural with small populations and offer only the FFS plan model. These counties have little or no OB/GYN physician presence according to California's Medical Board physician counts.

Low OB/GYN provider counts in some counties do not necessarily mean that beneficiaries have limited access to gynecological health care services. Federally Qualified Health Clinics (FQHC), Rural Health Clinics (RHC), other clinics, and general care physicians with a specialty other than OB/GYN may provide these services to beneficiaries residing in communities where few OB/GYN specialists exist. Table PS-12 in the Appendix displays the total number of clinics by county available to serve Medi-Cal beneficiaries.

Table PS-4 Physician Supply, Physicians with an OB/GYN Specialty, FFS, Medi-Cal Only, Non-Elderly Adult Females

	Site-Specific Physician Counts				% Change In Number of Providers
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	
Statewide	6,188	6,244	6,281	6,233	0.7%
County Plan Model Type					
County Organized Health System (COHS)	1,244	1,258	1,265	1,259	1.2%
Fee-for-Service (FFS)	223	221	225	225	0.9%
Geographic Managed Care (GMC)	801	806	807	801	0.0%
Two-Plan (Commercial Plan and Local Initiative)	3,920	3,959	3,984	3,948	0.7%

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and counts of OB/GYN physicians with Active and Indirect enrollment status from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Pediatricians

Table PS-5 includes site-specific counts of all enrolled pediatric physicians by county plan model type. Enrollment increased statewide from 10,708 pediatricians in the fourth quarter of 2011 to 10,841 in the third quarter of 2012, for a 1.2% increase.

The number of pediatricians by Plan Type increased from 0.6% for GMC counties to 1.9% for FFS counties. Los Angeles County had the highest average number of pediatricians with 2,898 (see [Table PS-9](#) in the [Appendix](#) for county level detail). In 13 counties, there were fewer than ten pediatricians and zero in seven other counties. The 20 counties with low counts or no count of pediatricians are all FFS plan counties and primarily rural. As with the OB/GYN specialty, FQHCs, RHCs and other clinics, and general care physicians with a specialty other than pediatrics may render pediatric services in these communities. Table PS-10 in the [Appendix](#) displays the total number of clinics by county available to serve Medi-Cal beneficiaries.

Pediatrician counts increased 1.2% statewide from 10,708 to 10,841 pediatricians.

Table PS-5 Physician Supply, Physicians with a Pediatric Specialty, FFS, Full Scope, Medi-Cal Only Children

	Site-Specific Physician Counts				Percent Change In Number of Providers
	2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	
Statewide	10,708	10,779	10,862	10,841	1.2%
County Plan Model Type					
County Organized Health System (COHS)	1,877	1,883	1,897	1,899	1.2%
Fee-for-Service (FFS)	266	268	272	271	1.9%
Geographic Managed Care (GMC)	1,458	1,467	1,471	1,467	0.6%
Two-Plan (Commercial Plan and Local Initiative)	7,107	7,161	7,222	7,204	1.4%

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and counts of pediatricians with Active and Indirect enrollment status from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Conclusions—Physician Supply

1. DHCS evaluated all 58 counties and plan model types (i.e., Two-Plan, GMC, and FFS) with respect to physician supply from the fourth quarter of 2011 to the third quarter of 2012. The findings indicate that the statewide supply of physicians potentially available to beneficiaries eligible for full scope Med-Cal only and participating in FFS continued to grow modestly.
2. Site-specific physician counts increased from 104,659 to 106,335, or 1.6%.
3. During the period under study, site-specific counts of physicians with a specialty (primary care, OB/GYN, pediatrics) grew modestly. Site-specific primary care physician counts increased 1.7%, from 39,068 to 39,722. Site-specific OB/GYN physician counts increased 0.7%, from 6,188 to 6,233. And, site-specific pediatrician counts increased 1.2%, from 10,708 to 10,841.

Appendix: Physician Supply by County

Table PS-6 Physician Supply, All Enrolled Physicians, by Plan Model Type and County

		Site-Specific Physician Counts					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Physicians	Percent Change
Statewide		104,659	105,608	106,373	106,335	105,743.8	1.6%
County Plan Model Type							
County Organized Health System (COHS)		19,598	19,742	19,885	19,854	19,769.8	1.3%
Fee-for-Service (FFS)		3,961	3,968	3,999	3,982	3,977.5	0.5%
Geographic Managed Care (GMC)		15,810	15,945	16,040	16,007	15,950.5	1.2%
Two-Plan (Commercial Plan and Local Initiative)		65,290	65,953	66,449	66,492	66,046.0	1.8%
County							
Alameda	Two-Plan	4,661	4,695	4,730	4,735	4,705.3	1.6%
Alpine	FFS	2	2	2	2	2.0	0.0%
Amador	FFS	54	54	54	53	53.8	-1.9%
Butte	FFS	502	503	505	502	503.0	0.0%
Calaveras	FFS	48	48	47	48	47.8	0.0%
Colusa	FFS	40	39	39	39	39.3	-2.5%
Contra Costa	Two-Plan	2,831	2,864	2,892	2,901	2,872.0	2.5%
Del Norte	FFS	52	52	52	54	52.5	3.8%
El Dorado	FFS	273	273	274	265	271.3	-2.9%
Fresno	Two-Plan	1,965	1,982	1,999	1,988	1,983.5	1.2%
Glenn	FFS	21	21	21	21	21.0	0.0%
Humboldt	FFS	398	400	404	405	401.8	1.8%
Imperial	FFS	201	201	211	202	203.8	0.5%
Inyo	FFS	35	35	34	36	35.0	2.9%
Kern	Two-Plan	1,728	1,736	1,746	1,749	1,739.8	1.2%
Kings	Two-Plan	182	181	181	180	181.0	-1.1%
Lake	FFS	113	113	112	111	112.3	-1.8%
Lassen	FFS	28	30	29	29	29.0	3.6%
Los Angeles	Two-Plan	28,905	29,158	29,377	29,327	29,191.8	1.5%
Madera	Two-Plan	286	287	292	290	288.8	1.4%
Marin *	COHS	756	760	762	764	760.5	1.1%
Mariposa	FFS	19	19	18	19	18.8	0.0%
Mendocino *	COHS	198	197	197	194	196.5	-2.0%
Merced	COHS	364	364	367	368	365.8	1.1%
Modoc	FFS	14	14	14	14	14.0	0.0%

		Site-Specific Physician Counts					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Physicians	Percent Change
Mono	FFS	41	41	41	42	41.3	2.4%
Monterey	COHS	872	875	877	866	872.5	-0.7%
Napa	COHS	361	359	360	361	360.3	0.0%
Nevada	FFS	187	187	189	187	187.5	0.0%
Orange	COHS	7,788	7,851	7,909	7,889	7,859.3	1.3%
Placer	FFS	747	752	765	768	758.0	2.8%
Plumas	FFS	33	33	33	33	33.0	0.0%
Riverside	Two-Plan	2,841	2,884	2,916	2,899	2,885.0	2.0%
Sacramento	GMC	5,795	5,839	5,875	5,859	5,842.0	1.1%
San Benito	FFS	62	61	61	61	61.3	-1.6%
San Bernardino	Two-Plan	4,498	4,596	4,619	4,631	4,586.0	3.0%
San Diego	GMC	10,015	10,106	10,165	10,148	10,108.5	1.3%
San Francisco	Two-Plan	6,442	6,503	6,547	6,622	6,528.5	2.8%
San Joaquin	Two-Plan	1,465	1,485	1,497	1,505	1,488.0	2.7%
San Luis Obispo	COHS	465	465	469	465	466.0	0.0%
San Mateo	COHS	2,774	2,788	2,813	2,815	2,797.5	1.5%
Santa Barbara	COHS	1,101	1,108	1,106	1,111	1,106.5	0.9%
Santa Clara	Two-Plan	7,522	7,597	7,651	7,668	7,609.5	1.9%
Santa Cruz	COHS	611	613	617	613	613.5	0.3%
Shasta	FFS	473	477	477	477	476.0	0.8%
Sierra	FFS	5	5	5	5	5.0	0.0%
Siskiyou	FFS	83	82	82	82	82.3	-1.2%
Solano	COHS	1,291	1,321	1,338	1,333	1,320.8	3.3%
Sonoma	COHS	1,135	1,145	1,157	1,166	1,150.8	2.7%
Stanislaus	Two-Plan	1,271	1,282	1,291	1,288	1,283.0	1.3%
Sutter	FFS	161	159	163	161	161.0	0.0%
Tehama	FFS	98	98	98	95	97.3	-3.1%
Trinity	FFS	12	12	12	12	12.0	0.0%
Tulare	Two-Plan	693	703	711	709	704.0	2.3%
Tuolumne	FFS	99	97	98	99	98.3	0.0%
Ventura *	COHS	1,421	1,426	1,441	1,438	1,431.5	1.2%
Yolo	COHS	461	470	472	471	468.5	2.2%
Yuba	FFS	160	160	159	160	159.8	0.0%

*Shifted from FFS to COHS Model on July 1, 2011

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files July 2011– June 2012 (reflecting a 4-month reporting lag) and data from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Table PS-7 Primary Care Physician Supply, All Enrolled Physicians, by Plan Model Type and County

		Number of Providers					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Statewide		39,068	39,426	39,747	39,722	39,490.8	1.7%
County Plan Model Type							
County Organized Health System (COHS)		7,369	7,425	7,503	7,488	7,446.3	1.6%
Fee-for-Service (FFS)		1,758	1,759	1,772	1,772	1,765.3	0.8%
Geographic Managed Care (GMC)		5,458	5,494	5,531	5,518	5,500.3	1.1%
Two-Plan (Commercial Plan and Local Initiative)		24,483	24,748	24,941	24,944	24,779.0	1.9%
County							
Alameda	Two-Plan	1,639	1,651	1,668	1,667	1,656.3	1.7%
Alpine	FFS	1	1	1	1	1.0	0.0%
Amador	FFS	33	33	32	31	32.3	-6.1%
Butte	FFS	190	190	193	191	191.0	0.5%
Calaveras	FFS	25	25	24	25	24.8	0.0%
Colusa	FFS	30	30	30	30	30.0	0.0%
Contra Costa	Two-Plan	1,100	1,109	1,125	1,132	1,116.5	2.9%
Del Norte	FFS	26	26	26	27	26.3	3.8%
El Dorado	FFS	103	103	103	104	103.3	1.0%
Fresno	Two-Plan	738	749	757	757	750.3	2.6%
Glenn	FFS	9	9	9	9	9.0	0.0%
Humboldt	FFS	184	184	185	185	184.5	0.5%
Imperial	FFS	63	65	70	68	66.5	7.9%
Inyo	FFS	18	18	18	18	18.0	0.0%
Kern	Two-Plan	701	704	709	709	705.8	1.1%
Kings	Two-Plan	83	82	82	81	82.0	-2.4%
Lake	FFS	48	48	48	48	48.0	0.0%
Lassen	FFS	14	15	15	15	14.8	7.1%
Los Angeles	Two-Plan	11,363	11,476	11,567	11,523	11,482.3	1.4%
Madera	Two-Plan	65	65	64	65	64.8	0.0%
Marin *	COHS	310	309	315	315	312.3	1.6%
Mariposa	FFS	12	12	11	12	11.8	0.0%
Mendocino *	COHS	71	71	71	71	71.0	0.0%
Merced	COHS	166	167	169	169	167.8	1.8%
Modoc	FFS	11	11	11	11	11.0	0.0%
Mono	FFS	19	19	19	19	19.0	0.0%
Monterey	COHS	339	339	343	343	341.0	1.2%
Napa	COHS	112	110	111	112	111.3	0.0%

		Number of Providers					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Nevada	FFS	88	88	88	87	87.8	-1.1%
Orange	COHS	2,717	2,743	2,766	2,745	2,742.8	1.0%
Placer	FFS	352	353	359	359	355.8	2.0%
Plumas	FFS	25	25	25	25	25.0	0.0%
Riverside	Two-Plan	1,198	1,218	1,237	1,232	1,221.3	2.8%
Sacramento	GMC	1,975	1,986	1,997	1,991	1,987.3	0.8%
San Benito	FFS	24	23	23	24	23.5	0.0%
San Bernardino	Two-Plan	1,878	1,913	1,927	1,936	1,913.5	3.1%
San Diego	GMC	3,483	3,508	3,534	3,527	3,513.0	1.3%
San Francisco	Two-Plan	2,019	2,040	2,050	2,078	2,046.8	2.9%
San Joaquin	Two-Plan	556	562	563	567	562.0	2.0%
San Luis Obispo	COHS	165	165	167	165	165.5	0.0%
San Mateo	COHS	983	992	1,006	1,011	998.0	2.8%
Santa Barbara	COHS	356	356	356	357	356.3	0.3%
Santa Clara	Two-Plan	2,355	2,383	2,394	2,398	2,382.5	1.8%
Santa Cruz	COHS	242	243	246	247	244.5	2.1%
Shasta	FFS	205	205	206	205	205.3	0.0%
Sierra	FFS	5	5	5	5	5.0	0.0%
Siskiyou	FFS	39	38	39	39	38.8	0.0%
Solano	COHS	542	556	565	563	556.5	3.9%
Sonoma	COHS	498	499	502	505	501.0	1.4%
Stanislaus	Two-Plan	530	536	537	538	535.3	1.5%
Sutter	FFS	79	79	78	78	78.5	-1.3%
Tehama	FFS	48	48	48	48	48.0	0.0%
Trinity	FFS	5	5	5	5	5.0	0.0%
Tulare	Two-Plan	258	260	261	261	260.0	1.2%
Tuolumne	FFS	42	40	41	42	41.3	0.0%
Ventura *	COHS	649	650	660	658	654.3	1.4%
Yolo	COHS	219	225	226	227	224.3	3.7%
Yuba	FFS	60	61	60	61	60.5	1.7%

*Shifted from FFS to COHS Model on July 1, 2011

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and data from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2011

Table PS-8 Physician Supply, Physicians with an OB/GYN Specialty, by Plan Model Type and County

		Site-Specific Physician Counts					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Statewide		6,188	6,244	6,281	6,233	6,236.5	0.7%
County Plan Model Type							
County Organized Health System (COHS)		1,244	1,258	1,265	1,259	1,256.5	1.2%
Fee-for-Service (FFS)		223	221	225	225	223.5	0.9%
Geographic Managed Care (GMC)		801	806	807	801	803.8	0.0%
Two-Plan (Commercial Plan and Local Initiative)		3,920	3,959	3,984	3,948	3,952.8	0.7%
County							
Alameda	Two-Plan	291	294	296	298	294.8	2.4%
Alpine	FFS	-	-	-	-	-	-
Amador	FFS	5	5	5	5	5.0	0.0%
Butte	FFS	32	32	34	35	33.3	9.4%
Calaveras	FFS	1	1	1	1	1.0	0.0%
Colusa	FFS	1	1	1	1	1.0	0.0%
Contra Costa	Two-Plan	147	150	151	151	149.8	2.7%
Del Norte	FFS	3	3	3	2	2.8	-33.3%
El Dorado	FFS	15	15	15	15	15.0	0.0%
Fresno	Two-Plan	126	125	127	122	125.0	-3.2%
Glenn	FFS	1	1	1	1	1.0	0.0%
Humboldt	FFS	18	18	18	18	18.0	0.0%
Imperial	FFS	17	17	17	16	16.8	-5.9%
Inyo	FFS	2	2	2	3	2.3	50.0%
Kern	Two-Plan	100	100	99	101	100.0	1.0%
Kings	Two-Plan	10	9	9	9	9.3	-10.0%
Lake	FFS	4	4	4	4	4.0	0.0%
Lassen	FFS	1	1	1	1	1.0	0.0%
Los Angeles	Two-Plan	1,715	1,727	1,733	1,703	1,719.5	-0.7%
Madera	Two-Plan	15	15	15	15	15.0	0.0%
Marin *	COHS	32	32	32	32	32.0	0.0%
Mariposa	FFS	-	-	-	-	-	-
Mendocino *	COHS	21	21	21	20	20.8	-4.8%
Merced	COHS	22	22	22	22	22.0	0.0%
Modoc	FFS	1	1	1	1	1.0	0.0%

		Site-Specific Physician Counts					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Mono	FFS	1	1	1	1	1.0	0.0%
Monterey	COHS	71	71	71	71	71.0	0.0%
Napa	COHS	17	17	17	17	17.0	0.0%
Nevada	FFS	13	13	13	13	13.0	0.0%
Orange	COHS	558	564	570	564	564.0	1.1%
Placer	FFS	52	52	52	52	52.0	0.0%
Plumas	FFS	1	1	1	1	1.0	0.0%
Riverside	Two-Plan	190	194	195	191	192.5	0.5%
Sacramento	GMC	289	290	291	291	290.3	0.7%
San Benito	FFS	4	4	4	4	4.0	0.0%
San Bernardino	Two-Plan	239	247	250	248	246.0	3.8%
San Diego	GMC	512	516	516	510	513.5	-0.4%
San Francisco	Two-Plan	340	341	340	343	341.0	0.9%
San Joaquin	Two-Plan	113	116	117	117	115.8	3.5%
San Luis Obispo	COHS	29	30	30	29	29.5	0.0%
San Mateo	COHS	122	123	123	123	122.8	0.8%
Santa Barbara	COHS	72	72	73	73	72.5	1.4%
Santa Clara	Two-Plan	491	496	504	505	499.0	2.9%
Santa Cruz	COHS	40	41	40	41	40.5	2.5%
Shasta	FFS	17	17	17	17	17.0	0.0%
Sierra	FFS	-	-	-	-	-	-
Siskiyou	FFS	4	3	4	4	3.8	0.0%
Solano	COHS	77	80	79	78	78.5	1.3%
Sonoma	COHS	61	62	63	65	62.8	6.6%
Stanislaus	Two-Plan	69	70	73	70	70.5	1.4%
Sutter	FFS	14	13	14	14	13.8	0.0%
Tehama	FFS	5	5	5	5	5.0	0.0%
Trinity	FFS	-	-	-	-	-	-
Tulare	Two-Plan	74	75	75	75	74.8	1.4%
Tuolumne	FFS	7	7	7	7	7.0	0.0%
Ventura *	COHS	94	95	96	96	95.3	2.1%
Yolo	COHS	28	28	28	28	28.0	0.0%
Yuba	FFS	4	4	4	4	4.0	0.0%

*Shifted from FFS to COHS Model on July 1, 2011

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and data from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Table PS-9 Physician Supply, Physicians with a Pediatric Specialty, by Plan Model Type and County

		Number of Providers					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Statewide		10,708	10,779	10,862	10,841	10,797.5	1.2%
County Plan Model Type							
County Organized Health System (COHS)		1,877	1,883	1,897	1,899	1,889.0	1.2%
Fee-for-Service (FFS)		266	268	272	271	269.3	1.9%
Geographic Managed Care (GMC)		1,458	1,467	1,471	1,467	1,465.8	0.6%
Two-Plan (Commercial Plan and Local Initiative)		7,107	7,161	7,222	7,204	7,173.5	1.4%
County							
Alameda	Two-Plan	722	730	733	736	730.3	1.9%
Alpine	FFS	-	-	-	-	-	-
Amador	FFS	2	2	2	2	2.0	0.0%
Butte	FFS	24	24	23	22	23.3	-8.3%
Calaveras	FFS	2	2	2	2	2.0	0.0%
Colusa	FFS	-	-	-	-	-	-
Contra Costa	Two-Plan	239	238	242	242	240.3	1.3%
Del Norte	FFS	5	5	5	5	5.0	0.0%
El Dorado	FFS	17	17	17	17	17.0	0.0%
Fresno	Two-Plan	178	178	180	177	178.3	-0.6%
Glenn	FFS	2	2	2	2	2.0	0.0%
Humboldt	FFS	17	17	17	17	17.0	0.0%
Imperial	FFS	19	19	20	19	19.3	0.0%
Inyo	FFS	5	5	5	5	5.0	0.0%
Kern	Two-Plan	143	141	141	140	141.3	-2.1%
Kings	Two-Plan	11	11	11	11	11.0	0.0%
Lake	FFS	5	5	5	5	5.0	0.0%
Lassen	FFS	2	2	2	2	2.0	0.0%
Los Angeles	Two-Plan	2,874	2,900	2,920	2,899	2,898.3	0.9%
Madera	Two-Plan	146	145	150	148	147.3	1.4%
Marin *	COHS	70	70	70	71	70.3	1.4%
Mariposa	FFS	-	-	-	-	-	-
Mendocino *	COHS	15	15	15	15	15.0	0.0%
Merced	COHS	24	24	24	24	24.0	0.0%
Modoc	FFS	-	-	-	-	-	-

		Number of Providers					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Providers	Percent Change
Mono	FFS	5	5	5	6	5.3	20.0%
Monterey	COHS	85	85	86	86	85.5	1.2%
Napa	COHS	22	22	22	22	22.0	0.0%
Nevada	FFS	11	11	11	11	11.0	0.0%
Orange	COHS	867	868	872	874	870.3	0.8%
Placer	FFS	87	89	92	93	90.3	6.9%
Plumas	FFS	-	-	-	-	-	-
Riverside	Two-Plan	221	225	226	221	223.3	0.0%
Sacramento	GMC	524	527	525	522	524.5	-0.4%
San Benito	FFS	3	3	3	3	3.0	0.0%
San Bernardino	Two-Plan	508	514	516	516	513.5	1.6%
San Diego	GMC	934	940	946	945	941.3	1.2%
San Francisco	Two-Plan	682	687	694	703	691.5	3.1%
San Joaquin	Two-Plan	124	123	130	131	127.0	5.6%
San Luis Obispo	COHS	50	49	49	47	48.8	-6.0%
San Mateo	COHS	266	266	267	267	266.5	0.4%
Santa Barbara	COHS	94	94	94	94	94.0	0.0%
Santa Clara	Two-Plan	1,101	1,108	1,118	1,116	1,110.8	1.4%
Santa Cruz	COHS	45	46	47	46	46.0	2.2%
Shasta	FFS	19	19	19	19	19.0	0.0%
Sierra	FFS	-	-	-	-	-	-
Siskiyou	FFS	3	3	3	3	3.0	0.0%
Solano	COHS	119	119	121	122	120.3	2.5%
Sonoma	COHS	67	69	73	74	70.8	10.4%
Stanislaus	Two-Plan	82	83	83	85	83.3	3.7%
Sutter	FFS	11	11	12	12	11.5	9.1%
Tehama	FFS	10	10	10	9	9.8	-10.0%
Trinity	FFS	-	-	-	-	-	-
Tulare	Two-Plan	76	78	78	79	77.8	3.9%
Tuolumne	FFS	10	10	10	10	10.0	0.0%
Ventura *	COHS	114	116	116	117	115.8	2.6%
Yolo	COHS	39	40	41	40	40.0	2.6%
Yuba	FFS	7	7	7	7	7.0	0.0%

*Shifted from FFS to COHS Model on July 1, 2011

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files July 2011–June 2012 (reflecting a 4-month reporting lag) and data from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.

Table PS-10 Outpatient Rural and FQHC Clinics

		Number of Rural/FQHC Clinics					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Clinics	Percent Change
Statewide		959	957	983	960	964.8	0.1%
County Plan Model Type							
County Organized Health System (COHS)		186	187	195	184	188.0	-1.1%
Fee-for-Service (FFS)		196	197	201	196	197.5	0.0%
Geographic Managed Care (GMC)		80	80	83	79	80.5	-1.3%
Two-Plan (Commercial Plan and Local Initiative)		497	493	504	501	498.8	0.8%
County							
Alameda	Two-Plan	38	39	39	38	38.5	0.0%
Alpine	FFS	1	1	1	1	1.0	0.0%
Amador	FFS	4	4	4	5	4.3	25.0%
Butte	FFS	18	18	19	17	18.0	-5.6%
Calaveras	FFS	7	7	7	7	7.0	0.0%
Colusa	FFS	4	4	5	5	4.5	25.0%
Contra Costa	Two-Plan	16	16	16	16	16.0	0.0%
Del Norte	FFS	4	4	4	4	4.0	0.0%
El Dorado	FFS	6	6	6	6	6.0	0.0%
Fresno	Two-Plan	65	58	59	57	59.8	-12.3%
Glenn	FFS	12	12	13	12	12.3	0.0%
Humboldt	FFS	30	30	30	30	30.0	0.0%
Imperial	FFS	10	10	10	10	10.0	0.0%
Inyo	FFS	6	6	6	6	6.0	0.0%
Kern	Two-Plan	34	35	38	37	36.0	8.8%
Kings	Two-Plan	18	19	18	18	18.3	0.0%
Lake	FFS	10	10	11	10	10.3	0.0%
Lassen	FFS	6	5	5	5	5.3	-16.7%
Los Angeles	Two-Plan	146	147	148	153	148.5	4.8%
Madera	Two-Plan	12	12	12	12	12.0	0.0%
Marin *	COHS	5	5	8	8	6.5	60.0%
Mariposa	FFS	4	4	4	4	4.0	0.0%
Mendocino *	COHS	23	23	24	24	23.5	4.3%
Merced	COHS	26	26	27	22	25.3	-15.4%
Modoc	FFS	4	4	4	4	4.0	0.0%

		Number of Rural/FQHC Clinics					
		2011 Quarter 4	2012 Quarter 1	2012 Quarter 2	2012 Quarter 3	Avg # of Clinics	Percent Change
Mono	FFS	1	1	1	1	1.0	0.0%
Monterey	COHS	21	21	21	21	21.0	0.0%
Napa	COHS	2	2	2	1	1.8	-50.0%
Nevada	FFS	2	2	2	2	2.0	0.0%
Orange	COHS	15	15	15	12	14.3	-20.0%
Placer	FFS	3	3	3	3	3.0	0.0%
Plumas	FFS	6	6	6	6	6.0	0.0%
Riverside	Two-Plan	23	23	23	23	23.0	0.0%
Sacramento	GMC	9	9	9	8	8.8	-11.1%
San Benito	FFS	3	3	3	3	3.0	0.0%
San Bernardino	Two-Plan	13	12	14	14	13.3	7.7%
San Diego	GMC	71	71	74	71	71.8	0.0%
San Francisco	Two-Plan	30	30	32	30	30.5	0.0%
San Joaquin	Two-Plan	8	8	8	8	8.0	0.0%
San Luis Obispo	COHS	12	12	12	12	12.0	0.0%
San Mateo	COHS	16	16	17	15	16.0	-6.3%
Santa Barbara	COHS	17	17	17	18	17.3	5.9%
Santa Clara	Two-Plan	22	22	24	23	22.8	4.5%
Santa Cruz	COHS	8	8	8	8	8.0	0.0%
Shasta	FFS	16	16	16	16	16.0	0.0%
Sierra	FFS	2	2	2	2	2.0	0.0%
Siskiyou	FFS	12	12	12	12	12.0	0.0%
Solano	COHS	8	8	8	8	8.0	0.0%
Sonoma	COHS	15	16	16	16	15.8	6.7%
Stanislaus	Two-Plan	26	26	26	25	25.8	-3.8%
Sutter	FFS	4	4	4	4	4.0	0.0%
Tehama	FFS	8	8	8	7	7.8	-12.5%
Trinity	FFS	2	3	3	3	2.8	50.0%
Tulare	Two-Plan	46	46	47	47	46.5	2.2%
Tuolumne	FFS	4	4	4	4	4.0	0.0%
Ventura *	COHS	12	12	14	13	12.8	8.3%
Yolo	COHS	6	6	6	6	6.0	0.0%
Yuba	FFS	7	8	8	7	7.5	0.0%

*Shifted from FFS to COHS Model on July 1, 2011

Source: Prepared by DHCS Research and Analytic Studies Branch using data from the MEDS System MMEF files October 2011–September 2012 (reflecting a 4-month reporting lag) and data from the Medi-Cal Provider Master File, for the months of October 2011, January 2012, April 2012, and July 2012.