CALIFORNIA'S MEDICAL ASSISTANCE PROGRAM

ANNUAL STATISTICAL REPORT

CALENDAR YEAR 1995

MEDICAL CARE STATISTICS SECTION

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MEDI-CAL PROGRAM

1995

This report presents statistical data on Medi-Cal program services, expenditures, and eligibles for Calendar Year 1995.

County Welfare Departments determine eligibility for all Medi-Cal eligibles with the exception of Supplemental Security Income/State Supplementary Payment (SSI/SSP) eligibles, who have their eligibility determined by the Social Security Administration.

Persons eligible for Medi-Cal are reported to the Medi-Cal Eligibility Data System (MEDS) by the County Welfare Departments, the State, and the Social Security Administration.

Payment data used in this report are based on the concept of month of payment rather than month of service. The difference can be best explained by pointing out that payments made in a given month can be for services rendered in one or more previous months.

It should be noted that expenditures in this report are based on paid claims computer tapes prepared by various entities that process Medi-Cal claims and do not represent official budget figures or accounting records. Audit recovery monies, Medicare premiums, refunds, and administrative expenses are not included in this report except when specifically noted.

This report does not account for drug rebates from contracts with manufacturers nor Disproportionate Share Hospital Payments.

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NOTE ON DATA PRESENTATION

Generally, the data in this report include the Medi-Cal Fee-For-Service Program, Medi-Cal beneficiaries in State Hospitals, and Medi-Cal beneficiaries covered under a capitation contract with Delta Dental Service.

Data on Capitated Health Systems are excluded from a number of tables in this report. Capitated Health Systems receive a monthly capitation payment to provide services to enrollees, so cost figures for specific services are not available.

Beginning with this Calendar Year 1995 Report, Capitated Health Systems data are included in Tables 1, 2, 15, l6, 17, 31, and 32 only.

The Fee-For-Service data for Primary Care Case Management Plan beneficiaries are included in this report.

MEDI-CAL PROGRAM STATISTICAL SUMMARY

CALENDAR YEAR 1995

In 1995, a total of 5.42 million persons per month were eligible for Medi-Cal. This includes Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans.

The 604,213 persons enrolled in Prepaid Health Plans (PHPs) each month reflected an 18.9 percent increase from 1994. PHP capitation payments totaled $705.7 million which was an increase of $105.9 million from 1994.

A total of $303.6 million in prepaid capitations were received by county organized health systems to provide non-dental medical services for an average of 183,884 eligibles per month during 1995.

There were 2.32 million persons who used Medi-Cal benefits each month in 1995. This includes Fee-For-Service Only benefits. Provider payments for those users totaled $10.12 billion in 1995.

The average cost per user was $364.41 per month and the average cost per eligible was $182.09 per month in 1995.

Public Assistance eligibles, excluding Capitated Health System eligibles, averaged 3.37 million persons per month in 1995. This aid group accounted for 73 percent of the Fee-For-Service eligible population, 73 percent of the users, and 56 percent of total provider payments ($5.63 billion).

Medically Needy eligibles averaged 543,081 persons per month in 1995, a decrease of 2.8 percent from 1994. Medically Needy accounted for 12 percent of Fee-For-Service eligibles, 14 percent of users, and 30 percent of total provider payments ($3.08 billion).

Medically Indigent eligibles averaged 249,073 persons per month in 1995, a 1.9 percent decrease from 1994. Medically Indigent accounted for 5 percent of Fee-For-Service eligibles, 5 percent of users, and 4 percent of total provider payments ($371.9 million).

County and community hospital services accounted for 33.2 percent of 1995 provider payments. County hospitals received $952.0 million. Community hospitals received $2.41 billion.

Medi-Cal purchased Medicare Part A and Part B Supplemental Medical Insurance for an average of 728,120 Aged and Disabled eligibles each month in 1995. Monthly premiums averaged $35.7 million.

SECTION 1

HIGHLIGHTS OF 1995 PROGRAM CHANGES

The following discusses the major changes of the Medi-Cal program during Calendar Year 1995.

Mental Health Managed Care Transfer, January 1, 1995

Effective January 1, 1995, the responsibility for administration and payment of inpatient acute psychiatric services has been transferred to the Short/Doyle Local Mental Health program within Department of Mental Health. Funds for the second half of FY 1994-95 were transferred from the Medi-Cal Local Assistance Item to the Department of Mental Health. General Funds for FY 1995-96 will be incorporated directly into the Department of Mental Health budget, and an interagency agreement with the Medi-Cal program provides the matching federal funds.

Effective April 1, 1995, inpatient and outpatient psychiatric services were transferred for San Mateo County Organized Health System participants, and fee-for-service inpatient acute psychiatric services provided in San Mateo County.

Fifty Cent Reduction in Pharmacy Reimbursement, January 1, 1995

Assembly Bill 2377 (Chapter 147, Statutes of 1994) reduces all prescription claims reimbursed through the Medi-Cal outpatient fee-for-service program by fifty cents ($0.50) effective January 1, 1995 (14105.336).

Change to Diagnoses for AIDS Waiver Program, January 6, 1995

Changes made in the 1995 International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), alter the diagnoses for Human Immunodeficiency Virus (HIV) infection. In the 1994 ICD-9-CM, the diagnoses included all component subdivisions of 042 (Human immunodeficiency virus infection with specified conditions), 043 (Human immunodeficiency virus infection causing other specified conditions), and 044 (Other human immunodeficiency virus infection). The 1995 ICD-9-CM has combined all of the aforementioned codes, making the only valid diagnosis for human immunodeficiency virus (HIV) infection: 042 Human immunodeficiency virus (HIV) disease.

Waivers of Medi-Cal Probate Claims, February 1995

Effective in May 1994, the Medi-Cal program implemented new criteria and procedures to grant hardship waivers of probate claims. These changes were mandated by Welfare and Institutions Code 14009.5 as amended by Senate Bill 177 (Chapter 1201, Statutes of 1989). These regulations were repealed by the Office of Administrative Law in September 1994, but new emergency regulations were implemented in February 1995. Subsequent to this, regulations were adopted effective April 27, 1995. Due to public comments and revisions proposed by legal staff, the Certificate of Compliance was withdrawn. New regulations were drafted, approved, and adopted, effective March 19, 1996.

Six-Month Exemption for New Drugs, March 1995

OBRA 1993 eliminated the federal requirement that all drugs approved by the Food & Drug Administration (FDA) be a Medicaid benefit, without prior authorization, for six months from the date of FDA approval. State regulations became effective March 1995 eliminating this requirement from the Medi-Cal program.

Dental Root Canal Authorizations, May 1995

New regulation package R-7-95E requires prior authorization along with pre- and post-operative x-rays for anterior root canal treatment under the Dental-Cal program. These new regulations became effective on May 1, 1995.

Medi-Cal Targeted Case Management (TCM) Program, June 1995

The Medi-Cal program has implemented a claims processing system for Targeted Case Management (TCM) services whereby local governments can claim Federal Financial Participation for the cost of TCM services provided to specific Medi-Cal beneficiaries. Counties and Chartered Cities will provide data, in a prescribed format, which will include the date of service, beneficiary identification number, and appropriate category or service code. The Department of Health Services (DHS) will match the information against the Medi-Cal Eligibility Data System (MEDS) to verify eligibility with the date of service. DHS Accounting will prepare a claims schedule from summary reports, and route the schedule to the State Controller's Office for payment. A yearly payment cap for each county or city will be established. Once the cap is reached, claims will continue to be processed but without payment.

Electronic Funds Transfer, July 1995

In early July 1995, the Department of Health Services implemented Electronic Funds Transfer (EFT). This new system allows providers to receive their payments electronically to their banks as opposed to the mail. In order to participate a provider must be in good standing and must sign-up.

State Hospital Releases, July 1995

State Developmental Centers are in the process of being downsized and in some cases closed and are releasing clients into community settings. Clients being placed into community settings receive noninstitutionalized Medi-Cal services on a fee-for-service basis rather than through the Developmental Centers. Regional Centers for the Developmental Disabled assist the Department of Developmental Services and the Department of Health Services in ensuring clients retain access to needed medical services.

Drug Use Review, August 1995

Starting August 1995, the Medi-Cal fee-for-service outpatient drug program began a phase-in implementation of on-line prospective drug use review (DUR). Pharmacists receive on-line messages that indicate one or more possible therapeutic problems at the time of pharmacy claim adjudication.

Change to Aid Code 82, August 1, 1995

Aid Code 82 covers Medically Indigent persons under the age of 21 years who meet the eligibility requirements of Medically Indigent. As of August 1, 1995, Aid Code 82 will also cover persons until age 22 who were in an institution for mental disease before age 21. Persons may be continued in this Aid Code until age 22 if they have filed for a State hearing.

Investigational New AIDS Drugs, August 1995

Welfare and Institutions Code Section 14137.6 requires the Medi-Cal program to cover, as a benefit, any Treatment Investigational New Drug (TIND) approved by the Food and Drug Administration (FDA) for the treatment of AIDS. The FDA approved a Recombinant Human Growth Hormone (RHGH) for AIDS patients as a means to maintain body weight. There are no existing drugs which treat weight loss; therefore, there are no drugs to be replaced by RHGH treatment.

Vaccine Administration Fee Increase, August 1, 1995

Effective August 1, 1995, the administration fee component for vaccinations was increased from $3.94 to $7.50.

Emergency Drug Authorizations, September 1995

The Department changed the emergency authorization policy of prescription drugs when Medi-Cal pharmacy consultants are unavailable. The new regulations allow the dispensing pharmacist to certify that the condition is an emergency instead of requiring a written certification by the prescribing physician.

New County Health System: Orange County (CalOPTIMA), October 1, 1995

A new County Health Initiative was implemented for Orange County Medi-Cal recipients. The Orange Prevention and Treatment Integrated Medical Assistance Plan (CalOPTIMA) is a Medi-Cal county-wide program administered by the Orange County CalOPTIMA Board of Directors.

The program will have a three-part phase-in process by aid code groupings beginning October 1, 1995. CalOPTIMA serves all Medi-Cal-eligible and Medicare/Medi-Cal-eligible recipients who have ID numbers with County Code 30 (Orange County) and one of the following aid codes.

CalOPTIMA Effective Date	
October 1, 1995	(AFDC and AFDC-related aid groupings) 01, 02, 08, 3A, 3C, 3P, 3R, 30, 32, 33, 34, 35, 38, 39, 54, 59, 81, 82, 86
February 1, 1996	10, 14, 16, 18, 20, 24, 26, 28, 36, 6A, 6C, 60, 64, 65, 66, 68

New County Health System: Orange County (CalOPTIMA), October 1, 1995, Continued

April 1, 1996	03, 04, 13, 17, 23, 27, 37, 4C, 4K, 40, 42, 45, 5K, 63, 67, 83, 87

Transitional Medi-Cal - Married, October 1995

Based on AB836 and AB1371 and a federal waiver, the Department of Health Services and the Department of Social Services have established a program to provide Transitional Child care and Transitional Medi-Cal (TMC) to families discontinued from AFDC due to marriage or the reuniting of separated spouses. This program is being called Wedfare.

Implementation of Aid Codes 0A, 3G, 3H, 3P, and 3R - Refugee Cash Assistance and Aid to Families with Dependent Children (AFDC) Recipients Exempt from Grant Cuts, November 1, 1995

The Department of Health Services implemented five new Aid Codes (0A, 3G, 3H, 3P, and 3R) to identify and track Refugee Cash Assistance and Aid to Families with Dependent Children (AFDC) recipients who will be exempt from grant cuts being imposed upon the general AFDC population pursuant to the Assistance Payments Demonstration Project/California Work Pays Demonstration Project. The five new Aid Codes will be assigned to certain recipients previously covered in Aid Codes 01, 30, 32, 33, and 35.

Medicare Crossover Payments, December 1995

State law and regulations require that when a billing claim involves coverage by both Medicare and Medicaid, the maximum reimbursement by Medi-Cal is the Medi-Cal rate established for similar services less the amount Medicare pays. The Department of Health Services has not been paying for Medicare deductibles and co-insurances for hospital inpatient care for services rendered on and after May 1, 1994.

The U.S. District Court for the Central District of California has ruled in the case of Beverly v. Belsh_ that the State law does not apply to any person that can be considered a Qualified Medicare Beneficiary (QMB). The Department of Health Services has determined that all SSI/SSP eligibles and all Medi-Cal Only eligibles with an Aid Code or Subcode of 80 must be considered QMBs effective December 11, 1995.

Managed Care Expansion - Two-Plan Model

Implementation of the two-plan model began January 1996, when the first of twelve counties (Alameda) implemented their county initiative. San Joaquin implemented their county Initiative February 1996. The bulk of the remaining 10 counties (Contra Costa, Fresno, Kern, Los Angeles, Riverside, San Bernardino, San Francisco, Santa Clara, Stanislaus, and Tulare) is expected to implement in the Budget Year. The monthly enrollees represent the shift from Fee-For-Service to Managed Care for Public Assistance - Families, Medically Needy - Families, and Medically Indigent Children only.

Medi-Cal funding for some CCS Medical Therapy Units

California Children Services (CCS) Medical Therapy Units will begin billing direct to Medi-Cal for physical and occupational therapy services provided to Medi-Cal eligible children. These services will continue to be provided in CCS Medical Therapy Units, however, those units which are certified as Medi-Cal providers may bill for these services to the Medi-Cal program. Billing of Medi-Cal was implemented July 1, 1994 with retroactive billing to September 1, 1993.

NOTE

The Immigration Reform and Control Act (IRCA) Alien Program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994.

NOTE

This report is for informational purposes only and does not purport to be, or attempt to give, a legal interpretation of rules, regulations, and laws pertaining to the Medi-Cal Program. Questions and comments may be directed to Mary Cline (Phyllis Barnhouse has since retired), Medical Care Statistics Section, (916) 657-2794.

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SECTION 2

MEDI-CAL ELIGIBLES AND USERS

MEDI-CAL ELIGIBLES, ALL PROGRAMS - TABLE 1

You will notice a change in the format of this table. You will see the Total Average Monthly Medi-Cal eligibles, then a separate count of eligibles for County Organized Health Systems (COHS) and Prepaid Health Plans (PHPs), followed by Fee-For-Service (FFS) by Program and Aid Category.

Total Medi-Cal eligibles (including Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans) averaged 5.42 million persons per month in 1995.

In Calendar Year 1995:

Capitated Health System eligibles (COHS and PHPs) are not included in the FFS breakdown.

Beginning January 1995, COHS data are no longer included in the FFS data; therefore, for this year, you will not see a comparison of the current year to the prior year.

Total Medi-Cal FFS eligibles averaged 4.6 million persons per month.

Public Assistance (PA) eligibles averaged 3.37 million persons per month (or 72.8 percent of all FFS eligibles).

Total Medically Needy (MN) eligibles averaged 543,081 persons monthly (or 11.7 percent of all FFS eligibles).

Total Medically Indigent (MI) eligibles averaged 249,073 persons monthly (or 5.4 percent of all FFS eligibles).

The Immigration Reform and Control Act (IRCA) Aliens program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Aliens program averaged 282,743 persons monthly (or 6.1 percent of all FFS eligibles).

The Refugee/Entrant programs averaged 5,647 persons monthly (or 0.1 percent of all FFS eligibles).

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty, and the 200 Percent Poverty programs averaged 174,015 persons monthly (or 3.8 percent of all FFS eligibles).

The remaining programs (60-Day Postpartum, Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, and Medi-Cal Tuberculosis) averaged 4,404 persons per month (or 0.1 percent of all FFS eligibles).

Data for the Presumptive Eligibility for Pregnant Women program are not available.

Enrollment of Medi-Cal eligibles in Capitated Health Systems increased 25.9 percent in 1995, to a monthly average of 788,097 persons. For additional information, See Section 5, Medi-Cal Capitated Health Systems, page 43.

TABLE 1

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY PROGRAM AND AID CATEGORY
CALENDAR YEAR 1995

(COHS, PHPs, AND FFS)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995
TOTAL	5,421,262
County Organized Health Systems (COHS)	183,884
Prepaid Health Plans (PHPs)	604,213
Fee-For-Service (FFS) /1/	4,633,165
Public Assistance	3,374,020
Aged	341,455
Blind	23,763
Disabled	638,539
Families	2,370,263
Medically Needy	543,081
Aged	107,879
Blind	785
Disabled	48,349
Families	386,070
Medically Indigent	249,073
Adults	12,411
Children	236,663
IRCA Aliens	181
OBRA Aliens	282,743
Refugee/Entrant	5,647
100 Percent Poverty	15,610
133 Percent Poverty	75,087
185 Percent Poverty (renamed Income Disregard)	82,058
Infant	34,877
Pregnant Woman	47,182
200 Percent Poverty	1,260
Infant	187
Pregnant Woman	1,074
60-Day Postpartum	1,760
Dialysis	25
Total Parenteral Nutrition	9
Qualified Medicare Beneficiary	2,233
Presumptive Eligibility for Pregnant Women	INA
Medi-Cal Tuberculosis Program	377

INA Information Not Available.
/1/ Excludes County Organized Health Systems and Prepaid Health Plans.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act. The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Source: Tables 15, 17, and 21.

TOTAL ANNUAL PAYMENTS - TABLE 2

This is a companion to Table 1, showing payments by type of program. This replaces the former Table 2, which showed Medi-Cal eligibles as a percent of county population. For those of you needing that information, please see Table 28. In this table, you will see Total Annual Medi-Cal payments, then a separate count of payments for County Organized Health Systems (COHS) and Prepaid Health Plans (PHPs), followed by Fee-For-Service (FFS) by Program and Aid Category.

Total Annual Medi-Cal payments (including Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans) averaged $11.13 billion in 1995.

In Calendar Year 1995:

Capitated Health System payments (COHS and PHPs) are not included in the FFS breakdown.

Beginning January 1995, COHS data are no longer included in the FFS data; therefore, for this year, you will not see a comparison of the current year to the prior year.

Total Annual Medi-Cal FFS payments were $10.12 billion.

Payments for persons in the Public Assistance group ran $5.63 billion (or 55.6 percent of all FFS payments).

Over $3 billion were paid for services provided to the Medically Needy (or 30.4 percent of all FFS payments).

Total Medically Indigent payments were $372 million (or 3.7 percent of all FFS payments).

The Immigration Reform and Control Act (IRCA) Aliens program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Aliens program payments were $630 million.

Payments for the Refugee/Entrant programs were $23 million.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty, and the 200 Percent Poverty programs accounted for $280.3 million (or 2.8 percent of the FFS payments).

Total payments for the remaining groups (60-Day Postpartum, Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, and Medi-Cal Tuberculoris) accounted for $110.2 million (or 1.1 percent of all FFS payments).

Prepaid Health Plan capitation payments accounted for $706 million.

The County Organized Health System capitation payments accounted for $304 million.

TABLE 2

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY PROGRAM AND AID CATEGORY
CALENDAR YEAR 1995

(COHS, PHPs, AND FFS)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995
TOTAL	$11,133,015,614
County Organized Health Systems (COHS)	$303,616,408
Prepaid Health Plans (PHPs)	$705,718,687
Fee-For-Service (FFS) /1/	$10,123,680,519
Public Assistance	5,626,657,187
Aged	752,184,016
Blind	105,628,001
Disabled	2,602,978,204
Families	2,165,866,966
Medically Needy	3,075,507,113
Aged	1,507,015,923
Blind	11,285,432
Disabled	917,298,215
Families	639,907,544
Medically Indigent	371,856,646
Adults	96,000,642
Children	275,856,004
IRCA Aliens	6,130,126
OBRA Aliens	629,846,317
Refugee/Entrant	23,213,561
100 Percent Poverty	5,499,030
133 Percent Poverty	39,104,836
185 Percent Poverty (renamed Income Disregard)	232,316,461
Infant	45,385,501
Pregnant Woman	186,930,960
200 Percent Poverty	3,373,997
Infant	675,872
Pregnant Woman	2,698,125
60-Day Postpartum	1,900,318
Dialysis	1,018,906
Total Parenteral Nutrition	328,584
Qualified Medicare Beneficiary	1,398,452
Presumptive Eligibility for Pregnant Women	25,781,794
Medi-Cal Tuberculosis Program	74,371
Not Reported	79,672,819

INA Information Not Available.
/1/ Excludes County Organized Health Systems and Prepaid Health Plans.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act. The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Source: Tables 16, 17, and 23.

MONTHLY MEDI-CAL ELIGIBLES - TABLE 3

An average of 4,633,165 persons were eligible each month for Medi-Cal fee-for-service benefits during 1995. Average monthly eligibles in the first half of the year ran about 150,400 or 3.3 percent higher than in the last half.

The Public Assistance (PA) program accounted for 73 percent of the total annual average eligibles. The PA eligibles averaged 106,232 more persons in the first half of the year than in the last half.

The Medically Needy (MN) program accounted for 12 percent of the total annual average eligibles. The average MN eligibles ran 34,081 persons higher in the first half of the year than in the last half.

The Medically Indigent (MI) program accounted for 5 percent of the total annual average eligibles. Eligible counts in the MI program peaked in March. The average MI eligible count was higher in the first half of the year than in the last half.

The Aliens and Refugee/Entrant programs combined accounted for 6 percent of the eligible population.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs combined accounted for 4 percent of the eligible population.

The 60-Day Postpartum program accounted for less than 0.1 percent of the eligible population.

The Qualified Medicare Beneficiary program accounted for less than 0.1 percent of the eligible population.

Data for the Presumptive Eligibility for Pregnant Women program are not available.

The Medi-Cal Tuberculosis program accounted for just a fraction of the eligible population (0.008 percent). The Dialysis and Total Parenteral Nutrition programs combined accounted for just a fraction of the eligible population (0.001 percent).

TABLE 3

MEDI-CAL PROGRAM
MONTHLY ELIGIBLES BY PROGRAM
CALENDAR YEAR 1995

(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT PROGRAM
Annual Average 1995	4,633,165	3,374,020	543,081	249,073	181	282,743	5,647	15,610
Six-Month Average	4,708,365	3,427,136	560,122	256,932	286	288,427	6,365	13,384
January	4,713,364	3,450,184	555,490	250,000	772	286,584	6,774	11,925
February	4,707,126	3,433,814	560,958	253,377	311	288,440	6,419	12,233
March	4,732,405	3,437,933	570,062	260,572	219	290,792	6,659	12,724
April	4,730,197	3,429,219	569,228	263,130	160	293,327	6,553	13,589
May	4,695,081	3,415,023	555,683	257,239	156	286,776	5,872	14,499
June	4,672,018	3,396,645	549,308	257,275	99	284,645	5,912	15,331
Six-Month Average	4,557,965	3,320,904	526,041	241,215	76	277,058	4,928	17,837
July	4,675,588	3,400,611	546,796	257,670	89	284,076	5,649	15,938
August	4,665,356	3,399,070	540,810	252,799	75	280,545	5,599	16,982
September	4,640,980	3,381,420	536,360	252,884	73	276,979	5,683	17,652
October	4,481,336	3,264,970	513,975	231,845	70	276,702	4,342	18,225
November	4,447,526	3,246,507	506,862	225,717	83	272,023	4,162	18,986
December	4,437,001	3,232,844	511,445	226,372	67	272,023	4,135	19,238

MONTH	133 PERCENT POVERTY	INCOME DISREGARD	200 PERCENT POVERTY	60-DAY POST-PARTUM	QMB	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TB PROGRAM	ALL OTHER/1/
Annual Average 1995	75,087	82,058	1,260	1,760	2,233	INA	377	34
Six-Month Average	71,279	78,956	1,299	1,778	2,109	INA	257	36
January	69,295	77,180	1,370	1,621	2,059	INA	75	35
February	69,207	77,014	1,314	1,789	2,064	INA	149	37
March	69,742	78,225	1,300	1,855	2,050	INA	236	36
April	70,902	78,666	1,265	1,765	2,056	INA	301	36
May	73,539	80,574	1,280	1,834	2,200	INA	369	37
June	74,988	82,074	1,266	1,803	2,225	INA	411	36
Six-Month Average	78,896	85,161	1,222	1,742	2,357	INA	496	32
July	76,089	82,930	1,254	1,791	2,212	INA	450	33
August	78,464	85,248	1,262	1,757	2,234	INA	478	33
September	78,479	85,567	1,225	1,751	2,387	INA	487	33
October	79,312	86,113	1,228	1,684	2,318	INA	518	34
November	80,869	86,321	1,189	1,796	2,453	INA	527	31
December	80,162	84,788	1,171	1,671	2,538	INA	517	30

INA Information Not Available.

/1/ Other includes Dialysis, Total Parenteral Nutrition, and Not Reported.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act;
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
FFS = Fee-For-Service; QMB = Qualified Medicare Beneficiary; TB = Tuberculosis.
Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1995.

MONTHLY MEDI-CAL USERS - TABLE 4

An average of 2,315,056 persons received Medi-Cal program benefits each month in 1995. Monthly users averaged 159,749 more persons in the first half of the year than in the last half.

A monthly utilization rate can be computed from Tables 3 and 4. The utilization rate for the Total Fee-For-Service Program is 50 percent of eligibles receiving service each month.

The Public Assistance (PA) group, which accounted for 73 percent of the total annual average Medi-Cal users, had a utilization rate of 50 percent. There were an average of 122,616 more PA users in the first half of the year.

The Medically Needy (MN) group, which accounted for 14 percent of the total annual average users, had a utilization rate of 60 percent. There were 8.1 percent more MN users in the first half of the year.

The Medically Indigent (MI) group, which accounted for 5 percent of the total annual average users, had a utilization rate of 47 percent. These users averaged 10 percent more MI users in the first half of the year.

The Aliens and Refugee/Entrant groups accounted for 4 percent of the total annual average users. These users averaged 8.3 percent more in the first half of the year.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty groups combined accounted for 3 percent of the total annual average users.

The 60-Day Postpartum, Qualified Medicare Beneficiary, Presumptive Eligibility for Pregnant Women, Medi-Cal Tuberculosis Program, and All Other groups combined accounted for 1 percent of the total annual users.

TABLE 4

MEDI-CAL PROGRAM
MONTHLY USERS BY PROGRAM
CALENDAR YEAR 1995

(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT PROGRAM
Annual Average 1995	2,315,056	1,680,639	323,851	116,865	780	86,049	6,639	3,578
Six-Month Average	2,394,931	1,741,947	336,406	122,466	1,333	88,425	7,431	3,208
January	2,300,111	1,681,856	321,311	112,880	2,642	84,045	7,866	2,542
February	2,293,627	1,677,750	319,467	113,894	1,816	84,949	7,079	2,656
March	2,534,290	1,845,120	354,340	132,215	1,280	92,735	7,751	3,336
April	2,337,847	1,697,327	332,585	120,658	968	87,205	7,161	3,078
May	2,350,979	1,698,441	333,674	122,177	723	89,882	7,245	3,394
June	2,552,730	1,851,187	357,057	132,969	570	91,735	7,486	4,243
Six-Month Average	2,235,182	1,619,331	311,297	111,264	227	83,673	5,847	3,949
July	1,745,063	1,229,787	267,823	88,000	334	76,533	5,823	2,620
August	2,395,698	1,745,879	330,432	121,073	300	86,217	6,567	3,901
September	2,444,777	1,768,239	337,392	125,490	285	93,407	6,481	4,231
October	2,298,897	1,666,417	316,676	114,707	207	87,901	5,829	4,021
November	2,297,276	1,675,427	313,797	111,017	138	82,411	5,696	4,354
December	2,229,378	1,630,238	301,663	107,295	97	75,570	4,684	4,565

MONTH	133 PERCENT POVERTY	INCOME DISREGARD	200 PERCENT POVERTY	60-DAY POST-PARTUM	QMB	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TB PROGRAM	ALL OTHER/1/
Annual Average 1995	29,302	45,804	498	888	376	16,625	64	3,097
Six-Month Average	29,009	45,754	565	914	459	13,716	23	3,275
January	27,084	44,990	627	828	344	10,358	3	2,735
February	27,235	43,804	586	848	543	10,320	4	2,676
March	31,072	47,927	589	957	557	12,644	15	3,752
April	27,812	43,991	519	900	416	11,938	15	3,274
May	28,624	44,732	510	902	398	16,964	47	3,266
June	32,225	49,080	561	1,049	498	20,071	52	3,947
Six-Month Average	29,595	45,855	430	861	293	19,535	106	2,920
July	19,402	36,607	427	644	323	13,793	58	2,889
August	30,674	47,619	483	932	350	17,991	118	3,162
September	32,082	50,050	483	1,058	340	21,635	152	3,452
October	30,990	47,243	449	894	236	20,589	123	2,615
November	31,693	47,320	398	875	236	21,357	96	2,461
December	32,729	46,289	340	765	270	21,845	89	2,939

/1/ Other includes Dialysis, Total Parenteral Nutrition, and Not Reported.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act;
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
FFS = Fee-For-Service; QMB = Qualified Medicare Beneficiary; TB = Tuberculosis.
Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Report (Monthly - Control Totals) and Calendar Year Report.

MEDI-CAL UTILIZATION - TABLE 5

Comparing persons eligible during a period with claims paid (rather than services provided) in that period gives rather crude comparisons, but the more correct comparison would not generally result in significantly different utilization rates.

In 1995, an average of 2.32 million persons per month used Medi-Cal benefits. This was 10,365 fewer monthly users than in the prior year.

The total number of users per 1,000 eligibles increased 5.0 percent, from 476 in 1994 to 500 in 1995. The total number of users include the Presumptive Eligibility for Pregnant Women program, however, eligibles are not available. If these users are excluded, the overall utilization rate calculates to be 496 in 1995.

During 1995, the Public Assistance Families, Medically Needy Families, and Medically Indigent Children categories all have relatively low utilization rates (423, 490, and 444 users per 1,000 eligibles respectively). These are groups with utilization rates below 50 percent.

Aged, Blind, and Disabled eligibles have the higher utilization rates in the Public Assistance and Medically Needy Programs, in 1995.

Calendar Year 1995 data do not include users of health care services provided by County Organized Health Systems (COHS) or Prepaid Health Plans (PHPs).

TABLE 5

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS AND USERS PER 1,000 ELIGIBLES
BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1994 AND 1995

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	USERS PER 1,000 ELIGIBLES 1994/a/	USERS PER 1,000 ELIGIBLES 1995/b/	PERCENT CHANGE IN RATE
TOTAL	2,325,421	2,315,056	476	500	5.0 %
Public Assistance	1,698,998	1,680,639	476	498	4.6
Aged	232,045	220,705	652	646	(0.9)
Blind	17,292	16,692	693	702	1.3
Disabled	438,808	439,960	682	689	1.0
Families	1,010,853	1,003,283	397	423	6.5
Medically Needy	333,591	323,851	579	596	2.9
Aged	90,047	91,004	837	844	0.8
Blind	654	692	846	882	4.3
Disabled	43,013	43,075	880	891	1.3
Families	199,877	189,081	477	490	2.7
Medically Indigent	112,645	116,865	444	469	5.6
Adults	11,145	11,704	876	943	7.6
Children	101,501	105,161	421	444	5.5
IRCA Aliens	5,183	780	385	4,309	1,019.2
OBRA Aliens	86,903	86,049	289	304	5.2
Refugee/Entrant	7,531	6,639	1,030	1,176	14.2
100 Percent Poverty	2,068	3,578	228	229	0.4
133 Percent Poverty	24,901	29,302	388	390	0.5
185 Percent Poverty (renamed Income Disregard)	41,315	45,804	558	558	0.0
Infant	16,480	18,113	533	519	(2.6)
Pregnant Woman	24,836	27,692	576	587	1.9
200 Percent Poverty	1,338	498	670	395	(41.0)
Infant	401	112	697	599	(14.1)
Pregnant	937	386	659	359	(45.5)
60-Day Postpartum	840	888	469	505	7.7
Dialysis	24	31	NA	NA	NA
Total Parenteral Nutrition	7	9	NA	NA	NA
Qualified Medicare Beneficiary	824	376	NA	NA	NA
Presumptive Eligibility for Pregnant Women	6,873	16,625	INA	INA	INA
Medi-Cal Tuberculosis Program	0	64	0	170	/c/
Not Reported	2,381	3,058	NA	NA	NA

INA Information Not Available.
NA Not Applicable.
Claims processing time lags can distort utiliation rates, especially for smaller groups of eligibles or groups whose numbers change considerably.
/a/ Includes regular Fee-For-Service and County Organized Health Systems.
/b/ Includes regular Fee-For-Service.
/c/ This program was not in existence the entire year of 1994, therefore, the percent change was not calculated.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Figures are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.
Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports and Medi-Cal Certified CID Eligibles Calendar Year Reports.

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SECTION 3

MEDI-CAL EXPENDITURES

TOTAL PROVIDER PAYMENTS

BY PROGRAM AND AID CATEGORY - TABLE 6

In 1995, providers received $10.12 billion, a 1.0 percent decrease from 1994. The amount of decrease was over $102 million.

Public Assistance, the largest group in terms of total expenditures, received $5.63 billion in services during 1995, down 1.8 percent from 1994.

The Medically Needy group received services totaling $3.08 billion in 1995, a decrease of 2.2 percent from 1994.

Medically Indigents received $371.9 million in services, up 2.0 percent from 1994.

The IRCA Aliens, OBRA Aliens, and Refugee/Entrant programs accounted for $6.1 million, $629.8 million, and $23.2 million, respectively, in 1995. These programs accounted for 6.5 pecent of the total expenditures.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty programs accounted for $5.5 million, $39.1 million, $232.3 million, and $3.4 million, respectively, in 1995. These programs accounted for 2.8 percent of the total expenditures.

The 60-Day Postpartum program accounted for $1.9 million in 1995, an increase of 11.5 percent from 1994.

The Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, Presumptive Eligibility for Pregnant Women and the Medi-Cal Tuberculosis programs accounted for $1.0 million, $329 thousand, $1.4 million, $25.8 million, and $74 thousand, respectively, in 1995.
These programs accounted for a very small percentage of total expenditures (0.28 percent).

TABLE 6

MEDI-CAL PROGRAM
TOTAL ANNUAL PROVIDER PAYMENTS BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1994 AND 1995

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	CHANGE Number	CHANGE Percent
TOTAL	$10,225,765,904	$10,123,680,519	($102,085,385)	(1.0) %
Public Assistance	5,727,541,557	5,626,657,187	(100,884,370)	(1.8)
Aged	778,361,080	752,184,016	(26,177,064)	(3.4)
Blind	102,477,989	105,628,001	3,150,012	3.1
Disabled	2,608,737,629	2,602,978,204	(5,759,425)	(0.2)
Families	2,237,964,859	2,165,866,966	(72,097,893)	(3.2)
Medically Needy	3,144,335,833	3,075,507,113	(68,828,720)	(2.2)
Aged	1,465,829,660	1,507,015,923	41,186,263	2.8
Blind	10,411,861	11,285,432	873,571	8.4
Disabled	991,223,205	917,298,215	(73,924,990)	(7.5)
Families	676,871,107	639,907,544	(36,963,563)	(5.5)
Medically Indigent	364,536,741	371,856,646	7,319,905	2.0
Adults	89,053,489	96,000,642	6,947,153	7.8
Children	275,483,252	275,856,004	372,752	0.1
IRCA Aliens	30,137,867	6,130,126	(24,007,741)	(79.7)
OBRA Aliens	647,512,602	629,846,317	(17,666,285)	(2.7)
Refugee/Entrant	24,653,839	23,213,561	(1,440,278)	(5.8)
100 Percent Poverty	3,351,802	5,499,030	2,147,228	64.1
133 Percent Poverty	33,229,083	39,104,836	5,875,753	17.7
185 Percent Poverty (renamed Income Disregard)	208,726,791	232,316,461	23,589,670	11.3
Infant	38,958,648	45,385,501	6,426,853	16.5
Pregnant Woman	169,768,144	186,930,960	17,162,816	10.1
200 Percent Poverty	6,309,292	3,373,997	(2,935,295)	(46.5)
Infant	1,107,301	675,872	(431,429)	(39.0)
Pregnant	5,201,991	2,698,125	(2,503,866)	(48.1)
60-Day Postpartum	1,704,445	1,900,318	195,873	11.5
Dialysis	364,153	1,018,906	654,753	179.8
Total Parenteral Nutrition	181,181	328,584	147,403	81.4
Qualified Medicare Beneficiary	1,407,273	1,398,452	(8,821)	(0.6)
Presumptive Eligibility for Pregnant Women	10,985,030	25,781,794	14,796,764	134.7
Medi-Cal Tuberculosis Program	16	74,371	74,355	/c/
Not Reported	20,788,397	79,672,819	58,884,422	283.3

/a/ Includes regular Fee-For-Service and County Organized Health Systems.
/b/ Includes regular Fee-For-Service.
/c/ This program was not in existence the entire year of 1994, therefore, the percent change was not calculated.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Figures are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

PAYMENT PER ELIGIBLE

BY PROGRAM AND AID CATEGORY - TABLE 7

The average monthly payment per eligible was $182.09 in 1995. This represents an increase of $7.57 per eligible or 4.3 percent over the prior year. Payments include the Presumptive Eligibility for Pregnant Women program, however, eligibles are not available. If these payments are excluded, the overall cost per eligible calculates to be $181.62.

Relative cost increases exceeding the overall 4.3 percent were experienced by the Public Assistance Blind (up 8.2 percent); Medically Needy Blind (up 6.7 percent); Medically Indigent Adults (up 10.5 percent); Refugee/Entrant (up 21.9 percent); 200 Percent Poverty Infants (up 87.7 percent); 60-Day Postpartum (up 13.4 percent); Dialysis (up 224.6 percent); and the Total Parenteral Nutrition (up 81.4 percent).

Public Assistance Families, which is a major expenditure group, had a relatively small increase in cost per eligible, up 4.0 percent to $76.15 per month in 1995.

Of the other major aid groups in terms of expenditures (see Table 6), the Public Assistance Disabled showed an increase in cost per eligible, up 0.6 percent to $339.70 in 1995.

Calendar Year 1995 data do not include payments for health care services handled by County Organized Health Systems (COHS) or Prepaid Health Plans (PHPs).

TABLE 7

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT PER ELIGIBLE BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1994 AND 1995

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	CHANGE Number	CHANGE Percent
TOTAL	$ 174.52	$ 182.09	$ 7.57	4.3 %
Public Assistance	133.64	138.97	5.33	4.0
Aged	182.37	183.57	1.20	0.7
Blind	342.26	370.42	28.16	8.2
Disabled	337.70	339.70	2.00	0.6
Families	73.22	76.15	2.93	4.0
Medically Needy	454.49	471.92	17.43	3.8
Aged	1,135.41	1,164.13	28.72	2.5
Blind	1,122.45	1,198.03	75.58	6.7
Disabled	1,689.13	1,581.04	(108.09)	(6.4)
Families	134.53	138.12	3.59	2.7
Medically Indigent	119.66	124.41	4.75	4.0
Adults	583.15	644.59	61.44	10.5
Children	95.20	97.13	1.93	2.0
IRCA Aliens	186.60	2,822.34	2,635.74	1,412.5
OBRA Aliens	179.58	185.64	6.06	3.4
Refugee/Entrant	281.01	342.56	61.55	21.9
100 Percent Poverty	30.74	29.36	(1.38)	(4.5)
133 Percent Poverty	43.17	43.40	0.23	0.5
185 Percent Poverty	234.88	235.93	1.05	0.4
Infant	104.96	108.44	3.48	3.3
Pregnant Woman	328.07	330.16	2.09	0.6
200 Percent Poverty	263.28	223.15	(40.13)	(15.2)
Infant	160.48	301.19	140.71	87.7
Pregnant	304.85	209.35	(95.50)	(31.3)
60-Day Postpartum	79.35	89.98	10.63	13.4
Dialysis	1,046.41	3,396.36	2,349.95	224.6
Total Parenteral Nutrition	1,677.56	3,042.44	1,364.88	81.4
Qualified Medicare Beneficiary	73.90	52.19	(21.71)	(29.4)
Presumptive Eligibility for Pregnant Women	133.79	INA	INA	INA
Medi-Cal Tuberculosis Program	0.20	16.44	16.24	/c/

INA Information Not Available.
/a/ Includes regular Fee-For-Service and County Organized Health Systems.
/b/ Includes regular Fee-For-Service.
/c/ This program was not in existence the entire year of 1994, therefore, the percent change was not calculated.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act. The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Figures are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.
Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

PAYMENT PER USER

BY PROGRAM AND AID CATEGORY - TABLE 8

During 1995, the Medi-Cal program spent $364.41 per month per user of service. This was $2.04 or 0.6 percent less than in 1994.

The lowest monthly cost group was the Medi-Cal Tuberculosis Program beneficiary at $96.84 per user, followed by the 133 Percent Poverty beneficiary at $111.21 per user.

Public Assistance Aged, Blind, and Disabled Medi-Cal payments are relatively low because practically all this group has concurrent Medicare coverage which pays a substantial portion of the medical bill.

The cost for Public Assistance (PA) Families was $179.90 per user per month, while for Medically Needy (MN) Families it was $282.03. A larger proportion of MN Families utilize hospital inpatient services resulting in higher cost rates.

Costs per user in the MN Aged, Blind, and Disabled groups tend to be rather large. This is because a large number of persons in these groups are in a long-term care facility. The cost per Medically Needy user runs almost three times that of Public Assistance users.

Cost per user for Medically Indigent Adults showed an increase of 2.7 percent from the previous year. The Medically Indigent Children was down 3.3 percent in cost per user from 1994.

The OBRA Aliens, 100 Percent Poverty, and the Presumptive Eligibility for Pregnant Women programs all showed decreases in the cost per user, while the cost per user for the Refugee/Entrant, 133 Percent Poverty, 185 Percent Poverty, 200 Percent Poverty, 60-Day Postpartum, Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, and the Medi-Cal Tuberculosis programs all showed an increase.

TABLE 8

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT PER USER BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1994 AND 1995

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	CHANGE Number	CHANGE Percent
TOTAL	$ 366.45	$ 364.41	$ (2.04)	(0.6) %
Public Assistance	280.93	278.99	(1.94)	(0.7)
Aged	279.53	284.01	4.48	1.6
Blind	493.86	527.34	33.48	6.8
Disabled	495.42	493.03	(2.39)	(0.5)
Families	184.49	179.90	(4.59)	(2.5)
Medically Needy	785.48	791.39	5.91	0.8
Aged	1,356.54	1,379.99	23.45	1.7
Blind	1,326.69	1,359.04	32.35	2.4
Disabled	1,920.39	1,774.61	(145.78)	(7.6)
Families	282.20	282.03	(0.17)	(0.1)
Medically Indigent	269.68	265.16	(4.52)	(1.7)
Adults	665.87	683.53	17.66	2.7
Children	226.17	218.60	(7.57)	(3.3)
IRCA Aliens	484.56	654.93	170.37	35.2
OBRA Aliens	620.92	609.97	(10.95)	(1.8)
Refugee/Entrant	272.80	291.38	18.58	6.8
100 Percent Poverty	135.07	128.08	(6.99)	(5.2)
133 Percent Poverty	111.20	111.21	0.01	0.0
185 Percent Poverty	421.01	422.66	1.65	0.4
Infant	197.00	208.81	11.81	6.0
Pregnant Woman	569.63	562.53	(7.10)	(1.2)
200 Percent Poverty	392.96	564.59	171.63	43.7
Infant	230.11	502.88	272.77	118.5
Pregnant	462.65	582.50	119.85	25.9
60-Day Postpartum	169.09	178.33	9.24	5.5
Dialysis	1,264.42	2,739.00	1,474.58	116.6
Total Parenteral Nutrition	2,156.86	3,042.44	885.58	41.1
Qualified Medicare Beneficiary	142.32	309.94	167.62	117.8
Presumptive Eligibility for Pregnant Women	133.19	129.23	(3.96)	(3.0)
Medi-Cal Tuberculosis Program	0.00	96.84	96.84	/c/
Not Reported	727.58	2,171.16	1,443.58	198.4

/a/ Includes regular Fee-For-Service and County Organized Health Systems.
/b/ Includes regular Fee-For-Service.
/c/ This program was not in existence the entire year of 1994, therefore, the percent change was not calculated.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act. The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment. Figures in parentheses ( ) indicate negative numbers.
Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

COST PER SERVICE - TABLE 9

The most frequently used physician service is, of course, the outpatient visit. In 1995, the Medi-Cal average cost per physician outpatient visit was $23.29 Outpatient visits include office, emergency room, home, and other outpatient situations.

Physicians' hospital inpatient visits averaged $32.46 per visit. Visits for long-term care inpatients averaged $26.26 per visit.

After outpatient visits, the second largest expenditure category of physician services is for inpatient hospital surgery. This service has the highest cost rate, $586.66 per service in 1995.

The average cost per drug prescription was $24.84 in 1995, an increase of 6.3 percent from the prior year.

The highest cost per service in the Medi-Cal program is, of course, for hospital inpatient care. The average cost per hospital inpatient day in 1995 was $1,016.11 for Public Assistance Families and Medically Needy Families. Those groups accounted for 35.4 percent of total hospital inpatient expenditures in 1995 and were used in Table 9 so that most Medicare/Medi-Cal crossover data could be excluded. Costs include ancillaries as well as accommodations.

In 1995, the average cost per day of care was $79.43 for nursing facilities and $107.87 for intermediate care facilities-developmentally disabled.

TABLE 9

MEDI-CAL PROGRAM
AVERAGE COST PER SERVICE FOR SELECTED SERVICES
CALENDAR YEARS 1994 AND 1995

TYPE OF SERVICE	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	PERCENT CHANGE
Physicians Services/1/			
Outpatient Visits	$ 23.04	$ 23.29	1.1 %
Hospital Inpatient Visits	32.84	32.46	(1.2)
Critical Care Visits	84.13	85.96	2.2
Long-Term Care Visits	25.33	26.26	3.7
Ophthalmological Examinations	34.52	33.84	(2.0)
Inpatient Hospital Surgery	600.17	586.66	(2.3)
Outpatient Surgery	108.53	108.16	(0.3)
Psychiatry	27.97	26.24	(6.2)
Immunization and Injection	11.44	11.69	2.2
Drug Prescriptions	23.36	24.84	6.3
Hospital Inpatient Day/2/	978.85	1,016.11	3.8
Nursing Facility Day	76.44	79.43	3.9
Intermediate Care Facility-DD Day	104.86	107.87	2.9

/1/ Excludes Medicare/Medi-Cal crossover claims.

/2/ Reflects data for Public Assistance Families and Medically Needy Families only in order to exclude most Medicare/Medi-Cal crossover claims.

/a/ Includes regular Fee-For-Service and County Organized Health Systems.

/b/ Includes regular Fee-For-Service.

Note: Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

PAYMENTS BY PROVIDER TYPE - TABLE 10

In 1995, provider payments averaged $843.6 million per month, down $8.5 million from the prior year's average.

Community Hospitals received the largest share of the Medi-Cal provider payments. Monthly expenditures for these hospital services decreased 9.3 percent over the prior year to $201.1 million per month.

Nursing Facilities was the second highest paid provider group. Their payments increased 3.2 percent from 1994 to $166.2 million per month.

Physicians received $86.1 million per month in 1995, down 0.7 percent from the prior year.

Payments to County Hospitals averaged $79.3 million per month during 1995, down 3.4 percent from the prior year.

The major reason for the large increase in cost of dental services is due to higher rates paid for dental procedures as a result of the Court Order under the Clark vs. Belsh_ lawsuit.

All of the provider types showed an increase in 1995, except Physician, Optometrist, Chiropractor, County Hospital, Community Hospital, and State Hospital, which showed decreases of 0.7, 3.4, 14.0, 3.4, 9.3, and 7.7 percent respectively.

TABLE 10

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT BY TYPE OF PROVIDER
CALENDAR YEARS 1994 AND 1995

TYPE OF PROVIDER	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	CHANGE	
			Number	Percent
TOTAL	$852,147,159	$843,640,043	($8,507,116)	(1.0) %
Physician	86,714,586	86,067,592	(646,994)	(0.7)
Pharmacy	107,209,181	108,250,083	1,040,902	1.0
Dentist	51,189,623	51,909,776	720,153	1.4
Optometrist	4,613,628	4,456,220	(157,408)	(3.4)
Chiropractor	56,125	48,267	(7,858)	(14.0)
Podiatrist	930,916	1,432,393	501,477	53.9
County Hospital	82,092,405	79,335,232	(2,757,173)	(3.4)
Inpatient	66,134,682	64,474,831	(1,659,851)	(2.5)
Outpatient	15,957,722	14,860,401	(1,097,321)	(6.9)
Community Hospital	221,763,333	201,103,537	(20,659,796)	(9.3)
Inpatient	197,396,324	177,671,851	(19,724,473)	(10.0)
Outpatient	24,367,009	23,431,685	(935,324)	(3.8)
State Hospital	48,715,278	44,964,549	(3,750,729)	(7.7)
Nursing Facility	160,938,433	166,157,378	5,218,945	3.2
Intermediate Care Facility-DD	16,528,699	17,651,702	1,123,003	6.8
Home Health Agency	2,049,038	2,275,594	226,556	11.1
Laboratory Facility	10,262,663	12,036,813	1,774,150	17.3
Medical Transportation	6,742,843	6,935,764	192,921	2.9
Rehabilitation Facility	248,710	593,673	344,963	138.7
Organized Outpatient Clinic	20,169,538	23,466,334	3,296,796	16.3
All Other Providers	31,922,163	36,955,137	5,032,974	15.8

/a/ Includes regular Fee-For-Service and County Organized Health Systems.

/b/ Includes regular Fee-For-Service.

Note: Averages are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

COST PER ELIGIBLE BY PROVIDER TYPE - TABLE 11

The average monthly cost per eligible was $182.09 in 1995.

Community Hospitals was the largest expenditure category and had the highest cost per eligible per month at $43.41, down 4.4 percent from 1994.

Cost per eligible in the second largest expenditure category, Nursing Facilities, was $35.86, an increase of 8.8 percent from 1994.

Pharmacies was the third largest expenditure category and its monthly cost per eligible of $23.36 reflected an increase of 6.4 percent from 1994.

Payments to Physicians cost $18.58 per eligible per month, a 4.6 percent increase from 1994.

County Hospitals was the fourth largest expenditure category and its monthly cost per eligible of $17.12 reflected an increase of 1.8 percent from 1994.

The major reason for the large increase in cost of dental services is due to higher rates paid for dental procedures as a result of the Court Order under the Clark vs. Belshe lawsuit.

TABLE 11

MEDI-CAL PROGRAM
AVERAGE MONTHLY COST PER ELIGIBLE BY TYPE OF PROVIDER
CALENDAR YEARS 1994 AND 1995

TYPE OF PROVIDER	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	PERCENT CHANGE
TOTAL	$174.52	$182.09	4.3 %
Physician	17.76	18.58	4.6
Pharmacy	21.96	23.36	6.4
Dentist	10.48	11.20	6.9
Optometrist	0.94	0.96	2.1
Chiropractor	0.01	0.01	0.0
Podiatrist	0.19	0.31	63.2
County Hospital	16.81	17.12	1.8
Inpatient	13.54	13.92	2.8
Outpatient	3.27	3.21	-1.8
Community Hospital	45.42	43.41	-4.4
Inpatient	40.43	38.35	-5.1
Outpatient	4.99	5.06	1.4
State Hospital	9.98	9.70	-2.8
Nursing Facility	32.96	35.86	8.8
Intermediate Care Facility-DD	3.39	3.81	12.4
Home Health Agency	0.42	0.49	16.7
Laboratory Facility	2.10	2.60	23.8
Medical Transportation	1.38	1.50	8.7
Rehabilitation Facility	0.05	0.13	160.0
Organized Outpatient Clinic	4.13	5.06	22.5
All Other Providers	6.54	7.98	22.0

/a/ Includes regular Fee-For-Service and County Organized Health Systems.

/b/ Includes regular Fee-For-Service.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year Reports; and Table 10.

COST PER USER BY PROVIDER TYPE - TABLE 12

In 1995, the average monthly cost per recipient was $364.41.

Users of State Hospital services and County and Community Hospital Inpatient services were the most costly - of those three provider types, State Hospital services showed the highest cost per user at $8,444.05 per month, down 2.6 percent from 1994; County Hospital Inpatient services showed the cost per user at $5,776.28, up 8.4 percent from 1994; and Community Hospital Inpatient services showed the lowest cost per user at $4,188.60, up 12.2 percent from 1994.

Recipients of Podiatrist services showed the largest cost increase from a year ago, up 40.7 percent per recipient.

The major reason for the increase in the cost of dental services is due to higher rates paid for dental procedures as a result of the Court Order under the Clark vs. Belshe lawsuit.

TABLE 12

MEDI-CAL PROGRAM
AVERAGE MONTHLY COST PER USER BY TYPE OF PROVIDER
CALENDAR YEARS 1994 AND 1995

TYPE OF PROVIDER	CALENDAR YEAR 1994/a/	CALENDAR YEAR 1995/b/	PERCENT CHANGE
TOTAL	$ 366.45	$ 364.41	-0.6 %
Physician	84.57	85.70	1.3
Pharmacy	78.43	82.70	5.4
Dentist	212.13	200.36	-5.5
Optometrist	69.38	67.53	-2.7
Chiropractor	13.87	14.04	1.2
Podiatrist	35.30	49.65	40.7
County Hospital	705.53	707.13	0.2
Inpatient	5,330.86	5,776.28	8.4
Outpatient	147.27	141.56	-3.9
Community Hospital	664.60	629.41	-5.3
Inpatient	3,734.11	4,188.60	12.2
Outpatient	82.58	80.70	-2.3
State Hospital	8,665.12	8,444.05	-2.6
Nursing Facility	2,271.57	2,361.87	4.0
Intermediate Care Facility-DD	3,307.72	3,424.85	3.5
Home Health Agency	257.19	262.10	1.9
Laboratory Facility	49.16	55.59	13.1
Medical Transportation	207.85	207.27	-0.3
Rehabilitation Facility	100.98	140.08	38.7
Organized Outpatient Clinic	116.56	124.17	6.5

/a/ Includes regular Fee-For-Service and County Organized Health Systems.

/b/ Includes regular Fee-For-Service.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

TOTAL MEDI-CAL PROGRAM EXPENDITURES - TABLE 13

Table 13 is the only table showing all types of Medi-Cal program expenditures. The following figures reflect actual budget item expenditures and, as such, are reported here by fiscal (budget) year rather than by calendar year.

Total Medi-Cal expenditures were $16.47 billion for Fiscal Year (FY) 1994-95, an increase of 4.5 percent from FY 1993-94.

The $9.69 billion in direct fee-for-service provider payments was an increase of 0.4 percent. These expenditures accounted for 59 percent of the total expenditures in FY 1994-95 and 61 percent in the FY 1993-94.

Delta Dental (DD) is an at-risk fiscal intermediary providing authorization and payment for virtually all types of Medi-Cal dental services rendered. DD covers all Medi-Cal eligibles except those enrolled in PHPs providing dental care. In FY 1994-95, the approximate number of Medi-Cal eligibles covered by DD was 4.56 million persons per month. Capitation payments totaled $714.7 million, up 26.3 percent from FY 1993-94.

Prepaid Health Plan (PHP) capitations increased 30.2 percent to $642.4 million in FY 1994-95.

There were three County Organized Health Systems (COHS) in effect during FY 1993-94. Santa Barbara Health Initiative was effective September 1, 1983, Health Plan of San Mateo was effective December 1, 1987, and Solano Partnership HealthPlan was effective May 1, 1994. Payments to COHS totaled $241.0 million.

Expenditures for Early Periodic Screening Services decreased 4.2 percent to $99.5 million in FY 1993-94. The program provides screening, diagnostic, and treatment services for all Medi-Cal eligibles under age 21.

The Short-Doyle/Medi-Cal program provides community mental health services to Medi-Cal program eligibles. The $247.9 million expenditure in FY 1994-95 reflects a decrease of 11.2 percent from the prior fiscal year.

Buy-In is the purchase of Medicare Part A and Part B Medical Insurance Coverage by the Medi-Cal program for those eligibles who are entitled to the coverage. Expenditures for Medicare Part A and Part B Buy-In ran $559.6 million in FY 1994-95.

Administration costs include various State Departmental expenditures, payments for claims processing operations, and county administrative expenses. In FY 1994-95, these expenditures increased 27.5 percent from the prior fiscal year. Administration costs accounted for 4.8 percent of total expenditures in FY 1994-95 and 4.0 percent of total expenditures in 1993-94.

TABLE 13

TOTAL MEDI-CAL PROGRAM EXPENDITURES
BY TYPE OF EXPENDITURE AND SOURCE OF FUNDS
FISCAL YEARS 1993-94 AND 1994-95

TYPE OF EXPENDITURE	FISCAL YEAR 1993-94	FISCAL YEAR 1994-95	PERCENT CHANGE
TOTAL	$15,760,285,600	$16,474,086,700	4.5 %
Provider Payments, Fee-For-Service	9,653,407,300	9,694,481,700	0.4
Dental	565,801,200	714,667,000	26.3
Prepaid Health Plans	493,363,400	642,404,500	30.2
County Organized Health Systems	184,103,900	241,007,700	30.9
Primary Care Case Management/ Other Managed Care	/a/	198,285,500	INA
Early Periodic Screening Services	103,933,000	99,539,600	(4.2)
Miscellaneous Non-Fee-For-Service	592,049,500	565,398,000	(4.5)
Short-Doyle/Medi-Cal	279,233,600	247,918,600	(11.2)
Medicare Buy-In	468,705,700	559,570,900	19.4
Audits and Lawsuits	4,119,100	3,033,900	(26.3)
Disproportionate Share Hospital (SB 855)	2,924,462,100	2,858,252,300	(2.3)
Recoveries	(133,495,400)	(146,550,300)	9.8
Administration	624,602,200	796,077,300	27.5
SOURCE OF FUNDS	100.0%	100.0%	
State Funds	37.3	38.6	
Federal Funds	62.7	61.4	

INA Information Not Available.

/a/ Included as part of Miscellaneous Non-Fee-For-Service in Fiscal Year 1993-94.

Note: Excludes Interim Payments charged to the General Fund Loan.
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Budget Office,
Medi-Cal Reports, Compare III, Month Ending June 1995.

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SECTION 4

MEDI-CAL PROVIDER PARTICIPATION

SECTION 4

MEDI-CAL PROVIDER PARTICIPATION

Table 14 shows the total number of selected types of providers and their distribution by amount paid. The figures include out-of-state providers. Physicians include group practices which are counted as one provider. This understates the physician count, but it is not known how many physicians are practicing in a group.

A county distribution of selected types of providers is given in Table 26 and Table 27. The physician and hospital counts of Table 26 differ from Table 14 due to a different billing period used in Table 26.

The majority of providers are in the $1-$599, $600-$9,999, and $10,000-$49,999 payment intervals. However, for Pharmacies, there were more providers in the $100,000-$999,999 payment interval.

The large number of total general hospitals and the large number who received less than $10,000 each reflects the fact that out-of-state hospital billings are included in the data. Table 26 shows 686 hospitals received payment from Medi-Cal for either inpatient services, outpatient services, or both.

For intermediate care facilities for the developmentally disabled (DD), the largest paid amount interval was $100,000-$999,999.

For nursing facilities, the largest paid amount interval was $1,000,000 and Over.

TABLE 14

MEDI-CAL PROGRAM
NUMBER OF PROVIDERS RECEIVING MEDI-CAL PROGRAM PAYMENTS
BY SELECTED TYPE OF PROVIDER AND AMOUNT PAID
CALENDAR YEAR 1995

SELECTED TYPE OF PROVIDER	TOTAL PROVIDERS	NUMBER OF PROVIDERS BY AMOUNT PAID					
		$1-$599	$600-$9,999	$10,000-$49,999	$50,000-$99,999	$100,000-$999,999	$1,000,000 and Over
Acupuncturists	766	135	402	188	30	11	0
Adult Day Health Care Centers	76	1	0	1	7	65	2
Audiologists	298	41	107	106	25	19	0
Birthing Centers	5	0	2	2	0	1	0
Blood Banks	5	0	2	1	1	1	0
Certified Hospice Service	34	0	5	9	9	10	1
Chiropractors	605	417	183	5	0	0	0
Community Hemodialysis Center	248	5	10	22	20	178	13
Dentists	9,128	1,659	2,940	2,133	946	1,387	63
General Hospitals	1,656	321	591	173	39	193	339
Hearing Aid Dispensers	337	36	145	113	28	15	0
Heroin Detoxification	64	2	19	29	8	6	0
Home Health Agencies	512	53	173	134	68	81	3
In-Home Medical Care	35	1	2	5	6	20	1
Independent Rehabilitation Facility	93	3	17	43	16	14	0
Intermediate Care Facilities-DD/1/	703	0	4	13	22	635	29
Laboratory Facilities	540	80	149	105	43	128	35
Local Education Agencies	113	5	20	42	19	24	3
Medical Transportation	580	62	129	143	65	168	13
Mental Hospitals	3	0	0	1	0	0	2
Nurse Anesthetists	81	23	39	15	3	1	0
Nurse Midwives	175	8	32	41	13	70	11
Nursing Facilities	1,332	0	31	42	40	397	822
Occupational Therapists	40	14	19	6	1	0	0
Opticians	379	50	184	110	24	8	3
Optometrists	2,155	256	888	714	183	113	1
Organized Outpatient Clinics	432	44	92	99	63	129	5
Orthotists	26	3	10	10	0	3	0
Pharmacies	5,861	422	614	1,097	827	2,699	202
Physical Therapists	162	100	58	4	0	0	0
Physicians	30,786	7,550	11,785	6,788	2,140	2,457	66
Podiatrists	1,156	360	515	219	35	26	1
Portable X-Ray Laboratory	37	9	17	6	2	3	0
Prosthetists	126	14	35	52	16	9	0
Psychologists	1,988	574	959	346	77	32	0
Rural Health Clinics	392	7	10	36	35	239	65
Speech Therapists	167	21	83	37	15	11	0
Surgicenter	135	15	49	45	12	14	0

/1/ Includes DD-Habilitative and DD-Nursing.

Note: Includes out-of-state providers.
Physician group practices are counted as one provider.
Optometric group practices are counted as one provider.

Source: State of California, Department of Health Services, Report on Provider Participation in the Medicaid Program, Calendar Year 1995.

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SECTION 5

MEDI-CAL CAPITATED HEALTH SYSTEMS

PREPAID HEALTH PLAN ENROLLMENT - TABLE 15

A Prepaid Health Plan is an organized system which provides comprehensive health care services to an enrolled population.

Under Section 14200 et seq., of the Welfare and Institutions (W&I) Code, the Medi-Cal Program provides beneficiaries an opportunity to enroll in a managed care alternative to the Medi-Cal Fee-For-Service (FFS) system. Under this authority, the Department of Health Services contracts with Prepaid Health Plans (PHPs) and pilot projects to provide comprehensive, managed care in specified areas of the State on a prepaid, at-risk basis. Under Federal Law, California's PHPs are the equivalent of Health Maintenance Organizations (HMOs).

PHPs are reimbursed at a per-person per-month FFS equivalent Medi-Cal cost.

Prepaid Health Plan eligibles and payments shown in this report are obtained from the Worksheet for Capitation Payment (Initial Capitation Only, excluding supplemental adjustments, such as, any eligible on hold until certain issues have been resolved; AIDs Capitations; and new eligibles with enrollment beginning after the initial capitation).

An annual average of 604,213 Medi-Cal eligibles were enrolled in Prepaid Health Plans (PHPs) each month of 1995. The enrollment increased 18.9 percent from the average of 507,957 persons enrolled each month in 1994.

Most enrollees (90 percent) were persons in families with dependent children.

Los Angeles County showed a monthly average of 341,092 PHP enrollees in 1995, which accounted for 56 percent of the total enrollees.

Sacramento County was second in PHP enrollment, with an average of 90,802 enrollees per month.

A Geographic Managed Care (GMC) pilot project began in Sacramento County on April 1, 1994. Medi-Cal recipients in Sacramento County who receive assistance through Aid to Families with Dependent Children (AFDC) and Medically Indigent Children are required to enroll in a managed care plan. Aged, blind, and disabled recipients who are eligible for Medi-Cal under the Supplemental Security Income (SSI) program may voluntarily enroll in one of the managed care plans or continue receiving health care through the Medi-Cal Fee-For-Service program.

A second Geographic Managed Care program will be implemented in San Diego County with an expected start date of July 1, 1997.

During 1995, Medi-Cal had contracts with PHPs in 14 counties.

TABLE 15

MEDI-CAL PROGRAM
AVERAGE MONTHLY PREPAID HEALTH PLAN ENROLLEES
BY COUNTY AND AID CATEGORY
CALENDAR YEAR 1995

(PHPs ONLY)

COUNTY	TOTAL	AID CATEGORY				
		AGED	BLIND	DISABLED	FAMILIES	OTHER/1/
TOTAL	604,213	11,584	961	29,566	545,653	16,449
Alameda	1,568	162	19	336	1,051	0
Contra Costa	14,992	279	28	1,298	13,244	143
Los Angeles	341,092	6,278	498	14,983	309,459	9,874
Marin	237	12	1	47	177	0
Orange/2/	26,412	1,476	65	1,351	21,960	1,560
Riverside	9,167	158	41	682	8,181	106
Sacramento/3/	90,802	543	107	4,451	84,331	1,372
San Bernardino	39,526	453	83	2,264	36,241	484
San Diego	64,720	1,274	77	2,565	58,113	2,691
San Francisco	8,416	500	23	828	6,867	197
San Joaquin	891	24	3	113	751	0
Santa Clara	4,111	391	13	447	3,260	0
Sonoma	448	18	3	96	331	0
Yolo/4/	1,831	16	/a/	104	1,688	24

/1/ Other includes Medically Indigent (Children and Pregnant Women) and Refugees.
/2/ The Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995.
/3/ A Geographic Managed Care (GMC) pilot project began April 1, 1994.
/4/ Active for eleven months only.
/a/ Less than 0.50.

Note: PHPs = Prepaid Health Plans.
These figures do not include capitation adjustments.
Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Prepaid Health Plan Status Code 1 Reports.

PREPAID HEALTH PLAN CAPITATION PAYMENTS - TABLE 16

The Prepaid Health Plan eligibles and payments shown in this report are obtained from the Worksheet for Capitation Payment (Initial Capitation Only, excluding supplemental adjustments, such as, any eligible on hold until certain issues have been resolved; AIDs Capitations; and new eligibles with enrollment beginning after the initial capitation).

During 1995, $705.7 million in capitation payments were made to Prepaid Health Plans by the Medi-Cal program. This was $105.9 million more than was paid in the prior year.

Total payments were $28.5 million for Aged beneficiaries, or an average of $205.23 per enrollee per month in 1995.

Total payments were $3.5 million for Blind beneficiaries, or an average of $306.91 per enrollee per month in 1995.

The Medi-Cal program paid the highest rate for Disabled enrollees, an average of $255.40 per person per month, giving a total of $90.6 million in 1995.

In 1995, the largest total capitation payment $547.6 million, was for enrollees in the Families category. This amounted to an average of $83.63 per enrollee per month.

In 1995, $35.4 million was for enrollees in the Other category. This amounted to an average of $179.50 per enrollee per month.

TABLE 16

MEDI-CAL PROGRAM
TOTAL PREPAID HEALTH PLAN CAPITATION PAYMENTS/1/
BY COUNTY AND AID CATEGORY
CALENDAR YEAR 1995

(PHPs ONLY)

COUNTY	TOTAL	AID CATEGORY				
		AGED	BLIND	DISABLED	FAMILIES	OTHER/2/
TOTAL	$705,718,687	$28,529,302	$3,539,260	$90,614,677	$547,604,228	$35,431,220
Alameda	4,163,408	989,608	143,448	1,821,756	1,208,596	0
Contra Costa	19,553,426	390,136	72,070	3,585,866	15,182,111	323,243
Los Angeles	419,752,468	11,413,199	1,693,297	49,107,193	334,810,128	22,728,651
Marin	296,870	12,777	2,424	125,846	155,823	0
Orange/3/	32,536,968	2,595,661	170,319	3,655,881	22,554,869	3,560,238
Riverside	10,943,411	178,350	111,351	1,763,961	8,644,460	245,289
Sacramento/4/	81,047,654	2,343,557	380,432	11,028,132	65,674,786	1,620,747
San Bernardino	42,497,539	520,654	240,996	6,167,222	34,461,178	1,107,489
San Diego	67,397,077	1,394,183	223,687	7,663,662	52,733,024	5,382,521
San Francisco	19,378,801	8,110,879	451,313	3,586,710	6,805,100	424,799
San Joaquin	1,004,839	27,946	6,060	304,052	666,781	0
Santa Clara	4,910,459	515,492	34,887	1,326,858	3,033,222	0
Sonoma	552,704	19,444	8,080	241,251	283,929	0
Yolo	1,683,063	17,416	896	236,287	1,390,221	38,243

/1/ Does not show Medicare recovery or capitation adjustments.
/2/ Other includes Medically Indigent (Children and Pregnant Women) and Refugees.
/3/ The Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995.
/4/ A Geographic Managed Care (GMC) pilot project began April 1, 1994.
Note: PHPs = Prepaid Health Plans.
Source: State of California, Department of Health Services, Prepaid Health Plan Capitation Summaries.

COUNTY ORGANIZED HEALTH SYSTEMS - TABLE 17

County Organized Health Systems (COHS) are prepaid by the Medi-Cal program on a capitated at-risk basis. COHSs are responsible for providing authorization and payment for most non-dental Medi-Cal services rendered to Medi-Cal eligibles residing in their respective counties.

The County Organized Health System eligibles and payments shown in this report are obtained from the Worksheet for Capitation Payment (Initial Capitation Only, excluding supplemental adjustments, such as, any eligible on hold until certain issues have been resolved; AIDs Capitations; and new eligibles with enrollment beginning after the initial capitation).

County Organized Health Systems currently exist in four counties (Orange, San Mateo, Santa Barbara, and Solano Counties). Santa Cruz COHS became operational January 1, 1996. Without a change in Federal Law, the Medi-Cal Program cannot have any additional, exclusive COHS contracts.

An annual average of 183,884 Medi-Cal eligibles were enrolled in County Organized Health Systems (COHS) each month of 1995. The enrollment increased 55.7 percent from the average of 118,078 persons eligible each month in 1994. This sharp increase is due to the expansion of County Organized Health Systems.

During 1995, $303.6 million in capitation payments were made to County Organized Health Systems by the Medi-Cal program. This was $85.5 million or 39.2 percent more than $218.1 million paid in 1994. This large increase is due to the expansion of County Organized Health Systems.

The Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995. A total of $46.2 million in capitation payments were made for an average of 183,203 monthly eligibles for three months or an annual average of 45,801 eligibles.

The Health Plan of San Mateo (HPSM) was effective December 1, 1987. A total of $84.3 million in capitation payments were made for an average of 51,698 monthly eligibles during 1995.

The Santa Barbara Health Initiative (SBHI) was effective September 1, 1983. A total of $76.0 million in capitation payments were made for an average of 42,421 monthly eligibles during 1995.

The Solano Partnership HealthPlan (SPH) was effective May 1, 1994. A total of $97.2 million in capitation payments were made for an average of 43,964 monthly eligibles during 1995.

TABLE 17

MEDI-CAL PROGRAM
AVERAGE MONTHLY COUNTY ORGANIZED HEALTH SYSTEMS ELIGIBLES
AND TOTAL CAPITATION PAYMENTS BY COUNTY AND AID CATEGORY/1/
CALENDAR YEAR 1995

(COHS ONLY)

COUNTY	TOTAL	AGED	BLIND	DISABLED	FAMILIES	MEDICALLY INDIGENT	IRCA/OBRA ALIENS	ALL OTHER/2/
Orange/3/								
Eligibles (÷3)	183,203	0	0	0	158,272	24,931	0	0
Eligibles (÷12)	45,801	0	0	0	39,568	6,233	0	0
Payments	$46,180,678	*	*	*	*	*	*	*
San Mateo								
Eligibles	51,698	8,924	319	8,528	25,624	3,427	4,845	32
Payments	$84,266,190	*	*	*	*	*	*	*
Santa Barbara								
Eligibles	42,421	3,770	241	6,902	27,842	3,659	0	8
Payments	$75,973,740	*	*	*	*	*	*	*
Solano								
Eligibles	43,964	4,132	241	7,073	30,255	1,278	968	18
Payments	$97,195,800	*	*	*	*	*	*	*

* No breakdown of payments shown as negotiated Capitated Health System rates are confidential.

/1/ Does not include retroactive capitation adjustments.
(These payments do not include reconciliations which were not available at time of publication - however, the previous year's reconciliation amounted to 3.2 percent of the Total Payments to Health Plan of San Mateo, 4.2 percent of the Total Payments to Santa Barbara Health Initiative, and 6.1 percent to Solano County Medical Care Commission.

/2/ All Other includes Refugee/Entrant, Dialysis, and Total Parenteral Nutrition.

/3/ Effective October 1, 1995 or three months during 1995.

Note: COHS = County Organized Health Systems.
Figures are rounded independently and may not add to totals.
Capitation payments do not include payments made to County Organized Health Systems for excess risk claims.

Source: State of California, Department of Health Services, Advanced Payment Worksheets for County Organized Health Systems.
State of California, Department of Health Services, Contract Disbursement Register for San Mateo Commission, Santa Barbara Special Health Care Authority, and Solano County Medical Care Commisssion (reconciliations and adjustments).

ORANGE COUNTY ORGANIZED HEALTH SYSTEM (CalOPTIMA)

The Orange County Organized Health System (CalOPTIMA) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis.

All services authorized for Medi-Cal reimbursement will be provided through CalOPTIMA with the following exceptions: Services authorized by the California Children's Services program for the diagnosis and treatment of the CCS eligible condition of a specific member; Child Health and Disability Prevention (CHDP) services to eligibles under 21 years of age provided in accordance with the provisions of Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Short-Doyle/Medi-Cal mental health services and alcohol and drug program services; Laboratory analysis and reporting under the State serum alphafeto protein testing program administered by the Genetic Disease Branch of the State Department of Health Services; Services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001, et seq.; Services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part 1 of Division 8.5 of the Welfare and Institutions Code; or Home and community-based care waivered services as described in Title 22, CCR, Section 51176; Local Education Authority (LEA) services described in Title 22, CCR, Section 51360 when provided pursuant to an Independent Education Plan (IEP) or Individual Family Services Plan (IFSP); LEA assessment services as described in Title 22, CCR, Section 51360 (b) (1) for eligible students.

Note: CalOPTIMA is being phased in by effective date according to the following dates and aid codes.

CalOPTIMA Effective Date	
October 1, 1995	(AFDC and AFDC-related aid groupings) 01, 02, 08, 3A, 3C, 3P, 3R, 30, 32, 33, 34, 35, 38, 39, 54, 59, 81, 82, 86
February 1, 1996	10, 14, 16, 18, 20, 24, 26, 28, 36, 6A, 6C, 60, 64, 65, 66, 68
April 1, 1996	03, 04, 13, 17, 23, 27, 37, 4C, 4K, 40, 42, 45, 5K, 63, 67, 83, 87

Capitation payments do not include payments made to County Organized Health Systems for excess risk claims.

HEALTH PLAN OF SAN MATEO (HPSM)

The Health Plan of San Mateo (HPSM) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis.

All services authorized for Medi-Cal reimbursement will be provided through the Health Plan of San Mateo with the following exceptions: Services in any federal or state governmental hospital ("State hospital" does not mean county hospital); Services rendered under California Children's Services (CCS) case management and not reimbursable under the State's Title XIX program; Child Health and Disabilities Prevention (CHDP) services which are those health care services for eligibles under 21 years of age, and provided in accordance with Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Short-Doyle/Medi-Cal mental health services; Long term care services rendered by nursing and intermediate care facilities; Services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001, et seq.; Services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part 1 of Division 8.5 of the Welfare and Institutions Code; and Home or community-based care waivered services.

OBRA/IRCA recipients in San Mateo County began receiving services through the Health Plan of San Mateo (HPSM), effective September 1, 1993.

Currently, all recipients with an identification number beginning with County Code 41 (San Mateo County) with the following Aid Codes are eligible to receive medical benefits under Medi-Cal or as Medicare/Medi-Cal crossovers are served through the Health Plan of San Mateo:

Aged: 10, 14, 16, 17, 18
Disabled: 20, 24, 26 ,27, 28, 36, 60, 64, 65, 66, 67, 68, 6A, 6C
Family: 01, 02, 08, 30, 32, 33, 34, 35, 37, 38, 39, 3P, 3R, 40, 42, 54, 59
Child: 03, 04, 45, 82, 83
Adult: 81, 86, 87
Long Term Care: 13, 23, 53, 63
IRCA/OBRA: 55, 58

Capitation payments do not include payments made to County Organized Health Systems for excess risk claims.

NOTE

The Immigration Reform and Control Act (IRCA) Alien Program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994.

SANTA BARBARA HEALTH INITIATIVE (SBHI)

The Santa Barbara Health Initiative (SBHI) is a Medi-Cal County Organized Health System administered by Santa Barbara Regional Health Authority under contract to the State. This program provides health care services on a case management basis.

All services authorized for Medi-Cal reimbursement are provided through the Santa Barbara Health Initiative with the following exceptions: Services in any federal or state governmental hospital; Services rendered under California Children's Services (CCS) case management and not reimbursable under the State's Title XIX program; Child Health and Disability Prevention (CHDP) services to eligibles under 21 years of age provided in accordance with the provisions of Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Short-Doyle/Medi-Cal mental health services; Adult Day Health Care; Laboratory analysis and reporting under the State serum alphafeto protein testing program administered by the Genetic Disease Branch of the State Department of Health Services; The facility or per diem charge component of services rendered to covered beneficiaries 21 to 64 years of age institutionalized in a Joint Commission on Accreditation of Healthcare Organizations (JCAHO) accredited facility designated by the United States Department of Health and Human Services (DHHS) as an Institution for the Mentally Disordered (IMD), except for covered beneficiaries who were receiving such services before turning 21 years of age and who may continue to require such services before turning 21 years of age and who may continue to require such services in which case coverage may be extended until the beneficiary's 22nd birthday; and The facility or per diem charge component of services rendered to covered beneficiaries 64 years of age and under, institutionalized in a non-JCAHO accredited facility designated by DHHS as an IMD.

Currently, all recipients with an identification number beginning with County Code 42 (Santa Barbara County) with the exception of Aid Codes 3A, 3C, 4C, 4K, 5F, 5K, 07, 7A, 7C, 7F, 7G, 7H, 8C, 8F, 9A, 44, 47, 48, 49, 51, 52, 55, 56, 57, 58, 69, 70, 72, 74, 75, 79, and 80 who are eligible to receive medical benefits under Medi-Cal or as Medicare/Medi-Cal crossovers are served through the Santa Barbara Health Initiative. (Medi-Cal Aid Codes are listed at the end of this report.)

Capitation payments do not include payments made to County Organized Health Systems for excess risk claims.

SOLANO PARTNERSHIP HEALTHPLAN (SPH)

The Solano Partnership HealthPlan (SPH) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis for most Medi-Cal recipients residing in Solano County.

Nearly all services authorized for Medi-Cal reimbursement will be provided through the Solano Partnership HealthPlan with the following exceptions: Services rendered under the California Children's Services case management and not reimbursable under the State's Title XIX program; Child Health and Disability Prevention (CHDP) services to eligibles under 21 years of age provided in accordance with the provisions of Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Short-Doyle/Medi-Cal mental health services and alcohol and drug program services; Laboratory analysis and reporting under the State serum alphafeto protein testing program administered by the Genetic Disease Branch of the State Department of Health Services; Services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001, et seq.; Services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part 1 of Division 8.5 of the Welfare and Institutions Code; or Home and community-based care waivered services as described in Title 22, CCR, Section 51346; Local Education Authority (LEA) services described in Title 22, CCR, Section 51360 when provided pursuant to an Independent Education Plan (IEP) or Individual Family Services Plan (IFSP); LEA assessment services as described in Title 22, CCR, Section 51360 (b) (1) for eligible students.

Currently, all recipients with a Medi-Cal identification number beginning with County Code 48 (Solano County) with the following Aid Codes receive medical services through the Solano Partnership HealthPlan:

Aged: 10, 14, 16, 17, 18
Disabled: 20, 24, 26, 27, 28, 36, 60, 64, 65, 66, 67, 68, 6A, 6C
Family: 01, 02, 08, 30, 32, 33, 34, 35, 37, 38, 39, 3P, 3R, 40, 42, 54, 59
Child: 03, 04, 45, 82, 83
Adult: 81, 86, 87
Long Term Care: 13, 23, 53, 63
IRCA/OBRA: 55, 58

Capitation payments do not include payments made to County Organized Health Systems for excess risk claims.

NOTE

The Immigration Reform and Control Act (IRCA) Alien Program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994.

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SECTION 6

MEDICARE PART A AND PART B BUY-IN ACTIVITY

SECTION 6

MEDICARE PART A AND PART B BUY-IN ACTIVITY

Medicare, a medical insurance program, and Medi-Cal, a medical assistance program, together work to pay the medical bills of certain needy and low-income persons. The Medi-Cal program purchases Medicare Part A and Part B Supplementary Medical Insurance (SMI) for program eligibles who are entitled to the coverage.

Table 18 is included to show the number of Medi-Cal eligibles who were also eligible for Medicare Part A and Part B SMI coverage and for whom Medi-Cal paid the enrollment premium (bought in for).

Part A SMI benefits include hospital inpatient services.

Medi-Cal paid the monthly Medicare Part A enrollment premium for an average of 54,205 persons (44,320 aged and 9,886 disabled). The monthly premium averaged $15.8 million.

Part B SMI benefits include physicians' medical and surgical services,outpatient hospital services, outpatient physical therapy and speech pathology services, durable medical equipment, services from independent laboratories, ambulance services, home health care, and a number of other health services and supplies. In addition to paying the monthly enrollment premium for eligible persons, Medi-Cal can pay the annual deductible and the portion of covered medical costs that Medicare does not pay.

TABLE 18
MEDI-CAL PROGRAM
MEDICARE PART A AND PART B BUY-IN ACTIVITY:
AVERAGE MONTHLY NUMBER OF MEDI-CAL ELIGIBLES AND
AVERAGE MONTHLY PREMIUM PAYMENT
CALENDAR YEAR 1995

ELIGIBILITY CATEGORY	PART A		PART B/1/	
	ELIGIBLES	PREMIUM	ELIGIBLES	PREMIUM
TOTAL	54,205	$15,784,505	728,120	$35,690,352
Aged	44,320	INA	431,734	21,414,211
Disabled	9,886	INA	296,386	14,276,141

INA Information Not Available.
/1/ Includes Part A.
Note: All Qualified Medicare Beneficiaries are included in Aged.
Figures are rounded independently and may not add to totals.
Source: State of California, Department of Health Services, Buy-In Reports.

In 1995, Medi-Cal paid the Medicare Part B enrollment premium for an average of 431,734 aged persons each month. The monthly premium averaged $21.4 million.

Medi-Cal paid the monthly Medicare Part B enrollment premium for 296,386 disabled persons with premiums averaging $14.3 million per month. The Disabled category includes persons in the Disabled or Blind aid categories.

SECTION 7

OTHER COVERAGE

SECTION 7

OTHER COVERAGE

Generally, providers are required to bill all other health insurance carriers prior to billing Medi-Cal. In exceptional cases, the Department's Recovery Branch handles the recoupment of any third-party liabilities.

The recipient's "Other Coverage" code appears on his or her Medi-Cal ID card. Table 19 shows, for the month of July 1995, the number of eligibles who had other coverage. Eligibility under Medicare is not considered "Other Coverage".

In total, only 200,685 persons or 3.7 percent of the July 1995 eligible population had Other Coverage (OC). Of these, 60.5 percent were Families in the Public Assistance (PA) and Medically Needy (MN) programs. This was lower than their representation in the total eligible population which was 62.9 percent.

Of the 69,731 Aged, Blind, and Disabled persons in the MN Long-Term Care aid category, 25.0 percent had some sort of OC. Most of this aid group also has Medicare coverage which is not included in Table 19.

"Other" Aged, Blind, and Disabled included PA, MN with a share of cost, and MN with no share of cost. The proportion of this group having OC was 3.3 percent. However, many in this aid group have Medicare coverage.

TABLE 19

NUMBER OF MEDI-CAL ELIGIBLES BY TYPE OF OTHER COVERAGE AND AID CATEGORY GROUPS
JULY 1995

(COHS, PHPs, AND FFS)

TYPE OF OTHER COVERAGE	ALL AID CATEGORIES		AGED, BLIND, DISABLED: MEDICALLY NEEDY LONG-TERM CARE		AGED, BLIND, DISABLED: Other/1/		FAMILIES		ALL OTHER/2/	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
TOTAL	5,444,263	100.0 %	69,731	100.0 %	1,174,806	100.0 %	3,427,124	100.0 %	772,602	100.0 %
No Other Coverage	5,243,578	96.3	52,282	75.0	1,136,429	96.7	3,305,691	96.5	749,176	97.0
Total Other Coverage/3/	200,685	3.7	17,449	25.0	38,377	3.3	121,433	3.5	23,426	3.0
Percent		100.0 %		100.0 %		100.0 %		100.0 %		100.0 %
AARP	2,924	1.5	1,539	8.8	1,265	3.3	72	0.1	48	0.2
Aetna	2,661	1.3	431	2.5	559	1.5	1,260	1.0	411	1.8
Allstate Life	11	0.0	0	0.0	0	0.0	10	0.0	1	0.0
Alta Health Strategies, INC.	313	0.2	17	0.1	65	0.2	174	0.1	57	0.2
American General	236	0.1	4	0.0	38	0.1	115	0.1	79	0.3
Blue Cross	13,056	6.5	1,823	10.4	3,333	8.7	6,233	5.1	1,667	7.1
Blue Shield	5,565	2.8	701	4.0	1,410	3.7	2,860	2.4	594	2.5
CHAMPUS	5,427	2.7	45	0.3	834	2.2	4,219	3.5	329	1.4
Connecticut General (CIGNA)	1,125	0.6	132	0.8	273	0.7	553	0.5	167	0.7
Crown Life Insurance	21	0.0	2	0.0	2	0.0	15	0.0	2	0.0
Equicor/Equitable	221	0.1	19	0.1	91	0.2	82	0.1	29	0.1
Great Western Life Assurance	820	0.4	11	0.1	88	0.2	468	0.4	253	1.1
John Hancock Mutual Life	210	0.1	33	0.2	75	0.2	74	0.1	28	0.1
Kaiser	53,636	26.7	2,899	16.6	9,972	26.0	38,231	31.5	2,534	10.8
Metropolitan Life	1,442	0.7	292	1.7	319	0.8	580	0.5	251	1.1
Mutual of Omaha	468	0.2	99	0.6	107	0.3	213	0.2	49	0.2
New York Life Insurance	115	0.1	19	0.1	24	0.1	49	0.0	23	0.1
Pacific Mutual Life Insurance	221	0.1	15	0.1	32	0.1	124	0.1	50	0.2
Principal Financial Group	770	0.4	10	0.1	99	0.3	524	0.4	137	0.6
Prudential	997	0.5	167	1.0	259	0.7	439	0.4	132	0.6
Provident Life and Accident	541	0.3	73	0.4	78	0.2	291	0.2	99	0.4
Ross Loos/CIGNA	95	0.0	0	0.0	5	0.0	79	0.1	11	0.0
Travelers	1,447	0.7	213	1.2	305	0.8	764	0.6	165	0.7
Other	108,363	54.0	8,905	51.0	19,144	49.9	64,004	52.7	16,310	69.6

/1/ Includes Aged, Blind, and Disabled within Public Assistance, Medically Needy with share of cost, and Medically Needy with no share of cost.

/2/ Includes Medically Indigent, Dialysis, Total Parenteral Nutrition, IRCA/OBRA Aliens, Refugee/Entrant, 100 Percent Poverty, 133 Percent Poverty, 200 Percent Poverty, Income Disregard, 60-Day Postpartum, Qualified Medicare Beneficiary Programs, Presumptive Eligibility for Pregnant Women, and the Medi-Cal Tuberculosis Program.

/3/ Excludes Medicare.

Note: COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Percents are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), July 1995 Month of Eligibility from April 1996 MEF (DO32696).

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SECTION 8

COUNTY DATA

SECTION 8

COUNTY DATA

Table 20 shows the number of Medi-Cal eligibles, including Fee-For-Service (FFS), County Organized Health Systems (COHS), Prepaid Health Plans (PHPs), and Primary Care Case Management Plans (PCCMs) by age group and sex, in October 1995.

Males comprise 41 percent of the Medi-Cal eligibles. Most males (67 percent) are under age 21, 24 percent are of ages 21 to 64, and 9 percent are 65 and older.

Fifty-nine percent of eligibles are females. Most females are under age 21 (48 percent), 39 percent are of ages 21 to 64, and 13 percent are 65 and older.

Table 21 shows the average monthly number of persons eligible for Medi-Cal in each county by program and aid category, excluding COHS, PHPs, and PCCMs.

Los Angeles County accounted for 32 percent of non-PHP eligibles and 35 percent of eligibles including PHP enrollees.

Table 22 reports average monthly number of users by program and aid category, excluding COHS, PHPs, and PCCMs. Division of Table 22 by Table 21 will give proportion of eligibles using Medi-Cal services, or the utilization rate.

Los Angeles County accounted for 34 percent of the users. Its utilization rate of 51.7 percent was 1.7 percentage points higher than the statewide average of 50.0 percent.

Table 23 is a companion to the two preceding tables. Cost per user can be obtained by dividing Table 23 by Table 22, while division by Table 21 gives cost per eligible.

Los Angeles County accounted for 34.7 percent of the statewide total expenditures. The County's annual cost per user was $4,517, which was 3.3 percent higher than the unadjusted statewide average and 3.5 percent higher than the statewide average if adjusted to exclude Presumptive Eligibility for Pregnant Women Program users. Los Angeles County's annual cost per eligible was $2,336, which was 6.9 percent higher than the unadjusted statewide average and 6.8 percent higher than the adjusted statewide average.

Table 24 shows average monthly number of users by type of provider. Utilization rates for the various services can be obtained by dividing the number of users by the county total eligibles of Table 21.

For example, the statewide utilization rate for physician services was 22 percent, or 22 out of every 100 eligibles used this service each month. The Los Angeles County utilization rate for physician services was 25 percent.

Table 25 is a companion to Table 24. Cost per user by type of provider can be derived from the two tables.

For example, Los Angeles County's annual cost per user of physician services was $1,059.85, which was 3.1 percent lower than the statewide average of $1,028.45.

It can be noted from Table 25 that physician services accounted for 10.2 percent of total expenditures statewide and 11.6 percent of expenditures in Los Angeles County. Such comparisons can be made for each type of provider.

Table 26 shows the number of physicians and hospitals receiving payments from the Medi-Cal program during the July-September 1995 quarter. The hospitals are the general acute care facilities and exclude state hospitals. Primary care physicians are reported separately by type of primary care specialty. Any other specialty (e.g., psychiatry, pathology, etc.) Is included in the "All Other" column.

The number of physicians is understated. Due to the billing procedures used in the Medi-Cal program, the number of physicians practicing in groups is not known. Therefore, a group is counted as only one physician throughout this table.

Forty-three percent of the physicians billing the program were primary care physicians. Seventeen percent of the physicians were general practice/family practice physicians, 11 percent specialized in internal medicine, 7 percent specialized in obstetrics/gynecology, and 7 percent were pediatric specialists.

Table 27 shows the county distribution of selected providers receiving Medi-Cal program payments. These are provider types whose total numbers are high enough to provide a functional county distribution for this table.

As would be expected, Los Angeles County, which is the most populous California county, has the largest proportion of providers. Alpine County had only 214 Medi-Cal eligibles and an estimated 1,170 county population in 1995. Other types of services may be obtained through providers in surrounding counties.

Table 28 shows the population and Medi-Cal eligibles (including FFS, COHS, and PHPs) for each county.

Los Angeles County (the most populous California county) accounted for 29.2 percent of the population and 34.0 percent of the eligibles; followed by San Diego County accounting for 8.3 percent of the population and 6.6 percent of the eligibles; and Orange County accounting for 8.2 percent of the population and 5.4 percent of the eligibles.

Table 29 shows the number of persons certified eligible for Medi-Cal (including FFS, COHS, PHPs, and PCCMs) by county and race/ethnicity in October 1995.

Of the 5,402,239 persons certified eligible for Medi-Cal in October 1995, 2,055,088 were Hispanic; 1,630,247 were White; 743,730 were Black; and 973,174 were of Other and Not Reported race/ethnicities.

In terms of percentages, 38.0 percent of the Medi-Cal eligibles were Hispanic, 30.2 percent White, 13.8 percent Black, 8.3 percent Asian/Pacific Islander, 0.4 percent American Indian/Alaskan Native, and 9.3 percent Not Reported race/ethnicities.

Table 30 shows the number of providers by provider type and status. As of December 29, 1995, there were 76,783 providers with Active Status, 219,603 providers with Inactive Status, 251 providers with Pending Status, 3,619 providers with Deceased Status, 117 providers with Rejected Status, and 1,662 providers with Suspended Status.

> Please Note: The paid claims data on Tables 22-25 (Users and Payments) are understated for Orange, Sacramento, San Mateo, Santa Barbara, and Solano Counties due to the fact that not all covered services are reimbursed on a per claim basis.

TABLE 20

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
STATEWIDE	5,402,239	3,031,702	235,925	224,760	218,198	212,861	207,790	198,150	172,891	160,328	147,613	139,052
Alameda	205,541	105,701	7,170	7,226	7,218	7,256	6,976	6,711	6,177	5,829	5,303	4,760
Alpine	219	135	9	5	5	11	8	9	11	15	4	7
Amador	2,534	1,286	86	70	78	79	72	87	77	73	78	64
Butte	42,432	22,396	1,295	1,368	1,386	1,418	1,413	1,445	1,442	1,301	1,162	1,135
Calaveras	5,008	2,628	162	134	141	141	156	167	172	119	154	151
Colusa	3,413	1,994	190	184	160	142	132	122	101	92	89	72
Contra Costa	93,861	49,047	3,523	3,245	3,250	3,156	3,286	3,225	3,025	2,677	2,520	2,356
Del Norte	6,704	3,474	194	188	213	199	248	214	182	188	182	179
El Dorado	12,977	6,773	509	423	402	417	419	440	361	361	352	356
Fresno	216,040	129,599	8,694	8,771	8,898	8,665	8,753	8,239	7,518	6,920	6,690	6,414
Glenn	5,614	3,340	213	214	205	219	211	204	209	192	174	166
Humboldt	23,830	11,726	743	715	648	682	758	737	718	636	623	604
Imperial	40,104	21,329	1,283	1,220	1,275	1,292	1,277	1,298	1,194	1,115	1,045	957
Inyo	2,862	1,466	124	99	89	94	89	83	87	74	78	76
Kern	143,954	84,746	5,816	6,338	5,982	5,998	5,968	5,566	4,925	4,665	4,200	4,083
Kings	24,740	14,963	1,069	990	1,047	1,012	1,039	965	811	772	749	689
Lake	13,538	6,588	391	409	353	402	423	459	425	386	342	353
Lassen	5,006	2,664	158	170	165	181	175	156	168	150	156	125
Los Angeles	1,829,302	1,053,095	83,641	83,514	80,557	78,791	75,636	70,773	59,622	54,655	50,225	46,880
Madera	27,187	16,083	1,275	1,156	1,159	1,029	1,085	1,090	875	810	739	720
Marin	12,973	5,730	467	416	413	410	370	356	307	269	252	262
Mariposa	2,213	1,166	73	59	80	72	65	73	61	60	63	49
Mendocino	17,370	9,095	639	536	515	534	561	587	505	485	444	418
Merced	63,633	38,620	2,343	2,482	2,569	2,534	2,481	2,585	2,196	2,122	1,951	1,843
Modoc	2,388	1,247	81	69	78	71	82	83	61	59	75	72
Mono	725	437	50	33	32	25	38	27	28	20	25	24
Monterey	53,653	31,460	3,323	2,433	2,494	2,270	2,139	2,006	1,584	1,577	1,348	1,307
Napa	11,265	5,824	520	411	409	392	403	379	308	301	273	269
Nevada	7,805	3,855	281	236	200	237	231	258	209	215	213	203
Orange	292,268	166,481	17,413	14,287	12,923	12,275	11,537	10,692	8,805	7,963	7,163	6,747

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
Placer	18,129	8,909	677	569	549	590	614	598	514	475	461	450
Plumas	2,940	1,475	75	95	96	81	88	85	87	80	86	75
Riverside	216,348	128,860	10,563	9,770	9,244	8,904	8,624	8,585	7,612	7,008	6,415	6,183
Sacramento	237,566	132,631	8,775	8,686	9,100	8,879	8,597	8,332	7,811	7,424	6,917	6,628
San Benito	5,618	3,281	360	250	226	231	184	185	191	156	152	132
San Bernardino	317,194	191,771	14,482	14,247	13,782	13,371	13,152	12,851	11,523	10,835	9,915	9,103
San Diego	360,775	200,179	15,850	14,710	14,337	14,001	13,976	13,338	11,950	11,121	9,878	9,153
San Francisco	119,555	43,454	3,125	2,996	2,861	2,813	2,647	2,529	2,345	2,116	1,978	1,899
San Joaquin	123,742	70,377	4,560	4,453	4,439	4,489	4,495	4,399	4,100	3,909	3,749	3,597
San Luis Obispo	23,298	11,872	1,010	798	777	747	775	793	697	647	552	553
San Mateo	55,252	27,414	2,768	2,313	2,065	2,001	1,878	1,707	1,502	1,349	1,184	1,124
Santa Barbara	48,777	28,037	2,751	2,367	2,152	2,012	1,984	1,955	1,503	1,418	1,266	1,155
Santa Clara	192,003	98,658	7,425	6,992	6,906	6,446	6,385	5,893	5,076	4,850	4,365	4,178
Santa Cruz	28,168	14,759	1,448	1,136	1,076	991	992	877	793	676	634	605
Shasta	33,838	17,193	1,017	963	1,043	1,022	1,036	1,083	1,028	980	896	917
Sierra	392	163	8	6	9	9	12	12	7	9	8	6
Siskiyou	9,565	4,831	253	249	273	236	291	284	281	255	281	241
Solano	45,903	25,011	1,852	1,748	1,729	1,684	1,622	1,636	1,521	1,360	1,237	1,198
Sonoma	42,304	20,959	1,809	1,491	1,416	1,394	1,307	1,356	1,187	1,061	1,024	933
Stanislaus	94,135	52,115	3,850	3,367	3,241	3,304	3,441	3,275	2,980	2,834	2,618	2,614
Sutter	13,260	7,089	533	481	485	468	493	479	392	383	349	348
Tehama	11,804	6,480	414	449	425	417	410	396	345	370	331	323
Trinity	2,416	1,167	51	48	57	47	63	79	70	68	82	72
Tulare	103,520	61,448	4,427	4,136	4,086	3,977	4,050	3,950	3,346	3,262	3,107	2,987
Tuolumne	6,918	3,513	184	196	202	197	199	218	213	196	192	186
Ventura	76,750	43,059	4,337	3,262	3,150	3,000	2,930	2,753	2,260	2,070	1,968	1,808
Yolo	23,562	12,863	934	876	832	827	819	758	715	720	683	602
Yuba	19,348	11,186	652	705	696	719	695	708	678	595	613	641

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	132,203	123,494	116,787	113,746	109,434	104,779	97,701	92,667	80,595	71,073	71,655
Alameda	4,592	4,496	4,108	4,107	3,987	3,937	3,801	3,442	3,092	2,706	2,807
Alpine	7	5	9	4	6	3	7	4	3	2	1
Amador	62	78	55	51	44	53	40	44	32	36	27
Butte	1,163	1,064	1,026	982	902	808	727	666	599	534	560
Calaveras	133	131	142	108	117	121	93	94	67	67	58
Colusa	98	79	47	76	58	75	54	60	66	46	51
Contra Costa	2,301	2,031	2,014	1,936	1,821	1,754	1,653	1,552	1,320	1,200	1,202
Del Norte	189	202	190	155	140	155	132	107	77	67	73
El Dorado	350	319	288	273	283	238	252	248	168	154	160
Fresno	6,140	5,688	5,518	5,356	5,253	4,748	4,153	3,920	3,552	2,919	2,790
Glenn	159	156	148	133	128	130	102	119	107	71	80
Humboldt	600	533	559	522	498	440	421	400	328	293	268
Imperial	1,004	978	934	936	965	914	876	871	700	590	605
Inyo	67	60	70	62	58	43	57	50	31	35	40
Kern	3,711	3,683	3,327	3,203	2,977	2,842	2,578	2,462	2,253	2,094	2,075
Kings	682	611	613	585	549	534	481	485	457	419	404
Lake	327	315	297	290	296	257	212	224	165	135	127
Lassen	133	128	118	109	103	105	87	80	62	68	67
Los Angeles	44,185	40,079	38,076	37,113	36,176	35,140	32,915	31,625	27,716	22,807	22,969
Madera	684	652	634	586	569	547	586	452	504	508	423
Marin	243	240	229	201	212	206	195	200	153	153	176
Mariposa	53	54	68	60	54	62	39	40	26	26	29
Mendocino	454	427	389	368	370	411	333	312	286	276	245
Merced	1,859	1,861	1,648	1,577	1,538	1,405	1,277	1,271	1,089	1,038	951
Modoc	69	52	59	61	53	45	38	39	37	26	37
Mono	18	14	19	13	21	8	11	9	9	6	7
Monterey	1,281	1,187	1,076	1,054	1,049	981	977	971	848	777	778
Napa	232	245	221	226	179	190	199	197	180	155	135
Nevada	188	176	165	194	146	170	134	100	111	82	106
Orange	6,467	6,107	5,561	5,535	5,040	5,037	4,768	4,778	4,288	4,410	4,685

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	411	364	346	376	317	331	310	310	215	189	243
Plumas	87	79	65	63	63	44	46	57	44	40	39
Riverside	5,709	5,294	4,992	4,556	4,609	4,375	4,089	3,683	3,102	2,794	2,749
Sacramento	6,386	5,910	5,611	5,553	5,242	4,759	4,440	4,080	3,231	3,035	3,235
San Benito	141	133	114	134	113	108	116	115	96	80	64
San Bernardino	8,626	8,002	7,454	7,289	6,824	6,479	5,866	5,452	4,551	3,946	4,021
San Diego	8,788	8,171	7,839	7,656	7,303	6,806	6,231	5,696	4,805	4,220	4,350
San Francisco	1,751	1,795	1,730	1,638	1,724	1,735	1,759	1,674	1,541	1,385	1,413
San Joaquin	3,299	3,429	3,081	3,078	2,943	2,645	2,310	2,105	1,954	1,677	1,666
San Luis Obispo	526	511	462	460	431	463	394	367	313	276	320
San Mateo	1,039	945	901	875	830	881	929	858	824	733	708
Santa Barbara	1,079	1,024	971	926	900	877	810	807	735	686	659
Santa Clara	4,134	4,095	3,987	3,966	3,749	3,585	3,491	3,480	3,194	3,181	3,280
Santa Cruz	579	544	528	495	499	570	547	525	452	376	416
Shasta	858	874	819	765	720	654	620	547	503	398	450
Sierra	9	7	4	12	11	8	6	6	5	7	2
Siskiyou	234	280	258	251	215	208	207	176	145	98	115
Solano	1,156	1,015	1,012	987	945	799	822	717	662	637	672
Sonoma	948	852	740	794	791	782	766	704	557	518	529
Stanislaus	2,456	2,322	2,206	2,090	2,037	1,897	1,803	1,685	1,404	1,391	1,300
Sutter	324	310	273	279	248	263	234	208	192	177	170
Tehama	321	294	263	277	227	290	232	227	159	169	141
Trinity	62	64	63	78	62	47	59	34	23	19	19
Tulare	2,761	2,690	2,675	2,550	2,460	2,358	2,096	2,016	1,662	1,508	1,344
Tuolumne	195	169	159	156	161	137	146	121	102	78	106
Ventura	1,721	1,543	1,538	1,539	1,464	1,437	1,417	1,458	1,154	1,141	1,109
Yolo	613	580	567	538	488	487	389	416	348	345	326
Yuba	539	547	521	489	466	395	368	321	296	269	273

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
STATEWIDE	2,370,537	228,027	302,035	310,443	278,799	207,925	144,374	101,278	89,337	87,984	620,335
Alameda	99,840	8,733	11,564	12,430	11,443	9,210	6,920	4,638	3,922	3,699	27,281
Alpine	84	12	9	9	13	4	10	4	4	7	12
Amador	1,248	96	154	176	148	113	59	44	38	25	395
Butte	20,036	1,945	2,527	2,879	2,661	1,964	1,317	976	753	709	4,305
Calaveras	2,380	198	312	352	332	261	134	104	90	70	527
Colusa	1,419	163	189	199	168	102	80	59	63	48	348
Contra Costa	44,814	4,095	5,678	6,080	5,520	3,973	2,809	1,835	1,682	1,584	11,558
Del Norte	3,230	271	380	509	464	303	212	187	175	142	587
El Dorado	6,204	512	801	887	921	643	422	264	194	189	1,371
Fresno	86,441	8,984	12,154	12,469	10,624	7,960	5,390	3,890	3,391	3,121	18,458
Glenn	2,274	232	314	311	279	210	141	104	99	84	500
Humboldt	12,104	1,031	1,497	1,722	1,783	1,428	1,009	635	498	400	2,101
Imperial	18,775	1,469	2,000	2,171	2,180	1,751	1,164	768	730	854	5,688
Inyo	1,396	124	154	194	174	121	67	52	52	44	414
Kern	59,208	7,081	8,798	9,055	7,481	4,961	3,187	2,405	2,201	2,070	11,969
Kings	9,777	1,197	1,462	1,376	1,179	741	511	417	298	321	2,275
Lake	6,950	540	794	976	957	698	492	346	304	262	1,581
Lassen	2,342	260	322	362	324	206	135	102	78	89	464
Los Angeles	776,207	72,701	95,912	94,999	85,824	64,863	45,091	32,080	29,643	30,692	224,402
Madera	11,104	1,401	1,580	1,518	1,353	896	592	412	391	410	2,551
Marin	7,243	517	739	850	902	792	705	408	229	194	1,907
Mariposa	1,047	85	128	163	165	96	76	30	31	28	245
Mendocino	8,275	742	1,027	1,086	1,119	847	706	411	324	277	1,736
Merced	25,013	3,071	3,816	3,792	3,171	2,286	1,399	1,017	854	863	4,744
Modoc	1,141	101	159	148	154	87	89	49	44	41	269
Mono	288	36	46	47	41	30	12	10	10	8	48
Monterey	22,193	2,519	3,323	3,006	2,701	1,840	1,244	815	716	800	5,229
Napa	5,441	505	718	745	654	452	280	207	186	172	1,522
Nevada	3,950	292	449	589	519	416	277	177	117	114	1,000
Orange	125,787	12,170	16,039	15,326	13,793	10,950	8,146	5,795	4,690	4,277	34,601

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
TOTAL BOTH SEXES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
Placer	9,220	773	1,136	1,358	1,229	810	541	375	289	312	2,397
Plumas	1,465	107	148	205	190	137	105	77	60	49	387
Riverside	87,488	9,878	12,402	12,860	10,979	7,318	4,660	3,312	3,004	3,001	20,074
Sacramento	104,935	10,859	14,516	15,586	13,899	10,252	7,047	4,937	4,333	3,870	19,636
San Benito	2,337	266	370	348	266	161	96	83	60	76	611
San Bernardino	125,423	14,785	19,380	20,041	17,130	11,356	7,077	4,836	4,135	3,811	22,872
San Diego	160,596	14,995	20,317	21,878	19,973	14,706	9,669	6,414	5,462	5,469	41,713
San Francisco	76,101	3,169	4,727	6,018	6,768	6,581	5,446	3,793	3,607	3,856	32,136
San Joaquin	53,365	5,334	7,278	7,447	6,613	5,040	3,631	2,633	2,151	1,943	11,295
San Luis Obispo	11,426	1,066	1,470	1,661	1,503	1,116	690	481	395	365	2,679
San Mateo	27,838	2,208	3,004	2,876	2,572	1,905	1,384	987	997	1,056	10,849
Santa Barbara	20,740	2,223	2,860	2,918	2,476	1,788	1,320	841	738	721	4,855
Santa Clara	93,345	8,326	10,677	10,410	9,278	7,693	5,777	4,247	3,553	3,554	29,830
Santa Cruz	13,409	1,286	1,731	1,697	1,576	1,308	956	568	488	464	3,335
Shasta	16,645	1,489	2,110	2,469	2,311	1,664	1,156	796	676	615	3,359
Sierra	229	19	20	20	24	20	14	11	9	7	85
Siskiyou	4,734	370	485	647	693	537	346	250	216	170	1,020
Solano	20,892	2,458	3,020	3,052	2,494	1,706	1,069	691	625	580	5,197
Sonoma	21,345	1,950	2,638	2,997	2,779	2,158	1,575	1,032	806	691	4,719
Stanislaus	42,020	4,220	5,776	5,911	5,177	3,790	2,594	1,911	1,700	1,729	9,212
Sutter	6,171	613	812	836	720	481	316	253	246	237	1,657
Tehama	5,324	494	673	780	723	446	322	237	225	190	1,234
Trinity	1,249	72	114	174	175	154	110	86	68	44	252
Tulare	42,072	4,547	5,914	5,971	5,235	3,649	2,458	1,805	1,581	1,527	9,385
Tuolumne	3,405	252	450	535	538	347	214	145	111	99	714
Ventura	33,691	3,447	4,555	4,536	3,917	2,804	1,961	1,335	1,167	1,172	8,797
Yolo	10,699	964	1,398	1,535	1,387	984	676	487	438	461	2,369
Yuba	8,162	774	1,009	1,251	1,127	810	488	414	390	321	1,578

Note: COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/25/96.

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
STATEWIDE	3,182,655	1,541,259	115,683	109,820	106,083	104,677	102,105	97,398	84,833	78,507	72,476	68,000
Alameda	123,735	54,123	3,552	3,569	3,534	3,571	3,456	3,327	2,985	2,895	2,621	2,347
Alpine	131	74	6	2	3	6	5	6	3	8	2	3
Amador	1,529	633	28	35	30	35	41	44	43	30	35	28
Butte	24,106	11,232	647	667	658	703	649	726	727	642	567	551
Calaveras	2,874	1,261	84	61	77	60	75	83	77	52	76	74
Colusa	1,996	1,018	81	92	82	69	57	63	49	46	44	37
Contra Costa	56,406	24,927	1,729	1,593	1,590	1,510	1,633	1,595	1,472	1,346	1,214	1,147
Del Norte	3,765	1,720	90	98	107	98	122	114	93	74	78	95
El Dorado	7,741	3,496	238	211	203	203	220	239	189	188	166	181
Fresno	122,720	65,616	4,311	4,261	4,289	4,253	4,311	4,071	3,695	3,390	3,264	3,154
Glenn	3,203	1,658	98	99	89	107	99	96	97	94	90	79
Humboldt	13,560	5,886	349	336	313	333	384	353	337	304	306	305
Imperial	22,817	10,785	622	583	648	641	634	636	598	557	518	468
Inyo	1,686	724	61	58	37	47	42	28	40	33	44	37
Kern	83,627	43,288	2,862	3,074	2,887	2,897	2,970	2,722	2,468	2,297	2,108	1,972
Kings	14,238	7,603	542	501	499	498	492	462	389	384	357	337
Lake	7,745	3,284	187	193	174	185	208	223	229	218	171	168
Lassen	2,846	1,323	82	91	80	82	75	81	74	76	84	56
Los Angeles	1,096,032	536,535	40,925	40,851	39,358	38,912	37,323	34,868	29,328	26,690	24,836	23,095
Madera	15,630	8,259	590	597	565	526	530	562	431	397	375	336
Marin	7,718	2,815	230	190	185	189	184	152	145	139	128	131
Mariposa	1,286	589	43	28	38	40	34	36	23	36	30	25
Mendocino	10,037	4,533	320	266	227	236	279	292	249	229	207	192
Merced	35,891	19,467	1,156	1,205	1,209	1,225	1,226	1,251	1,037	1,045	956	905
Modoc	1,304	595	31	38	39	29	38	46	27	27	31	32
Mono	441	225	26	14	15	10	14	17	18	11	14	10
Monterey	31,822	16,265	1,636	1,209	1,207	1,120	1,046	1,027	779	755	664	653
Napa	6,602	2,904	243	213	189	183	200	172	150	145	140	128
Nevada	4,673	1,945	145	126	96	102	112	127	98	104	100	96
Orange	171,736	84,935	8,564	6,988	6,327	6,051	5,643	5,274	4,317	3,910	3,452	3,283

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
Placer	10,842	4,434	322	271	254	285	296	281	273	236	210	209
Plumas	1,728	747	42	49	38	42	46	45	48	44	37	37
Riverside	128,368	65,748	5,282	4,700	4,473	4,366	4,281	4,229	3,723	3,492	3,152	2,994
Sacramento	136,315	67,043	4,284	4,218	4,406	4,334	4,204	4,105	3,774	3,595	3,317	3,236
San Benito	3,343	1,690	172	113	105	126	86	82	94	71	83	69
San Bernardino	186,575	97,243	7,052	6,956	6,682	6,524	6,385	6,226	5,704	5,280	4,878	4,351
San Diego	212,852	101,261	7,824	7,212	6,864	6,940	6,732	6,587	5,833	5,473	4,829	4,509
San Francisco	67,158	22,232	1,530	1,448	1,444	1,407	1,303	1,213	1,190	1,049	993	925
San Joaquin	70,524	35,601	2,247	2,101	2,128	2,284	2,233	2,164	2,019	1,908	1,862	1,753
San Luis Obispo	13,795	5,970	502	364	381	361	387	370	336	312	261	256
San Mateo	33,571	14,095	1,342	1,119	1,016	980	891	823	751	650	602	580
Santa Barbara	28,541	14,365	1,356	1,151	1,023	1,003	946	977	742	705	612	575
Santa Clara	113,898	50,345	3,602	3,491	3,386	3,226	3,220	2,864	2,489	2,344	2,109	2,053
Santa Cruz	16,633	7,542	702	577	521	477	489	427	396	323	305	291
Shasta	19,418	8,546	481	472	500	476	513	523	496	475	431	456
Sierra	239	88	3	3	5	4	7	7	2	3	2	4
Siskiyou	5,503	2,441	118	128	132	112	143	128	142	137	146	115
Solano	27,726	12,682	943	829	830	814	793	788	698	673	626	595
Sonoma	24,822	10,544	858	720	693	677	609	662	558	514	503	462
Stanislaus	54,681	26,483	1,925	1,674	1,558	1,595	1,707	1,618	1,474	1,378	1,273	1,226
Sutter	7,836	3,638	283	237	258	226	236	240	170	185	174	165
Tehama	6,810	3,245	199	226	212	200	195	192	170	187	164	158
Trinity	1,349	561	23	23	31	21	29	37	28	36	34	35
Tulare	58,799	31,264	2,168	2,049	2,029	1,961	2,010	1,948	1,662	1,562	1,502	1,468
Tuolumne	4,126	1,758	79	93	77	101	93	107	119	101	85	100
Ventura	44,943	21,858	2,093	1,568	1,545	1,489	1,429	1,345	1,108	1,012	964	853
Yolo	13,569	6,462	461	432	408	392	408	379	325	341	302	284
Yuba	10,794	5,655	312	347	329	333	332	338	342	299	342	316

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	65,081	60,705	57,413	55,941	54,155	52,374	50,510	50,111	50,250	51,017	54,120
Alameda	2,201	2,237	2,059	1,963	1,983	2,002	1,932	1,874	1,886	1,966	2,163
Alpine	4	3	5	2	6	2	1	2	2	2	1
Amador	32	38	25	24	22	27	18	25	22	27	24
Butte	531	532	488	479	464	416	329	354	359	353	390
Calaveras	64	51	63	43	54	56	43	49	41	40	38
Colusa	59	39	26	31	29	31	34	33	39	36	41
Contra Costa	1,108	981	1,007	947	911	861	898	812	840	858	875
Del Norte	93	106	91	78	60	63	70	49	35	54	52
El Dorado	182	147	139	137	132	119	129	123	113	117	120
Fresno	3,021	2,791	2,685	2,654	2,606	2,399	2,147	2,098	2,125	2,023	2,068
Glenn	77	69	78	70	68	66	56	58	65	47	56
Humboldt	302	256	273	237	249	211	204	222	212	209	191
Imperial	476	462	435	479	461	494	447	449	381	382	414
Inyo	36	30	30	23	35	21	20	32	21	24	25
Kern	1,827	1,734	1,683	1,657	1,479	1,408	1,358	1,352	1,462	1,496	1,575
Kings	345	307	315	296	241	259	237	276	289	293	284
Lake	170	148	131	123	135	124	99	105	100	101	92
Lassen	60	62	56	41	58	48	40	36	40	49	52
Los Angeles	21,858	19,751	18,759	18,342	17,938	17,692	17,140	17,206	17,102	16,689	17,872
Madera	339	313	316	276	290	280	334	254	314	332	302
Marin	123	127	113	94	84	88	87	110	93	102	121
Mariposa	22	27	32	29	26	30	22	17	16	15	20
Mendocino	219	207	185	191	176	210	167	161	166	190	164
Merced	935	908	812	801	770	706	639	699	663	676	643
Modoc	30	27	32	25	24	19	18	20	20	19	23
Mono	10	8	9	7	9	6	5	5	7	6	4
Monterey	603	574	524	525	512	501	528	582	602	577	641
Napa	117	115	104	114	90	97	105	96	111	98	94
Nevada	96	80	82	101	74	84	61	53	72	58	78
Orange	3,197	2,976	2,745	2,716	2,527	2,509	2,499	2,706	2,772	3,074	3,405

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	188	182	168	178	149	160	150	152	125	148	197
Plumas	41	35	29	29	30	20	21	26	28	31	29
Riverside	2,827	2,595	2,442	2,289	2,317	2,171	2,099	2,006	1,990	2,124	2,196
Sacramento	3,147	2,888	2,848	2,759	2,578	2,369	2,279	2,127	1,975	2,193	2,407
San Benito	67	62	58	75	59	60	59	64	70	65	50
San Bernardino	4,238	3,964	3,712	3,551	3,369	3,201	3,019	2,924	2,997	3,039	3,191
San Diego	4,321	4,013	3,763	3,747	3,587	3,330	3,275	2,978	3,002	3,094	3,348
San Francisco	879	939	863	828	897	884	907	875	881	826	951
San Joaquin	1,593	1,748	1,452	1,496	1,405	1,293	1,179	1,155	1,205	1,144	1,232
San Luis Obispo	282	257	227	210	211	216	201	188	208	206	234
San Mateo	494	465	438	449	432	503	505	482	527	520	526
Santa Barbara	537	509	467	458	444	450	447	440	491	517	515
Santa Clara	2,024	2,004	1,972	1,961	1,824	1,747	1,812	1,875	1,938	2,181	2,223
Santa Cruz	274	271	250	251	232	309	264	281	297	281	324
Shasta	402	412	390	368	368	304	311	291	299	268	310
Sierra	4	3	2	8	7	4	2	6	4	7	1
Siskiyou	121	143	129	121	107	111	84	93	77	64	90
Solano	551	508	505	453	461	403	430	378	435	469	500
Sonoma	462	397	353	397	389	387	391	392	362	354	404
Stanislaus	1,232	1,178	1,061	992	1,019	934	933	924	857	970	955
Sutter	174	152	140	141	114	127	118	126	123	129	120
Tehama	162	137	118	138	117	140	115	115	103	98	99
Trinity	32	29	24	37	29	31	22	19	11	15	15
Tulare	1,356	1,356	1,326	1,213	1,226	1,147	1,048	1,123	1,068	1,043	999
Tuolumne	94	77	82	73	87	64	72	60	59	56	79
Ventura	868	736	782	721	709	719	728	784	733	818	854
Yolo	296	285	266	243	233	261	194	204	229	263	256
Yuba	278	254	244	250	242	200	178	165	186	181	187

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
STATEWIDE	1,641,396	191,699	239,123	228,513	191,592	130,277	84,241	57,447	51,791	52,882	413,831
Alameda	69,612	7,591	9,469	9,381	7,877	5,731	3,898	2,600	2,276	2,301	18,488
Alpine	57	9	8	5	9	3	5	3	2	4	9
Amador	896	74	117	137	105	84	34	24	18	17	286
Butte	12,874	1,428	1,763	1,894	1,673	1,128	735	527	431	400	2,895
Calaveras	1,613	145	209	260	225	164	79	51	52	41	387
Colusa	978	137	150	144	105	60	48	42	35	27	230
Contra Costa	31,479	3,389	4,415	4,374	3,752	2,411	1,673	1,059	1,033	1,023	8,350
Del Norte	2,045	197	265	331	299	163	115	99	108	72	396
El Dorado	4,245	409	580	653	626	387	212	144	108	112	1,014
Fresno	57,104	7,104	8,827	8,489	6,870	4,730	3,134	2,176	1,917	1,851	12,006
Glenn	1,545	177	245	217	184	129	81	65	60	47	340
Humboldt	7,674	784	1,061	1,154	1,100	752	551	330	258	229	1,455
Imperial	12,032	1,166	1,497	1,564	1,494	1,157	705	425	385	437	3,202
Inyo	962	101	103	152	111	72	40	27	31	30	295
Kern	40,339	5,640	6,495	6,392	5,015	3,113	1,885	1,458	1,281	1,230	7,830
Kings	6,635	962	1,044	958	814	468	319	232	179	184	1,475
Lake	4,461	389	544	676	603	433	253	192	171	157	1,043
Lassen	1,523	198	213	253	207	116	75	58	42	52	309
Los Angeles	559,497	64,817	82,083	74,889	62,690	42,988	27,694	18,832	17,514	18,695	149,295
Madera	7,371	1,081	1,105	1,061	895	544	367	230	232	221	1,635
Marin	4,903	425	565	586	595	465	401	218	129	112	1,407
Mariposa	697	72	91	111	114	55	41	14	21	12	166
Mendocino	5,504	564	757	769	718	509	410	232	194	158	1,193
Merced	16,424	2,300	2,662	2,584	2,076	1,366	794	580	492	511	3,059
Modoc	709	68	113	95	95	52	40	28	19	20	179
Mono	216	33	38	39	33	25	4	6	4	4	30
Monterey	15,557	2,183	2,618	2,228	1,854	1,133	734	474	438	497	3,398
Napa	3,698	413	533	507	445	269	151	116	109	100	1,055
Nevada	2,728	227	331	425	347	263	160	99	65	73	738
Orange	86,801	10,322	12,781	11,164	9,452	6,887	4,619	3,078	2,678	2,505	23,315

TABLE 20 (Continued)

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)
FEMALES
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
Placer	6,408	625	850	994	809	468	306	212	177	194	1,773
Plumas	981	90	113	151	131	92	56	46	32	24	246
Riverside	62,620	8,395	9,987	9,628	7,731	4,771	2,823	1,973	1,811	1,862	13,639
Sacramento	69,272	8,718	10,706	10,646	8,925	5,929	3,837	2,714	2,448	2,291	13,058
San Benito	1,653	219	292	260	183	110	55	48	30	45	411
San Bernardino	89,332	12,204	15,094	14,820	11,895	7,356	4,318	2,847	2,446	2,370	15,982
San Diego	111,591	12,489	15,889	16,059	13,849	9,309	5,789	3,691	3,223	3,349	27,944
San Francisco	44,926	2,568	3,433	3,730	3,754	3,268	2,474	1,680	1,754	2,108	20,157
San Joaquin	34,923	4,161	5,329	5,124	4,273	2,976	2,034	1,459	1,192	1,121	7,254
San Luis Obispo	7,825	844	1,083	1,135	1,014	682	390	282	235	222	1,938
San Mateo	19,476	1,888	2,414	2,135	1,747	1,210	775	607	609	673	7,418
Santa Barbara	14,176	1,844	2,172	2,077	1,634	1,067	741	459	435	427	3,320
Santa Clara	63,553	6,994	8,448	7,753	6,416	4,863	3,240	2,340	2,069	2,125	19,305
Santa Cruz	9,091	1,049	1,304	1,214	1,045	766	538	304	275	287	2,309
Shasta	10,872	1,113	1,471	1,680	1,447	968	624	442	384	379	2,364
Sierra	151	15	11	16	15	13	5	6	5	4	61
Siskiyou	3,062	287	340	458	456	298	174	129	119	101	700
Solano	15,044	2,051	2,372	2,228	1,772	1,105	679	408	415	375	3,639
Sonoma	14,278	1,562	1,959	2,088	1,724	1,227	868	564	446	405	3,435
Stanislaus	28,198	3,306	4,270	4,066	3,408	2,303	1,466	1,104	979	1,056	6,240
Sutter	4,198	490	597	592	472	283	186	149	147	153	1,129
Tehama	3,565	387	477	540	458	278	185	132	140	107	861
Trinity	788	55	85	138	101	90	50	40	33	23	173
Tulare	27,535	3,572	4,269	4,051	3,338	2,167	1,431	991	869	869	5,978
Tuolumne	2,368	190	329	370	391	214	133	82	73	63	523
Ventura	23,085	2,843	3,417	3,157	2,611	1,753	1,139	807	702	695	5,961
Yolo	7,107	767	1,050	1,074	890	596	387	282	262	264	1,535
Yuba	5,139	568	680	837	720	458	281	230	199	168	998

Note: COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/25/96.

TABLE 21

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	4,633,165	3,374,020	341,455	23,763	638,539	2,370,263	543,081	107,879	785	48,349	386,070
Alameda	203,734	164,549	14,900	1,162	33,597	114,890	21,653	5,669	36	2,497	13,451
Alpine	214	178	10	1	22	145	32	1	0	7	24
Amador	2,599	1,842	170	12	323	1,338	564	160	0	38	366
Butte	42,489	34,732	2,110	261	6,822	25,539	4,840	1,112	14	414	3,300
Calaveras	5,067	3,994	265	30	703	2,997	774	140	1	58	574
Colusa	3,703	2,073	200	11	315	1,547	734	81	2	50	600
Contra Costa	78,992	61,059	6,011	480	14,549	40,019	9,755	2,617	10	1,024	6,104
Del Norte	6,663	5,601	292	34	1,306	3,969	648	126	2	83	437
El Dorado	13,085	9,642	726	89	1,888	6,940	1,966	381	2	166	1,417
Fresno	216,994	173,538	10,608	889	27,799	134,241	19,397	2,727	39	1,122	15,509
Glenn	5,722	3,988	306	22	642	3,018	798	96	1	42	658
Humboldt	23,968	19,792	1,097	141	5,042	13,512	2,789	453	3	271	2,061
Imperial	39,713	30,731	3,804	147	4,305	22,475	5,392	645	3	343	4,400
Inyo	2,863	2,013	226	14	376	1,397	495	117	0	39	340
Kern	142,164	107,302	6,338	640	19,535	80,790	17,969	2,100	20	1,100	14,749
Kings	24,782	17,519	1,294	89	2,853	13,283	3,216	430	3	146	2,637
Lake	13,667	11,652	876	74	2,476	8,225	1,497	312	5	183	997
Lassen	5,090	4,173	229	26	769	3,149	634	119	1	52	462
Los Angeles	1,503,301	1,023,797	132,122	7,585	188,823	695,267	173,073	32,864	157	14,299	125,753
Madera	26,988	17,456	1,407	92	3,122	12,835	3,933	456	8	178	3,292
Marin	12,924	8,611	872	106	2,870	4,763	2,097	644	4	255	1,193
Mariposa	2,268	1,656	144	6	215	1,291	459	76	1	38	344
Mendocino	17,301	12,851	923	88	2,929	8,912	2,558	399	1	183	1,975
Merced	64,696	47,730	2,691	250	5,789	39,001	7,299	860	16	380	6,043
Modoc	2,463	1,774	101	8	304	1,361	406	100	2	48	257
Mono	744	470	24	3	67	376	123	5	0	11	106
Monterey	56,157	37,073	3,163	215	5,615	28,080	8,731	900	9	418	7,404
Napa	11,512	7,252	654	67	1,776	4,755	2,122	603	5	179	1,335
Nevada	7,851	5,883	425	67	1,199	4,191	1,398	402	1	118	877
Orange	220,314	126,634	18,809	1,244	27,077	79,503	30,760	7,952	78	3,169	19,561

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	18,391	14,346	997	113	3,205	10,031	2,472	861	8	259	1,345
Plumas	3,172	2,222	170	22	502	1,528	723	136	0	36	551
Riverside	204,065	152,685	11,501	990	24,189	116,004	24,675	3,634	27	1,753	19,261
Sacramento	145,089	121,982	9,532	987	32331	79,132	12,297	3,810	20	1,859	6,608
San Benito	5,787	4,007	372	21	510	3,103	922	133	0	46	743
San Bernardino	278,505	226,096	12,637	1,135	31,682	180,642	25,242	4,183	54	1,914	19,090
San Diego	294,538	226,625	24,709	1,777	45,228	154,910	29,020	7,621	52	2,969	18,378
San Francisco	111,048	82,375	20,254	1,016	26,732	34,373	17,310	4,961	51	2,496	9,801
San Joaquin	122,652	100,488	5,851	590	19,159	74,889	12,955	2,370	17	1,113	9,456
San Luis Obispo	23,482	16,783	1,352	126	3,943	11,363	3,769	790	2	419	2,558
San Mateo	3,467	12	0	0	2	10	1	0	0	1	0
Santa Barbara	7,351	5	0	0	3	3	8	1	0	1	6
Santa Clara	188,674	133,507	17,251	882	21,476	93,898	26,624	6,826	39	2,324	17,436
Santa Cruz	29,016	19,224	1,789	158	4,287	12,989	4,635	806	5	360	3,464
Shasta	33,473	27,811	1,681	163	6,405	19,561	3,944	834	3	365	2,742
Sierra	374	288	36	4	66	183	77	29	0	10	38
Siskiyou	9,696	8,107	550	51	1,767	5,739	1,022	227	3	99	693
Solano	979	23	0	0	12	11	24	0	1	14	10
Sonoma	42,245	31,232	2,282	310	8,057	20,583	5,736	1,191	16	1,201	3,328
Stanislaus	95,259	74,348	4,951	445	13,507	55,444	11,212	1,905	17	896	8,394
Sutter	13,949	9,724	940	86	1,937	6,761	2,420	346	2	106	1,966
Tehama	11,847	8,836	655	55	1,699	6,428	1,501	268	3	129	1,101
Trinity	2,482	2,024	136	12	486	1,390	370	49	2	51	268
Tulare	104,869	77,987	5,443	424	11,584	60,536	11,529	1,461	10	1,155	8,903
Tuolumne	6,877	5,526	385	32	1,091	4,018	953	177	1	100	675
Ventura	76,185	48,633	5,164	318	9,412	33,739	12,999	1,892	17	1,350	9,740
Yolo	22,299	17,115	1,149	105	3,208	12,653	2,740	590	7	289	1,854
Yuba	19,367	16,446	874	87	2,952	12,533	1,792	229	3	124	1,436

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	MEDICALLY INDIGENT			IRCA	OBRA	REFUGEE/	100 PERCENT	133 PERCENT	INCOME DISREGARD		
	Total	Adults	Children	ALIENS	ALIENS	ENTRANT	POVERTY	POVERTY	Total	Infant	Pregnant Woman
STATEWIDE	249,073	12,411	236,663	181	282,743	5,647	15,610	75,087	82,058	34,877	47,182
Alameda	6,647	549	6,099	11	5,948	276	344	1,987	2,150	840	1,310
Alpine	3	0	3	0	0	0	0	1	0	0	0
Amador	112	6	106	0	8	0	10	26	35	17	19
Butte	1,418	78	1,340	0	691	20	76	321	348	152	196
Calaveras	160	12	147	0	19	0	21	46	51	26	25
Colusa	309	11	298	1	312	0	28	82	158	65	93
Contra Costa	2,664	140	2,524	3	3,186	58	226	954	1,015	506	509
Del Norte	208	13	195	0	89	0	9	51	56	29	27
El Dorado	615	33	581	0	340	0	38	215	261	135	126
Fresno	7,562	388	7,174	12	11,018	71	474	2,280	2,476	1,038	1,438
Glenn	395	14	382	0	294	3	24	95	123	43	79
Humboldt	707	55	651	0	103	2	64	202	272	123	149
Imperial	1,772	130	1,641	1	601	0	167	493	545	210	335
Inyo	122	8	113	0	108	1	15	58	46	24	21
Kern	6,288	274	6,014	6	6,342	5	572	1,878	1,756	781	974
Kings	1,568	53	1,515	0	1,491	2	150	488	346	178	168
Lake	263	17	245	0	88	0	34	59	71	32	38
Lassen	114	5	108	0	72	0	16	35	40	17	23
Los Angeles	111,122	5,034	106,087	60	132,735	1,050	3,637	24,916	30,950	9,930	21,020
Madera	1,983	69	1,914	0	2,702	4	92	416	391	177	214
Marin	691	19	672	0	966	11	32	251	241	103	138
Mariposa	89	6	84	0	2	0	4	25	29	12	17
Mendocino	776	32	744	0	584	2	53	195	266	111	155
Merced	3,052	152	2,900	4	4,438	23	379	1,025	726	254	472
Modoc	118	4	115	0	112	0	0	26	24	8	17
Mono	35	4	31	0	39	0	2	23	50	26	24
Monterey	2,377	134	2,243	0	3,976	8	385	1,453	2,116	951	1,165
Napa	657	16	641	0	776	4	67	270	343	144	199
Nevada	264	20	244	0	52	0	38	85	125	70	55
Orange	18,689	806	17,883	7	25,080	1,280	1,625	8,040	7,461	3,982	3,479

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	MEDICALLY INDIGENT			IRCA	OBRA	REFUGEE/	100	133	INCOME DISREGARD		
	Total	Adults	Children	ALIENS	ALIENS	ENTRANT	PERCENT POVERTY	PERCENT POVERTY	Total	Infant	Pregnant Woman
Placer	628	46	582	1	331	8	56	219	300	140	160
Plumas	143	10	133	0	14	0	8	25	35	16	19
Riverside	10,712	603	10,109	1	7,569	75	1,021	3,538	3,617	1,893	1725
Sacramento	3,001	243	2,758	4	3,928	437	307	1,476	1,585	784	802
San Benito	297	19	278	0	209	0	29	145	176	76	100
San Bernardino	9,672	523	9,149	10	9,852	230	711	3,298	3,185	1,704	1481
San Diego	15,301	932	14,369	32	12,255	543	931	4,598	4,777	2,217	2560
San Francisco	4,581	282	4,299	4	3,309	382	206	1,375	1,259	601	658
San Joaquin	3,330	140	3,191	0	3,514	86	313	945	959	485	474
San Luis Obispo	1,081	77	1,004	0	724	0	120	454	513	265	248
San Mateo	85	0	85	2	0	0	259	1,455	1,553	856	697
Santa Barbara	5	0	5	1	3,681	0	378	1,703	1,490	783	707
Santa Clara	7,415	335	7,080	11	14,599	934	488	2,399	2,418	1,177	1241
Santa Cruz	2,004	129	1,875	0	1,499	5	153	621	796	404	392
Shasta	989	62	927	0	54	3	96	257	303	136	167
Sierra	2	1	1	0	0	0	1	2	4	1	3
Siskiyou	263	18	245	0	141	0	26	57	73	27	46
Solano	64	4	60	0	2	0	93	383	354	177	177
Sonoma	1,828	89	1,739	0	1,659	9	183	685	839	418	421
Stanislaus	3,026	168	2,858	0	3,629	39	521	1,259	1,189	633	556
Sutter	646	36	610	0	564	2	86	255	232	126	106
Tehama	720	22	698	0	483	0	44	138	115	59	56
Trinity	49	6	44	0	1	0	8	13	13	6	6
Tulare	5,212	261	4,951	5	7,203	13	329	1,302	1,267	616	650
Tuolumne	231	14	216	0	11	0	24	55	77	32	45
Ventura	5,638	227	5,411	2	4,305	11	513	1,988	1,948	1,005	943
Yolo	808	57	751	1	770	45	96	307	401	196	205
Yuba	565	24	541	0	265	7	31	139	111	55	56

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	200 PERCENT POVERTY			60-DAY	DIALYSIS	TOTAL PARENTERAL	QUALIFIED MEDICARE	PRESUMPTIVE ELIGIBILITY FOR	MEDI-CAL TUBERCULOSIS
	Total	Infant	Pregnant Woman	POSTPARTUM		NUTRITION	BENEFICIARY	PREGNANT WOMEN	PROGRAM
STATEWIDE	1,260	187	1,074	1,760	25	9	2,233	INA	377
Alameda	45	11	33	38	4	0	79	INA	2
Alpine	0	0	0	0	0	0	0	INA	0
Amador	0	0	0	1	0	0	0	INA	0
Butte	12	4	7	17	0	0	14	INA	0
Calaveras	0	0	0	1	1	0	2	INA	0
Colusa	0	0	0	2	0	0	2	INA	0
Contra Costa	13	3	10	23	3	0	33	INA	0
Del Norte	0	0	0	1	0	0	0	INA	0
El Dorado	2	0	2	4	0	0	2	INA	0
Fresno	72	26	46	69	1	0	24	INA	0
Glenn	0	0	0	1	0	0	2	INA	0
Humboldt	1	0	1	15	0	0	22	INA	0
Imperial	3	0	3	0	0	0	8	INA	0
Inyo	3	0	3	0	1	0	1	INA	0
Kern	17	3	14	9	0	1	21	INA	0
Kings	0	0	0	1	0	0	2	INA	0
Lake	0	0	0	2	0	0	2	INA	0
Lassen	1	1	0	0	0	0	4	INA	0
Los Angeles	577	18	559	223	1	2	1,034	INA	125
Madera	2	0	2	3	0	0	6	INA	0
Marin	3	1	2	19	0	0	2	INA	1
Mariposa	3	0	3	0	0	0	0	INA	0
Mendocino	7	2	5	2	0	0	7	INA	0
Merced	12	1	11	1	0	0	7	INA	0
Modoc	2	0	2	0	0	0	0	INA	0
Mono	4	1	2	0	0	0	0	INA	0
Monterey	5	1	4	18	0	0	13	INA	4
Napa	0	0	0	1	0	0	20	INA	0
Nevada	1	0	1	1	0	0	3	INA	1
Orange	119	30	88	441	2	2	157	INA	18

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY	200 PERCENT POVERTY			60-DAY	DIALYSIS	TOTAL PARENTERAL	QUALIFIED MEDICARE	PRESUMPTIVE ELIGIBILITY FOR	MEDI-CAL TUBERCULOSIS
	Total	Infant	Pregnant Woman	POSTPARTUM		NUTRITION	BENEFICIARY	PREGNANT WOMEN	PROGRAM
Placer	3	1	3	10	0	0	17	INA	0
Plumas	0	0	0	0	0	0	1	INA	0
Riverside	13	3	9	108	2	1	41	INA	7
Sacramento	34	13	21	11	0	0	26	INA	1
San Benito	2	1	1	0	0	0	0	INA	0
San Bernardino	34	3	31	68	0	1	106	INA	0
San Diego	94	21	73	213	2	0	144	INA	5
San Francisco	20	4	16	119	0	0	94	INA	15
San Joaquin	2	0	2	9	0	0	34	INA	17
San Luis Obispo	8	3	6	21	1	0	8	INA	0
San Mateo	11	3	8	16	5	1	67	INA	0
Santa Barbara	11	1	9	46	0	0	22	INA	1
Santa Clara	30	6	24	24	0	0	80	INA	145
Santa Cruz	2	1	2	56	2	0	13	INA	6
Shasta	2	1	2	11	0	0	3	INA	0
Sierra	0	0	0	0	0	0	0	INA	0
Siskiyou	3	0	3	1	0	0	2	INA	0
Solano	18	5	13	3	0	1	15	INA	1
Sonoma	14	3	11	53	0	0	7	INA	1
Stanislaus	26	4	21	9	0	0	2	INA	1
Sutter	11	3	8	2	0	0	7	INA	0
Tehama	5	1	4	2	0	0	1	INA	1
Trinity	0	0	0	1	0	0	3	INA	0
Tulare	6	3	3	3	0	0	7	INA	7
Tuolumne	0	0	0	1	0	0	0	INA	0
Ventura	2	0	2	78	1	0	50	INA	18
Yolo	4	0	4	5	0	0	4	INA	3
Yuba	0	0	0	0	0	0	11	INA	0

INA Information Not Available.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1995.

TABLE 22

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	2,315,056	1,680,639	220,705	16,692	439,960	1,003,283	323,851	91,004	692	43,075	189,081
Alameda	95,115	76,345	9,441	753	21,799	44,352	12,061	4,238	28	2,013	5,782
Alpine	71	58	4	1	13	41	11	1	0	2	8
Amador	1,372	904	118	10	220	556	353	147	0	35	170
Butte	21,487	17,428	1,459	178	4,759	11,032	2,894	1,036	16	352	1,491
Calaveras	2,450	1,874	176	16	448	1,234	432	120	2	48	262
Colusa	1,765	998	130	7	221	639	405	78	2	47	278
Contra Costa	38,811	29,637	3,886	319	9,178	16,255	5,930	2,128	9	888	2,905
Del Norte	3,410	2,851	212	22	901	1,716	381	105	2	65	209
El Dorado	5,557	3,856	456	52	1,096	2,251	1,091	328	2	138	623
Fresno	100,787	79,308	7,005	633	18,413	53,257	11,378	2,425	33	1,038	7,882
Glenn	2,820	2,020	209	18	458	1,335	449	100	1	42	307
Humboldt	12,564	10,221	850	97	3,460	5,813	1,639	415	4	255	966
Imperial	18,670	14,510	2,374	104	2,987	9,046	2,697	505	3	286	1,903
Inyo	1,368	954	159	10	245	539	279	103	0	32	145
Kern	63,067	48,368	3,897	435	12,059	31,979	8,744	1,942	18	954	5,830
Kings	12,494	9,079	927	71	2,047	6,033	1,727	399	3	149	1,177
Lake	7,151	5,971	634	55	1,739	3,542	935	278	4	162	491
Lassen	2,618	2,120	151	11	522	1,436	380	115	2	44	219
Los Angeles	777,354	549,909	87,001	5,558	136,277	321,073	101,501	27,003	130	12,617	61,752
Madera	12,811	8,680	980	68	2,197	5,436	2,126	447	10	170	1,499
Marin	6,890	4,548	548	70	1,929	2,000	1,341	556	5	228	552
Mariposa	1,161	815	109	2	152	551	263	73	1	35	155
Mendocino	9,091	6,786	694	64	2,015	4,014	1,492	380	1	181	931
Merced	29,130	22,094	1,812	174	3,974	16,134	3,803	825	15	369	2,595
Modoc	1,172	833	67	6	210	550	244	93	2	37	113
Mono	327	190	9	2	37	142	60	2	0	10	48
Monterey	23,937	15,545	1,833	141	3,644	9,927	4,273	750	7	354	3,162
Napa	5,592	3,608	429	46	1,192	1,940	1,255	516	4	152	583
Nevada	4,105	2,876	282	44	774	1,776	897	355	1	109	431
Orange/1/	134,605	78,527	12,184	845	19,755	45,743	22,413	6,456	68	3,023	12,866

TABLE 22 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	9,446	6,976	689	79	2,123	4,087	1,734	809	7	236	682
Plumas	1,711	1,186	107	16	340	723	424	130	0	33	261
Riverside	88,233	62,618	6,251	644	16,030	39,693	13,616	3,012	23	1,572	9,009
Sacramento/1/	49,543	38,367	5,602	642	19,304	12,819	6,955	3,064	16	1,572	2,304
San Benito	2,750	1,794	224	14	323	1,233	495	112	0	40	343
San Bernardino	124,695	97,106	7,215	762	21,080	68,049	15,020	3,569	38	1,792	9,621
San Diego	158,266	119,505	15,500	1,238	32,120	70,648	19,720	6,625	47	2,843	10,205
San Francisco	66,800	49,391	13,715	728	18,360	16,589	11,124	3,689	45	2,148	5,242
San Joaquin	61,883	50,610	3,825	406	12,969	33,410	7,532	2,303	17	1,021	4,192
San Luis Obispo	12,151	8,464	883	82	2,702	4,797	2,312	725	2	384	1,202
San Mateo/1/	5,760	2,281	457	26	577	1,220	1,519	987	5	149	378
Santa Barbara/1/	5,483	1,929	119	13	485	1,311	539	46	2	53	439
Santa Clara	92,111	66,744	10,784	608	14,606	40,745	15,335	5,070	37	1,934	8,294
Santa Cruz	14,041	9,115	1,144	107	2,825	5,039	2,687	721	6	334	1,626
Shasta	17,365	14,047	1,222	116	4,443	8,267	2,478	807	3	357	1,311
Sierra	192	139	27	2	43	67	47	24	0	9	14
Siskiyou	4,621	3,830	355	30	1,171	2,274	557	192	2	80	282
Solano/1/	3,230	2,256	154	14	454	1,633	368	66	1	43	258
Sonoma	21,313	15,570	1,493	215	5,498	8,363	3,446	1,003	11	805	1,627
Stanislaus	47,374	36,405	3,426	315	9,503	23,161	6,724	1,747	15	817	4,145
Sutter	7,264	5,033	654	58	1,348	2,972	1,405	302	2	93	1,007
Tehama	5,766	4,316	470	41	1,195	2,611	877	244	3	120	510
Trinity	1,382	1,099	87	8	353	651	225	48	2	40	135
Tulare	51,138	38,399	3,821	328	8,252	25,997	6,595	1,336	8	1,152	4,099
Tuolumne	3,783	2,896	279	33	767	1,818	627	166	4	96	361
Ventura	37,729	23,630	2,870	222	6,294	14,245	7,363	1,547	16	1,150	4,650
Yolo	11,240	8,473	736	77	2,120	5,540	1,695	536	9	249	903
Yuba	8,977	7,550	561	57	1,952	4,979	981	210	2	118	650
Not Reported	3,058	0	0	0	0	0	0	0	0	0	0

TABLE 22 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
STATEWIDE	116,865	11,704	105,161	780	86,049	6,639	3,578	29,302	45,804	18,113	27,692
Alameda	2,590	406	2,184	16	1,466	291	58	639	1,111	359	752
Alpine	1	0	1	0	0	0	0	0	0	0	0
Amador	65	7	58	0	6	0	3	11	28	10	19
Butte	652	72	581	2	135	8	19	121	188	79	109
Calaveras	76	14	62	0	5	1	6	20	35	14	21
Colusa	132	13	120	0	85	0	5	31	100	37	64
Contra Costa	1,181	154	1,028	5	884	48	48	321	659	249	410
Del Norte	97	12	85	0	23	0	3	18	36	14	22
El Dorado	251	34	217	1	98	0	9	74	167	62	104
Fresno	3,834	386	3,448	14	3,091	47	115	966	1,437	615	822
Glenn	171	13	158	0	59	0	5	37	72	23	49
Humboldt	339	51	288	0	28	2	19	69	166	46	120
Imperial	751	123	629	3	168	0	42	186	282	106	177
Inyo	52	7	45	0	25	0	3	18	31	11	19
Kern	2,586	257	2,329	12	1,485	3	130	599	929	348	581
Kings	669	48	621	2	361	1	31	207	241	102	139
Lake	129	19	109	0	27	0	10	26	49	17	32
Lassen	52	7	45	0	14	0	4	12	26	8	17
Los Angeles	50,983	4,023	46,960	513	41,728	1,094	779	9,762	13,284	4,955	8,329
Madera	898	68	830	1	564	2	18	175	242	109	133
Marin	277	24	254	0	340	9	7	93	193	61	132
Mariposa	48	4	44	0	2	1	1	8	20	5	15
Mendocino	364	38	326	1	188	1	15	73	167	50	117
Merced	1,250	118	1,132	6	1,069	16	89	345	358	142	216
Modoc	46	2	44	0	24	0	0	9	13	2	11
Mono	19	4	14	0	17	0	0	6	29	9	21
Monterey	991	121	870	2	1,229	5	71	453	1,141	407	735
Napa	253	17	236	0	199	2	10	86	169	60	109
Nevada	146	23	124	0	14	0	7	32	78	35	43
Orange/1/	11,323	1,068	10,255	42	8,778	2,118	365	3,547	5,119	2,383	2,735

TABLE 22 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
Placer	314	50	264	1	97	10	19	80	200	76	124
Plumas	64	10	55	0	5	0	1	9	20	7	12
Riverside	4,769	630	4,139	10	2,361	54	272	1,374	2,250	990	1,261
Sacramento/1/	1,080	239	841	7	1,048	429	71	492	987	385	602
San Benito	140	20	121	0	85	0	5	53	109	37	72
San Bernardino	4,771	544	4,227	20	3,340	182	200	1,393	2,133	972	1,161
San Diego	7,496	997	6,499	42	4,275	568	247	1,835	3,178	1,122	2,055
San Francisco	2,414	308	2,106	7	1,432	382	61	654	880	365	515
San Joaquin	1,453	149	1,304	2	846	57	71	377	641	260	381
San Luis Obispo	526	89	437	1	182	1	29	172	342	126	216
San Mateo/1/	200	17	183	1	85	7	52	546	910	410	501
Santa Barbara/1/	204	14	191	5	1,019	2	84	636	952	374	578
Santa Clara	2,726	307	2,419	13	3,148	1,173	86	842	1,499	578	921
Santa Cruz	837	135	702	3	582	3	30	237	519	200	319
Shasta	493	70	424	0	16	2	32	92	193	64	129
Sierra	2	1	1	0	0	0	0	1	2	0	1
Siskiyou	125	16	110	0	26	0	6	21	40	11	29
Solano/1/	102	12	90	1	22	3	21	117	207	71	137
Sonoma	786	101	685	1	549	7	42	228	548	197	352
Stanislaus	1,591	171	1,420	4	1,128	25	99	500	845	380	465
Sutter	331	37	293	0	129	1	24	119	174	77	97
Tehama	282	24	258	0	102	0	13	50	83	28	55
Trinity	35	6	28	0	1	0	2	6	10	3	7
Tulare	2,505	250	2,255	17	1,731	6	82	504	870	354	516
Tuolumne	140	14	126	7	6	7	11	25	50	16	34
Ventura	2,624	275	2,349	17	1,467	20	116	821	1,439	563	876
Yolo	393	63	330	2	194	46	23	117	280	104	177
Yuba	236	23	213	1	62	3	8	59	74	27	47
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 22 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	NOT REPORTED
	Total	Infant	Pregnant Woman							
STATEWIDE	498	112	386	888	31	9	376	16,625	64	3,058
Alameda	31	8	23	16	3	0	13	475	0	0
Alpine	0	0	0	0	0	0	0	0	0	0
Amador	0	0	0	0	0	0	0	1	0	0
Butte	7	2	5	5	0	0	2	25	0	0
Calaveras	0	0	0	1	0	0	0	0	0	0
Colusa	0	0	0	1	0	0	0	7	0	0
Contra Costa	8	2	7	10	2	0	3	76	0	0
Del Norte	0	0	0	1	0	0	0	0	0	0
El Dorado	3	0	3	2	0	0	0	7	0	0
Fresno	40	13	27	39	0	0	5	513	0	0
Glenn	0	0	0	0	0	0	0	5	0	0
Humboldt	1	0	1	5	0	0	3	73	0	0
Imperial	0	0	0	0	0	0	2	28	0	0
Inyo	2	0	2	0	1	0	0	3	0	0
Kern	10	4	7	8	0	1	4	189	0	0
Kings	0	0	0	2	0	0	0	175	0	0
Lake	1	0	0	1	0	0	1	3	0	0
Lassen	1	0	1	0	0	0	0	9	0	0
Los Angeles	67	11	55	68	2	2	174	7,467	21	0
Madera	3	0	2	2	0	0	1	100	0	0
Marin	3	0	3	6	0	0	0	72	0	0
Mariposa	2	0	2	0	0	0	0	1	0	0
Mendocino	2	1	1	1	0	0	1	1	0	0
Merced	5	0	4	0	1	0	3	91	0	0
Modoc	1	0	1	0	0	0	0	2	0	0
Mono	2	0	2	0	0	0	0	5	0	0
Monterey	3	1	2	9	0	0	3	212	1	0
Napa	0	0	0	0	0	0	6	3	0	0
Nevada	1	0	1	0	0	0	1	54	0	0
Orange/1/	73	16	57	235	2	1	23	2,037	1	0

TABLE 22 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	NOT REPORTED
	Total	Infant	Pregnant Woman							
Placer	2	1	1	5	0	0	3	5	0	0
Plumas	0	0	0	0	0	0	0	2	0	0
Riverside	12	5	7	68	3	0	10	814	1	0
Sacramento/1/	16	5	12	7	0	0	3	79	0	0
San Benito	1	0	1	0	0	0	0	68	0	0
San Bernardino	13	2	11	36	1	2	27	453	0	0
San Diego	67	10	57	131	1	0	22	1,179	0	0
San Francisco	10	2	8	40	0	0	6	397	2	0
San Joaquin	3	1	3	6	0	0	13	269	1	0
San Luis Obispo	4	1	3	10	1	0	3	105	0	0
San Mateo/1/	5	2	3	2	2	0	8	142	0	0
Santa Barbara/1/	6	2	5	11	0	0	2	92	0	0
Santa Clara	19	4	15	16	0	0	7	473	31	0
Santa Cruz	1	0	1	17	2	0	3	4	2	0
Shasta	1	0	1	6	0	0	1	3	0	0
Sierra	0	0	0	0	0	0	0	1	0	0
Siskiyou	2	0	2	0	0	0	1	12	0	0
Solano/1/	9	2	7	1	0	1	1	121	0	0
Sonoma	11	2	9	28	0	0	2	95	1	0
Stanislaus	16	2	14	7	0	0	1	29	0	0
Sutter	8	1	6	1	0	0	1	40	0	0
Tehama	4	2	3	1	0	0	0	37	0	0
Trinity	0	0	0	1	0	0	0	4	0	0
Tulare	5	2	3	2	4	1	2	416	0	0
Tuolumne	5	3	3	2	1	0	3	3	0	0
Ventura	4	1	4	71	4	1	10	137	4	0
Yolo	4	2	2	3	0	0	0	10	0	0
Yuba	0	0	0	1	0	0	2	0	0	0
Not Reported	0	0	0	0	0	0	0	0	0	3,058

/1/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, and Solano Counties.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 23

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	$10,123,680,519	$5,626,657,187	$752,184,016	$105,628,001	$2,602,978,204	$2,165,866,966	$3,075,507,113	$1,507,015,923	$11,285,432	$917,298,215	$639,907,544
Alameda	419,962,731	259,034,546	31,181,320	3,853,860	122,281,325	101,718,041	129,517,032	72,127,933	245,744	36,773,237	20,370,118
Alpine	247,788	157,641	2,611	432	66,739	87,860	86,731	20,019	0	36,299	30,412
Amador	6,718,142	2,199,399	232,856	28,045	933,155	1,005,343	4,041,962	3,163,045	0	421,801	457,117
Butte	77,419,555	49,262,742	3,894,358	1,154,104	21,560,695	22,653,585	24,169,291	16,997,381	255,293	2,810,255	4,106,362
Calaveras	9,003,698	5,108,585	390,309	138,019	2,007,540	2,572,717	3,338,064	2,091,207	9,607	396,230	841,020
Colusa	6,961,319	3,149,925	299,104	36,342	1,268,629	1,545,851	2,276,556	922,589	1,649	239,362	1,112,956
Contra Costa	174,940,670	100,336,506	12,319,772	1,867,100	48,872,246	37,277,388	61,142,246	40,276,841	172,814	11,753,104	8,939,487
Del Norte	10,311,344	7,357,974	454,861	70,428	3,478,194	3,354,491	2,147,835	1,292,601	57,724	297,143	500,367
El Dorado	22,253,946	11,225,933	1,118,450	184,139	5,158,385	4,764,958	8,540,813	4,944,528	31,535	1,602,270	1,962,481
Fresno	310,866,989	192,319,799	16,014,413	3,362,895	71,556,587	101,385,905	80,769,717	42,778,789	469,540	15,226,808	22,294,580
Glenn	9,683,560	6,138,750	444,083	83,534	2,886,546	2,724,587	2,305,662	1,443,308	546	194,801	667,007
Humboldt	48,157,826	32,687,523	2,469,066	401,151	16,395,587	13,421,720	12,907,072	7,148,264	77,107	2,326,502	3,355,199
Imperial	58,412,672	38,676,949	5,634,244	511,228	14,008,923	18,522,554	13,434,334	4,802,390	44,002	2,580,902	6,007,041
Inyo	6,209,758	2,707,483	311,921	28,966	962,281	1,404,316	2,797,553	2,087,578	0	298,836	411,140
Kern	219,705,833	129,665,302	9,653,249	2,224,946	51,587,779	66,199,328	65,297,393	35,370,807	247,282	12,399,890	17,279,413
Kings	40,949,536	24,864,403	2,020,038	262,685	8,827,361	13,754,319	10,477,172	5,192,135	70,054	1,721,662	3,493,322
Lake	24,538,275	16,360,154	1,422,576	302,214	6,774,327	7,861,036	7,395,888	4,156,263	8,730	1,458,259	1,772,636
Lassen	9,641,149	5,847,171	336,083	43,099	2,447,171	3,020,819	3,363,520	2,527,981	2,866	217,411	615,262
Los Angeles	3,511,139,584	1,991,452,157	342,899,885	38,122,964	895,751,485	714,677,823	933,628,697	411,477,640	2,274,962	288,330,501	231,545,594
Madera	41,278,643	22,384,014	2,196,733	298,820	9,063,898	10,824,563	12,787,646	7,003,724	133,520	1,791,571	3,858,831
Marin	36,131,224	16,887,518	2,396,161	352,716	10,683,868	3,454,773	15,593,283	10,603,739	114,486	3,610,189	1,264,870
Mariposa	4,396,231	2,085,815	319,870	2,874	627,859	1,135,213	1,991,162	1,501,949	603	127,016	361,594
Mendocino	35,477,239	21,878,864	1,990,656	253,830	10,193,469	9,440,909	10,414,509	5,436,616	1,027	1,829,472	3,147,395
Merced	82,632,858	53,492,923	4,241,303	841,890	17,576,726	30,833,005	20,733,161	9,892,361	175,674	4,152,568	6,512,558
Modoc	6,227,418	2,230,203	270,976	18,362	824,029	1,116,836	3,582,395	2,720,572	81,727	331,436	448,660
Mono	1,651,565	697,152	5,492	1,513	176,815	513,332	377,745	1,602	0	177,702	198,441
Monterey	116,986,821	54,397,163	5,031,411	705,093	21,720,712	26,939,947	33,627,724	13,224,607	54,988	5,673,851	14,674,277
Napa	35,300,572	16,943,478	1,615,372	198,853	11,027,291	4,101,962	14,760,550	9,805,849	94,915	3,071,628	1,788,158
Nevada	18,259,948	7,045,832	603,194	124,623	2,991,341	3,326,674	10,083,010	7,620,943	6,812	1,052,091	1,403,164
Orange/1/	651,121,140	289,157,240	45,258,567	5,079,087	143,161,231	95,658,355	230,391,591	91,735,623	1,316,071	95,720,156	41,619,740

TABLE 23 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	41,623,130	19,519,066	2,067,401	598,306	8,707,788	8,145,572	19,287,075	14,065,097	95,113	2,922,443	2,204,422
Plumas	8,137,654	3,385,162	327,238	90,560	1,418,563	1,548,801	4,294,358	3,289,311	57	268,831	736,159
Riverside	364,976,896	204,622,905	18,020,009	3,990,134	91,301,752	91,311,011	108,990,594	52,387,951	311,166	22,805,623	33,485,854
Sacramento/1/	242,215,687	145,012,671	16,421,306	3,121,206	85,526,556	39,943,602	82,017,578	51,922,771	72,793	21,382,576	8,639,438
San Benito	11,582,862	5,149,540	465,450	84,181	1,567,615	3,032,294	3,807,184	1,985,641	110	444,324	1,377,108
San Bernardino	509,071,641	324,720,356	22,095,601	5,101,986	131,305,793	166,216,976	128,753,942	63,285,903	375,018	30,531,167	34,561,854
San Diego	661,309,657	384,203,066	47,949,519	7,246,203	185,196,471	143,810,874	196,155,122	113,346,877	405,072	47,984,063	34,419,110
San Francisco	348,546,493	191,847,433	50,209,893	4,532,835	104,191,285	32,913,420	133,795,611	82,088,299	939,115	36,526,515	14,241,682
San Joaquin	216,565,425	133,727,506	11,123,741	2,262,346	63,759,934	56,581,486	69,952,722	35,358,891	189,265	22,977,876	11,426,689
San Luis Obispo	50,737,369	24,682,193	2,017,641	470,900	12,586,201	9,607,451	21,167,150	12,380,006	14,712	5,328,967	3,443,465
San Mateo/1/	56,298,473	15,641,838	5,574,731	496,485	7,136,132	2,434,491	35,005,063	29,441,120	117,390	4,652,730	793,823
Santa Barbara/1/	17,467,847	4,381,643	309,871	30,177	1,493,684	2,547,912	1,117,362	131,487	3,902	30,803	951,170
Santa Clara	456,996,409	236,550,172	34,273,114	4,513,521	112,594,464	85,169,073	173,330,591	73,294,966	888,704	73,595,608	25,551,314
Santa Cruz	61,632,917	27,684,600	3,091,415	609,786	13,854,206	10,129,193	22,529,420	12,223,502	20,196	4,122,462	6,163,259
Shasta	71,831,949	44,624,883	3,186,205	731,736	21,553,001	19,153,940	22,906,608	13,085,091	18,436	4,464,044	5,339,037
Sierra	1,892,297	561,718	99,476	11,814	351,320	99,107	1,288,863	1,115,614	0	144,861	28,388
Siskiyou	17,141,385	10,796,199	656,094	78,878	5,738,461	4,322,767	5,424,294	3,999,666	40,039	509,544	875,044
Solano/1/	9,471,817	5,930,687	712,331	57,326	1,787,581	3,373,449	1,321,996	266,271	1,555	355,550	698,621
Sonoma	147,187,254	82,988,843	4,304,520	2,475,265	59,834,986	16,374,071	54,199,319	16,809,749	104,376	31,001,871	6,283,322
Stanislaus	158,815,256	94,575,524	9,180,559	1,339,929	39,506,908	44,548,128	51,111,142	31,113,091	287,292	8,116,965	11,593,794
Sutter	25,163,275	13,165,801	1,596,625	226,435	5,329,087	6,013,654	8,707,567	4,994,684	29,946	814,761	2,868,176
Tehama	19,357,134	11,531,222	1,036,707	180,811	4,655,050	5,658,654	5,634,474	3,210,248	22,646	825,050	1,576,531
Trinity	5,589,723	3,332,726	315,415	21,083	1,489,231	1,506,998	1,961,260	1,034,471	110,124	386,092	430,573
Tulare	223,810,705	113,243,968	8,597,670	2,590,215	53,785,579	48,270,504	87,667,312	21,442,518	247,312	54,895,823	11,081,659
Tuolumne	24,272,068	11,273,638	1,202,325	718,739	3,170,017	6,182,557	8,446,385	5,316,218	305,983	1,334,500	1,489,683
Ventura	225,299,475	103,416,890	8,349,680	2,199,680	62,046,284	30,821,245	84,194,469	29,198,436	377,194	40,414,014	14,204,824
Yolo	42,675,775	24,150,952	2,718,186	937,800	9,711,555	10,783,411	14,388,913	8,977,550	323,039	2,898,878	2,189,446
Yuba	27,749,094	20,182,841	1,252,360	355,856	8,506,505	10,068,120	6,070,425	2,881,611	35,598	939,322	2,213,894
Not Reported	79,672,819	0	0	0	0	0	0	0	0	0	0

TABLE 23 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	Income Disregard		
	Total	Adults	Children						Total	Infant	Pregnant Woman
STATEWIDE	$371,856,646	$96,000,642	$275,856,004	$6,130,126	$629,846,317	$23,213,561	$5,499,030	$39,104,836	$232,316,461	$45,385,501	$186,930,960
Alameda	10,773,936	3,037,476	7,736,460	80,638	10,728,223	983,338	112,657	1,120,682	6,599,889	995,668	5,604,221
Alpine	3,088	(18)	3,106	0	0	0	17	0	(5)	24	(29)
Amador	279,659	61,682	217,977	0	29,070	2,103	1,760	16,469	147,488	41,403	106,085
Butte	1,993,771	504,835	1,488,936	5,224	782,274	18,490	22,991	136,200	912,852	180,122	732,730
Calaveras	267,735	120,636	147,099	0	19,434	2,064	6,318	15,575	244,452	18,007	226,445
Colusa	350,389	98,007	252,383	298	509,768	883	4,941	47,141	616,067	218,335	397,731
Contra Costa	3,983,305	1,122,699	2,860,606	12,832	5,472,694	137,325	56,570	406,069	3,107,192	653,779	2,453,413
Del Norte	322,310	97,157	225,153	154	76,269	51	2,354	37,477	360,474	19,538	340,936
El Dorado	840,910	237,746	603,164	(2,153)	670,715	0	7,620	80,819	863,159	108,087	755,072
Fresno	11,376,701	2,859,608	8,517,093	76,709	16,879,296	91,220	129,449	1,280,809	6,802,489	1,697,103	5,105,386
Glenn	526,912	131,816	395,097	409	290,139	587	7,852	33,760	373,042	109,220	263,823
Humboldt	1,170,071	404,299	765,771	(126)	230,017	2,045	20,129	65,727	948,126	165,820	782,306
Imperial	3,000,762	1,167,231	1,833,531	10,067	1,302,089	0	45,521	258,895	1,645,686	414,487	1,231,199
Inyo	192,124	91,347	100,777	0	216,659	574	9,704	23,801	185,200	7,814	177,386
Kern	8,635,085	2,736,019	5,899,065	56,804	9,571,792	7,699	148,224	599,979	5,250,033	1,133,151	4,116,882
Kings	1,660,628	301,070	1,359,558	4,854	2,123,447	1,028	33,602	307,718	1,287,971	405,806	882,165
Lake	378,508	132,045	246,463	21	171,451	87	8,180	27,095	186,062	18,970	167,092
Lassen	233,767	61,029	172,738	0	68,123	739	2,956	14,277	90,785	20,512	70,273
Los Angeles	147,267,982	33,990,104	113,277,878	2,888,621	330,729,072	4,775,198	1,550,180	13,499,562	71,883,696	13,602,685	58,281,011
Madera	2,046,664	406,824	1,639,840	499	2,682,168	5,748	23,452	200,116	1,002,833	265,976	736,857
Marin	756,738	292,696	464,042	55	1,732,857	34,740	4,050	118,710	823,964	149,589	674,375
Mariposa	121,657	29,054	92,603	0	11,283	72,535	1,118	8,630	92,424	5,324	87,100
Mendocino	1,276,464	238,115	1,038,348	233	1,003,179	2,727	19,646	79,470	793,345	125,550	667,795
Merced	2,786,295	595,273	2,191,023	15,359	3,619,652	33,646	149,104	353,053	1,315,802	195,255	1,120,547
Modoc	145,776	18,041	127,735	736	131,920	20	0	6,624	90,349	6,940	83,409
Mono	81,815	40,926	40,889	0	185,206	0	0	3,005	291,078	7,905	283,173
Monterey	5,035,120	1,503,115	3,532,005	9,160	14,162,029	12,451	142,750	635,905	8,612,869	988,775	7,624,093
Napa	1,272,766	135,542	1,137,224	84	1,276,196	2,666	12,597	81,238	930,196	203,827	726,369
Nevada	526,892	197,576	329,316	0	82,315	0	5,404	31,606	435,055	27,482	407,573
Orange/1/	34,901,853	8,428,647	26,473,207	191,934	61,182,151	6,578,477	589,969	4,097,925	21,401,980	4,259,523	17,142,457

TABLE 23 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	Income Disregard		
	Total	Adults	Children						Total	Infant	Pregnant Woman
Placer	1,166,368	365,130	801,238	608	673,796	22,713	34,081	72,808	829,480	109,645	719,835
Plumas	307,602	118,288	189,315	31	40,256	0	1,023	8,022	98,528	12,462	86,065
Riverside	17,620,918	5,019,680	12,601,238	41,040	18,801,939	160,042	349,361	1,650,367	11,266,463	2,418,335	8,848,128
Sacramento/1/	4,454,190	1,503,641	2,950,548	37,289	5,307,736	950,583	60,846	414,343	3,755,910	458,419	3,297,491
San Benito	838,326	158,862	679,464	25	876,832	7	5,097	57,965	660,376	50,202	610,174
San Bernardino	17,607,503	4,387,838	13,219,666	93,371	23,477,860	524,581	304,976	2,033,058	10,510,349	3,075,309	7,435,040
San Diego	26,611,428	8,722,213	17,889,216	287,293	30,295,876	1,566,193	511,299	2,664,959	16,601,589	3,367,855	13,233,734
San Francisco	8,036,776	2,695,059	5,341,716	29,711	7,417,243	1,701,286	64,546	911,203	3,607,934	743,578	2,864,357
San Joaquin	4,218,458	1,403,194	2,815,264	15,397	4,973,852	118,832	70,134	368,680	2,710,264	346,340	2,363,924
San Luis Obispo	1,602,985	511,492	1,091,493	5,288	1,407,227	33,072	33,809	212,160	1,330,186	197,332	1,132,854
San Mateo/1/	844,219	252,499	591,720	2,419	114,600	28,517	84,480	482,910	3,887,606	957,916	2,929,691
Santa Barbara/1/	410,657	31,579	379,078	82,306	6,076,838	3,944	164,415	618,142	4,441,869	972,621	3,469,248
Santa Clara	10,156,901	2,710,216	7,446,685	123,393	22,208,202	3,041,304	117,882	1,406,994	8,682,070	1,617,063	7,065,007
Santa Cruz	3,349,994	989,084	2,360,910	46,773	4,953,468	15,860	27,701	259,555	2,711,959	298,290	2,413,669
Shasta	2,458,011	794,540	1,663,471	(59)	168,739	9,749	42,141	96,579	1,509,514	106,058	1,403,456
Sierra	35,381	31,952	3,428	0	72	0	113	500	4,963	80	4,883
Siskiyou	559,040	159,219	399,821	145	118,256	0	5,556	13,524	199,147	22,132	177,015
Solano/1/	263,572	78,323	185,249	18,401	67,398	7,743	24,919	95,068	1,447,773	86,863	1,360,911
Sonoma	2,875,427	1,064,766	1,810,660	8,174	3,966,963	12,020	36,994	208,000	2,660,456	180,070	2,480,386
Stanislaus	4,376,090	967,033	3,409,057	12,293	5,045,791	55,226	109,673	556,250	2,825,582	526,766	2,298,816
Sutter	1,373,572	245,207	1,128,365	95	641,606	3,100	26,275	145,617	963,765	228,579	735,186
Tehama	875,660	195,169	680,491	68	568,916	(9)	17,511	59,721	588,720	34,047	554,673
Trinity	170,461	49,828	120,632	0	21,255	31,662	1,832	4,956	57,494	5,294	52,199
Tulare	7,046,784	1,803,713	5,243,071	447,289	8,307,287	4,925	105,031	1,413,232	4,399,026	1,306,791	3,092,234
Tuolumne	1,317,679	100,666	1,217,013	565,285	161,458	644,971	15,148	320,134	603,143	233,133	370,010
Ventura	9,170,001	2,102,502	7,067,499	853,677	16,949,347	1,001,520	133,871	1,270,645	7,167,471	1,615,261	5,552,210
Yolo	1,251,611	294,052	957,559	4,088	969,418	506,752	21,221	88,151	1,147,084	334,752	812,332
Yuba	647,349	204,299	443,050	103,314	294,600	2,527	9,986	82,958	353,185	33,629	319,557
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 23 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	NOT REPORTED
	Total	Infant	Pregnant Woman							
STATEWIDE	$3,373,997	$675,872	$2,698,125	$1,900,318	$1,018,906	$328,584	$1,398,452	$25,781,794	$74,371	$79,672,819
Alameda	153,168	7,333	145,835	25,949	37,855	0	32,985	761,309	525	0
Alpine	(27)	(27)	0	130	0	0	0	36	178	0
Amador	0	0	0	17	0	0	(111)	329	0	0
Butte	53,880	1,315	52,565	9,477	2,448	0	7,857	42,056	0	0
Calaveras	0	0	0	602	542	0	17	311	0	0
Colusa	(6)	(6)	0	651	0	0	35	4,671	0	0
Contra Costa	67,940	1,570	66,369	63,281	11,383	0	5,848	137,480	0	0
Del Norte	5,873	12	5,860	494	0	0	44	34	0	0
El Dorado	14,649	309	14,340	2,657	0	0	267	8,557	0	0
Fresno	193,220	18,286	174,934	67,017	(82)	0	9,741	870,903	0	0
Glenn	253	0	253	580	0	0	198	5,418	0	0
Humboldt	14,779	60	14,719	7,779	0	0	4,072	100,614	0	0
Imperial	0	0	0	254	0	0	6,110	32,004	0	0
Inyo	14,891	0	14,891	157	58,584	0	0	3,027	0	0
Kern	68,095	11,325	56,770	103,130	0	55,664	5,123	241,511	0	0
Kings	194	144	51	9,684	0	0	104	178,729	0	0
Lake	6,494	125	6,369	390	0	0	1,252	2,694	0	0
Lassen	3,413	53	3,360	92	0	0	0	16,306	0	0
Los Angeles	311,223	72,244	238,979	278,309	53,964	74,779	404,172	12,320,200	21,772	0
Madera	18,065	66	17,999	2,458	0	0	2,072	122,908	0	0
Marin	9,281	388	8,893	12,740	0	0	170	157,107	10	0
Mariposa	11,027	447	10,580	0	0	0	7	573	0	0
Mendocino	6,389	2,178	4,210	1,667	0	0	142	604	0	0
Merced	14,814	661	14,153	122	6,936	0	4,963	107,027	0	0
Modoc	37,012	0	37,012	207	0	0	0	2,178	0	0
Mono	11,168	216	10,953	0	0	0	0	4,395	0	0
Monterey	17,941	10,538	7,403	12,312	0	0	9,588	310,102	1,708	0
Napa	96	44	52	291	0	0	15,115	5,297	0	0
Nevada	4,572	34	4,538	235	0	0	2,021	42,981	25	0
Orange/1/	410,789	83,857	326,932	341,438	20,640	10,464	57,728	1,785,563	1,397	0

TABLE 23 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	NOT REPORTED
	Total	Infant	Pregnant Woman							
Placer	4,289	273	4,017	6,271	0	0	4,536	2,037	0	0
Plumas	780	780	0	8	0	0	44	1,839	0	0
Riverside	53,493	30,390	23,103	149,543	34,707	0	32,289	1,201,721	1,513	0
Sacramento/1/	52,211	2,882	49,329	5,466	0	224	11,286	135,355	0	0
San Benito	6,650	181	6,470	34	0	0	122	180,705	0	0
San Bernardino	65,085	785	64,300	74,473	1,139	46,526	72,559	785,858	5	0
San Diego	289,618	9,986	279,632	148,961	4,818	0	41,055	1,928,244	136	0
San Francisco	65,381	2,569	62,812	67,283	0	0	7,941	991,179	2,967	0
San Joaquin	12,916	557	12,359	8,092	0	0	64,241	323,619	711	0
San Luis Obispo	9,935	458	9,477	11,934	4,744	0	9,127	227,559	0	0
San Mateo/1/	52,080	26,227	25,854	2,464	1,034	934	13,777	136,532	0	0
Santa Barbara/1/	8,968	441	8,526	9,675	0	0	2,387	149,641	0	0
Santa Clara	85,501	13,734	71,767	61,366	9,912	0	14,104	1,173,528	34,491	0
Santa Cruz	2,924	204	2,720	29,339	7,941	0	5,449	5,437	2,495	0
Shasta	2,484	80	2,404	6,128	0	0	3,377	3,797	0	0
Sierra	0	0	0	0	0	0	0	688	0	0
Siskiyou	12,076	53	12,023	144	0	0	943	12,062	0	0
Solano/1/	98,175	3,220	94,954	15,116	0	18,887	1,103	160,978	0	0
Sonoma	53,753	814	52,939	25,408	0	0	4,565	147,032	299	0
Stanislaus	99,803	728	99,075	7,626	248	0	1,336	38,671	0	0
Sutter	97,954	28,327	69,627	1,047	466	0	729	35,681	0	0
Tehama	13,884	4,000	9,884	9,995	0	0	23	55,848	1,101	0
Trinity	3,350	0	3,350	352	0	0	28	4,349	0	0
Tulare	123,373	4,826	118,548	3,299	317,111	78,834	69,644	582,653	937	0
Tuolumne	412,953	202,417	210,536	122,110	131,623	7,903	244,327	5,310	0	0
Ventura	161,656	336	161,320	189,436	310,262	34,369	222,678	219,531	3,653	0
Yolo	135,391	130,431	4,960	2,322	2,631	0	11	6,783	446	0
Yuba	119	0	119	308	0	0	1,251	231	0	0
Not Reported	0	0	0	0	0	0	0	0	0	79,672,819

/1/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, and Solano Counties.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.
Payments are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 24

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
STATEWIDE	2,315,056	1,004,239	1,308,991	259,086	65,987	11,162	104,974	42,418	290,370	5,325	75,504
Alameda	95,115	37,637	52,913	10,649	2,834	546	3,993	1,594	14,747	10	3,357
Alpine	71	23	18	5	3	0	1	2	26	0	1
Amador	1,372	426	813	132	50	0	6	22	420	2	117
Butte	21,487	5,421	12,953	2,094	629	2	22	348	6,912	2	802
Calaveras	2,450	634	1,375	275	108	3	43	41	784	0	92
Colusa	1,765	506	921	75	43	0	12	42	409	0	46
Contra Costa	38,811	14,345	20,791	4,331	820	228	1,161	620	5,298	3	1,566
Del Norte	3,410	796	2,103	232	151	1	3	44	1,030	0	69
El Dorado	5,557	1,732	2,904	891	182	1	10	128	1,394	2	232
Fresno	100,787	42,699	57,933	9,673	2,703	491	5,235	1,380	13,285	3	2,297
Glenn	2,820	630	1,539	120	81	3	111	49	436	0	63
Humboldt	12,564	3,510	7,113	856	338	1	21	218	3,126	2	360
Imperial	18,670	7,433	10,533	1,340	711	1	22	369	2,513	0	250
Inyo	1,368	435	748	42	51	1	5	29	292	0	71
Kern	63,067	23,733	36,090	6,819	1,956	692	6,076	606	7,202	9	1,610
Kings	12,494	3,039	7,179	1,000	467	6	53	219	2,212	3	292
Lake	7,151	2,390	4,364	734	210	7	34	93	1,631	1	224
Lassen	2,618	574	1,495	128	109	0	4	40	459	1	96
Los Angeles	777,354	382,720	458,660	81,866	20,513	5,080	36,929	15,330	75,584	437	24,675
Madera	12,811	5,032	7,394	1,331	344	39	183	186	1,676	1	331
Marin	6,890	2,350	3,637	803	78	3	29	124	992	4	544
Mariposa	1,161	325	658	102	32	8	57	11	257	1	41
Mendocino	9,091	2,089	4,598	522	214	5	34	161	2,155	2	308
Merced	29,130	10,767	16,071	2,707	751	225	3,194	265	2,802	2	522
Modoc	1,172	272	649	24	61	0	3	19	254	1	78
Mono	327	101	107	11	8	0	1	13	80	1	0
Monterey	23,937	8,506	12,268	2,440	618	302	3,229	488	3,060	7	573
Napa	5,592	2,122	3,035	502	83	1	17	108	1,084	45	422
Nevada	4,105	1,557	2,290	430	107	0	4	66	878	0	286
Orange/2/	134,605	68,209	71,163	16,607	3,923	30	220	3,276	16,516	839	4,650

TABLE 24 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
Placer	9,446	3,823	5,348	1,034	315	1	10	155	1,315	1	716
Plumas	1,711	313	962	39	80	0	3	29	451	0	97
Riverside	88,233	44,415	48,482	10,107	2,801	395	3,782	2,104	11,823	3	2,698
Sacramento/2/	49,543	17,247	28,689	5,578	1,318	13	89	1,422	7,085	15	2,546
San Benito	2,750	997	1,463	196	73	4	46	58	649	0	75
San Bernardino	124,695	62,207	68,229	15,875	4,318	446	4,172	2,725	16,704	11	3,457
San Diego	158,266	72,466	87,868	20,710	3,978	7	80	3,460	20,540	13	5,656
San Francisco	66,800	22,283	37,956	7,364	1,964	539	5,397	805	11,752	15	2,460
San Joaquin	61,883	29,123	36,696	6,823	1,928	351	3,952	649	8,248	222	1,809
San Luis Obispo	12,151	3,631	6,787	1,168	427	97	1,862	149	1,974	2	675
San Mateo/2/	5,760	625	594	2,766	2	1	325	64	349	5	1,214
Santa Barbara/2/	5,483	1,183	807	2,601	5	1	4	168	271	5	1
Santa Clara	92,111	35,507	50,725	11,216	2,617	711	5,316	1,129	10,582	697	3,076
Santa Cruz	14,041	5,800	7,355	1,559	314	6	71	337	2,230	3	575
Shasta	17,365	5,634	10,578	1,643	637	2	27	264	3,113	1	635
Sierra	192	32	104	7	4	0	1	3	41	2	25
Siskiyou	4,621	1,237	2,647	420	151	0	5	67	949	0	141
Solano/2/	3,230	221	173	2,308	4	0	2	36	125	6	2
Sonoma	21,313	7,081	11,065	1,968	605	188	2,649	193	2,015	640	877
Stanislaus	47,374	18,859	28,470	4,779	1,915	176	7,919	733	5,457	2	1,326
Sutter	7,264	2,233	4,210	901	197	1	5	130	1,052	0	209
Tehama	5,766	1,895	3,371	382	231	1	11	86	1,013	5	163
Trinity	1,382	587	865	124	42	19	158	10	73	2	36
Tulare	51,138	17,130	29,407	4,629	1,912	28	174	831	7,127	754	1,069
Tuolumne	3,783	847	2,205	329	124	18	517	38	725	100	98
Ventura	37,729	12,096	20,216	3,885	1,286	395	7,539	447	3,833	759	1,203
Yolo	11,240	3,880	6,076	1,554	304	2	12	200	2,102	39	482
Yuba	8,977	2,571	5,257	1,055	240	1	9	156	1,207	3	145
Not Reported	3,058	303	73	1,329	17	88	128	83	52	645	64

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.

/2/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, and Solano Counties.

Note: FFS = Fee-For-Service.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 25

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
STATEWIDE	$10,123,680,519	$1,032,811,108	$1,299,000,998	$622,917,316	$53,474,637	$773,697,971	$178,324,809	$2,132,062,217	$281,180,224	$539,574,590	$2,205,708,970
Alameda	419,962,731	35,455,827	50,981,448	22,183,528	2,242,937	41,093,574	4,426,773	94,360,849	13,034,842	975,420	105,371,970
Alpine	247,788	29,144	28,959	5,691	2,271	0	484	114,982	21,914	0	18,257
Amador	6,718,142	375,512	668,861	269,225	30,665	63,127	5,971	1,204,454	326,452	194,415	3,261,839
Butte	77,419,555	5,036,192	11,405,986	3,866,363	416,288	66,525	25,758	20,712,799	6,345,616	73,797	20,028,074
Calaveras	9,003,698	694,160	1,071,171	518,184	84,075	101,486	53,363	2,630,708	697,087	69,666	2,275,114
Colusa	6,961,319	585,333	659,085	173,029	27,266	8,357	13,506	2,937,428	352,885	0	1,179,197
Contra Costa	174,940,670	14,100,588	19,876,136	10,076,774	568,234	11,033,765	1,224,709	36,492,242	5,063,298	496,818	51,584,704
Del Norte	10,311,344	671,265	1,934,711	479,794	104,809	30,162	4,469	2,472,506	1,353,188	0	1,575,759
El Dorado	22,253,946	2,125,585	2,942,501	1,471,895	123,762	30,306	11,064	7,187,719	1,337,234	199,130	5,348,191
Fresno	310,866,989	38,122,003	46,178,393	21,030,945	2,102,093	23,778,038	4,678,702	62,349,879	11,158,534	371,759	65,716,387
Glenn	9,683,560	770,361	1,361,077	222,999	57,223	149,013	92,948	2,482,108	402,431	0	1,831,798
Humboldt	48,157,826	3,903,232	7,683,348	1,655,023	239,652	241,358	21,676	12,502,617	2,646,242	220,314	9,748,198
Imperial	58,412,672	7,190,515	11,529,532	2,978,088	487,973	109,468	31,395	18,159,630	2,288,082	0	7,464,080
Inyo	6,209,758	455,683	650,005	106,141	33,294	69,572	10,643	1,686,649	239,496	0	2,346,209
Kern	219,705,833	22,961,261	30,423,741	13,677,238	1,413,279	33,848,964	8,606,345	29,981,089	5,540,619	1,059,618	49,832,185
Kings	40,949,536	3,233,517	5,150,767	2,204,328	384,358	301,126	56,180	10,868,788	2,046,394	360,840	7,267,141
Lake	24,538,275	2,241,249	3,863,697	1,471,473	136,927	492,344	41,975	6,456,028	1,395,463	134,805	5,103,604
Lassen	9,641,149	474,562	1,190,791	278,781	71,343	12,966	4,588	2,087,303	494,804	89,854	3,057,523
Los Angeles	3,511,139,584	405,627,210	497,495,270	218,720,273	18,722,264	402,398,941	102,613,702	746,091,653	79,391,420	44,986,070	651,791,681
Madera	41,278,643	4,918,204	6,102,302	3,524,658	240,052	1,836,619	181,939	7,432,568	1,231,946	98,138	9,398,305
Marin	36,131,224	2,407,178	5,756,473	1,298,157	51,365	164,119	29,048	4,991,449	993,463	405,284	15,678,683
Mariposa	4,396,231	328,008	500,436	227,319	24,857	281,991	66,917	400,740	184,152	72,535	1,600,608
Mendocino	35,477,239	2,585,487	4,268,523	844,512	149,645	469,507	35,368	9,029,096	2,361,021	154,743	8,032,760
Merced	82,632,858	9,921,623	12,020,002	6,506,950	636,735	8,036,165	2,681,500	12,201,016	2,089,641	170,504	14,604,422
Modoc	6,227,418	235,930	484,568	55,636	30,785	1,768	3,139	1,064,119	212,799	50,118	3,357,898
Mono	1,651,565	180,240	176,994	19,050	5,815	21,890	1,040	915,189	69,936	74,519	1,604
Monterey	116,986,821	9,938,892	9,712,460	5,843,668	454,304	26,215,223	3,671,550	32,173,933	2,909,724	680,706	16,815,961
Napa	35,300,572	2,204,293	3,229,459	785,498	53,729	110,144	22,725	8,100,929	958,438	6,368,540	11,579,365
Nevada	18,259,948	1,270,539	2,191,399	765,358	71,155	1,075	4,445	4,201,169	841,842	(299)	8,009,041
Orange/2/	651,121,140	75,997,543	72,546,264	44,741,752	3,820,905	3,805,711	479,973	180,311,009	16,399,052	78,146,716	125,523,995

TABLE 25 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1995

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
Placer	41,623,130	3,764,771	4,984,575	2,120,201	208,075	28,100	8,663	8,066,312	1,221,244	191,412	17,270,243
Plumas	8,137,654	283,859	894,219	73,936	51,184	0	1,943	1,693,627	446,743	0	3,669,109
Riverside	364,976,896	49,628,790	45,521,682	24,567,479	2,122,835	21,440,883	4,548,584	96,996,117	10,418,383	456,202	79,276,265
Sacramento/2/	242,215,687	19,081,282	34,729,440	12,680,690	1,176,742	1,083,660	103,060	67,512,643	8,261,186	1,646,191	70,548,343
San Benito	11,582,862	1,096,845	1,182,963	419,897	68,166	337,633	46,764	3,768,320	508,581	0	2,405,622
San Bernardino	509,071,641	67,346,348	58,813,568	39,023,411	3,217,280	34,878,582	4,871,476	139,281,707	16,273,360	1,284,199	102,360,453
San Diego	661,309,657	78,357,258	100,825,410	47,257,234	3,017,563	345,149	128,926	162,908,300	21,592,314	1,334,470	175,037,290
San Francisco	348,546,493	22,325,762	43,889,884	16,230,898	1,504,248	26,728,923	6,562,634	39,156,889	13,269,661	1,757,156	135,063,096
San Joaquin	216,565,425	23,326,293	27,973,899	16,138,686	1,443,527	21,958,159	4,586,591	26,122,244	6,605,422	24,636,483	47,063,406
San Luis Obispo	50,737,369	3,980,927	6,898,159	2,177,091	310,056	3,374,419	1,772,245	6,863,490	1,554,142	216,572	18,078,052
San Mateo/2/	56,298,473	947,152	130,041	5,810,273	1,164	39,343	268,790	2,689,126	251,065	615,593	43,987,823
Santa Barbara/2/	17,467,847	2,072,498	209,655	5,530,281	3,596	(53,833)	6,837	6,817,902	179,795	395,398	17,689
Santa Clara	456,996,409	28,518,083	43,333,221	27,124,389	1,979,738	58,162,444	6,621,034	56,098,590	8,995,157	83,015,479	96,922,015
Santa Cruz	61,632,917	6,051,104	6,894,992	2,994,733	208,632	475,179	79,516	20,823,918	1,754,091	325,930	14,306,760
Shasta	71,831,949	5,373,338	10,754,793	4,083,592	421,239	173,669	27,570	22,648,810	3,443,222	36,100	16,482,681
Sierra	1,892,297	35,111	116,854	11,916	3,263	0	790	141,754	27,711	155,683	1,326,544
Siskiyou	17,141,385	1,228,639	2,466,182	772,268	103,896	46,252	4,862	4,646,720	967,390	0	5,014,892
Solano/2/	9,471,817	274,111	82,441	5,187,997	2,077	25,180	1,495	2,193,889	161,691	622,996	20,587
Sonoma	147,187,254	6,464,070	11,295,133	3,908,162	427,163	11,997,698	2,465,814	12,232,323	1,695,480	62,572,823	23,910,754
Stanislaus	158,815,256	17,568,591	24,421,027	11,500,576	1,327,019	7,463,359	7,467,774	33,397,771	4,611,240	200,823	37,653,295
Sutter	25,163,275	2,417,883	3,871,414	1,998,238	126,510	37,357	5,887	7,201,780	975,323	1,889	5,300,418
Tehama	19,357,134	1,911,862	2,997,821	762,356	161,246	23,240	11,273	5,529,559	995,815	416,801	3,665,715
Trinity	5,589,723	490,302	816,177	234,518	30,403	793,594	150,914	831,546	75,575	177,278	1,552,364
Tulare	223,810,705	15,702,492	23,545,922	10,280,053	1,307,390	1,546,898	218,809	36,826,289	6,469,675	71,851,625	32,004,697
Tuolumne	24,272,068	904,938	1,846,394	592,432	89,951	480,583	614,138	2,048,135	759,343	9,283,609	5,577,427
Ventura	225,299,475	12,274,976	18,414,908	9,588,641	978,047	19,901,735	8,175,816	20,255,639	3,566,506	79,571,036	40,441,701
Yolo	42,675,775	3,541,438	4,891,416	3,717,480	220,890	89,900	13,820	8,121,438	2,315,737	3,723,263	12,061,811
Yuba	27,749,094	2,808,854	4,456,496	2,136,025	163,541	43,865	11,111	8,862,541	1,161,445	224,842	3,732,044
Not Reported	79,672,819	992,395	657,951	(8,469)	11,138	7,502,698	445,779	6,724,188	234,912	59,406,725	1,553,316

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.

/2/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, and Solano Counties.

Note: FFS = Fee-For-Service.
Payments are rounded independently and may not add to totals.
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 26

MEDI-CAL PROGRAM
NUMBER OF PHYSICIANS AND HOSPITALS
RECEIVING PAYMENTS BY COUNTY OF PROVIDER
JULY-SEPTEMBER 1995

COUNTY OF PROVIDER	PHYSICIANS AND PHYSICIAN GROUPS/1/ BY SPECIALTY						HOSPITALS
	TOTAL	GENERAL PRACTICE/ FAMILY PRACTICE	OB-GYN	INTERNAL MEDICINE	PEDIATRIC	ALL OTHER	
STATEWIDE	23,950	4,137	1,758	2,731	1,596	13,728	686
Alameda	956	141	76	133	77	529	16
Alpine	1	1	0	0	0	0	0
Amador	23	10	2	6	0	5	1
Butte	187	46	9	18	6	108	6
Calaveras	21	9	2	1	0	9	1
Colusa	7	3	1	1	0	2	1
Contra Costa	469	81	33	55	27	273	10
Del Norte	24	7	3	4	1	9	1
El Dorado	81	28	7	7	1	38	2
Fresno	577	113	45	61	53	305	13
Glenn	4	2	1	0	0	1	1
Humboldt	137	38	10	5	8	76	5
Imperial	68	13	7	8	5	35	4
Inyo	26	6	2	6	1	11	2
Kern	379	68	39	36	23	213	12
Kings	50	19	5	2	2	22	3
Lake	35	13	0	3	0	19	2
Lassen	10	5	1	1	1	2	1
Los Angeles	7,297	1,342	508	911	501	4,035	122
Madera	43	11	6	6	2	18	2
Marin	232	36	15	23	8	150	4
Mariposa	7	5	0	2	0	0	1
Mendocino	81	18	7	7	2	47	3
Merced	131	38	13	15	7	58	5
Modoc	11	5	1	0	0	5	2
Mono	5	2	0	0	0	3	1
Monterey	262	46	19	38	12	147	3
Napa	128	16	10	19	4	79	3
Nevada	57	12	8	6	1	30	2
Orange	2,087	334	194	230	127	1,202	39
Placer	144	26	11	6	19	82	2
Plumas	20	16	0	0	0	4	4
Riverside	750	141	60	91	48	410	19
Sacramento	621	106	59	42	45	369	13
San Benito	22	6	2	2	2	10	1
San Bernardino	665	144	60	84	55	322	23
San Diego	1,913	303	136	194	140	1,140	33
San Francisco	1,067	94	51	182	83	657	14
San Joaquin	532	84	28	40	30	350	7
San Luis Obispo	199	37	11	20	15	116	5
San Mateo	491	42	30	74	27	318	6
Santa Barbara	287	27	22	33	20	185	6
Santa Clara	911	128	83	118	86	496	13
Santa Cruz	175	33	15	15	8	104	2
Shasta	213	52	15	19	8	119	5
Sierra	0	0	0	0	0	0	1
Siskiyou	44	12	1	4	2	25	2
Solano	86	18	6	9	7	46	5
Sonoma	398	82	29	34	23	230	9
Stanislaus	319	73	25	28	21	172	10
Sutter	64	14	10	4	3	33	1
Tehama	33	9	2	4	0	18	1
Trinity	6	5	0	0	0	1	1
Tulare	202	59	14	21	16	92	9
Tuolumne	34	6	3	4	0	21	2
Ventura	525	100	41	61	38	285	12
Yolo	45	7	1	1	4	32	2
Yuba	23	7	0	6	2	8	1
Out of State/ Not Reported	765	38	19	31	25	652	209

/1/ The number of physicians practicing in a group is not known. Each group practice is counted as one physician.

Source: State of California, Department of Health Services, Medi-Cal Provider Month of Service Files, July-September 1995 and Medi-Cal Program Hospital Expenditures, July-September 1995.

TABLE 27

MEDI-CAL PROGRAM
NUMBER OF SELECTED PROVIDERS RECEIVING MEDI-CAL
PROGRAM PAYMENTS BY COUNTY OF PROVIDER
CALENDAR YEAR 1995

COUNTY OF PROVIDER	ACUPUNC-TURISTS	CHIRO-PRACTORS	DENTISTS	NURSING FACILITIES	OPTOM-ETRISTS	ORGANIZED OUTPATIENT CLINICS	PHARMACIES	PODIATRISTS	PSYCHOL-OGISTS
STATEWIDE	766	605	9,128	1,332	2,155	432	5,861	1,156	1,988
Alameda	54	20	383	77	97	14	224	68	87
Alpine	0	0	0	0	0	0	0	0	0
Amador	0	3	7	2	5	0	9	1	1
Butte	3	8	81	16	25	4	44	8	11
Calaveras	0	0	5	2	4	0	8	2	0
Colusa	0	0	4	1	1	2	3	0	0
Contra Costa	7	13	209	27	53	12	158	30	38
Del Norte	0	3	7	1	2	0	8	2	0
El Dorado	0	2	34	3	12	1	23	4	4
Fresno	3	39	195	41	56	14	168	29	34
Glenn	0	1	4	2	3	0	4	0	0
Humboldt	2	7	60	8	13	5	36	7	7
Imperial	0	2	14	3	11	3	16	3	1
Inyo	0	1	5	2	4	1	5	1	1
Kern	1	19	88	21	34	10	124	15	9
Kings	0	5	25	4	13	2	18	3	0
Lake	1	5	12	4	8	2	17	3	3
Lassen	0	1	8	2	3	0	6	0	1
Los Angeles	305	78	2,871	410	528	100	1,681	322	566
Madera	0	7	24	5	7	2	20	2	0
Marin	14	1	83	12	9	11	41	10	26
Mariposa	0	2	4	1	1	0	2	0	0
Mendocino	5	4	27	6	10	1	22	4	8
Merced	1	7	43	8	15	3	34	2	4
Modoc	0	0	2	2	1	0	3	0	0
Mono	0	0	2	0	1	0	2	0	0
Monterey	2	6	112	14	24	7	61	17	6
Napa	1	5	25	13	7	4	22	5	26
Nevada	2	2	24	7	9	1	19	4	3
Orange	74	28	786	66	153	21	515	104	155
Placer	3	8	71	9	29	3	55	8	8
Plumas	1	1	3	4	5	2	9	1	0
Riverside	2	28	273	44	86	13	215	29	81
Sacramento	19	32	301	43	92	23	217	41	36
San Benito	0	0	13	2	2	0	7	0	0
San Bernardino	11	27	382	56	94	7	247	37	81
San Diego	31	39	639	90	156	40	416	76	365
San Francisco	105	12	370	24	72	20	145	75	92
San Joaquin	4	21	140	29	52	6	120	24	18
San Luis Obispo	3	9	68	9	28	3	59	11	29
San Mateo	7	9	190	20	34	13	111	44	34
Santa Barbara	8	11	119	26	29	12	87	11	41
Santa Clara	41	17	501	62	87	19	250	53	45
Santa Cruz	33	12	90	13	15	5	42	10	30
Shasta	2	12	64	8	27	4	35	5	13
Sierra	0	0	0	1	0	0	1	0	0
Siskiyou	0	2	14	3	5	4	13	1	0
Solano	2	1	76	12	21	7	55	11	7
Sonoma	11	17	142	21	42	9	80	19	54
Stanislaus	1	28	123	24	43	4	89	12	13
Sutter	0	6	36	4	8	3	13	0	1
Tehama	0	0	12	4	6	0	8	1	0
Trinity	1	0	4	2	0	0	5	0	0
Tulare	0	19	80	18	30	6	69	6	7
Tuolumne	1	0	19	2	6	1	17	2	1
Ventura	4	20	181	26	49	2	136	26	30
Yolo	1	2	43	7	14	3	22	5	11
Yuba	0	2	8	2	7	2	9	2	0
Out of State/ Not Reported	0	1	22	7	7	1	36	0	0

Source: State of California, Department of Health Services, Report on Provider Participation in the Medicaid Program, Calendar Year 1995.

TABLE 28

MEDI-CAL PROGRAM
COUNTY POPULATION, MEDI-CAL ELIGIBLES, AND
MEDI-CAL ELIGIBLES AS A PERCENT OF POPULATION
CALENDAR YEAR 1995

(COHS, PHPs, AND FFS)

COUNTY	POPULATION/1/	ELIGIBLES/2/	ELIGIBLES AS A PERCENT OF POPULATION	COUNTY	POPULATION/1/	ELIGIBLES/2/	ELIGIBLES AS A PERCENT OF POPULATION
STATEWIDE	32,063,000	5,421,262	16.9 %				
Alameda	1,347,700	205,302	15.2	Placer	203,500	18,391	9.0
Alpine	1,170	214	18.3	Plumas	20,500	3,172	15.5
Amador	32,600	2,599	8.0	Riverside	1,370,300	213,232	15.6
Butte	196,100	42,489	21.7	Sacramento	1,117,700	235,891	21.1
Calaveras	36,950	5,067	13.7	San Benito	42,650	5,787	13.6
Colusa	17,850	3,703	20.7	San Bernardino	1,581,600	318,031	20.1
Contra Costa	867,300	93,984	10.8	San Diego	2,669,200	359,258	13.5
Del Norte	27,600	6,663	24.1	San Francisco	751,500	119,464	15.9
El Dorado	144,200	13,085	9.1	San Joaquin	524,600	123,543	23.5
Fresno	754,100	216,994	28.8	San Luis Obispo	228,400	23,482	10.3
Glenn	26,600	5,722	21.5	San Mateo	689,700	55,165	8.0
Humboldt	124,500	23,968	19.3	Santa Barbara	391,400	49,772	12.7
Imperial	137,400	39,713	28.9	Santa Clara	1,603,300	192,785	12.0
Inyo	18,450	2,863	15.5	Santa Cruz	241,500	29,016	12.0
Kern	616,700	142,164	23.1	Shasta	160,900	33,473	20.8
Kings	114,900	24,782	21.6	Sierra	3,390	374	11.0
Lake	55,100	13,667	24.8	Siskiyou	44,650	9,696	21.7
Lassen	28,650	5,090	17.8	Solano	370,500	44,943	12.1
Los Angeles	9,352,200	1,844,393	19.7	Sonoma	419,500	42,693	10.2
Madera	106,400	26,988	25.4	Stanislaus	413,800	95,259	23.0
Marin	238,900	13,161	5.5	Sutter	73,800	13,949	18.9
Mariposa	15,900	2,268	14.3	Tehama	54,200	11,847	21.9
Mendocino	84,300	17,301	20.5	Trinity	13,400	2,482	18.5
Merced	198,500	64,696	32.6	Tulare	349,800	104,869	30.0
Modoc	10,050	2,463	24.5	Tuolumne	51,500	6,877	13.4
Mono	10,550	744	7.1	Ventura	712,700	76,185	10.7
Monterey	361,800	56,157	15.5	Yolo	150,800	24,130	16.0
Napa	117,800	11,512	9.8	Yuba	62,300	19,367	31.1
Nevada	86,600	7,851	9.1				
Orange	2,614,800	292,527	11.2				

/1/ State of California, Department of Finance, Population Estimate as of July 1, 1995, Report 95 E-2.
/2/ Average Monthly Eligibles.
COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Note: These figures do not include capitation adjustments.
Figures are rounded independently and may not add to totals.
Source: State of California, Department of Finance, Population Estimates for California Counties.
State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1995; Advanced Payment Worksheets for County Organized Health Systems; and Prepaid Health Plan Status Code 1 Reports.

TABLE 29

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY AND RACE/ETHNICITY
OCTOBER 1995

(COHS, PHPs, AND FFS)

COUNTY	TOTAL	RACE/ETHNICITY					
		AMERICAN INDIAN/ALASKAN NATIVE	ASIAN/ PACIFIC ISLANDER	BLACK	HISPANIC	WHITE	NOT REPORTED
STATEWIDE	5,402,239	23,282	447,759	743,730	2,055,088	1,630,247	502,133
Alameda	205,541	562	27,655	81,231	31,277	42,738	22,078
Alpine	219	141	0	0	3	58	17
Amador	2,534	40	3	11	87	2,275	118
Butte	42,432	307	4,032	1,012	3,847	30,618	2,616
Calaveras	5,008	71	6	24	173	4,489	245
Colusa	3,413	59	37	15	1,773	1,311	218
Contra Costa	93,861	190	7,402	26,649	16,417	34,937	8,266
Del Norte	6,704	464	352	43	431	5,004	410
El Dorado	12,977	64	80	102	1,244	10,787	700
Fresno	216,040	626	36,166	19,907	94,841	44,690	19,810
Glenn	5,614	109	887	27	1,370	2,824	397
Humboldt	23,830	1,745	927	322	633	18,666	1,537
Imperial	40,104	401	98	894	27,825	6,388	4,498
Inyo	2,862	500	7	7	464	1,666	218
Kern	143,954	394	2,793	15,450	60,325	54,704	10,288
Kings	24,740	221	586	2,078	12,676	7,425	1,754
Lake	13,538	353	65	441	851	11,042	786
Lassen	5,006	190	45	65	398	4,076	232
Los Angeles	1,829,302	2,292	98,947	315,603	885,676	358,648	168,136
Madera	27,187	165	168	1,206	15,060	8,543	2,045
Marin	12,973	45	916	1,221	2,955	6,771	1,065
Mariposa	2,213	37	5	15	36	2,023	97
Mendocino	17,370	1,135	112	176	2,437	12,486	1,024
Merced	63,633	176	5,912	4,042	27,210	17,632	8,661
Modoc	2,388	87	31	12	340	1,807	111
Mono	725	132	0	2	156	396	39
Monterey	53,653	167	1,568	2,587	32,780	11,831	4,720
Napa	11,265	41	175	250	3,385	6,623	791
Nevada	7,805	109	43	39	353	6,891	370
Orange	292,268	203	51,313	8,357	125,710	76,551	30,134
Placer	18,129	210	159	198	2,038	14,341	1,183
Plumas	2,940	103	10	55	128	2,496	148
Riverside	216,348	1,393	5,923	24,769	86,271	82,804	15,188
Sacramento	237,566	1,468	37,473	47,493	31,678	100,716	18,738
San Benito	5,618	16	31	40	3,475	1,583	473
San Bernardino	317,194	1,906	11,165	48,930	118,480	118,639	18,074
San Diego	360,775	1,768	28,428	50,860	125,040	119,706	34,973
San Francisco	119,555	139	22,988	27,194	15,613	26,580	27,041
San Joaquin	123,742	543	24,324	13,381	32,315	40,144	13,035
San Luis Obispo	23,298	86	334	659	5,333	15,248	1,638
San Mateo	55,252	117	5,312	7,497	19,894	14,219	8,213
Santa Barbara	48,777	167	1,468	2,223	25,768	15,118	4,033
Santa Clara	192,003	674	40,801	10,567	71,875	41,283	26,803
Santa Cruz	28,168	75	408	691	12,070	12,228	2,696
Shasta	33,838	546	1,670	442	695	28,232	2,253
Sierra	392	3	0	4	3	352	30
Siskiyou	9,565	408	245	202	693	7,441	576
Solano	45,903	183	3,649	14,435	6,525	16,731	4,380
Sonoma	42,304	807	1,685	1,981	8,413	26,176	3,242
Stanislaus	94,135	353	7,470	3,282	27,986	47,661	7,383
Sutter	13,260	86	527	280	3,330	7,883	1,154
Tehama	11,804	111	52	81	1,986	9,023	551
Trinity	2,416	90	12	9	44	2,128	133
Tulare	103,520	363	5,868	2,604	55,176	31,638	7,871
Tuolumne	6,918	44	27	20	164	6,314	349
Ventura	76,750	163	1,672	2,645	40,590	24,337	7,343
Yolo	23,562	261	1,798	921	6,808	11,877	1,897
Yuba	19,348	173	3,929	479	1,964	11,449	1,354

Note: COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/25/96.

TABLE 30

MEDI-CAL PROGRAM
NUMBER OF PROVIDERS BY PROGRAM TYPE AND STATUS
CALIFORNIA, AS OF DECEMBER 29, 1995

PROVIDER TYPE	ACTIVE STATUS	INACTIVE STATUS	PENDING STATUS	DECEASED STATUS	REJECTED STATUS	SUSPENDED STATUS
TOTAL/1/	76,783	219,603	251	3,619	117	1,662
Adult Day Care Centers	80	33	0	0	0	0
Assistive Device and Sick Room Supplier	1,082	3,317	1	5	0	40
Audiologists	370	621	1	0	0	4
Blood Banks	7	12	0	0	0	0
Certified Nurse Midwife	120	70	0	0	0	1
Chiropractors	1,055	7,360	5	287	0	39
Certified Pediatric Nurse Practitioner and Certified Family Nurse Practitioner	73	63	0	0	0	0
Christian Science Practitioners	0	2	0	0	0	0
Clinical Laboratories	796	2,733	2	2	0	15
Fabricating Optical Laboratory	3	3	0	0	0	7
Dispensing Opticians	451	1,623	1	5	0	3
Hearing Aid Dispensers	395	1,098	0	4	0	25
Home Health Agencies	722	1,070	0	0	0	2
Community Hospital Outpatient Departments	2,343	6,728	4	0	0	16
Community Hospital Inpatient	2,035	8,123	4	0	0	15
Long Term Care	2,083	8,609	1	0	0	69
Nurse Anesthetists	137	361	3	2	0	4
Occupational Therapists	126	812	0	2	2	0
Optometrists	2,504	3,846	1	129	0	16
Orthotists	31	39	1	0	0	0
Physicians Group	6,627	13,206	10	15	23	57
Optometric Group	162	15	2	0	0	0
Pharmacies/Pharmacist	6,376	15,613	6	3	0	64
Physical Therapists	355	5,908	0	109	1	5
Physicians	33,825	78,356	104	2,920	77	1,037
Podiatrists	1,488	2,456	7	64	5	53
Portable X-Ray Laboratory	38	171	0	2	0	8
Prosthetists	143	94	1	0	0	2
Ground Medical Transportation	681	2,464	1	2	0	17
Psychologists	3,191	8,350	8	42	6	81
Certified Acupuncturist	1,104	1,025	3	5	0	13
Genetic Disease Testing	1	1	0	0	0	0
Rural Health Clinics	0	126	0	0	0	0
P.L. 95-210 Rural Health Clinics and Federally Qualified Health Centers (FQHCs)	388	122	10	0	0	0
HCBS-Certified Home Health Agnecy	0	1	0	0	0	0
Speech Therapists	349	1,490	3	5	0	2
Air Ambulance Transportation Services	57	21	0	0	0	0
Certified Hospice Service Per AB 4249	153	62	1	0	0	0
Free Clinics	5	19	0	0	0	0
Community Clinics	375	817	1	0	0	2
Chronic Dialysis Clinics	255	298	0	0	0	0
Multispecialty Clinics	1	2	0	0	0	0
Surgical Clinics	169	92	0	0	0	0
Exempt from Licensure Clinics	45	54	0	0	0	0
Rehabilitation Clinics	111	40	0	0	0	0
Employer/Employee Clinics	0	2	0	0	0	0
County Clinics Not Associated with Hospital	47	87	0	0	0	0
Birthing Centers - Primary Care Clinics	1	0	0	0	0	0
Clinic - Otherwise Undesignated	0	389	0	0	0	0
Outpatient Heroin Detoxification Center	41	15	0	0	0	0
Alternative Birth Centers - Specialty Clinics	6	0	0	0	0	0
Breast Cancer Early Detection Program	267	16	7	0	0	0
Expanded Access to Primary Care Clinics	158	1	0	0	0	0
Local Education Agency	164	9	0	0	0	0
EPSDT Supplemental Provider	4	3,867	8	9	0	9
County Hospital Inpatient	156	459	0	0	0	0
County Hospital Outpatient	76	127	0	0	0	0
Community Hospital-LTC	0	4	0	0	0	0
Pediatric Subacute Care-LTC	2	0	0	0	0	0
Mental Health Inpatient	216	7	1	0	0	0
AIDS Waiver Provider	32	23	0	0	0	0
California Children's Service/Genetically Handicapped Person Program - Non-Institutional	4,839	30,261	53	4	3	56
California Children's Service/Genetically Handicapped Person Program - Institutional	462	215	1	0	0	0
Out of State	0	6,647	0	0	0	0
Miscellaneous	0	148	0	3	0	0

/1/ Includes California, Out of State, and Out of Country.

Source: State of California, Department of Health Services, Payment Systems Division, Provider Master File Unit, Medi-Cal Management Information System (MMIS), Run Date 12/29/95.

SECTION 9

MEDI-CAL PROGRAM TRENDS

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MEDI-CAL PROGRAM OVERVIEW

In July 1965, two major amendments to the Social Security Act greatly expanded the scope of medical coverage available to various segments of the population. Title XVIII established the Medicare program, and Title XIX established the state-option medical assistance program known as Medicaid that provided Federal matching funds to states implementing a single comprehensive medical care program.

State legislation implementing the Title XIX program was signed in November 1965. Medi-Cal, California's medical assistance Medicaid program, became effective in March 1966. Under the provisions of Title 22 of the California Code of Regulations, the State Department of Health Services administers the Medi-Cal program and has statutory responsibility to formulate policy that conforms with Federal and State requirements.

The objective of the Medi-Cal program is to provide essential medical care and services to preserve health, alleviate sickness, and mitigate handicapping conditions for individuals or families on public assistance, or whose income is not sufficient to meet their individual needs. The covered services are generally recognized as standard medical services required in the treatment or prevention of diseases, disability, infirmity or impairment. These services are comprehensive and provide care in the major disciplines of health care.

From the inception of the Medi-Cal Program, the State has contracted with a vendor to receive and process Medi-Cal claims.

In 1992, the State released a Request for Proposal (RFP) to all interested vendors. The RFP was developed to fulfill the State's requirements for fiscal responsibilities and good administrative practices, and to meet the Federal requirements under the Medicaid Management Information System (MMIS).

Electronic Data Systems responded to this RFP and was selected in September 1992 to process Medi-Cal claims for the next 5 years.

MEDI-CAL ELIGIBLES - TABLE 31

Data included in this table are Fee-For-Service (FFS), Redwood Health Foundation (RHF), County Organized Health Systems (COHS), and Prepaid Health Plans (PHPs).

The Medi-Cal eligible population averaged 5.42 million persons per month in 1995. This reflects an increase of 30,545 or 0.6 percent from 1994 and an increase of 2.5 million or 82.8 percent from 1986.

Capitated Health System eligibles included in Total Only for 1995.

Public Assistance FFS eligibles averaged 3.37 million persons per month in 1995.

Medically Needy eligibles averaged 543,081 persons per month in 1995.

Medically Indigent (MI) eligibles averaged 249,073 persons per month in 1995. Effective January 1, 1983, responsibility for the health care services for most MI Adults was transferred to the 58 counties.

The Immigration Reform and Control Act (IRCA) Alien program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Alien program averaged 282,743 persons per month in 1995.

The Refugee/Entrant program averaged 5,647 persons per month in 1995.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs averaged 174,015 persons per month in 1995.

The 60-Day Postpartum program averaged 1,760 persons per month in 1995.

The Dialysis and Total Parenteral Nutrition programs are small, with an average of 34 eligibles per month in 1995.

The Qualified Medicare Beneficiary program averaged 2,233 eligibles per month in 1995.

Data for the Presumptive Eligibility for Pregnant Women program are not available.

The Medi-Cal Tuberculosis program averaged 377 eligibles per month in 1995.

TABLE 31

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY PROGRAM
CALENDAR YEARS 1986-1995

(RHF, COHS, PHPs, AND FFS)

PROGRAM	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995/a/
TOTAL	2,965,168	3,044,808	3,129,173	3,323,154	3,755,839	4,377,669	4,853,284	5,204,359	5,390,717	5,421,262
Public Assistance	2,516,448	2,602,817	2,670,008	2,774,774	3,028,904	3,442,846	3,701,405	3,911,384	4,079,538	3,374,020
Medically Needy	331,630	327,734	329,760	329,534	354,674	403,378	480,429	560,808	576,531	543,081
Medically Indigent	108,519	106,307	115,975	128,164	154,133	178,157	209,366	236,765	253,875	249,073
IRCA Aliens	NA	NA	761	13,336	29,522	49,547	62,441	40,944	13,459	181
OBRA Aliens	NA	NA	3,093	55,791	129,997	214,075	281,325	309,076	300,469	282,743
Refugee/Entrant	8,498	7,869	9,512	10,067	10,287	10,794	8,333	8,515	7,311	5,647
100 Percent Poverty	NA	NA	NA	NA	NA	69	1,635	4,770	9,085	15,610
133 Percent Poverty	NA	NA	NA	NA	5,970	22,119	38,394	53,734	64,137	75,087
185 Percent Poverty (renamed Income Disregard)	NA	NA	NA	8,650	35,586	49,317	62,290	70,140	74,054	82,058
200 Percent Poverty	NA	NA	NA	38	2,122	3,128	3,512	3,441	1,997	1,260
60-Day Postpartum	NA	NA	NA	2,732	3,428	2,224	1,986	2,036	1,790	1,760
Dialysis	64	72	56	56	57	58	51	35	29	25
Total Parenteral Nutrition	9	9	8	7	9	9	9	10	9	9
Qualified Medicare Beneficiary	NA	NA	NA	NA	1,151	1,948	2,107	2,602	1,587	2,233
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	NA	NA	NA	99	6,842	INA
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	NA	NA	NA	5	377

INA Information Not Available.
NA Not Applicable.
/a/ Capitated Health System eligibles included in Total Only for 1995.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
RHF = Redwood Health Foundation; COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Averages are rounded independently and may not add to totals.
Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year Reports: Prepaid Health Plan Status Code 1 Reports; and Advance Payment Worksheets for County Organized Health Systems.

MEDI-CAL PAYMENTS - TABLE 32

Data included in this table are Fee-For-Service (FFS), Redwood Health Foundation (RHF), County Organized Health Systems (COHS), and Prepaid Health Plans (PHPs).

During 1995, Medi-Cal program payments ran $11.1 billion. This reflects an increase of $307.5 million or 2.8 percent from 1994 and an increase of $6.5 billion or 140.4 percent from 1986.

Capitated Health System payments included in Total Only for 1995.

Public Assistance, the largest group in terms of total FFS expenditures, received $5.6 billion in services during 1995.

The Medically Needy group received $3.1 billion in services during 1995.

Medically Indigents received a total of $371.9 million in services during 1995. Effective January 1, 1983, responsibility for the health care services for most Medically Indigent Adults was transferred to the 58 counties.

The Aliens and Refugee/Entrants received a total of $659.2 million in services during 1995, a decrease of 6.1 percent from 1994. The Immigration Reform and Control Act (IRCA) Alien program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994. IRCA is shown for 1995 because claims continue to be paid due to the lag from time of service to time of payment.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs ran $280.3 million during 1995.

The 60-Day Postpartum program ran $1.9 million during 1995.

The Dialysis and Total Parenteral Nutrition programs ran $1.3 million during 1995.

The Qualified Medicare Beneficiary program ran $1.4 million in 1995.

The Presumptive Eligibility for Pregnant Women program ran $25.8 million during 1995.

The Medi-Cal Tuberculosis program ran $74 thousand during 1995.

The increase in expenditures in 1995 from previous years is attributable to an increase in eligibles, a higher rate of use by beneficiaries, reimbursement rate increases to providers, inflation, and changes in services.

TABLE 32

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY PROGRAM
CALENDAR YEARS 1986-1995
(In thousands)

(RHF, COHS, PHPs, AND FFS)

PROGRAM	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995/a/
TOTAL	$4,631,901	$4,935,659	$5,498,107	$5,907,340	$6,821,766	$8,041,267	$9,465,554	$10,368,797	$10,825,560	$11,133,016
Public Assistance	2,843,138	3,007,270	3,354,975	3,582,966	3,991,904	4,603,347	5,370,713	5,946,198	6,327,335	5,626,657
Medically Needy	1,552,958	1,674,063	1,830,048	1,799,231	1,977,077	2,317,443	2,708,682	2,990,903	3,144,336	3,075,507
Medically Indigent	235,317	253,695	300,376	267,442	245,784	258,141	298,723	330,357	364,537	371,857
IRCA Aliens	NA	NA	143	37,352	83,024	120,620	152,720	105,299	30,138	6,130
OBRA Aliens	NA	NA	705	187,517	391,422	546,228	699,691	720,469	647,513	629,846
Refugee/Entrant	15	35	11,320	13,148	14,159	16,477	19,092	24,829	24,654	23,214
100 Percent Poverty	NA	NA	NA	NA	NA	/b/	358	1,678	3,352	5,499
133 Percent Poverty	NA	NA	NA	NA	789	9,257	17,914	26,325	33,229	39,105
185 Percent Poverty (renamed Income Disregard)	NA	NA	NA	13,975	104,268	149,887	177,982	201,842	208,727	232,316
200 Percent Poverty	NA	NA	NA	0	5,521	11,466	11,275	11,156	6,309	3,374
60-Day Postpartum	NA	NA	NA	1,771	1,765	1,668	1,735	2,093	1,704	1,900
Dialysis	280	392	340	465	260	363	342	269	364	1,019
Total Parenteral Nutrition	191	204	198	307	316	201	280	281	181	329
Qualified Medicare Beneficiary	NA	NA	NA	NA	104	300	504	899	1,407	1,398
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	NA	NA	NA	3	10,985	25,782
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	NA	NA	NA	/b/	74
Not Reported	/c/	/c/	/c/	3,167	5,372	5,868	5,542	6,196	20,788	79,673

NA Not Applicable.
/a/ Capitated Health System payments included in Total Only for 1995.
No breakdown of payments shown as negotiated Capitated Health System rates are confidential.
/b/ Less than 0.500.
/c/ Excluded from Total 1986-1988.
Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown because claims continue to be paid due to the lag from time of service to time of payment.
RHF = Redwood Health Foundation; COHS = County Organized Health Systems; PHPs = Prepaid Health Plans; FFS = Fee-For-Service.
Refugee/Entrant information available only for County Organized Health Systems until 1988.
These figures do not include adjustments.
Payments are rounded independently and may not add to totals.
Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports; Prepaid Health Plan Capitation Reports; and Advance Payment Worksheets for County Organized Health Systems.

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APPENDICES

Appendix A **Definitions of Terms**

Appendix B **Medi-Cal Aid Codes**

Appendix C **Selected Medical Care Statistics Reports**
Selected Medical Care Statistics Reports Available on Diskette
Publication Order Form

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APPENDIX A

DEFINITIONS OF TERMS

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DEFINITIONS OF TERMS

The following defines commonly used terms used in discussions of Medi-Cal. The definitions are essentially correct, but some are much more complex than indicated below.

Beneficiary: Inconsistently used to indicate a person who receives service (user or recipient) or a person eligible for service.

Capitate: Refers to the payment of a set amount of money per month per person Capitation to an agency. The agency then provides medical care for all persons paid for. Essentially an insurance premium arrangement.

Categorical: Designates persons eligible for assistance because they fall into certain welfare groups or categories (Aged, Blind, Disabled or AFDC).

CID: The Centralized Identification system was a computer system which mailed out Medi-Cal ID cards each month to eligibles. Some reports on eligibility still use this term.

COHS: County Organized Health Systems. Under this approach, the county acts as the primary contractor serving most Medi-Cal beneficiaries in the county. The COHS receive a capitated rate for each beneficiary in the county, and assume full financial risk.

Costs: Medi-Cal Program payments or expenditures, usually to providers for services rendered. But may include all program expenditures.

Crossover: Refers to a claim that has been processed and paid in part by Medi-(X-over) care and then processed by Medi-Cal for those with dual eligibility. Also referred to as Medi-Medi Claim.

Encounter: Service/Supply rendered to a Medi-Cal beneficiary. Also referred to as a Shadow Claim if the Service/Supply is rendered under Managed Care.

Eligibles: Persons who have been processed through the system and determined to meet the criteria for receiving medical assistance under the Medi-Cal Program.

Enrollees: Eligibles who have joined Managed Care Plans.

Expenditures: See Costs.

Federal Financial Participation: (FFP)	The amount of money the Federal Government pays in the operation of the Medicaid Program. FFP varies from 50 percent to 90 percent depending on type of service and meeting of stipulated criteria.
Fee-For-Service: (FFS)	Used to distinguish regular Medi-Cal Program from the Managed Care Program: "Fee-For-Service eligibles" are persons not enrolled in Managed Care Plans.
GMC:	Geographic Managed Care. Under this approach, the Medi-Cal Program negotiates contracts directly with providers to accept beneficiaries within a specified area, again paying a monthly rate based on the estimated cost of providing services to similar beneficiaries under the fee-for-service system. The Department implemented this approach in Sacramento County in April 1994.
HMO:	Health Maintenance Organization. (See PHPs.)
Medi-Cal	California's name for Medicaid, includes the federal and state program of medical assistance for needy and low-income persons. (Federal designation of the Medical Assistance Program authorized under Title XIX of the Social Security Act.)
Medi-Cal Card:	An identification card given to Medi-Cal eligibles.
Medically Indigent:	A group of persons eligible for Medi-Cal Program benefits who are not categorically linked. Distinguished from Public Assistance and Medically Needy eligibles.
Medically Needy:	Categorically linked individuals eligible for medical assistance who meet the same eligibility criteria as Public Assistance persons. However, the MNs do not receive cash assistance because they have excess property or income according to welfare standards.
Medicare:	The Federal Social Security Program (Title XVIII of the Social Security Act) provides medical care to aged and certain disabled persons. This is essentially a medical insurance program, as opposed to Medicaid which is a public assistance program for the needy.
MEDS:	Medi-Cal Eligibility Data System. A major Electronic Data Processing (EDP) system providing online access to over 17 million records of current or former Welfare, Medi-Cal, or County Medical Services Program (CMSP) clients to support administration of those programs and delivery of benefits.

Paid Claims:	A claim for medical services paid in behalf of a Medi-Cal eligible. Claims data are captured on computer tape and comprise the major data base of the Program. Usually "paid claims" refers to this data base rather than the actual document.
PCCM:	Primary Care Case Management. PCCM plans are paid a monthly capitation rate to manage selected outpatient services to Medi-Cal beneficiaries enrolled in the plan.
PHPs:	Prepaid Health Plans. Medi-Cal contracts with private entities to provide care to specific beneficiary categories. The PHPs are paid a monthly capitation payment, based on an estimate of the costs of serving beneficiaries in the fee-for-service system. Corresponds to HMO, as designated by the Federal Government.
Provider:	Any individual, group, business, or facility authorized to bill the Medi-Cal Program for services rendered to Medi-Cal eligibles. Includes the full scope of practitioners and facilities, such as physicians, hospitals, chiropractors, pharmacies, nursing facilities, intermediate care facilities, home health agencies, etc.
Public Assistance:	Refers to persons eligible for both cash assistance and medical assistance. These persons are aged, blind, disabled or members of families with dependent children; the assistance categories.
Recipient:	A user of a specified type of service.
SDX:	State Data eXchange: The computer tapes received from Social Security Administration which contain names and addresses of persons eligible for Medicare and Medi-Cal concurrently.
Services:	What providers provide Medi-Cal patients and are paid for by the Medi-Cal Program. Services have to be defined within the context in which they're reported. For example, the units of service for inpatient hospital services are patient days, the unit in prescription drugs is prescriptions, the unit in outpatient visits is visits, etc.
SSI/SSP:	Supplemental Security Income/State Supplementary Payment. If you get a SSI/SSP grant, Medi-Cal eligibility is automatically set up by your Social Security district office.
Vendor:	See Provider.

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APPENDIX B

MEDI-CAL AID CODES

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MEDI-CAL AID CODES

CALENDAR YEAR 1995

The following aid codes were used in the classification and reporting of Medi-Cal beneficiaries in this report. Each aid code is identified as to the availability of federal financial participation (FFP) under Title XIX.

PUBLIC ASSISTANCE

1. CASH GRANT

10 AGED ..... SSI/SSP Aid to the Aged (FFP)

20 BLIND ..... SSI/SSP Aid to the Blind (FFP)

3A AFDC-CAAP ..... California Alternative Assistance Program - Aid to Families with Dependent Children, Family Group (FFP)

3C AFDC-CAAP ..... California Alternative Assistance Program - Aid to Families with Dependent Children, Unemployed Parent Group (FFP)

30 AFDC-FG ..... Aid to Families with Dependent Children Family Group (FFP)

32 AFDC-FG ..... Aid to Families with Dependent
State Only Children - State Only Family Group -- State-Only (FFP-Medi-Cal Only)

These recipients were coded as Aid Code 30 prior to July 1, 1988 and were included with federally eligible family group recipients. (See MPP Section 40-103)

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

PUBLIC ASSISTANCE (Continued)

1. CASH GRANT (Continued)

33 AFDC-U ..... State Only	Aid to Families with Dependent Children -- Unemployed Parent -- State-Only (FFP-Medi-Cal Only) These recipients were coded as Aid Code 35 prior to July 1, 1988 and were included with federally eligible unemployed recipients. (See MPP Section 40-103)
35 AFDC-U	Aid to Families with Dependent Children -- Unemployed Parent (FFP)
38 EDWARDS v. MYERS	Continuing Medi-Cal Eligibility -- No Share of Cost (FFP)
39 Initial TMC	Initial Transitional Medi-Cal (TMC) - Initial Six Months
4C AFDC-FC- ..... Voluntary	Aid to Families with Dependent Children -- Foster Care -- Voluntarily Placed (Fed) (FFP). Provides financial assistance for those children who are in need of substitute parenting and who have been voluntarily placed in foster care
40 AFDC-FC- ..... (Non-Fed)	Aid to Families with Dependent Children -- Foster Care -- (Non-Fed) (FFP)
42 AFDC-FC- ..... (Fed)	Aid to Families with Dependent Children -- Foster Care -- (Federal) (FFP)

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

PUBLIC ASSISTANCE (Continued)

1. CASH GRANT (Continued)

54 FOUR MO. CONT.	Four Month Continuing Eligibility -- Persons discontinued from AFDC due to the increased collection of child/spousal support payments (FFP)
59 ADDITIONAL TMC	Additional Transitional Medi-Cal - Second Six Months
60 Disabled	SSI/SSP Aid to the Disabled (FFP)

2. PICKLE ELIGIBLES/20% SOCIAL SECURITY DISREGARDS

***16 AGED-PICKLE ELIG. ...	Aid to the Aged -- Pickle Eligibles (FFP)
***26 BLIND-PICKLE ELIG. ..	Aid to the Blind -- Pickle Eligibles (FFP)
***36 DISABLED ..... COBRA-WIDOW/ERS	Aid to Disabled Widow/er (FFP)

*** NOTE: This also includes persons who were discontinued from cash grant status due to the 20% Social Security increase under Public Law 32-336. These persons are eligible for Medi-Cal benefits as public assistance recipients in accordance with Section 50247, Title 22, CAC.

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

PUBLIC ASSISTANCE (Continued)

2. PICKLE ELIGIBLES/20% SOCIAL SECURITY DISREGARDS (Continued)

46 AFDC-FC-20% SS	Aid to Families with Dependent Children -- Foster Care -- 20% Social Security Disregard (FFP)
***66 DISABLED - PICKLE ELIG. ..	Aid to the Disabled -- Pickle Eligibles (FFP)
6A DISABLED	Disabled Adult Child(ren) (DAC)/Blindness (FFP)
6C DISABLED	Disabled Adult Child(ren) DAC)/Disabled (FFP)

3. IN-HOME SUPPORTIVE SERVICES

18 AGED-IHSS	Aid to the Aged -- In-Home Supportive Services (FFP)
28 Blind-IHSS	Aid to the Blind -- In-Home Supportive Services (FFP)
68 Disabled-IHSS	Aid to the Disabled -- In-Home Supportive Services (FFP)

*** NOTE: This also includes persons who were discontinued from cash grant status due to the 20% Social Security increase under Public Law 32-336. These persons are eligible for Medi-Cal benefits as public assistance recipients in accordance with Section 50247, Title 22, CAC.

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

MEDICALLY NEEDY

1. MEDICALLY NEEDY, NO SHARE OF COST

14 AGED-MN	Aid to the Aged -- Medically Needy, No Share of Cost (FFP)
24 BLIND-MN	Aid to the Blind -- Medically Needy, No Share of Cost (FFP)
34 AFDC-MN	Aid to Families with Dependent Children -- Medically Needy, No Share of Cost (FFP)
64 DISABLED-MN	Aid to the Disabled -- Medically Needy, No Share of Cost (FFP)

2. MEDICALLY NEEDY, SHARE OF COST

17 AGED-MN SOC	Aid to the Aged -- Medically Needy, Share of Cost (FFP)
27 Blind-MN-SOC	Aid to the Blind -- Medically Needy, Share of Cost (FFP)
37 AFDC-MN-SOC	Aid to Families with Dependent Children -- Medically Needy, Share of Cost (FFP)
65 DISABLED-SGA/ABD-MN ..... (IHSS) SOC	Aid to the Disabled -- Substantial Gainful Activity/Aged, Blind, Disabled -- Medically Needy (In-Home Supportive Services), Share of Cost (non-FFP)
67 DISABLED-MN-SOC	Aid to the Disabled -- Medically Needy, Share of Cost (FFP)

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

3. MEDICALLY NEEDY LONG-TERM CARE

(NOTE: These Aid Codes should be used for all individuals whose eligibility is determined in accordance with Sections 50203 and 50605, Title 22, CAC, regardless of whether or not there is share of cost involvement.)

13 AGED-LTC	Aid to the Aged -- Long-Term Care Status (FFP)
23 BLIND-LTC	Aid to the Blind -- Long-Term Care Status (FFP)
63 DISABLED-LTC	Aid to the Disabled -- Long-Term Care Status (FFP)

MEDICALLY INDIGENT

03 AAP-Federal	Adoption Assistance Program (FFP)
04 AAP/AAC ..... Non-Federal	Adoption Assistance Program/Aid for Adoption of Children (non-FFP)
4K MI-C	Emergency Assistance (EA) Program (FFP). Covers juvenile probation cases placed in foster care
45 FC	Children in Foster Care -- Under 21 -- Supported in Whole or in Part by Public Funds (FFP)
5K MI-C	Emergency Assistance (EA) Program (FFP). Covers child welfare cases placed in EA foster care

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

MEDICALLY INDIGENT (Continued)

53 MI-LTC	Medically Indigent -- Long-Term Care -- Age 21 and Under 65 Years -- With or Without a Share of Cost (non-FFP)
81 MI	Medically Indigent Adults -- Age 21 and Under 65 years -- Aid Paid Pending -- With or Without Share of Cost (non-FFP)
*****82 MI-C	Medically Indigent Children -- Under 21 -- No Share of Cost (FFP)
*****83 MI-C-SOC	Medically Indigent Children -- Under 21 -- Share of Cost (FFP)
86 MI-CP	Medically Indigent -- Confirmed Pregnancy -- 21 Years or Older -- No Share of Cost (FFP)
87 MI-CP-SOC	Medically Indigent -- Confirmed Pregnancy -- 21 Years or Older -- Share of Cost (FFP)

***** NOTE: These aid codes can be used for a person under 21 years of age in long-term care (LTC) status. However, an LTC indicator cannot be used with Aid Code 82 on the Medi-Cal Eligibility System (MEDS). An LTC indicator can be used with Aid Code 83, but should not be used when an individual must meet a SOC using the MC 177 process.

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

MEDI-CAL SPECIAL TREATMENT PROGRAMS

#71 DP/DSP.....	Medi-Cal Dialysis Only Program (non-FFP)
#73 TPN/TPN-SUPP	Medi-Cal TPN Only Program (non-FFP)

REFUGEE/ENTRANT PROGRAM

*01 RCA	Refugee Cash Assistance -- Includes Unaccompanied Children (FFP)
***02 RMA/EMA	Refugee Medical Assistance/ Entrant Medical Assistance (non-FFP)
*08 ECA	Entrant Cash Assistance (FFP)

IRCA AND OBRA ALIENS

5F OBRA ALIEN ..... LIMITED SCOPE MEDI-CAL	Omnibus Reconciliation Act -- Undocumented Alien/Nonimmigrant Alien - Limited Scope Medi-Cal (50% Title XIX FFP for emergency services, 100% State General Fund for pregnancy-related services)

\# Restricted Medi-Cal card(s) issued for this aid code.

* FFP is available under the Title XIX program for individuals under 21 years of age. Other federal funds are available through the Refugee Resettlement Program for both children and adults.

*** FFP available under the Refugee Resettlement Program or Cuban/Haitian Entrant Program, not Title XIX.

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

<u>IRCA AND OBRA ALIENS</u> (Continued)

51 IRCA AMNESTY ..... ALIEN-FULL SCOPE MEDI-CAL	Immigration Reform and Control Act -- Alien - Full Scope Medi-Cal (50% Title XIX FFP, 50% SLAIG Funds)
52 IRCA AMNESTY ..... ALIEN-LIMITED SCOPE MEDI-CAL	Immigration Reform and Control Act -- Amnesty Alien --Limited Scope Medi-Cal (50% Title XIX FFP, 50% SLAIG Funds)
55 OBRA ALIEN ..... LIMITED SCOPE MEDI-CAL	Omnibus Budget Reconciliation Act -- Undocumented Alien/ Nonimmigrant Alien residing in long-term care (LTC) - Restricted services: LTC services (no FFP); Pregnancy or emergency services (no FFP for routine prenatal care)
56 IRCA SAW/RAW ..... FULL SCOPE MEDI-CAL	Immigration Reform and Control Act -- Special Agricultural Worker/Replacement Agricultural Worker Alien - Full Scope Medi-Cal (50% Title XIX FFP, 50% SLAIG Funds)
57 IRCA SAW/RAW ..... LIMITED SCOPE MEDI-CAL	Immigration Reform and Control Act -- Special Agricultural Worker/Replacement Agricultural Worker Alien - Limited Scope Medi-Cal (50% Title XIX FFP, 50% SLAIG Funds)
58 OBRA ALIEN ..... LIMITED SCOPE MEDI-CAL	Omnibus Budget Reconciliation Act -- Alien Limited Scope Medi-Cal (50% Title XIX FFP for emergency services, 100% State General Fund for pregnancy-related services)

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

100 PERCENT POVERTY - NO SHARE OF COST

7A CHILD 100%	Child aged 6 up to 19 born after 9/30/83 - U.S. Citizen, Permanent Resident Alien/PRUCOL Alien/IRCA Amnesty Alien - Blind, Disabled, or Child Under 18
7C CHILD 100%	Child aged 6 up to 19 born after 9/30/83 - OBRA Undocumented Alien/Nonimmigrant Alien/IRCA Amnesty Alien/Amnesty Applicant - not Blind, Disabled, or Child Under 18 Pregnancy or emergency services only (no FFP for prenatal care)

133 PERCENT POVERTY - NO SHARE OF COST

72 CHILD 133%	Child (FFP) - U.S. Citizen, Permanent Resident Alien/PRUCOL Alien -- Provides full scope Medi-Cal benefits to children ages one up to age six and beyond six years when inpatient status began before sixth birthday continues and family income is at or below 133 percent of the federal poverty level Effective April 1, 1980
74 CHILD-OBRA 133%	Child - Undocumented/Nonimmigrant Alien (but otherwise eligible) -- Provides for emergency services only for children ages one up to age six and beyond six years when inpatient status began before sixth birthday continues and family income is at or below 133 percent of the federal poverty level Effective April 1, 1990

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

185 PERCENT POVERTY (renamed Income Disregard) - NO SHARE OF COST

44 PREGNANT WOMAN .	U.S. Citizen/Permanent Resident Alien/PRUCOL Alien -- Provides family planning, pregnancy related, and postpartum services for any age female if family income is at or below 185 percent of the federal poverty level. Pregnancy related services only (FFP)
47 INFANT	U.S Citizen/Permanent Resident Alien/PRUCOL Alien -- Provides full Medi-Cal benefits to infants up to age one and beyond one year when inpatient status began before first birthday continues and family income is at or below 185 percent of the federal poverty level (FFP)
48 PREGNANT WOMAN .	Undocumented/Nonimmigrant Alien (but otherwise eligible) -- Provides family planning, pregnancy related, and postpartum services to females of any age and family income at or below 185 percent of the federal poverty level. Routine prenatal care is non-FFP. Labor, delivery, and emergency prenatal care are FFP. The Medi-Cal card for these beneficiaries states "Valid for Pregnancy-Related Services Only"

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

185 PERCENT POVERTY (renamed Income Disregard) - NO SHARE OF COST (Continued)

49 PREGNANT WOMAN .	Amnesty Alien -- Provides for family planning, pregnancy related, and postpartum services to females any age with income at or below 185 percent of the federal poverty level. (50 percent Title XIX and 50 percent SLAIG.) IRCA provided for a State Legalization Impact Awareness Grant to reimburse state costs for providing benefits to aliens applying or granted amnesty, Special Agricultural Worker (SAWS) status, or Replenishment Agricultural Worker (RAWS) status. The Medi-Cal card for these beneficiaries states "Valid for Pregnancy-Related Services Only"
69 INFANT	Undocumented/Nonimmigrant Alien (but otherwise eligible) -- Provides emergency services only for infants under one year of age and beyond one year when inpatient status began before first birthday continues and family income is at or below 185 percent of the federal poverty level (FFP)

200 PERCENT POVERTY - NO SHARE OF COST

07 INFANT	Undocumented/Nonimmigrant Alien (but otherwise eligible) -- Provides emergency services only for infants up to age one year, and beyond one year when inpatient status began before first birthday continues and family income is at or below 200 percent of the federal poverty level

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

200 PERCENT POVERTY - NO SHARE OF COST (Continued)

70 PREGNANT WOMAN .	U.S. Citizen/Permanent Resident Alien/PRUCOL Alien -- or Undocumented/Nonimmigrant Alien (but otherwise eligible) -- Provides family planning, pregnancy-related, and postpartum services under the state only funded expansion of the Medi-Cal program for a pregnant woman having income at or below 200 percent of the federal poverty level
75 PREGNANT WOMAN .	Amnesty Alien -- Provides family planning, pregnancy-related, and postpartum services for amnesty aliens under the state-only funded expansion of the Medi-Cal program for a pregnant woman having income at or below 200 percent of the federal poverty level
79 INFANT ..... State-Only	U.S. Citizen/Permanent Resident Alien/PRUCOL Alien -- Provides full Medi-Cal benefits to infants up to age one year, and beyond one year when inpatient status began before first birthday continues and family income is at or below 200 percent of the federal poverty level

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

60-DAY POSTPARTUM

76 60-DAY POSTPARTUM ...	Provides Medi-Cal at zero share of cost to women who, while pregnant, were eligible for, applied for, and received Medi-Cal benefits. They may continue to be eligible for all postpartum and pregnancy related medical assistance as though they were pregnant. This coverage begins on the last day of pregnancy and ends on the last day of the month in which the 60th day occurs (FFP)

QUALIFIED MEDICARE BENEFICIARY

80 QUALIFIED MEDICARE .. BENEFICIARY (QMB)	Provides payment of Medicare Part A premium and Part A and B coinsurance and deductibles for eligible low income Aged, Blind, or Disabled individuals. See Section 50258, Title 22, CCR (FFP)

PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN

7F PREGNANCY ..... VERIFICATION OFFICE VISIT	Presumptive Eligibility (PE) - Pregnancy Verification (FFP). This option allows the Qualified Provider to make a determination of PE for outpatient prenatal care services based on preliminary income information. 7F is valid for pregnancy test, initial visit, and services associated with the initial visit. Persons placed in 7F have pregnancy test results that are negative

MEDI-CAL AID CODES (Continued)

CALENDAR YEAR 1995

PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN (Continued)

7G AMBULATORY ..... PRENATAL CARE SERVICES	Presumptive Eligibility (PE) - Ambulatory Prenatal Care Services (FFP). This option allows the Qualified Provider to make a determination of PE for outpatient prenatal care services based on preliminary income information. 7G is valid for Ambulatory Prenatal Care Services. Persons placed in 7G have pregnancy test results that are positive

MEDI-CAL TUBERCULOSIS PROGRAM

7H TB RELATED ..... OUTPATIENT SERVICES	Medi-Cal Tuberculosis (TB) Program. Covers individuals who are TB-infected for TB-related outpatient services only

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APPENDIX C

SELECTED MEDICAL CARE STATISTICS REPORTS, SELECTED MEDICAL CARE STATISTICS REPORTS AVAILABLE ON DISKETTE, AND PUBLICATION ORDER FORM

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SELECTED MEDICAL CARE STATISTICS REPORTS

	Cost
Catalog of Medical Care Statistics Section Publications, 1997	Free
California's Medical Assistance Program Annual Statistical Report, Medi-Cal Program, Calendar Year 1995	$18.00
Medi-Cal County Program Monthly Averages, Fiscal Year 1995-96	$2.00
Medi-Cal Non-Prepaid Health Plan Eligibles and Prepaid Health Plan Enrollees, by Age Group, Sex, and County, July 1996	$6.00
Medi-Cal Funded Deliveries, 1995	$6.00
Medi-Cal Funded Induced Abortions, 1995	$6.00
Medi-Cal Program Highlights, Calendar Year 1995	$5.00
Medi-Cal Expenditures for Drugs Commonly Used in the Treatment of Aids October-December 1996	$3.00
Medi-Cal Studies in AIDS, No. 1: Demographics and Expenditures for Persons with Aids, 1980-1989	$10.00
Medi-Cal Studies in AIDS, No. 2: Intravenous Drug Users, Characteristics, Trends and Expenditures, 1980-1989	$10.00
Medi-Cal Studies in AIDS, No. 3: Providers of Health Care Services, 1984/85-1987/88	$10.00
Medi-Cal Studies in AIDS, No. 4: Expenditures for Persons with AIDS, 1980-1992	$10.00
Medi-Cal Studies in AIDS, No. 5: Demographics and Expenditures for Persons with AIDS, 1980-1994	$15.00
Persons Certified Eligible for Medi-Cal, February 1997 (Monthly Report)	$2.00

The data presented in these reports make up only a portion of the Medi-Cal information available. Special tabulations and electronic data files can be provided for a cost, upon request.

Please Note: California's Medical Assistance Program Annual Statistical Report, Medi-Cal Program, Calendar Year 1995 is available on one high density, 3.5" diskette. Tables from this report are in LOTUS 1-2-3 Release 5 format. Text from this report is in WordPerfect 6.1 format. The cost of this diskette is $18.00.

Copies of all Medical Care Statistics Section Reports are available in State Depository Libraries, which include large university, college, county, and city libraries.

SELECTED MEDICAL CARE STATISTICS REPORTS AVAILABLE ON DISKETTE

	Cost
California's Medical Assistance Program Annual Statistical Report, Medi-Cal Program, Calendar Year 1994 and 1995	$18.00
Cumulative Certified CID Monthly Eligibles Report	$10.00
Medi-Cal Funded Deliveries, 1994 and 1995	$10.00
Medi-Cal Funded Induced Abortions, 1994 and 1995	$10.00
Medi-Cal Studies in AIDS, No. 5: Demographics and Expenditures for Persons with AIDS 1980-1994	$10.00
Month of Payment Summaries by County/Statewide, 1995 and 1996	$10.00
Beneficiaries by County/Zipcode Listing: Age Category, Aid Category Group, Language , and Ethnicity, October 1996	$10.00
Eligibles Profile by County, October 1996	$10.00

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