CALIFORNIA'S MEDICAL ASSISTANCE PROGRAM

ANNUAL STATISTICAL REPORT

CALENDAR YEAR 1996

MEDICAL CARE STATISTICS SECTION

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MEDI-CAL PROGRAM

1996

This report presents statistical data on Medi-Cal program services, expenditures, and eligibles for Calendar Year 1996.

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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ANNUAL STATISTICAL REPORT
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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.

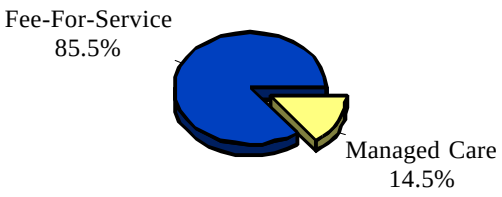
Capitated Health Systems data are included in Tables 1, 2, 14, 15, 28, and 29.

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

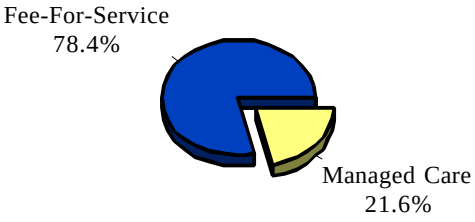
During Calendar Year 1996, those enrolled in comprehensive managed care plans comprised 21.6 percent of the total Medi-Cal population (compared to 14.5 percent during Calendar Year 1995). As used here, comprehensive plans means those plans that are capitated to provide more than a limited range of services, including Two Plan Models and GMC. Plans that provide only dental or mental health, for example, are not comprehensive plans. PCCMs are not comprehensive plans.

Use of any expenditure data series for comparison of trends over time is infeasible since the advent of the managed care because of a sharp decline in service reporting among new managed care plans.

CY 1995



CY 1996



The Combined fee-for-service and managed care populations are included in Tables 1 and 28, which reports on the eligible population. The majority of the remaining tables include only fee-for-service data. Tables 14 and 15 include only those enrolled in comprehensive managed care plans.

MEDI-CAL PROGRAM STATISTICAL SUMMARY

CALENDAR YEAR 1996

In 1996, a total of 5.38 million persons per month were eligible for Medi-Cal. This includes Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans. This represents a decrease of 0.8 percent from 1995.

A total of $667.5 million in prepaid capitations were received by County Organized Health Systems (an increase of 119.8 percent from 1995) to provide non-dental medical services for an average of 398,493 eligibles per month during 1996 (an increase of 116.7 percent from 1995).

The 764,694 persons enrolled in Prepaid Health Plans (PHPs) each month reflected a 26.6 percent increase from 1995. PHP capitation payments totaled $866.0 million which was an increase of $160.2 million from 1995.

The large increase in Capitated Health System eligibles is mainly due to Managed Care Expansion. This increase to some extent contributed to the decrease in Public Assistance, Medically Needy, and Medically Indigent Fee-For-Service eligibles.

There were 2.32 million persons who used Medi-Cal benefits each month in 1996. This includes Fee-For-Service Only benefits. Provider payments for those users totaled $10.36 billion which was 2.4 percent or $240.8 million more than in 1995.

Compared to 1995, Fee-For-Service Medi-Cal users increased 0.1 percent and the respective eligible population (4.22 million persons per month) reflected a 9.0 percent decrease.

There were 10.0 percent more users per 1,000 eligibles in 1996. The utilization rate was 55.0 percent compared to 50.0 percent for 1995.

The average cost per user was $372.63 per month (up 2.3 percent from 1995) and the average cost per eligible was $204.89 per month (up 12.5 percent from 1995).

Public Assistance eligibles, excluding Capitated Health System eligibles, averaged 3 million persons per month, a decrease of 11.0 percent from 1996. This aid group accounted for 71 percent of the Fee-For-Service eligible population, 72 percent of the users, and 56 percent of total provider payments ($5.84 billion).

Medically Needy eligibles averaged 499,471 persons per month in 1996, a decrease of 8.0 percent from 1995. Medically Needy accounted for 12 percent of Fee-For-Service eligibles, 14 percent of users, and 30 percent of total provider payments ($3.11 billion).

Medically Indigent eligibles averaged 228,084 persons per month, an 8.4 percent decrease from 1995. Medically Indigent accounted for 5 percent of Fee-For-Service eligibles, 5 percent of users, and 4 percent of total provider payments ($362.8 million).

County and community hospital services accounted for 31.4 percent of 1996 provider payments. County hospitals received $815.0 million. Community hospitals received $2.43 billion.

Medi-Cal purchased Medicare Part A and Part B Supplemental Medical Insurance for an average of 748,773 Aged and Disabled eligibles each month in 1996. Monthly premiums averaged $33.6 million.

Section 1

HIGHLIGHTS OF 1996 PROGRAM CHANGES

The following discusses the major changes of the Medi-Cal program during Calendar Year 1996.

New County Health System: Santa Cruz County Health Options (SCCHO), January 1, 1996

A new County Health Initiative was implemented for Santa Cruz County Medi-Cal recipients. Santa Cruz County Health Options (SCCHO) is a Medi-Cal county-wide program administered by the Santa Cruz Managed Medical Care Commission.

Beginning January 1, 1996, SCHO will serve all Medi-Cal eligible and Medicare/Medi-Cal eligible recipients who have ID numbers with County Code 44 (Santa Cruz County) and one of the following aid codes.

Category	Aid Codes
Adult	81, 86, 87
Aged	10, 14, 16, 17, 18
Child	03, 04, 45, 82, 83, 4C, 4K, 5K
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, 40, 42, 54, 59, 3A, 3C, 3P, 3R
Long Term Care	13, 23, 53, 63

Medi-Cal Managed Care Program - Two Plan Model, January 1996

The Department of Health Services (DHS) began implementing the Medi-Cal Two-Plan Model managed care program in January 1996. Operating under a Federal Medicaid freedom of choice waiver, Two-Plan Model contractors now provide or are preparing to provide medical services to nearly all Medi-Cal recipients in 12 California Counties (Alameda, Contra Costs, Fresno, Kern, Los Angeles, Riverside, San Bernardino, San Francisco, San Joaquin, Santa Clara, Stanislaus, and Tulare). Eight counties had at least one plan operational by the end of 1996, with Alameda and Kern being fully implemented (both the Local Initiative and Commercial Plan were operational).

In each of the 12 counties, DHS has contracted with two managed care plans to render Medi-Cal services. One contract, awarded through competitive bidding, is with a commercial health plan. The other contract is with a local initiative - a publicly sponsored health plan cooperatively developed by local government, clinics, hospitals, physicians, and other providers - that historically served the Medi-Cal population in that county. Medi-Cal services not covered by the health plans will continue to be available through the Medi-Cal Fee-For-Service program.

The mandatory enrollees (those who must make a choice between the Local Initiative and the Commercial Plan) represent the shift from Fee-For-Service to Managed Care for Public Assistance - Families, Medically Needy - Families, and Medically Indigent Children. The voluntary enrollees (those who may choose to enroll) are those in Public Assistance: Aged, Blind/Disabled; Medically Needy: Aged, Blind/Disabled; AFDC-Foster Care; and Medically Indigent-Adult.

Expanded Tuberculosis Services, March 1, 1996

The Medi-Cal Tuberculosis (TB) program implements sections of OBRA 93 which provides Federal Financial Participation (FFP) for outpatient TB services to infected individuals (non-Medi-Cal). Health Care Financing Administration (HCFA) has determined that Direct Observational Therapy (DOT) must be billed as a direct service rather than as a Medi-Cal Administrative Activity. This policy change adds DOT as a Medi-Cal funded service for all Medi-Cal eligibles who are infected with TB.

Expanded Medical Case Management, April 1, 1996

Medical Case Management is expanding into additional hospitals, specifically county hospitals, to provide alternative outpatient services for hospital inpatients with follow-up to ensure continuity of care postdischarge. The program is also expanding to cover patients who are less chronically/catastrophically ill than is in the current caseload.

Transitional Inpatient Care (TC) Program, April 1, 1996

Effective April 1, 1996, the Department implemented the Medi-Cal Transitional Inpatient Care (TC) Services program for hospital inpatients who are clinically stable and have medical and/or rehabilitative care needs of short-term durations which can be provided at a lower level of care in either a qualified nursing facility or hospital bed.

Antidepressant Drugs, May 1, 1996

On May 1, 1996, newer and safer antidepressant drugs were added to the Medi-Cal List of Contract Drugs.

Medicaid Demonstration Project, May 1, 1996

The Medicaid demonstration project is designed to address the current fiscal crisis at the county level by helping to stabilize county health care systems, and to foster a unique restructuring process that is responsive to the needs of local communities within the evolving health care environment.

Gamma v. Belshé, July 1, 1996

A lawsuit brought in federal court, involves the issue of whether Medi-Cal procedures for determining maintenance need levels and deeming of income from responsible relatives in households affected by the earlier Sneede v. Kizer case violate federal law. The court ruled on November 16, 1995, that the Department must allow the parents to meet their own financial needs before allocating any of their income to their children.

The court approved the Department's plan for implementing this change.

Medicare Outpatient Crossover Claims, September 1996

As a result of lawsuits filed by the California Medical Association and the California Ambulance Association, Medicare coinsurance and deductibles for outpatient services are to be paid for Qualified Medicare Beneficiaries (QMBs) even though combined Medicare/Medi-Cal payments to the provider will exceed Medi-Cal allowable costs.

Federal Medical Assistance Percentage (FMAP) Changes, October 1, 1996

Each year the Federal Government calculates the Federal Medical Assistance Percentage (FMAP) which determines the Federal sharing ratio used for medical assistance payments for each state. The calculation is based on a complex formula involving per capita income in each state in relation to total U.S. per capita income. The FMAP has a minimum of 50% and a maximum of 83%. California had been at the minimum of 50% since Medicaid began.

The FMAP for California which applies to cash payments for the Federal Fiscal Year (FFY) beginning October 1996 is 50.23%. The FMAP for the FFY beginning October 1997 has been calculated to be 51.23%.

Minimum Wage Increase, October 1996

The new minimum wage changes, including both Federal and State changes, result in the following four new levels above the previous rate of $4.25 per hour:

1. $4.75/hour as of October 1, 1996 (federal)
2. $5.00/hour as of March 1, 1996 (state)
3. $5.15/hour as of September 1, 1997 (federal)
4. $5.75/hour as of March 1, 1998 (state)

Airport Residency Review, November 1996

Audits and Investigations currently has a joint project with Immigration and Naturalization Service (INS) at the Los Angeles and San Francisco International airports. This program identifies those entering California who are currently receiving or previously received Medi-Cal benefits. Payments made on behalf of the recipient are verified and the opportunity for repayment is provided to the entrant . INS inspectors determine entry status at the international terminal and may grant or deny entry based on their evaluation of the circumstances. If entry is denied, the Medi-Cal eligibility is terminated due to lack of California residency.

To implement this project, three limited-term investigators were hired in July 1996 to handle arrivals at these two airports.

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, Medical Care Statistics Section, (916) 657-2794.

SECTION 2

MEDI-CAL ELIGIBLES AND USERS

MEDI-CAL ELIGIBLES, ALL PROGRAMS - TABLE 1

Total Medi-Cal eligibles (including Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans) averaged 5.38 million persons per month in 1996, a decrease of 0.8 percent from 1995.

Enrollment of Medi-Cal eligibles in Capitated Health Systems increased 47.6 percent in 1996, to a monthly average of 1,163,187 persons. For additional information, See Section 5, Medi-Cal Capitated Health Systems, page 39.

Beginning January 1995, COHS data are no longer included in the FFS data.

Fee-For-Service (FFS) Medi-Cal eligibles averaged 4.2 million persons per month, a decrease of 9.0 percent from 1995.

Public Assistance (PA) eligibles averaging 3.0 million persons per month in 1996, decreased 11.0 percent from 1995. PA eligibles accounted for 71.2 percent of all FFS eligibles.

Total Medically Needy (MN) eligibles averaged 499,471 persons monthly and decreased 8.0 percent from 1995. MN eligibles accounted for 11.8 percent of all FFS eligibles.

Total Medically Indigent (MI) eligibles averaged 228,084 persons monthly and decreased 8.4 percent from 1995. MI eligibles accounted for 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 and 1996 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 279,284 eligibles per month in 1996, a decrease of 1.2 percent from 1995. OBRA Aliens program eligibles accounted for 6.6 percent of all FFS eligibles.

The Refugee/Entrant programs averaged 2,913 persons monthly, a decrease of 48.4 percent from 1995. Refugee/Entrant program eligibles accounted for 0.1 percent of all FFS eligibles.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty, and the 200 Percent Poverty programs averaged 197,395 persons monthly, an increase of 13.4 percent from 1995. These programs accounted for 4.7 percent of all FFS eligibles.

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

The remaining programs (60-Day Postpartum, Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, and Medi-Cal Tuberculosis) averaged 5,276 persons per month, an increase of 19.8 percent from 1995. These programs accounted for 0.1 percent of all FFS eligibles.

The large increase in Capitated Health System eligibles is mainly due to Managed Care Expansion. This increase to some extent contributed to the 11.0 percent decrease in Public Assistance, 8.0 percent decrease in Medically Needy, and 8.4 percent decrease in Medically Indigent Fee-For-Service eligibles.

TABLE 1

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1995 AND 1996

(COHS, PHPs, AND FFS)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995	CALENDAR YEAR 1996	CHANGE Number	CHANGE Percent
TOTAL	5,421,262	5,378,706	(42,556)	(0.8) %
County Organized Health Systems (COHS)	183,884	398,493	214,609	116.7
Prepaid Health Plans (PHPs)	604,213	764,694	160,481	26.6
Fee-For-Service (FFS)/1/	4,633,165	4,215,519	(417,646)	(9.0)
Public Assistance	3,374,020	3,003,037	(370,983)	(11.0)
Aged	341,455	325,542	(15,913)	(4.7)
Blind	23,763	22,763	(1,000)	(4.2)
Disabled	638,539	634,293	(4,246)	(0.7)
Families	2,370,263	2,020,439	(349,824)	(14.8)
Medically Needy	543,081	499,471	(43,610)	(8.0)
Aged	107,879	100,031	(7,848)	(7.3)
Blind	785	717	(68)	(8.7)
Disabled	48,349	44,967	(3,382)	(7.0)
Families	386,070	353,756	(32,314)	(8.4)
Medically Indigent	249,073	228,084	(20,989)	(8.4)
Adults	12,411	10,721	(1,690)	(13.6)
Children	236,663	217,364	(19,299)	(8.2)
IRCA Aliens	181	60	(121)	(66.9)
OBRA Aliens	282,743	279,284	(3,459)	(1.2)
Refugee/Entrant	5,647	2,913	(2,734)	(48.4)
100 Percent Poverty	15,610	24,033	8,423	54.0
133 Percent Poverty	75,087	84,560	9,473	12.6
185 Percent Poverty (renamed Income Disregard)	82,058	87,705	5,647	6.9
Infant	34,877	37,902	3,025	8.7
Pregnant Woman	47,182	49,803	2,621	5.6
200 Percent Poverty	1,260	1,097	(163)	(12.9)
Infant	187	152	(35)	(18.7)
Pregnant Woman	1,074	945	(129)	(12.0)
60-Day Postpartum	1,760	1,870	110	6.3
Dialysis	25	25	0	0.0
Total Parenteral Nutrition	9	10	1	11.1
Qualified Medicare Beneficiary	2,233	2,769	536	24.0
Presumptive Eligibility for Pregnant Women	INA	INA	INA	INA
Medi-Cal Tuberculosis Program	377	602	225	59.7

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 and 1996 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 Certified CID Eligibles, Calendar Years 1995 and 1996; Prepaid Health Plan Status Code 1 Reports; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1997. (Tables 14, 15, and 18.)

TOTAL ANNUAL PAYMENTS - TABLE 2

This is a companion to Table 1, showing payments by type of program. 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 for 1995 and 1996.

Total Annual Medi-Cal payments (including Fee-For-Service, County Organized Health Systems, and Prepaid Health Plans) averaged $11.9 billion in 1996, an increase of 6.9 percent from 1995.

The County Organized Health System estimated capitation payments were $667 million in 1996, a 119.8 percent increase from 1995.

Prepaid Health Plan capitation payments were $866 million in 1996, compared to $706 million in 1995, an increase of 22.7 percent.

The large increase in Capitated Health Systems payments is mainly due to Managed Care Expansion.

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

Beginning January 1995, COHS data are no longer included in the FFS data.

Total Annual Medi-Cal FFS payments were $10.36 billion in 1996, an increase of 2.4 percent from 1995.

Payments for persons in the Public Assistance (PA) group ran $5.84 billion, an increase of 3.7 percent from the $5.63 billion in 1995. PA payments accounted for 56.3 percent of all FFS payments.

Over $3 billion was paid for services provided to the Medically Needy (MN), up 1.2 percent from 1995. MN payments accounted for 30.0 percent of all FFS payments.

Total Medically Indigent (MI) payments were $363 million, down 2.4 percent from the $372 million in 1995. MI payments accounted for 3.5 percent of all FFS payments.

The Immigration Reform and Control Act (IRCA) Aliens program expired December 31, 1994. IRCA is shown for 1995 and 1996 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, up $47,804 from the previous year. The OBRA Aliens program payments accounted for 6.1 percent of all FFS payments.

Payments for the Refugee/Entrant programs were $12 million, down 47.0 percent from the $23 million in 1995. Refugee/Entrant program payments accounted for 0.1 percent of all FFS payments.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty programs accounted for $325 million, a 16.0 percent increase from the $280 million in 1995. These programs accounted for 3.1 percent of all FFS payments.

Total payments for the remaining groups (excluding Not Reported) were $49.5 million in 1996, up 62.3 percent from the $30.5 million in 1995. These payments accounted for 0.5 percent of all FFS payments.

TABLE 2

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1995 AND 1996

(COHS, PHPs, AND FFS)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995	CALENDAR YEAR 1996	CHANGE Number	CHANGE Percent
TOTAL	$11,133,015,614	$11,897,871,538	$764,855,924	6.9 %
County Organized Health Systems (COHS)	$303,616,408	$667,481,814	$363,865,406	119.8
Prepaid Health Plans (PHPs)	$705,718,687	$865,951,695	$160,233,008	22.7
Fee-For-Service (FFS)/1/	$10,123,680,519	$10,364,438,029	$240,757,510	2.4
Public Assistance	5,626,657,187	5,836,518,822	209,861,635	3.7
Aged	752,184,016	822,501,262	70,317,246	9.3
Blind	105,628,001	110,858,155	5,230,154	5.0
Disabled	2,602,978,204	2,796,010,956	193,032,752	7.4
Families	2,165,866,966	2,107,148,449	(58,718,517)	(2.7)
Medically Needy	3,075,507,113	3,113,554,837	38,047,724	1.2
Aged	1,507,015,923	1,493,384,068	(13,631,855)	(0.9)
Blind	11,285,432	11,612,563	327,131	2.9
Disabled	917,298,215	997,112,625	79,814,410	8.7
Families	639,907,544	611,445,581	(28,461,963)	(4.4)
Medically Indigent	371,856,646	362,780,091	(9,076,555)	(2.4)
Adults	96,000,642	88,163,263	(7,837,379)	(8.2)
Children	275,856,004	274,616,828	(1,239,176)	(0.4)
IRCA Aliens	6,130,126	816,190	(5,313,936)	(86.7)
OBRA Aliens	629,846,317	629,894,121	47,804	0.0
Refugee/Entrant	23,213,561	12,301,899	(10,911,662)	(47.0)
100 Percent Poverty	5,499,030	8,959,686	3,460,656	62.9
133 Percent Poverty	39,104,836	45,586,283	6,481,447	16.6
185 Percent Poverty (renamed Income Disregard)	232,316,461	268,288,711	35,972,250	15.5
Infant	45,385,501	59,007,164	13,621,663	30.0
Pregnant Woman	186,930,960	209,281,547	22,350,587	12.0
200 Percent Poverty	3,373,997	2,222,135	(1,151,862)	(34.1)
Infant	675,872	410,578	(265,294)	(39.3)
Pregnant Woman	2,698,125	1,811,557	(886,568)	(32.9)
60-Day Postpartum	1,900,318	1,585,437	(314,881)	(16.6)
Dialysis	1,018,906	157,361	(861,545)	(84.6)
Total Parenteral Nutrition	328,584	159,650	(168,934)	(51.4)
Qualified Medicare Beneficiary	1,398,452	1,629,525	231,073	16.5
Presumptive Eligibility for Pregnant Women	25,781,794	45,796,608	20,014,814	77.6
Medi-Cal Tuberculosis Program	74,371	179,153	104,782	140.9
Not Reported	79,672,819	34,007,520	(45,665,299)	(57.3)

/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 and 1996 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; Prepaid Health Plan Capitation Summaries; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1997. (Tables 14, 15, and 20.)

MONTHLY MEDI-CAL ELIGIBLES - TABLE 3

An average of 4,215,519 persons were eligible each month for Medi-Cal fee-for-service benefits during 1996. Average monthly eligibles in the first half of the year ran about 289,274 or 7.1 percent higher than in the last half.

The Public Assistance (PA) program accounted for 71.2 percent of the total annual average eligibles. The PA eligibles averaged 233,715 more persons in the first half of the year than in the last half.

The Medically Needy (MN) program accounted for 11.8 percent of the total annual average eligibles. The average MN eligibles ran 39,540 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 7 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 5 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 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 (0.014 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 1996

(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT PROVERTY
Annual Average 1996	4,215,519	3,003,037	499,471	228,084	60	279,284	2,913	24,033
Six-Month Average	4,360,156	3,119,894	519,241	234,614	74	286,825	3,335	21,781
January	4,425,138	3,200,598	519,884	228,704	59	279,536	3,744	20,030
February	4,379,748	3,146,355	520,207	232,523	60	284,749	3,612	20,364
March	4,398,661	3,146,245	528,364	237,528	70	289,388	3,632	20,854
April	4,360,221	3,108,974	522,705	237,447	77	291,404	3,436	21,987
May	4,305,493	3,060,129	517,002	235,683	94	289,781	2,916	23,173
June	4,291,676	3,057,063	507,284	235,800	82	286,094	2,672	24,278
Six-Month Average	4,070,882	2,886,179	479,701	221,554	46	271,742	2,491	26,285
July	4,242,277	3,015,056	502,160	232,503	67	283,346	2,558	25,128
August	4,189,207	2,972,225	496,380	230,417	60	279,133	2,551	25,475
September	4,086,825	2,897,557	479,379	224,373	55	270,983	2,629	26,658
October	4,049,148	2,870,801	476,966	220,135	47	267,243	2,524	26,899
November	3,991,365	2,826,300	470,026	216,917	29	267,007	2,386	26,686
December	3,866,470	2,735,136	453,297	204,981	17	262,741	2,298	26,864

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 1996	84,560	87,705	1,097	1,870	2,769	INA	602	35
Six-Month Average	82,323	85,925	1,136	1,849	2,509	INA	616	35
January	81,361	85,402	1,167	1,676	2,409	INA	536	32
February	80,991	84,849	1,147	1,765	2,484	INA	607	35
March	81,115	85,468	1,132	1,746	2,461	INA	620	38
April	82,076	85,869	1,116	1,906	2,561	INA	626	37
May	83,581	86,721	1,111	2,044	2,571	INA	653	34
June	84,811	87,243	1,140	1,954	2,570	INA	652	33
Six-Month Average	86,797	89,484	1,058	1,892	3,029	INA	588	37
July	86,008	89,027	1,135	1,911	2,678	INA	665	35
August	86,550	89,958	1,124	1,827	2,836	INA	634	37
September	88,229	90,293	1,054	1,952	3,040	INA	586	37
October	87,563	90,347	1,033	1,958	3,030	INA	565	37
November	86,532	88,861	1,014	1,859	3,165	INA	546	37
December	85,897	88,420	988	1,842	3,423	INA	530	36

INA Information Not Available.

/1/ Other includes Dialysis and Total Parenteral Nutrition.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1996 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 1996.

MONTHLY MEDI-CAL USERS - TABLE 4

An average of 2,317,864 persons received Medi-Cal program benefits each month in 1996. Monthly users averaged 186,891 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 55 percent of eligibles receiving service each month.

The Public Assistance (PA) group, which accounted for 71.8 percent of the total annual average Medi-Cal users, had a utilization rate of 55 percent. There were an average of 151,852 fewer 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 64 percent. There were an average of 27,588 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 51 percent. These users averaged 9 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.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty groups combined accounted for 4 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 1.5 percent of the total annual users.

TABLE 4

MEDI-CAL PROGRAM
MONTHLY USERS BY PROGRAM
CALENDAR YEAR 1996

(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT PROGRAM
Annual Average 1996	2,317,864	1,665,035	318,802	115,277	73	88,053	3,636	6,014
Six-Month Average	2,411,310	1,740,961	332,596	120,166	79	86,960	4,444	5,618
January	2,461,188	1,791,244	333,129	124,023	107	81,549	5,235	5,145
February	2,360,244	1,714,924	322,436	115,838	70	81,765	4,633	5,100
March	2,484,041	1,795,515	340,893	123,758	78	89,053	4,971	5,618
April	2,362,167	1,706,709	331,721	114,528	78	85,188	4,249	5,537
May	2,351,344	1,689,891	327,698	118,293	80	87,649	3,937	5,975
June	2,448,874	1,747,485	339,701	124,553	60	96,555	3,637	6,331
Six-Month Average	2,224,419	1,589,109	305,008	110,389	67	89,146	2,829	6,410
July	2,130,815	1,525,472	297,147	105,584	59	84,233	2,890	5,422
August	2,364,576	1,682,075	328,469	119,145	78	96,625	3,075	6,580
September	2,179,842	1,549,279	297,705	108,958	83	96,624	2,756	5,993
October	2,178,002	1,566,524	295,710	105,387	64	84,788	2,873	6,404
November	2,159,961	1,544,729	295,861	105,896	57	84,948	2,647	6,499
December	2,333,317	1,666,573	315,153	117,365	60	87,657	2,733	7,564

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 1996	35,962	51,042	354	975	469	28,946	154	3,073
Six-Month Average	36,887	50,596	366	956	490	28,051	138	3,003
January	39,554	51,717	379	921	318	25,429	79	2,359
February	35,971	49,530	362	877	613	25,347	97	2,681
March	37,631	52,641	382	1,005	602	29,247	208	2,439
April	34,450	47,970	336	879	544	26,584	135	3,259
May	35,259	48,412	350	931	409	29,079	138	3,243
June	38,458	53,305	385	1,122	454	32,621	170	4,037
Six-Month Average	35,037	51,489	342	994	448	29,840	170	3,143
July	31,313	46,535	325	904	328	27,033	146	3,424
August	36,618	54,204	408	1,066	452	32,190	217	3,374
September	32,663	54,458	369	941	380	26,843	158	2,632
October	34,191	48,514	315	975	376	28,281	174	3,426
November	35,121	49,783	313	984	354	29,328	136	3,305
December	40,313	55,438	322	1,091	797	35,365	189	2,697

/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 1996 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.

An average of 2,317,864 persons received Medi-Cal program benefits each month in 1996. This was 2,808 fewer monthly users than in the prior year.

The total number of users per 1,000 eligibles increased 10.0 percent, from 500 in 1995 to 550 in 1996. 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 543 in 1996.

In 1996, the Public Assistance group, which accounted for 71.8 percent of total users, had a utilization rate of 55 percent. The Medically Needy group had the highest utilization rate of 64 percent.

The 1996 rates compared to the 1995 rates ran higher for each group except for the 200 Percent Poverty group.

Calendar Year 1996 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 1995 AND 1996

(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995	CALENDAR YEAR 1996	USERS PER 1,000 ELIGIBLES 1995	USERS PER 1,000 ELIGIBLES 1996	PERCENT CHANGE IN RATE
TOTAL	2,315,056	2,317,864	500	550	10.0 %
Public Assistance	1,680,639	1,665,035	498	554	11.2
Aged	220,705	221,066	646	679	5.1
Blind	16,692	16,361	702	719	2.4
Disabled	439,960	454,587	689	717	4.1
Families	1,003,283	973,021	423	482	13.9
Medically Needy	323,851	318,802	596	638	7.0
Aged	91,004	89,166	844	891	5.6
Blind	692	711	882	992	12.5
Disabled	43,075	44,496	891	990	11.1
Families	189,081	184,428	490	521	6.3
Medically Indigent	116,865	115,277	469	505	7.7
Adults	11,704	10,607	943	989	4.9
Children	105,161	104,670	444	482	8.6
IRCA Aliens	780	73	NA	NA	NA
OBRA Aliens	86,049	88,053	304	315	3.6
Refugee/Entrant	6,639	3,636	NA	NA	NA
100 Percent Poverty	3,578	6,014	229	250	9.2
133 Percent Poverty	29,302	35,962	390	425	9.0
185 Percent Poverty (renamed Income Disregard)	45,804	51,042	558	582	4.3
Infant	18,113	20,986	519	554	6.7
Pregnant Woman	27,692	30,056	587	603	2.7
200 Percent Poverty	498	354	395	323	(18.2)
Infant	112	93	599	612	2.2
Pregnant Woman	386	261	359	276	(23.1)
60-Day Postpartum	888	975	505	521	3.2
Dialysis	31	20	NA	NA	NA
Total Parenteral Nutrition	9	8	NA	NA	NA
Qualified Medicare Beneficiary	376	469	168	169	0.6
Presumptive Eligibility for Pregnant Women	16,625	28,946	INA	INA	INA
Medi-Cal Tuberculosis Program	64	154	170	256	50.6
Not Reported	3,058	3,045	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.

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 and 1996 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

PAYMENT PER ELIGIBLE

BY PROGRAM AND AID CATEGORY - TABLE 6

The average monthly payment per eligible was $204.89 in 1996. This represents an increase of $22.80 per eligible or 12.5 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 $203.98.

Relative cost increases exceeding the overall 12.5 percent were experienced by the Public Assistance Aged (up 14.7 percent) and Families (up 14.1 percent); Medically Needy Blind (up 12.7 percent) and Disabled (up 16.9 percent); 185 Percent Poverty (renamed Income Disregard) Infant (up 19.6 percent); and the Medi-Cal Tuberculosis Program (up 50.9 percent).

Public Assistance Families, which is a major expenditure group, had a relatively small increase in cost per eligible, up 14.1 percent to $86.91 per month in 1996.

Calendar Year 1996 data do not include payments for health care services handled by County Organized Health Systems (COHS) or Prepaid Health Plans (PHPs).

TABLE 6

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT PER ELIGIBLE BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995	CALENDAR YEAR 1996	CHANGE Number	CHANGE Percent
TOTAL	$ 182.09	$ 204.89	$ 22.80	12.5 %
Public Assistance	138.97	161.96	22.99	16.5
Aged	183.57	210.55	26.98	14.7
Blind	370.42	405.84	35.42	9.6
Disabled	339.70	367.34	27.64	8.1
Families	76.15	86.91	10.76	14.1
Medically Needy	471.92	519.48	47.56	10.1
Aged	1,164.13	1,244.10	79.97	6.9
Blind	1,198.03	1,349.67	151.64	12.7
Disabled	1,581.04	1,847.86	266.82	16.9
Families	138.12	144.04	5.92	4.3
Medically Indigent	124.41	132.55	8.14	6.5
Adults	644.59	685.28	40.69	6.3
Children	97.13	105.28	8.15	8.4
IRCA Aliens	2,822.34	1,133.60	(1,688.74)	(59.8)
OBRA Aliens	185.64	187.95	2.31	1.2
Refugee/Entrant	342.56	351.93	9.37	2.7
100 Percent Poverty	29.36	31.07	1.71	5.8
133 Percent Poverty	43.40	44.92	1.52	3.5
185 Percent Poverty (renamed Income Disregard)	235.93	254.92	18.99	8.0
Infant	108.44	129.74	21.30	19.6
Pregnant Woman	330.16	350.18	20.02	6.1
200 Percent Poverty	223.15	168.80	(54.35)	(24.4)
Infant	301.19	225.10	(76.09)	(25.3)
Pregnant Woman	209.35	159.75	(49.60)	(23.7)
60-Day Postpartum	89.98	70.65	(19.33)	(21.5)
Dialysis	3,396.36	524.52	(2,871.84)	(84.6)
Total Parenteral Nutrition	3,042.44	1,330.40	(1,712.04)	(56.3)
Qualified Medicare Beneficiary	52.19	49.04	(3.15)	(6.0)
Presumptive Eligibility for Pregnant Women	INA	INA	INA	INA
Medi-Cal Tuberculosis Program	16.44	24.80	8.36	50.9

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 and 1996 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 7

During 1996, the Medi-Cal program spent $372.63 per month per user of service. This was $8.22 or 2.3 percent more than in 1995.

The lowest monthly cost group was the Medi-Cal Tuberculosis program beneficiary at $96.94 per user, followed by the 133 Percent Poverty beneficiary at $105.64 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 $180.46 per user per month, while for Medically Needy (MN) Families it was $276.28. 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 1.3 percent from the previous year.

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

TABLE 7

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT PER USER BY PROGRAM AND AID CATEGORY
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1995	CALENDAR YEAR 1996	CHANGE Number	CHANGE Percent
TOTAL	$ 364.41	$ 372.63	$ 8.22	2.3
Public Assistance	278.99	292.11	13.12	4.7
Aged	284.01	310.05	26.04	9.2
Blind	527.34	564.65	37.31	7.1
Disabled	493.03	512.56	19.53	4.0
Families	179.90	180.46	0.56	0.3
Medically Needy	791.39	813.87	22.48	2.8
Aged	1,379.99	1,395.70	15.71	1.1
Blind	1,359.04	1,361.06	2.02	0.1
Disabled	1,774.61	1,867.42	92.81	5.2
Families	282.03	276.28	(5.75)	(2.0)
Medically Indigent	265.16	262.25	(2.91)	(1.1)
Adults	683.53	692.65	9.12	1.3
Children	218.60	218.64	0.04	0.0
IRCA Aliens	654.93	931.73	276.80	42.3
OBRA Aliens	609.97	596.13	(13.84)	(2.3)
Refugee/Entrant	291.38	281.95	(9.43)	(3.2)
100 Percent Poverty	128.08	124.15	(3.93)	(3.1)
133 Percent Poverty	111.21	105.64	(5.57)	(5.0)
185 Percent Poverty (renamed Income Disregard)	422.66	438.02	15.36	3.6
Infant	208.81	234.31	25.50	12.2
Pregnant Woman	562.53	580.25	17.72	3.2
200 Percent Poverty	564.59	523.10	(41.49)	(7.3)
Infant	502.88	367.90	(134.98)	(26.8)
Pregnant Woman	582.50	578.40	(4.10)	(0.7)
60-Day Postpartum	178.33	135.51	(42.82)	(24.0)
Dialysis	2,739.00	655.65	(2,083.35)	(76.1)
Total Parenteral Nutrition	3,042.44	1,663.00	(1,379.44)	(45.3)
Qualified Medicare Beneficiary	309.94	289.54	(20.40)	(6.6)
Presumptive Eligibility for Pregnant Women	129.23	131.84	2.61	2.0
Medi-Cal Tuberculosis Program	96.84	96.94	0.10	0.1
Not Reported	2,171.16	930.69	(1,240.47)	(57.1)

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.
The IRCA program expired December 31, 1994. IRCA is shown for 1995 and 1996 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 8

The most frequently used physician service is, of course, the outpatient visit. In 1996, the Medi-Cal average cost per physician outpatient visit was $23.06. Outpatient visits include office, emergency room, home, and other outpatient situations.

Physicians' hospital inpatient visits averaged $32.32 per visit. Visits for long-term care inpatients averaged $26.60 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, $578.40 per service in 1996.

The average cost per drug prescription was $27.51 in 1996, an increase of 10.7 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 1996 was $1,032.54 for Public Assistance Families and Medically Needy Families. Those groups accounted for 32.6 percent of total hospital inpatient expenditures in 1996 and were used in Table 8 so that most Medicare/Medi-Cal crossover data could be excluded. Costs include ancillaries as well as accommodations.

In 1996, the average cost per day of care was $80.53 for nursing facilities and $109.76 for intermediate care facilities-developmentally disabled.

TABLE 8

MEDI-CAL PROGRAM
AVERAGE COST PER SERVICE FOR SELECTED SERVICES
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

TYPE OF SERVICE	CALENDAR YEAR 1995	CALENDAR YEAR 1996	PERCENT CHANGE
Physicians Services/1/			
Outpatient Visits	$ 23.29	$ 23.06	(1.0) %
Hospital Inpatient Visits	32.46	32.32	(0.4)
Critical Care Visits	85.96	87.39	1.7
Long-Term Care Visits	26.26	26.60	1.3
Ophthalmological Examinations	33.84	33.57	(0.8)
Inpatient Hospital Surgery	586.66	578.40	(1.4)
Outpatient Surgery	108.16	93.22	(13.8)
Psychiatry	26.24	27.27	3.9
Immunization and Injection	11.69	12.45	6.5
Drug Prescriptions	24.84	27.51	10.7
Hospital Inpatient Day/2/	1,016.11	1,032.54	1.6
Nursing Facility Day	79.43	80.53	1.4
Intermediate Care Facility-DD Day	107.87	109.76	1.8

/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.

Note: FFS = Fee-For-Service.
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 9

In 1996, provider payments averaged $863.7 million per month, up $20 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 increased 0.9 percent over the prior year to $202.9 million per month.

Nursing Facilities was the second highest paid provider group. Their payments increased 0.9 percent from 1995 to $167.6 million per month.

Physicians received $86.9 million per month in 1996, up 1.0 percent from the prior year.

Payments to County Hospitals averaged $67.9 million per month during 1996, down 14.4 percent from the prior year.

All of the provider types showed an increase in 1996, except Optometrist, County Hospital, Community Hospital Outpatient, State Hospital and Rehabiliation Facility, which showed decreases of 6.7, 14.4, 1.4, 3.4, and 6.1 percent respectively.

TABLE 9

MEDI-CAL PROGRAM
AVERAGE MONTHLY PAYMENT BY TYPE OF PROVIDER
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

TYPE OF PROVIDER	CALENDAR YEAR 1995	CALENDAR YEAR 1996	CHANGE	
			Number	Percent
TOTAL	$843,640,043	$863,703,169	$20,063,126	2.4 %
Physician	86,067,592	86,913,964	846,372	1.0
Pharmacy	108,250,083	118,741,083	10,491,000	9.7
Dentist	51,909,776	52,482,410	572,634	1.1
Optometrist	4,456,220	4,157,402	(298,818)	(6.7)
Chiropractor	48,267	50,160	1,893	3.9
Podiatrist	1,432,393	1,907,567	475,174	33.2
County Hospital	79,335,232	67,913,487	(11,421,745)	(14.4)
Inpatient	64,474,831	55,569,795	(8,905,036)	(13.8)
Outpatient	14,860,401	12,343,692	(2,516,709)	(16.9)
Community Hospital	201,103,537	202,883,026	1,779,489	0.9
Inpatient	177,671,851	179,775,079	2,103,228	1.2
Outpatient	23,431,685	23,107,948	(323,737)	(1.4)
State Hospital	44,964,549	43,425,300	(1,539,249)	(3.4)
Nursing Facility	166,157,378	167,607,834	1,450,456	0.9
Intermediate Care Facility-DD	17,651,702	19,785,407	2,133,705	12.1
Home Health Agency	2,275,594	3,278,336	1,002,742	44.1
Laboratory Facility	12,036,813	15,873,940	3,837,127	31.9
Medical Transportation	6,935,764	7,218,575	282,811	4.1
Rehabilitation Facility	593,673	557,328	(36,345)	(6.1)
Organized Outpatient Clinic	23,466,334	27,823,053	4,356,719	18.6
All Other Providers	36,955,137	43,084,297	6,129,160	16.6

Note: FFS = Fee-For-Service.
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 10

The average monthly cost per eligible was $204.89 in 1996.

Community Hospitals was the largest expenditure category and had the highest cost per eligible per month at $48.13, up 10.9 percent from 1995.

Cost per eligible in the second largest expenditure category, Nursing Facilities, was $39.76, an increase of 10.9 percent from 1995.

Pharmacies was the third largest expenditure category and its monthly cost per eligible of $28.17 reflected an increase of 20.6 percent from 1995.

Payments to Physicians cost $20.62 per eligible per month, an 11.0 percent increase from 1995.

County Hospitals was the fourth largest expenditure category and its monthly cost per eligible of $16.11 reflected a decrease of 5.9 percent from 1995.

TABLE 10

MEDI-CAL PROGRAM
AVERAGE MONTHLY COST PER ELIGIBLE BY TYPE OF PROVIDER
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

TYPE OF PROVIDER	CALENDAR YEAR 1995	CALENDAR YEAR 1996	PERCENT CHANGE
TOTAL	$182.09	$204.89	12.5 %
Physician	18.58	20.62	11.0
Pharmacy	23.36	28.17	20.6
Dentist	11.20	12.45	11.2
Optometrist	0.96	0.99	3.1
Chiropractor	0.01	0.01	0.0
Podiatrist	0.31	0.45	45.2
County Hospital	17.12	16.11	-5.9
Inpatient	13.92	13.18	-5.3
Outpatient	3.21	2.93	-8.7
Community Hospital	43.41	48.13	10.9
Inpatient	38.35	42.65	11.2
Outpatient	5.06	5.48	8.3
State Hospital	9.70	10.30	6.2
Nursing Facility	35.86	39.76	10.9
Intermediate Care Facility-DD	3.81	4.69	23.1
Home Health Agency	0.49	0.78	59.2
Laboratory Facility	2.60	3.77	45.0
Medical Transportation	1.50	1.71	14.0
Rehabilitation Facility	0.13	0.13	0.0
Organized Outpatient Clinic	5.06	6.60	30.4
All Other Providers	7.98	10.22	28.1

Note: FFS = Fee-For-Service.

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. (Tables 1 and 9.)

COST PER USER BY PROVIDER TYPE - TABLE 11

In 1996, the average monthly cost per recipient was $372.63.

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 $8,996.33 per month, up 6.5 percent from 1995; County Hospital Inpatient services showed the cost per user at $5,396.17, down 6.6 percent from 1995; and Community Hospital Inpatient services showed the lowest cost per user at $3,580.61, down 14.5 percent from 1995.

Home Health Agency showed the largest cost increase from a year ago, up 28.6 percent per recipient.

TABLE 11

MEDI-CAL PROGRAM
AVERAGE MONTHLY COST PER USER BY TYPE OF PROVIDER
CALENDAR YEARS 1995 AND 1996

(FFS ONLY)

TYPE OF PROVIDER	CALENDAR YEAR 1995	CALENDAR YEAR 1996	PERCENT CHANGE
TOTAL	$ 364.41	$ 372.63	2.3 %
Physician	85.70	87.93	2.6
Pharmacy	82.70	92.45	11.8
Dentist	200.36	182.82	-8.8
Optometrist	67.53	63.17	-6.5
Chiropractor	14.04	14.67	4.5
Podiatrist	49.65	58.94	18.7
County Hospital	707.13	692.01	-2.1
Inpatient	5,776.28	5,396.17	-6.6
Outpatient	141.56	135.33	-4.4
Community Hospital	629.41	629.42	0.0
Inpatient	4,188.60	3,580.61	-14.5
Outpatient	80.70	80.60	-0.1
State Hospital	8,444.05	8,996.33	6.5
Nursing Facility	2,361.87	2,430.65	2.9
Intermediate Care Facility-DD	3,424.85	3,552.14	3.7
Home Health Agency	262.10	337.07	28.6
Laboratory Facility	55.59	70.14	26.2
Medical Transportation	207.27	208.89	0.8
Rehabilitation Facility	140.08	112.71	-19.5
Organized Outpatient Clinic	124.17	131.45	5.9

Note: FFS = 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 12

Table 12 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 $16.39 billion for Fiscal Year (FY) 1995-96, a decrease of 0.5 percent from FY 1994-95.

The $10.7 billion in direct fee-for-service provider payments was an increase of 10.5 percent. These expenditures accounted for 65 percent of the total expenditures in FY 1995-96 and 59 percent in the FY 1994-95.

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 1995-96, the approximate number of Medi-Cal eligibles covered by DD was 4.97 million persons per month. Capitation payments totaled $559.2 million, down 21.8 percent from FY 1994-95.

Prepaid Health Plan (PHP) capitations decreased 0.6 percent to $638.7 million in FY 1995-96.

There were five County Organized Health Systems (COHS) in effect during FY 1995-96. Santa Barbara Health Initiative was effective September 1, 1983, Health Plan of San Mateo was effective December 1, 1987, Solano Partnership HealthPlan was effective May 1, 1994, Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995 and Santa Cruz County Health Options was effective January 1, 1996. Payments to COHS totaled $448.9 million.

Expenditures for Early Periodic Screening Services decreased 24.8 percent to $74.9 million in FY 1995-96. 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 $345.1 million expenditure in FY 1995-96 reflects an increase of 39.2 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 $640.3 million in FY 1995-96.

Administration costs include various State Departmental expenditures, payments for claims processing operations, and county administrative expenses. In FY 1995-96, these expenditures increased 7.3 percent from the prior fiscal year. Administration costs accounted for 5.2 percent of total expenditures in FY 1995-96 and 4.8 percent of total expenditures in 1994-95.

TABLE 12

TOTAL MEDI-CAL PROGRAM EXPENDITURES
BY TYPE OF EXPENDITURE AND SOURCE OF FUNDS
FISCAL YEARS 1994-95 AND 1995-96

TYPE OF EXPENDITURE	FISCAL YEAR 1994-95	FISCAL YEAR 1995-96	PERCENT CHANGE
TOTAL	$16,474,086,700	$16,388,392,300	(0.5) %
Provider Payments, Fee-For-Service	9,694,481,700	10,712,916,500	10.5
Dental	714,667,000	559,198,200	(21.8)
Prepaid Health Plans	642,404,500	638,719,600	(0.6)
County Organized Health Systems	241,007,700	448,855,100	86.2
Primary Care Case Management/ Other Managed Care	198,285,500	243,639,200	22.9
Early Periodic Screening Services	99,539,600	74,863,100	(24.8)
Miscellaneous Non-Fee-For-Service	565,398,000	718,385,600	27.1
Short-Doyle/Medi-Cal	247,918,600	345,051,900	39.2
Medicare Buy-In	559,570,900	640,251,100	14.4
Audits and Lawsuits	3,033,900	1,695,900	(44.1)
Disproportionate Share Hospital (SB 855)	2,858,252,300	1,327,294,000	(53.6)
Recoveries	(146,550,300)	(176,621,900)	20.5
Administration	796,077,300	854,144,000	7.3

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

Source: State of California, Department of Health Services, Medi-Cal Accounting Records.

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SECTION 4

MEDI-CAL PROVIDER PARTICIPATION

SECTION 4

MEDI-CAL PROVIDER PARTICIPATION

Table 13 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 23 and Table 24. The physician and hospital counts of Table 23 differ from Table 13 due to a different billing period used in Table 23.

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 23 shows 674 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 13
MEDI-CAL PROGRAM
NUMBER OF PROVIDERS RECEIVING MEDI-CAL PROGRAM PAYMENTS
BY SELECTED TYPE OF PROVIDER AND AMOUNT PAID
CALENDAR YEAR 1996

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	748	150	371	192	25	10	0
Adult Day Health Care Centers	85	1	0	6	6	70	2
Audiologists	300	40	116	95	31	18	0
Birthing Centers	5	0	1	3	1	0	0
Blood Banks	5	0	2	3	0	0	0
Certified Hospice Service	43	0	6	16	11	9	1
Chiropractors	576	387	182	6	1	0	0
Community Hemodialysis Center	267	4	12	21	34	179	17
Dentists	9,314	1,701	2,975	2,224	962	1,383	69
Family Nurse Practitioner	18	6	2	7	0	3	0
General Hospitals	1,521	199	587	188	40	174	333
Hearing Aid Dispensers	310	25	141	104	27	13	0
Heroin Detoxification	64	3	21	29	8	3	0
Home Health Agencies	615	63	194	170	74	110	4
In-Home Medical Care	39	3	5	2	10	17	2
Independent Rehabilitation Facility	103	4	16	55	23	5	0
Intermediate Care Facilities-DD/1/	802	2	2	20	26	724	28
Laboratory Facilities	579	107	151	95	48	140	38
Local Education Agencies	202	3	44	81	25	47	2
Medical Transportation	597	64	141	139	62	177	14
Mental Hospitals	3	0	0	0	0	1	2
Nurse Anesthetists	76	22	41	10	2	1	0
Nurse Midwives	195	20	38	29	19	79	10
Nursing Facilities	1,370	0	38	50	35	419	828
Occupational Therapists	43	19	19	4	1	0	0
Opticians	423	76	193	125	17	9	3
Optometrists	2,184	309	883	723	172	97	0
Organized Outpatient Clinics	404	42	73	103	64	119	3
Orthotists	49	6	13	18	4	7	1
Pharmacies	6,144	731	745	1,017	739	2,679	233
Physical Therapists	167	100	57	10	0	0	0
Physicians	29,525	7,097	11,207	6,676	2,067	2,411	67
Podiatrists	1,141	352	479	221	52	35	2
Portable X-Ray Laboratory	39	15	14	5	2	3	0
Prosthetists	173	21	39	65	26	22	0
Psychologists	2,096	620	963	399	79	35	0
Rural Health Clinics	444	11	11	24	38	286	74
Speech Therapists	175	28	86	36	16	9	0
Surgicenter	151	19	47	51	20	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 1996.

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SECTION 5

MEDI-CAL CAPITATED HEALTH SYSTEMS

PREPAID HEALTH PLAN ENROLLMENT - TABLE 14

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 enrollees 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 average of 764,694 Medi-Cal eligibles were enrolled in Prepaid Health Plans (PHPs) each month of 1996. The enrollment increased 26.6 percent from the 604,213 persons enrolled in the prior year.

During 1996, $866.0 million in capitation payments were made to Prepaid Health Plans by the Medi-Cal program. This was $160.2 million (or 22.7 percent) more than was paid in the prior year.

Los Angeles County was the major county accounting for 362,014 of the 764,694 enrollees in 1996. Capitation payments were up $26.7 million from the $419.8 million paid by the Medi-Cal program during Calendar Year 1995. Los Angeles County enrollees accounted for 47.3 percent of the total enrollment and 51.6 percent of the total capitation payments.

Sacramento County, with a monthly average of 113,723 enrollees in 1996, was the only other county with at least 10 percent of the total enrollment. Sacramento County capitation payments for enrollees accounted for $104.6 million (up $23.6 million from the prior year) or 12.1 percent of the total capitation payments.

In 1996, eighty-eight percent of all monthly PHP enrollees and ninety-nine percent of the total capitation payments were distributed to Los Angeles County and the combined Counties of Sacramento, San Bernardino, San Diego, Riverside, and San Joaquin.

During 1996, Medi-Cal had contracts with PHPs in 16 counties.

TABLE 14

MEDI-CAL PROGRAM
AVERAGE MONTHLY PREPAID HEALTH PLAN ENROLLEES
AND TOTAL CAPITATION PAYMENTS BY COUNTY
CALENDAR YEAR 1996

(PHPs ONLY)

COUNTY	AVERAGE MONTHLY ENROLLEES	TOTAL CAPITATION PAYMENTS/1/
TOTAL	764,694	$865,951,695
Alameda	43,421	47,476,471
Contra Costa	15,513	19,988,631
Fresno	1,234	1,045,524
Kern	17,320	15,728,440
Los Angeles	362,014	446,479,959
Marin	249	310,611
Orange	247	510,397
Riverside	26,190	31,823,368
Sacramento	113,723	104,631,985
San Bernardino	60,700	65,506,618
San Diego	72,580	74,892,267
San Francisco	9,008	20,468,596
San Joaquin	34,648	28,625,433
Santa Clara	4,587	5,307,784
Sonoma	416	513,537
Yolo	2,843	2,642,074

/1/ Does not show Medicare recovery, excess risk liability payments, adjustments for enrollees with AIDS, or retroactive capitation rate adjustments. For Fiscal Year 1995-96, excess risk liability payments totaled approximately $4.8 million and adjustments for enrollees with AIDS totaled approximately $1.6 million.

Note: PHPs = Prepaid Health Plans.
Figures are rounded independently and may not add to totals.

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

COUNTY ORGANIZED HEALTH SYSTEMS - TABLE 15

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 estimated eligibles and estimated payments shown in this report are obtained from the Rate Sheet for Managed Care Plans and the Medi-Cal Eligibility Data System Summary File.

County Organized Health Systems currently exist in five counties (Orange, San Mateo, Santa Barbara, Santa Cruz and Solano Counties).

An average of 398,493 Medi-Cal eligibles were enrolled in County Organized Health Systems (COHS) each month of 1996. The enrollment increased 116.7 percent from the average of 183,884 persons eligible each month in 1995. This sharp increase is due to the expansion of County Organized Health Systems.

During 1996, $667.5 million in capitation payments were made to County Organized Health Systems by the Medi-Cal program. This was $363.9 million or 119.8 percent more than the $303.6 million paid in 1995. This large increase is due to the expansion of County Organized Health Systems.

The Santa Barbara Health Initiative (SBHI) was effective September 1, 1983. A total of $84.1 million in capitation payments were made for an average of 41,906 monthly eligibles during 1996.

The Health Plan of San Mateo (HPSM) was effective December 1, 1987. A total of $83.1 million in capitation payments were made for an average of 50,102 monthly eligibles during 1996.

The Solano Partnership HealthPlan (SPH) was effective May 1, 1994. A total of $102.1 million in capitation payments were made for an average of 45,692 monthly eligibles during 1996.

The Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995. A total of $348.3 million in capitation payments were made for an average of 235,847 monthly eligibles.

The Santa Cruz County Health Options (SCCHO) was effective January 1, 1996. A total of $49.8 million in capitation payments were made for an average of 24,946 monthly eligibles during 1996.

TABLE 15

MEDI-CAL PROGRAM
ESTIMATED AVERAGE MONTHLY COUNTY ORGANIZED HEALTH SYSTEMS
ELIGIBLES AND TOTAL CAPITATION PAYMENTS BY COUNTY
CALENDAR YEAR 1996

(COHS ONLY)

COUNTY	ESTIMATED AVERAGE MONTHLY ELIGIBLES	ESTIMATED TOTAL CAPITATION PAYMENTS
TOTAL	398,493	$667,481,814
Orange	235,847	348,292,486
San Mateo	50,102	83,118,795
Santa Barbara	41,906	84,126,666
Santa Cruz	24,946	49,842,242
Solano	45,692	102,101,625

Note: COHS = County Organized Health Systems.
Figures may differ from previously published reports.
Capitation payments do not include excess risk liability payments, adjustments for enrollees with AIDS, or retroactive capitation rate adjustments made after June 1997. For Fiscal Year 1995-96, excess risk liability payments totaled approximately $1.0 million and adjustments for enrollees with AIDS totaled approximately $0.9 million.

Source: State of California, Department of Health Services, Rate Sheet for Managed Care Plans and MEDSSUM File dated April 1997.

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

Estimated capitation payments do not include payments made to County Organized Health Systems for excess risk liability 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 the 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 drug services; all Medi-Cal mental health services except outpatient, laboratory and pharmacy; 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, OA, 3A, 3C, 3G, 3H.
Child: 03, 04, 45, 82, 83, 4C, 4K, 5K
Adult: 81, 86, 87
Long Term Care: 13, 23, 53, 63
IRCA/OBRA: 55, 58, 5F, 5G, 5N

Estimated capitation payments do not include payments made to County Organized Health Systems for AIDs and excess risk liability 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.)

Estimated capitation payments do not include payments made to County Organized Health Systems for AIDs and excess risk liability 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; Dental services, as defined in Title 22, Califronia Code of Regulations (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; Services rendered in a State or federal hospital; fabrication of optical lenses.

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, OA, 3A, 3C, 3G, 3H
Child: 03, 04, 45, 82, 83, 4C, 4K, 5K
Adult: 81, 86, 87
Long Term Care: 13, 23, 53, 63
IRCA/OBRA: 55, 58, 5F

Estimated capitation payments do not include payments made to County Organized Health Systems for excess risk liability claims.

NOTE

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

SANTA CRUZ COUNTY HEALTH OPTIONS (SCCHO)

The Santa Cruz County Health Options (SCCHO) is a Medi-Cal County Organized Health System administered by the Santa Cruz Managed Medical Care Commission doing business as Santa Cruz County Health Options under direct contract with the State. The program provides health care on a managed care basis.

All services within the scope of the Medi-Cal program are provided through and must be authorized by SCCHO with the following exceptions: Services authorized by the California Children Services (CCS) program, for diagnosis and treatment of the CCS eligible condition of the specific member; dental services; mental health services, including psychiatric inpatient services and outpatient mental health services provided by mental health professionals; alcohol and drug treatment services available under the Short-Doyle/Medi-Cal program, and outpatient heroin detoxification; services rendered under the Adult Day Health Programs; services rendered under the Multipurpose Senior Services Program; home and community-based care waivered services; Local Education Authority (LEA) services when provided pursuant to an Individual Education Plan or Individual Family Services Plan; LEA assessment services for eligible students; services rendered in a State or federal hospital; laboratory services provided under the State serum alphafeto protein testing program administered by the Genetic Disease Branch of the Department of Health Services; optical lenses and services provided by the Prison Industries Authority State contract; and Targeted Case Management services.

SCCHO serves all Medi-Cal recipients and Medicare/Medi-Cal eligible recipients who have Medi-Cal Identification numbers with County Code 44 (Santa Cruz County) and eligibility under one of the following aid codes:

Category	Aid Codes
Adult	81, 86, 87
Aged	10, 14, 16, 17, 18
Child	03, 04, 45, 82, 83, 4C, 4K, 5K
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, 40, 42, 54, 59, 3A, 3C, 3P, 3R
Long Term Care	13, 23, 53, 63

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

NOTE

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

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 16 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 68,310 persons (55,708 aged and 12,603 disabled). The monthly premium averaged $21.8 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.

In 1996, Medi-Cal paid the Medicare Part B enrollment premium for an average of 442,846 aged persons each month. The monthly premium averaged $20.1 million.

Medi-Cal paid the monthly Medicare Part B enrollment premium for 305,927 disabled persons with premiums averaging $13.4 million per month. The Disabled category includes persons in the Disabled or Blind aid categories.

TABLE 16

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 1996

ELIGIBILITY CATEGORY	PART A		PART B/1/	
	ELIGIBLES	PREMIUM	ELIGIBLES	PREMIUM
TOTAL	68,310	$21,813,224	748,773	$33,572,965
Aged	55,708	INA	442,846	20,143,779
Disabled	12,603	INA	305,927	13,429,186

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.

SECTION 7

COUNTY DATA

SECTION 7

COUNTY DATA

Table 17 shows the number of Medi-Cal eligibles, including Fee-For-Service (FFS), County Organized Health Systems (COHS), and Prepaid Health Plans (PHPs), by age group and sex, in October 1996.

Males comprise 41 percent of the Medi-Cal eligibles. Most males (67 percent) are under age 21, 23 percent are of ages 21 to 64, and 10 percent are 65 and older.

Fifty-nine percent of eligibles are females. Most females are under age 21 (48 percent), 38 percent are of ages 21 to 64, and 13 percent are 65 and older.

Table 18 shows the average monthly number of persons eligible for Medi-Cal in each county by program and aid category, excluding COHS and PHPs.

Los Angeles County accounted for 35 percent of the FFS eligibles.

Table 19 reports average monthly number of users by program and aid category, excluding COHS and PHPs. Division of Table 19 by Table 18 will give proportion of eligibles using Medi-Cal services, or the utilization rate.

Los Angeles County accounted for 36 percent of the users. Its utilization rate of 56.4 percent was 1.4 percentage points higher than the statewide average of 55.0 percent.

Table 20 is a companion to the two preceding tables. Cost per user can be obtained by dividing Table 20 by Table 19, while division by Table 18 gives cost per eligible.

Los Angeles County accounted for 36.3 percent of the statewide total expenditures. The County's annual cost per user was $4,534, which was 1.4 percent higher than the unadjusted statewide average and 1.8 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 $2,558, which was 4.0 percent higher than the unadjusted statewide average and 3.8 percent higher than the adjusted statewide average.

Table 21 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 18.

For example, the statewide utilization rate for physician services was 23 percent, or 23 out of every 100 eligibles used this service each month. The Los Angeles County utilization rate for physician services was 29 percent.

Table 22 is a companion to Table 21. 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 $1,091.49, which was 3.4 percent higher than the statewide average of $1,055.10.

It can be noted from Table 22 that physician services accounted for 10.1 percent of total expenditures statewide and 12.2 percent of expenditures in Los Angeles County. Such comparisons can be made for each type of provider.

Table 23 shows the number of physicians and hospitals receiving payments from the Medi-Cal program during the July-September 1996 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. 18 percent of the physicians were general practice/family practice physicians, 12 percent specialized in internal medicine, 8 percent specialized in obstetrics/gynecology, and 6 percent were pediatric specialists.

Table 24 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 237 Medi-Cal eligibles and an estimated 1,190 county population in 1996. Other types of services may be obtained through providers in surrounding counties.

Table 25 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 29.0 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 5.3 percent of the eligibles.

Table 26 shows the number of persons certified eligible for Medi-Cal (including FFS, COHS, and PHPs) by county and race/ethnicity in October 1996.

Of the 5,359,001 persons certified eligible for Medi-Cal in October 1996, 2,056,162 were Hispanic; 1,597,819 were White; 734,936 were Black; and 970,084 were of Other and Not Reported race/ethnicities.

In terms of percentages, 38.4 percent of the Medi-Cal eligibles were Hispanic, 29.8 percent White, 13.7 percent Black, 8.0 percent Asian/Pacific Islander, 0.4 percent American Indian/Alaskan Native, and 9.6 percent Not Reported/race ethnicities.

Table 27 shows the number of providers by provider type and status. As of December 31, 1996, there were 80,071 providers with Active Status, 225,340 providers with Inactive Status, 141 providers with Pending Status, 3,661 providers with Deceased Status, 1 provider with Rejected Status, 1,810 providers with Suspended Status, 51,351 providers with Indirect Status, and 285 providers with Contract Status.

> Please Note: The paid claims data on Tables 19-25 (Users and Payments) are understated for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz and Solano Counties due to the fact that not all covered services are reimbursed on a per claim basis.

TABLE 17

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 1996

(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	5,359,001	3,005,218	222,626	214,032	208,361	204,846	200,984	196,240	181,453	163,866	152,342	140,531
Alameda	200,048	102,137	6,409	6,675	6,600	6,677	6,657	6,525	6,138	5,728	5,513	4,912
Alpine	246	150	7	9	8	3	12	8	9	14	16	6
Amador	2,610	1,312	106	72	72	77	77	73	70	78	66	75
Butte	42,775	22,723	1,362	1,347	1,351	1,371	1,397	1,377	1,373	1,345	1,250	1,142
Calaveras	5,020	2,638	122	139	132	147	133	164	174	166	140	165
Colusa	3,312	1,943	159	156	136	140	126	126	89	95	84	100
Contra Costa	93,074	48,675	3,453	3,180	3,043	3,060	3,003	3,102	3,029	2,850	2,511	2,425
Del Norte	6,816	3,564	180	201	183	213	195	239	209	188	196	192
El Dorado	12,746	6,579	452	416	406	372	388	421	404	344	352	342
Fresno	210,259	126,519	8,341	8,073	8,251	8,425	8,255	8,270	7,616	6,988	6,541	6,292
Glenn	5,534	3,214	212	199	192	204	218	198	166	195	188	156
Humboldt	23,601	11,641	695	693	694	641	639	730	702	687	621	596
Imperial	39,947	21,143	1,189	1,200	1,158	1,242	1,281	1,233	1,235	1,150	1,082	1,038
Inyo	2,806	1,456	107	123	86	87	92	89	82	77	59	72
Kern	147,349	86,655	5,900	5,856	6,075	5,829	5,850	5,782	5,242	4,761	4,515	4,121
Kings	25,032	15,095	1,158	1,004	954	1,018	998	967	883	764	743	705
Lake	13,458	6,500	337	373	380	334	375	395	416	398	376	332
Lassen	4,884	2,635	154	168	158	148	171	177	143	159	138	148
Los Angeles	1,831,953	1,055,172	78,902	80,863	77,629	75,840	74,288	71,628	65,158	56,877	52,126	47,904
Madera	27,575	16,242	1,287	1,211	1,090	1,097	1,005	1,053	988	859	804	720
Marin	13,200	5,739	497	405	372	385	383	346	319	304	274	219
Mariposa	2,159	1,165	55	62	56	67	64	61	78	64	59	71
Mendocino	17,397	8,999	616	570	529	498	518	556	522	481	487	406
Merced	63,319	38,345	2,089	2,498	2,402	2,467	2,427	2,428	2,344	2,100	2,073	1,913
Modoc	2,467	1,318	64	82	77	84	71	84	82	58	61	86
Mono	827	496	43	40	35	26	31	38	26	28	28	26
Monterey	52,400	30,639	2,950	2,468	2,142	2,283	2,113	1,924	1,743	1,501	1,473	1,237
Napa	11,007	5,666	498	425	364	390	365	376	324	284	284	260
Nevada	7,613	3,738	264	240	245	191	211	221	220	205	193	193
Orange	280,059	158,981	16,231	12,918	12,232	11,368	11,089	10,322	9,104	7,910	7,292	6,511

TABLE 17 (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 1996

(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	17,850	8,834	636	529	544	568	574	596	555	487	447	444
Plumas	2,889	1,436	85	75	83	90	83	80	79	80	76	85
Riverside	217,110	129,956	10,176	9,210	9,342	8,815	8,619	8,323	7,991	7,355	6,761	6,178
Sacramento	239,115	133,395	8,219	8,460	8,368	8,889	8,657	8,376	8,020	7,627	7,230	6,811
San Benito	5,878	3,474	319	277	235	221	229	186	191	180	154	148
San Bernardino	316,388	191,500	13,522	13,395	13,514	13,102	12,823	12,636	11,942	11,058	10,308	9,560
San Diego	351,434	193,632	14,316	13,452	13,546	13,170	12,957	12,978	12,105	11,096	10,316	9,221
San Francisco	116,451	41,308	3,015	2,565	2,655	2,526	2,551	2,391	2,234	2,164	1,895	1,870
San Joaquin	123,048	70,064	4,293	4,448	4,271	4,277	4,295	4,338	4,080	3,947	3,731	3,604
San Luis Obispo	23,894	12,256	949	842	761	761	736	777	732	704	655	580
San Mateo	53,084	25,791	2,555	2,041	1,872	1,821	1,799	1,654	1,444	1,337	1,209	1,051
Santa Barbara	48,595	28,040	2,759	2,099	2,018	1,962	1,910	1,894	1,697	1,424	1,370	1,174
Santa Clara	181,184	91,268	6,783	6,051	5,998	6,064	5,636	5,513	4,971	4,482	4,362	3,934
Santa Cruz	26,877	14,146	1,384	1,023	930	963	890	843	723	687	631	594
Shasta	35,655	18,275	1,094	1,135	996	1,069	1,075	1,100	1,094	1,050	977	874
Sierra	425	174	8	11	4	10	13	6	9	9	10	10
Siskiyou	9,533	4,768	244	248	255	242	256	263	274	273	243	254
Solano	47,058	25,703	1,835	1,746	1,706	1,656	1,611	1,630	1,580	1,499	1,320	1,187
Sonoma	41,449	20,470	1,717	1,403	1,341	1,290	1,271	1,198	1,216	1,123	984	972
Stanislaus	94,031	52,320	3,521	3,453	3,251	3,175	3,190	3,247	3,041	2,864	2,768	2,569
Sutter	13,053	7,013	493	457	464	462	466	453	452	372	346	315
Tehama	11,392	6,246	401	378	410	392	366	401	356	336	342	317
Trinity	2,496	1,209	84	45	49	58	57	71	69	73	67	71
Tulare	104,321	62,175	4,366	4,135	3,966	4,027	3,893	3,932	3,661	3,276	3,175	3,007
Tuolumne	6,713	3,370	187	181	181	190	188	191	197	198	187	175
Ventura	76,478	43,250	4,253	3,244	3,035	2,926	2,873	2,778	2,472	2,132	1,959	1,907
Yolo	24,148	13,124	974	816	843	811	851	814	734	708	710	672
Yuba	18,959	10,942	599	647	671	625	683	658	646	667	564	582

TABLE 17 (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 1996

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	132,470	126,215	118,596	111,985	109,786	106,290	101,832	94,769	78,272	70,065	69,657
Alameda	4,495	4,344	4,255	3,970	3,933	3,930	3,787	3,655	2,874	2,564	2,496
Alpine	8	7	6	7	5	5	6	6	3	3	2
Amador	65	64	62	54	52	50	53	44	40	32	30
Butte	1,133	1,127	1,046	966	962	872	790	719	622	583	588
Calaveras	148	123	125	131	109	108	110	104	76	61	61
Colusa	80	81	81	54	75	72	79	50	61	62	37
Contra Costa	2,265	2,190	2,025	1,903	1,889	1,720	1,709	1,623	1,321	1,183	1,191
Del Norte	179	175	195	173	165	142	152	127	79	96	85
El Dorado	326	323	297	279	254	255	205	237	173	178	155
Fresno	6,028	5,792	5,363	5,205	5,021	4,967	4,526	3,923	3,223	2,731	2,688
Glenn	179	159	141	155	119	123	112	89	79	65	65
Humboldt	568	571	503	501	499	484	444	423	329	311	310
Imperial	932	1,003	962	902	937	978	919	816	719	625	542
Inyo	68	48	59	57	62	52	55	64	41	38	38
Kern	4,006	3,652	3,650	3,326	3,152	2,936	2,801	2,577	2,335	2,208	2,081
Kings	661	657	600	564	558	542	524	497	419	454	425
Lake	345	336	312	294	271	286	245	215	172	155	153
Lassen	117	125	116	109	101	96	107	97	76	59	68
Los Angeles	44,924	42,396	38,605	36,765	36,050	35,381	34,654	32,386	27,055	23,130	22,611
Madera	666	665	616	602	556	545	526	564	460	470	458
Marin	235	232	233	229	222	221	189	198	172	162	142
Mariposa	57	46	59	72	58	63	51	38	31	20	33
Mendocino	443	422	421	371	339	359	368	304	269	268	252
Merced	1,767	1,778	1,754	1,592	1,544	1,485	1,328	1,224	1,107	1,011	1,014
Modoc	72	73	61	57	61	58	54	31	37	35	30
Mono	29	18	17	17	10	20	11	17	14	12	10
Monterey	1,232	1,216	1,104	1,005	996	1,009	958	994	776	773	742
Napa	242	230	218	211	208	176	186	183	145	147	150
Nevada	192	169	153	148	176	137	160	127	98	101	94
Orange	6,162	5,953	5,733	5,273	5,218	4,788	4,684	4,465	3,967	3,794	3,967

TABLE 17 (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 1996

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	423	375	360	333	378	334	313	317	239	188	194
Plumas	76	84	70	60	57	50	51	58	42	35	37
Riverside	5,910	5,512	5,197	4,770	4,459	4,402	4,311	3,906	3,091	2,825	2,803
Sacramento	6,412	6,194	5,768	5,469	5,409	5,183	4,671	4,298	3,350	2,881	3,103
San Benito	139	122	125	111	123	119	119	141	125	120	90
San Bernardino	8,721	8,218	7,637	7,189	7,050	6,556	6,226	5,644	4,239	4,059	4,101
San Diego	8,538	8,144	7,715	7,347	7,168	6,882	6,440	5,744	4,309	4,030	4,158
San Francisco	1,756	1,640	1,674	1,623	1,605	1,668	1,668	1,718	1,467	1,273	1,350
San Joaquin	3,387	3,254	3,224	2,949	2,935	2,879	2,550	2,249	1,951	1,789	1,613
San Luis Obispo	547	552	515	482	463	443	458	383	298	318	300
San Mateo	989	936	849	802	832	765	830	872	743	681	709
Santa Barbara	1,083	1,051	1,007	933	902	921	902	829	735	685	685
Santa Clara	3,787	3,766	3,864	3,691	3,725	3,511	3,355	3,259	2,990	2,752	2,774
Santa Cruz	560	536	528	515	497	540	577	583	421	384	337
Shasta	916	881	870	781	773	730	661	642	551	516	490
Sierra	8	7	7	9	11	13	8	5	9	5	2
Siskiyou	255	236	260	243	247	222	190	201	139	115	108
Solano	1,177	1,121	1,009	971	957	938	814	813	708	694	731
Sonoma	883	884	778	752	763	782	763	702	566	515	567
Stanislaus	2,561	2,393	2,312	2,146	2,078	1,999	1,892	1,740	1,415	1,304	1,401
Sutter	331	302	305	271	270	239	251	210	173	174	207
Tehama	308	300	286	246	267	209	259	217	179	147	129
Trinity	69	64	57	64	70	67	47	52	26	23	26
Tulare	2,853	2,676	2,640	2,554	2,451	2,482	2,296	2,058	1,770	1,511	1,446
Tuolumne	162	182	158	158	154	145	124	138	105	95	74
Ventura	1,799	1,684	1,510	1,469	1,546	1,431	1,417	1,446	1,205	1,047	1,117
Yolo	585	594	573	564	522	474	461	399	357	323	339
Yuba	611	532	526	491	472	446	385	348	296	245	248

TABLE 17 (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 1996

(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	2,353,783	216,840	288,609	294,388	275,165	212,605	151,080	105,208	92,209	89,690	627,989
Alameda	97,911	8,038	10,885	11,387	10,946	9,248	7,205	4,850	4,027	3,666	27,659
Alpine	96	9	10	12	15	8	11	4	4	5	18
Amador	1,298	90	148	173	163	114	69	54	46	33	408
Butte	20,052	1,837	2,485	2,797	2,729	2,056	1,391	1,037	822	746	4,152
Calaveras	2,382	195	315	320	338	233	154	89	102	92	544
Colusa	1,369	142	187	165	149	124	84	71	56	49	342
Contra Costa	44,399	3,784	5,402	5,757	5,421	4,132	2,922	2,019	1,756	1,581	11,625
Del Norte	3,252	264	409	468	470	338	214	180	166	147	596
El Dorado	6,167	506	762	812	914	660	457	277	213	202	1,364
Fresno	83,740	8,637	11,113	11,609	10,234	7,785	5,568	3,992	3,448	3,115	18,239
Glenn	2,320	207	318	330	302	210	147	104	98	81	523
Humboldt	11,960	991	1,473	1,570	1,822	1,443	1,062	665	517	418	1,999
Imperial	18,804	1,494	1,882	2,121	2,096	1,790	1,256	807	736	847	5,775
Inyo	1,350	123	142	175	158	133	81	48	47	47	396
Kern	60,694	7,188	9,018	9,061	7,908	5,366	3,503	2,499	2,293	2,116	11,742
Kings	9,937	1,195	1,452	1,406	1,190	780	529	444	333	341	2,267
Lake	6,958	457	756	910	949	769	509	400	338	280	1,590
Lassen	2,249	225	305	359	296	198	144	108	83	84	447
Los Angeles	776,781	70,018	91,736	91,655	85,195	66,989	47,105	33,319	30,554	31,523	228,687
Madera	11,333	1,298	1,667	1,531	1,360	954	662	468	422	400	2,571
Marin	7,461	526	767	832	929	824	729	425	274	216	1,939
Mariposa	994	64	121	136	170	111	76	43	26	22	225
Mendocino	8,398	727	1,050	1,080	1,098	886	699	482	370	291	1,715
Merced	24,974	2,900	3,737	3,720	3,255	2,361	1,460	1,023	922	845	4,751
Modoc	1,149	114	161	137	142	104	83	59	55	43	251
Mono	331	39	55	52	47	33	22	17	9	12	45
Monterey	21,761	2,404	3,104	2,818	2,572	1,794	1,251	884	730	779	5,425
Napa	5,341	472	689	727	640	495	292	220	186	186	1,434
Nevada	3,875	321	406	512	496	441	278	191	127	110	993
Orange	121,078	10,353	14,449	14,010	12,844	10,786	8,227	5,824	4,669	4,340	35,576

TABLE 17 (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 1996

(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	9,016	791	1,035	1,181	1,202	849	588	423	331	316	2,300
Plumas	1,453	106	150	163	195	161	103	84	60	47	384
Riverside	87,154	9,462	11,993	12,329	10,852	7,625	4,970	3,489	3,218	3,112	20,104
Sacramento	105,720	10,359	14,183	14,922	14,239	10,757	7,592	5,184	4,546	3,952	19,986
San Benito	2,404	255	398	345	247	179	105	88	69	83	635
San Bernardino	124,888	14,260	18,763	18,831	17,107	11,780	7,547	5,047	4,376	3,961	23,216
San Diego	157,802	13,750	19,311	20,102	19,482	14,788	10,156	6,696	5,690	5,608	42,219
San Francisco	75,143	2,903	4,314	5,485	6,446	6,453	5,582	3,821	3,606	3,867	32,666
San Joaquin	52,984	5,256	7,089	7,225	6,530	5,030	3,773	2,668	2,230	1,920	11,263
San Luis Obispo	11,638	1,056	1,521	1,627	1,561	1,175	791	501	409	354	2,643
San Mateo	27,293	2,109	2,852	2,647	2,418	1,880	1,410	983	964	1,061	10,969
Santa Barbara	20,555	2,115	2,729	2,818	2,466	1,809	1,409	905	739	717	4,848
Santa Clara	89,916	7,203	9,399	9,291	8,574	7,387	5,761	4,154	3,589	3,623	30,935
Santa Cruz	12,731	1,167	1,566	1,567	1,435	1,274	949	624	462	461	3,226
Shasta	17,380	1,551	2,245	2,490	2,463	1,805	1,224	899	733	624	3,346
Sierra	251	14	22	23	24	15	24	12	15	11	91
Siskiyou	4,765	370	489	615	705	549	354	265	231	190	997
Solano	21,355	2,467	2,962	3,025	2,628	1,836	1,170	739	621	612	5,295
Sonoma	20,979	1,738	2,531	2,779	2,785	2,219	1,684	1,099	805	700	4,639
Stanislaus	41,711	4,160	5,612	5,485	5,161	3,885	2,770	1,992	1,735	1,784	9,127
Sutter	6,040	548	787	763	701	496	332	247	265	236	1,665
Tehama	5,146	451	629	700	730	441	340	242	218	203	1,192
Trinity	1,287	68	123	161	184	162	110	102	70	47	260
Tulare	42,146	4,618	5,854	5,762	5,268	3,819	2,598	1,840	1,617	1,524	9,246
Tuolumne	3,343	263	389	489	479	377	236	149	143	107	711
Ventura	33,228	3,369	4,297	4,242	3,909	2,876	2,019	1,388	1,155	1,174	8,799
Yolo	11,024	1,012	1,406	1,574	1,386	1,031	731	549	469	467	2,399
Yuba	8,017	801	956	1,105	1,140	782	562	415	414	312	1,530

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 04/24/97.

TABLE 17 (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 1996

(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	3,150,969	1,525,175	109,128	104,925	101,835	99,773	98,693	96,556	89,019	80,434	74,598	69,093
Alameda	120,034	52,227	3,173	3,296	3,240	3,291	3,283	3,263	3,027	2,787	2,718	2,439
Alpine	141	77	5	6	1	1	9	4	7	4	9	3
Amador	1,616	683	61	30	32	36	36	38	39	44	27	37
Butte	24,124	11,314	682	667	647	653	684	648	669	670	614	527
Calaveras	2,909	1,288	60	73	60	71	56	84	91	77	66	75
Colusa	1,926	983	68	68	72	76	55	58	51	45	42	51
Contra Costa	55,888	24,781	1,637	1,578	1,507	1,543	1,461	1,509	1,493	1,402	1,243	1,170
Del Norte	3,835	1,772	87	97	98	107	88	115	117	97	89	80
El Dorado	7,565	3,344	198	189	195	189	185	203	220	180	185	164
Fresno	119,763	64,233	4,148	3,989	4,029	4,043	4,047	4,125	3,765	3,422	3,217	3,031
Glenn	3,176	1,589	119	96	90	87	103	87	77	86	99	88
Humboldt	13,466	5,901	334	332	330	319	316	357	331	327	309	297
Imperial	22,695	10,664	580	575	571	622	632	611	604	585	532	507
Inyo	1,681	741	47	60	49	42	47	50	33	37	26	33
Kern	84,911	43,997	2,916	2,909	2,978	2,753	2,813	2,817	2,560	2,388	2,239	2,081
Kings	14,418	7,718	540	500	482	507	501	463	429	366	356	323
Lake	7,660	3,205	164	187	177	165	162	194	199	202	207	171
Lassen	2,782	1,298	68	79	86	72	78	83	71	76	66	77
Los Angeles	1,094,416	536,355	38,730	39,650	38,037	37,089	36,616	35,344	32,033	28,023	25,477	23,631
Madera	15,801	8,309	622	556	555	549	514	493	503	435	408	369
Marin	7,893	2,897	264	207	175	169	185	179	136	145	138	107
Mariposa	1,233	570	33	29	30	30	34	25	34	27	38	31
Mendocino	10,075	4,516	296	296	261	227	239	292	256	244	230	188
Merced	35,652	19,292	1,018	1,242	1,156	1,163	1,186	1,185	1,143	1,007	1,023	947
Modoc	1,335	622	31	36	43	37	31	40	45	25	23	36
Mono	469	232	20	20	13	14	11	19	10	14	14	12
Monterey	31,087	15,820	1,442	1,189	1,023	1,132	1,073	954	882	722	718	627
Napa	6,401	2,818	231	206	187	186	178	180	146	131	134	146
Nevada	4,572	1,895	129	115	131	95	91	104	112	95	96	92
Orange	164,415	81,013	8,073	6,344	5,916	5,560	5,454	5,074	4,478	3,916	3,542	3,220

TABLE 17 (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 1996

(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	10,661	4,449	315	255	275	278	288	297	256	260	217	211
Plumas	1,684	722	40	38	47	41	41	36	36	44	46	39
Riverside	128,410	66,150	4,902	4,578	4,465	4,316	4,277	4,142	3,896	3,607	3,320	3,030
Sacramento	137,012	67,306	4,020	4,144	4,076	4,308	4,210	4,124	3,969	3,692	3,506	3,273
San Benito	3,523	1,806	159	133	113	106	117	88	92	91	68	79
San Bernardino	185,884	96,882	6,549	6,491	6,663	6,335	6,216	6,154	5,780	5,382	5,061	4,739
San Diego	207,046	97,696	7,056	6,619	6,621	6,346	6,359	6,282	5,915	5,423	5,070	4,507
San Francisco	65,212	21,073	1,447	1,273	1,283	1,249	1,284	1,173	1,077	1,105	940	937
San Joaquin	69,944	35,345	2,080	2,174	2,024	2,059	2,177	2,164	2,013	1,961	1,808	1,803
San Luis Obispo	14,035	6,096	439	400	350	368	354	386	350	327	332	268
San Mateo	32,466	13,269	1,294	1,004	909	884	890	784	705	649	590	524
Santa Barbara	28,261	14,269	1,301	1,020	984	930	952	929	839	695	702	574
Santa Clara	107,485	46,601	3,351	2,965	2,979	2,986	2,799	2,753	2,438	2,233	2,110	1,920
Santa Cruz	15,856	7,215	703	508	469	468	420	402	338	343	298	306
Shasta	20,398	9,111	522	539	481	514	505	550	536	506	478	427
Sierra	255	93	5	5	2	6	5	4	5	1	4	5
Siskiyou	5,455	2,386	107	119	140	102	121	138	129	135	121	128
Solano	28,432	13,050	894	883	811	801	778	790	759	694	654	581
Sonoma	24,405	10,321	826	646	658	622	619	573	584	527	493	482
Stanislaus	54,758	26,629	1,753	1,710	1,603	1,538	1,527	1,600	1,528	1,410	1,356	1,243
Sutter	7,734	3,604	229	241	232	241	230	226	237	160	147	161
Tehama	6,569	3,105	203	184	209	186	169	188	170	172	166	158
Trinity	1,396	598	37	20	24	33	22	35	32	34	32	31
Tulare	58,920	31,427	2,119	1,999	1,939	1,992	1,920	1,976	1,810	1,597	1,529	1,453
Tuolumne	3,965	1,679	92	82	83	78	96	82	92	108	94	82
Ventura	44,892	22,080	2,118	1,577	1,488	1,482	1,424	1,366	1,216	1,040	942	950
Yolo	13,899	6,594	496	402	405	392	409	406	360	327	349	305
Yuba	10,473	5,465	295	295	331	284	316	310	296	332	280	317

TABLE 17 (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 1996

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	64,864	62,199	58,325	54,804	54,223	53,279	52,211	50,953	48,051	49,949	52,263
Alameda	2,216	2,098	2,110	1,995	1,896	1,959	1,988	1,942	1,793	1,823	1,890
Alpine	3	4	4	2	2	4	3	1	2	1	2
Amador	30	35	32	23	25	24	34	24	30	22	24
Butte	537	520	515	452	470	457	406	346	364	390	396
Calaveras	76	61	51	57	43	56	52	48	45	49	37
Colusa	39	48	39	30	29	38	44	29	32	45	24
Contra Costa	1,118	1,058	970	955	937	862	866	900	815	865	892
Del Norte	92	88	90	80	94	62	68	63	38	55	67
El Dorado	160	168	136	122	122	120	114	126	117	136	115
Fresno	2,958	2,880	2,600	2,559	2,467	2,504	2,377	2,116	2,006	1,953	1,997
Glenn	89	73	56	78	62	64	56	46	40	44	49
Humboldt	287	294	245	239	232	241	226	220	207	231	227
Imperial	466	461	460	420	480	494	481	440	406	376	361
Inyo	35	25	28	26	28	32	28	27	31	27	30
Kern	1,943	1,801	1,738	1,661	1,637	1,480	1,429	1,421	1,395	1,544	1,494
Kings	330	346	303	295	287	249	279	264	275	314	309
Lake	165	170	142	135	107	129	121	102	96	101	109
Lassen	49	56	58	58	41	53	49	48	37	45	48
Los Angeles	22,108	20,951	19,047	18,018	17,964	17,845	17,941	17,606	16,366	16,481	17,398
Madera	315	323	298	293	252	286	279	336	278	326	319
Marin	115	115	129	126	106	97	87	96	110	109	102
Mariposa	30	24	26	35	24	30	23	18	17	12	20
Mendocino	212	201	207	175	164	171	193	148	148	188	180
Merced	868	877	837	776	782	740	689	653	669	654	677
Modoc	30	28	30	22	28	28	29	18	17	19	26
Mono	13	8	8	9	6	8	5	5	7	9	7
Monterey	604	586	542	494	507	491	506	576	548	619	585
Napa	108	125	100	92	92	86	92	107	84	103	104
Nevada	91	86	74	71	96	69	74	65	65	73	71
Orange	3,030	2,934	2,803	2,577	2,555	2,432	2,420	2,524	2,486	2,739	2,936

TABLE 17 (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 1996

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	213	176	173	157	171	170	155	146	150	142	144
Plumas	35	34	36	28	25	23	28	27	25	25	28
Riverside	2,881	2,708	2,612	2,304	2,243	2,202	2,203	2,105	2,044	2,123	2,192
Sacramento	3,120	3,039	2,850	2,757	2,703	2,572	2,340	2,260	2,010	2,014	2,319
San Benito	68	58	59	54	65	68	62	80	85	88	73
San Bernardino	4,235	4,045	3,764	3,568	3,461	3,268	3,141	2,986	2,701	3,114	3,229
San Diego	4,178	4,032	3,769	3,528	3,523	3,391	3,245	3,103	2,611	2,905	3,213
San Francisco	860	810	866	807	820	870	873	906	828	804	861
San Joaquin	1,661	1,595	1,656	1,367	1,407	1,390	1,249	1,172	1,213	1,190	1,182
San Luis Obispo	247	286	257	238	210	223	226	193	184	233	225
San Mateo	488	445	412	386	422	420	475	492	475	482	539
Santa Barbara	536	520	508	458	426	466	456	469	477	502	525
Santa Clara	1,876	1,844	1,872	1,793	1,836	1,765	1,656	1,757	1,821	1,868	1,979
Santa Cruz	271	254	263	246	249	261	304	290	273	286	263
Shasta	456	420	410	375	381	368	321	337	327	326	332
Sierra	4	5	5	5	8	8	2	1	7	4	2
Siskiyou	115	122	135	134	113	102	95	95	86	75	74
Solano	582	530	521	488	441	457	413	430	464	523	556
Sonoma	429	439	349	356	389	400	392	370	375	384	408
Stanislaus	1,221	1,231	1,175	1,020	1,008	1,000	972	920	871	918	1,025
Sutter	150	154	148	139	149	126	130	106	117	130	151
Tehama	141	149	145	103	135	106	124	114	98	102	83
Trinity	35	33	27	30	40	38	26	18	17	12	22
Tulare	1,387	1,317	1,310	1,266	1,175	1,232	1,134	1,059	1,094	1,100	1,019
Tuolumne	82	82	81	88	72	81	55	65	60	69	55
Ventura	882	855	714	734	733	709	722	751	756	781	840
Yolo	284	289	280	270	244	231	262	203	195	232	253
Yuba	310	283	250	230	239	221	191	183	163	164	175

TABLE 17 (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 1996

(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	1,625,794	182,325	229,553	217,271	189,652	134,530	88,369	59,950	53,132	53,844	417,168
Alameda	67,807	6,987	8,926	8,627	7,552	5,721	4,060	2,692	2,303	2,246	18,693
Alpine	64	6	8	9	11	4	7	2	2	3	12
Amador	933	69	123	124	123	85	42	30	27	16	294
Butte	12,810	1,337	1,708	1,842	1,686	1,191	801	561	451	420	2,813
Calaveras	1,621	138	223	232	234	147	89	44	56	54	404
Colusa	943	121	145	120	99	79	53	42	31	31	222
Contra Costa	31,107	3,100	4,212	4,141	3,695	2,568	1,739	1,178	1,079	1,013	8,382
Del Norte	2,063	182	290	309	293	200	111	95	111	78	394
El Dorado	4,221	406	582	565	635	406	229	160	118	118	1,002
Fresno	55,530	6,847	8,256	7,985	6,631	4,676	3,250	2,237	1,967	1,857	11,824
Glenn	1,587	162	241	234	209	134	80	67	55	47	358
Humboldt	7,565	725	1,067	1,044	1,128	788	577	345	271	233	1,387
Imperial	12,031	1,174	1,391	1,528	1,437	1,199	781	439	399	417	3,266
Inyo	940	102	107	131	111	82	40	31	26	29	281
Kern	40,914	5,593	6,618	6,261	5,279	3,334	2,111	1,487	1,315	1,267	7,649
Kings	6,700	924	1,045	985	816	481	323	256	200	200	1,470
Lake	4,455	332	523	624	593	472	288	210	190	167	1,056
Lassen	1,484	180	212	237	200	119	88	55	45	49	299
Los Angeles	558,061	62,399	78,676	72,758	62,403	44,854	28,830	19,634	17,840	19,218	151,449
Madera	7,492	1,001	1,185	1,058	919	598	392	253	230	217	1,639
Marin	4,996	418	572	582	610	477	406	239	152	132	1,408
Mariposa	663	47	92	103	115	60	41	22	18	9	156
Mendocino	5,559	553	764	763	697	541	410	280	212	163	1,176
Merced	16,360	2,181	2,613	2,518	2,141	1,411	833	585	520	505	3,053
Modoc	713	83	104	94	87	66	37	31	30	17	164
Mono	237	33	43	40	36	27	14	8	4	5	27
Monterey	15,267	2,108	2,486	2,079	1,783	1,124	754	519	448	469	3,497
Napa	3,583	369	520	487	419	296	148	122	109	109	1,004
Nevada	2,677	246	307	376	335	278	159	108	70	76	722
Orange	83,402	8,910	11,652	10,354	8,810	6,919	4,718	3,107	2,612	2,530	23,790

TABLE 17 (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 1996

(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	6,212	661	791	845	783	503	330	236	209	190	1,664
Plumas	962	83	115	122	126	100	59	51	32	27	247
Riverside	62,260	8,015	9,626	9,246	7,733	5,014	3,069	2,075	1,982	1,918	13,582
Sacramento	69,706	8,332	10,508	10,197	9,185	6,279	4,181	2,896	2,573	2,296	13,259
San Benito	1,717	212	318	259	189	119	60	48	45	43	424
San Bernardino	89,002	11,792	14,808	13,915	11,976	7,758	4,604	2,974	2,601	2,472	16,102
San Diego	109,350	11,540	15,226	14,705	13,520	9,443	6,001	3,902	3,369	3,436	28,208
San Francisco	44,139	2,337	3,149	3,426	3,488	3,257	2,561	1,700	1,710	2,123	20,388
San Joaquin	34,599	4,085	5,200	4,948	4,263	2,972	2,127	1,505	1,246	1,089	7,164
San Luis Obispo	7,939	826	1,125	1,107	1,047	705	465	282	226	242	1,914
San Mateo	19,197	1,812	2,329	2,002	1,662	1,213	815	601	582	701	7,480
Santa Barbara	13,992	1,756	2,068	2,000	1,631	1,088	786	498	424	426	3,315
Santa Clara	60,884	6,110	7,522	6,896	5,970	4,698	3,282	2,280	2,042	2,181	19,903
Santa Cruz	8,641	977	1,185	1,107	957	772	540	337	262	260	2,244
Shasta	11,287	1,143	1,567	1,677	1,553	1,030	660	500	431	376	2,350
Sierra	162	10	15	16	17	10	11	5	9	6	63
Siskiyou	3,069	284	328	418	455	325	201	141	118	109	690
Solano	15,382	2,054	2,330	2,224	1,870	1,184	732	457	414	407	3,710
Sonoma	14,084	1,407	1,908	1,954	1,779	1,274	897	608	459	400	3,398
Stanislaus	28,129	3,310	4,161	3,850	3,409	2,397	1,574	1,176	996	1,099	6,157
Sutter	4,130	438	595	534	469	312	188	156	154	144	1,140
Tehama	3,464	366	462	473	479	284	194	136	132	118	820
Trinity	798	51	88	124	104	96	60	43	32	22	178
Tulare	27,493	3,596	4,208	3,878	3,338	2,259	1,517	1,033	917	873	5,874
Tuolumne	2,286	190	285	328	338	248	141	82	85	66	523
Ventura	22,812	2,819	3,255	2,973	2,605	1,797	1,166	841	715	686	5,955
Yolo	7,305	800	1,044	1,103	901	616	424	319	273	271	1,554
Yuba	5,008	586	646	734	718	440	313	229	203	168	971

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 04/24/97.

TABLE 18

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	4,215,519	3,003,037	325,542	22,763	634,293	2,020,439	499,471	100,031	717	44,967	353,756
Alameda	158,639	124,513	14,990	1,121	34,274	74,129	17,616	5,714	34	2,391	9,478
Alpine	237	186	12	1	25	148	40	2	0	6	33
Amador	2,604	1,829	177	13	376	1,263	585	152	0	32	401
Butte	43,271	34,581	2,001	264	7,352	24,965	5,646	1,091	13	437	4,106
Calaveras	5,074	3,931	286	29	737	2,879	834	134	1	59	640
Colusa	3,739	1,949	195	11	336	1,407	772	77	2	44	650
Contra Costa	78,347	60,411	6,025	497	15,145	38,744	9,514	2,581	11	1,013	5,909
Del Norte	6,784	5,694	283	30	1,367	4,014	668	131	2	92	444
El Dorado	13,173	9,502	705	89	2,024	6,684	2,042	390	2	186	1,465
Fresno	214,592	169,285	10,433	905	28,878	129,069	20,303	2,736	36	1,136	16,396
Glenn	5,674	3,861	310	22	702	2,828	822	91	1	38	691
Humboldt	23,754	19,498	1,038	139	5,223	13,099	2,763	454	3	268	2,039
Imperial	40,046	31,194	3,897	147	4,525	22,626	5,307	638	4	334	4,331
Inyo	2,861	2,009	210	14	381	1,404	468	114	0	38	316
Kern	132,568	94,942	6,224	630	20,045	68,043	18,741	2,046	21	1,107	15,567
Kings	25,599	17,477	1,293	97	2,949	13,138	3,698	417	3	154	3,125
Lake	13,662	11,594	847	77	2,692	7,978	1,497	314	5	173	1,006
Lassen	5,018	4,045	204	29	784	3,029	642	126	2	45	469
Los Angeles	1,469,123	983,380	134,373	7,731	196,125	645,151	168,794	33,065	171	14,243	121,316
Madera	28,552	18,224	1,375	104	3,303	13,442	4,347	464	5	195	3,682
Marin	13,084	8,377	877	108	2,954	4,438	2,248	648	4	261	1,335
Mariposa	2,232	1,613	126	6	226	1,255	462	71	1	37	353
Mendocino	17,679	12,770	906	80	3,135	8,649	2,713	387	3	182	2,141
Merced	64,662	47,482	2,689	262	6,235	38,296	7,373	856	17	395	6,105
Modoc	2,494	1,813	93	8	310	1,402	387	99	1	46	241
Mono	786	463	25	3	77	358	162	7	0	12	143
Monterey	55,743	36,825	3,259	220	5,964	27,382	8,354	937	8	439	6,970
Napa	11,360	7,075	626	68	1,853	4,529	2,125	575	4	230	1,317
Nevada	7,733	5,686	410	69	1,311	3,896	1,458	396	2	108	953
Orange	49,561	4,748	1,628	107	2,415	599	2,049	1,339	14	567	130

TABLE 18 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	18,071	14,138	989	119	3,450	9,581	2,316	780	7	257	1,272
Plumas	3,092	2,176	169	20	536	1,451	693	132	0	34	528
Riverside	181,070	130,612	11,498	1,006	25,464	92,644	23,272	3,575	26	1,788	17,883
Sacramento	122,968	99,813	9,613	996	33,557	55,648	11,732	3,702	16	1,769	6,246
San Benito	6,005	4,043	382	21	532	3,108	1,008	128	0	51	830
San Bernardino	244,039	193,017	12,656	1,170	33,285	145,905	24,254	4,073	44	1,938	18,199
San Diego	281,345	214,884	24,977	1,803	47,487	140,618	28,079	7,420	56	2,945	17,658
San Francisco	108,390	80,718	20,758	1,039	27,291	31,630	16,374	5,005	46	2,492	8,831
San Joaquin	90,499	70,302	5,825	592	19,092	44,793	11,008	2,319	16	918	7,755
San Luis Obispo	23,888	17,027	1,319	128	4,243	11,338	3,769	728	4	436	2,602
San Mateo	3,798	18	2	0	11	5	1	0	0	1	1
Santa Barbara	7,609	20	1	0	8	11	7	1	0	1	6
Santa Clara	180,367	126,316	17,928	913	22,527	84,948	25,626	7,052	42	2,250	16,282
Santa Cruz	3,083	8	1	0	6	1	5	2	0	0	3
Shasta	35,638	28,802	1,608	164	6,874	20,156	4,885	856	6	384	3,640
Sierra	429	332	40	2	90	201	83	35	0	10	38
Siskiyou	9,681	7,947	524	45	1,859	5,519	1,116	211	1	101	804
Solano	1,101	90	3	1	71	16	22	4	0	8	9
Sonoma	41,335	30,447	2,261	300	8,277	19,610	5,467	1,188	17	1,183	3,079
Stanislaus	95,641	73,624	4,875	454	14,161	54,135	11,755	1,843	16	862	9,035
Sutter	13,629	9,402	942	86	2,014	6,360	2,382	343	2	128	1,908
Tehama	11,918	8,702	618	58	1,800	6,227	1,733	282	4	119	1,328
Trinity	2,581	2,083	143	11	512	1,416	402	53	2	49	298
Tulare	105,788	77,567	5,329	405	11,902	59,931	12,092	1,429	13	1,151	9,500
Tuolumne	6,949	5,548	379	36	1,174	3,960	960	175	1	105	679
Ventura	76,690	48,131	5,178	315	9,967	32,671	12,979	1,827	21	1,329	9,803
Yolo	21,569	16,207	1,170	112	3,323	11,602	2,744	577	8	272	1,886
Yuba	19,697	16,109	842	89	3,062	12,117	2,277	245	3	122	1,908

TABLE 18 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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
STATEWIDE	228,084	10,721	217,364	60	279,284	2,913	24,033	84,560	87,705	37,902	49,803
Alameda	5,165	493	4,673	3	5,637	124	559	2,293	2,587	1,091	1,496
Alpine	8	0	8	0	0	0	0	2	0	0	0
Amador	95	8	87	0	11	0	13	30	40	23	17
Butte	1,467	44	1,423	0	660	21	140	324	398	152	246
Calaveras	158	9	148	0	24	0	32	51	41	24	17
Colusa	299	7	292	0	346	0	61	122	184	73	111
Contra Costa	2,679	139	2,540	1	3,066	29	370	1,072	1,125	582	543
Del Norte	210	17	193	0	91	0	16	55	48	27	22
El Dorado	663	40	623	0	373	0	67	225	290	149	141
Fresno	7,873	382	7,491	6	10,960	48	779	2,481	2,591	1,113	1,479
Glenn	347	12	335	0	301	2	47	123	164	61	102
Humboldt	756	67	689	0	79	0	79	232	303	158	144
Imperial	1,737	101	1,637	0	574	0	218	441	562	237	325
Inyo	139	10	128	0	97	0	21	65	54	26	28
Kern	6,055	195	5,860	0	7,932	13	838	1,901	2,056	886	1,170
Kings	1,592	31	1,561	0	1,760	4	206	469	382	199	183
Lake	280	17	263	0	95	0	42	78	70	32	38
Lassen	122	3	119	0	82	1	23	40	48	18	29
Los Angeles	113,109	4,568	108,541	12	131,657	805	6,455	29,996	32,976	11,132	21,843
Madera	1,976	56	1,920	0	2,987	9	200	387	399	171	227
Marin	703	16	688	0	1,073	33	87	254	291	131	160
Mariposa	102	9	93	0	0	0	3	23	26	12	14
Mendocino	802	23	780	0	649	1	104	275	345	154	190
Merced	3,020	147	2,873	12	4,431	10	506	1,064	713	262	450
Modoc	112	3	109	0	110	0	0	33	33	14	19
Mono	42	8	34	0	39	0	11	26	42	24	17
Monterey	2,468	126	2,342	0	3,767	5	501	1,556	2,223	987	1,236
Napa	634	14	620	0	694	2	104	318	384	152	233
Nevada	241	19	221	0	56	0	51	97	141	72	69
Orange	520	108	412	1	23,004	0	2,203	8,643	7,525	3,973	3,553

TABLE 18 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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
Placer	656	49	607	0	328	2	74	230	298	136	161
Plumas	116	6	111	0	15	0	21	29	38	16	22
Riverside	10,293	591	9,702	0	7,550	38	1,444	3,863	3,810	2,072	1,738
Sacramento	2,991	279	2,712	4	4,035	284	521	1,755	1,739	886	853
San Benito	318	22	296	0	244	0	46	155	190	77	113
San Bernardino	9,387	544	8,843	9	8,975	109	1,058	3,635	3,364	1,774	1,590
San Diego	14,773	869	13,904	4	11,196	400	1,426	5,042	5,085	2,434	2,651
San Francisco	4,433	239	4,194	0	3,048	291	345	1,522	1,435	688	747
San Joaquin	2,584	107	2,477	0	4,082	81	407	921	1,017	475	542
San Luis Obispo	1,089	67	1,022	0	778	0	175	486	526	281	245
San Mateo	37	0	37	6	0	0	373	1,581	1,670	882	788
Santa Barbara	3	1	2	0	3,479	0	531	1,837	1,633	862	771
Santa Clara	7,309	312	6,997	1	14,219	498	706	2,716	2,511	1,198	1,313
Santa Cruz	2	0	2	0	1,321	0	179	622	875	455	420
Shasta	1,073	42	1,031	0	90	4	118	262	373	167	206
Sierra	5	2	3	0	0	0	2	4	3	1	2
Siskiyou	281	19	261	0	148	0	36	60	89	38	51
Solano	25	6	19	0	37	0	128	378	378	185	194
Sonoma	1,878	85	1,793	0	1,568	3	231	746	917	441	476
Stanislaus	3,183	179	3,004	0	3,704	27	793	1,313	1,165	594	571
Sutter	673	37	636	1	525	0	110	279	231	112	119
Tehama	651	13	639	0	458	0	74	148	145	71	74
Trinity	49	8	40	0	1	0	9	13	21	11	10
Tulare	5,313	260	5,052	2	7,250	4	548	1,568	1,405	709	696
Tuolumne	250	24	227	0	7	0	37	65	81	36	45
Ventura	5,901	221	5,680	0	4,470	8	720	2,201	2,127	1,102	1,025
Yolo	836	56	780	0	845	43	138	330	405	204	201
Yuba	608	14	594	0	359	15	50	123	136	57	80

TABLE 18 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM
	Total	Infant	Pregnant Woman						
STATEWIDE	1,097	152	945	1,870	25	10	2,769	INA	602
Alameda	19	0	18	35	3	0	74	INA	11
Alpine	0	0	0	0	0	0	0	INA	0
Amador	1	0	1	1	0	0	0	INA	0
Butte	5	0	5	2	0	0	27	INA	0
Calaveras	0	0	0	2	0	0	3	INA	0
Colusa	0	0	0	2	0	0	4	INA	0
Contra Costa	9	3	6	27	3	0	42	INA	0
Del Norte	1	1	0	1	0	0	0	INA	0
El Dorado	3	1	2	5	0	0	3	INA	0
Fresno	83	35	48	144	1	0	37	INA	1
Glenn	0	0	0	1	0	0	6	INA	0
Humboldt	0	0	0	18	0	0	25	INA	1
Imperial	4	0	3	1	0	0	7	INA	2
Inyo	5	2	3	0	1	0	2	INA	0
Kern	7	0	7	16	0	1	61	INA	5
Kings	0	0	0	3	0	0	8	INA	0
Lake	0	0	0	1	0	1	3	INA	0
Lassen	0	0	0	0	0	0	15	INA	0
Los Angeles	520	5	515	176	2	2	1,184	INA	56
Madera	0	0	0	6	0	0	19	INA	0
Marin	0	0	0	12	0	0	7	INA	0
Mariposa	1	0	1	0	0	0	3	INA	0
Mendocino	5	0	5	2	0	0	15	INA	0
Merced	36	10	26	1	0	0	12	INA	2
Modoc	6	1	5	0	0	0	0	INA	0
Mono	1	1	0	0	0	0	0	INA	0
Monterey	4	0	4	20	0	0	19	INA	2
Napa	0	0	0	3	0	0	22	INA	0
Nevada	0	0	0	1	0	0	2	INA	1
Orange	100	25	74	473	0	3	224	INA	70

TABLE 18 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM
	Total	Infant	Pregnant Woman						
Placer	2	1	1	10	0	0	18	INA	0
Plumas	0	0	0	1	0	0	4	INA	0
Riverside	1	0	1	125	2	1	52	INA	8
Sacramento	38	10	28	15	0	0	42	INA	1
San Benito	0	0	0	0	0	0	0	INA	0
San Bernardino	36	3	33	78	3	1	115	INA	0
San Diego	44	4	41	238	1	0	158	INA	15
San Francisco	17	3	14	96	0	0	98	INA	13
San Joaquin	1	0	1	9	0	0	50	INA	38
San Luis Obispo	5	2	3	17	1	0	14	INA	0
San Mateo	13	3	10	18	6	0	74	INA	1
Santa Barbara	6	1	5	63	0	1	26	INA	3
Santa Clara	14	1	13	24	0	0	107	INA	320
Santa Cruz	2	0	2	50	1	0	17	INA	1
Shasta	1	0	1	6	0	0	26	INA	0
Sierra	0	0	0	0	0	0	0	INA	0
Siskiyou	2	0	1	1	0	0	2	INA	0
Solano	27	15	13	1	0	1	11	INA	3
Sonoma	3	1	2	56	0	0	20	INA	0
Stanislaus	50	14	36	7	0	0	13	INA	7
Sutter	15	6	10	2	0	0	9	INA	0
Tehama	1	0	1	1	0	0	6	INA	1
Trinity	0	0	0	0	0	0	3	INA	0
Tulare	5	4	2	5	1	0	13	INA	14
Tuolumne	0	0	0	0	0	0	0	INA	0
Ventura	3	1	2	88	1	0	41	INA	21
Yolo	3	0	3	6	0	0	9	INA	4
Yuba	0	0	0	1	0	0	19	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 1996 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 1996.

TABLE 19

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	2,317,864	1,665,035	221,066	16,361	454,587	973,021	318,802	89,166	711	44,496	184,428
Alameda	87,252	68,903	9,747	750	22,825	35,581	11,464	4,372	27	2,111	4,954
Alpine	84	65	5	1	15	43	16	1	0	3	12
Amador	1,442	954	124	12	258	560	374	136	0	33	205
Butte	23,264	18,523	1,485	181	5,164	11,694	3,417	1,072	15	419	1,911
Calaveras	2,685	2,024	198	19	498	1,309	488	125	1	56	306
Colusa	1,776	983	131	7	245	600	411	67	2	46	297
Contra Costa	39,522	30,087	3,953	323	9,617	16,194	5,887	2,111	11	898	2,867
Del Norte	3,747	3,116	212	22	977	1,905	440	117	2	81	240
El Dorado	6,043	4,218	454	53	1,237	2,473	1,133	336	2	150	645
Fresno	104,820	81,497	7,210	647	20,173	53,467	12,114	2,538	36	1,178	8,362
Glenn	2,860	2,016	226	20	509	1,261	459	88	1	43	327
Humboldt	13,104	10,606	833	96	3,654	6,023	1,702	417	4	262	1,020
Imperial	18,967	14,908	2,560	109	3,138	9,101	2,656	519	4	303	1,831
Inyo	1,424	997	151	11	254	580	267	100	0	34	133
Kern	65,570	48,475	3,903	437	12,896	31,238	10,339	1,884	20	1,034	7,401
Kings	13,482	9,456	977	74	2,178	6,228	2,114	393	4	163	1,554
Lake	7,663	6,416	646	58	1,912	3,800	947	281	4	162	500
Lassen	2,558	2,066	145	14	550	1,357	363	114	2	37	210
Los Angeles	828,785	578,510	91,370	5,661	143,333	338,146	103,549	27,200	146	13,235	62,968
Madera	14,390	9,606	993	79	2,383	6,151	2,469	467	7	200	1,796
Marin	7,404	4,659	586	74	2,045	1,954	1,546	640	6	272	629
Mariposa	1,188	835	98	3	166	568	270	70	0	39	161
Mendocino	9,882	7,251	676	56	2,205	4,313	1,642	352	3	177	1,110
Merced	30,279	22,826	1,882	187	4,403	16,355	3,891	804	19	384	2,685
Modoc	1,276	931	67	6	230	629	239	93	1	40	105
Mono	335	208	13	3	44	148	70	2	0	13	56
Monterey	25,321	16,474	1,996	138	3,966	10,375	4,235	804	6	380	3,045
Napa	5,962	3,816	439	45	1,320	2,012	1,360	503	4	214	639
Nevada	4,281	2,937	290	44	861	1,742	953	366	2	114	472
Orange/1/	66,204	30,750	4,780	349	9,844	15,777	10,593	4,668	55	2,153	3,718

TABLE 19 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	9,651	7,181	699	88	2,304	4,090	1,681	747	8	238	688
Plumas	1,738	1,211	117	16	373	706	428	122	0	33	274
Riverside	89,014	62,257	6,315	656	17,253	38,034	13,606	3,004	22	1,695	8,885
Sacramento/1/	54,533	42,515	5,887	634	20,989	15,004	7,256	2,973	15	1,589	2,679
San Benito	2,935	1,913	240	11	342	1,319	544	108	0	51	385
San Bernardino	126,960	98,042	7,338	789	22,755	67,160	15,119	3,439	38	1,820	9,822
San Diego	160,462	120,302	16,289	1,254	34,078	68,680	19,815	6,567	52	3,076	10,121
San Francisco	67,103	49,847	14,538	742	19,030	15,537	10,920	3,809	41	2,217	4,854
San Joaquin	53,822	42,649	3,925	400	13,371	24,953	7,375	2,220	16	929	4,211
San Luis Obispo	12,949	9,132	895	87	2,973	5,178	2,348	677	3	416	1,252
San Mateo/1/	6,080	2,399	480	26	640	1,254	1,491	928	6	174	382
Santa Barbara/1/	6,293	2,456	113	12	542	1,788	612	50	1	55	506
Santa Clara	91,596	66,146	11,411	621	15,310	38,804	15,277	5,368	38	1,970	7,902
Santa Cruz/1/	5,880	3,212	293	35	1,182	1,702	967	244	3	162	557
Shasta	20,058	15,985	1,226	123	4,918	9,718	3,077	845	7	395	1,831
Sierra	239	169	29	1	63	76	61	34	0	10	17
Siskiyou	5,027	4,115	359	28	1,283	2,445	631	182	1	90	359
Solano/1/	3,716	2,607	125	14	514	1,954	407	58	0	63	285
Sonoma	22,330	15,919	1,508	209	5,803	8,398	3,923	1,038	12	1,238	1,636
Stanislaus	49,747	38,241	3,487	323	10,260	24,171	7,013	1,693	16	857	4,448
Sutter	7,306	5,101	689	58	1,451	2,904	1,347	311	2	120	914
Tehama	6,430	4,776	482	44	1,288	2,963	1,035	270	5	112	648
Trinity	1,502	1,183	98	7	378	701	253	49	3	42	159
Tulare	53,866	40,020	3,869	320	8,725	27,106	7,113	1,378	12	1,217	4,505
Tuolumne	4,090	3,153	288	33	848	1,985	658	168	3	110	376
Ventura	39,205	24,225	2,903	212	6,659	14,451	7,527	1,489	19	1,216	4,804
Yolo	11,180	8,346	751	82	2,233	5,281	1,706	530	7	257	912
Yuba	9,539	7,821	566	59	2,120	5,075	1,206	227	3	116	860
Not Reported	3,045	0	0	0	0	0	0	0	0	0	0

TABLE 19 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	115,277	10,607	104,670	73	88,053	3,636	6,014	35,962	51,042	20,986	30,056
Alameda	2,315	404	1,911	2	1,480	161	105	746	1,393	476	917
Alpine	3	0	3	0	0	0	0	0	0	0	0
Amador	52	9	42	0	6	0	5	15	26	8	19
Butte	712	53	659	0	161	6	39	125	213	80	133
Calaveras	86	11	76	0	10	0	10	25	38	18	20
Colusa	130	5	125	0	87	0	9	41	106	44	63
Contra Costa	1,200	153	1,047	1	908	32	78	387	817	324	494
Del Norte	112	17	95	0	21	0	3	18	36	15	21
El Dorado	289	37	252	0	111	0	17	81	181	64	117
Fresno	4,069	382	3,687	2	3,233	29	193	1,110	1,643	727	916
Glenn	161	13	147	0	61	1	11	46	83	34	49
Humboldt	364	64	300	0	25	0	25	87	190	69	121
Imperial	704	98	606	0	145	0	66	167	294	115	179
Inyo	64	10	54	0	21	1	4	22	34	12	22
Kern	2,793	196	2,598	1	1,736	5	168	630	1,148	437	710
Kings	758	39	719	0	422	3	48	200	264	115	149
Lake	155	17	138	0	32	0	14	32	57	19	38
Lassen	54	4	51	0	15	1	5	12	21	8	14
Los Angeles	56,647	3,900	52,748	23	42,756	837	1,707	13,647	15,219	6,400	8,819
Madera	999	61	938	0	723	4	46	165	264	107	158
Marin	297	21	276	0	376	18	15	89	219	70	150
Mariposa	51	7	44	0	1	0	1	10	18	7	12
Mendocino	410	29	381	0	210	1	28	105	230	87	143
Merced	1,311	110	1,202	4	1,195	6	123	397	372	158	214
Modoc	48	3	45	0	24	0	0	12	16	6	10
Mono	16	6	10	0	12	0	1	5	21	9	12
Monterey	1,093	127	966	0	1,236	4	100	503	1,228	468	760
Napa	268	16	252	0	184	1	17	98	210	72	138
Nevada	129	21	108	0	18	0	19	42	84	33	51
Orange/1/	2,773	352	2,421	4	8,571	402	525	3,974	5,169	2,381	2,789

TABLE 19 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	335	54	282	0	107	2	21	85	215	76	139
Plumas	57	5	52	0	6	0	5	7	20	5	15
Riverside	4,921	626	4,294	1	2,449	23	398	1,609	2,562	1,131	1,431
Sacramento/1/	1,265	277	989	2	1,046	335	124	636	1,105	447	658
San Benito	139	17	122	0	81	0	10	62	118	42	76
San Bernardino	5,018	582	4,436	6	3,207	115	328	1,657	2,293	1,026	1,267
San Diego	7,657	980	6,677	6	4,490	472	411	2,216	3,441	1,277	2,164
San Francisco	2,298	280	2,019	1	1,306	341	106	758	1,066	429	637
San Joaquin	1,288	115	1,173	0	995	55	81	360	666	254	412
San Luis Obispo	537	71	466	0	183	0	53	203	365	147	219
San Mateo/1/	209	25	184	3	107	9	78	629	1,055	447	608
Santa Barbara/1/	251	12	239	1	1,000	2	113	678	1,023	392	631
Santa Clara	2,672	290	2,382	2	3,285	668	132	978	1,619	627	992
Santa Cruz/1/	300	44	256	0	502	1	35	229	598	218	381
Shasta	581	58	523	0	30	1	42	102	229	71	159
Sierra	3	2	1	0	0	0	0	1	3	1	3
Siskiyou	148	21	127	0	29	0	11	21	58	20	39
Solano/1/	104	15	89	0	41	1	25	110	210	73	137
Sonoma	803	98	705	1	579	4	58	266	609	214	395
Stanislaus	1,651	180	1,471	0	1,146	24	157	540	849	361	488
Sutter	335	40	296	0	127	0	31	126	177	75	102
Tehama	318	19	298	0	83	0	15	55	101	35	66
Trinity	34	12	22	0	1	0	2	5	15	6	9
Tulare	2,616	268	2,348	6	1,764	1	144	657	1,028	452	576
Tuolumne	154	25	129	3	4	3	15	26	64	20	44
Ventura	2,836	252	2,584	2	1,424	10	195	983	1,597	646	950
Yolo	397	61	336	1	214	52	34	133	282	107	175
Yuba	292	16	275	0	70	7	12	44	82	30	52
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 19 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	354	93	261	975	20	8	469	28,946	154	3,045
Alameda	6	1	5	15	2	0	9	649	3	0
Alpine	0	0	0	0	0	0	0	0	0	0
Amador	1	0	1	0	0	0	0	9	0	0
Butte	1	0	1	1	0	0	7	59	0	0
Calaveras	0	0	0	1	0	0	1	2	0	0
Colusa	0	0	0	1	0	0	1	7	0	0
Contra Costa	6	1	5	13	2	0	5	97	0	0
Del Norte	1	1	0	1	0	0	0	0	0	0
El Dorado	2	0	2	3	0	0	1	8	0	0
Fresno	44	20	24	73	0	0	8	805	0	0
Glenn	0	0	0	0	0	0	1	22	0	0
Humboldt	1	1	0	10	0	0	4	90	0	0
Imperial	2	0	2	0	0	0	3	22	0	0
Inyo	4	1	3	0	1	0	0	10	0	0
Kern	1	0	1	13	0	1	9	252	1	0
Kings	0	0	0	2	0	0	2	214	0	0
Lake	0	0	0	1	0	1	1	8	0	0
Lassen	0	0	0	0	0	0	3	17	0	0
Los Angeles	29	5	24	44	1	1	196	15,605	14	0
Madera	0	0	0	3	0	0	4	106	0	0
Marin	1	0	1	7	0	0	1	176	0	0
Mariposa	1	0	1	0	0	0	1	1	0	0
Mendocino	0	0	0	2	0	0	3	0	0	0
Merced	18	4	14	0	0	0	3	131	1	0
Modoc	4	0	3	0	0	0	0	2	0	0
Mono	1	0	0	0	0	0	0	1	0	0
Monterey	1	0	1	9	0	0	3	434	1	0
Napa	0	0	0	1	0	0	4	5	0	0
Nevada	0	0	0	1	0	0	1	99	0	0
Orange/1/	82	19	64	245	1	1	37	3,073	4	0

TABLE 19 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	1	1	0	6	0	0	3	14	0	0
Plumas	0	0	0	0	0	0	0	3	0	0
Riverside	1	0	1	71	2	0	17	1,099	2	0
Sacramento/1/	23	6	17	11	0	0	4	211	0	0
San Benito	0	0	0	0	0	0	0	68	0	0
San Bernardino	10	4	7	42	1	1	33	1,089	0	0
San Diego	14	2	12	152	1	0	27	1,456	4	0
San Francisco	7	1	6	43	0	0	6	401	3	0
San Joaquin	0	0	0	6	0	0	13	329	6	0
San Luis Obispo	5	2	3	8	0	0	5	109	0	0
San Mateo/1/	9	2	7	5	3	0	7	77	0	0
Santa Barbara/1/	1	0	0	25	0	0	5	128	1	0
Santa Clara	5	1	4	13	0	0	9	685	103	0
Santa Cruz/1/	0	0	0	17	1	0	4	13	1	0
Shasta	1	0	1	3	0	0	5	2	0	0
Sierra	0	0	0	0	0	0	0	1	0	0
Siskiyou	1	0	1	1	0	0	1	10	0	0
Solano/1/	15	4	11	1	0	1	1	194	1	0
Sonoma	2	0	2	36	0	0	3	127	0	0
Stanislaus	31	7	24	5	0	0	2	88	1	0
Sutter	12	3	8	1	0	0	2	46	0	0
Tehama	2	0	2	1	0	0	1	44	0	0
Trinity	1	0	1	0	0	0	0	8	0	0
Tulare	3	2	1	3	1	0	3	508	1	0
Tuolumne	2	1	1	1	0	0	0	7	0	0
Ventura	4	2	3	73	1	0	7	314	6	0
Yolo	1	1	0	4	0	0	1	11	1	0
Yuba	0	0	0	0	0	0	5	1	0	0
Not Reported	0	0	0	0	0	0	0	0	0	3,045

/1/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, 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 1996 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 20

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	$10,364,438,029	$5,836,518,822	$822,501,262	$110,858,155	$2,796,010,956	$2,107,148,449	$3,113,554,837	$1,493,384,068	$11,612,563	$997,112,625	$611,445,581
Alameda	415,217,274	251,578,652	34,561,765	4,752,159	132,814,618	79,450,110	130,435,437	74,410,906	376,814	37,830,634	17,817,082
Alpine	287,192	240,640	10,913	421	162,804	66,502	44,983	11,612	0	8,094	25,277
Amador	7,048,352	2,618,340	284,868	44,971	1,155,313	1,133,187	4,017,776	3,003,775	647	277,698	735,656
Butte	83,699,881	53,034,211	4,345,600	1,084,731	24,691,936	22,911,944	26,496,356	18,043,694	166,331	3,547,802	4,738,529
Calaveras	8,776,373	4,975,558	499,728	194,253	1,967,536	2,314,040	3,189,018	2,079,691	7,037	405,839	696,451
Colusa	6,207,195	2,794,091	295,043	38,755	1,184,092	1,276,201	2,214,373	947,119	1,500	334,543	931,211
Contra Costa	178,926,397	102,642,959	13,557,513	1,896,423	52,546,185	34,642,839	61,745,893	40,063,898	212,542	12,915,376	8,554,076
Del Norte	11,659,815	8,577,487	528,795	72,718	3,787,048	4,188,926	2,467,004	1,378,408	42,460	357,417	688,719
El Dorado	22,939,272	11,941,869	1,175,652	343,436	5,571,014	4,851,766	8,243,872	5,000,845	50,725	1,327,579	1,864,722
Fresno	333,313,279	208,569,317	18,363,292	3,801,699	82,998,480	103,405,846	87,077,483	45,124,180	462,174	17,886,866	23,604,263
Glenn	11,018,174	6,723,745	560,112	119,652	3,217,897	2,826,084	2,824,489	1,519,288	1,243	275,637	1,028,321
Humboldt	52,836,162	35,700,116	2,787,555	380,659	18,812,408	13,719,494	14,129,089	7,295,395	33,528	2,778,349	4,021,817
Imperial	63,602,648	43,836,787	7,450,944	562,932	16,307,552	19,515,358	13,695,865	4,658,639	16,194	2,652,265	6,368,768
Inyo	6,074,184	2,969,785	393,394	27,464	1,019,384	1,529,544	2,326,014	1,760,252	0	175,938	389,824
Kern	230,054,309	136,684,646	10,646,250	2,621,924	58,234,574	65,181,898	69,225,887	35,013,465	263,769	12,854,958	21,093,696
Kings	46,648,393	28,787,906	2,400,864	413,035	10,728,857	15,245,150	11,951,944	5,181,798	69,974	2,104,424	4,595,748
Lake	27,602,844	19,117,454	1,659,606	253,423	8,531,062	8,673,363	7,323,148	4,322,636	3,319	1,345,223	1,651,970
Lassen	9,647,428	5,670,020	416,559	29,579	2,546,844	2,677,038	3,617,578	2,814,571	8,184	139,814	655,009
Los Angeles	3,757,817,865	2,181,036,889	386,890,103	41,794,634	984,797,019	767,555,134	951,065,595	407,300,136	3,072,582	313,161,727	227,531,151
Madera	45,319,185	24,801,312	2,615,280	283,621	10,247,201	11,655,210	13,468,839	7,026,785	67,536	2,242,962	4,131,555
Marin	38,729,653	18,416,277	2,542,208	392,489	12,333,392	3,148,188	16,123,812	11,133,462	108,928	3,267,253	1,614,169
Mariposa	4,560,405	2,218,124	300,777	10,740	670,362	1,236,245	2,127,006	1,510,166	64	178,459	438,317
Mendocino	37,439,046	23,871,064	1,828,558	282,549	11,220,846	10,539,112	10,144,445	5,207,014	23,369	1,802,950	3,111,113
Merced	89,828,442	58,201,950	5,118,506	1,135,500	20,849,205	31,098,739	21,365,396	9,879,953	213,637	4,897,353	6,374,453
Modoc	7,137,222	2,940,297	358,452	13,662	1,062,381	1,505,803	3,880,793	2,845,724	58,264	688,748	288,057
Mono	1,552,984	549,889	13,161	4,372	191,827	340,529	613,860	6,090	0	367,385	240,385
Monterey	125,127,060	59,403,475	5,999,259	791,557	23,812,447	28,800,211	33,488,783	14,008,264	72,458	4,941,742	14,466,318
Napa	47,776,532	22,588,735	1,680,721	206,804	16,801,669	3,899,542	21,423,393	9,665,922	74,470	9,725,825	1,957,176
Nevada	19,025,211	7,704,893	682,315	164,073	3,495,375	3,363,130	10,126,439	7,505,969	19,365	917,933	1,683,172
Orange/1/	438,414,140	151,097,781	25,230,379	2,788,086	88,915,733	34,163,583	181,167,806	81,679,818	1,280,597	85,517,468	12,689,922

TABLE 20 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	44,570,352	21,403,294	2,222,247	581,561	11,269,799	7,329,687	19,190,766	13,134,149	120,516	3,368,593	2,567,508
Plumas	8,637,406	3,812,383	411,027	87,927	1,481,018	1,832,410	4,524,013	3,128,664	0	222,596	1,172,753
Riverside	376,318,391	210,469,905	20,143,756	4,400,019	100,317,025	85,609,105	111,068,178	54,007,884	271,561	24,678,001	32,110,733
Sacramento/1/	253,215,514	156,317,812	19,070,439	3,281,275	95,305,320	38,660,779	80,490,110	50,752,365	58,924	21,414,104	8,264,716
San Benito	12,244,668	6,103,749	672,935	72,113	1,855,603	3,503,099	3,855,193	1,790,712	4	627,512	1,436,965
San Bernardino	534,629,006	345,241,763	24,282,588	6,067,251	151,095,794	163,796,129	129,360,604	63,139,783	382,159	29,611,761	36,226,901
San Diego	693,651,199	406,890,161	56,266,303	7,982,989	206,555,368	136,085,501	201,212,657	112,454,229	513,733	52,692,642	35,552,054
San Francisco	374,840,873	212,309,235	57,456,215	4,834,442	117,906,374	32,112,204	137,535,663	82,400,642	717,503	40,315,863	14,101,656
San Joaquin	194,856,530	117,677,013	12,669,904	2,246,940	58,547,803	44,212,367	62,796,379	36,193,025	105,158	15,604,513	10,893,683
San Luis Obispo	53,599,633	27,091,128	2,267,240	433,555	14,853,128	9,537,206	21,378,893	12,131,713	19,382	6,024,019	3,203,778
San Mateo/1/	59,683,822	15,993,842	5,891,989	323,850	7,593,238	2,184,765	35,665,067	28,985,629	152,162	5,756,481	770,795
Santa Barbara/1/	21,144,105	4,111,871	262,962	23,091	1,330,970	2,494,847	1,117,673	103,654	2,914	199,833	811,272
Santa Clara	468,537,966	243,565,916	39,296,482	5,080,388	118,473,238	80,715,808	175,023,748	76,492,244	1,169,248	72,351,964	25,010,292
Santa Cruz/1/	27,399,405	10,543,591	941,982	333,722	5,809,932	3,457,955	6,305,763	1,914,192	40,216	2,074,485	2,276,870
Shasta	86,141,430	55,217,875	3,412,155	1,237,395	25,890,847	24,677,477	25,826,991	14,272,140	93,530	4,896,467	6,564,854
Sierra	2,684,731	652,916	84,785	1,121	324,096	242,915	1,973,866	1,648,809	0	279,946	45,111
Siskiyou	17,348,308	10,589,231	796,950	84,620	5,061,045	4,646,616	5,789,440	3,511,020	13,234	810,618	1,454,568
Solano/1/	9,535,537	5,538,546	353,382	47,312	1,818,636	3,319,216	1,160,375	188,140	3,535	429,014	539,686
Sonoma	193,389,998	85,282,573	4,792,469	2,146,492	62,246,677	16,096,935	97,800,355	17,994,566	113,878	74,260,993	5,430,919
Stanislaus	173,206,289	104,158,339	10,902,049	1,788,143	44,517,215	46,950,931	54,198,171	31,832,682	274,588	9,150,164	12,940,737
Sutter	26,828,813	15,053,248	1,948,614	295,239	6,985,238	5,824,158	8,604,738	4,658,249	29,608	1,285,833	2,631,049
Tehama	22,271,291	13,464,672	1,252,892	193,378	5,848,913	6,169,489	6,602,379	3,598,582	102,842	679,540	2,221,415
Trinity	6,753,124	4,080,866	310,200	12,103	1,939,961	1,818,602	2,264,450	1,141,527	78,733	354,129	690,061
Tulare	240,958,229	123,335,786	9,719,431	2,504,693	58,232,829	52,878,833	94,507,180	22,602,353	291,461	59,578,698	12,034,667
Tuolumne	17,026,374	9,049,569	927,963	159,900	3,579,340	4,382,366	6,751,205	4,821,046	1,901	935,276	992,982
Ventura	214,870,601	105,547,783	9,159,355	1,453,959	66,534,791	28,399,678	83,349,346	28,626,381	236,266	41,127,620	13,359,080
Yolo	38,945,912	22,289,861	2,309,838	389,723	10,238,231	9,352,069	13,291,821	8,551,673	95,334	2,753,286	1,891,527
Yuba	28,854,085	21,431,625	1,476,936	288,633	9,723,468	9,942,588	5,887,439	2,908,537	16,464	700,413	2,262,025
Not Reported	34,007,520	0	0	0	0	0	0	0	0	0	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	$362,780,091	$88,163,263	$274,616,828	$816,190	$629,894,121	$12,301,899	$8,959,686	$45,586,283	$268,288,711	$59,007,164	$209,281,547
Alameda	9,614,260	3,070,247	6,544,013	7,114	10,848,180	482,000	143,980	1,379,823	9,555,652	1,924,109	7,631,543
Alpine	1,402	118	1,284	0	0	0	0	0	121	0	121
Amador	213,219	85,860	127,359	9,362	44,849	183	3,820	11,124	113,678	6,745	106,933
Butte	2,153,729	532,462	1,621,266	410	821,129	26,045	40,273	122,445	904,696	89,198	815,498
Calaveras	306,170	80,120	226,050	0	93,112	0	12,984	23,266	163,717	25,064	138,653
Colusa	211,424	24,818	186,606	237	511,674	0	9,405	34,414	426,745	83,031	343,714
Contra Costa	4,112,618	1,223,599	2,889,019	674	5,444,990	106,613	155,660	501,096	3,952,523	850,404	3,102,119
Del Norte	314,308	105,849	208,458	0	89,633	0	2,401	20,338	187,122	18,661	168,461
El Dorado	985,443	279,678	705,765	(75)	726,331	0	23,035	75,733	913,716	205,397	708,320
Fresno	11,009,901	2,739,794	8,270,107	(10,720)	15,636,940	64,465	258,147	1,419,827	7,574,817	1,940,114	5,634,703
Glenn	438,813	113,076	325,737	0	341,939	2,001	23,666	84,983	547,900	226,980	320,920
Humboldt	1,456,011	507,145	948,866	(9)	215,175	25	30,107	100,205	1,048,224	266,360	781,865
Imperial	2,725,616	912,724	1,812,892	4,618	955,724	0	192,781	343,579	1,803,984	416,774	1,387,210
Inyo	349,817	114,486	235,330	0	128,338	1,840	3,881	15,337	179,789	38,461	141,328
Kern	7,239,435	2,059,998	5,179,437	(228)	9,740,067	9,632	267,604	690,837	5,765,623	903,871	4,861,753
Kings	1,776,269	312,456	1,463,813	(419)	2,099,603	9,501	56,740	283,981	1,411,188	367,428	1,043,760
Lake	540,340	151,189	389,151	(32)	283,897	0	17,029	33,776	262,550	33,159	229,391
Lassen	196,561	51,150	145,411	0	61,146	1,271	3,269	11,679	57,479	6,997	50,481
Los Angeles	159,799,578	32,674,537	127,125,041	209,910	332,509,058	4,012,909	2,969,384	18,332,268	81,188,130	17,846,476	63,341,653
Madera	2,624,388	411,250	2,213,138	(266)	2,838,146	8,808	65,673	166,042	1,191,329	325,083	866,246
Marin	921,054	158,558	762,496	(43)	2,143,799	46,796	12,109	98,140	726,356	143,718	582,638
Mariposa	109,271	33,493	75,779	0	3,540	0	1,119	19,605	73,561	12,549	61,012
Mendocino	1,044,376	231,085	813,291	(32)	1,058,348	8,585	32,083	176,667	1,093,288	229,734	863,555
Merced	3,724,510	885,629	2,838,882	7,283	4,240,396	11,659	135,086	437,366	1,471,328	426,674	1,044,655
Modoc	134,193	19,205	114,989	0	77,788	111	0	17,306	62,714	7,241	55,474
Mono	96,231	60,108	36,123	0	141,782	0	705	5,765	142,393	10,911	131,482
Monterey	5,823,300	1,452,766	4,370,534	(544)	14,594,981	24,422	183,305	701,698	10,140,871	1,804,839	8,336,031
Napa	1,256,201	209,156	1,047,045	(84)	1,188,653	5,847	19,359	78,169	1,192,917	88,871	1,104,046
Nevada	412,562	140,161	272,401	0	134,045	0	14,339	137,803	394,642	55,437	339,205
Orange/1/	14,044,165	2,878,411	11,165,754	9,618	60,456,452	1,068,469	839,723	3,638,030	21,795,791	4,050,720	17,745,071

TABLE 20 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	1,873,969	514,930	1,359,039	8,147	624,388	6,065	193,937	139,454	1,095,179	223,626	871,553
Plumas	151,935	42,362	109,573	0	36,333	0	4,844	10,583	93,783	11,061	82,722
Riverside	17,560,142	5,082,809	12,477,333	3,343	19,199,082	56,987	524,585	1,774,259	13,858,863	3,568,825	10,290,037
Sacramento/1/	5,055,315	1,961,504	3,093,810	49,120	4,967,295	843,229	106,370	495,498	4,424,886	1,106,433	3,318,453
San Benito	422,970	128,860	294,110	(11)	767,659	0	11,561	81,199	819,156	53,967	765,189
San Bernardino	18,747,300	5,048,736	13,698,564	36,672	23,395,859	321,399	435,096	2,186,604	12,880,490	4,196,719	8,683,771
San Diego	27,147,642	8,414,996	18,732,646	19,920	31,870,979	1,284,198	559,219	3,094,359	18,675,464	4,120,290	14,555,175
San Francisco	7,767,532	2,618,383	5,149,149	6,281	7,940,184	1,606,400	176,595	1,258,329	5,063,992	1,170,056	3,893,936
San Joaquin	3,649,615	802,566	2,847,050	(323)	6,186,013	136,035	95,568	361,704	3,519,635	608,130	2,911,505
San Luis Obispo	1,698,553	457,675	1,240,878	(51)	1,127,490	24,065	57,828	231,296	1,703,366	472,879	1,230,487
San Mateo/1/	948,712	608,899	339,813	6,714	266,650	38,095	88,109	857,294	5,646,770	1,146,315	4,500,455
Santa Barbara/1/	379,357	20,736	358,621	190	7,294,833	2,461	133,987	608,089	7,193,599	2,440,398	4,753,201
Santa Clara	10,129,745	2,787,914	7,341,831	7,322	23,746,507	1,739,146	180,548	1,741,416	10,219,342	2,262,481	7,956,860
Santa Cruz/1/	2,253,773	459,128	1,794,645	(37)	4,315,849	2,120	33,773	236,645	3,655,960	369,416	3,286,544
Shasta	3,011,921	809,248	2,202,673	0	234,923	947	73,739	152,923	1,585,706	127,063	1,458,643
Sierra	18,951	17,789	1,162	0	174	0	4,902	551	32,640	627	32,013
Siskiyou	469,563	155,924	313,639	0	119,826	0	8,371	18,709	339,478	15,236	324,241
Solano/1/	184,122	27,996	156,126	249	296,714	299	25,617	153,195	1,787,814	484,718	1,303,096
Sonoma	2,546,873	746,545	1,800,328	(327)	4,288,890	7,759	59,988	347,031	2,766,768	317,703	2,449,065
Stanislaus	5,106,202	1,250,980	3,855,222	(54)	5,148,869	41,871	152,378	541,244	3,520,447	571,623	2,948,824
Sutter	1,158,032	265,769	892,263	(63)	763,277	(17)	29,523	134,553	980,444	307,619	672,826
Tehama	895,769	170,179	725,590	(11)	488,464	0	13,786	87,231	644,579	213,894	430,685
Trinity	268,052	146,303	121,748	0	2,821	140	3,198	6,503	117,820	23,546	94,273
Tulare	7,524,994	1,888,898	5,636,096	117,385	9,390,664	149	171,748	812,678	4,304,753	815,454	3,489,299
Tuolumne	563,760	219,105	344,655	100,836	12,091	59,405	16,560	40,039	419,507	31,089	388,418
Ventura	7,980,194	1,583,123	6,397,071	34,108	8,663,653	19,166	234,315	1,025,816	7,366,497	1,821,838	5,544,658
Yolo	977,822	292,234	685,588	189,530	982,972	209,458	33,150	175,775	771,533	70,833	700,700
Yuba	652,109	120,543	531,566	476	331,949	11,339	12,727	52,002	457,396	50,318	407,078
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY
CALENDAR YEAR 1996

(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	$2,222,135	$410,578	$1,811,557	$1,585,437	$157,361	$159,650	$1,629,525	$45,796,608	$179,153	$34,007,520
Alameda	31,510	444	31,066	27,749	17,780	0	23,871	1,063,940	7,327	0
Alpine	0	0	0	0	0	0	0	45	0	0
Amador	4,573	0	4,573	(105)	0	0	0	11,533	0	0
Butte	10,206	3,893	6,313	601	0	0	16,963	72,818	0	0
Calaveras	0	0	0	780	119	0	9,206	2,443	0	0
Colusa	(137)	0	(137)	803	0	0	278	3,889	0	0
Contra Costa	41,838	2,408	39,431	18,557	13,238	0	8,181	181,557	0	0
Del Norte	887	787	99	596	0	0	0	40	0	0
El Dorado	12,581	77	12,504	5,885	0	0	1,802	9,079	0	0
Fresno	271,816	106,671	165,145	88,385	0	0	16,726	1,336,146	29	0
Glenn	0	0	0	236	0	0	912	29,490	0	0
Humboldt	1,790	1,790	0	31,671	16	0	4,998	118,588	156	0
Imperial	17,089	348	16,740	284	0	0	4,303	21,464	554	0
Inyo	30,618	225	30,393	0	53,029	0	1,654	14,083	0	0
Kern	367	(125)	492	46,139	0	66,950	23,805	292,915	629	0
Kings	174	148	27	7,556	0	0	3,225	260,725	0	0
Lake	5	(21)	27	808	1,506	12,896	326	9,139	0	0
Lassen	0	0	0	0	0	0	3,256	25,168	0	0
Los Angeles	178,234	23,451	154,783	145,585	17,416	47,775	882,759	25,417,696	4,680	0
Madera	305	0	305	6,707	0	0	6,675	141,226	0	0
Marin	4,897	63	4,834	4,990	0	0	5,137	226,328	0	0
Mariposa	6,275	(9)	6,285	0	0	0	1,127	775	0	0
Mendocino	2,302	(11)	2,313	2,219	0	0	5,437	263	0	0
Merced	71,026	6,132	64,894	2,159	455	0	4,161	155,581	85	0
Modoc	22,524	391	22,134	0	0	0	0	1,495	0	0
Mono	2,166	53	2,113	0	0	0	(22)	216	0	0
Monterey	11,581	(20)	11,601	28,976	0	407	7,042	718,051	714	0
Napa	(19)	(19)	0	617	0	0	17,442	5,302	0	0
Nevada	65	0	65	1,991	0	0	936	97,155	341	0
Orange/1/	475,626	50,980	424,646	236,689	5,753	4,267	117,779	3,454,304	1,888	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM

TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY

CALENDAR YEAR 1996

(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	463	104	359	10,479	0	0	3,123	21,089	0	0
Plumas	(91)	(91)	0	52	0	0	90	3,481	0	0
Riverside	2,092	267	1,824	172,476	16,090	0	39,626	1,572,376	388	0
Sacramento/1/	132,562	4,311	128,251	12,457	0	0	10,524	310,090	247	0
San Benito	213	213	0	0	0	0	0	182,980	0	0
San Bernardino	109,680	51,577	58,103	49,885	5,028	22,812	114,023	1,721,792	0	0
San Diego	77,359	898	76,460	232,422	2,198	174	98,097	2,466,503	19,846	0
San Francisco	61,992	2,472	59,520	142,134	0	0	9,838	951,721	10,976	0
San Joaquin	27	(34)	61	10,379	0	0	36,164	382,124	6,198	0
San Luis Obispo	21,493	3,621	17,872	5,815	174	0	10,028	249,555	0	0
San Mateo/1/	47,531	1,270	46,262	3,991	10,414	21	15,515	95,096	0	0
Santa Barbara/1/	6,301	94	6,208	52,265	0	0	7,177	235,346	956	0
Santa Clara	22,677	932	21,745	20,767	41	0	25,194	2,010,683	104,915	0
Santa Cruz/1/	(19)	(9)	(9)	21,489	2,234	0	3,885	23,239	1,140	0
Shasta	20,660	(19)	20,679	2,573	0	0	9,770	1,334	2,069	0
Sierra	0	0	0	0	0	0	(260)	993	0	0
Siskiyou	2,919	69	2,850	1,571	0	0	169	9,031	0	0
Solano/1/	164,673	1,786	162,887	480	0	4,287	235	218,517	412	0
Sonoma	8,458	344	8,113	101,223	0	0	10,212	170,194	0	0
Stanislaus	183,568	53,765	129,803	4,496	0	0	1,026	145,488	4,244	0
Sutter	58,902	2,779	56,123	661	312	0	12,236	32,965	0	0
Tehama	10,766	321	10,445	2,614	0	0	938	59,172	933	0
Trinity	411	8	403	83	0	0	823	7,955	0	0
Tulare	87,814	87,620	194	1,336	1,703	0	9,442	691,757	842	0
Tuolumne	(11)	0	(11)	222	0	0	0	13,191	0	0
Ventura	3,014	366	2,648	72,635	9,854	62	26,653	528,987	8,519	0
Yolo	381	258	123	2,767	0	0	1,246	18,532	1,064	0
Yuba	0	0	0	286	0	0	15,771	965	0	0
Not Reported	0	0	0	0	0	0	0	0	0	34,007,520

/1/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, 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 1996 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 21

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1996

(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	2,317,864	988,497	1,284,357	287,065	65,813	10,298	91,211	50,208	286,708	4,827	74,526
Alameda	87,252	32,756	47,591	11,004	2,630	437	3,573	1,763	12,399	13	3,439
Alpine	84	23	20	8	4	0	0	2	29	0	0
Amador	1,442	444	869	154	46	1	6	33	330	0	109
Butte	23,264	5,843	14,231	2,186	730	2	18	448	7,372	1	833
Calaveras	2,685	674	1,550	301	125	4	43	44	856	1	95
Colusa	1,776	428	965	114	48	0	4	41	425	0	37
Contra Costa	39,522	14,353	21,408	4,470	871	270	1,020	722	5,476	4	1,573
Del Norte	3,747	824	2,265	187	153	0	2	59	842	0	66
El Dorado	6,043	1,775	3,213	978	208	1	11	138	1,456	2	231
Fresno	104,820	44,789	60,514	10,899	2,844	465	4,609	1,714	14,392	3	2,378
Glenn	2,860	631	1,590	136	93	0	8	59	610	0	67
Humboldt	13,104	3,583	7,641	955	353	1	15	275	3,259	1	354
Imperial	18,967	6,816	10,890	1,424	718	3	21	455	2,363	1	235
Inyo	1,424	472	757	51	53	0	4	32	292	0	65
Kern	65,570	24,467	36,144	7,934	1,978	678	6,332	891	6,665	4	1,539
Kings	13,482	3,265	7,772	1,038	535	6	50	290	2,483	1	278
Lake	7,663	2,337	4,826	769	240	5	21	132	1,686	2	197
Lassen	2,558	506	1,487	145	109	0	4	47	454	0	92
Los Angeles	828,785	419,360	486,309	94,947	22,576	4,256	28,398	19,423	81,425	838	23,966
Madera	14,390	5,544	8,172	1,718	369	33	166	252	1,857	1	349
Marin	7,404	2,334	3,872	837	99	2	22	157	987	3	560
Mariposa	1,188	278	689	120	31	7	55	15	283	0	41
Mendocino	9,882	2,028	5,094	511	219	3	26	189	2,192	1	277
Merced	30,279	11,030	17,287	3,397	830	233	2,640	327	3,142	2	507
Modoc	1,276	216	721	25	62	0	1	22	287	0	79
Mono	335	104	123	15	10	0	1	12	71	0	1
Monterey	25,321	8,491	12,870	2,524	733	276	3,248	538	3,029	5	586
Napa	5,962	2,412	3,173	542	87	1	14	132	1,051	141	401
Nevada	4,281	1,642	2,377	513	114	0	4	83	991	0	283
Orange/2/	66,204	22,428	14,040	19,517	741	11	89	2,044	5,748	742	4,766

TABLE 21 (Continued)

MEDI-CAL PROGRAM
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1996

(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	9,651	3,891	5,504	1,121	317	1	10	222	1,375	1	655
Plumas	1,738	274	1,021	34	92	0	1	38	449	0	96
Riverside	89,014	43,588	48,302	11,251	2,646	385	3,562	2,464	11,788	5	2,798
Sacramento/2/	54,533	20,019	31,895	5,743	1,517	12	84	1,580	6,798	8	2,415
San Benito	2,935	1,023	1,552	237	74	3	48	72	654	0	71
San Bernardino	126,960	61,933	68,090	17,615	4,360	481	4,210	3,085	16,616	12	3,407
San Diego	160,462	72,901	88,248	22,755	4,100	8	61	4,130	21,060	11	5,622
San Francisco	67,103	21,816	38,117	7,436	2,012	598	3,701	1,086	11,677	15	2,631
San Joaquin	53,822	23,638	30,189	7,287	1,615	357	3,180	771	6,994	43	1,773
San Luis Obispo	12,949	3,984	7,194	1,169	469	95	1,922	188	2,116	3	657
San Mateo/2/	6,080	687	657	2,754	1	1	130	80	451	4	1,196
Santa Barbara/2/	6,293	1,250	885	2,596	4	1	6	195	304	2	2
Santa Clara	91,596	34,764	50,175	10,883	2,691	777	5,181	1,311	10,076	633	3,143
Santa Cruz/2/	5,880	1,584	1,056	1,524	42	2	19	185	765	1	131
Shasta	20,058	7,149	12,085	1,740	731	3	25	383	3,756	3	625
Sierra	239	36	143	8	10	0	3	4	44	1	33
Siskiyou	5,027	1,329	2,946	500	163	0	6	89	1,063	0	125
Solano/2/	3,716	243	202	2,446	2	0	1	21	149	4	2
Sonoma	22,330	7,338	11,676	1,981	607	101	1,422	378	3,553	1,003	921
Stanislaus	49,747	18,993	30,162	5,269	2,044	209	7,851	892	5,527	0	1,369
Sutter	7,306	2,413	4,363	933	215	1	6	173	1,042	0	214
Tehama	6,430	2,020	3,732	376	244	1	7	114	1,120	1	166
Trinity	1,502	702	937	117	37	25	185	16	83	0	36
Tulare	53,866	17,161	30,821	5,072	2,059	23	143	1,186	8,324	708	1,079
Tuolumne	4,090	841	2,382	465	149	27	571	51	809	4	103
Ventura	39,205	12,095	21,479	4,114	1,363	393	8,192	587	4,142	565	1,182
Yolo	11,180	3,812	6,233	1,716	363	1	7	213	2,208	6	460
Yuba	9,539	2,775	5,707	1,049	265	1	6	206	1,224	0	126
Not Reported	3,045	387	147	1,458	12	98	268	154	92	26	90

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.
/2/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, 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 22

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1996

(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	$10,364,438,029	$1,042,967,568	$1,424,892,991	$629,788,919	$49,888,827	$666,837,543	$148,124,302	$2,157,300,942	$277,295,371	$521,103,603	$2,248,718,888
Alameda	415,217,274	31,824,018	55,580,833	20,949,261	1,907,278	32,602,379	3,620,007	95,060,813	10,840,201	1,613,881	111,501,852
Alpine	287,192	32,166	35,071	16,315	2,595	0	50	117,750	26,591	0	13,855
Amador	7,048,352	414,413	801,382	305,465	27,702	64,642	3,282	1,371,034	314,978	0	3,177,711
Butte	83,699,881	5,356,286	13,861,552	3,692,185	463,638	128,586	19,170	21,644,047	6,644,921	12,002	21,426,115
Calaveras	8,776,373	669,373	1,324,528	553,119	90,855	128,895	49,860	1,737,906	749,539	74,104	2,257,067
Colusa	6,207,195	525,300	821,589	265,216	28,963	25,142	3,214	2,009,385	380,406	0	1,055,787
Contra Costa	178,926,397	14,000,744	22,909,283	8,823,081	570,400	11,353,279	1,134,392	35,527,857	4,906,378	421,704	51,749,628
Del Norte	11,659,815	745,561	2,308,514	363,209	104,795	736	3,024	2,491,496	1,059,527	0	1,657,438
El Dorado	22,939,272	2,157,778	3,569,173	1,710,934	137,570	22,298	11,017	6,308,517	1,291,366	217,343	5,699,487
Fresno	333,313,279	40,932,651	54,396,135	21,751,936	1,894,372	18,803,612	4,232,706	65,401,587	12,978,117	215,509	70,793,100
Glenn	11,018,174	796,147	1,678,835	258,500	61,532	8,594	2,876	3,137,923	541,990	0	2,025,937
Humboldt	52,836,162	4,032,229	9,364,319	1,630,074	240,922	53,932	15,698	14,275,557	2,910,993	139,989	9,794,342
Imperial	63,602,648	7,284,866	13,426,581	2,783,554	504,741	159,410	25,807	18,596,351	2,129,360	67,775	7,551,515
Inyo	6,074,184	463,393	704,274	104,057	30,771	(24,209)	8,379	1,822,297	240,425	0	1,934,672
Kern	230,054,309	24,783,710	33,218,709	15,350,493	1,291,802	29,972,025	8,139,361	33,974,214	4,816,638	410,376	50,494,229
Kings	46,648,393	3,708,371	6,138,481	2,119,859	367,947	357,505	49,851	12,004,361	2,128,429	110,369	7,557,896
Lake	27,602,844	2,240,463	4,736,390	1,438,344	155,810	345,492	22,135	7,634,123	1,430,735	208,505	4,801,053
Lassen	9,647,428	436,989	1,320,754	281,055	67,081	6,079	4,752	1,996,364	483,250	0	3,226,504
Los Angeles	3,757,817,865	457,727,303	576,935,424	233,045,283	19,057,544	316,555,930	80,334,464	799,777,664	86,428,987	86,233,050	658,627,765
Madera	45,319,185	5,319,877	7,148,139	3,887,215	229,509	1,268,371	157,348	8,582,491	1,438,240	93,198	10,093,918
Marin	38,729,653	2,399,853	7,747,385	1,239,816	63,621	128,157	21,032	5,238,992	976,843	348,569	15,879,844
Mariposa	4,560,405	291,173	614,185	266,966	21,549	223,978	61,921	431,848	210,397	0	1,581,771
Mendocino	37,439,046	2,536,560	5,089,445	789,123	152,970	278,620	30,421	8,626,700	2,227,155	55,091	7,344,600
Merced	89,828,442	10,046,877	14,833,673	7,704,387	677,967	6,894,884	2,174,701	13,288,207	2,463,451	330,943	14,691,749
Modoc	7,137,222	221,772	604,458	58,892	32,080	1,259	724	1,390,885	235,965	0	3,515,162
Mono	1,552,984	141,600	205,525	26,360	5,640	9,807	1,426	768,813	54,567	238	112,418
Monterey	125,127,060	9,895,213	11,305,735	5,244,321	462,526	28,398,621	3,260,139	33,768,673	2,704,711	513,866	17,545,034
Napa	47,776,532	2,316,263	3,462,969	871,561	56,368	39,956	14,068	8,377,266	776,156	18,247,518	11,520,571
Nevada	19,025,211	1,271,223	2,783,209	823,854	76,743	68,594	3,344	4,065,372	902,515	0	7,961,643
Orange/2/	438,414,140	33,243,050	15,444,084	43,749,212	976,125	912,711	177,503	102,652,905	5,833,093	75,102,235	133,115,644

TABLE 22 (Continued)

MEDI-CAL PROGRAM
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS
CALENDAR YEAR 1996

(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	44,570,352	3,836,671	6,109,086	2,081,241	204,940	106,279	9,725	9,910,652	1,267,758	146,068	16,452,021
Plumas	8,637,406	277,220	1,112,846	61,557	56,056	39,587	1,855	1,852,136	445,472	36,807	3,457,918
Riverside	376,318,391	48,787,498	51,031,525	25,191,542	1,939,102	20,792,403	4,311,840	93,173,389	10,289,098	329,973	84,486,553
Sacramento/2/	253,215,514	22,446,114	41,250,111	12,719,265	1,210,087	627,824	98,540	66,433,791	7,706,311	990,754	69,191,338
San Benito	12,244,668	1,143,617	1,537,892	475,866	57,000	201,449	47,066	3,835,027	507,525	0	2,310,279
San Bernardino	534,629,006	67,301,982	64,654,390	40,339,303	3,100,846	34,250,176	4,478,839	143,739,033	16,168,870	1,530,379	106,213,580
San Diego	693,651,199	78,682,549	116,684,943	48,000,584	3,022,791	459,061	86,214	168,372,131	21,909,906	1,083,875	176,715,289
San Francisco	374,840,873	22,077,711	54,567,485	14,779,112	1,497,136	29,083,158	3,418,395	41,172,490	12,404,366	1,692,854	138,592,927
San Joaquin	194,856,530	19,998,880	27,110,676	15,443,413	1,208,648	21,763,084	3,286,266	27,646,199	5,788,861	4,943,946	49,356,373
San Luis Obispo	53,599,633	4,195,912	8,415,923	1,872,784	289,898	3,180,462	1,810,647	7,018,749	1,691,332	299,791	18,280,657
San Mateo/2/	59,683,822	1,097,064	171,700	5,339,480	779	38,862	103,287	3,677,462	338,562	413,334	45,820,319
Santa Barbara/2/	21,144,105	2,328,272	265,082	4,890,762	2,612	151,072	8,927	10,038,121	200,414	250,589	68,110
Santa Clara	468,537,966	27,755,307	48,586,766	22,966,927	1,921,873	62,354,951	6,765,016	55,995,660	8,376,093	83,330,444	98,990,204
Santa Cruz/2/	27,399,405	2,269,104	1,021,184	2,680,314	24,776	233,969	19,635	12,925,146	611,346	149,420	2,420,463
Shasta	86,141,430	6,949,786	13,268,693	3,642,865	471,553	262,497	22,748	29,004,299	3,826,922	247,158	17,726,999
Sierra	2,684,731	36,694	165,940	11,222	5,740	1,452	2,472	366,167	31,598	108,633	1,829,938
Siskiyou	17,348,308	1,369,729	2,912,785	803,491	107,145	10,261	6,037	4,250,613	1,073,459	0	4,459,433
Solano/2/	9,535,537	334,333	98,291	5,068,182	1,130	(825)	140	2,166,096	152,361	409,970	24,689
Sonoma	193,389,998	6,627,371	13,760,021	3,366,543	401,322	6,296,253	1,236,755	17,832,110	3,207,282	103,306,719	25,426,079
Stanislaus	173,206,289	18,202,846	28,677,375	11,205,071	1,400,861	7,405,485	7,790,448	36,156,591	4,910,703	38,891	39,575,372
Sutter	26,828,813	2,635,606	4,655,951	1,695,857	131,196	9,879	5,017	7,959,982	1,011,921	0	5,392,025
Tehama	22,271,291	2,052,148	3,651,596	745,323	164,434	17,408	7,595	6,657,753	1,002,785	123,398	3,987,835
Trinity	6,753,124	623,603	993,887	194,752	25,151	899,939	179,985	1,645,535	87,589	9,342	1,525,847
Tulare	240,958,229	15,535,257	26,183,424	10,591,171	1,326,806	1,196,122	153,459	42,685,051	7,204,220	70,700,980	32,795,833
Tuolumne	17,026,374	904,756	2,187,549	738,067	97,152	638,571	677,604	2,076,112	810,279	421,006	5,746,468
Ventura	214,870,601	11,962,613	21,877,534	9,017,139	1,018,408	18,567,944	8,552,032	19,751,507	4,215,726	62,809,036	41,837,567
Yolo	38,945,912	3,461,863	5,588,172	3,957,550	258,966	27,920	1,668	7,101,716	2,264,233	689,034	11,510,689
Yuba	28,854,085	3,087,367	5,469,651	1,814,416	173,346	49,362	4,559	8,625,887	1,239,028	7,969	3,466,419
Not Reported	34,007,520	1,170,475	511,880	(8,524)	7,661	9,383,653	1,454,859	13,150,137	425,427	2,616,964	2,349,353

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.
/2/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, 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 23

MEDI-CAL PROGRAM
NUMBER OF PHYSICIANS AND HOSPITALS RECEIVING PAYMENTS BY COUNTY OF PROVIDER
JULY-SEPTEMBER 1996

COUNTY OF PROVIDER	PHYSICIANS AND PHYSICIAN GROUPS/1/ BY SPECIALTY						HOSPITALS
	TOTAL	GENERAL PRACTICE/ FAMILY PRACTICE	OB-GYN	INTERNAL MEDICINE	PEDIATRIC	ALL OTHER	
STATEWIDE	22,299	3,911	1,720	2,654	1,371	12,643	674
Alameda	954	157	67	146	63	521	16
Alpine	1	1	0	0	0	0	0
Amador	21	10	2	4	0	5	1
Butte	166	34	9	18	5	100	6
Calaveras	22	8	1	2	0	11	1
Colusa	5	2	0	0	0	3	1
Contra Costa	441	75	33	57	22	254	11
Del Norte	26	7	5	4	1	9	1
El Dorado	73	26	7	5	2	33	2
Fresno	532	96	45	57	59	275	13
Glenn	3	3	0	0	0	0	1
Humboldt	143	39	10	7	9	78	5
Imperial	61	10	6	6	6	33	3
Inyo	24	5	2	6	1	10	2
Kern	379	73	38	37	23	208	12
Kings	48	20	3	3	2	20	3
Lake	30	9	1	4	0	16	2
Lassen	9	4	1	1	1	2	1
Los Angeles	7,057	1,353	528	920	428	3,828	124
Madera	40	11	6	3	1	19	2
Marin	240	35	16	21	11	157	4
Mariposa	6	4	0	2	0	0	1
Mendocino	79	12	7	7	1	52	3
Merced	141	38	11	15	7	70	5
Modoc	8	5	1	0	0	2	2
Mono	4	1	0	0	0	3	1
Monterey	251	45	20	35	12	139	4
Napa	127	15	10	19	5	78	3
Nevada	60	12	8	9	1	30	2
Orange/2/	1,521	226	173	153	97	872	40
Placer	137	25	9	4	17	82	3
Plumas	16	11	0	0	0	5	4
Riverside	740	151	57	98	43	391	19
Sacramento/2/	593	100	58	44	34	357	13
San Benito	22	8	2	2	2	8	1
San Bernardino	661	143	57	85	55	321	21
San Diego	1,748	270	133	179	82	1,084	32
San Francisco	1,016	98	54	183	71	610	16
San Joaquin	531	72	23	35	29	372	8
San Luis Obispo	191	36	11	18	11	115	5
San Mateo	434	42	30	66	21	275	7
Santa Barbara	269	30	20	42	25	152	8
Santa Clara	866	124	79	117	80	466	15
Santa Cruz/2/	122	20	9	9	10	74	2
Shasta	199	53	16	19	9	102	5
Sierra	0	0	0	0	0	0	0
Siskiyou	41	9	1	4	1	26	2
Solano/2/	76	16	6	11	2	41	5
Sonoma	358	78	24	29	15	212	9
Stanislaus	316	73	26	29	21	167	6
Sutter	70	12	10	6	6	36	1
Tehama	34	10	2	3	0	19	1
Trinity	6	5	0	0	0	1	1
Tulare	203	50	15	25	16	97	8
Tuolumne	35	7	3	4	1	20	2
Ventura	535	95	46	65	41	288	12
Yolo	36	5	1	0	4	26	2
Yuba	25	9	1	5	1	9	1
Out of State/ Not Reported	547	23	17	31	17	459	191

/1/ The number of physicians practicing in a group is not known. Each group practice is counted as one physician.
/2/ Availability of data is limited for Orange, Sacramento, Santa Cruz, and Solano Counties. Paid claims and/or encounter data are not yet available; this table reflects only the claims processed by Electronic Data Systems (EDS) for providers in these counties.
Note: Figures may differ from previously published reports.
Source: State of California, Department of Health Services, Medi-Cal Provider Month of Service Files, July-September 1996 and Medi-Cal Program Hospital Expenditures, July-September 1996.

TABLE 24

MEDI-CAL PROGRAM
NUMBER OF SELECTED PROVIDERS RECEIVING MEDI-CAL PROGRAM PAYMENTS BY COUNTY OF PROVIDER
CALENDAR YEAR 1996

COUNTY OF PROVIDER	ACUPUNC-TURISTS	CHIRO-PRACTORS	DENTISTS	NURSING FACILITIES	OPTOM-ETRISTS	ORGANIZED OUTPATIENT CLINICS	PHARMACIES	PODIATRISTS	PSYCHOL-OGISTS
STATEWIDE	748	576	9,314	1,370	2,184	404	6,144	1,141	2,096
Alameda	58	12	401	76	102	13	234	66	94
Alpine	0	0	0	0	0	0	0	0	0
Amador	0	3	7	2	5	0	9	1	1
Butte	3	10	78	17	26	4	46	9	9
Calaveras	0	0	3	2	4	0	9	2	0
Colusa	0	0	5	1	1	1	4	0	0
Contra Costa	6	13	208	28	51	13	160	27	43
Del Norte	0	3	6	1	2	0	7	2	0
El Dorado	0	4	30	3	13	1	25	5	5
Fresno	3	38	212	42	56	11	175	30	33
Glenn	0	2	4	2	4	0	3	0	0
Humboldt	1	6	59	9	13	4	37	7	5
Imperial	0	1	13	3	12	2	17	3	1
Inyo	0	1	4	2	5	1	6	1	1
Kern	1	20	94	21	40	7	126	14	11
Kings	0	5	25	4	15	2	19	3	0
Lake	1	7	12	4	6	1	20	2	3
Lassen	0	2	9	2	3	0	8	1	0
Los Angeles	319	87	2,924	427	543	107	1,818	323	632
Madera	0	8	27	5	7	2	23	2	0
Marin	12	0	78	12	9	10	40	10	32
Mariposa	0	2	3	2	1	0	2	0	0
Mendocino	2	4	25	6	10	1	22	4	8
Merced	2	8	46	8	15	2	32	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	114	14	21	8	64	17	7
Napa	1	2	24	13	8	3	21	5	26
Nevada	1	3	27	7	9	1	17	6	3
Orange/1/	57	24	835	75	155	18	532	99	161
Placer	3	4	71	9	33	2	56	9	9
Plumas	1	1	3	4	4	1	9	0	0
Riverside	3	26	300	45	84	12	224	29	84
Sacramento/1/	20	26	295	45	97	19	212	39	34
San Benito	0	0	13	2	2	0	6	0	0
San Bernardino	12	25	398	55	101	8	254	31	84
San Diego	38	42	644	91	151	35	462	75	380
San Francisco	93	12	345	26	66	18	156	77	89
San Joaquin	6	22	150	29	48	6	123	21	20
San Luis Obispo	3	7	71	8	25	3	57	11	23
San Mateo	6	10	196	20	34	13	112	42	20
Santa Barbara	6	15	107	29	28	12	84	11	36
Santa Clara	43	9	527	61	90	16	260	53	52
Santa Cruz/1/	23	6	83	13	15	5	44	12	30
Shasta	2	12	67	8	27	3	37	5	15
Sierra	0	0	0	1	0	0	1	0	0
Siskiyou	0	2	15	3	6	3	14	1	0
Solano/1/	2	1	78	12	25	6	51	10	8
Sonoma	11	15	137	21	40	10	84	18	57
Stanislaus	1	25	129	24	41	3	92	10	17
Sutter	0	6	33	4	7	3	11	0	1
Tehama	0	0	13	3	6	1	10	1	0
Trinity	0	0	3	2	0	1	5	0	0
Tulare	0	18	79	20	31	2	71	7	9
Tuolumne	0	1	19	2	6	1	16	2	1
Ventura	5	16	181	27	51	3	148	27	39
Yolo	1	3	45	7	16	2	18	6	8
Yuba	0	1	9	2	7	2	8	3	0
Out of State/ Not Reported	0	0	26	7	5	2	38	0	1

/1/ Availability of data is limited for Orange, Sacramento, Santa Cruz, and Solano Counties. Paid claims and/or encounter data are not yet available; this table reflects only the claims processed by Electronic Data Systems (EDS) for providers in these counties.

Source: State of California, Department of Health Services, Report on Provider Participation in the Medicaid Program, Calendar Year 1996.

TABLE 25

MEDI-CAL PROGRAM
COUNTY POPULATION, MEDI-CAL ELIGIBLES, AND
MEDI-CAL ELIGIBLES AS A PERCENT OF POPULATION
CALENDAR YEAR 1996

(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	32,383,000	5,378,706	16.6 %				
Alameda	1,365,000	202,060	14.8	Placer	209,200	18,071	8.6
Alpine	1,190	237	19.9	Plumas	20,250	3,092	15.3
Amador	32,950	2,604	7.9	Riverside	1,393,300	207,260	14.9
Butte	196,500	43,271	22.0	Sacramento	1,132,100	236,691	20.9
Calaveras	36,900	5,074	13.8	San Benito	44,000	6,005	13.6
Colusa	18,250	3,739	20.5	San Bernardino	1,592,600	304,739	19.1
Contra Costa	877,900	93,860	10.7	San Diego	2,694,900	353,925	13.1
Del Norte	27,500	6,784	24.7	San Francisco	768,200	117,398	15.3
El Dorado	144,700	13,173	9.1	San Joaquin	533,200	125,147	23.5
Fresno	769,700	215,826	28.0	San Luis Obispo	230,700	23,888	10.4
Glenn	26,700	5,674	21.3	San Mateo	698,000	53,900	7.7
Humboldt	125,100	23,754	19.0	Santa Barbara	393,700	49,515	12.6
Imperial	141,200	40,046	28.4	Santa Clara	1,638,300	184,954	11.3
Inyo	18,250	2,861	15.7	Santa Cruz	243,600	28,029	11.5
Kern	624,100	149,888	24.0	Shasta	161,700	35,638	22.0
Kings	115,700	25,599	22.1	Sierra	3,370	429	12.7
Lake	54,900	13,662	24.9	Siskiyou	44,000	9,681	22.0
Lassen	32,650	5,018	15.4	Solano	372,400	46,793	12.6
Los Angeles	9,396,400	1,831,137	19.5	Sonoma	424,500	41,751	9.8
Madera	110,300	28,552	25.9	Stanislaus	418,500	95,641	22.9
Marin	239,500	13,333	5.6	Sutter	74,600	13,629	18.3
Mariposa	15,950	2,232	14.0	Tehama	54,400	11,918	21.9
Mendocino	84,800	17,679	20.8	Trinity	13,350	2,581	19.3
Merced	198,400	64,662	32.6	Tulare	353,600	105,788	29.9
Modoc	10,000	2,494	24.9	Tuolumne	51,600	6,949	13.5
Mono	10,500	786	7.5	Ventura	714,800	76,690	10.7
Monterey	360,200	55,743	15.5	Yolo	152,500	24,412	16.0
Napa	119,000	11,360	9.5	Yuba	60,500	19,697	32.6
Nevada	87,100	7,733	8.9				
Orange	2,649,800	285,655	10.8				

/1/ State of California, Department of Finance, Population Estimate as of July 1, 1996.
/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.
These figures may disagree with previously published figures.
Source: State of California, Department of Finance, County Population Estimates.

TABLE 26

MEDI-CAL PROGRAM
PERSONS CERTIFIED ELIGIBLE BY COUNTY AND RACE/ETHNICITY
OCTOBER 1996

(COHS, PHPs, AND FFS)

COUNTY	TOTAL	RACE/ETHNICITY					
		AMERICAN INDIAN/ALASKAN NATIVE	ASIAN/ PACIFIC ISLANDER	BLACK	HISPANIC	WHITE	NOT REPORTED
STATEWIDE	5,359,001	22,965	430,845	734,936	2,056,162	1,597,819	516,274
Alameda	200,048	533	27,385	78,452	30,623	40,299	22,756
Alpine	246	139	0	2	4	82	19
Amador	2,610	43	3	8	49	2,371	136
Butte	42,775	445	4,405	1,126	3,995	30,179	2,625
Calaveras	5,020	51	17	44	189	4,476	243
Colusa	3,312	64	37	16	1,706	1,258	231
Contra Costa	93,074	189	7,135	26,594	16,667	33,974	8,515
Del Norte	6,816	417	452	16	386	5,123	422
El Dorado	12,746	83	103	94	1,465	10,324	677
Fresno	210,259	565	33,761	19,513	93,624	42,783	20,013
Glenn	5,534	128	851	30	1,390	2,718	417
Humboldt	23,601	1,656	904	349	664	18,504	1,524
Imperial	39,947	386	83	862	27,651	6,243	4,722
Inyo	2,806	474	2	13	474	1,642	201
Kern	147,349	384	2,724	15,826	63,763	54,306	10,346
Kings	25,032	252	610	2,084	13,056	7,242	1,788
Lake	13,458	313	54	468	875	10,978	770
Lassen	4,884	187	21	70	382	4,002	222
Los Angeles	1,831,953	2,277	98,360	309,165	891,671	356,760	173,720
Madera	27,575	188	162	1,324	15,271	8,530	2,100
Marin	13,200	52	876	1,316	3,134	6,782	1,040
Mariposa	2,159	43	9	7	51	1,976	73
Mendocino	17,397	1,269	125	181	2,606	12,193	1,023
Merced	63,319	170	5,492	3,969	27,329	17,356	9,003
Modoc	2,467	100	16	5	370	1,874	102
Mono	827	96	1	2	155	531	42
Monterey	52,400	182	1,404	2,526	31,986	11,363	4,939
Napa	11,007	34	147	274	3,367	6,399	786
Nevada	7,613	120	51	34	330	6,670	408
Orange	280,059	228	45,691	7,796	121,259	73,847	31,238
Placer	17,850	186	158	238	2,009	14,028	1,231
Plumas	2,889	82	9	66	129	2,451	152
Riverside	217,110	1,264	5,785	25,409	87,540	81,318	15,794
Sacramento	239,115	1,451	37,771	48,494	32,027	99,993	19,379
San Benito	5,878	14	38	33	3,752	1,563	478
San Bernardino	316,388	1,762	10,786	50,131	119,851	114,637	19,221
San Diego	351,434	1,598	26,505	50,456	121,252	115,399	36,224
San Francisco	116,451	137	22,152	25,704	14,833	26,355	27,270
San Joaquin	123,048	518	23,230	13,634	33,570	39,138	12,958
San Luis Obispo	23,894	90	344	633	5,763	15,429	1,635
San Mateo	53,084	72	5,198	6,868	19,040	13,562	8,344
Santa Barbara	48,595	164	1,411	2,095	25,691	15,009	4,225
Santa Clara	181,184	633	38,128	9,883	66,838	38,058	27,644
Santa Cruz	26,877	62	442	564	11,567	11,467	2,775
Shasta	35,655	716	1,679	539	888	29,718	2,115
Sierra	425	10	0	6	7	367	35
Siskiyou	9,533	381	247	199	729	7,390	587
Solano	47,058	182	3,813	15,131	6,773	16,707	4,452
Sonoma	41,449	780	1,606	1,957	8,510	25,358	3,238
Stanislaus	94,031	349	7,118	3,555	28,797	46,834	7,378
Sutter	13,053	83	442	260	3,412	7,680	1,176
Tehama	11,392	141	58	97	1,925	8,637	534
Trinity	2,496	116	14	9	48	2,176	133
Tulare	104,321	380	5,665	2,718	56,441	31,128	7,989
Tuolumne	6,713	49	34	35	171	6,086	338
Ventura	76,478	209	1,580	2,604	40,734	23,781	7,570
Yolo	24,148	277	1,904	906	7,402	11,681	1,978
Yuba	18,959	191	3,847	546	1,971	11,084	1,320

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 04/24/97.

TABLE 27

MEDI-CAL PROGRAM
NUMBER OF PROVIDERS BY PROVIDER TYPE AND STATUS
CALIFORNIA, AS OF DECEMBER 31, 1996

PROVIDER TYPE	TOTAL	ACTIVE STATUS	INACTIVE STATUS	PENDING STATUS	DECEASED STATUS	REJECTED STATUS	SUSPENDED STATUS	INDIRECT STATUS	CONTRACT STATUS
TOTAL/1/	362,660	80,071	225,340	141	3,661	1	1,810	51,351	285
Adult Day Care Centers	122	84	37	1	0	0	0	0	0
Assistive Device and Sick Room Supplier	4,641	1,196	3,394	0	5	0	44	2	0
Audiologists	1,204	394	639	0	0	0	4	167	0
Blood Banks	19	7	12	0	0	0	0	0	0
Certified Nurse Midwife	293	149	68	0	0	0	1	75	0
Chiropractors	9,026	1,059	7,503	2	288	0	56	118	0
Certified Pediatric Nurse Practitioner and Certified Family Nurse Practitioner	208	82	72	1	0	0	0	53	0
Christian Science Practitioners	2	0	2	0	0	0	0	0	0
Clinical Laboratories	3,718	892	2,807	1	2	0	16	0	0
Fabricating Optical Laboratory	14	4	3	0	0	0	7	0	0
Dispensing Opticians	2,167	509	1,648	0	5	0	3	2	0
Hearing Aid Dispensers	1,642	394	1,128	0	4	0	25	91	0
Home Health Agencies	1,981	809	1,170	0	0	0	2	0	0
Community Hospital Outpatient Departments	9,377	2,341	7,018	2	0	0	16	0	0
Community Hospital Inpatient	11,151	2,713	8,159	3	0	0	15	0	261
Long Term Care	10,995	2,193	8,733	0	0	0	69	0	0
Nurse Anesthetists	696	138	383	0	2	0	4	169	0
Occupational Therapists	1,308	206	822	1	2	0	0	277	0
Optometrists	7,212	2,578	3,906	1	129	0	19	579	0
Orthotists	177	53	40	0	0	0	0	84	0
Physicians Group	21,059	7,367	13,613	4	15	0	58	2	0
Optometric Group	204	182	22	0	0	0	0	0	0
Pharmacies/Pharmacist	22,557	6,482	16,006	2	3	0	64	0	0
Physical Therapists	6,977	432	5,939	0	109	0	5	492	0
Physicians	166,474	33,899	80,612	39	2,954	0	1,142	47,828	0
Podiatrists	4,346	1,539	2,518	0	68	1	54	166	0
Portable X-Ray Laboratory	223	39	174	0	2	0	8	0	0
Prosthetists	449	206	96	0	0	0	3	144	0
Ground Medical Transportation	3,279	734	2,526	0	2	0	17	0	0
Psychologists	12,898	3,509	8,628	1	43	0	85	632	0
Certified Acupuncturist	2,302	1,093	1,144	1	6	0	13	45	0
Genetic Disease Testing	2	1	1	0	0	0	0	0	0
Rural Health Clinics	126	0	126	0	0	0	0	0	0
P.L. 95-210 Rural Health Clinics and Federally Qualified Health Centers (FQHCs)	605	448	150	6	0	0	1	0	0
HCBS-Certified Home Health Agency	1	0	1	0	0	0	0	0	0
Speech Therapists	2,351	415	1,504	1	5	0	2	424	0
Air Ambulance Transportation Services	91	63	28	0	0	0	0	0	0
Certified Hospice Service Per AB 4249	255	185	70	0	0	0	0	0	0
Free Clinics	26	6	20	0	0	0	0	0	0
Community Clinics	1,269	382	883	0	0	0	4	0	0
Chronic Dialysis Clinics	598	281	317	0	0	0	0	0	0
Multispecialty Clinics	3	1	2	0	0	0	0	0	0
Surgical Clinics	292	187	105	0	0	0	0	0	0
Exempt from Licensure Clinics	100	44	55	0	0	0	0	1	0
Rehabilitation Clinics	154	111	43	0	0	0	0	0	0
Employer/Employee Clinics	2	0	2	0	0	0	0	0	0
County Clinics Not Associated with Hospital	134	45	89	0	0	0	0	0	0
Birthing Centers - Primary Care Clinics	1	0	1	0	0	0	0	0	0
Clinic - Otherwise Undesignated	389	0	389	0	0	0	0	0	0
Outpatient Heroin Detoxification Center	58	39	19	0	0	0	0	0	0
Alternative Birth Centers - Specialty Clinics	8	8	0	0	0	0	0	0	0
Breast Cancer Early Detection Program	318	174	143	0	0	0	1	0	0
Expanded Access to Primary Care Clinics	176	171	5	0	0	0	0	0	0
Local Education Agency	265	239	25	1	0	0	0	0	0
EPSDT Supplemental Provider	136	107	0	29	0	0	0	0	0
Health Access Program	17	16	0	1	0	0	0	0	0
County Hospital Inpatient	668	146	498	0	0	0	0	0	24
County Hospital Outpatient	205	74	131	0	0	0	0	0	0
Community Hospital-LTC	4	0	4	0	0	0	0	0	0
Pediatric Subacute Care-LTC	6	6	0	0	0	0	0	0	0
Mental Health Inpatient	245	208	37	0	0	0	0	0	0
AIDS Waiver Provider	57	33	24	0	0	0	0	0	0
California Children's Service/Genetically Handicapped Person Program - Non-Institutional	35,986	4,973	30,903	43	5	0	62	0	0
California Children's Service/Genetically Handicapped Person Program - Institutional	710	424	284	1	0	0	1	0	0
Out of State	6,647	0	6,647	0	0	0	0	0	0
Miscellaneous	4,034	1	4,012	0	12	0	9	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 12/31/96.

SECTION 8

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 28

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 5.38 million persons per month in 1996. This reflects a decrease of 42,556 or 0.8 percent from 1995 and an increase of 2.3 million or 76.7 percent from 1987.

The large increase in Capitated Health System eligibles is mainly due to Managed Care Expansion. This increase to some extent contributed to the decrease in Public Assistance, Medically Needy, and Medically Indigent Fee-For-Service eligibles.

Beginning January 1995, COHS data are no longer included in the FFS data.

Public Assistance FFS eligibles averaged 3 million persons per month in 1996, a decrease of 11.0 percent from 1995.

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Medically Needy eligibles averaged 499,471 persons per month in 1996, a decrease of 8.0 percent from 1995.

Medically Indigent (MI) eligibles averaged 228,084 persons per month in 1996, an 8.4 percent decrease from 1995.

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 and 1996 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 279,284 persons per month in 1996, a decrease of 1.2 percent from the previous year.

The Refugee/Entrant program averaged 2,913 persons per month in 1996, a decrease of 48.4 percent from 1995.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs averaged 197,395 persons per month in 1996, compared to 174,015 in 1995.

The 60-Day Postpartum program averaged 1,870 persons per month in 1996, a difference of 110 eligibles from the previous year.

The Dialysis and Total Parenteral Nutrition programs are small, with an average of 35 eligibles per month in 1996, compared to 34 in 1995.

The Qualified Medicare Beneficiary program averaged 2,769 eligibles per month in 1996, an increase of 24.0 percent from 1995.

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

The Medi-Cal Tuberculosis program averaged 602 eligibles per month in 1996, an increase of 59.7 percent from 1995.

TABLE 28

MEDI-CAL PROGRAM

ESTIMATED AVERAGE MONTHLY ELIGIBLES BY PROGRAM

CALENDAR YEARS 1987-1996

(RHF, COHS, PHPs, AND FFS)

PROGRAM	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996
TOTAL	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	5,378,706
County Organized Health Systems (COHS)	23,894	50,063	53,337	58,361	65,149	71,988	80,671	118,078	183,884	398,493
Prepaid Health Plans (PHPs)	239,985	239,514	217,161	238,077	290,593	328,796	376,551	507,957	604,213	764,694
Fee-For-Service (FFS)	3,044,808 /a/	3,129,173 /a/	3,323,154 /a/	3,755,839 /a/	4,377,669 /a/	4,853,284 /a/	5,204,359 /a/	5,390,717 /a/	4,633,165 /b/	4,215,519 /b/
Public Assistance	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	3,003,037
Medically Needy	327,734	329,760	329,534	354,674	403,378	480,429	560,808	576,531	543,081	499,471
Medically Indigent	106,307	115,975	128,164	154,133	178,157	209,366	236,765	253,875	249,073	228,084
IRCA Aliens	NA	761	13,336	29,522	49,547	62,441	40,944	13,459	181	60
OBRA Aliens	NA	3,093	55,791	129,997	214,075	281,325	309,076	300,469	282,743	279,284
Refugee/Entrant	7,869	9,512	10,067	10,287	10,794	8,333	8,515	7,311	5,647	2,913
100 Percent Poverty	NA	NA	NA	NA	69	1,635	4,770	9,085	15,610	24,033
133 Percent Poverty	NA	NA	NA	5,970	22,119	38,394	53,734	64,137	75,087	84,560
185 Percent Poverty (renamed Income Disregard)	NA	NA	8,650	35,586	49,317	62,290	70,140	74,054	82,058	87,705
200 Percent Poverty	NA	NA	38	2,122	3,128	3,512	3,441	1,997	1,260	1,097
60-Day Postpartum	NA	NA	2,732	3,428	2,224	1,986	2,036	1,790	1,760	1,870
Dialysis	72	56	56	57	58	51	35	29	25	25
Total Parenteral Nutrition	9	8	7	9	9	9	10	9	9	10
Qualfied Medicare Beneficiary	NA	NA	NA	1,151	1,948	2,107	2,602	1,587	2,233	2,769
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	NA	NA	99	6,842	INA	INA
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	NA	NA	5	377	602

INA Information Not Available.

NA Not Applicable.

/a/ Includes RHF, COHS, PHPs, and FFS.

/b/ Includes FFS Only.

Note: IRCA = Immigration Reform and Controt Act; OBRA Omnibus Budget Reconciliation Act; RHF = Redwood Health Foundation.

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 MEDSSUM File dated April 1997.

MEDI-CAL PAYMENTS - TABLE 29

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 1996, Medi-Cal program payments ran $11.9 billion. This reflects an increase of $764.9 million or 6.9 percent from 1995 and an increase of $7.0 billion or 141.1 percent from 1987.

Beginning January 1995, COHS data are no longer included in the FFS data.

Public Asistance, the largest group in terms of total FFS expenditures, received $5.8 billion in services during 1996, a 3.7 percent increase from 1995.

The Medically Needy group received $3.1 billion in services during 1996, an increase of 1.2 percent from 1995.

Medically Indigents received a total of $362.8 million in services during 1996, compared to $371.9 million or a 2.4 percent decrease in 1995.

The Aliens and Refugee/Entrants received a total of $643.0 million in services during 1996, a decrease of 2.5 percent from 1995. 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 and 1996 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 $325.1 million during 1996, a 16.0 percent increase from the previous year.

The 60-Day Postpartum program ran $1.6 million during 1996, a 16.6 percent decrease from 1995.

The Dialysis and Total Parenteral Nutrition programs ran $317 thousand during 1996, a 76.5 percent decrease from 1995.

The Qualified Medicare Beneficiary program ran $1.6 million in 1996, compared to $1.4 million in 1995, or a 16.5 percent increase.

The Presumptive Eligibility for Pregnant Women program ran $45.8 million during 1996 and $25.8 million in 1995, or a 77.6 percent increase.

The Medi-Cal Tuberculosis program ran $179 thousand during 1996, compared to $74 thousand in 1995, or 140.9 percent increase.

The increase in expenditures in 1996 from previous years is attributable to a higher rate of use by beneficiaries, reimbursement rate increases to providers, inflation, and changes in services.

TABLE 29

MEDI-CAL PROGRAM

ESTIMATED TOTAL ANNUAL PAYMENTS BY PROGRAM

CALENDAR YEARS 1987-1996

(In thousands)

(RHF, COHS, PHPs, AND FFS)

PROGRAM	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996
TOTAL	$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	$11,897,872
County Organized Health Systems (COHS)	$31,996	$68,094	$75,545	$91,531	$104,819	$118,393	$135,052	$218,148	$303,616	$667,482
Prepaid Health Plans (PHPs)	$204,563	$211,919	$206,856	$249,669	$316,880	$367,576	$444,010	$599,794	$705,719	$865,952
Fee-For-Service (FFS)	$4,935,659 /a/	$5,498,107 /a/	$5,907,340 /a/	$6,821,766 /a/	$8,041,267 /a/	$9,465,554 /a/	$10,368,797 /a/	$10,825,560 /a/	$10,123,681 /b/	$10,364,438 /b/
Public Assistance	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	5,836,519
Medically Needy	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	3,113,555
Medically Indigent	253,695	300,376	267,442	245,784	258,141	298,723	330,357	364,537	371,857	362,780
IRCA Aliens	NA	143	37,352	83,024	120,620	152,720	105,299	30,138	6,130	816
OBRA Aliens	NA	705	187,517	391,422	546,228	699,691	720,469	647,513	629,846	629,894
Refugee/Entrant	35	11,320	13,148	14,159	16,477	19,092	24,829	24,654	23,214	12,302
100 Percent Poverty	NA	NA	NA	NA	/c/	358	1,678	3,352	5,499	8,960
133 Percent Poverty	NA	NA	NA	789	9,257	17,914	26,325	33,229	39,105	45,586
185 Percent Poverty (renamed Income Disregard)	NA	NA	13,975	104,268	149,887	177,982	201,842	208,727	232,316	268,289
200 Percent Poverty	NA	NA	0	5,521	11,466	11,275	11,156	6,309	3,374	2,222
60-Day Postpartum	NA	NA	1,771	1,765	1,668	1,735	2,093	1,704	1,900	1,585
Dialysis	392	340	465	260	363	342	269	364	1,019	157
Total Parenteral Nutrition	204	198	307	316	201	280	281	181	329	160
Qualfied Medicare Beneficiary	NA	NA	NA	104	300	504	899	1,407	1,398	1,630
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	NA	NA	3	10,985	25,782	45,797
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	NA	NA	/c/	74	179
Not Reported	/d/	/d/	3,167	5,372	5,868	5,542	6,196	20,788	79,673	34,008

INA Information Not Available.

NA Not Applicable.

/a/ Includes COHS, PHPs, and FFS.

/b/ Includes FFS Only.

/c/ Less than 0.500.

/d/ Excluded from Total 1987-1988.

Note: IRCA = Immigration Reform and Controt Act; OBRA Omnibus Budget Reconciliation Act; RHF = Redwood Health Foundation.
Payments 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; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1997.

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APPENDICES

Appendix A Definitions of Terms

Appendix B Aid Codes Master Chart

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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: (X-over)	Refers to a claim that has been processed and paid in part by Medicare 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.

MEDSSUM File: An eligibility summary file that summarizes the number of eligibles by aid code and county on a monthly basis for each month of eligibility.

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.

Two-Plan Model: Two-Plan Contractors now provide or are preparing to provide medical services to nearly all Medi-Cal recipients in 12 counties (Alameda, Contra Costa, Fresno, Kern, Los Angeles, Riverside, San Bernardino, San Francisco, San Joaquin, Santa Clara, Stanislaus and Tulare).

The Department will contract with only two manged care plans. One plan will be a locally developed, comprehensive managed care system referred to as the Local Initiative. The other plan will be a non-governmentally operated Health Management Organization referred to as the Commercial Plan.

Vendor: See Provider.

APPENDIX B

AID CODES MASTER CHART

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Aid Codes Master Chart

The following aid codes identify the types of services for which different Medi-Cal/CMSP recipients are eligible

Code	Benefits	SOC	Program/Description
0A	Full	No	Refugee Cash Assistance (FF). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision. This population is the same as aid code 01, except that they are exempt from grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
01	Full	No	Refugee Cash Assistance (FFP). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision.
02	Full	Y/N	Refugee Medical Assistance/Entrant Medical Assistance (FFP). Covers refugees and entrants who need Medi-Cal and who do not qualify for or want cash assistance.
03	Full	No	Adoption Assistance Program (AAP) (FFP). A cash grant program to facilitate the adoption of hard-to-place children who would require permanent foster care placement without such assistance
04	Full	No	Adoption Assistance Program/Aid for Adoption of Children (AAP/AAC) (non-FFP). Covers cash grant children receiving Medi-Cal by virtue of eligibility to AAP/AAC benefits.
07	Restricted to emergency services	No	Asset Waiver Program. Infant - Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides emergency services only for infants up to age one year and continues beyond one year when inpatient status, which began before first birthday, continues and family income is between 185 percent and 200 percent of the federal poverty level (State-only program).
08	Full	No	Entrant Cash Assistance (ECA) FFP). Provides ECA benefits to Cuban/Haitian entrants, including unaccompanied children who are eligible during their first eight months in the United States. (For entrants, the month begins with their date of parole). Unaccompanied children are not subject to the eighth-month limitation provision.
10	Full	No	SSI/SSP Aid to the Aged (FFP). A cash assistance program administered by the SSA which pays a cash grant to needy persons 65 years of age or older.
13	Full	Y/N	Aid to the Aged - LTC (FFP). Covers persons 65 years of age or older who are medically needy and in LTC status.
14	Full	No	Aid to the Aged - Medically Needy (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.

Code	Benefits	SOC	Program/Description
16	Full	No	Aid to the Aged - Pickle Eligibles (FFP). Covers persons 65 years of age or older who were eligible for and receiving SSI/SSP and Title II benefits concurrently in any month since April 1977 and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/PSS if their Title II cost-of-living increases were disregarded. These persons are eligible for Medi-Cal benefits as public assistance recipients accordance with the provisions in the Lynch v. Rank lawsuit.
17	Full	Yes	Aid to the Aged - Medically Needy, SOC (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC required.
18	Full	No	Aid to the Aged - IHSS (FFP). Covers aged IHSS cash recipients, 65 years of age or older who are not eligible for SSI/SSP cash benefits.
20	Full	No	SSI/SSP Aid to the Blind (FFP). A cash assistance program, administered by the SSA, which pays a cash grant to needy blind persons of any age.
23	Full	Y/N	Aid to the Blind - LTC Status (FFP). Covers persons who meet the federal criteria for blindness, are medically needy, and are in LTC status.
24	Full	No	Aid to the Blind - Medically Needy (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.
26	Full	No	Aid to the Blind - Pickle Eligibles (FFP). Covers persons who meet the federal criteria for blindness and are covered by the provisions of the Lynch v. Rank lawsuit. (See aid code 16 for definition of Pickle eligibles).
27	Full	Yes	Aid to the Blind - Medically Needy, SOC (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC is required of the beneficiaries.
28	Full	No	Aid to Blind - IHSS (FFP). Covers persons who meet the federal definition of blindness and are eligible for IHSS. (See aid code 18 for definition of eligibility for IHSS).
3A	Full	No	California Alternative Assistance Program - Aid to Families with Dependent Children, Family Group (CAAP-AFDC [FG]) (FFP). Individuals who have declined a federal cash grant and instead will receive child care assistance and Medi-Cal.
3C	Full	No	California Alternative Assistance Program - Aid to Families with Dependent Children, Unemployed Parent Group (CAAP-AFDC [U]) (FFP). Individuals who have declined a federal cash grant and instead will receive child care assistance and Medi-Cal.
3G	Full	No	AFDC-FG (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity, or death of either parent, who does not meet all federal requirements, but State rules require the individual(s) be aided. This population is the same as aid code 32, except that they are exempt from the AFDC Cash Grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
3H	Full	No	AFDC-FU (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home. This population is the same as aid code 33, except that they are exempt from the AFDC grant reduction on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.

Code	Benefits	SOC	Program/Description
3P	Full	No	AFDC Unemployed Parent (FFP cash) - Aid to Families in which a child is deprived because of the unemployment of a parent living in the home and the unemployed parent meets all federal AFDC eligibility requirements. This population is the same as aid code 35, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
3R	Full	No	Aid to Families with Dependent Children (AFDC) - Family Group (FFP) in which the child(ren) is deprived because of the absence, incapacity or death of either parent. This population is the same as aid code 30, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
30	Full	No	AFDC-FG (FFP). Provides aid to families with dependent children in a family group in which the child(ren) is deprived because of the absence, incapacity or death of either parent.
32	Full	No	AFDC-FG (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity, or death of either parent, who does not meet all federal requirements, but State rules require the individual(s) be aided.
33	Full	No	AFDC - Unemployed Parent (State-only program) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home.
34	Full	No	AFDC-MN (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant but are eligible for Medi-Cal only.
35	Full	No	AFDC-U (FFP cash). Provides aid to families in which a child is deprived because of unemployment of a parent living in the home and the unemployed parent meets all federal AFDC eligibility requirements.
36	Full	No	Aid to Disabled Widow/ers (FFP). Covers persons who began receiving Title II SSA before age 60 who were eligible for and receiving SSI/SSP and Title II benefits concurrently and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/SSP if their Title II disabled widow/ers reduction factor and subsequent COLAs were disregarded.
37	Full	Yes	AFDC-MN (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC required of the beneficiaries.
38	Full	No	Continuing Medi-Cal Eligibility (FFP). Edwards v. Kizer court order provides for uninterrupted, no SOC Medi-Cal benefits for families discontinued from AFDC until the family's eligibility or ineligibility for Medi-Cal only has been determined and an appropriate *Notice of Action* sent.
39	Full	No	Initial Transitional Medi-Cal (TMC) - Six Months Continuing Eligibility (FFP). Provides coverage to certain clients subsequent to AFDC cash grant discontinuance due to increased earnings, increased hours of employment or loss of the $30 and 1/3 disregard.

Code	Benefits	SOC	Program/Description
4C	Full	No	AFDC-FC 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.
4K	Full	No	Emergency Assistance (EA) Program (FFP). Covers juvenile probation cases placed in foster care.
40	Full	No	AFDC-FC/Non-Fed (State FC). Provides financial assistance for those children who are in need of substitute parenting and who have been placed in foster care.
42	Full	No	AFDC-FC/Fed (FFP). Provides financial assistance for those children who are in need of substitute parenting and who have been place in foster care.
44	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnant (FFP) United States Citizen/Permanent Resident Alien/PRUCOL Alien. Provides family planning, pregnancy-related and postpartum services for any female if family income is at or below 200 percent of the federal poverty level.
45	Full	No	Children Supported by Public Funds (FFP). Children whose needs are met in whole or in part by public funds other than AFDC-FC.
47	Full	No	Income Disregard Program (FFP). Infant - United States Citizen, Permanent Resident Alien/PRUCOL Alien. Provides full Medi-Cal benefits to infants up to one year old and continues beyond one year when inpatient status, which began before first birthday, continues and family income is at or below 200 percent of the federal poverty level.
48	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnant - Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides family planning, pregnancy-related and postpartum services for any age female if family income is at or below 200 percent of the federal poverty level. Routine prenatal care is non-FFP. Labor, delivery and emergency prenatal care are FFP.
49	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnancy - Amnesty Alien. Provides family planning, pregnancy-related and postpartum services to any age female with income at or below 200 percent of the federal poverty level.
5F	Restricted to pregnancy-related services	Y/N	OBRA Aliens. Covers non-immigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.
5K	Full	No	Emergency Assistance (EA) Program (FFP). Covers child welfare cases placed in EA foster care.
50	Restricted to CMSP emergency services only	Y/N	CMSP. MI - Restricted. Covers persons who have undetermined immigration status.
51 Expires 12/31/94	Full	Y/N	IRCA Aliens - Full Medi-Cal benefits. Pre-1982 Amnesty Alien (ABD or under 18).

Code	Benefits	SOC	Program/Description
52 Expires 12/31/94	Restricted to pregnancy and emergency services	Y/N	IRCA Aliens - Restricted Medi-Cal Benefits. Pre-1982 Amnesty Alien (Not ABD, not under 18).
53	Restricted to LTC services only	Y/N	Medically Indigent - LTC (Non-FFP). Covers persons age 21 or older and under 65 years of age who are residing in a Skilled Nursing or Intermediate Care Facility (SNF or ICF) and meet all other eligibility requirements of medically indigent, with or without SOC.
54	Full	No	Four-Month Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the increased collection of child/spousal support payments but eligible for Medi-Cal only.
55	Restricted to pregnancy and emergency services	No	Aid to Undocumented Aliens in LTC Not PRUCOL. Covers undocumented aliens in LTC not Permanently Residing Under Color Of Law (PRUCOL). LTC services: State-only funds; emergency and pregnancy-related services: State and federal funds. Beneficiaries will remain in this aid code even if they leave LTC.
56 Expires 12/31/94	Full	Y/N	IRCA. Amnesty Aliens SWA/RAWS (ABD or under 18). Covers amnesty SAWS/RAWS who are aged, blind, disabled or under 18 years old and otherwise eligible.
57 Expires 12/31/98	Restricted to pregnancy and emergency services	Y/N	IRCA. Amnesty Aliens SWA/RAWS (Not ABD, not under 18). Covers amnesty SAWS/RAWS who are 18 through 64 years old, not blind or disabled, and who are otherwise eligible for Medi-Cal.
58	Restricted to pregnancy and emergency services	Y/N	OBRA Aliens. Covers nonimmigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.
59	Full	No	Additional TMC - Additional Six Months Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the expiration of the $30 plus 1/3 disregard, increased earnings or hours of employment, but eligible for Medi-Cal only, may receive this extension of TMC.
6A	Full	No	Disabled Adult Child(ren) (DAC)/Blindness (FFP).

Code	Benefits	SOC	Program/Description
6C	Full	No	Disabled Adult child(ren) (DAC)/Disabled (FFP).
60	Full	No	SSI/SSP Aid to the Disabled (FFP). A cash assistance program administered by the SSA that pays a cash grant to the needy persons who meet the federal definition of disability.
63	Full	Y/N	Aid to the Disabled - LTC Status (FFP). Covers persons who meet the federal definition of disability who are medically needy and in LTC status.
64	Full	No	Aid to the Disabled - Medically Needy (FFP). Covers persons who meet the federal definition of disability and do not wish or are not eligible for cash grant, but are eligible for Medi-Cal only.
65	Full	Y/N	Aid to the Disabled Substantial Gainful Activity/Aged, Blind, Disabled - Medically Needy IHSS (non-FFP). Covers persons who (a) were once determined to be disabled in accordance with the provisions of the SSI/SSP program and were eligible for SSI/SSP but became ineligible because of engagement in substantial gainful activity as defined in the Title XVI regulations. They must also suffer from the physical or mental impairment that was the basis of the disability determination or (b) are aged, blind or disabled medically needy and have the costs of IHSS deducted from their monthly income.
66	Full	No	Aid to the Disabled Pickle Eligibles (FFP). Covers persons who meet the federal definition of disability and are covered by the provisions of the Lynch v. Rank lawsuit. No age limit for this aid code.
67	Full	Yes	Aid to the Disabled - Medically Needy, SOC (FFP). (See aid code 64 for definition of Disabled - MN). SOC is required of the beneficiaries.
68	Full	No	Aid to the Disabled IHSS (FFP). Covers persons who meet the federal definition of disability and are eligible for IHSS. (See aid codes 18 and 65 for definition of eligibility for IHSS).
69	Restricted to emergency services	No	Income Disregard Program. Infant (FFP) - Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides emergency services only for infants under 1 year of age and beyond 1 year when inpatient status, which began before 1st birthday, continues and family income is at or below 200 percent of the federal poverty level.
7A	Full	No	100 percent Program. Child (FFP) - United States Citizen, Lawful Permanent Resident/PRUCOL/(IRCA Amnesty Alien [ABD or Under 18]). Provides full benefits to otherwise eligible children born after September 30, 1983, ages 6 to 19 and beyond 19 when inpatient status began before the 19th birthday and family income is at or below 100 percent of the federal poverty level.

Code	Benefits	SOC	Program/Description
7C	Restricted to pregnancy and emergency services	No	100 Percent Program. Child-Undocumented/Nonimmigrant Status/[IRCA Amnesty Alien (Not ABD or Under 18)]. Covers emergency and pregnancy related services to otherwise eligible children born after September 30, 1983, ages 6 to 19 and beyond 19 when inpatient status begins before the 19th birthday and family income is at or below 100 percent of the federal poverty level.
7F	Valid for pregnancy verification office visit	No	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.
7G	Valid only for ambulatory prenatal care services	No	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.
7H	Valid only for TB-related outpatient services	No	Medi-Cal Tuberculosis (TB) Program. Covers individuals who are TB -infected for TB-related outpatient services only.
7M	Valid for Minor Consent Services	Y/N	Minor Consent Program (Non-FFP). Covers minors aged 12 and under 21. Limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, and family planning.
7N	Valid for Minor Consent Services	No	Minor Consent Program (FFP). Covers pregnant female minors under age 21. Limited to services related to pregnancy and family planning.
7P	Valid for Minor Consent Services	Y/N	Minor Consent Program (Non-FFP). Covers minors age 12 and under 21. Limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, family planning, and outpatient mental health treatment,
7R	Valid for Minor Consent Services	Y/N	Minor Consent Program (FFP). Covers minors under age 12. Limited to services related to family planning and sexual assault.
70	Restricted to pregnancy-related services	No	Asset Waiver Program (Pregnant). United States 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 between 185 percent and 200 percent of the federal poverty level (State-only Program).
71	Restricted to dialysis and supplemental dialysis-related services	Y/N	Medi-Cal Dialysis Only Program/Medi-Cal Dialysis Supplement Program (DP/DSP) (Non-FFP). Covers persons of any age who are eligible only for dialysis and related services.

Code	Benefits	SOC	Program/Description
72	Full	No	133 Percent Program, Child-United States Citizen, Permanent Resident Alien/PRUCOL Alien (FFP). Provides full Medi-Cal benefits to children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
73	Restricted to parenteral hyperali-mentation-related expenses	Y/N	Medi-Cal TPN Only Program/Medi-Cal TPN Supplement Program (Non-FFP). Covers persons of any age who are eligible for parenteral hyperalimentation and related services and persons of any age who are eligible under the Medically Needy or Medically Indigent Programs.
74	Restricted to emergency services	No	133 Percent Program (OBRA). Child Undocumented/Nonimmigrant Alien (but otherwise eligible) (FFP). Provides emergency services only for children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
75	Restricted to pregnancy-related services	No	Asset Waiver Program (Pregnant). 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 between 185 percent and 200 percent of the federal poverty level (State-Only Program).
76	Restricted to 60-day postpartum services	No	60-Day Postpartum Program (FFP). Provides Medi-Cal at no SOC to women who, while pregnant, were eligible for, applied for, and received Medi-Cal benefits. They may continue to be eligible for all postpartum services and family planning. This coverage begins on the last day of pregnancy and ends the last day of the month in which the 60th day occurs.
79	Full	No	Asset Waiver Program (Infant). Provides full Medi-Cal benefits to infant up to 1 year, and beyond 1 year when inpatient status, which began before 1st birthday, continues and family income is between 185 percent and 200 percent of the federal poverty level. (State-Only Program).
8F	CMSP services only (companion aid code)	Y/N	CMSP Companion Aid Code. Covers persons eligible for certain benefits under the Medi-Cal Program and other benefits under CMSP. 8F is used in conjunction with Medi-Cal aid codes 52, 53 and 57 to facilitate the payment of claims covered benefits. 8F will appear as a special aid code and will entitle the eligible client to full-scope CMSP coverage for those services not covered by Medi-Cal.
8G	Full	No	Qualified Severely Impaired Working Individual Program Aid Code. Allows recipients of the Qualified Severely Impaired Working Individual Program to continue their Medi-Cal eligibility.
8H	Family P.A.C.T. (SOFP services only) No Medi-Cal	N/A	Family P.A.C.T. (also known as SOFP - State Only Family Planning). Comprehensive family planning services for low income residents of California with no other source of health care coverage.
80	Restricted to Medicare expenses	No	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.

Code	Benefits	SOC	Program/Description
81	Full	Y/N	MI-Adults Aid Paid Pending (Non-FFP). Aid Paid Pending for persons over 21 but under 65 with or without SOC.
82	Full	No	MI-Person (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medical indigence. Covers persons until the age of 22 who were in an institution for mental disease before age 21. Persons may continue to be eligible under aid code 82 until age 22 if they have filed for a State hearing.
83	Full	Yes	MI-Person SOC (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medically indigent.
84	CMSP services only no Medi-Cal	No	CMSP, MI - A (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years, who meet the eligibility requirements of medically indigent.
85	CMSP services only no Medi-Cal	Yes	CMSP, MI - A (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years, who meet the eligibility requirements of medically indigent.
86	Full	No	MI - Confirmed Pregnancy (FFP). Covers persons aged 21 and over, with confirmed pregnancy, who meet the eligibility requirements of medically indigent.
87	Full	Yes	MI - Confirmed Pregnancy (FFP). Covers persons aged 21 and over, with confirmed pregnancy, who meet the eligibility requirements of medically indigent but are not eligible for 185 percent/200 percent or the MN programs.
88	CMSP services only no Medi-Cal	No	CMSP, MI - A/Disability Pending (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years, who meet the eligibility requirements of medically indigent and have a pending Medi-Cal disability application.
89	CMSP services only no Medi-Cal	Yes	CMSP, MI - A/Disability Pending (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years, who meet the eligibility requirements of medically indigent and have a pending Medi-Cal disability application.
9A	BCEDP only	No	The Breast Cancer Early Detection Program (BCEDP) recipient identifier. BCEDP offers benefits to uninsured and underinsured women, 40 years and older, whose household income is at or below 200 percent of the federal poverty level. BCEDP offers reimbursement for screening, diagnostic and case management services. Please note: BCEDP and Medi-Cal are separate programs, but BCEDP is using the Medi-Cal billing process (with few exceptions).

Special Indicators: These indicators, which appear in the aid code portion of the county ID number, help Medi-Cal identify the following:

IE - Ineligible: A person who is ineligible for Medi-Cal benefits in the case. An IE person may only use medical expenses to meet the SOC for other family members associated within the same case. Upon certification of the SOC, the IE individual is not eligible for Medi-Cal benefits in this case. An IE person may be eligible for Medi-Cal benefits in another case where the person is not identified as IE.

RR - Responsible Relative: A RR is allowed to use the medical expenses to meet the SOC for other family members whom he/she is responsible. Upon certification of the SOC, a RR individual is not eligible for Medi-Cal benefits in this Medi-Cal Budget Unit (MBU). The individual may be eligible for Medi-Cal benefits in another MBU where the person is not identified as RR.

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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
Advanced Report - County Data, California's Medical Assistance Program, Calendar Year 1996, Medi-Cal Program*	$10.00
California's Medical Assistance Program Annual Statistical Report, Medi-Cal Program, Calendar Year 1996*	$18.00
Catalog of Medical Care Statistics Section Publications, 1997*	Free
Medi-Cal County Program Monthly Averages, Fiscal Year 1996-97*	$2.50
Medi-Cal Expenditures for Drugs Commonly Used in the Treatment of AIDS, July-September 1997	$3.00
Medi-Cal Funded Deliveries, 1996*	$6.00
Medi-Cal Funded Induced Abortions, 1996*	$6.00
Month of Payment Summaries by County/Statewide, 1995 and 1996*	$6.00
Medi-Cal Non-Prepaid Health Plan Eligibles and Prepaid Health Plan Enrollees, by Age Group, Sex, and County, July 1997	$6.00
Medi-Cal Program Highlights, Calendar Year 1996	$5.00
Medi-Cal Studies in AIDS, No.5: Demographics and Expenditures for Persons with AIDS 1980-1994	$15.00
Persons Certified Eligible for Medi-Cal, November 1997 (Monthly Report)*	$2.00
Semi-Annual AIDS Related Expenditures Report January-June 1997*	$4.00

* Available on Internet Homepage - http://www.dhs.cahwnet.gov/stats/mcss/index.htm

Please Note: Reports are on one high density, 3.5" diskette. Tables are in Lotus 1-2-3 Release 5. Text is in WordPerfect 6.1 format.

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.

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

REPORTS AVAILABLE ON DISKETTE

	Cost
Advanced Report - County Data, California's Medical Assistance Program, Calendar Year 1996, Medi-Cal Program*	$10.00
Beneficiaries by County/Zip Code Listing: Age Category, Aid Category Group, Language , and Ethnicity, January 1997*	$10.00
California's Medical Assistance Program Annual Statistical Report, Medi-Cal Program, Calendar Years 1994, 1995 and 1996*	$18.00
Cumulative Certified CID Monthly Eligibles Report*	$10.00
Eligibles Profile by County, July 1997*	$10.00
Medi-Cal Funded Deliveries, 1994, 1995 and 1996*	$10.00
Medi-Cal Funded Induced Abortions, 1994, 1995 and 1996*	$10.00
Month of Payment Summaries by County/Statewide, 1995 and 1996*	$10.00

* Available on Internet Homepage - http://www.dhs.cahwnet.gov/stats/mcss/index.htm

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