



CALIFORNIA ELIGIBILITY AND ENROLLMENT REPORT:

INSURANCE AFFORDABILITY PROGRAMS

ASSEMBLY BILL X1 1 (J. PEREZ) CHAPTER 3, STATUTES OF 2013

For the Reporting Period
July 2016 through September 2016

Table of Contents

Introduction	4
Background	4
Summary	6
Section 1 Applications Received	8
Section 1.1 Applications Received Through CalHEERS by Submission Channel	9
Section 1.2 Applications Received Through County Human Services Agency Office by Submission Channel	10
Section 1.3 Applications Received Processed Through Other Eligibility Pathways	11
Section 1.4 Applications Filed with the Help of an Assister or Navigator	12
Section 2 Individuals Included on Applications and Applicant Demographics	13
Section 2.1 Individuals Included on Applications (CalHEERS)	14
Section 2.2 Applicant Demographics (Gender, Age).....	15
Section 2.3 Applicant Demographics (Race).....	16
Section 2.4 Applicant Demographics (Ethnicity).....	17
Section 2.5 Applicant Demographics (Written Language)	18
Section 2.6 Applicant Demographics (Spoken Language).....	19
Section 3 Eligible Individuals	20
Section 3.1 Distribution of Eligible Individuals Across Insurance Affordability Programs	21
Section 3.2 QHP Demographics of Eligible Individuals (Gender, Age)	22
Section 3.3 QHP Demographics of Eligible Individuals (Race)	23
Section 3.4 QHP Demographics of Eligible Individuals (Ethnicity)	24
Section 3.5 QHP Demographics of Eligible Individuals (Written Language)	25
Section 3.6 QHP Demographics of Eligible Individuals (Spoken Language)	26
Section 3.7 Medi-Cal Demographics of Eligible Individuals (Gender, Age)	27
Section 3.8 Medi-Cal Demographics of Eligible Individuals (Race/Ethnicity)	28
Section 3.9 Medi-Cal Demographics of Eligible Individuals (Language)	29
Section 4 Health Plan Enrollment	30
Section 4.1 Health Plan Enrollment (QHPs Selected by Covered CA Enrollees).....	31

Table of Contents, Cont'd

Section 4.2 Health Plan Enrollment (Covered CA QHP Enrollment by Rating Region)	33
Section 4.3 Health Plan Enrollment (Covered CA QHP Enrollment by Metal Tier)	34
Section 4.4 Health Plan Enrollment (Covered CA QHP Enhanced Silver Plan Enrollment)	35
Section 4.5 Health Plan Enrollment (Covered CA QHP Enrollees by FPL)	36
Section 4.6 Health Plan Enrollment (New Enrollment in Medi-Cal Managed Care Health Plans) ..	37
Section 4.7 Health Plan Enrollment (New Enrollment in COHS Health Plans)	38
Section 5 Renewals	39
Section 5.1 Medi-Cal Coverage Renewals (Individual Level).....	40
Section 6 Appeals	41
Section 6.1 Appeals (Eligibility Actions Appealed).....	42
Section 6.2 Hearing Results.....	42
Section 7 Total Enrollment in Medi-Cal and QHP	43
Section 7.1 Total Enrollment – Medi-Cal	44
Section 7.2 Change in Total Medi-Cal Enrollment by MAGI and Non-MAGI	45
Section 7.3 Net Change in Enrollment of Individuals Eligible Under MAGI Medi-Cal Aid Codes	46
Section 7.4 Net Change in Enrollment of Individuals Eligible Under Non-MAGI Medi-Cal Aid Code.	47
Section 7.5 Total Effectuated Enrollment – Covered CA QHPs	48
ERRATA	49
Appendix: Data Sources	50

INTRODUCTION

This report summarizes application, eligibility, and enrollment data covering the period from July 1, 2016, through September 30, 2016. This report responds to California Assembly Bill (AB) x1 1 (J. Perez) Chapter 3, Statutes of 2013, Welfare and Institutions (W&I) Code Section 14102.5. The W&I Code requires a quarterly reporting on eligibility and enrollment processes for California Insurance Affordability Programs (IAPs), including Medi-Cal, the Medi-Cal Access Program (MCAP), and Qualified Health Plans (QHPs) available through Covered California.

The information provided in this report is organized to represent the application and enrollment process. The data is gathered from a variety of sources in collaboration with Covered California, the Department of Health Care Services (DHCS), and the Statewide Automated Welfare System (SAWS). Applications, individuals on applications, applicant demographics, health plan enrollments, Medi-Cal coverage renewal, appeals, and enrollment in Medi-Cal and QHP are covered in this report.

BACKGROUND

The Patient Protection and Affordable Care Act (PPACA) of 2010, as amended by the Health Care and Education Reconciliation Act of 2010 (collectively referred to as the Affordable Care Act (ACA)) made numerous changes to Medi-Cal effective January 1, 2014. Final federal regulations were issued to effectuate many of these changes. One major change consolidated some of the Medi-Cal mandatory and optional groups into three new mandatory coverage groups. These new coverage groups are Parents and Other Caretaker Relatives, Pregnant Women, and Infants and Children Under Age 19.

ACA also expanded Medi-Cal in 2014 to include a new mandatory coverage group referred to as the New Adult Group. The New Adult Group is composed of individuals between the ages of 19 to 64 who are not otherwise eligible

HIGHLIGHTS JULY – SEPTEMBER 2016

- 13.5 Million Enrolled in Medi Cal
- 4,519 fewer applications
- 286,552 newly Medi Cal eligible
- 213,919 decrease in Medi Cal enrollment
- 49,300 newly eligible for QHP
- 1% decrease in QHP enrollment
- 31% of applicants were children and youth
- 37% new Medi Cal enrollees identified as Hispanic
- 20% new QHP enrollees identified as Hispanic
- 72% QHP enrollees receiving APTC/cost sharing reductions
- Over half of the subsidized QHP enrollees have household incomes at or below 200% of the FPL

for Medi-Cal in any other mandatory coverage group with income at or below 138 percent of the Federal Poverty Level (FPL).

ACA regulations define the coverage group income eligibility standards and provide that many, but not all, Medi-Cal coverage groups are to have income determined under the Modified Adjusted Gross Income (MAGI) methodology rules used by the Internal Revenue Service (IRS). MAGI applies to the four consolidated groups generally composed of adults, pregnant women, parents and other caretaker relatives, and children. Non-MAGI, pre ACA income rules continue for some groups, particularly the aged, blind, disabled, and the medically needy.

With the launch of Covered California in 2013 and the expansion of Medi-Cal in 2014, Californians have access to a range of affordable health insurance choices. Covered California is California's Health Benefit Exchange and serves as its marketplace for IAPs. Tax credits and subsidies are available to Californians, with incomes between 100 percent and 400 percent of the FPL who enroll in QHPs offered by Covered California.

The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) supports applications for enrollment submitted through CoveredCA.com and is jointly sponsored by Covered California and DHCS. CalHEERS is an enrollment portal and the "rules engine" for determining Medi-Cal and tax subsidy eligibility using MAGI eligibility rules. Consumers can apply online through the Covered CA portal to purchase affordable QHPs or determine if they qualify for MAGI Medi-Cal coverage.

Once eligibility for MAGI Medi-Cal is established by CalHEERS, the eligibility determination information is imported from CalHEERS into the SAWS through an electronic transfer, known as the Electronic Health Information Transfer (eHIT). CalHEERS is not used for the eligibility determination process for non-MAGI Medi-Cal. Final processing and/or confirmation of Medi-Cal eligibility determinations is made by county eligibility workers. The information on the final determination is sent electronically from SAWS to CalHEERS and MEDS.

For this report, CalHEERS (and in part SAWS) provides data on the number of applications, individuals on applications, and the number of individuals eligible for subsidized or unsubsidized QHPs. CalHEERS also reports the total number of individuals transitioned from Advanced Premium Tax Credit (APTC) to Medi-Cal. Data on individuals eligible for Medi-Cal, Medi-Cal Fee-for-Service (FFS), County Organized Health System (COHS), Medi-Cal Managed Care Plan (MCP), Express Lane, and Hospital Presumptive Eligibility (HPE) are from MEDS. MAXIMUS Inc., a DHCS vendor, reports MCAP applications and individuals eligible, Health Care Options enrollment, and the number of individuals who selected or were defaulted into a MCP.

SUMMARY

California application, eligibility, and enrollment data is compiled from CalHEERS, MEDS, MAXIMUS Inc., and SAWS, depending on the data element. A detailed description of each of these systems can be located in the Appendix at the end of this report. The table below provides a summary of totals derived from the different systems and represents different portions of the application, eligibility, and enrollment process. The data elements and content are referenced below the table.

- From July – September 2016, 546,195 California residents applied for IAPs; a decrease of one percent from April – June 2016.
- From July – September 2016, more than 286,500 individuals were eligible for Medi-Cal; an increase of 11 percent from April – June 2016.
- More than 49,300 California residents applied, were determined eligible, and selected QHPs offered through Covered California (Lines D+E below); a decrease of 10 percent from the prior reporting period.

	Reporting Period:		Net Change	Percent Change	
	July	September 2016			April
(A) Applications Received		546,195	550,714	(4,519)	(1)
(B) Individuals Included on Applications		915,430	973,946	(58,516)	(6)
(C) Individuals Eligible for Enrollment in a QHP through Covered CA		79,632	87,813	(8,181)	(9)
(D) Individuals, Who Selected a QHP, Subsidy Eligible		35,605	41,899	(6,294)	(15)
(E) Individuals, Who Selected a QHP, Not Subsidy Eligible		13,706	13,056	650	5
(F) Individuals Eligible for Coverage through Medi-Cal		286,552	258,075	28,477	11
(G) Individuals Eligible for Coverage through MCAP		1,568	1,700	(132)	(8)
(H) Individuals Enrolled into Medi-Cal FFS		215,848	194,062	21,786	11
(I) Individuals, Who Selected Medi-Cal MCP		52,555	46,450	6,105	13
(J) Individuals Defaulted into Medi-Cal MCP		15,393	14,098	1,295	9
(K) Individuals Enrolled into COHS		1,290	1,647	(357)	(22)

SUMMARY (CONT'D)

- (A) The total number of applications represents applications that were submitted through the following venues:
- CalHEERS + applications filed by Counties (Section 2): 454,517
 - Hospital Presumptive Eligibility (HPE): 81,681
 - Medi-Cal Access Program (MCAP) (Maximus Inc.): 2,027
 - Express Lane: 3,660
 - Transition from APTC to Medi-Cal¹ : 4,310
- (B) The number of individuals included on applications reported on (A).² Note that SAWS does not currently provide data on individuals on applications. HPE, Express Lane, APTC to Medi-Cal applications, and MCAP include one individual per application and total 91,678. The total number of individuals on applications as reported by CalHEERS is 823,752
- (C) The count of individuals eligible for enrollment in a QHP through Covered California includes all individuals who applied and were determined eligible for QHPs.
- (D) Those who are eligible for subsidized QHP coverage. Individuals, who select a plan, are not fully enrolled until they effectuate their enrollment by paying their first month's premium.
- (E) Those who are eligible for non-subsidized QHP coverage. Individuals who select a plan are not fully enrolled until they effectuate their enrollment by paying their first month's premium.
- (F) Individuals newly Medi-Cal eligible.
- (G) Individuals newly eligible for MCAP.
- (H) The count of individuals enrolled into Medi-Cal FFS may include enrollees who have yet to choose a Medi-Cal MCP or individuals who are not eligible for the full scope of Medi-Cal benefits (see Section 4).
- (I) Individuals who selected into a Medi-Cal MCP.
- (J) Individuals who defaulted into a Medi-Cal MCP.
- (K) Individuals who enrolled in County Organized Health Systems (COHS).

¹ DHCS and Covered CA facilitate the transition of individuals from APTC to Medi-Cal to avoid gaps in coverage.

² Individuals may be included in this count more than once if they submitted multiple applications.

SECTION 1 APPLICATIONS RECEIVED

Applications Received Summary

The number of applications received through CalHEERS, County Human Services Agencies, and applications received through other venues (transition APTC to Medi-Cal, Express Lane, and HPE) declined overall during this reporting period as compared to the April – June 2016 report.

Data Sources and Methods

CalHEERS reports the number of applications and whether they were submitted online, by phone, mail, e-mail, or fax (Section 1.1). Figure 1.1 and Table 1.1 do not include county initiated applications. Section 2 combines applications submitted to CalHEERS and applications initiated by County Human Service Agencies.

The SAWS provides data on the total number of applications initiated online, phone, mail, in-person, or other sources (Section 1.2). The total number of applications received by mail includes applications that were received by fax. Applications received from external referrals and applications submitted through the SAWS online portals are included in the number of online applications. In-Person applications are those received at the county office or an out-station. Applications submitted by phone may also include applications received by county call centers. Other sources of applications may include In-Home Supportive Services (IHSS) and Community-Based Organization (CBO(s)) referrals. The SAWS data does not include applications received for California Work Opportunity and Responsibility to Kids (CalWORKs) or Supplemental Security Income (SSI).

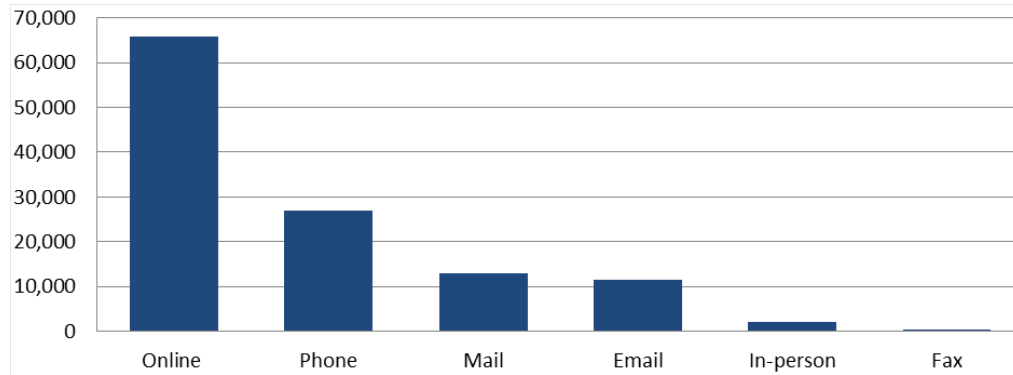
Section 1.3 includes applications processed through other eligibility pathways and includes HPE, transitions from APTC to Medi-Cal, Express Lane (ELE), and MCAP . Transitions from APTC to Medi-Cal data is reported by CalHEERS and MEDS and consists of individuals who are no longer eligible for APTC but are eligible for Medi-Cal. Another eligibility pathway is Express Lane Eligibility (ELE), which is a program that waives the need for a Medi-Cal eligibility determination for 12 months if the individual is enrolled in CalFresh. Hospital Presumptive Eligibility (HPE) applications are submitted through qualified HPE Providers. ELE and HPE data are reported by DHCS and commencing with this report, MCAP applications are reported by MAXIMUS Inc.

Applications Received with the Help of Assister or Navigator Summary

The volume of applications filed with the help of an assister or navigator, as reported by CalHEERS, decreased by 11 percent as compared to the April – June 2016 reporting period. Applications may be filed with the assistance of licensed insurance agents, brokers, or web brokers who are trained and certified. Certified Enrollment Counselors (CECs) are in-person assisters employed by Certified Enrollment Entities, including community-based organizations, faith-based organizations, school districts, and tax preparers. Covered California trains and certifies CECs. Service Center Representatives are staff members at the Covered California call center. Plan-Based Enrollers are health plan employees authorized to assist with individual marketplace enrollments. County Eligibility Workers are also available to provide assistance with filing applications.

SECTION 1.1 APPLICATIONS RECEIVED THROUGH CALHEERS BY SUBMISSION CHANNEL

**Figure 1.1. Applications Received Through CalHEERS by Submission Channel
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- Approximately 55 percent of all applications received through CalHEERS July – September 2016 were initiated online, including those filed with and without assistance.
- The proportion of applications initiated online increased by three percent from the prior reporting period.

Table 1.1. Applications Received Through CalHEERS by Submission Channel

Submission Channel	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications ³	Net Change of Applications	Percent Change of Applications
Online	65,831	55	64,269	52	1,562	2
Phone	26,913	23	31,186	25	(4,273)	(14)
Mail	13,020	11	14,477	12	(1,457)	(10)
Email	11,473	10	12,933	10	(1,460)	(11)
In-person	2,043	<1	N/A	N/A	N/A	N/A
Fax	305	<1	381	<1	(76)	(20)
Unknown ⁴	<20	<1	<20	<1	N/A	N/A
Total	119,590	N/A	123,257	N/A	(3,667)	(3)

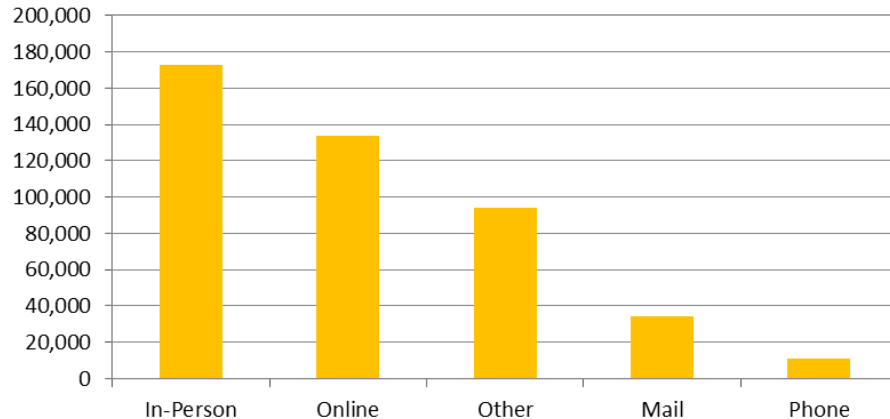
Source: CalHEERS

³ The Percent of Applications are rounded to nearest whole number.

⁴ CalHEERS is working to resolve the data defect "Unknown" submission channel.

SECTION 1.2 APPLICATIONS RECEIVED THROUGH COUNTY HUMAN SERVICES AGENCY OFFICES BY SUBMISSION CHANNEL

**Figure 1.2. Applications Received Through County Human Services Agency Offices by Submission Channel
July 1, 2016 – September 30, 2016**



Source: SAWS

- The largest share of applications were initiated in-person (39 percent), followed by online applications (30 percent).
- The percentage of applications initiated online and the percentage of in-person increased as compared to the prior reporting period.

Table 1.2. Applications Received Through County Human Services Agency Offices by Submission Channel

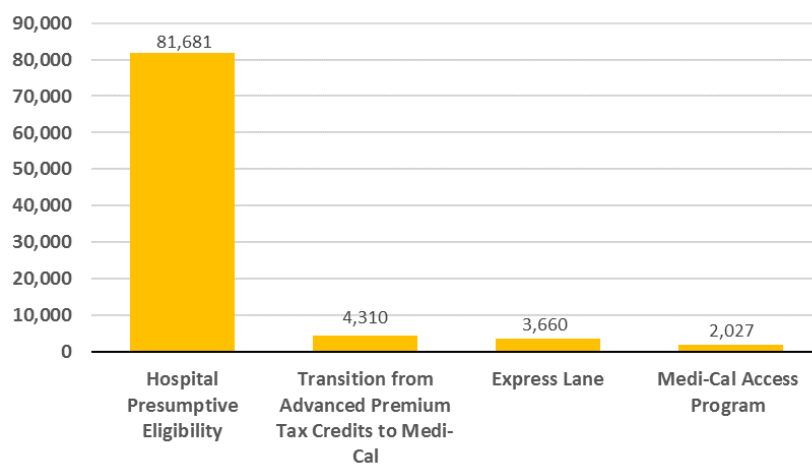
Submission Channel	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
In-Person	172,623	39	114,891	36	57,732	50
Online ⁵	133,517	30	70,882	22	62,635	88
Other	94,008	21	25,966	8	68,042	262
Mail	34,418	8	37,852	12	(3,434)	(9)
Phone	11,167	2	8,883	3	2,284	26
Unknown	N/A	N/A	46,306	15	N/A	N/A
Outreach	N/A	N/A	13,064	4	N/A	N/A
Total	445,733	N/A	317,844	N/A	127,889	40

Source: SAWS

⁵ The three online application systems are: Benefits CalWIN: www.mybenefitscalwin.org, C-4 Yourself: www.c4yourself.com, and Your Benefits Now: <https://www.dpssbenefits.lacounty.gov/ybn/Index.html>

SECTION 1.3 APPLICATIONS PROCESSED THROUGH OTHER ELIGIBILITY PATHWAYS

**Figure 1.3. Applications Processed Through Other Eligibility Pathways
July 1, 2016 – September 30, 2016**



Source: CalHEERS, MAXIMUS Inc., and MEDS

- 91,678 individuals became newly eligible to Medi-Cal through alternative channels.
- 2,027 applications for MCAP were received.
- HPE applications were the majority of applications processed through other eligibility pathways (89%).

Table 1.3. Applications Processed Through Other Eligibility Pathways

Pathway	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
HPE	81,681	89	51,778	82	29,903	58
Transition from APTC to Medi-Cal	4,310	5	5,243	8	(933)	(18)
Express Lane	3,660	4	3,489	6	171	5
MCAP	2,027	2	2,328	4	(301)	(13)
Total	91,678	N/A	62,838	N/A	28,840	46

Source: CALHEERS, MAXIMUS Inc., and MEDS

SECTION 1.4 APPLICATIONS FILED WITH THE HELP OF AN ASSISTER OR NAVIGATOR

Table 1.4. Applications Filed with the Help of an Assister or Navigator

Submission Channel	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
Agent	23,102	63	26,011	63	(2,909)	(11)
Service Center Representative	10,252	28	10,918	26	(666)	(6)
Certified Enrollment Counselor	2,474	6	2,943	7	(469)	(16)
Plan Based Enroller	597	2	1,000	3	(403)	(40)
County Eligibility Worker	445	1	556	1	(111)	(20)
Total	36,870	N/A	41,428	N/A	(4,558)	(11)

Source: CALHEERS

- The volume of applications filed with an assister or navigator decreased by approximately 11 percent.
- Approximately seven percent of applications determined eligible for Medi-Cal were filed with the help of an Agent or Certified Enrollment Counselor.

SECTION 2 INDIVIDUALS INCLUDED ON APPLICATIONS AND APPLICANT DEMOGRAPHICS

Individuals Included On Applications and Applicant Demographics Summary

This section reports the total number of individuals on applications compared to the number of applications received by reporting period and demographic data. There was an average of 1.8 individuals per application during this reporting period, as compared to 1.9 during the prior reporting period.

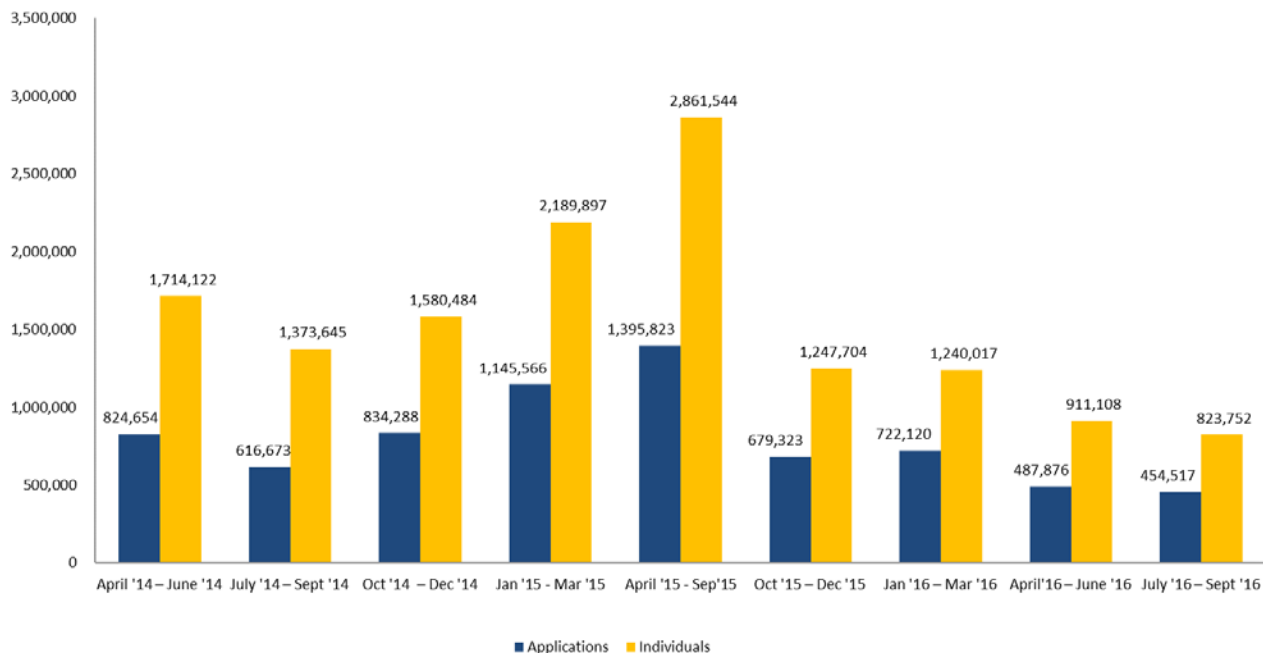
Data Sources and Methods

CalHEERS reports the number of individuals on applications and demographic data (age, gender, race, ethnicity, and written and spoken language preferences). The CalHEERS data includes applications submitted directly and those that are initiated by County Human Services Agencies through the SAWS eHIT interface. This is in contrast to the number of applications reported by CalHEERS in Section 1, where SAWS data is reported separately.

There were 89,651 applications for Transition from APTC to Medi-Cal, Express Lane, and HPE reported in Section 1. Applications for these programs include one individual per application. Application demographic data for these programs and MCAP is not available for this report.

SECTION 2.1 INDIVIDUALS INCLUDED ON CALHEERS APPLICATIONS

**Figure 2.1. Number of Applications and Individuals Included on Applications
July 1, 2016 – September 30, 2016**



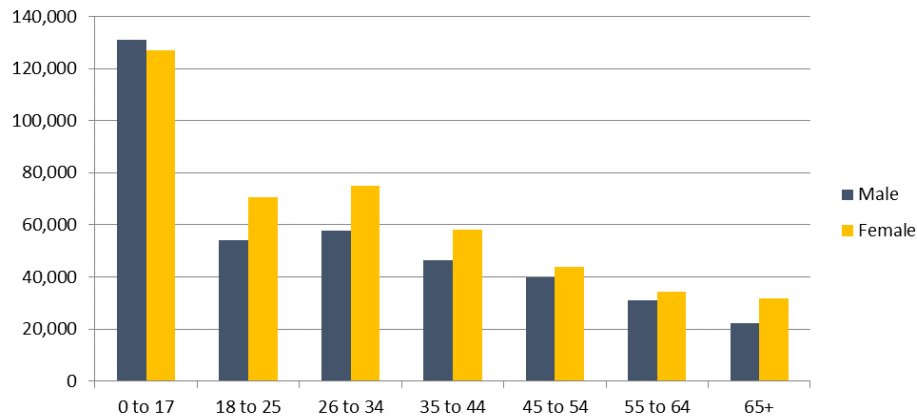
Source: CalHEERS

Note: April – September 2015 represent 6-month reporting period.

- CalHEERS reports 454,517 total applications received either directly to CalHEERS or through County Human Services Agency offices from July – September 2016. The total represents a portion of the total number (A) Applications Received reported in the Summary on page 6 and does not include HPE, Express Lane, and Transition from APTC to Medi-Cal applications.
- Approximately 30,000 fewer applications were submitted July – September 2016, as compared to April – June 2016.
- Applications during this reporting period reflect special enrollments due to qualifying life events (such as the loss of job-based coverage or the birth of a child). Applications for Medi-Cal coverage are accepted throughout the year.

SECTION 2.2 APPLICANT DEMOGRAPHICS (GENDER, AGE)

**Figure 2.2. Age and Gender of Applicants
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- 257,896 children (ages 0 to 17) and 124,730 young adults (ages 18 to 25) applied for health insurance through CalHEERS or through County Human Services Agency Offices.
- Children (ages 0 to 17) and adults (ages 26 to 34) continue to represent the largest share of applicants received through CalHEERS or through County Human Services Agency Offices during this and the prior reporting periods.

Table 2.2. Age and Gender of Applicants

Age, Gender ⁶	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Prior Reporting Period and Current Reporting Period	
	Number of Individuals	Percent of Individuals ⁷	Number of Individuals	Percent of Individuals	Net Change of Individuals	Percent Change of Individuals
0 to 17	257,896	31	295,234	32	(37,338)	(13)
18 to 25	124,730	15	133,567	15	(8,837)	(7)
26 to 34	132,970	16	141,537	16	(8,567)	(6)
35-44	104,678	13	117,538	13	(12,860)	(11)
45 to 54	83,784	10	92,101	10	(8,317)	(9)
55 to 64	65,560	8	72,279	8	(6,719)	(9)
65+	54,134	7	57,938	6	(3,804)	(7)
Male	382,728	46	423,156	46	(40,428)	(10)
Female	441,024	54	487,038	54	(46,014)	(9)

Source: CalHEERS

⁶ The number of "unknown" within the age and gender data results in a discrepancy between these totals and the number of individuals reported in Figure 2.2. CalHEERS is resolving this defect.

⁷ The Percent of Individuals are rounded to nearest whole number.

SECTION 2.3 APPLICANT DEMOGRAPHICS (RACE)

**Table 2.3. Race of Applicants Included on Applications
(of Those Who Reported Race)**

Race	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Prior Reporting Period and Current Reporting Period	
	Number of Individual Applicants by Race	Percent of Individual Applicants by Race ⁸	Number of Individual Applicants by Race	Percent of Individual Applicants by Race	Net Change of Individuals Applicants by Race	Percent Change of Individuals Applicants by Race
White	241,702	55	281,501	57	(39,799)	(14)
Black or African American	63,167	14	68,276	14	(5,109)	(7)
Other	39,712	9	44,952	9	(5,240)	(12)
Filipino	17,662	4	18,041	4	(379)	(2)
Chinese	16,918	4	17,231	3	(313)	(2)
Mixed Race	13,856	3	16,570	3	(2,714)	(16)
Vietnamese	13,392	3	13,240	3	152	1
Other Asian	8,212	2	8,412	2	(200)	(2)
Asian Indian	8,120	2	7,994	2	126	2
Korean	5,747	1	5,566	1	181	(3)
American Indian and/or Alaska Native	5,185	1	5,694	1	(509)	(9)
Other Pacific Islander	1,690	<1	2,797	1	(1,107)	(40)
Samoan	1,388	<1	1,275	<1	113	9
Japanese	1,267	<1	1,264	<1	3	0
Native Hawaiian	788	<1	820	<1	(32)	(4)
Guamanian or Chamorro	402	<1	432	<1	(30)	(7)
Not Reported	384,544	N/A	417,043	N/A	(32,499)	(8)
Total	823,752	N/A	911,108	N/A	(87,356)	(10)

Source: CalHEERS

- More than half of applicants applying through CalHEERS or the counties indicated their race, and the distribution of racial groups was similar to prior reporting period.

⁸ The percent of Individuals are rounded to nearest whole number. Percentages are calculated as a proportion of the total enrollees, who reported their language.

SECTION 2.4 APPLICANT DEMOGRAPHICS (ETHNICITY)

**Table 2.4. Ethnicity of Applicants Included on Applications
(of Those Who Reported Race)**

Ethnicity	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity ⁹	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity	Net Change of Individual Applicants by Ethnicity	Percent Change of Individual Applicants by Ethnicity
Hispanic – ethnic origin not reported	191,635	23	307,891	34	(116,256)	(38)
Hispanic – ethnic origin reported	224,170	27	173,937	19	50,233	29
Mexican/Mexican American/Chicano	123,677	55	107,420	62	16,257	15
Other	97,316	43	63,557	37	33,759	53
Puerto Rican	1,476	1	1,396	1	80	6
Mixed Ethnicity	897	<1	918	1	(21)	(2)
Cuban	804	<1	646	<1	158	24
Not Hispanic	372,765	45	388,707	43	(15,942)	(4)
Ethnicity not reported	35,182	4	40,573	4	(5,391)	(13)
Total	823,752	N/A	911,108	N/A	(87,356)	(10)

Source: CalHEERS

- Approximately 96 percent of applicants reported their specific ethnicity. Among those who reported being Hispanic, 54 percent reported their specific ethnic origin.
- 53 percent of those reporting their specific ethnicity in the second quarter of 2016 identified as Hispanic, similar to 55 percent in the prior reporting period.¹⁰

⁹ The percent of Individuals are rounded to nearest whole number.

¹⁰ Total count of individuals, who reported being Hispanic is divided by the number of individuals, who reported ethnicity.

SECTION 2.5 APPLICANT DEMOGRAPHICS (WRITTEN LANGUAGE)

**Table 2.5. Primary Written Language of Applicants Included on Applications
(of Those Who Reported a Primary Written Language)**

Primary Language	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applicants by Language	Percent of Applicants by Language ¹¹	Number of Applicants by Language	Percent of Applicants by Language	Net Change of Applicants by Language	Percent Change of Applicants by Language
English	487,378	69	520,893	67	(33,515)	(6)
Spanish	198,227	28	240,394	31	(42,167)	(18)
Traditional Chinese Character	5,774	1	4,616	1	1,158	(25)
Vietnamese	4,516	1	4,775	1	(259)	(5)
Korean	2,094	<1	2,250	<1	(156)	(7)
Russian	983	<1	951	<1	32	3
Farsi	962	<1	793	<1	169	21
Arabic	942	<1	857	<1	85	10
Tagalog	789	<1	827	<1	(38)	(5)
Armenian	654	<1	941	<1	(287)	(30)
Mandarin	244	<1	294	<1	(50)	(17)
Cambodian	193	<1	202	<1	(9)	(4)
Hmong	161	<1	173	<1	(12)	(7)
Cantonese	73	<1	84	<1	(11)	(13)
Not Reported	120,762	N/A	133,058	N/A	(12,296)	(9)
Total	823,752	N/A	911,108	N/A	(87,356)	(10)

Source: CalHEERS

- The share of CalHEERS applicants whose primary written language is Spanish (28 percent) decreased as compared to English (69 percent), which increased from the prior reporting period.

¹¹ The percent of Applicants are rounded to nearest whole number. Percentages are calculated as proportion of the total enrollees, who reported their language.

SECTION 2.6 APPLICANT DEMOGRAPHICS (SPOKEN LANGUAGE)

**Table 2.6. Primary Spoken Language of Applicants Included on Applications
(of Those Who Reported a Spoken Language)**

Primary Language	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applicants by Language	Percent of Applicants by Language ¹²	Number of Applicants by Language	Percent of Applicants by Language	Net Change of Applicants by Language	Percent Change of Applicants by Language
English	538,440	67	571,409	64	(32,969)	(6)
Spanish	235,587	29	288,387	32	(52,800)	(18)
Vietnamese	7,993	1	7,921	1	72	1
Cantonese	3,982	<1	4,298	<1	(316)	(7)
Armenian	3,422	<1	3,244	<1	178	5
Arabic	3,299	<1	2,444	<1	855	35
Mandarin	2,926	<1	3,275	<1	(349)	(11)
Korean	2,674	<1	2,658	<1	16	1
Tagalog	2,372	<1	2,240	<1	132	6
Russian	2,235	<1	2,164	<1	71	3
Farsi	2,115	<1	1,904	<1	211	11
Hmong	792	<1	889	<1	(97)	(11)
Cambodian	678	<1	733	<1	(55)	(8)
Not Reported	17,237	N/A	19,542	N/A	(2,305)	(12)
Total	823,752	N/A	911,108	N/A	(87,356)	(10)

Source: CalHEERS

- The share of CalHEERS applicants whose primary spoken language is Spanish (29 percent) decreased from the previous reporting period. The share of applicants whose primary spoken language is English (67 percent) increased from the prior reporting period (64 percent).

¹² The percent of Applicants are rounded to nearest whole number.

SECTION 3 ELIGIBLE INDIVIDUALS

Eligible Individuals and Demographics Summary

The number of individuals newly eligible for Medi-Cal increased and QHPs decreased from the prior reporting period. The number of individuals eligible for MCAP decreased by eight percent, while the volume of Medi-Cal eligible increased by 11 percent and QHP decreased by 15 percent.

The demographic data indicates that individuals ages 26 to 34 represent 27 percent of those who selected a QHP, while this same age group is 14 percent of the Medi-Cal eligibles.

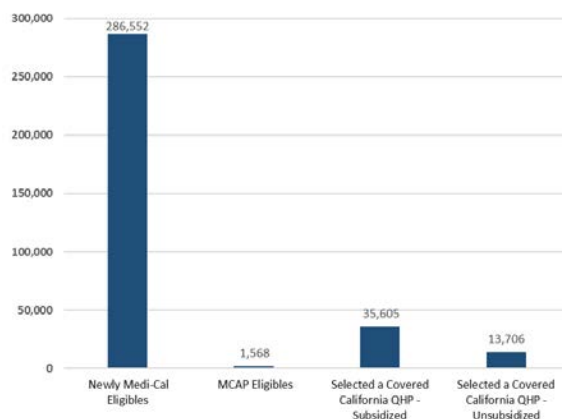
Data Sources and Methods

CalHEERS reports demographic data for individuals who are enrolled and selected a QHP. The demographic data includes age, gender, race, ethnicity, and primary language. Demographic data does not include individuals found eligible for a QHP who have not paid their first premium. Subsidized QHP coverage includes enrollees with APTC and/or cost-sharing reductions. The Medi-Cal eligible data, except MCAP, is derived from MEDS and includes age, gender, race/ethnicity, and primary written and spoken language of enrollees.

Medi-Cal eligible data may include individuals who are eligible for Medi-Cal as a result of their receipt of CalWORKs or eligibility determination for SSI. The total number of Medi-Cal eligible represents individuals who were not enrolled in the previous quarter. MCAP eligibility totals are reported by MAXIMUS Inc., a DHCS vendor.

SECTION 3.1 DISTRIBUTION OF ELIGIBLE INDIVIDUALS ACROSS INSURANCE AFFORDABILITY PROGRAMS

**Figure 3.1. Distribution of Eligible Individuals Across Insurance Affordability Programs
July 1, 2016 – September 30, 2016**



Source: CalHEERS, MEDS and MAXIMUS Inc.

- Overall, 96 percent of eligible individuals were eligible for Medi-Cal, MCAP, or subsidized QHPs and comparable to the prior reporting period. The remaining four percent qualified for unsubsidized QHPs; and
- The 72 percent of individuals determined eligible for QHPs who selected a plan and qualified for subsidies is a smaller share than the 76 percent eligible for subsidies in the previous reporting period.

Table 3.1. Distribution of Eligible Individuals Across Insurance Affordability Programs

Program Eligibility	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals ¹³	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
New Medi-Cal Eligibles	286,552	85	258,075	82	28,477	11
MCAP Eligibles	1,568	<1	1,700	1	(132)	(8)
Selected a Covered California QHP - Subsidized ¹⁴	35,605	11	41,899	13	(6,294)	(15)
Selected a Covered California QHP - Unsubsidized	13,706	4	13,056	4	650	5
Total	337,431	N/A	314,730	N/A	22,701	7

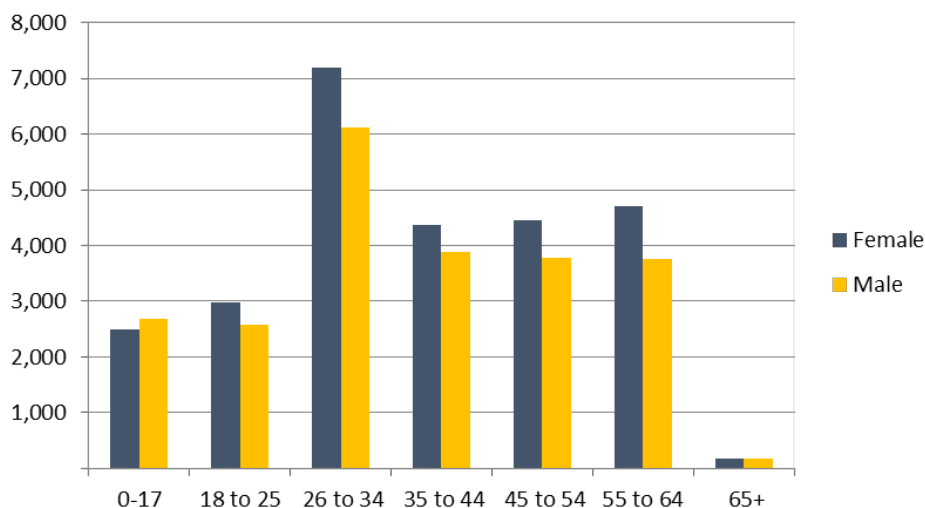
Source: CalHEERS, MEDS and MAXIMUS Inc.

¹³ The percent of Individuals are rounded to nearest whole number.

¹⁴ For subsidized and unsubsidized QHPs, "eligible individuals," refers to eligible individuals who selected a QHP.

SECTION 3.2 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

**Figure 3.2. Age and Gender of Eligible Individuals Selecting a QHP
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- About 5,100 children and youth (ages 0 to 17) and over 5,500 young adults (ages 18 to 25) were determined eligible for QHP and selected a plan in the reporting period.
- Individuals ages 26 to 34 represent the age group with the largest share of individuals who selected a QHP.

Table 3.2. Age and Gender of Eligible Individuals Selecting a QHP

Age, Gender	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals ¹⁵	Percent of Eligible Individuals ¹⁶	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
0 to 17	5,172	10	4,889	9	283	6
18 to 25	5,546	11	6,626	12	(1,080)	(16)
26 to 34	13,326	27	13,847	25	(521)	(4)
35 to 44	8,261	17	9,052	17	(791)	(9)
45 to 54	8,248	17	9,701	18	(1,453)	(15)
55 to 64	8,464	17	10,243	19	(1,779)	(17)
65+	346	1	363	1	(17)	(5)
Male	22,985	47	25,957	47	(2,972)	(11)
Female	26,378	53	28,764	53	(2,386)	(8)

Source: CalHEERS

¹⁵ The discrepancy between these totals and the number of individuals selecting a QHP is due to a CalHEERS defect.

¹⁶ The percent of Individuals are rounded to nearest whole number.

SECTION 3.3 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE)

**Table 3.3. Race of Eligible Individuals Selecting a QHP
(of Those Who Reported Race)**

Race	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ¹⁷	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Net Change of Eligible Individuals by Race	Percent Change of Eligible Individuals by Race
White	14,628	56	15,586	57	(958)	(6)
Other	2,205	9	2,330	9	(125)	(5)
Chinese	2,103	8	2,091	8	12	1
Mixed Race	1,243	5	1,266	5	(23)	(2)
Filipino	1,050	4	1,180	4	(130)	(11)
Asian Indian	1,008	4	925	3	83	9
Vietnamese	977	4	1,114	4	(137)	(12)
Black or African American	954	4	1,062	4	(108)	(10)
Korean	714	3	683	3	31	5
Other Asian	520	2	467	2	53	11
Japanese	199	1	205	1	(6)	(3)
American Indian and/or Alaska Native	193	1	205	1	(12)	(6)
Other Pacific Islander	60	<1	58	<1	2	3
Samoan	<20	<1	<20	<1	N/A	N/A
Guamanian or Chamorro	<20	<1	<20	<1	N/A	N/A
Native Hawaiian	<20	<1	<20	<1	N/A	N/A
Not Reported	23,471	N/A	27,878	N/A	(4,407)	(16)
Total	49,363	N/A	55,088	N/A	(5,725)	(10)

Source: CalHEERS

- Approximately 52 percent of QHP eligible individuals indicated their race. Applicants are not required to indicate their race.
- The racial distribution of QHP eligible individuals is comparable to the racial distribution of individuals who applied through CalHEERS (Section 2.3), including those found eligible for Medi-Cal.

¹⁷ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

SECTION 3.4 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (ETHNICITY)

**Table 3.4. Ethnicity of Eligible Individuals Selecting a QHP
(of Those Who Reported an Ethnicity)**

Ethnicity ¹⁸	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity ¹⁹	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity	Net Change of Eligible Individuals by Ethnicity	Percent Change of Eligible Individuals by Ethnicity
Hispanic – ethnic origin reported	5,636	11	6,417	12	(781)	(12)
Mexican/Mexican American/Chicano	4,137	73	4,828	75	(691)	(14)
Other	1,222	22	1,270	20	(48)	(4)
Mixed Ethnicity	124	2	123	2	1	1
Puerto Rican	97	2	139	2	(42)	(30)
Cuban	56	1	57	1	(1)	(2)
Hispanic – ethnic origin not reported	811	2	1,009	2	(198)	(20)
Not Hispanic	25,335	51	25,913	47	(578)	(2)
Ethnicity not reported	17,581	36	21,749	39	(4,168)	(19)
Total	49,363	N/A	55,088	N/A	(5,725)	(10)

Source: CalHEERS

- A total of 31,782 QHP eligible individuals (64 percent) reported their ethnicity. Of those individuals, 20 percent identified as Hispanic. Among all CalHEERS applicants during the reporting period, including those found eligible for Medi-Cal, 53 percent identified as Hispanic (Section 2.4).
- Among eligible individuals who selected a QHP and reported being Hispanic, 87 percent reported their specific ethnic origin. Eligible individuals are not required to indicate their ethnicity or ethnic origin.

¹⁸ Applicants through CalHEERS have the opportunity to report their ethnicity as Hispanic or not Hispanic. Those, who report being Hispanic, are asked a follow-up question regarding their ethnic origin. “Eligible individuals,” refers to eligible individuals, who also selected a QHP.

¹⁹ Percentages of sub-categories of Hispanic-ethnic origin reported are derived from Hispanic-ethnic origin reported. Percentages are calculated as a proportion of the total enrollees, who reported their ethnicity and rounded to nearest whole number.

SECTION 3.5 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (WRITTEN LANGUAGE)

**Table 3.5. Primary Written Language of Eligible Individuals Selecting a QHP
(of Those Who Reported a Primary Written Language)**

Primary Written Language	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²⁰	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	39,916	91	43,708	91	(3,792)	(9)
Spanish	2,107	5	2,663	6	(556)	(21)
Traditional Chinese character	689	2	778	2	(89)	(11)
Korean	288	1	296	<1	(8)	(3)
Vietnamese	254	1	339	1	(85)	(25)
Mandarin	84	<1	116	<1	(32)	(28)
Russian	35	<1	34	<1	1	3
Farsi	24	<1	<20	<1	N/A	N/A
Cantonese	20	<1	<20	<1	N/A	N/A
Tagalog	<20	<1	20	<1	N/A	N/A
Arabic	<20	<1	20	<1	N/A	N/A
Armenian	<20	<1	<20	<1	N/A	N/A
Cambodian	<20	<1	<20	<1	N/A	N/A
Hmong	<20	<1	<20	<1	N/A	N/A
Not Reported	5,897	N/A	7,073	N/A	(1,176)	(17)
Total ²¹	49,363	N/A	55,079	N/A	(5,716)	(10)

Source: CalHEERS

- A majority of eligible individuals, who selected QHPs, indicated English as their primary written language (91 percent), with notable groups preferring written communication in Spanish (five percent) or traditional Chinese characters (two percent).
- English language preference is more prevalent among eligible individuals who selected a QHP, as compared to the overall pool of CalHEERS applicants.

²⁰ Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

²¹ This is the actual total without the de-identified data (HIPAA Privacy Rule, 45 CFR 164.514(a)).

SECTION 3.6 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (SPOKEN LANGUAGE)

**Table 3.6. Primary Spoken Language of Eligible Individuals Selecting a QHP
(of Those Who Reported a Primary Spoken Language)**

Primary Spoken Language	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²²	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	39,924	91	43,444	90	(3,520)	(8)
Spanish	2,208	5	2,771	6	(563)	(20)
Mandarin	647	1	767	2	(120)	(16)
Cantonese	402	1	481	1	(79)	(16)
Korean	320	1	305	1	15	5
Vietnamese	316	1	426	1	(110)	(26)
Russian	62	<1	49	<1	13	27
Tagalog	44	<1	48	<1	(4)	(8)
Farsi	43	<1	32	<1	11	34
Armenian	32	<1	<20	<1	N/A	N/A
Arabic	23	<1	32	<1	(9)	(28)
Cambodian	<20	<1	<20	<1	N/A	N/A
Hmong	<20	<1	<20	<1	N/A	N/A
Not Reported	5,327	N/A	6,714	N/A	(1,387)	(21)
Total ²³	49,363	N/A	55,081	N/A	(5,718)	(10)

Source: CalHEERS

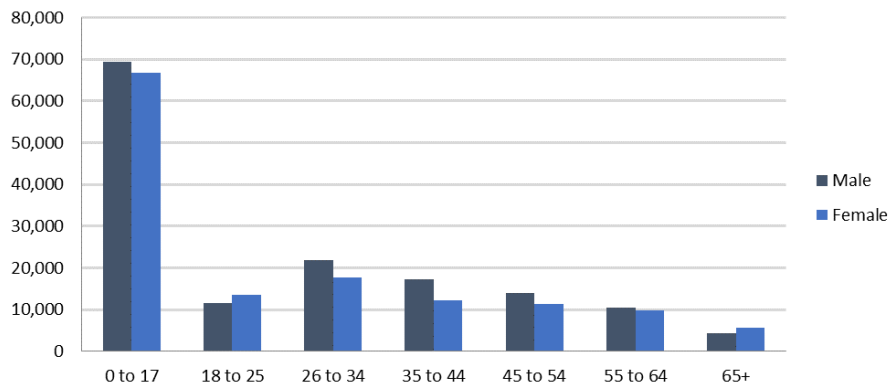
- A majority of eligible individuals who selected QHPs indicated English as their primary spoken language (91 percent), followed by Spanish at five percent and Mandarin at one percent.
- English language preference was more dominant among eligible individuals who selected a QHP, as compared to the overall pool of applicants received through CalHEERS. Of the CalHEERS applicants, including those found eligible for Medi-Cal, 67 percent preferred English and 29 percent preferred Spanish for spoken communication (Section 2.6).

²² Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

²³ This is the actual total without the de-identified data (HIPAA Privacy Rule, 45 CFR 164.514(a)).

SECTION 3.7 MEDICAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

**Figure 3.7. Age and Gender of Individuals Eligible for Medi-Cal
July 1, 2016 – September 30, 2016**



Source: MEDS

- Approximately 136,000 children and youth (ages 0 to 17) and about 25,000 young adults (ages 18 to 25) were determined eligible for Medi-Cal coverage.
- The largest share of individuals eligible for Medi-Cal were ages of 0 to 17, comparable to previous reporting periods.

Table 3.7. Age and Gender of Individuals Eligible for Medi-Cal

Age, Gender ²⁴	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals ²⁵	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
0 to 17	136,259	47	111,105	43	25,154	23
18 to 25	25,088	9	23,520	9	1,568	7
26 to 34	39,652	14	37,303	14	2,349	6
35 to 44	29,612	10	28,430	11	1,182	4
45 to 54	25,411	9	25,518	10	(107)	<1
55 to 64	20,328	7	21,363	8	(1,035)	(5)
65+	10,201	4	10,836	4	(635)	(6)
Male	149,163	52	135,962	53	13,201	10
Female	137,388	48	122,113	47	15,275	13

Source: MEDS

²⁴ The difference in gender totals for the current reporting period is due to individuals who were newly eligible for Medi-Cal in the reporting period without a record of gender choice.

²⁵ The Percentage of Eligible Individuals is rounded to nearest whole number.

SECTION 3.8 MEDI-CAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE/ETHNICITY)

**Table 3.8. Race/Ethnicity of Individuals
(of Those Who Reported Race/Ethnicity) Eligible for Medi-Cal**

Race	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ²⁶	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Net Change of Eligible Individuals by Race	Percent Change of Eligible Individuals by Race
Hispanic	66,948	37	62,750	36	4,198	7
White	46,991	26	44,794	26	2,197	5
Other	19,237	10	17,525	10	1,712	10
Asian or Pacific Islander	13,081	7	12,245	7	836	7
African American/Black	12,832	7	11,562	7	1,270	11
Chinese	6,311	3	6,258	4	53	1
Filipino	5,317	3	5,017	3	300	6
Vietnamese	4,544	2	4,679	3	(135)	(3)
Asian Indian	2,723	1	2,705	2	18	1
Korean	1,825	1	1,629	1	196	12
Alaskan Native or American Indian	690	<1	663	<1	27	4
Japanese	366	<1	394	<1	(28)	(7)
Cambodian	352	<1	315	<1	37	12
Samoan	289	<1	299	<1	(10)	(3)
Laotian	254	<1	305	<1	(51)	(17)
Hawaiian	186	<1	165	<1	21	13
Guamanian	74	<1	107	<1	(33)	(31)
Armenian	<20	N/A	23	<1	(5)	(22)
Unknown	1,250	N/A	1,732	N/A	(482)	(28)
Not Reported	103,264	N/A	84,908	N/A	18,356	22
Total	286,552	N/A	258,075	N/A	28,477	11

Source: MEDS

- Approximately 182,038 individuals determined eligible for Medi-Cal during July – September 2016 indicated their race/ethnicity.
- 37 percent of the individuals who reported race/ethnicity identified as Hispanic, followed by White at 26 percent, and seven percent reported African American/Black. Among all CalHEERS applicants, 53 percent identified as Hispanic.

²⁶ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

SECTION 3.9 MEDICAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (LANGUAGE)

**Table 3.9. Primary Language of Individuals
(Of Those Who Reported a Primary Language) Eligible for Medi-Cal**

Primary Language	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²⁷	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	176,340	63	160,980	63	15,360	10
Spanish	83,995	30	72,505	29	11,490	16
Vietnamese	3,483	1	3,456	1	27	1
Mandarin	2,481	1	2,498	1	(17)	(1)
Cantonese	2,306	1	2,487	1	(181)	(7)
Arabic	2,264	1	1,443	1	821	57
Other Non- English	1,804	1	1,444	1	360	25
Armenian	1,301	<1	1,108	<1	193	17
Russian	1,082	<1	882	<1	200	23
Farsi	1,075	<1	893	<1	182	20
Korean	997	<1	876	<1	121	14
Tagalog	913	<1	893	<1	20	2
Other Chinese Languages	398	<1	420	<1	(22)	(5)
Hmong	233	<1	172	<1	61	35
Cambodian	151	<1	162	<1	(11)	(7)
Portuguese	112	<1	133	<1	(21)	(16)
Lao	78	<1	73	<1	5	7
French	71	<1	54	<1	17	31
Thai	59	<1	51	<1	8	16
Japanese	51	<1	44	<1	7	16
Samoan	42	<1	40	<1	2	5
Other Sign Language	33	<1	24	<1	9	38
American Sign Language (ASL)	30	<1	44	<1	(14)	(32)
Turkish	27	<1	24	<1	N/A	N/A
Ilocano	<20	<1	<20	<1	N/A	N/A
Mien	<20	<1	<20	<1	N/A	N/A
Italian	<20	<1	<20	<1	N/A	N/A
Hebrew	<20	<1	<20	<1	N/A	N/A
Polish	<20	<1	<20	<1	N/A	N/A
Unknown	2,338	<1	2,860	<1	(522)	(18)
Not Reported	4,832	N/A	4,466	N/A	366	8
Total	286,552	N/A	258,075	N/A	28,477	11

Source: MEDS

²⁷ Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

SECTION 4 HEALTH PLAN ENROLLMENT

QHP Plan Selection Summary

Plan selection data are presented for individuals eligible for QHPs through Covered California. QHP applicants are not fully enrolled until they submit their first premium payment.

Section 4.3 reports the minimum coverage under the unsubsidized coverage subheading and refers to subsidy-eligible individuals who select minimum coverage plans, forgoing their subsidized coverage. In prior reports, this group was combined with individuals not eligible for subsidies and chose minimum coverage plans.

The data reported for the Enhanced Silver Plan in Section 4.4 identifies the number of individuals with limited income who qualify for lower out-of-pocket costs. There are four levels of Silver Plans: Silver 70, Silver 73, Silver 84, and Silver 94.

Medi-Cal Health Plan Enrollment Summary

Medi-Cal beneficiaries are enrolled in either a contracted Medi-Cal MCP or FFS. Beneficiaries in 35 counties have a choice between two or more MCPs and beneficiaries in one county have the choice of a MCP or FFS.²⁸ For beneficiaries in these counties who do not select their MCP within 30–45 days, and after repeated efforts (a letter, followed by two phone calls) to encourage choice, the State will identify individuals' claims and data to make a default selection into a plan based on known sources of care, including previous providers and utilization history. There were 215, 848 Medi-Cal beneficiaries in FFS for this reporting period.

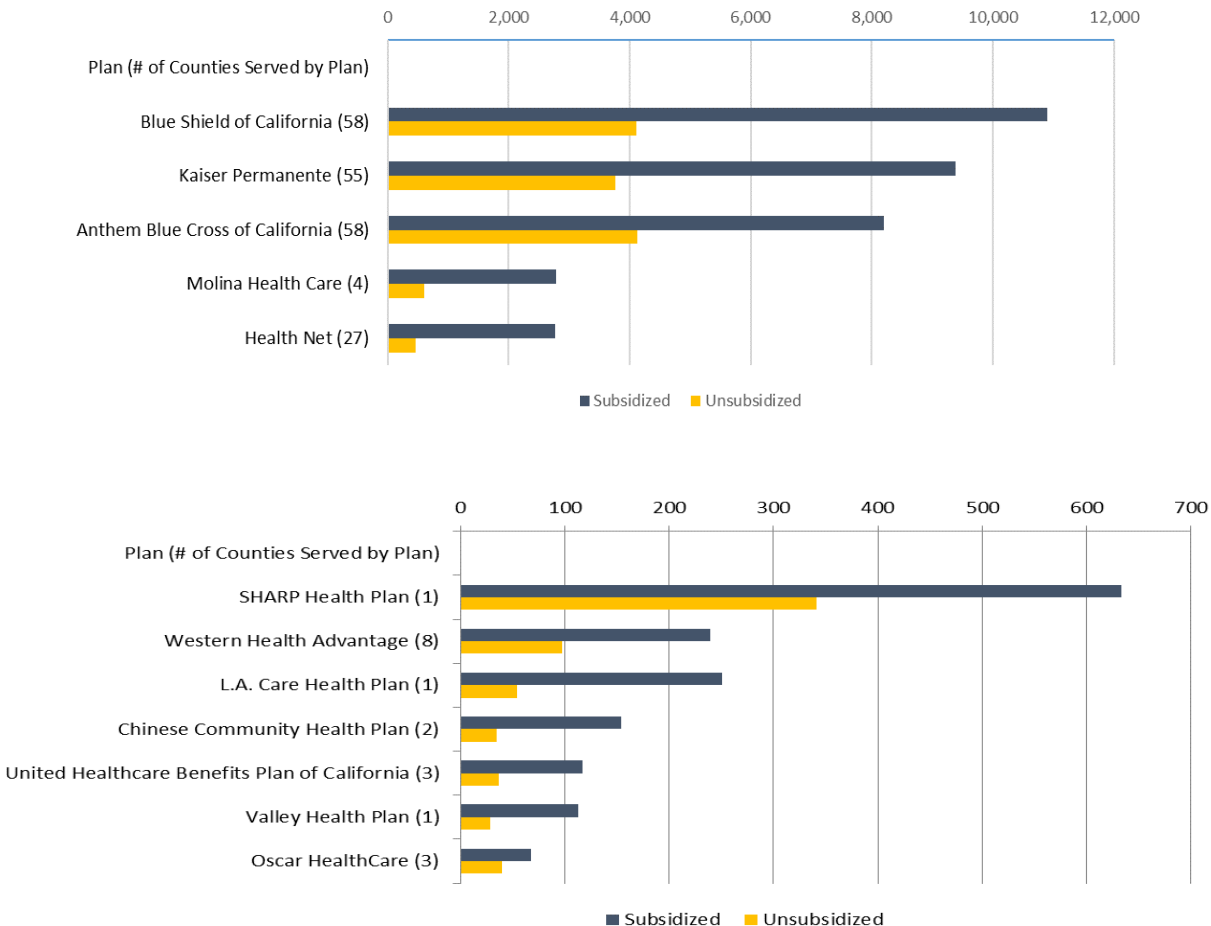
Enrollment data for new enrollees in COHS plans are also presented. Each COHS is a non-profit, independent public agency which contracts with Medi-Cal to administer benefits through local care providers. Beneficiaries in [the six COHS plans, found in 22 counties](#), do not have other health plans to choose from. Federal regulation limits the collective maximum beneficiary enrollment in COHS plans to 10 percent of the Medi-Cal population.

There are several factors that contribute to the difference in the count of individuals eligible for Medi-Cal and the count enrolled in Medi-Cal health plans and fee-for-service: (1) individuals who were newly eligible in the reporting quarter and enrolled into a Medi-Cal health plan without record of whether the enrollment was a selection or a default, (2) enrollees who could be enrolled into a Medi-Cal health plan, but who had not made a choice or been defaulted as of the end of the reporting period, and (3) individuals who lost eligibility before enrollment into a health plan.

²⁸ See a description of Medi-Cal's managed care models here - <http://www.dhcs.ca.gov/provgovpart/Documents/MMCDModelFactSheet.pdf>

SECTION 4.1 HEALTH PLAN ENROLLMENT (QHP SELECTED BY COVERED CA ENROLLEES)

**Figure 4.1. QHPs Selected by Covered California Enrollees
July 1, 2016 – September 30, 2016**



Source: CalHEERS

Note: These figures represent health plans selected by individuals eligible for QHPs; individuals are not fully enrolled until they submit their first premium payment.

- The number of eligible individuals who selected a QHP decreased during this reporting period, relative to the prior reporting period.
- Blue Shield of California and Kaiser Permanente were the most frequently selected QHPs.
- Generally, individuals with and without subsidy eligibility made similar health plan selections.

SECTION 4.1 HEALTH PLAN ENROLLMENT (QHPS SELECTED BY COVERED CA ENROLLEES (CONT'D))

Table 4.1. QHPs Selected by Covered California Enrollees

Health Plan (Number of Counties)	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals ²⁹	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Blue Shield of California (58)	15,012	30	17,113	31	(2,101)	(12)
Kaiser Permanente (55)	13,136	27	13,746	25	(610)	(4)
Anthem Blue Cross of California (58)	12,328	25	14,079	26	(1,751)	(12)
Molina Healthcare (4)	3,384	7	3,901	7	(517)	(13)
Health Net (27)	3,242	7	3,698	7	(456)	(12)
SHARP Health Plan (1)	974	2	1,107	2	(133)	(12)
Western Health Advantage (8)	337	1	314	1	23	7
L.A. Care Health Plan (1)	305	1	337	1	(32)	(9)
Chinese Community Health Plan (2)	189	<1	273	<1	(84)	(31)
United Healthcare Benefits Plan of California (3)	154	<1	86	<1	68	79
Valley Health Plan (1)	142	<1	148	<1	(6)	(4)
Oscar Healthcare (2)	108	<1	153	<1	45	(29)
Total	49,311	N/A	54,955	N/A	(5,644)	(10)

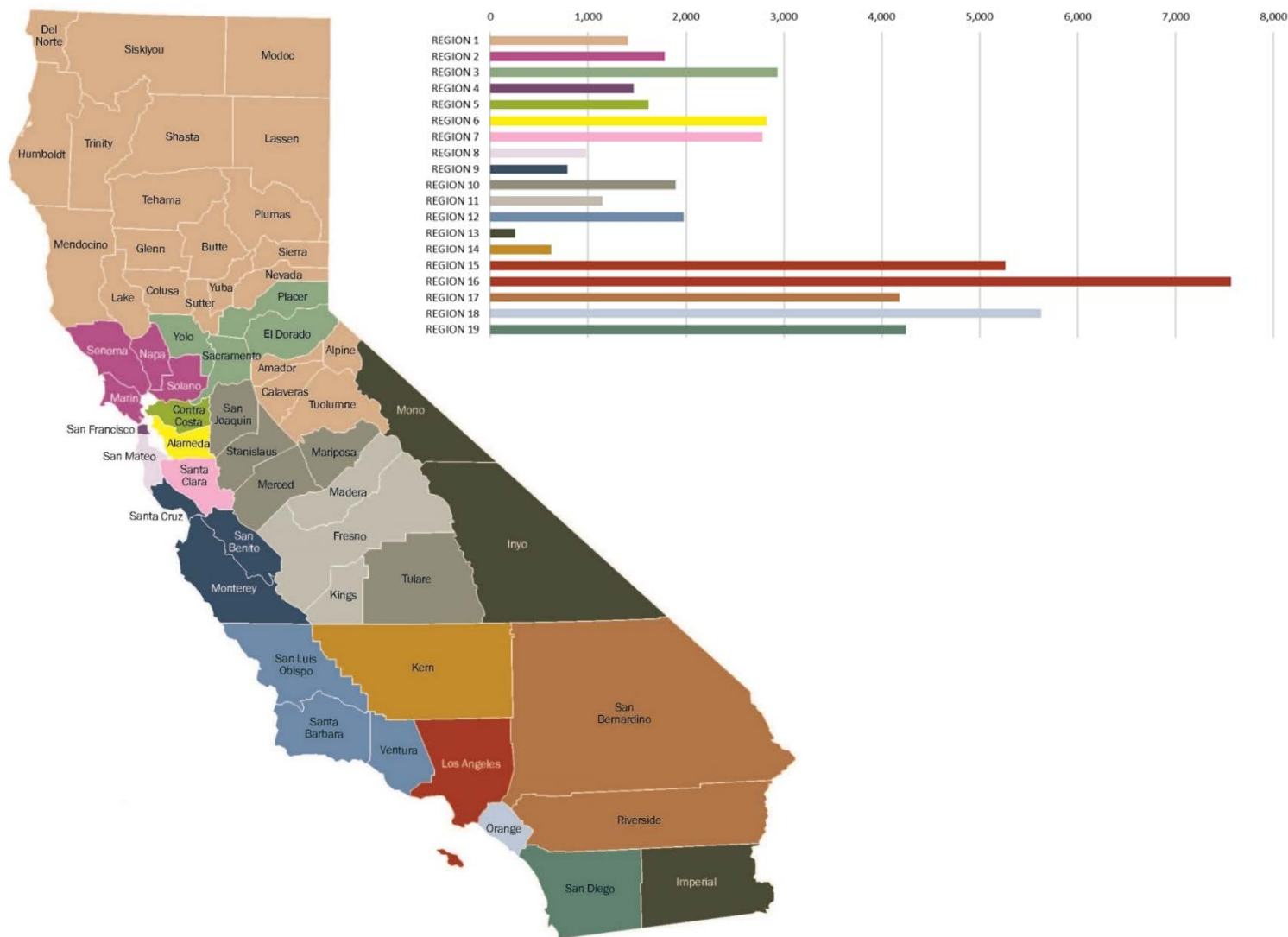
Source: CalHEERS

Note: "Eligible individuals" refers to eligible individuals, who selected a QHP.

²⁹ CalHEERS is resolving the data defect "Unknown" in Health Plan Enrollment variables.

SECTION 4.2 HEALTH PLAN ENROLLMENT (COVERED CA QHP ENROLLMENT BY RATING REGION)

**Figure 4.2. Covered California QHP Enrollment by Rating Region
July 1, 2016 – September 30, 2016**

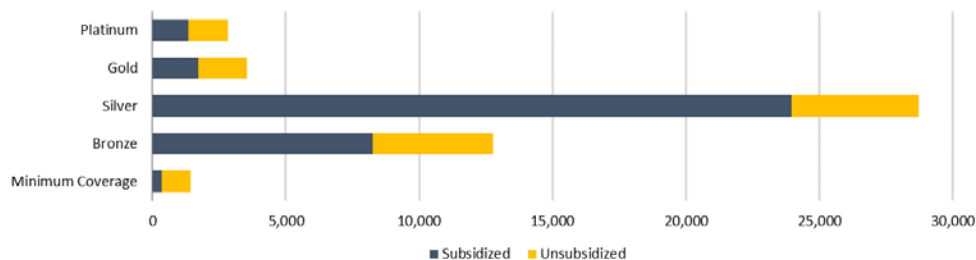


Source: CalHEERS

Note: Los Angeles County includes both regions 15 and 16. A list of the counties and plans included in each rating region is available online at <http://hbex.coveredca.com/data-research/2014-Open-Enrollment-Data-Book/regions-counties-plans.pdf>.

SECTION 4.3 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA QHP ENROLLMENT BY METAL TIER)

**Figure 4.3. Covered California QHP Enrollment by Metal Tier
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- Silver plans remained the most frequently selected among subsidized enrollees. Also, 23 percent selected bronze plans, same as from prior reporting period.
- Among unsubsidized enrollees, silver and bronze plans continued to be the most frequently selected (68 percent). More eligible individuals selected gold or platinum plans (24 percent) and fewer individuals selected minimum coverage (eight percent) as compared to the prior reporting periods.

Table 4.3. Covered California QHP Enrollment by Metal Tier

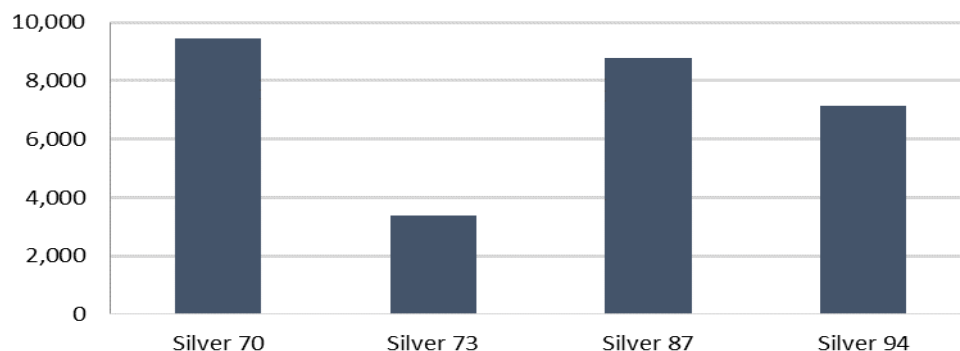
Program Eligibility	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals ³⁰	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Subsidized Coverage						
Platinum	1,350	4	1,538	4	(188)	(12)
Gold	1,705	5	1,991	5	(286)	(14)
Silver	23,949	67	28,533	68	(4,584)	(16)
Bronze	8,251	23	9,508	23	(1,257)	(13)
Minimum Coverage	350	1	329	1	21	6
Total	35,605	N/A	41,899	N/A	(6,294)	(15)
Unsubsidized Coverage						
Platinum	1,473	11	1,603	12	(130)	(8)
Gold	1,842	13	1,779	14	63	4
Silver	4,787	35	4,724	36	63	1
Bronze	4,513	33	4,061	31	452	11
Minimum Coverage	1,091	8	889	7	202	23
Total	13,706	N/A	13,056	N/A	650	5

Source: CalHEERS

³⁰ CalHEERS is resolving the data defect "Unknown" in Health Plan Enrollment variables.

SECTION 4.4 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA ENHANCED SILVER PLAN ENROLLMENT)

**Figure 4.4. Covered California Enhanced Silver Plan Enrollment
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- The Enhanced Silver plans are for individuals with limited income who qualify for lower out-of-pocket costs.
- Silver 70 was the most frequently selected among enrollees. 25 percent selected Silver 94 plans same as to the prior reporting period.

Table 4.4. Covered California Enhanced Silver Plan Enrollment

Program Eligibility	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Silver 70 (Not Enhanced Silver Plan) ³¹	9,459	33	10,027	30	(568)	(6)
Silver 73	3,382	12	4,084	12	(702)	(17)
Silver 87	8,773	31	10,881	33	(2,108)	(19)
Silver 94	7,136	25	8,328	25	(1,192)	(14)
Total	28,750	N/A	33,320	N/A	(4,570)	(14)

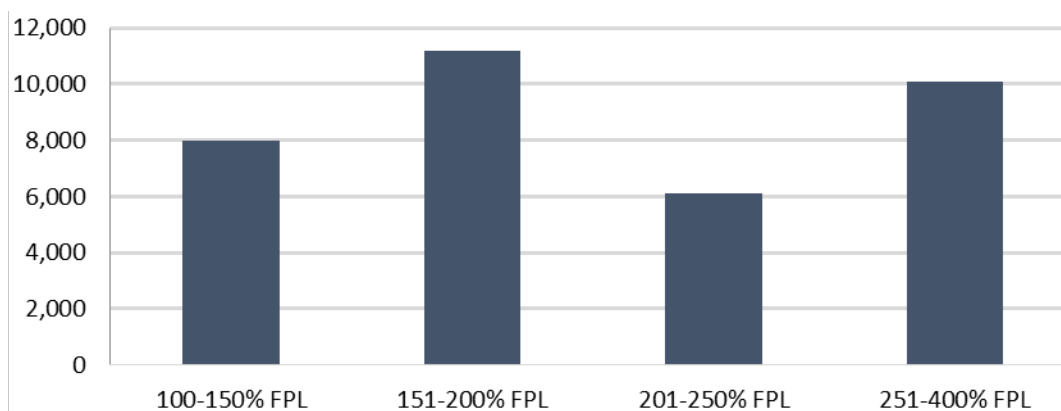
Source: CalHEERS

Note: The percent of Eligible Individuals are rounded to nearest whole number.

³¹ Silver 70 is the basic silver metal tier plan that does not get cost-sharing reductions.

SECTION 4.5 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA QHP ENROLLEES BY FPL)

**Figure 4.5. Covered California Subsidized QHP Enrollees by FPL
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- 31 percent of subsidized QHP enrollees have household income between 151 to 200 percent FPL, a decrease from the prior reporting period.

Table 4.5. Covered California Subsidized QHP Enrollees by FPL

Percentage FPL ³²	Reporting Period: July September 2016		Prior Reporting Period: April June 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percentage of Eligible Individuals	Number of Eligible Individuals	Percentage of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
100 to 150 % FPL	7,969	22	9,437	23	(1,468)	(16)
151 to 200 % FPL	11,179	31	13,782	33	(2,603)	(19)
201 to 250 % FPL	6,125	17	7,261	17	(1,136)	(16)
251 to 400 % FPL	10,073	28	11,090	26	(1,017)	(9)
Other ³³	259	1	329	1	(70)	(21)
Total	35,605	N/A	41,899	N/A	(6,294)	(15)

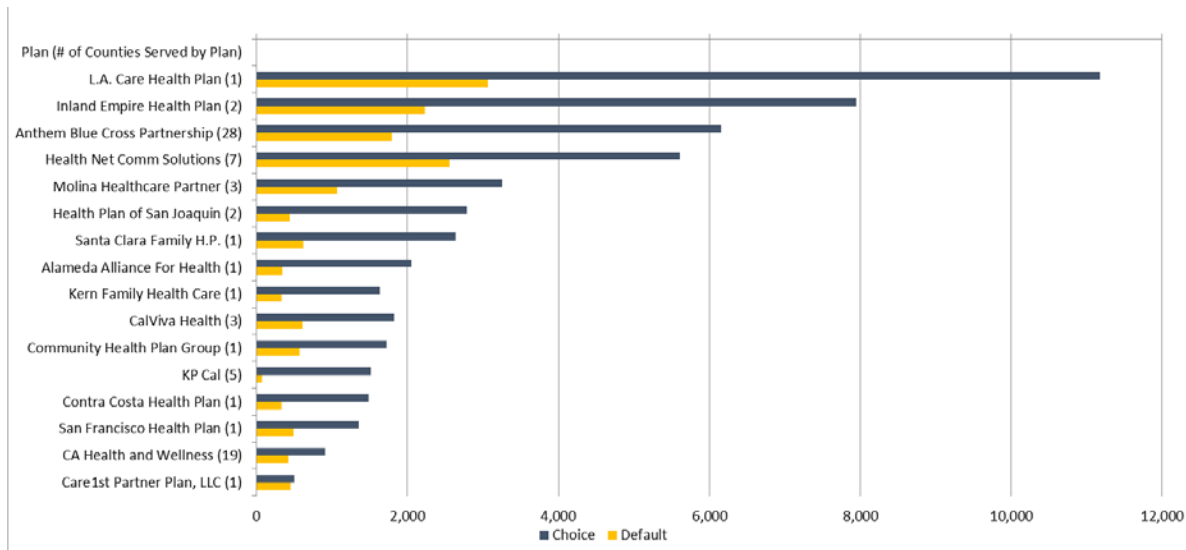
Source: CalHEERS

³² "Eligible individuals," refers to eligible individuals, who selected a QHP.

³³ Other includes American Indian/Alaska Native individuals, who qualify for subsidies regardless of FPL and individuals with incomes below 100 percent FPL, who are not eligible for Medi-Cal.

SECTION 4.6 HEALTH PLAN ENROLLMENT (NEW ENROLLMENT IN MEDI-CAL MANAGED CARE HEALTH PLANS)

**Figure 4.6. New Enrollment in Medi-Cal Managed Care Health Plans
July 1, 2016 – September 30, 2016**



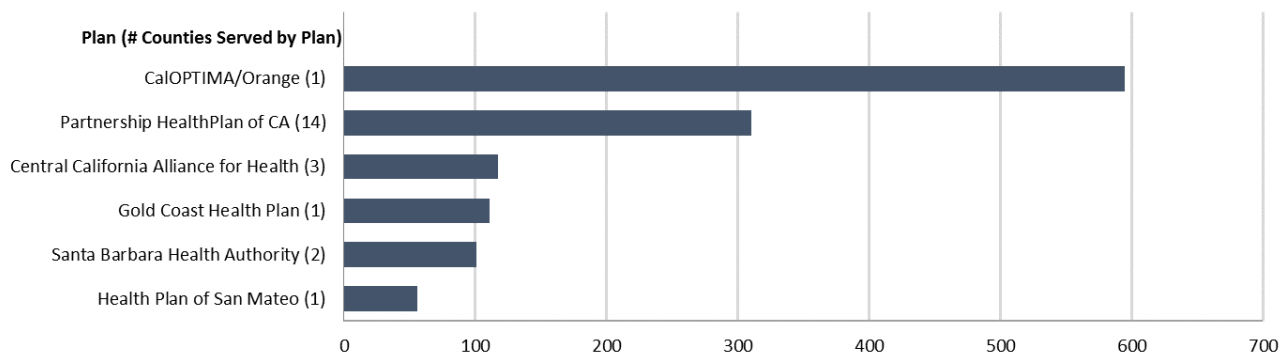
Source: Health Care Options

Note: Individuals who were enrolled in COHS or FFS are not reflected in the chart above.

- Medi-Cal beneficiaries are enrolled in either a contracted MCP or in FFS Medi-Cal.
- Beneficiaries in 35 counties have a choice between two or more MCPs, provided they select a plan within a specified time period. Beneficiaries in one county have the choice of a MCP or FFS:
 - Of the newly eligible Medi-Cal beneficiaries in these counties, approximately 52,500 chose and were enrolled in a MCP during the reporting period; while approximately another 15,300 did not select a MCP and were therefore enrolled by default into a MCP in their county; the chart above presents both Choice and Default MCP counts.
 - Approximately 1,400 eligible beneficiaries enrolled during the reporting period without record of whether the enrollment was a selection or a default.

SECTION 4.7 HEALTH PLAN ENROLLMENT (NEW ENROLLMENT IN COHS HEALTH PLANS)

**Figure 4.7. New Enrollment in COHS Health Plans
July 1, 2016 – September 30, 2016**



Source: MEDS

- From July 2016 – September 2016, just over 1,200 new Medi-Cal enrollees were enrolled in COHS health plans.

SECTION 5 RENEWALS

Annual Renewals Summary

Medi-Cal beneficiaries must renew their eligibility each year to keep their health care benefits. If Medi-Cal is not renewed by the required deadline and eligibility is discontinued, beneficiaries have 90 days to request reinstatement of benefits and provide information needed to continue coverage. This section reports the number of renewals due for the reporting period, how many renewals were processed, and the outcome of the determination (continued Medi-Cal or discontinued). Data on Covered California QHP renewals is not included in this report.

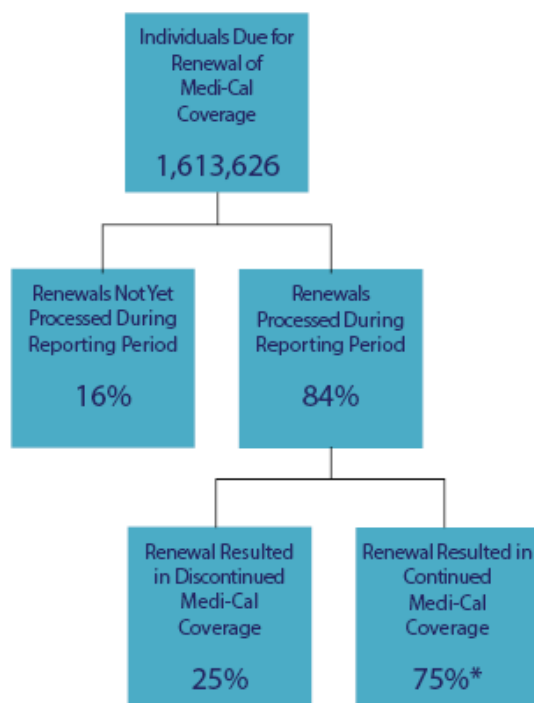
Data Sources and Methods

Medi-Cal renewals data is reported by the SAWS (CalWIN, LRS, and C-IV) for individuals, whereas prior reports included case renewals (which may consist of more than one individual). Renewal metrics are not reported for individuals who receive Medi-Cal as a result of their eligibility for cash aid programs, such as CalWORKS, Social Security Income, Foster Care or Adoption Assistance.

The number of renewals processed indicates that all of the necessary data entries were made and the eligibility determination is complete. Renewals not processed includes individual renewals not yet complete in the system.

SECTION 5.1 MEDI-CAL COVERAGE RENEWALS (INDIVIDUAL LEVEL)

Figure 5.1. Medi-Cal Coverage Renewals (Individual Level)
July 1, 2016 –September 30, 2016



*Less than 1% of renewals were due to individuals reinstated during the 90-day period following discontinuance of coverage.

Source: SAWS

- For Medi-Cal individuals renewals³⁴ due³⁵ July – September 2016, 84 percent were processed³⁶ and 75 percent³⁷ of those resulted in continued Medi-Cal coverage.

³⁴ Medi-Cal Renewals data includes renewals for individuals who applied prior to the ACA first open enrollment period in 2013.

³⁵ SAWS reports processing activities performed up to and including the month in which the Medi-Cal renewal is due.

³⁶ "Processed" reflects cases for which all necessary data entries were made and the case was coded correctly in the system to reflect a fully processed renewal, including cases that transition to Covered CA.

³⁷ The percent are rounded to nearest whole number.

SECTION 6 APPEALS

Appeals Summary

Covered California and Medi-Cal eligibility appeals are processed and adjudicated by Administrative Law Judges at the California Department of Social Services (CDSS). CDSS administers and tracks hearings and appeals. A hearing is a method whereby a household member may obtain an impartial review of an eligibility action or inaction.

Data Sources and Methods

CDSS provides data regarding the reasons for the appeal and whether the grievance is with Covered California, Medi-Cal, or both. CDSS gathers and tracks denial of coverage, eligibility determination, and discontinuance appeal reasons. The appeals that involve both programs are for applications that have individuals who received eligibility determinations for the two programs (e.g., parents were eligible for Covered California and the children were eligible for Medi-Cal). The number of MCAP eligibility appeals filed is not included in this report. DHCS is in the process of compiling this appeal information for future reports.

SECTION 6.1 APPEALS (ELIGIBILITY ACTIONS APPEALED)

Table 6.1. Eligibility Actions Appealed

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	1,444	189	458
Covered California & Medi-Cal	550	521	337
Medi-Cal	675	212	1,062
Total During July – September 2016	2,669	922	1,857
Prior Reporting Period April – June 2016	4,034	1,344	1,350
Net Change	(1,365)	(422)	507
Percent Change	(34)	(31)	38

Source: CDSS

- Between July and September 2016, a total of 5,448 appeals were filed by Covered California and Medi-Cal applicants or beneficiaries.
- Of these, 49 percent were appeals regarding denials of eligibility, 17 percent were regarding eligibility determinations, and 34 percent were regarding discontinuances from existing coverage.

Table 6.2. Hearing Results

Program	Granted	Granted in Part	Denial of Appeal	Withdrawals/Dismissals
Covered California QHPs	391	83	173	526
Covered California and Medi-Cal	274	186	61	303
Medi-Cal	258	28	44	391
Total During July – September 2016	923	297	278	1,220
Prior Reporting Period April – June 2016	974	341	243	1,206
Net Change	(51)	(44)	35	14
Percent Change	(5)	(13)	14	1

Source: CDSS

- Between July and September 2016, 45 percent of appeals were granted or granted in part and 10 percent were denied. The remaining 45 percent were withdrawn or dismissed.

SECTION 7 TOTAL ENROLLMENT IN MEDI-CAL AND QHP

Total Enrollment Summary

The total Medi-Cal enrollment for this reporting period decreased as compared to the prior reporting period. As of September 2016, there were 13,412,543 Medi-Cal enrollees, and the total enrollment as of June 2016 was 13,626,462, a decrease of 213,919. Changes in Medi-Cal enrollment represent the addition of newly eligible beneficiaries, the renewal of coverage for existing beneficiaries, and the departure of beneficiaries who lose eligibility or exit the program.

Enrollment totals for MAGI and non-MAGI indicate an increase in the number of MAGI determinations, and a decrease in non-MAGI eligibility determinations. Non-MAGI, pre ACA Medi-Cal programs will continue for some groups, particularly the aged, blind, disabled, and the medically needy groups

Total Enrollment Data Sources and Methods

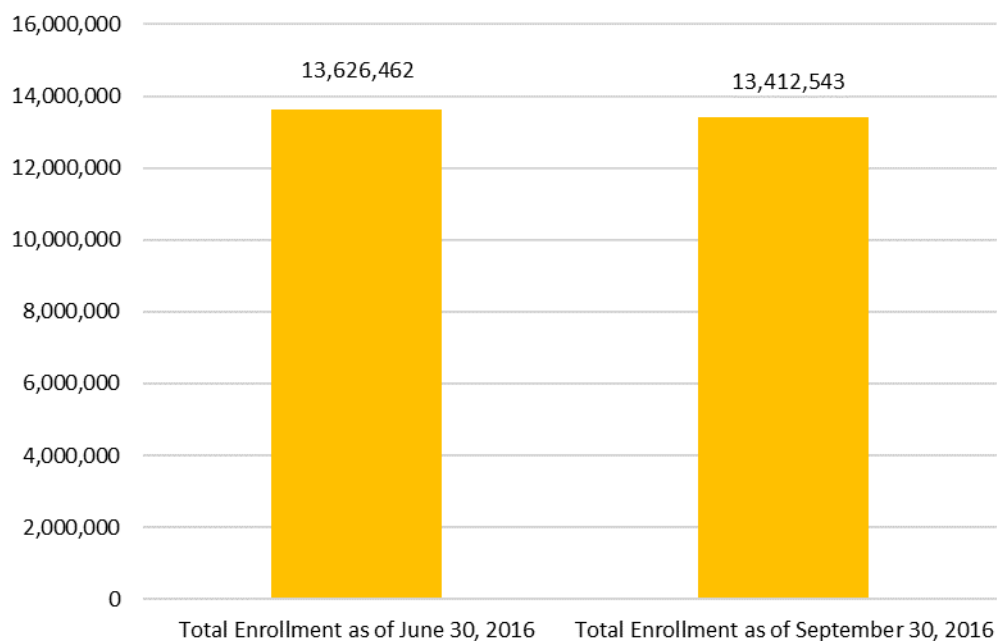
Data presented in this section draw from data analytics conducted by DHCS' Research and Analytic Studies Division (RASD), which compiles official statistics and performs analytic studies. Enrollment data in this reporting period is compared to the prior reporting period in order to derive the net change in total enrollment. The net change in total enrollment methodology is the difference between the total enrollment of the last month in the prior reporting period and the last month of the current reporting period.

Total enrollment does not include Medi-Cal enrollees in state and county inmate programs. The Pregnant Women category does not include pregnant women who were enrolled through MCAP. Enrollment data includes individuals eligible for Medi-Cal as a result of their receipt of CalWORKs, Supplemental Security Income (SSI), and Foster Care payment programs.

Changes in total QHP enrollment during this reporting period are reported based on effectuated enrollment reported by CalHEERS. Enrollment is considered effectuated when an individual pays the first month's premium for coverage. The count includes individuals who effectuated their enrollment and had an active policy at the time the enrollment report was compiled.

SECTION 7.1 TOTAL ENROLLMENT (MEDI-CAL)

**Figure 7.1. Total Medi-Cal Enrollment
June 30, 2016 – September 30, 2016**

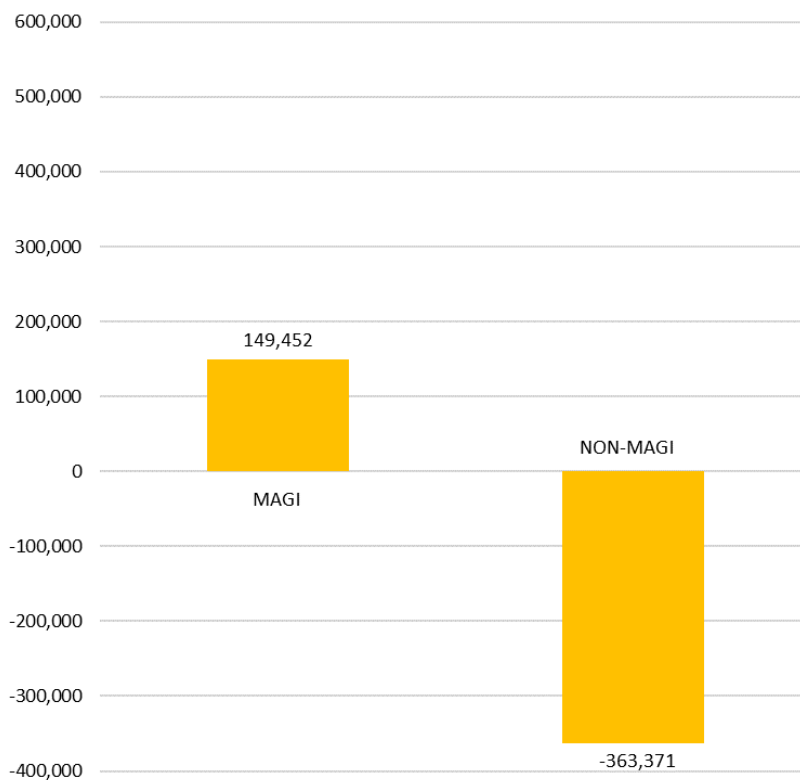


Source: Analysis by DHCS –RASD

- The total enrollment as of September 2016 decreased by 213,919 from the prior reporting period. This change in enrollment reflects both new enrollments and dis-enrollments as individuals lose eligibility or exit the program.

SECTION 7.2 TOTAL ENROLLMENT (MEDI-CAL)

**Figure 7.2. Total Medi-Cal Enrollment by MAGI and Non-MAGI
June 30, 2016 - September 30, 2016**



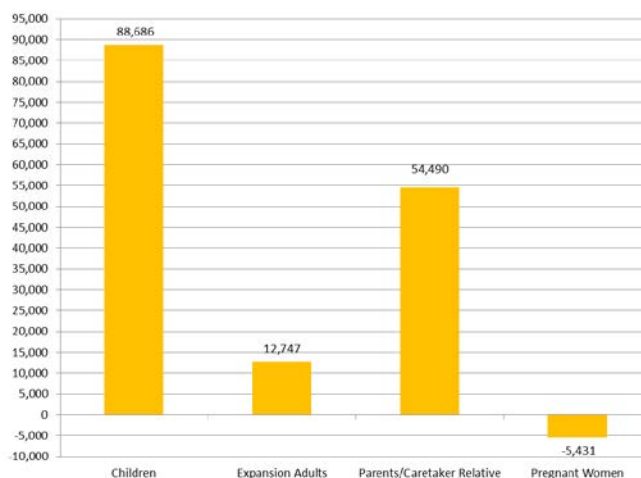
Source: Analysis by DHCS –RASD

- The number of individuals enrolled in MAGI Medi-Cal increased by 149,452 between June 30, 2016 and September 30, 2016.³⁸
- Conversely, enrollment under non-MAGI aid codes dropped by 363,371 during this same period. A summary of non-MAGI enrollment by category is shown on Section 7.4.

³⁸ June MAGI enrollment has been updated by DHCS - RASD and differs from the total reported in the prior report.

SECTION 7.3 NET CHANGE IN MAGI ENROLLMENT (MEDI-CAL)

**Figure 7.3. MAGI Medi-Cal Enrollment
June 30, 2016 – September 30, 2016**



Source: Analysis by DHCS-RASD

- During this reporting period, the number of individuals eligible under MAGI aid codes increased by about 150,492³⁹. This number includes individuals transitioning from non-MAGI or pre-ACA aid codes to MAGI aid codes at annual redetermination, as well as individuals new to Medi-Cal, who enrolled during the reporting period.
- Children represent 59 percent of the increase. The next largest group is expansion adults at 8 percent.

**Table 7.3. MAGI Medi-Cal Enrollment
June 30, 2016 – September 30, 2016**

Program Eligibility	Reporting Period: June September 2016		Prior Reporting Period: March June 2016	
	Change in Number of Eligible Individuals	Percent of Eligible Individuals	Change in Number of Eligible Individuals	Percent of Eligible Individuals
Children	88,686	59	177,006	48
Expansion Adults	12,747	8	96,272	26
Parents/Caretaker Relatives	54,490	36	93,496	26
Pregnant Women	(5,431)	(4)	(734)	<1
Total	150,492	N/A	366,040	N/A

Source: Analysis by DHCS-RASD

³⁹ This total does not include State and County inmate MAGI programs. Those Medi-Cal populations decreased by 1,040, which if included would reduce the total to 149,452.

SECTION 7.4 NET CHANGE IN NON-MAGI ENROLLMENT (MEDI-CAL)

**Figure 7.4. Non-MAGI Medi-Cal Enrollment
June 30, 2016 – September 30, 2016**



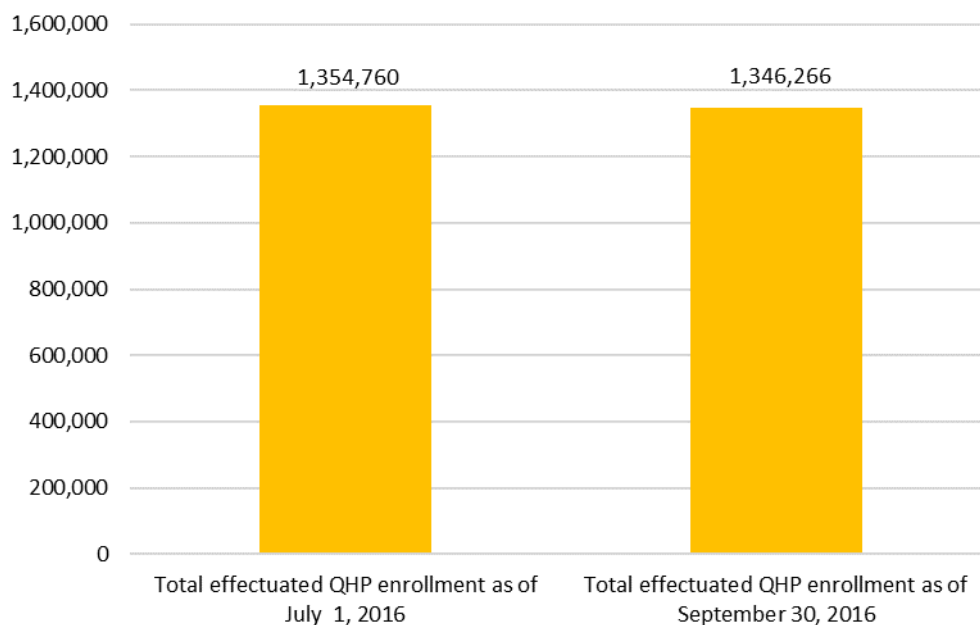
Source: Analysis by DHCS-RASD

Note: "Other Non-MAGI groups" includes Child Health and Disability Prevention Program, Continuing Eligibility, Hospital PE, Adoption/Foster Care/ Former Foster Care, Transitional Medi-Cal and Percent Programs. LIHP refers to the Low Income Health Program.

- Between June 30, 2016 and September 30, 2016, the number of individuals eligible in non-MAGI programs decreased by 363,371.
- A decrease in non-MAGI, pre-ACA populations in programs now subject to MAGI rules (such as pregnant women, parents and other caretaker relatives, and children), indicates a trend away from non-MAGI eligibility determinations. For a comparison of these populations, refer to the Net Change in Enrollment of Individuals Eligible Under MAGI Medi-Cal Aid Codes on the previous page.

SECTION 7.5 TOTAL EFFECTUATED ENROLLMENT (COVERED CA QHPs)

**Figure 7.5. Total Effectuated QHP Enrollment
July 1, 2016 – September 30, 2016**



Source: CalHEERS

- Comparing data for July 1, 2016, and September 30, 2016, total effectuated QHP enrollment decreased by one percent, or 8,494 individuals. This net change in effectuated QHP enrollment reflects both new enrollments and dis-enrollments as individuals exit QHP.
- Individuals effectuate their Covered CA QHP enrollment by paying their first month's premium. The counts include individuals, who effectuated their QHP enrollment and had an active policy at the time the report was compiled.

ERRATA & NOTES

- The ABX1 1 Quarter 2 April to June 2016 report indicated a significant increase in the number of children enrolled in MAGI Medi-Cal programs. This increase was due to annual Medi-Cal renewal processing and the implementation of SB-75 (Full Scope for All Children May 2016) that transitioned children from pre-ACA programs to MAGI programs.
- There was an error in the Eligibility Actions Appealed data for the January 2016 – March 2016 report. The tables below represent the corrected information for Page 43 of the 2016 Q1 report and page 42 of 2016 Q2 report.

**Table 6.1. Eligibility Actions Appealed
January 1, 2016 – March 30, 2016**

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	2,886	404	477
Covered California & Medi-Cal	1,473	563	171
Medi-Cal	1,078	530	142
Total During January – March 2016	5,437	1,497	790
Prior Reporting Period October – December 2016	3,248	708	563

Source: CDSS

**Table 6.1. Eligibility Actions Appealed
April 1, 2016 – June 30, 2016**

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	2,230	280	555
Covered California & Medi-Cal	872	515	221
Medi-Cal	932	549	574
Total During April – June 2016	4,034	1,344	1,350
Prior Reporting Period January – March 2016	5,437	1,497	790
Net Change	(1,403)	(153)	560
Percent Change	(26)	(10)	71

Source: CDSS

APPENDIX: DATA SOURCES

The following data sources were used to produce this report. Additional details on the data sources and methods used to produce specific figures are presented at the beginning of each section in this report.

- **CalHEERS** is the online platform, which runs the single-streamlined application for Medi-Cal, as well as Covered California's QHP enrollments. Medi-Cal eligibility on the basis of Modified Adjusted Gross Income (MAGI) is initially determined through the CalHEERS rules engine.
- The **Medi-Cal Eligibility Data System (MEDS)** stores vital and confidential beneficiary information such as Medi-Cal eligibility and demographics. Each month MEDS is updated with information, which indicates whether a beneficiary is eligible for Medi-Cal, the scope of Medi-Cal benefits (full-scope or restricted/limited scope), if the person is enrolled in a Medi-Cal Managed Care Plan (MCP), or the status of a person's share-of-cost and whether or not it has been met.
- The **Statewide Automated Welfare System (SAWS)** are the county-based systems used to determine non-MAGI Medi-Cal eligibility and conduct ongoing case management for MAGI and non-MAGI Medi-Cal, California Work Opportunity and Responsibility to Kids [(CalWORKs) (cash assistance for needy families)], CalFresh (California's Supplemental Nutrition Assistance Program), and other programs. SAWS are comprised of the following three eligibility determination systems developed by three separate county consortia:
 - ❖ CalWORKs Information Network (CalWIN), which supports 18 counties;
 - ❖ Consortium IV (C-IV), which supports 39 counties; and
 - ❖ LEADER Replacement System (LRS), which supports Los Angeles County.
- **MAXIMUS Inc.**, in partnership with DHCS, provides application and enrollment data for Medi-Cal health plans, Health Care Options, and the MCAP.
- The **California Department of Social Services (CDSS)** reports appeals data for Covered California and Medi-Cal that are processed and adjudicated by Administrative Law Judges and staff at CDSS.